Eugenic Sterilization in California in the 1920s and 30s: The Human Betterment Foundation’s Study on the Effects of Sterilization

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April 2, 2012
Intro

In 1899, one of the inmates at the Indiana State Reformatory for Boys—a little boy from Missouri—reportedly complained to his doctor of excessive masturbation. He requested castration as the solution, but the attending physician Dr. Harry Sharp hesitated to perform what he referred to as the “mutilation.”¹ Instead, he chose to perform a vasectomy, even though he didn’t have a specific warrant of the law. After the procedure, the child stopped masturbating, and his advisors claimed that his mind was better and he made better progress in school. After his success, others began requesting the operation as well, resulting in Sharp presenting a paper to the American Medical Association in 1901 and submitting an article to the New York Medical Journal in 1902 outlining the benefits of sterilization for the patient.² The article claimed that post-operation patients “improve mentally and physically … and the will becomes stronger.”³

From there, it was only a short amount of time before Indiana passed the first compulsory sterilization law in 1907. Other states soon followed suit, and the purpose of sterilization became compounded, as it began to be performed for the good of society as well as for the good of the patient. Sterilization was quickly taken up by the eugenics movement as a major instrument to prevent the decline of the quality of the American population. Historians have tended to view the practice of sterilization solely through the lens of the eugenic interest in preventing future “unfit” generations, but the theme struck

¹ William Kantor, “Beginnings of Sterilization in America: An Interview with Dr. Harry C. Sharp, who performed the first operation nearly forty years ago,” *Journal of Heredity* 28 (1937), 374.

² The information from this paragraph comes from: Paul Poponoe, Eugenics, Sterilization, Democracy, pp 1-6, Box 1, Folder 6, E.S. Gosney Papers And Records of the Human Betterment Foundation. Archives, California Institute of Technology.

by Sharp about the patient himself also receiving beneficial effects actually remained present in the minds of the practitioners throughout the movement. This trend is clearly evident in the history of sterilization in California, which is worthy of attention in its own right purely because they performed more sterilizations than any other state. It is also worthwhile to note that a disproportionate amount of attention went to the sterilization of women. Eugenicists emphasized the benefit to the patient as well as to society in order to justify and promote sterilization policies, and the case of California women in the 1920s and 30s suggests that Sharp’s rationale remained a major justification of sterilization throughout the eugenics movement.

**Background**

In the early 20th century, the United States had what many educated men and women from a variety of academic disciplines considered to be a serious problem. Concern for this perceived problem—the rapid and alarming increase in the number of persons with “mental diseases”—led to the establishment of the eugenics movement. When Francis Galton coined the term “eugenics” in 1883, he defined it as the “science of improving human stock by giving the more suitable races of strains of blood a better change of prevailing speedily over the less suitable.”⁴ This idea morphed into two separate eugenic programs—positive eugenics, which encouraged “fit” citizens to procreate in greater numbers, and negative eugenics, which prevented the “unfit” citizens from procreating at all, usually through segregation, sterilization, birth control, or in the case of Nazi Germany, death.

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A variety of factors contributed to the rise of the eugenics movement in the United States at the turn of the 20th century. High among them were concern about the recent influx of immigrants who Charles Davenport, a leading eugenicist, thought would threaten the American people and make them more mercurial and prone to crime; apprehension about the rising number of people living in poverty; and social Darwinism, where Darwinian ideas of survival of the fittest were applied to social, political, and economic realms and used as proof of a biological basis of human differences.5

The rediscovery of Mendel’s laws of independent assortment and segregation raised the possibility of a scientific explanation for these concerns, effectively gifting science with a tool to control these threats to the nation’s stock of “fit” people. Charles Davenport, an enthusiastic supporter of the new movement, capitalized on this by establishing the Eugenics Record Office at Cold Spring Harbor, New York, in 1910 for the study of eugenics and human heredity.6 Harry H. Laughlin, one of the first scientists to introduce concepts of Mendelian genetics into the United States and later author of *Eugenical Sterilization in the United States*, became the superintendent at the Eugenics Record Office where he resided for 29 years.7 This reflected the new emphasis on heredity, and how genetics determined physical traits, behavior, and temperament. Eugenicists drew on the Darwinian idea of natural selection as the basis for eugenics, but added their own notion that encouraging the artificial selection of people could improve the quality of the population. As this theme grew throughout the first half of the 20th

5 Kevles, 20-21.
century and expanded to include many other components, the new question morphed from to focus on who would be selected against for the betterment of the population. For eugenicists, the answer was two-fold: women who deviated from the sexual norms of the middle-class, and the “inferior” lower classes who were more likely to be unfit citizens and produce more of their kind. The instruments of selection were sterilization, marriage laws that mandated who was allowed to marry whom, and segregation, which involved relegating the feebleminded to their own institutions, and further separating them by sex within the institution.⁸

They also employed intelligence testing after it became widely available post-World War I to assess mental qualities and determine the mental age of the person tested. Eugenists referred to people who should be selected against as “feebleminded”. Defined as “any person afflicted with mental defectiveness from birth or from any early age, so pronounced that he is incapable of managing himself and his affairs,”⁹ these people were seen as little more than animals who could not control their impulses,¹⁰ and thus were the recipients of heavy discrimination. Margaret Howard, a physician who performed sterilizations at public institutions in California, claimed;

By no stretch of the imagination could these people be termed desirable citizens. Their reputations, both in the school and the community, proved

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⁹ Letter from Paul Popenoe to E.S. Gosney, Box 1, Folder 6, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

¹⁰ Irving Fisher, Our Children’s Generation (April 1930), Box 14, Folder 3, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.
them to be of low mentality, slovenly, verging on delinquency and altogether unfit to reproduce their own kind.¹¹

Before World War I, feeblemindedness was determined by behavior. After the war, it was determined largely by the new IQ tests. These tests were more culturally biased, and were used to classify people into the general “feebleminded” category, and further into subcategories of idiot, imbecile, and moron, among others. In addition to testing low on the IQ scale, people could also be classified as mentally deficient if they displayed immoral behavior. Immorality included sexual behavior that the middle-class deemed inappropriate, and was taken as a characteristic of feeblemindedness.¹² For eugenicists, adverse traits encompassed crime, alcoholism, and poverty, but especially for women it also encompassed sexually deviant behavior, with prostitutes or women who had illegitimate children as the prime targets.

Sterilization—vasectomies for men and salpingectomies for women—proved to be a major instrument for furthering the eugenic movement. In the early 20th century, a vasectomy involved an incision on the anterior surface of the scrotum in order to draw out and dissect an inch or more of the vas deferens. This incision could usually be closed with a single stitch. A salpingectomy, however, was a more invasive procedure. It involved the surgeon opening the abdomen and cutting, ligating, or removing part or all of the Fallopian tubes.¹³

¹¹ Letter from Margaret Howard to the Human Betterment Foundation (January 1937), Box 17, Folder 7, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

¹² Kevles, 107.

Many states followed Indiana’s example in 1907 by instituting their own sterilization laws. Although sterilization as an explicit use for punishment for certain crimes was only permissible in three states (California, Nebraska, and Washington)\textsuperscript{14}, most of the laws in other states were written with punitive measures in mind and applied exclusively to patients in public institutions.\textsuperscript{15} Critiques of the constitutionality of these laws were high in the 1910s—centered around the laws being “cruel and unusual punishment” and/or in violation of due process and equal protection under the law\textsuperscript{16}—and by World War I operations in several states had been suspended due to their controversial nature. Between 1913 and 1918, bills in Vermont and Nebraska were vetoed, and existing laws were declared unconstitutional in Michigan and Nevada and repealed and replaced in Oregon, California, and Iowa.\textsuperscript{17}

To reinvigorate public support for the statutes, eugenicists in Virginia drafted and passed a new law in 1924 that addressed the critiques of the earlier decade. This law was put to the test in a court case that came to be called Buck vs. Bell. Carrie Buck, a moral imbecile, had been committed to an institution for feebleminded people after having a daughter out of wedlock. The infant, Vivian, was judged to have a “look” about her that was “not quite right” – and since her mother and grandmother were both diagnosed as having a moronic IQ, John H. Bell, the superintendent of the institution, ordered Carrie sterilized. The case was challenged and made its way to the Supreme Court, where it was

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\textsuperscript{14} Frederick W. Brown, Eugenic Sterilization in the United States: Its Present Status, Box 14, Folder 3, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.
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\textsuperscript{15} Kevles, 109.
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\textsuperscript{17} Harry H. Laughlin, Eugenical Sterilization in the United States (Chicago: Psychological Laboratory of the Municipal Court, 1922), 1-3.
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ultimately upheld. In a now infamous statement, Justice Oliver Wendell Holmes declared, “three generations of idiots is enough.”\(^{18}\) This decision opened the door for more states to institute sterilization laws, and in the words of Paul Popenoe, “released state officials from all fear that the courts might not uphold them in the administration of such measures.”\(^{19}\)

California, the third state to pass a sterilization law, especially embraced the eugenics movement, and was responsible for roughly 20,000 sterilizations from 1909 (when the law was passed) to 1960, representing one-third of the total eugenic sterilizations performed in the entire country. Their law applied only to inmates of public mental institutions, and allowed the medical superintendent to “asexualize a patient or inmate if such action would improve his or her physical, mental, or moral condition.”\(^{20}\) The law was repealed and replaced in 1913, and amended again in 1917 to include a section that specifically targeted feebleminded inmates. California’s pervasive law served as the example for many other states. Harvey M. Watkins, the Superintendent of the Polk State School in California, claimed the law “has pointed the way to other states to enact permissive legislation and to give closer attention to this important phase of the problem.”\(^{21}\) These laws encouraged identification of the feebleminded at a young age so they could be trained during their formative years and not have to be institutionalized for a long period of time. The targeted inmates were afflicted with feeblemindedness and a


\(^{19}\) Paul Popenoe, Progress of Eugenical Sterilization in the US, pg. 1, Box 1, Folder 6, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

\(^{20}\) Alexandra Minna Stern, Eugenic Nation (Berkeley: University of California Press, 2005), 100.

\(^{21}\) Harvey M. Watkins, Selective Sterilization, pg. 3, Box 14, Folder 3, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.
“perversion or marked departures from normal mentality or from disease of a syphilitic nature.”

There are several reasons why California served as the example for the eugenics movement. When settlers first moved en masse to California in 19th century, they discriminated against the indigenous people and thought these “defectives” would deplete the resources they came to California to exploit. Deportations and immigration policies based on race were instated in the 1910s and 1920s due to this fear of race degeneration and resource depletion. In 1915, the Department of Institutions (California’s principal reform agency) created the Office of the Deportation Agent (ODA), whose sole responsibility was to deport those foreigners confined in mental institutions, a procedure that had been unofficially practiced since 1905. The same year the ODA was officially created, the Board of Charities and Corrections declared that the public hospitals were suffering from a “foreign problem”—mainly Mexicans—and increased their support for the ODA deportation policies. Eugenics was supported by many civic organizations in California, and this movement shaped other environmental, mental, and institutional policies in the state.

One of major organizations that strengthened this support was the Human Betterment Foundation (HBF), established by E.S. Gosney in 1928. Gosney was a lawyer, banker, and stock raiser born in Kentucky in 1855. After receiving his undergraduate degree at Richmond College in Missouri and his law degree from

22 Laughlin, 19.
23 Stern, 87.
24 Ibid.
25 Ibid.
Washington University in St. Louis, he moved to Arizona where he resided for 20 years as a legal and financial counselor. After his time in Arizona, he decided to move to Pasadena to pursue what was later described as his lifelong interest in eugenics, and founded the HBF.\(^{26}\) The mission statement was to “investigate the results and possibilities for human betterment by a safe, conservative application of the discoveries made by scientists, and to give this information to the public.”\(^{27}\) The trustees came from a wide range of business and professional activities, and the foundation grew to become widely known and respected during its 14 year existence.

Anyone could write to the HBF to receive additional information on eugenics and sterilization, and they received many letters concerning a variety of issues, from financial aid to potential jobs inquiries to questions about individual cases. In each case, Gosney and his staff responded that they were only investigators and educators, not physicians, and included copies of their pamphlets with their reply. The HBF also proactively sent letters including the pamphlets and books they had produced to authors of articles who had publically criticized sterilization in an effort to convert them, as well as sending them to college professors, who distributed them to their students and used them as part of their lecture course. Gosney believed that distributing information to the public was imperative for the spread of eugenic ideals, and thought the best way to facilitate the growth of the movement was to conduct a study of the results of the sterilizations performed in California.

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\(^{26}\) Mr. E.S. Gosney, Box 6, Folder 9, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

\(^{27}\) Human Betterment Foundation, What is the Human Betterment Foundation? Box 6, Folder 9, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.
Several other states had conducted studies on the effects of sterilization, most notably North Carolina. Although North Carolina represented a small percentage of the total number of eugenic sterilizations performed in the country, it was California that ranked first in number. Thus, the most important study in terms of numbers was the study of sterilizations in California conducted by the HBF.

The Study

In the mid-1920s, Gosney decided to put his dream of thoroughly examining California’s sterilization records to determine whether the process was actually beneficial into motion. Through correspondence with leading eugenic experts and organizations in the nation—including but not limited to the Eugenics Research Association, The International Commission on Eugenics, and Harry Laughlin—Gosney began to look for a capable, discreet man to lead the study. The goal was as stated:

I am about to begin in a quiet way the investigation … of the sterilization in the state, with a view of aiding, through judicious and diplomatic education of the public, in the limitation of the reproduction of the unfit, by sterilization or otherwise.  

Paul Popenoe, editor of the *Journal of Heredity* and an enthusiastic supporter of the eugenics movement, was consistently and highly recommended. After completing his

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28 After the North Carolina Supreme Court declared the 1929 Sterilization Act unconstitutional four years after it was passed, a new law was proposed and passed later in 1933. The state government began to provide funds to the public institutions in support of sterilization policies, and two of these institutions ended up being responsible for majority of the procedures performed. As of July 1, 1935, the institutions in North Carolina had performed 235 operations, 179 of which were on women, and 166 of whom were single. The law stated that these procedures were necessary in cases where it would improve the patient’s mental, moral, or physical state; cases where it was for the public good; cases where the patient was likely to produce a mentally deficient child; or cases where relatives or public officials requested the operation. The information about sterilization in North Carolina comes from: R. Eugene Brown, *Eugenical Sterilization in North Carolina: A Brief Survey of the Growth of Eugenical Sterilization and a Report on the Work of the Eugenics Board of North Carolina Through June 30, 1935* (Raleigh, North Carolina: Eugenics Board of North Carolina, 1935).

29 Letter from E.S. Gosney to Mr. David Fairchild of the *Journal of Heredity* (Jan 18, 1926), Box 7, Folder 2, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.
college training at Occidental College and Stanford University, Popenoe began his career as an editor of one of the local Pasadena newspapers. He worked as the editor for a few years, then quit his job and went on a tour of northern Africa and Europe as an agricultural explorer. Upon his return to the United States, Popenoe accepted a position in Washington, D.C. as the editor of the *Journal of Heredity* in 1913. It was here that his interest and enthusiasm for heredity and eugenics was piqued, a natural extension of his admiration for Charles Darwin and his theories of evolution. After a stint in World War I, he as a lieutenant whose responsibilities included policing prostitutes and prohibiting liquor forced him to put his writing on hold, he immediately picked up where he had left off by accepting the position of executive secretary of the American Social Hygiene association in New York upon the completion of the war. Retiring from that position, Popenoe moved back to California to further pursue his studies on eugenics, presenting himself as the perfect candidate to lead the HBF research study.\(^{30}\)

After Gosney originally contacted him, Popenoe wrote a five-page reply suggesting a long list of ideas about how to increase public knowledge of eugenics. This list included motion pictures, lectures, articles, newspaper and magazine reviews of eugenic books, high school and college eugenics education, women’s clubs, public libraries, infant welfare agencies, and museum exhibits, among others.\(^{31}\) This enthusiastic response, in addition to positive recommendations from respected professionals, was enough to convince Gosney that Popenoe was the right man to lead the study.

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\(^{31}\) Letter from Paul Popenoe to E.S. Gosney (1926), Box 7, Folder 2, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.
Thus, in 1926 Popenoe began the painstaking process of gathering the records from over 6,000 sterilizations performed in California. After contacting the superintendents of public institutions for the insane and feebleminded in addition to individual physicians and paroled patients, Popenoe traversed California to visit these people and inform eugenic supporters of his work. Welcomed wherever he went, Popenoe easily gained access to medical records, statistics, clinical case studies, and demographic profiles for his two-year research project. This report resulted in a book co-authored with Gosney entitled *Sterilization for Human Betterment*. This 200-page book contained the results of the report, presented with what the authors claimed as “no preconceived notions … [so] the reader could draw his own conclusions from these facts.”

The report investigated the records of 6,225 sterilizations performed in state hospitals, in addition to 420 performed in private practices. Out of those performed at public institutions, only 1,488 of them were carried out on feebleminded patients. Since all feebleminded patients were required to be sterilized before release, this shows that they did not make up the grand majority of the population of state institutions. Most patients were actually admitted for other illnesses, mainly dementia praecox and manic-depressive disorder. Across the state institutions, an average of 51% of males and 41% of females were diagnosed with dementia praecox; 21% of males and 37% of females were

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diagnosed with manic-depressive disorder; and only 11% of both males and females were diagnosed with feeblemindedness.\textsuperscript{34}

The report found that sterilization was an effective method of solving many problems presented by the feebleminded. The fears and difficulties expressed by anti-eugenicists—unsexing the patient, patient dissatisfaction, and sterilization as a punitive measure, among others—were found by the authors to be largely imaginary, as the vast majority claimed to see the beneficial nature of the procedure. Popenoe observed that the number of private sterilizations had increased steadily, as had the number of sterilizations performed publically by state institutions. As for private sterilizations, Popenoe asserted that he expected these numbers to rise and guessed that there was roughly the same number of private and public sterilizations. However, it is important to note that he had no way of knowing this, since he only investigated a small number of private sterilizations. He inferred that he could extrapolate his findings from Los Angeles county (the only county whose records he examined) to other counties to calculate the total number performed by the state. Regardless of whether that assumption was accurate or not, Popenoe dedicated almost the entire book to public sterilizations with only a small section on private practice.

One of the most noteworthy facts presented in the book was the increase in the number of girls who were admitted to state hospitals exclusively to be sterilized. The superintendent had the authority to detain a girl if he deemed it necessary for her health, but in most cases the girls were kept for under a year—enough time to be observed, sterilized, recover, and get paroled. Popenoe emphasized what he called the voluntary

\textsuperscript{34} Data Summary – Insane Men and Women, Box 36, Folder 1, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.
nature of these admits – he claimed that parents sent their daughters to prevent unwanted pregnancy, or that social workers sent women with too many children to voluntarily prevent themselves from continuing to bear children. The image of these girls exclusively sent for sterilization—as well as the image of most of the other female patients in the institution—was vastly different from the image of their male counterparts. While the men were viewed as undersexed and passive, unable to compete with “normal” men for female partners, women were viewed as oversexed and aggressive; sexual predators who needed to be contained for the good of themselves and society alike.

Three-quarters of women who were eventually sterilized were committed because they had been deemed “sexually delinquent”. Thus, these women were sterilized for the protection of society—the logic was that if they were sexually delinquent, they were feebleminded, and if they were feebleminded, they were likely to produce feebleminded children—instead of for protection of themselves. Seen as predators, these women underwent “therapeutic sterilization.” Frederick W. Brown, author and reviewer of many mental hygiene articles, defined it as:

The purpose of bettering the mental or physical condition of the individual patient, both for his own well-being and for that of other persons with whom he comes into contact. Even though these women were sterilized for the benefit of society—they were deemed threatening to the overall moral well-being—eugenicists continued to justify the procedure using the benefits reaped by the patient.

The responses to the questionnaires that the authors distributed proved the pervasiveness of the movement. One social worker wrote,

I feel that the California Sterilization law is capable of being utilized for much good … in one case, I observed that the woman’s health improved greatly and the entire family appeared happier. It seems to me that a wide publication on the subject of feeblemindedness and sterilization would be very helpful.36

The book affected more people than just the individuals interviewed for the study. When it was officially published in 1928, it was circulated to every major eugenic organization, both national and international, in addition to institutions, universities, and boards. A pamphlet entitled *Human Sterilization Today* that summarized the report’s findings in an abridged version was produced in the following decade. Any individual, teacher, or professional who wanted to learn more about the benefits of sterilization could request this pamphlet. The reaction to the book and pamphlet was overwhelmingly positive, and letters poured in from around the world complimenting Popenoe and Gosney. In the words of Winfred Overholser, Director of the Massachusetts Department of Mental Diseases, *Sterilization for Human Betterment* was:

> A thorough-going study … of the actual results of a large scale use of sterilization is the most telling argument that could be adduced, surpassing in effect, as it does, any comment of theoretical discussion.37

Overholser worked for the rights of mentally ill criminals, and spent his life dispelling erroneous myths about psychiatric disorders.38 The irony of his statement is that the book, although “thorough-going” by some standards, was far from unbiased. Gosney and Popenoe mastered the art of presenting objective-sounding statements, showing an objection to the argument, then discounting it. One salient example was when

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36 Sterilization Questionnaire for Social Workers, Box 16, Folder 7, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

37 Letter from Winfred Overholser to the Human Betterment Foundation, (February 14, 1930), Box 18, Folder 2, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

the authors claimed that none of the patients objected to the procedure, gave an example of a patient who did, and then said that the patient was clearly irrational and his arguments did not make sense because he was feebleminded and thus unable think clearly and rationally.

Internationally, *Sterilization for Human Betterment* was also widely lauded. Representatives from nations around the world from Mexico to Sweden responded positively to the book, especially Germans. They claimed themselves “thankful to all those American organizations and men who have worked in the line of Human Betterment,” according to Dr. G. Gyssling, the German consulate in Los Angeles. Dr. Hermann Simon, Director of Anstalt (a mental institution) in Gütersloh, Germany, hoped that in due time, Germany too could make these findings general knowledge and that “the only remedy … [is] preventing such reproduction by all means that are possible.” The findings presented by the California researchers clearly had a significant impact on Germany – the California law was actually used to help justify and shape Germany’s first eugenic sterilization law, passed in 1933, entitled the Law of Prevention of Hereditarily Diseased Offspring. Marie Kopp, a scientist who performed research on the legal and medical aspects of eugenic sterilization in Germany in 1936, reported that,

*The leaders in the Germany sterilization movement state repeatedly that their legislation was formulated only after careful study of the California experiment as reported by Mr. Gosney and Dr. Popenoe.*

The report had a strong impact on other countries as well, inspiring organizations and countries to form new foundations modeled on the Human Betterment Foundation.

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39 Letter from Dr. G. Gyssling to Dr. K. Burchardi (March 24, 1936), Box 18, Folder 2, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

40 Letter from Dr. Hermann Simon to the Human Betterment Foundation (April 20, 1930), Box 18, Folder 2, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.
The Chairman of the Mental Deficiency Board in the Department of Public Health in Hobart, England wrote,

> We have been giving attention to the methods which your own Foundation are fostering, and it may be that our Parliament will be asked to legislate in the same direction.\(^{41}\)

> Sweden was also in the process of creating a law for the sterilization of the unfit.\(^{42}\)

Dr. Angel Brioso Vasconcelos of Naranjo, Mexico focused on the potential benefit of sterilization for battling poverty.\(^{43}\) Dr. Ruzicka, the Director Professor in Czechoslovakia emphasized the case of habitual criminals.\(^{44}\) Even Seitaro Goto, a Japanese scientist and author who had a “good deal of doubts [about] the attitude of the operates [sic] themselves toward the operation,”\(^{45}\) changed his mind upon reading the book. He sent a letter to Gosney in 1929 claiming, “there should now be no longer any serious objection to the adoption of eugenic sterilization by civilized countries.”\(^{46}\)

Letters from many national organizations in America also greeted the book with enthusiasm. One radio broadcast stated:

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\(^{41}\) Letter from the Chairman of the Mental Deficiency Board, Dept of Public Health in Hobart to the Human Betterment Foundation (April 14, 1930), Box 18, Folder 2, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

\(^{42}\) Letter from Stockholm, Sweden to the Human Betterment Foundation (March 26, 1930), Box 18, Folder 2, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

\(^{43}\) Letter from Dr. Angel Brioso Vasconcelos to the Human Betterment Foundation (February 2, 1930), Box 18, Folder 2, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

\(^{44}\) Letter from Dr. Ruzicka to the Human Betterment Foundation (November 27, 1929), Box 18, Folder 2, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

\(^{45}\) Letter from Dr. Seitaro Goto to E.S. Gosney (October 24, 1929), Box 18, Folder 2, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

\(^{46}\) Ibid.
Even those of us who feel that sterilization is a rather crude method of dealing with human individuals will have to change their opinions on reading this statistical work.\textsuperscript{47}

Not only did the work convince some number of non-believers, but it also reached a larger circle of readers than the technical papers published in scientific journals. George E. Hale, an important astronomer and researcher at the Mount Wilson Solar Observatory who was funded by the Carnegie Institution of Washington, reiterated that the book “will therefore convince many readers of the value of continuing research in this important field.”\textsuperscript{48}

*Sterilization for Human Benefit* was seen as a convincing and inspiring work that caused thousands of people from a wide range of disciplines—from students to ministers to welfare workers to librarians—to become interested in and supportive of eugenic sterilization policies.\textsuperscript{49} Popenoe and Gosney succeeded in asserting that sterilization was a safe, effective process that worked to improve moral progress of the human race. More than 7,000 college professors requested copies of *Human Sterilization Today*, and more than 140,000 copies were distributed overall. In 1938, Popenoe and Gosney published a follow-up report entitled *28 Years of Sterilization in California*. Conducted in a manner similar to the first study, the findings almost exactly confirmed those found in the study ten years earlier. These publications very likely assisted public acceptance of sterilization and expanded popular interest in eugenics, and the benefits recorded

\textsuperscript{47} Dr. Jacob H. Landes, Radio Broadcast (April 15, 1930), Box 18, Folder 2, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

\textsuperscript{48} Letter from George E. Hale to the Human Betterment Foundation (November 15, 1929), Box 18, Folder 2, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

by the authors helped account for the increase in sterilizations in California in the following decade.

**Voluntary Sterilization**

One of Popenoe’s major claims in *Sterilization for Human Betterment* was that in both public and private institutions, the number of voluntary sterilizations greatly increased throughout the 1920s and 30s. In private practice, “voluntary” implied that the patient willingly sought out and requested the procedure. Of the 420 private sterilizations that Popenoe discussed in *Sterilization for Human Betterment*, the average age of the woman was 34, and virtually all of these women were at childbearing age. 93% of them were married, and 87%, or 366 women, claimed the main reason for their request for the procedure was due to a “mechanical hindrance,” or some physical or biological ailment that made childbearing difficult and painful, if not impossible. Out of the 56 remaining women, only 37 were sterilized for eugenic reasons, and only 19 were sterilized for their own mental protection. Popenoe also collected information about the woman’s sexual life post-operation—of the 420 total sterilizations, 165 women responded to his questionnaire. 34% claimed their sexual life had improved, 56% said there was no change, 4% noticed a decrease, and the remaining 6% did not answer the question.

According to Popenoe, many of the positive changes could be attributed to the following:

> In most cases this improvement was ascribed to either an improvement in physical health, or, more frequently, to removal of the possibility of pregnancy, which had caused fear of, or antagonism toward, sexual intercourse.\(^{50}\)

Most women reported that they were happy with the procedure, except for one woman who thought it was now easier for her husband to cheat on her. The majority claimed to view the operation simply as a different form of birth control, and welcomed

\(^{50}\) Gosney, 28-29.
the contraceptive. Thus, many of the women who were sterilized in private practice (and a not insubstantial number of those sterilized in public institutions) felt relieved because they no longer had to worry about bearing more children. In this era, birth control was not widely available. The Comstock Law passed in 1873 made sending “obscenities” through the federal mail illegal and punishable by a fine and/or imprisonment, and contraceptives were among the illegal material listed. Comstock’s demonization of birth control was a direct response to the increasing visibility of contraceptives, and he thought their increased availability encouraged “lewdness and lust”. Thus, many scholars have labeled this period leading up to birth control advocate Margaret Sanger’s campaign in the 1920s a bleak time in US contraceptive history. Although Sanger was convinced that the poor and working classes had limited, if any, access to birth control, historian Andrea Tone argued differently. She used several case studies to illustrate that many working class men and women actually had purchased some form of contraceptive, but makes the point that almost all of the contraceptives used in this period had a high percentage of failure. Thus, even though birth control was generally obtainable despite its illegality, it still cost money, took effort to procure, and oftentimes did not work.

The statistics on private sterilizations suggest several salient points. First, since private sterilizations cost money, the patients must have been from the middle or upper class. Second, the vast majority of them were married and of childbearing age, indicating the couple had enough foresight to realize either that they did not want or need any more children, or that the birth of another child could be potentially fatal for the mother. This insight showed that the woman was likely not considered to be “sexually delinquent,” in

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contrast to 75% of all feebleminded women committed to a state hospital. Rather, she was thinking about her and her husband’s economic and personal future.

There was one highly publicized court case that represented an abuse of private sterilization. In 1936, 21-year-old heiress Ann Cooper Hewitt was sterilized without her knowledge during an appendectomy. While Cooper Hewitt was under anesthesia, her mother ordered her salpingectomy. When Cooper Hewitt found out about the procedure 16 months later, she sued her mother and two surgeons for $500,000 in what became “one of the most lurid and sensational stories of our time.” The defendants justified their actions by claiming that Cooper Hewitt was feebleminded and thus would not make a good mother. Ultimately, the jury agreed. Hence, there were still non-voluntary private sterilizations performed on women.

Men, on the other hand, were rarely sterilized in private practice. Since women were sterilized mostly for their own physical protection, it was a logical extension that it was the woman instead of the man who was sterilized. The few men who underwent the procedure did it for their wife’s protection. However, sterilizations performed on men in public institutions were an entirely different story. Feebleminded men were viewed as undersexed and lacking masculine qualities. Popenoe said, “Among the mentally deficient in state institutions, it may be stated at once and definitely that males are not sex offenders.” The image of a weak, feebleminded male was widely prevalent, and such men were deemed unable to compete with males of higher intellectual levels for women. Since the procedure was so simple, Popenoe asserted that they might as well be sterilized.

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53 Gosney, 39.
The procedure was “no more serious than pulling a tooth” and it was thus generously performed on institutionalized men. The male patients who were sterilized were overwhelmingly unmarried (and remained that way even after their procedure) as were their female counterparts, since the goal was to sterilize them before they had produced any children.

“Voluntary” sterilizations performed in public institutions were a different story. Sterilization was understood to be voluntary if the relative, spouse, or family member approved and requested the procedure, even if the patient himself did not necessarily desire the operation. Although California did not explicitly give mothers the ability to request sterilization for their daughters, most assumed that the mothers would act in the best interest of their children. The public records do not show who recommended institutionalization, but it is assumed that a diagnosis of feeblemindedness allowed friends and relatives to recommend institutionalization even if the patient was over 18 years old. For sterilization in public institutions, generally a social worker, doctor, or family member recommended that someone be institutionalized – in many of the sterilization-only cases, the women were usually committed by juvenile courts at the request of relatives or social workers. The superintendent made each decision on a case-by-case situation, basing his opinion on whether the future children of the patient would be handicapped and thus bad citizens. In the words of Popenoe,

While the law provides for compulsory operation on the recommendation of the medical superintendent … it has become the practice to get the

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54 Gosney, 78.
55 Data Summary, Insane Men and Women, Box 36, Folder 1, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.
written consent of the nearest relatives, thus in effect making the operation a voluntary one.\textsuperscript{57}
The patient’s consent was not necessary, although it was sometimes sought.\textsuperscript{58} For sterilization in private practice, the mother or husband generally gave consent.

Most of the voluntary sterilization requests came from women who already had more children than they could take care of. Popenoe held to the view that these women, already overwhelmed, wished to avoid adding additional burdens on themselves and county charities, since many of them were receiving support from the state. Another sub-group was the “helpless defectives,” whose parents could take care of them and preferred to keep them home. These women were rarely delinquent, and sterilizations were supposedly performed more for the protection of the unassuming girl from predatory men, rather than to prevent the women from actively and aggressively pursuing them.

The third group, as already discussed, was known as sexually delinquent, and the women were sent to institutions because the state thought they had a high change of producing undesirable, illegitimate children.\textsuperscript{59}

However, if a patient objected to the procedure, he/she was generally deemed too mentally incompetent to make an intelligent decision, so his/her “opinion [was] valueless.”\textsuperscript{60} The same reasoning applied to an objecting relative on the grounds that since they were biologically related, the relative must also be incompetent. Generally, that was how Popenoe, medical superintendents of state institutions, and the operating

\textsuperscript{57} National Conference on Race Betterment, \textit{Proceedings of the Third Race Betterment Conference, January 2-6, 1928} (Battle Creek, Michigan: Race Betterment Foundation), 169.

\textsuperscript{58} F.O. Butler, \textit{Sterilization Produced and its Success in CA Institutions} (Address given at the National Conference of Juvenile Agencies, 1925), 5.

\textsuperscript{59} Gosney, 58.

\textsuperscript{60} Ibid.
physicians alike approached any objections. They claimed that the intelligent insane would not object to the procedure since they would understand the benefit to society. The mentally deficient were less likely to appreciate it, but they usually had intelligent relatives and friends, so they too were “voluntarily” sterilized. The feebleminded patients were viewed as malleable and “if they are told that it is not to their own interest to have children, and that the operation will not affect the sexual life in any way, they are likely to believe it.”61 This was the basis of Popenoe’s claim that compulsory sterilization was rarely used. In the absence of a spouse, relative, or friend who could request the procedure, the doctors were usually able to convince the patient that sterilization was the best option for him. Thus, almost all sterilizations were voluntary by Popenoe’s terms. Even so, he still wanted compulsory sterilization on the law books so the state was able to “protect itself in emergencies.”62 Popenoe never made clear what these emergencies were, but it was clear that his version of voluntarism would not work without the threat of compulsion. Thus, it was necessary to keep eugenic sterilizations laws on the books.

In 1934, a British report was published that declared there was no genetic basis for eugenic sterilization. Instead of seeing this as a major roadblock, American eugenicists embraced the report as an opportunity to reinforce the need for voluntary sterilization. In the 1930s, the attitude of eugenicists began to shift from mainline to reform eugenics. The reform eugenics movement still purported that heredity played a huge role, but also acknowledged that there were other factors—mainly environmental ones—that were large contributors to feeblemindedness as well. Instead of focusing on heredity as a measurement of feeblemindedness, reform eugenicists turned to fitness for

61 Gosney, 36.
62 Gosney, 37.
motherhood and emphasized the importance of a positive home environment for the future child, which feebleminded parents were unable to provide. Reform eugenicists seized this new focus and heavily promoted it, and leading experts embraced the new tactic. In an address to the New Jersey Health and Sanitary Association in 1937, Dr. Gladys Schwesinger claimed that every child had the right to have competent parents, embodying the idea that a bad environment for the child could cause the youngster to end up feebleminded. The American Eugenics Society declared in 1935 that sterilization was necessary “even in cases where ‘there is no certainty that the traits of the parents will be passed on to their children through heredity.’”

Reform eugenicists also emphasized the positive benefits of sterilization to the patient, namely better health, discipline, and general happiness. Sterilization proponents drew on earlier findings of these positive effects to shift the focus from a hereditary to a social disease. As early as 1925, F.O. Butler, Superintendent of the Sonoma Home for the Care and Training of Feebleminded Children, acknowledged that although there should not technically be any change to the patient’s demeanor post-operation, it still “appear[ed] to make them more amenable to discipline and more easily controlled.” Many of the physicians and social workers who responded to Popenoe’s questionnaire agreed with Butler, as evidenced from their glowing reports of the improved demeanor of their paroled patients. Even though biologists, geneticists, and social scientists began to denounce the faulty scientific basis for eugenics in the 1930s, that sentiment did not filter down to the public until the next decade and the number of sterilizations continued to soar.

63 Kline, 106.
64 Butler, 8.
The exception to the HBF’s call for greater numbers of voluntary sterilization was the eugenically fit. Popenoe and Gosney did all they could to discourage those whose children would improve the human stock from voluntarily requesting sterilization, and instead focused on the benefit to patients themselves, lack of unsexing, prevention of mental breakdown, and lack of fear of childbearing to encourage the feebleminded to request voluntary sterilization.

California especially emphasized the positive effects of sterilization not only for eugenic purposes, but also for the moral, physical and mental benefits to the patients. One of the most important and interesting points of the report was how much this resonated with not only the physicians administering the procedure, but also with the patients. The physicians were earnest in their efforts to prove that sterilization was a procedure that benefitted the patients just as much as society, and it is clear that they appeared genuinely to embrace the eugenic message. One physician claimed that “[the patients’] expressions of gratitude for this protection often [was] pathetic in their earnestness,” and the general data showed that only one out of seven patients had an objection to the operation, and those objections were deemed irrational by physicians and Popenoe alike.

Claiming the objecting patients had “less insight into their own situation” and were thus unable to make the right decision, Popenoe furthered his point by including testimonials from patients claiming that they too noticed an improvement to their condition.

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65 Popenoe, 7.
66 Ibid.
Most patients claimed better health, physically and mentally, with both males and females emphasizing greater pleasure from sex (since they did not have to worry about the encounter producing children). One woman claimed, “my husband is very well satisfied, and we are both (sic) living a happy life, which we couldn’t before.” Another stated,

In the past six months since my operation I have been healthier, happier, and freer from worry than I have ever been at any time during my 2.5 years of married life. The exceptions were with a few females who said they were more inclined to cite a loss of passion, likely due to the more invasive nature of their operation.

Positive mental side effects could make sense in certain circumstances – if a woman were constantly worried about the increased burden of more children, it followed that sterilization could visibly relax her. Positive physical side effects could also make sense – in the early 20th century, pregnancy and childbirth were taxing on the female body (more so than now in the era of painkillers and epidurals), and it would be easier to maintain a better physical condition without pregnancy. However, moral improvements did not appear to be a natural extension of sterilization. What makes a sterilized woman more moral than an unsterilized woman? Popenoe reasoned that many feebleminded women were committed to the institution because they did not have the foresight or self-control to think about the consequences of their actions. Before institutionalization, nine of twelve women were sexually delinquent. After sterilization, only one of twelve was still considered delinquent, so Poponoe attributed this change to a moral improvement.

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67 Sterilization Stories: Female (March 18, 1926), Box 17, Folder 7, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

68 Sterilization Stories: Female (March 19, 1926), Box 17, Folder 7, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.
(One might note, however, that after release the women were under constant supervision of a parole officer which may well would have contributed to behavior constraint). 69

Since it is illogical to attribute this “moral improvement” to the procedure, there must have been an underlying cause. There was no biological basis for the claim that the procedure affected morality or sexual health, as sterilization did not offer any protection against sexually transmitted diseases. It is possible that Popenoe and Gosney could simply have wanted to reduce the reproduction of the unfit and those whom they deemed to be burdens on society, and came up with many different reasons—including questionable ones like moral benefits—to achieve this goal. Many older, established men of authority like Popenoe and Gosney harbored some resentment towards what they considered reckless sexuality. The 1920s were a time of promulgation of new standards of sexual behavior, especially for single women (a prime example is the “flapper”). Cultural standards were changing to support a more open, liberated sexuality for women. Popenoe and Gosney may have been concerned that these changing standards would exacerbate reckless sexuality, and wished to suppress the consequences. Sterilization served as a valuable procedure for social order, and the emphasis on improved morality may have served as a credible resistance against the new, emerging values of female sexuality.

However, patient testimonials were quite different from those of physicians. Physicians chose their profession, and furthermore they chose to work at either a state institution or in a private practice performing sterilizations. Thus,

69 Gosney, 39.
they were likely more inclined to have already believed in the benefit of eugenics, and more eager to support Popenoe in his studies.

Patients had different motivations. When parole officers followed up with patients after the procedure, they were questioned as to whether they believed that their condition had improved post-surgery. If the patient answered yes, he/she was left alone and considered “cured”. However, if the patient answered no, he/she was either recommitted to the institution, or deemed irrational and not taken seriously. Therefore, there was a high degree of motivation for patients to claim they were cured. Many patients spent enough time institutionalized—and were evidently intelligent enough—to know how to act to avoid re-institutionalization.

There are also several reasons besides eugenics that patients could approve the procedure, as they reported in the questionnaires that Popenoe issued. Many were poor and unable to support a family, so they could support sterilization because it allowed them to stop their families from growing and save money. Others were in stressful relationships and wanted to remove childbearing from the equation. Regardless of the individual situation, many patients had personal, rather than eugenic, reasons for being pleased with their operation.

However, there was a definite possibility in at least some cases that the patients themselves could have bought into the eugenics movement. One of the most prominent examples of this was in the case of criminals. In 1936, over half of the convicts in San Quentin prison were voluntarily sterilized. Many of them

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70 This information comes from sterilization stories from patients, located in Box 17, Folders 7 and 8, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

71 Ibid.
claimed that they did not want to have kids who could not be brought up with a fair chance in life, and expressed remorse for their own criminal actions. If their actions were in part due to hereditary or environmental reasons, they did not like the idea of having children who would be subject to the same genes or environment and potentially end up in prison like their fathers.\textsuperscript{72}

However, it is important to insert a disclaimer into this example. There is no evidence that this was the quid pro quo, and no records exist to determine whether the prisoners received incentives for volunteering for sterilization (for example, reduced prison sentences). Also, sterilizing criminals was illegal in California—the amended sterilization law of 1917 was not intended to be a punitive measure—so superintendents may have claimed that the sterilizations were voluntary when they were in reality not optional. Thus, there may have been criminals and non-criminal patients alike who believed that sterilization was the best choice for eugenic reasons alone and volunteered for the procedure themselves, but they were likely the exceptions rather than the rule.

Another benefit advocated in the study was that sterilization would prevent female patients from having mental breakdowns as a result of stressful pregnancies. Popenoe claimed,

> Once the operation has been performed and the patient has an opportunity to experience its value, he is in almost every instance satisfied. Particularly this is true for someone with whom another pregnancy would mean another mental breakdown and return to the hospital.\textsuperscript{73}

\footnote{\textsuperscript{72} Popenoe, 14.}
\footnote{\textsuperscript{73} Paul Popenoe, “The Progress of Eugenical Sterilization,” \textit{Journal of Heredity} 25 (1934): 1.}
Women were seen as naturally the more fragile and nervous of the two sexes, and were thus more subject to nervous breakdowns that eventually led to psychotic breaks. Pregnancy could easily have been the inciting factor for these nervous breakdowns. Thus, Popenoe zeroed in on the emotional state of the woman to advance yet another benefit of sterilization.

Finally, Popenoe devoted a considerable amount of time in the book to separating vasectomy and castration, and emphasized that sterilization was solely used to prevent parenthood, not unsex the patient. Castration, a “crude and mutilating process” was vastly different from the simple, painless operation of sterilization. Furthermore, not only did the operation not cause pain or harm to the patient, but

The operation [also] does not change the sexual life of the patient in any way, except to prevent procreation … certainly vasectomy does not ‘unsex’ anyone. This emphasis on not unsexing the patient made sense, since it was cruel punishment to unsex someone if he/she had yet to commit a crime, or even if he/she had already committed a crime. People expected to have basic control of their faculties without having society impose something as serious as removing their sexual impulses. If women were sterilized, they did not have to be institutionalized for their reproductive years. Instead, they could be admitted to an institution, sterilized, and released. This trend was reflected in the history of institutionalized patients – almost three-quarters of the patients were released within a year of admission.

74 Ibid.
75 Paul Popenoe, Sterilization and Criminality, pg. 576, Box 1, Folder 6, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.
Popenoe also included a logical argument against the other critique of sterilization—that it causes increased promiscuity. He argued that if the woman were feebleminded, she was already promiscuous so therefore sterilization will not and cannot cause an increase. Thus, it served only to prevent procreation without any unintended consequences of increased promiscuity.76

Regardless of the intentions behind the promotion of these purported improvements, Popenoe and Gosney emphasized results that showed more “tractable” females post-surgery.77 This brings up one of the major contradictions of the book. Popenoe asserts on several different occasions that sterilization cannot and should not have any effect on the patient other than to prevent procreation. However, he always followed this statement with contradictory evidence – women who said that they “feel stronger physically and seem to be in perfect health mentally as well,”78 or physicians who claimed that the patients were “quieter, more easily managed, less erotic, less subject to hallucinations, [and] less frequently seized.”79 By including these follow-up statements, Popenoe effectively negated the disclaimer that sterilization did not have any other effects than preventing parenthood without actually claiming that it had other positive effects. This tactic proved successful, since many patients and physicians alike subscribed to the idea—or at least pretended to—that sterilization actually improved mental, physical, and moral function. Once again, this echoed Sharp’s initial justification that the patients too were benefiting from the procedure.

76 Popenoe, Progress of Eugenical Sterilization, 2.
77 Kline, 84.
78 Gosney, 34.
79 Gosney, 87.
Benefits to Taxpayers

One of the most compelling points that Popenoe made was to enumerate the economic costs of sterilizing feebleminded people to taxpayers. California had in place several worker and mother pension acts to help support the poor that served as “indirect means of providing funds to dependent children.” The state spent a large amount of money giving aid to dependent children, even before Roosevelt’s New Deal in 1933. The average aid per needy child in California was 34.2% more than the average for all states, and California ranked fifth in the country in providing aid to dependent children. This number only increased after the Great Depression struck, and it was not until August 1935 with the passing of the Social Security Act that the state began to receive funding from the federal government for welfare. This Act provided unemployment insurance, aid for dependent mothers and children, the blind, and the physically handicapped, and established benefits for old-age workers and victims of accidents. Prior to this act, support for needy families was the sole responsibility of the county and state governments. From fiscal years July 1, 1920 to June 1, 1930, California spent an average of $103.57 per dependent child. The amount of money spent and the number of children requiring support increased proportionally during this period,

starting at $1,203,123 spent on 11,928 children in fiscal year 1920/21\textsuperscript{84} to $2,632,602 spent on 24,968 children in fiscal year 1935/36\textsuperscript{85}.

Popenoe recognized that California was spending a lot of their money supporting the poor and their children, and used it as another tactic to promote eugenics. Claiming that the feebleminded were receiving a good deal of state money, he sought to highlight this statistic to convince anti-eugenicists of the economic benefits of sterilizing feebleminded patients. In *Sterilization for Human Betterment*, he used several case studies of women with seven or more children who refused to be sterilized because they wanted to continue receiving financial aid. As one woman explained,

>You see, we are getting half-orphan aid from the state for each of our seven children. We have figured out that when we have two more children, the amount we receive each month will be just enough for us to live on, and then my husband won’t have to work any more. So we wouldn’t want for me to be sterilized just yet.\textsuperscript{86}

Popenoe’s case was only made stronger after the Great Depression. In the 1930s, sterilizations began to be performed on more women than men, and the forced sterilization of women was interwoven with the advent of the larger welfare state. Dependent and single mothers were constantly and consistently belittled, especially as their “illegitimate” children were perceived as an increasing burden on the state.\textsuperscript{87}


\textsuperscript{86} Gosney, 56.

\textsuperscript{87} Stern, 7.
The poor, dependent families were also the ones found to be procreating most rapidly. In an article Popenoe wrote in 1935 entitled “Human Sterilization Today”—which would later be edited to become the pamphlet *Human Sterilization Today* that summarized the results of the follow-up study to *Sterilization for Human Betterment*—he examined Los Angeles Public Charities. He found that tax-paying families had responded to their economic burdens by reducing their number of children, whereas the reproduction rate of people living on public charity had conversely increased from 30% to 50%. Thus, Popenoe claimed that the hard-working, intelligent, tax-paying families who would normally produce the next generation’s leaders were instead paying taxes to support the children of fecund feebleminded parents, who were unable to stop having kids and needed government intervention.

Popenoe was right about the growing trend of people on welfare – the number of dependent children continued to increase and reached 42,359 by June 1940. However, he ignored the fact that the amount of money that California was responsible for paying greatly decreased after the Social Security Act went into effect in the fiscal year of July 1936-June 1937. In 1936/37, California spent only $383,649 for 26,272, an average of only $14.60 per child—seven times less than the average of the previous fifteen years. Evidently, the increasing number

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88 Paul Popenoe, Human Sterilization Today (1935), Box 1, Folder 6, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

89 Ibid.


of needy children was enough to outweigh the large decrease in cost to the state of California. Eugenic sterilization advocates continued the support for sterilization in the state, since they focused on the number of dependent children, not the per-child cost to the state.

Unfortunately, there is no way to tell whether the numbers that Popenoe used to justify his argument were fact- or assumption-based. In a document entitled “Eugenic Sterilization Explanatory Notes and Facts,” Popenoe included calculations that yearly sterilization and parole actually saved the state over $51,000 a year, but also conceded that this figure was an extremely difficult one to estimate. His method was to add up the number of people sterilized, multiply that by the cost of one year of maintenance (which he figured out was $500 per person per year at a state institution), and then take that number and multiply it by two-thirds (the success rate of parole), and thus the number of people who did not require re-institutionalization. This number served as the total number of people who were “cured” through sterilization and no longer had to depend on the state for money when they produced additional children.

There were two significant arguments against the economic approach to eugenics. First, critics argued that $500 per year was a lot to pay for one institutionalized person. In response, Popenoe produced the numbers above to show that feebleminded people bringing children on welfare into society were actually a much greater cost. Additionally, the study of families in Los Angeles

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92 Eugenic Sterilization Explanatory Notes and Facts, Box 13, Folder 6, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

93 Popenoe, Progress of Eugenical Sterilization, 7.
dependent on public relief also showed that the longer a family was on charity, the more children it produced. He proved that these families had been consistently producing children who had steadily increased the burden on social welfare agencies.\textsuperscript{94} The second critique was that sterilization may have actually prevented the birth of normal children, to which Popenoe argued that although this was a reasonable possibility, economic pressure did this naturally so the argument was irrelevant.

Finally, an aura of sacrificing individual needs for the greater good of society pervaded Popenoe and Gosney’s lines of argument.\textsuperscript{95} Popenoe claimed,

\begin{quote}
It would be astonishing if the state could not, in times of peace, call on its least able members to make a sacrifice for the common good which is, in most cases, felt by them not to be a sacrifice but rather a benefit to themselves as well as to society and to posterity.\textsuperscript{96}
\end{quote}

This assertion echoed the general opinion of the Buck vs. Bell case in 1927, expressed by Supreme Court Justice Oliver Wendell Holmes. Justice Holmes wrote,

\begin{quote}
We have seen more than once that the public welfare may call upon the best citizens for their lives. It would be strange if it could not call upon those who already sap the strength of the State for these lesser sacrifices, often not felt to be such by those concerned, in order to prevent our being swamped with incompetence.\textsuperscript{97}
\end{quote}

These two statements alone—one by a Supreme Court Justice and one by a well-respected eugenicist and public figure—show how omnipresent the eugenics

\textsuperscript{94} Ellen Morton Williams and Paul Popenoe, \textit{Fecundity of Families Dependent on Public Charity} (1934), Box 1, Folder 6, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

\textsuperscript{95} Kline, 94.

\textsuperscript{96} Paul Popenoe, Eugenic Sterilization (1934), pg. 2, Box 1, Folder 6, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

\textsuperscript{97} Oliver Wendell Holmes, “Opinion of the Court”, Buck v. Bell, 274 U.S. 205, 207 (1927)
movement was in the 1920s and 30s. These men, along with many others, thought it was appropriate to subordinate individual reproductive rights to the greater public good. Sterilization appeared to be the easiest, cheapest and most logical solution to ease the economic burden of the feebleminded on the state and nation.

Conclusion

Sterilization clearly proved to be a useful tool for eugenicists, and its widespread support, especially in states like California, helped the numbers of procedures increase through the first half of the 20th century. From *Sterilization for Human Betterment*, it is clear that it was important to eugenicists to justify why the operation was beneficial to the patients in addition to society. This idea dates back to Dr. Harry Sharp, who used sterilization not to improve the race but rather to help the patient get better. The sheer amount of time that Popenoe devotes to this topic in his book proves that this is what he and other sterilization supporters believed they were doing.

Unfortunately for the victims of these operations, there were no benefits of sterilization other than the prevention of parenthood. Even though Popenoe and others claimed public sterilizations were voluntary, many of them were not performed with the consent of the patient. The “moral” benefits that supposedly resulted from the procedure were just another justification Popenoe used to convince the patients and the world that these sterilizations were actually voluntary. The simple fact that Popenoe dedicated almost his entire book to proving that public sterilizations were helpful to the patient and society alike showed that public sterilizations were much more controversial than private ones.
People needed to be convinced of the positive benefits of sterilizations performed at state institutions – especially ones that Popenoe deemed voluntary, since he spent a large portion of the book discussing that – so he had to come up with a convincing list of advantages to do so. Also, he included an entire section of economic reasoning—the benefits to taxpaying citizens—that, if the readers believed what Popenoe wrote, was a very convincing argument.

The number of sterilizations continued to rise well into the 1940s, and it was not until the 1970s and 80s that states began to repeal compulsory sterilizations laws in favor of a purely voluntary basis.\(^98\) Surgeries continued sporadically at state institutions throughout the 1960s and 1970s, and the California law was not officially repealed until 1979. It also took until March 2003 for California Governor Gray Davis to issue a public apology to the “victims and their families … for the pain caused by eugenics.”\(^99\) The exact number of sterilizations performed is hard to estimate as many records were destroyed, lost, or marked as confidential. Sterilizations in prisons were not numerically documented, since it was an illegal practice to use sterilization as a punitive measure. There were also an unaccounted number of women who sought out the procedure for birth control. That said, the accepted estimated number of total sterilizations performed in California was more than 20,000.

As for the Human Betterment Foundation, it ceased producing material after *28 Years of Sterilization in California*, mostly because of Gosney’s declining

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\(^{98}\) Stern 154

health. He developed a severe case of bronchitis and had to spend more and more time recovering in the arid environment of the desert. He passed away in 1942, after which his daughter Lois G. Castle dissolved the foundation and attempted to tie it in with the Department of Institutions, the Langley Porter Clinic, and the University of California. However, the Department of Institutions was “unable to find a way in which we could handle the properties of the Human Betterment foundation,” and the California Institute of Technology ended up taking over the properties. Castle officially turned over all property and funds on January 15, 1943, and the assets were supposed to be used to fund and continue the original work of the foundation.

The impact of the Human Betterment Foundation’s findings was significant. The books and pamphlets were widely circulated and lauded, and the foundation constantly had to turn away requests to help with other similarly related projects, since they confined themselves only to research on sterilizations in California. The HBF spawned the formation of the California division of the American Eugenics Society, in addition to Popenoe’s brainchild, the American Institute of Family Relations. Although the HBF was only in existence for a mere 14 years, the impact was far-reaching and the study highlighted several key facts about sterilization and eugenics that historians had previously overlooked.

Word Count: 10,054

100 Letter from F.O. Butler to Lois G. Castle (October 14, 1942), Box 3, Folder 1, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.

101 Letter from Dora Shaw Heffner to Lois G. Castle (April 24, 1942), Box 3, Folder 1, E. S. Gosney Papers And Records Of The Human Betterment Foundation, Archives, California Institute of Technology.
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\textbf{Secondary Sources}


Bibliographical Essay

I began my essay by reading several secondary sources to narrow down my topic. Daniel Kevles’ *In the Name of Eugenics*, Alexandra Stern’s *Eugenic Nation: Faults and Frontiers of Better Breeding in Modern America*, Wendy Kline’s *Building a Better Race: Gender, Sexuality, and Eugenics from the Turn of the Century to the Baby Boom*, Richard Fox’s *So Far Disordered in Mind*, and Mark Largent’s *Breeding Contempt: The History of Coerced Sterilization in the United States*. These books helped me gain a broad understanding of the eugenics movement, and allowed me to realize that I was most interested in sterilization policies. Since California performed the highest number of sterilization procedures, I turned my focus to California.

Stern devoted almost ten pages to a discussion of the Human Betterment Foundation and its work, and after reading this excerpt I decided that I wanted to know more about their study published in 1929. I read Paul Popenoe and E.S. Gosney’s *Sterilization for Human Betterment*, the report that summarized their findings of the results of sterilization policies in California, and decided that I wanted to specifically concentrate on that book. I spent the next two months reading both secondary sources about sterilization, California, and the HBF, as well as primary sources written by Popenoe himself (mostly written for the *Journal of Heredity*) and other contemporary eugenicists. These included articles by Harry Laughlin, Frederick Brown, and F.O. Butler. Many of them were helpful in providing insight into the minds of other influential figures, and proved useful before I conducted more research on the HBF itself.

At the beginning of January, I traveled to the California Institute of Technology Archives in Pasadena, California, to access the E.S. Gosney Papers and Records of the
Human Betterment Foundation. This collection of primary sources is the basis of my paper. The collection includes 59 boxes (and each box had anywhere from six to twenty folders), and is divided into six sections, although the last section (Case Histories) is closed. I looked at information from every open section, resulting in a total of 19 boxes and 41 folders. Section I: Human Betterment Foundation—Records, Research and Personal Correspondence was very helpful, since it included articles written by the HBF staff (especially Popenoe), brochures, and information about the dissolution of the Foundation. Section II: Correspondence Files—by Country and State contained early correspondence between Gosney and eugenic organizations and people across the country, and allowed insight into his thought process in finding a man to lead the study. Section III: Sterilization—Papers, Data, Correspondence provided excellent first-person perspectives. Many of my quotes come from this section, since it included questionnaires for social workers and patients. It also included some information and statistics on benefits to the taxpayers, in addition to the reviews of *Sterilization for Human Betterment*.

I used the least amount of information from Section IV: Printed Materials—Journals, Articles, Laws, Clippings, and Section V: Sterilization Survey Data. This section included a data summary of the insane men and women in the state, which I mentioned briefly in my paper, and information on the other illness for which patients were institutionalized.

Not only were the data, statistics, letters, and other material in this collection invaluable, but it also suggested other resources for me to look at when I got back to New Haven. For example, one of the letters mentioned a primary source (Robert Dickinson’s
“Sterilization Without Unsexing: Surgical Review, with Especial Reference to 5,820 Operations on Insane and Feebleminded in California”) that I investigated upon my return and found to be very useful. Much of my essay is based on these documents, especially the sections on The Study and Voluntary Sterilization. I was able to analyze what Popenoe chose to include—and what other eugenicists wrote about in their letters to the HBF—to prove that sterilization for the benefit of the patient (and not just the benefit of society, which is what historians had previously focused on) was a major justification of the procedure.

The Benefit to Taxpayers section is inspired by the information included in the Archives and Sterilization for Human Betterment, but many of the numbers are taken from the State of California Department of Social Welfare’s monthly reports. Popenoe provided a good argument in his book, but I wanted to use the tax records to verify his claims and further investigate whether or not sterilization actually provided relief to taxpayers.

Once I analyzed the documents and wrote an outline, I used several other secondary sources to flesh out my arguments and provide a more complete history. Thus, secondary sources serve as the framework for my paper, but primary sources are the bulk. My essay advisor, Daniel Kevles, was also extremely helpful. He edited two rough drafts, and proved to be an excellent resource both on the material I was writing about, and also on general writing tips.