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From Public Good to Public Disgrace: Eugenics in North Carolina

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FROM PUBLIC GOOD TO PUBLIC DISGRACE: EUGENICS IN NORTH CAROLINA

A Capstone Experience/Thesis Project

Presented in Partial Fulfillment of the Requirements for

the Degree Bachelor of Arts with

Honors College Graduate Distinction at Western Kentucky University

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Western Kentucky University
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ABSTRACT

This CE/T project explores the sterilization program in North Carolina in the twentieth century. From 1929 to 1974, over 7,600 men, women, and children were sterilized by the Eugenics Board of North Carolina, a department of the state government of North Carolina. The North Carolina legislature enacted legislation that allowed for the forced sterilization of persons considered “feeble-minded” or a threat to the public good of society. The perceived threat to society changed over the course of the program from patients in mental institutions to low socio-economic women seen as a burden to the public. The mechanism for selection and approval of sterilization victims allowed individuals within the community and institution to target victims based on their own personal preferences. This work first details the national eugenics movement then addresses the history of the movement in North Carolina through case study and an examination of legislative records. The project also outlines the influence of individuals within the state’s mechanism to push forward their own agendas. Research was conducted through a historical analysis of state records, propaganda, personal archives, and local newspapers. The public offered little to no criticism of the program that targeted citizens including mental patients, low socio-economic citizens, and racial minorities.

Keywords: Sterilization, Eugenics Board of North Carolina, Eugenics, North Carolina
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Last but not least, I would like to acknowledge my parents. I could not have completed this project or my college career without their support. My mom and dad have supported me through every venture, every difficult time, and every success. Their support has been immeasurable over the course of my college career.
VITA

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Peak of the Eugenics Program in North Carolina
CHAPTER 1

INTRODUCTION

Beginning in the late nineteenth century, the eugenics movement in the United States began its quest to sterilize individuals. The movement was defined as “the science of better breeding to improve the human race.”¹ The eugenics doctrine “states that the fostering of good genes and the elimination of bad ones will serve the cause of national ‘racial’ health by permitting better breeding of a nation’s ‘stock’ of people.”² Sir Francis Galton created the term in 1883 from the Greek word “eugenés” meaning “good in birth.”³ Victims were selected based on the possibility of suffering from mental diseases, learning disabilities, and “feeblemindedness.” Feeblemindedness was a broad term used to target anyone deemed unacceptable by local and state governments. It became the preferred term used by eugenicists to identify racial minorities, low socio-economic populations, criminals, and women if they did not fall into any other category. It is estimated that 60,000 sterilizations took place in the United States.⁴ While there was never a federal law regarding sterilization, the 1927 United States Supreme Court decision in Buck vs. Bell strengthened the movement and thirty-one states

⁴ Hanson and King, Sterilized by the State, 1.
enacted sterilization laws in its wake. The exact number of sterilizations that were performed in the United States is unknown because of faulty or destroyed state records.

North Carolina was one such state that sterilized victims in large numbers from 1929 to 1974. While North Carolina was not the most active state in sterilizations, it did have a unique program that incorporated local social workers into the decision-making process. Social workers in individual counties were able to initiate sterilization petitions to the Eugenics Board of North Carolina under the 1933 state law. North Carolina was selected for study because it was the only state that utilized under-qualified social workers in the sterilization process. No other state used social workers in their eugenics programs. This state was also selected for study because the state legislature approved reparations for victims in 2013. Reparations could be paid to surviving victims because the program lasted until 1973. The program’s peak years of sterilization fell well after many other states had dismantled their programs. These factors created a climate in which coerced sterilizations could take hold in every county in North Carolina. Today, the North Carolina Office of Justice for Sterilization Victims is in the process of paying reparations to victims whose claims were substantiated by Eugenics Board records.

During the period from 1929 until 1973, over 7,600 men, women, and children were sterilized in North Carolina alone. The North Carolina Eugenics Board was created in 1933 to administer the sterilizations and make decisions concerning who was selected

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6 Public Laws and Resolutions, State of North Carolina, Session of 1933, 346.
for sterilization.\(^8\) Legally speaking, the patients or their families were required to give consent for a sterilization procedure to take place. However, the Eugenics Board continually coerced patients and their families to sign consent agreements through fear and intimidation tactics. Joanna Schoen, an assistant professor of women’s history at the University of Iowa, was given access to records from the Eugenics Board in the late 1980s.\(^9\) Schoen reported after an examination of almost 7,000 records, only 446 patients “clearly desired the operation.”\(^10\) Records from the Eugenics Board from Schoen’s examination show a lack of medical experience and emphasis on the social aspects of patients’ lives who were recommended for sterilization.

At the time of this writing, the state of North Carolina has authorized a settlement for surviving victims to be disbursed in 2015. So far, 213 citizens have been identified to receive a settlement from the government.\(^11\) While the state has taken steps to assuage its guilt from forcing thousands to be sterilized, it still stands in the way of full justice. Of 731 claims, only 213 were identified as qualifying for the settlements from the government.\(^12\)

All documents created and maintained by the Eugenics Board of North Carolina have been sealed and de-accessioned from the State Archives of North Carolina. On August 1, 2005 the records were “De-accessioned and custody transferred to the

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\(^10\) Begos et al., *Against Their Will*, 11.
\(^12\) Evans, “State To Send Out About 200 Eugenics Payments.”
Department of Human Services, by agreement.” The sealed records prohibit researchers from examining thousands of documents that contain information about the unethical selection process and minutes from hearings and board meetings. Fortunately, the Winston-Salem Journal examined a portion of the sealed records in 2002 produced by Joanna Schoen. The articles from this publication contain information necessary to ascertain the purpose of the N.C. Eugenics Board and its practices.

Local newspapers and personal archives are not sealed and offer a glimpse into the public opinion of the eugenics program at the time. Little criticism of the program or its administrators appears in these documents and in state court cases that challenged the various forms North Carolina’s sterilization law. The process and purpose of sterilization were supported by the general public because of the mistaken belief that the “public good” could be improved by sterilizing citizens. Sterilization was seen as a solution to the state’s social ills including crime and an expanding welfare program paid for by wealthier citizens. Under their understanding, a criminal was less of a threat to the community if it was assured that the individual could not reproduce. Economic disparity and the negative outlook on the poor as a group contributed to the overall public opinion that it would be better to sterilize low socio-economic citizens to save tax money on welfare programs.

Newspaper articles from the time period indicate the sense of accomplishment that permeated the information provided to the public about the program. One article from the Raleigh News & Observer from 1959 was entitled, “Sterilization: There’s

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Seldom a Dissatisfied Customer.”\(^\text{14}\) The article began with by asking if reproduction is a right or a privilege. The individuals targeted by the sterilization program had been so dehumanized that the most basic right, that of reproduction, had become a tool used to control unwanted portions of society. The article also included a picture from a sterilization procedure hailing the medical techniques that make the procedure simpler. At all levels, there was little resistance. The government approved the surgeries, the media hailed the processes used, and the public accepted the propaganda presented in favor of the eugenics movement. Citizens were quick to accept the propaganda because it spoke to their already established worldview that was influenced by racism, elitism, and ableism.

The program in North Carolina had decreasing sterilization numbers per year during the mid 1940s but that trend reversed in 1947 when James G. Hanes, president and chairman of the board of Hanes Hosiery, founded the Human Betterment League of North Carolina and brought Dr. Clarence Gamble, heir to the Proctor & Gamble fortune, into the organization. \(^\text{15}\) Sterilizations had decreased from 202 in 1938 to 117 in 1945; the state government had not been committed enough to the program to pay for a permanent office for the Eugenics Board of North Carolina. \(^\text{16}\) The group focused on bringing awareness to the cause and was able to provide monetary support to the eugenics movement in North Carolina. After only a few years, the League had strengthened the program so much that “the state had the highest per capita rate in the country.”\(^\text{17}\) By


\(^{15}\) Begos et al., Against Their Will, 71-2.

\(^{16}\) Begos et al., Against Their Will, 71.

\(^{17}\) Begos et al., Against Their Will, 77.
1957, the group had sent 575,000 mailings out to North Carolinians expounding on the virtues of sterilization. The League offered unlimited funding and enough social capital to influence the political process.

The negative view of mentally handicapped, criminals, and low socio-economic people whose lives could be controlled by others created a social climate easily manipulated by strong political actors who could push through their own agenda in North Carolina from 1929 to 1974. There is no one cause for the longevity of the North Carolina program or the intensity of the state’s actions. North Carolina is in outlier in the national eugenics movement because of the process used to select victims and the longevity of the program. The institutional procedures were enacted in a state that was supportive of the overall eugenics movement. The mechanism created by the North Carolina legislature created the opportunity for individuals to pursue personal agendas with little oversight and social concepts of race, disability, and wealth to influence the sterilization process.

18 Begos et al., Against Their Will, 77.

19 Primary sources for this work include articles from the Raleigh News & Observer, North Carolina Supreme Court documents, U.S. Supreme Court documents, legislative records from North Carolina, and released reports from the Eugenics Board of North Carolina. These documents are used to detail the events that occurred over the course of the sterilization program in North Carolina. Among journal articles, two books were principally used as secondary sources: Against Their Will: North Carolina’s Sterilization Program by Kevin Begos, et al. and Sterilized by the State: Eugenics, Race, and the Population Scare in Twentieth-Century North America by Randall Hansen and Desmond King. Against Their Will describes the North Carolina program and the victims in detail. The authors obtained copies of 3,000 sealed Eugenics Board documents. Sterilized by the State includes information on the national movement and an overview of other state’s programs.
CHAPTER 2

THE NATIONAL EUGENICS MOVEMENT

Thirty-one states carried out sterilization programs in the twentieth century. The first eugenics law was passed in 1907 in Indiana; other states followed suit and enacted their own legislation over the fifty years. Each state had the ability to tailor its eugenics law to control the marginalized group it feared the most. Laws varied from state to state but held general trends. It is difficult to know accurate statistics on the number of sterilizations performed and other statistical data on the patients because many states have either destroyed the records or have sealed them from the public. It is known that “California carried out more than twice as many sterilizations as either of its nearest rivals, Virginia (approximately 8000) and North Carolina (approximately 7600).”

California’s approximate 20,000 coerced sterilization procedures make up one-third of all procedures carried out in the United States in the twentieth century. The aggressive movement in California was due to the understanding that “the whole stream of human life is being constantly polluted by the admixture of the tainted blood of the extremely defective” as stated in a 1918 state eugenics report. The state of California did not

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20 Hanson and King, *Sterilized by the State*, 80.
23 Hanson and King, *Sterilized by the State*, 4.
include those of “oriental” ancestry into the pool of those to be sterilized but did target other immigrant populations that contributed “growing population of ‘mental defects.’”

In California, while immigrants from Asia were not targeted, other minority groups were disproportionately affected by the state’s eugenics plan. Foreign-born “constituted 39% of men and 31% of women sterilized. Of these immigrants, from Scandinavia, Britain, Italy, Russia, Poland, and Germany were most represented.”

States such as California also took advantage of minority groups who had poor English skills such as Native Americans and Puerto Ricans; these groups made up a portion of the national group of minorities target by state legislation. While the eugenics movement was rationalized as working for the betterment of society, the truth of the matter is that minorities were targeted to remove their descendents from future generations. The movement was motivated by a desire for control. Racial minorities, disabled persons, and low socio-economic status groups were seen as a threat to ideal society. Institutional forces could control that threat in the future by sterilizing in the present.

The California law was only used until 1952 when new procedures were put in place to make the process of sterilizing individuals more difficult. “By turning what had been a mere formality into a more taxing ordeal, these modifications deterred many physicians from requesting sterilization orders.”

During the relatively short time span from 1909 to 1952, California sterilized 20,000 individuals. California does follow the trend of decreasing procedures performed after World War II. States such as North Carolina, however, had programs that lasted much longer and even grew after 1950. Only

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24 Hanson and King, *Sterilized by the State*, 80.
26 Hanson and King, *Sterilized by the State*, 254.
13.5% of the sterilizations performed in California came after 1945, whereas 79% of North Carolina sterilizations occurred after 1945.28

One of the key differences in North Carolina came with the shift in focus from patients in mental institutions to low income, unwed mothers who were coerced into sterilization. Over the years, the Eugenics Board of North Carolina would shift its focus and target different groups at different points. In the post-war era, “the system granted excessive power to welfare workers, browbeat women into being sterilized and had ineffective safeguards.”29 In 1961, Sue Casebolt became the executive secretary of the board. Upon her selection, she began a targeted campaign against young women stating in the board minutes in 1961,

I now propose to have as my objective as Executive Secretary to work to promote earlier use of the (sterilization) program; that is, after the first rather than third of (sic) fourth child, which would result in prevention of problems requiring staff time, money, and use of other needed community resources. To this plan to use all resources available to secure information as to persons who need to be offered the service.30

The language in her statement is contradictory. This quotation from the Board minutes reveals Casebolt and the Board’s views on how the sterilization petition initiation process should function. Casebolt spoke of targeting young women who have had at least one child while at the same time offering sterilization as a “service.”

In the case of Nial Ramirez in North Carolina, the offer of sterilization came with dire consequences for her family. At the age of 18, Ramirez gave birth to her first child and was met by a social worker who informed her that the welfare support for her

28 Begos et al., Against Their Will, 12.
29 Begos et al., Against Their Will, .
siblings would be cut off if she refused to have the operation in the months after giving birth.  

Not only was Ramirez poor and a woman, she was also an African American. Social workers such as the one in Nial Ramirez’s case were unique in the United States because they had the ability to initiate sterilization requests. The social workers would target families with women on social welfare programs found to be of childbearing age. The potential burden on society was used as the reasoning for sterilizing otherwise healthy, young women. While the form of the eugenics movement varied from state to state, all were susceptible to racism found in society and fears of the minorities.

The overall public support of the eugenics movement also had an impact on the understanding of population controls at the time. An article from the Los Angeles Times in 1951 outlined the fears of overpopulation. The writer called for action, “The United Nations should adopt a population policy so that its members can achieve the ideals so loftily expressed in its Charter.” The article states that there are some populations in the world who are “overrunning” certain nations and that will have a dangerous effect on all nations of the world. While the article begins in broad terms about overcrowding and its effect on quality of life, the writer moves on to talk specifically only about the dangers of one country: Japan. The fear that soon the Japanese will outnumber Americans is the motivating argument for the need for population controls. But, the article was one of the few who did not suggest sterilization as the means to accomplish that end. The Los Angeles Times article cited the dangers of taking on a sterilization policy and likened it to

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31 Railer, “Sign this or else…”
32 Railer, “Sign this or else…”
the actions of Nazi Germany during the war. The post-World War II concept of sterilization became associated with the horrific events of the Holocaust. Sterilization may not have been the goal, but fear and racism towards the Japanese was still present.

As many states concluded their programs after the end of World War II, North Carolina continued and strengthened its efforts to sterilize the undesirables of the state. The post war period was marked by a focus on low socio-economic young women whose possible children were seen as a burden on the welfare system. The shift in targeted victims overtime could be achieved because of the history of the North Carolina sterilization law. Through multiple versions, the state confirmed its dedication to the eugenics movement and the sterilization of innocent citizens.
CHAPTER 3

THE INSTITUTIONAL HISTORY OF THE NORTH CAROLINA STERILIZATION PROGRAM

The first sterilization law in North Carolina was passed in 1919. By this time, seventeen other states had enacted sterilization legislation. Of the seventeen, many laws had been challenged in court and deemed unconstitutional by 1919.35 The act entitled “An Act to Benefit the Moral, Mental or Physical Conditions of Inmates of Penal and Charitable Institutions” was passed in order to authorize the sterilization of inmates in the North Carolina prison system and patients in mental institutions.36 While the intent of law was to provide an avenue to perform sterilizations, the words “sterilization” and “eugenics” are not found in the text. The law authorizes:

The medical staff of any penal or charitable hospital or institution of the State of North Carolina is hereby permitted and instructed to have any surgical operation performed by competent and skillful surgeons upon any inmate of any such penal or charitable hospital or institution when in the judgment of the board hereby created, said operation would be for the improvement of the mental, moral, or physical condition of such inmate of any of the said institutions…37

The law did not specify sterilization procedures but did state that the “improvement” of the inmate was of the utmost importance. Contradicting this façade of concern for the inmate, the law does not state that the consent of the inmate or patient is necessary to carry out such an operation. From the very beginning of the North Carolina program, the

35 Hanson and King, Sterilized by the State, 76-77.
37 Public Laws and Resolutions, State of North Carolina, Session of 1919, 504.
patient was not the emphasis of the law – the emphasis was on the perceived benefit to society. The state sought to control the inmates and patients by “improving” their condition. Inmates and patients could be sterilized for their “improvement of their mental, moral, or physical condition” but they did not have the opportunity to decide if that improvement was wanted or necessary.\(^\text{38}\)

The Board of Consultation was created to carry out the selection of patients and maintain the records of any surgery performed. The Board was to be made up of “medical staff of the several charitable and penal institutions of the State, and one from the State Board of Health” among other state agency representatives.\(^\text{39}\) The law also required the Governor and Secretary of the State Board of Health to both affirm the procedure before it could take place.\(^\text{40}\) While this board was created to oversee and maintain the records, no documented sterilizations took place. In fact, there were no documented sterilizations performed under the 1919 North Carolina Law.\(^\text{41}\) The law itself was brief and did not offer up much explanation as to the formulation and procedure of the board.

The 1919 North Carolina law was passed as the eugenics movement was gaining momentum in the 1920s. In 1924, Virginia passed its own version of a eugenics law. The law became infamous and marked the crescendo of sterilization practices when it was upheld in the United States Supreme Court case \textit{Buck v. Bell}.\(^\text{42}\) The Virginia law began by stating, “both the health of the individual patient and the welfare of society may be

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\(^{40}\) \textit{Public Laws and Resolutions}, State of North Carolina, Session of 1919, 504.
promoted in certain cases by the sterilization of mental defectives.”

Writers of the Virginia statute justified the need and connected crime to genetics. The law stated, “Human experience has demonstrated that heredity plays an important role in the transmission of insanity, idiocy, imbecility, epilepsy, and crime.” While the language suggests that the welfare of the patients were important, by declaring the link between genetics and criminal behaviors and mental diseases the legislature positioned itself as the caretaker of the society as a whole, not to the individual. The lawmakers were not motivated by the desire to better understand mental illness so that patients could prosper. The law’s focus was to “protect” the general population from being somehow tainted by the potential children of inmates and patients.

The legislature allowed for sterilization procedures to be conducted on patients in mental health facilities in the state and the requests to be generated by hospital staff. Virginia was not the first state to enact eugenics legislation but it had witnessed other state laws fall on procedural grounds. The writers of the Virginia law aimed to ensure “that legal precepts of due process and equal protection were afforded – or at least had the appearance of having been afforded – to those feebleminded individuals recommended for involuntary sterilization.” The law passed almost unanimously in Virginia and was put into effect in the case of Carrie Buck.

Carrie Buck’s sterilization request was initiated by the superintendent of the State Colony for Epileptics and Feebleminded where she was being treated. Carrie Buck had given birth to a daughter Vivian, described as “not quite a normal baby” while the case

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43 Virginia Acts of Assembly 1924, Virginia Sterilization Act, 569
44 Virginia Acts of Assembly 1924, Virginia Sterilization Act, 569
45 Hanson and King, Sterilized by the State, 106.
was being heard in the Circuit Court of Amherst County. Proponents of her sterilization argued that the state would save money because as a sterilized woman Buck could be released from the colony. Her mental condition was seen as severe enough to be admitted to the institution and be sterilized but changed once she was incapable of producing more children. This indicates that the health and safety of Carrie Buck was not reasoning for her sterilization; Buck was sterilized to “protect” society and control bad genes from being continued on into future generations. Dr. Albert Priddy, the superintendent, actually appointed her attorney as a way of challenging the law he helped write in order to strengthen it through being upheld in the courts. The sterilization recommendation was upheld by Circuit Judge Bennett Gordon but the case was eventually appealed to the Virginia Supreme Court of Appeals and eventually the United States Supreme Court. Because Buck’s attorney was appointed by the superintendent of the mental institution, the appeal “was designed decisively to support the legality of sterilization of the feebleminded and to transcend the grounds on which seven other states had seen their sterilization laws struck down as unconstitutional.” While sterilization was technically challenged in the case, neither side took a stance against the sterilization or the Virginia procedures.

In the opinion written by Justice Oliver Wendell Holmes, the Court upheld the procedure set forth in the Virginia law, “There can be no doubt that, so far as procedure is concerned, the rights of the patient are most carefully considered, and, as every step in this case was taken in scrupulous compliance with the statute and ... the plaintiff in error

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46 Hanson and King, *Sterilized by the State*, 105.
47 Hanson and King, *Sterilized by the State*, 105.
48 Hanson and King, *Sterilized by the State*, 109.
49 Hanson and King, *Sterilized by the State*, 109.
has bad due process of law.”\textsuperscript{50} Not only did the Court uphold the procedure, but it also upheld the idea of sterilization as well. Holmes stated, “It is better for all the world if, instead of waiting to execute degenerate offspring for crime or to let them starve for their imbecility, society can prevent those who are manifestly unfit from continuing their kind… Three generations of imbeciles are enough.”\textsuperscript{51} These appalling words paved the way for thousands of individuals to be sterilized all across the country and fully encapsulated eugenicist thought. The case was decided on May 2, 1927.

While the 1919 law was still on the books at this time in North Carolina, it was not operational. With the decision in \textit{Buck v. Bell}, the North Carolina legislature was empowered to revisit its legislation and create a more workable eugenics law. The North Carolina Legislature passed a more direct sterilization law during the 1929 Session entitled “An Act to Provide for the Sterilization of Mentally Defective and Feeble-minded Inmates of Charitable and Penal Institutions of the State of North Carolina.”\textsuperscript{52} This law clearly states its intent to sterilize mentally unfit members of society. The 1929 sterilization law makes the distinction that sterilizations could be carried out “in the best interest of the mental, moral, or physical improvement of the patient or inmate, or for the public good.”\textsuperscript{53} The language in the 1919 law was concerned with the improvement of the individual instead of the improvement of society as a whole. This indicates the 1929 law was in more clear alignment with the eugenics doctrine which sought to cleanse the “tainted blood of the extremely defective.”\textsuperscript{54} The addition language in the 1929 law

\begin{flushleft}
\textsuperscript{50} \textit{Buck v. Bell} 274 U.S. 200 (1927), 207.
\textsuperscript{51} \textit{Buck v. Bell} 274 U.S. 200 (1927), 207 – 208.
\textsuperscript{52} \textit{Public Laws and Resolutions}, State of North Carolina, Session of 1919, XIV.
\textsuperscript{53} \textit{Public Laws and Resolutions}, State of North Carolina, Session of 1919, 28.
\textsuperscript{54} Hanson and King, \textit{Sterilized by the State}, 4.
\end{flushleft}
clarifies the intent of the sterilizations as a way to not only “benefit” the individual but also society as a whole. This indicates a greater dedication on the part of the state to control the population through reproduction. If members of the society who were seen as undesirable could not pass on their genes, then societal problems may stemming from those members may cease or at least diminish. The sterilization for benefit the individual or the public, by the language, improvement for both was not necessary.

While the 1919 law only pertained to inmates of state penal facilities and patients at mental institutions, the 1929 update allows for citizens outside of such institutions to also be subjected to sterilization. Individual counties of North Carolina could authorize sterilizations “upon the petition and request of the next of kin or legal guardian of such mentally defective person.”55 The individual did not necessarily have to consent to the surgery to be sterilized as long as the next of kin or director of the institution signed his or her approval.

The request was then sent to the Board of Reviewers where it had to receive four signatures: the Commissioner of Charities and Public Welfare of North Carolina, the Secretary of the State Board of Health of North Carolina, and the Chief Medical Officer of each of any two of the institutions for the feeble-minded or insane of the State of North Carolina.56 These signatures along with the entity initiating the process were all required approval for a sterilization to take place. Section five of the 1929 act also stated,

Such asexualization or sterilization shall in all cases as in this act permitted be lawful, and the person or persons who shall the request, consent, authorize or direct the same, or perform or participate in such operation as herein before authorized, permitted and directed, shall not be liable, either civilly or criminally,

The patient’s consent was not required and as the liability clause states, no person or group could be held legally responsible for any portion of the sterilization whether it be administrative or surgical. No legal redress could be found if an individual was coerced or forced to undergo sterilization.

According to the Oxford English Dictionary, the term “asexualization” first appeared in 1895 in the *Ohio Medical Journal* in an article entitled “Asexualization for the limitation of disease, and the prevention and punishment of crime.” All further citations in the Dictionary are also related to the Eugenics movement. Asexualization is defined as “the action or process of sterilizing, or rendering sexually impotent.” The term is also addressed in the 1914 publication *A Reference Handbook of The Medical Sciences: Embracing the Entire Range of Scientific and Practical Medicine and Allied Science*. In Volume Three, the editor Thomas Lathrop Stedman discusses three state laws that call for asexualization: Connecticut, Indiana, and California. He states that the difference between a “simple sterilization” and asexualization is that asexualization removes “uncontrolled sexual desire” such as in the case of castration. This document from the early eugenics period in 1914 makes the distinction that sterilization is an interruption of the possibility of reproduction while asexualization eliminates sexual desire completely. The term asexualization is tied to the fundamental ideals of the

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57 Public Laws and Resolutions, State of North Carolina, Session of 1919, 29.
eugenics movement and clearly shows the intent to control victims by altering their physiology. The North Carolina legislature likely included both terms in order to align itself with the larger movement and note that all procedures, either classified as sterilization or asexualization, were legal.

Junius Wilson, a patient at the State Hospital for the Colored Insane in North Carolina, was one of twelve men asexualized by castration under the 1929 law. Wilson, a deaf African American man was classified as “feebleminded” because he did not use traditional sign language and could not communicate with doctors upon his arrival at the institution. Moya Woodside, an historian of the time in North Carolina, stated, “Castration was performed on men of a vicious type, criminals guilty of attempted rape, and those who were a problem in the hospital, since it is thought to quiet them down and make them easier to handle.” Wilson fell into this distinction. He was a young, deaf man in an institution who lacked communication skills and the resources to learn to communicate. He was seen as dangerous and was castrated in order to not only control his ability to reproduce, but to also make him more docile for the hospital workers to handle. Efficiency and ease of work was more important under the 1929 law than human rights and treating patients.

Ultimately, the law was challenged in North Carolina because of the lack of notice and lack of appeals process. The Supreme Court of North Carolina declared the law unconstitutional in February 1933. In Brewer v. Valk the Supreme Court of North Carolina declared the 1929 law unconstitutional in the sterilization case of Mary Brewer.

This was the first challenge to the 1929 law. The record submitted in the case of her sterilization stated:

The record discloses harrowing things in regards to this woman. “Mary Brewer was born in Greensboro, in 1905. She was the oldest of a family of 12 children, one of whom died of meningitis. She went to work at the age of ten years in a hosiery mill, from there to a cigarette factory and then to a knitting mill”…. She married early in life. As to her husband and father: “We have tried to reinstate the family and tried to get Mr. Brewer to work. When he worked he didn’t put his money into the proper sources; he would drink and gamble.”

This description does not indicate any medical or mental condition, only the social circumstances of the family. It should also be noted that the descriptions of the husband are more derogatory but it was the wife, Mrs. Brewer, who was selected to sterilize. The decision went on to state, “There is nothing in the record reflecting on the virtue of Mary Brewer…. The husband is left out of the picture, the lone woman is the burden-bearer.”

The case openly admitted that the virtue of Mrs. Brewer was not in question but she was still the load-bearer of the household. Mary Brewer’s gender became the deciding factor in her sterilization. Mary Brewer was not selected for sterilization because of her mental or physical state; she was selected because of her social status and her status within the home. Even in its earliest stages, the program targeted women over men and sought to control their bodies and their sexuality.

The North Carolina Supreme Court struck down the 1929 law, but only because the law lacked notice and an appeals process for the patient. The Court was not critical of the legal sterilization of willing or unwilling citizens. Because “no provision in the statute giving a person ordered to be sterilized notice and a hearing or affording him the right to

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64 “Sterilization Law Held Invalid by Supreme Court,” Raleigh News & Observer, February 9,1933, 1.
65 Brewer v Valk, 204 N.C. 186 (1933), 190.
66 Brewer v Valk, 204 N.C. 186 (1933), 191.
appeal to the courts” existed, the law was invalid and Dr. Valk could not sterilize Mary Brewer.67

The opinion relied on three authorities: the Fourteenth Amendment of the United States Constitution, Article I Section 17 of the Constitution of the North Carolina, and legal precedents set on property rights. The focus of the judges in this case was the due process clause of the Fourteenth Amendment. Article I, section 17 of the North Carolina constitution states, “No person ought to be taken, imprisoned, or disseized of his freehold, liberties or privileges, or outlawed or exiled, or in any manner deprived of his life, liberty, or property but by the law of the land.”68 The Court also states that property rights due process “requires a forum with notice and a hearing. It goes without saying that the same must apply to human rights. If the Constitution and laws in relation to due process - notice and hearing which undoubtedly apply to a material thing, they should more so apply to the human element.”69 While the legality of state-sanctioned sterilization is not called into question, the Court does specify the need for an appeals process for the law to be constitutional. The opinion speaks of the high need for the same safeguards that protect property rights should also apply to human rights. The Court did not, however, view state sanctioned coerced sterilizations as an infringement on human rights. The only portion of the 1919 law targeted by the Court was the process by which sterilizations occurred. Sterilization itself was affirmed on both the state and national levels, only questions of procedure will given attention.

67 Brewer v Valk, 204 N.C. 186 (1933), 190.
68 Brewer v Valk, 204 N.C. 186 (1933), 189.
69 Brewer v Valk, 204 N.C. 186 (1933), 191
The defendants, Dr. Valk, Board of County Commissioners of Forsyth County, and Mary Brewer’s legal guardian, W.T. Wilson, contended that the power of the state to order sterilizations for citizens falls under the police powers of the state. They cited Reed v. Engineering Company, “Each state has the power therefore to regulate the relative rights and duties of all persons, individuals, and corporations, within its jurisdiction, for the public convenience and the public good.” While the state does hold police powers to care for the “public convenience and public good,” individuals right to due process of law could not be forgotten. The North Carolina Court upheld the idea that sterilization did fall under the state’s jurisdiction granted by the idea of “public good.” The only criticism came when the state took away an individual right – the right to due process. The Supreme Court of North Carolina did not see the sterilization process as taking away any rights of the individual because it was considered a valid use of the state’s police powers to carry out such legislation. The Court does cite the 1927 United States Supreme Court decision in Buck v. Bell as legal precedent in favor of sterilization with an appeals process built into state law. Text from the Buck v. Bell decision also appears in an article in the Raleigh News & Observer on February 9, 1933, the day after the Brewer v. Valk decision was handed down by the North Carolina Supreme Court.

While the article does not overtly criticize the Brewer v. Valk decision, it does state, “The statute was held defective in that it does not provide for a notice to and hearing of the person to be sterilized, although numerous other safeguards were placed in the statute.” The article’s reference to “numerous other safeguards” in the statute

70 Reed v. Engineering Company (188 N.C. 42, 1924) cited in Brewer v Valk, 204 N.C. 186 (1933), 190.
71 “Sterilization Law Held Invalid by Supreme Court,” 1.
indicates that the opinion of the court was thought to be unnecessary. Public opinion was favorable towards sterilization. The opinion was seen as a hindrance to an otherwise successful process.

The article states that 42 sterilization procedures had been conducted under the law since 1929.\(^{72}\) It also notes that 72 applications for sterilization had been received and the Board approved 55; at the time of the case, 42 sterilizations of the 55 had been performed.\(^{73}\) There is no released record of why 17 applications were rejected by the original board.

The numbers reflected in the *Raleigh News & Observer* article conflict with a report made available from the same time period. The report shows that 49 operations were conducted from 1929 until 1932. Of the total operations performed on men, 1 patient underwent a vasectomy and 12 underwent castration. Of the total operations conducted on women, 27 had their fallopian tubes removed through salpingectomy and 9 had their ovaries removed through ovariectomy.\(^{74}\) Even at this early stage, this shows that women were the primary target of the eugenics program; 36 of the 49 operations were performed on women.

The North Carolina Supreme Court’s decision was handed down on February 8, 1933. By April 5, 1933, the North Carolina General Assembly had passed a revised sterilization law in response to the court’s opinion in *Brewer*. The legislature was so dedicated to the sterilization cause that it had legislation written, passed, and in effect in two short months. The expedited legislative turnaround indicates the body’s commitment

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\(^{72}\) “Sterilization Law Held Invalid by Supreme Court,” 1.
\(^{73}\) “Sterilization Law Held Invalid by Supreme Court,” 1.
\(^{74}\) Operations Under 1929 Sterilization Law (Date unknown), North Carolina Digital Collections.
to sterilization for the “public good.” Each sterilization law expanded in detail and length. The 1919 North Carolina sterilization law was one half page. The 1929 law expanded to one page. The final sterilization law in 1933 was passed with eight pages. The 1933 law created the new Eugenics Board of North Carolina and expanded the reach of sterilizations.

Similar to previous laws, administrators from established mental institutions and prisons or family members of the patient could initiate the sterilization process. In cases where the patient was not in a state institution, “the superintendent of welfare or such other officer performing in whole or in part the functions of such superintendent of the county in which the … individual to be sterilized is a resident, shall be prosecutor.”\textsuperscript{75} This clause gave the ability to initiate sterilization petitions to officers of the county. This acknowledgement of power of the county officers led many counties to use social workers to monitor and seek out residents to sterilize.

The law set forth four criteria for sterilization. Only one of the criteria had to be met in order to sterilize an individual. The following circumstances were set forth for sterilization:

1. Mental, moral or physical improvement of the patient, inmate, or non-institutional individual
2. Best interest of the public good
3. Without operation, the individual is likely to produce children who would have a mental, physical, or nervous disease
4. The request comes from the legal guardian or next of kin\textsuperscript{76}

Meeting only one of the criteria could be a trigger for a sterilization petition to be initiated by any party. If the only benefit of the sterilization was the “public good” then

\textsuperscript{75} Public Laws and Resolutions, State of North Carolina, Session of 1933, 346.\textsuperscript{76} Public Laws and Resolutions, State of North Carolina, Session of 1933, 346.
the considerations of the patient as a human being could be disregarded. The language stresses the importance of society over the most basic individual rights of a person as human being. The decision about an irreversible operation that would have a lasting impact on the remainder of the patient’s life was taken away from the patient herself or himself. Groups targeted by the Eugenics Board – those with disabilities, low socio-economic status, or racial minorities – were dehumanized to a point that they were just another tool to be used by the government instead of individuals with personal autonomy.

Records show that in some cases a guardian was appointed for the purpose of sterilization. Elsie Mitchell, a resident of Forsyth County, was recommended for sterilization by the Forsyth County Welfare Department. A petition was signed on November 26, 1940 to appoint Mitchell’s aunt, Willa Smith, as her Guardian Ad Litem.

The petition to appoint a guardian came after the request for sterilization by the county welfare department. The petition states,

The Forsyth County Welfare Department has recommended to the Eugenics Board of North Carolina that Elsie Mitchell, a mentally defective person be sterilized; that said Elsie Mitchell has no living father or mother, and that her closest relative is Willa Smith, an aunt on the maternal side; that Willa Smith is well acquainted with said Elsie Mitchell and said Willa Smith is a fit and proper person to act as Guardian Ad Litem. 77

Willa Smith was appointed to act as guardian for Elsie Mitchell after Mitchell had been examined by the Forsyth County Welfare Department. This is just one example of how the process could progress for a resident of a county outside of an institution or prison. A guardian could be appointed in cases where county officials favored sterilization.

77 Petition for the Appointment of Guardian Ad Litem for Elsie Mitchell a Mentally Defective Person, North Carolina State Archives, Forsyth County Miscellaneous Records, C.R. 038.928.9.
The 1933 law set for the criteria to be considered for sterilization and also created the Eugenics Board of North Carolina to administer the program and keep the records. While previous laws created enforcement mechanisms on paper, the 1933 law was the first that created a government entity whose sole purpose was to administer sterilizations and it actually did so. The Board was comprised of the Commissioner of Public Welfare of North Carolina, the Secretary of the State Board of Health of North Carolina, the Chief Medical Officer of an institution for the insane or feebleminded not in Raleigh, the Chief Medical Officer of the State Hospital at Raleigh, and the Attorney General of the State of North Carolina. The law also created a position on the Board to be filled from outside of the dictated members. A secretary was selected to serve the board, keep the records, and act as an executive member.

While the members were the board members, each could “delegate his power to act as a member of said board to an assistant.” Records indicate that many of the members did send junior staffers to serve the board in their place. The assistants sent in place of board members did not receive any special training to best decide cases of such grave importance. The law dictated the members of the board but also allowed them to substitute assistants with absolutely no training in medicine or childhood development. This is one of the most appalling aspects of the board itself. The individuals singled out for sterilization did not even warrant enough consideration to have trained professionals making decisions that could have life threatening and emotionally scarring consequences. This makes it clear that to the members, anyone could make the decision to sterilize, and

78 Public Laws and Resolutions, State of North Carolina, Session of 1933, 346.
79 Public Laws and Resolutions, State of North Carolina, Session of 1933, 347.
80 Public Laws and Resolutions, State of North Carolina, Session of 1933, 346.
the patients did not deserve any more regard than a junior assistant that could be spared to attend the meetings. The victims were dehumanized and marginalized to such a point that they did not warrant the full attention and care of the Board.

Because the members could and often did send in replacements, there was a constant change of members in attendance making these decisions. This gave the secretary immense power in conducting Eugenics Board affairs because it was the only permanent position on the board. The board secretary received the petitions from across the state and would “condense them to one-paragraph summaries for the board’s consideration.” 81 The secretary controlled the information that was presented to the board, how it was presented, and who would ultimately be selected for sterilization. This secretary was not accountable to any outside entity. Because of the seemingly procedural position, the secretary controlled the actions of the board because he or she could dictate what information the board received on any petition.

The 1933 law created the procedures of the Eugenics Board and also established what information had to be included in the petition. The law required that the medical history must be provided “so far as it bears upon the recommendations for asexualization or sterilization, and sets forth the particular reasons why asexualization or sterilization is recommended” and that a physician must verify the history. 82 If the patient was a part of an institution or prison then the superintendent of the facility was required to submit the information; if the patient was outside of an institution then the burden fell to the family. A full medical history was not required for the board to review, only information that the petition-initiating party saw as valuable to the Eugenics Board’s decision.

81 Begos et al., Against Their Will, 32.
82 Public Laws and Resolutions, State of North Carolina, Session of 1933, 347.
In addition to the medical history of the patient, a social history was also required for the board’s review. The law states,

The petition shall further contain an adequate social case history of circumstances surrounding the inmate’s, patient’s, or individual resident’s life in so far as such circumstances may bear upon the question as to whether inmate, patient, or individual resident is likely to procreate a child or children.83

The medical history of a patient and any mental illness he or she may have was not the only consideration for the board. If the legislature was purely focused on the mental health of society through future generations then a social case history would not have been necessary to the decision making process. The social status, economic states, and racial classification of the patient mattered because certain people and genes were looked down upon. The social case history requirement indicates the legislature and Eugenics Board’s aim to target certain social groups as well as patients with certain illnesses.

The 1933 sterilization law does address the unconstitutional aspects of the previous law. Under the amended statute, all persons must receive notice and have fifteen days to appeal to the Superior Court of the county of their residence.84 An appeal “shall automatically and without more stay proceedings under the order of the said board until the appeal be completely determined.”85 The Superior Court of each county then has the ability to affirm or reverse the decision made by the Eugenics Board. The appeals process was added into the legislation to address North Carolina Supreme Court’s ruling in Brewer v. Valk but did not realistically alter the appeals process. The short time frame of only fifteen days limited the number of appeals because there was not adequate time to mount a full appeal. To successfully appeal a sterilization petition, “they had to show that

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83 Public Laws and Resolutions, State of North Carolina, Session of 1933, 347.
the board did not follow the law or that the reasons for sterilization were inadequate. Given the broad scope of the law and judicial deference to medical staff and to agencies, this was an almost impossible task. “86 Very few of those targeted by the legislation knew about the option of appeal and even fewer had the resources necessary to mount an appeal.

While the law addressed the lack of notice and opportunity for appeal, it still contained some appalling requirements. The Eugenics Board of North Carolina held the responsibility for choosing the type of operation that would be performed on each individual. Operations used by the board include castration, vasectomy, ovariectomy (removal of ovaries), or salpingectomy (removal of the Fallopian tubes). While the Eugenics Board reported that the sterilizations were all done by choice, by law, the choice was taken away. Patients or inmates could be coerced into having an operation then be further dehumanized by not having the choice of procedure.

Within six months of passage of the 1933 sterilization law, the Eugenics Board ordered three sterilizations. The Raleigh News & Observer reported on October 21, 1933, “Two of the cases considered yesterday were those of persons now inmates of state institutions while the third was an non-institutional case. Two of the persons were women and the third a man.”87 The article does not state how many cases the Board considered, only that these three were selected. The article also records the attendance of those from the Board who were present for the decision to sterilize. Of the five required members of the Eugenics Board under Section 4 of the 1933 law, only two were present for the first

decisions handed down by the Board. The Superintendent of the State Hospital at Raleigh and the Superintendent of the Hospital at Goldsboro were the only two Eugenics Board members who did not send someone else in their place. The Commissioner of Public Welfare sent the State Superintendent of Public Welfare, the Secretary of the State Board of Health sent a “State Health Officer,” and the Attorney General sent the Assistant Attorney General.\textsuperscript{88} The first decision for sterilization was made by a majority of delegated members. Replacements were sent by the officials to make the irreversible decision for three human beings to be sterilized without consent. The two women and one man did not even warrant enough consideration for the original members of the board to attend the meeting. Records are sealed that show the attendance record for subsequent meetings by the board by North Carolina Government Statute 35-53.\textsuperscript{89}

The public good argument was utilized to justify the continued sterilization programs implemented throughout the country. Racism by dominant whites and fear of threats by minority groups not only allowed for these human rights violations but also prompted little to no public outcry at these events. The eugenics movement of the twentieth century produced a legal climate in which forced sterilizations were met with little concern from state governments and the general public.

\textsuperscript{88} “Board of Eugenics Orders Sterilization in 3 Cases,” 5.
\textsuperscript{89} While exact text of North Carolina General Statute 35-53 cannot be found, the State Archives of North Carolina lists this law as the restriction placed on certain records in its online database.
CHAPTER 4

THE INFLUENCE OF INDIVIDUALS IN THE NORTH CAROLINA EUGENICS MOVEMENT

The formal institution created by the 1933 law allowed for widespread personal initiative to affect the sterilization process for marginalized groups in society such as low income people, racial minorities, and the mentally disabled. The Eugenics Board of North Carolina created by the legislature in 1933 was an oversight committee that allowed county public officials to determine the strength of the sterilization movement within their own jurisdictions. County officials, board members, and politically active citizens changed the sterilization narrative in North Carolina by pushing eugenicist policies and expanding the program in the post-World War II Era. Social workers, welfare department directors, and local philanthropists contributed time and resources to the eugenics movement in North Carolina.

The sterilization program in North Carolina was maintained led by the legitimate entities outlined in the 1933 law: the Eugenics Board of North Carolina including the Executive Board Secretary, the Department of Welfare, and social workers on the county level. But outside forces worked to strengthen the eugenics program in North Carolina as other states were decreasing their programs besides the individuals outlined by law. The Human Betterment League was founded by James Hanes and included the local elite of Winston-Salem. Hanes was the chairman of the board of directors of Hanes Hosiery, now
named Hanes Brands. He had the personal connections and financial capital to offer resources to the declining sterilization program in North Carolina. Hanes provided the financial support to Professor A.M. Jordan, a professor at the University of North Carolina at Chapel Hill, who wanted to test the IQ of schoolchildren in Winston-Salem. Jordan tested 95 percent of elementary-school students and decided that an IQ of 60 was the cutoff between “retarded and normal.” Without the funding offered by Hanes, the professor would have struggled to complete the tests on such a large number of students.

The Human Betterment League of North Carolina sought to educate all citizens on the benefits of sterilization for the whole of society. By November 1947 the League had distributed 40,000 pamphlets – 30,000 to college students and 10,000 to public officials – extolling the benefits of the sterilization program. The mailing came in the form of a question and answer pamphlet targeted to make citizens “sterilization conscious” with questions such as “Is it possible for a sterilized man or woman to lead a normal sex life?” The League saw the lack of knowledge on the subject of sterilization as the main obstacle standing in the way of a robust eugenics program in the state.

Elsie Wulkop, the secretary for the League, stated that a more “sterilization conscious” public was necessary “so that the program may gain wider acceptance by persons of less understanding and likewise of less influence.” The pamphlet distributed by the League also stated, “North Carolina is a leader among the progressive states which

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91 Begos et al., Against Their Will, 87-8.
92 Begos et al., Against Their Will, 88.
94 Riley, “Pamphlets Distributed to Spotlight State Sterilization,” IV 3.
95 Riley, “Pamphlets Distributed to Spotlight State Sterilization,” IV 3.
have provided for the legal framework for such desirable social action. We have the law! It is up to every North Carolinian to understand and support it.”

This article did not just report on the Human Betterment League. It highlighted and pronounced the success of the North Carolina eugenics movement. The Human Betterment League supported the mechanism created by the 1933 legislation and used it to encourage others outside of institutions to actively work to sterilize people because of their undesirable genes. The Human Betterment League of North Carolina and the Eugenics Board of North Carolina were able to grow their programs because of the financial support of Dr. Clarence Gamble, of the Proctor & Gamble fortune.

James Hanes brought Dr. Clarence Gamble into the Human Betterment League. Dr. Gamble had been advocating since the 1930s for sterilization and contraceptives but “few states were willing to consider the kind of aggressive program that he wanted.” North Carolina was a welcoming climate where already elitist tendencies could be expanded upon to use sterilization to target low socio-economic citizens. Dr. Gamble was controversial in his time but George Lawrence, a superintendent in the Department of Public Welfare in 1947, stated, “Here in North Carolina I am quite convinced that we are greatly indebted to Dr. Gamble, not only for the financial assistance he has provided, but for the very flexible policies he has consistently advocated for in the past ten years and more.” His influence cannot be denied today but he gained respect as a eugenicist in North Carolina in his own time.

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96 Riley, “Pamphlets Distributed to Spotlight State Sterilization,” IV 3.
97 Riley, “Pamphlets Distributed to Spotlight State Sterilization,” IV 3.
98 Begos et al., Against Their Will, 73.
99 Hanson and King, Sterilized by the State, 243.
Dr. Gamble praised the North Carolina program and held it as an example for other states to emulate. He called the program in North Carolina “humane” and praised the legislature for creating the position of full-time Executive Board Secretary to the Eugenics Board of North Carolina.  

Gamble stated that one difficulty “lies in securing the consent of the patient without which the operation is seldom performed. All too often he or she fears the loss of sexual powers. When it is realized that no physical or mental change is involved, the protection is usually gladly accepted by the mentally ill or defective person.” He reduces the victims and their desire to reproduce down to just a fear about sexual desire and denies their agency. He completely ignores the possibility that those that he deems as mentally defective have the ability to chose to reproduce for whatever reason. Dr. Gamble continually uses the terms “protection” and “preventative medicine” in referencing sterilization procedures conducted on individuals. These terms are more vague and do not illicit an immediate response like “sterilization” might if used in the same context. A true eugenicist, Gamble truly believed the program in North Carolina was an example to the rest of the country, which is why he donated his time and resources to strengthen the movement.

In a January 1948 article in HYGEIA, the Health Magazine of the American Medical Association, Gamble outlined the reasons to support sterilization. The article was sent out as a mass mailing by the Human Betterment League of North Carolina. Dr. Gamble downplayed the views of those who disapprove of sterilization by questioning the logic in the criticisms. He stated, “They have heard of the barnyard form of

101 “N.C. Sterilization Laws Praised by Boston Doctor,” 25.
102 “N.C. Sterilization Laws Praised by Boston Doctor,” 25.
sterilization … and they believe that human sterilization must be accomplished in the same way.” He described the medical operations that are performed on patients in such a way as to desensitize the reader against the result. In conclusion Dr. Gamble addressed the idea of coerced sterilization,

The laws of some stated make it possible to perform the sterilization operation in certain instances where it is for the public good (usually hereditary mental afflictions) without the consent of the patient or the patient’s family. In practice, however, this is almost never done as the operation is now recognized as a protection, not a sacrifice.

Gamble supports coercive sterilization and assumes that since he has made no sacrifice, that none has been made. This further exemplifies the dehumanization of the victims. To Gamble, the victims have made no sacrifice and should not feel as if they have. Mailings such as this were sent out periodically in order to gain further public support for the Human Betterment League and the eugenics program in North Carolina.

In 1950, the Human Betterment League sent out another mass mailing entitled “You Wouldn’t Expect…”. The picture book format and simple language suggests that the League sought to appeal to citizens of all ages to gain support for the eugenics program. The pamphlet states,

You wouldn’t expect a moron to run a train,  
Or a feebleminded woman to teach school.  
You wouldn’t want the state to grant driver’s licenses to mental defectives,  
Nor expect such defectives to handle money wisely.  
You wouldn’t give a responsible position to a person of little intelligence,  
Yet each day the feebleminded and the mentally defective are entrusted with the most important and far reaching job of all ---  
The job of PARENTHOOD! … The creation of new life and the responsibility of rearing children  
Having a healthy baby is the most important of all jobs –

104 Clarence Gamble, “Why Fear Sterilization?”
It is also important that babies have good physical care and loving, thoughtful guidance. 105

In simple terms, this pamphlet set out the objective of the League as well as the underlying prejudices and eugenicists philosophy that motivated the League to victimize whole groups of North Carolina society. The pamphlet depicts parenthood as a service job equal to teaching, handling money, or operating a train. Parenthood is a job that serves all because if done correctly then society will benefit. This writing asserts that anyone labeled as a moron, defined as “a person whose mind never develops beyond that of a ten year old child,” is incapable of doing menial service jobs and could not possibly raise a child in a loving home. 106 Only those defined by the state as healthy individuals should be given the privilege of raising a family. These ideas continued on throughout literature and newspaper articles for next two decades in which there was no opposition to the North Carolina program and no deeper understanding or remorse for coercing thousands of innocent victims to be sterilized against their will.

The Human Betterment League had an immense impact on the strength and longevity of the eugenics program in North Carolina. The League funded the program and released propaganda to build public support for the sterilization movement. They targeted all walks of life from college students to families by sending out mailings and appearing in local newspapers. Individuals such as James Hanes and Dr. Clarence Gamble used their power, influence, and resources to spread the ideas of the movement

106 The Human Betterment League, “You Wouldn’t Expect…”
and create a climate in which sterilizations could continue on even after other states concluded their programs.

The Human Betterment League had a presence across the entire state of North Carolina. While all counties participated in the sterilization program, Mecklenburg County (which contains the city of Charlotte) far surpassed any other county from June 1946 to June 1968, the peak years for sterilizations in the state. Mecklenburg County conducted 485 sterilizations during the time; the second closest county conducted 167 sterilizations in Guilford County. Counties varied greatly in their efforts to sterilize citizens. A map of the counties with their respective sterilization numbers can be found in Appendix A. There is a slight correlation between location of the county and whether or not surrounding counties had the same sterilization rate. Counties where sterilization numbers were high had local welfare departments that devoted time and resources to the sterilization movement.

Counties had the ability to decide the intensity of the program within their jurisdiction. Mecklenburg County was marked by a particularly active welfare director, Wallace Kuralt, who served from 1945 to 1972. Kuralt was very vocal about his belief in sterilization as a way to save tax payer dollars and eliminate poverty in “low mentality-low income families which tend to produce the largest number of children.” Kuralt used similar language found in Justice Holmes’s decision in Buck v. Bell. He stated that

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108 “Peak of Eugenics Program in North Carolina July 1946 – June 1968.”
“generation after generation of children born mentally deficient” would cause untold harm to the health of society as a whole. 111 This language mirrors Holmes United States Supreme Court decision that stated, “Three generations of imbeciles are enough.”112 This shows that while each state had the ability to create its own policy, policies and actions did not exist in a vacuum. Kuralt and the entirety of Mecklenburg County were affected by the U.S. Supreme Court decision from 1927. The use of similar language indicates the alignment with the eugenics movement as a solution to perceived social problems.

Wallace Kuralt was the director of the welfare department but he was not the only active person in the county working to sterilize citizens. Dr. Elizabeth Corkey worked closely with the welfare department to sterilize young women. Dr. Corkey was an obstetrician in the Health Department’s local public maternity clinic.113 As young, low-income women came to the clinic to get basic medical attention, they would be flagged after having so many children.114 Becky McNair, a caseworker who worked with Dr. Corkey, describes her as a caring person while also emphasizing her place as a leader in the local sterilization push.115 Of the 430 petitions during the Kuralt-Corkey era in Mecklenburg County, only six were denied by the Eugenics Board with four more with unclear resolutions.116 Kuralt and Corkey both believed in the movement that they worked to promote. The transgressions of both have been forgotten and instead community members remember them fondly in spite of their indefensible actions. The public still associates their actions to solutions rather than human rights violations. The

111 Helms and Tomlinson, “Wallace Kuralt’s Era of Sterilization.”
113 Helms and Tomlinson, “Wallace Kuralt’s Era of Sterilization.”
115 Helms and Tomlinson, “Wallace Kuralt’s Era of Sterilization.”
memory of these individuals reflects on their efforts instead of the victims who suffered under their leadership. Today the Department of Social Services building located in Charlotte/Mecklenburg County is named the Wallace H. Kuralt Centre. Wallace Kuralt’s leadership and involvement in the Mecklenburg County sterilization program has been forgotten and he is remembered and immortalized as a champion for the poor.

These local social workers exerted dominance over the sterilization process in every county across the state of North Carolina. No other state in the United States put such great power in the hands of officials outside of institutions and prisons. Anna Krome-Lukens, a Ph. D. student at the University of North Carolina at Chapel Hill, conducted research on the role of women within the movement in North Carolina.

Krome-Lukens states

Female social workers, by contrast, strongly supported the sterilization programs. As the bulk of the state’s corps of social workers, they were responsible for the vast majority of non-institutional sterilizations, most of which targeted women…. The language of sterilization petitions suggests that field workers and their superiors were more concerned with the economic costs of caring for the feeble-minded and their offspring… than helping clients control their reproductive lives…

Both male and female workers pushed the eugenics movement forward in North Carolina. Males were not the only workers intent on sterilizing females; females also played a large role in the disproportionate number of women victimized by the 1933 legislation.

Mecklenburg County sterilization numbers over the course of the program were increased because of strong leadership within the welfare department and the publicly funded hospitals. The heightened numbers reflect the public opinion of the local eugenics

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movement. In other counties, social workers in the welfare department worked to identify and push sterilization for citizens they personally thought needed the procedure. The 1933 eugenics law stated that petitions to the Eugenics Board of North Carolina were required to contain the medical history of the patient in question as well as the social history of the patient. The appropriate mental institution was to provide the medical history of inmates; but in the case of citizens outside of institutions, family members were responsible for reporting the medical history of patients.\textsuperscript{118} The law also requested that a social history be provided to the Board for consideration, stating,

\begin{quote}
The petition shall further contain an adequate social case history of the circumstances surrounding the inmate’s, patient’s, or individual resident’s life in so far as such circumstances may bear upon the question as to whether said inmate, patient, or individual resident is likely to procreate a child or children.\textsuperscript{119}
\end{quote}

The patient’s medical history was not the only consideration for sterilization. While arguments were made about the genetic issues related to mental illness, social workers also created cases for petitions solely based on the social circumstances of individual residents. This indicates that the General Assembly did not only have medical considerations in mind when passing the sterilization law in 1933. The law does not require a full social history be reported, only that circumstances that were relevant to the sterilization had to be reported. Social workers and other officials working for the Board were not required by law to collect a conclusive history, only that information they deem to be necessary to make a decision about the sterilization of the patient.

The profile of patients and citizens targeted by the program shifted over the time period from 1929 to 1974. During the 1960s, “The majority of sterilization petitions were

\textsuperscript{118} Public Laws of 1933, 347.
\textsuperscript{119} Public Laws of 1933, 347.
for young black women whom social workers and psychologists often labeled ‘feeble-minded’ on the basis of scant evidence.”

By the late 1960s, African Americans made up “60% of those sterilized even though they made up a quarter of the population.”

Even though African Americans did not make up the majority of those sterilized during the duration of the eugenics program in North Carolina, they were disproportionately targeted and made up 39% of the total sterilizations. From 1929 to 1968, 71.4% of all sterilizations stated “Feeble-minded” as the reason for the operation. Minutes from the Eugenics Board during this time period indicate that the Board did not need extensive evidence to decide on sterilization. One petition in 1960 read, “She seems lazy and unconcerned,” another in 1962 stated, “… while in school attempted to write love letters to boys she imagined were interested in her.”

North Carolina social workers were unique in the United States because they had the ability to initiate sterilization requests. The social workers would target families with women on social welfare programs found to be of childbearing age. The potential burden on society was used as the reasoning for sterilizing otherwise healthy, young women. Social workers had the ability to select cases based on personal choice. North Carolina was the only state in which individual social workers had the ability to initiate petitions for sterilization; this facet of the program also led to unreliable data over the period because the social workers were not bound by any set code.

120 Begos et al., Against Their Will, 30. 
121 “Eugenics/Sexual Sterilizations in North Carolina.”
122 “Eugenics/Sexual Sterilizations in North Carolina.”
123 Begos et al., Against Their Will, 9. 
124 Begos et al., Against Their Will, 9. 
125 Railer, “Sign this or else…” 
126 Begos et al., Against Their Will, 12.
Edwin Chapin was a caseworker in the Mecklenburg welfare department then succeeded Wallace Kuralt as the welfare director in 1972 when Kuralt retired. Chapin stated, “I never participated, that I recall, in a training course about sterilization.”

Social workers did not receive any medical training. Chapin also stated that during his time as director, he had one social worker who presented sixty petitions, totaling “his entire caseload.” Chapin does not mention any questioning of the social worker who was clearly operating on a personal agenda. He does admit that some of the victims may have been taken advantage of unfairly. It was up to each individual social worker to set guidelines and make choices about who to bring up to the Eugenics Board of North Carolina.

While almost all of the records from the Eugenics Board have been sealed, some biannual reports from the Board are available to examine. Reports from 1929 to 1940 show that the racial split favored white citizens, 74 percent white and only 21 percent were African American. It is clear that the program’s origin was founded on the idea that “the greatest eugenic threat to mainstream America was young, lower-class whites, especially women…” This idea continued on and strengthened as the program progressed, leading to a greater number of women than men being sterilized in later years. From 1929 to June 30, 1947, 1901 sterilization operations had taken place. Of the 1901 sterilizations, 1213 originated in state or county institutions. Only 688 petitions

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127 Begos et al., Against Their Will, 12.
128 Begos et al., Against Their Will, 12.
129 Begos et al., Against Their Will, 13.
130 Begos et al., Against Their Will, 16.
132 Woodside, Sterilization in North Carolina, 191.
originated from county welfare departments. Because of limited records, it is difficult to find similar data for the period from 1947 to the end of the program in 1974. But Johanna Schoen does state, “The proportion of noninstitutional sterilizations rose from 23 percent between 1937 and 1951 to 76 percent between 1952 and 1966.”\textsuperscript{133} The 1966–1968 biannual report reported at 99 percent of all sterilizations were performed on women and 64 percent of those women were African American.\textsuperscript{134} Certain trends did emerge over time. From the beginning of the program, women were more likely than men to be targeted for sterilization. The racial divide did invert as the number of non-institutional petitions rose from 1947 until the end of the program in 1973. In the beginning, those with mental illnesses were perceived as the greatest threat to a robust society. As time went on the threat of a burden on society by low income women, typically unmarried and a part of the racial minority, became the greatest threat. This is reflected in the increased numbers of African American, non-institutional victims.

In the program’s infancy in North Carolina, the focus had remained on mental health with a majority of the petitions created out of mental institutions. The later movement in the state transformed into a tool used by local welfare departments to target low income citizens outside of institutions and prisons in order to fulfill a classist mentality. Floyd R. Evans, the president of the North Carolina Public Welfare Association from Goldsboro, stated in a 1967 Raleigh News & Observer article, “We believe that the best way to fight poverty is to prevent children from being born in

\textsuperscript{134} Begos et al., \textit{Against Their Will}, 16.
poverty.”\textsuperscript{135} The article illustrates the idea of the time that poverty was like a social illness, one that could be cured through the sterilization of those already considered poor. Officials such as Evans tried to frame sterilization as a solution by focusing on the good of the victim and the potential children born in poverty. This blatant control of individuals in poverty was used to quickly accomplish the goals of those in government. They ignored all other alternatives such as expanded programming or working to help those in poverty gain a better standard of living. Welfare workers and county leaders such as Evans and Kuralt defined the issue – poverty – and had the sole ability to craft a solution – sterilization – with no check to their power.

In the case of Nial Ramirez, the “offer” of sterilization came with dire consequences for her family. At the age of 18, Ramirez gave birth to her first child and was met by a social worker that informed her that the welfare support for her siblings would be cut off if she refused to have the operation.\textsuperscript{136} This occurred in 1965. Not only was Ramirez poor and a female, she was also African American. In speaking about the caseworker who visited her house, Ramirez stated, “I don’t know if she (Howland) hated black people or what…. But she had this attitude, this nasty way of talking. Like you’re nobody and she is somebody. She (was) God, and I’m a little rat running around on the floor.”\textsuperscript{137} The victims had been dehumanized to such a point that the social workers did not even deem them worthy of human decency. The social workers would target families with women on social welfare programs found to be of childbearing age. The potential burden on society was used as the reasoning for sterilizing otherwise healthy, young

\textsuperscript{136} Railer, “Sign this or else…”
\textsuperscript{137} Begos et al., \textit{Against Their Will}, 50.
women. One social worker made similar comments about the attitudes and beliefs of social workers that had an impact on their daily decisions. Elsie Davis, a Fayetteville social worker stated in an interview in 1989, “The expectation was that black people were not able to take care of themselves… They were illiterate, retarded. So it was the consensus that these women don’t have any rights. So we can say to them that they can’t have any children.” The right to reproduction was intrinsically tied to economic status and education level. If either condition was not met, then reproduction was no longer seen as a human right.

The lack of documentation on the efforts of the social workers hinders research as to the cause in the racial shift over the period of the 1950s and 1960s. Official records kept by the Eugenics Board itself have been sealed and are no longer available to the public. This makes analysis of the root causes of the program and the targets difficult to identify. However, it is clear that social workers were authorized to exert an untold amount of influence in selection of sterilization of victims over the course of the 1950s and 1960s.

Members of the Eugenics Board were able to exert influence on the sterilization process similar to that of county officials and social workers. The membership of the Eugenics Board of North Carolina was set by the 1933 North Carolina law but they had the ability to send replacements to the meetings. The executive board secretary was the permanent position was created to officiate the meetings, keep the records, and lead the Board. The executive board secretary received the petitions, summarized the information, and selected the information presented to the Board for review. This gave wide power.

138 Begos et al., Against Their Will, 50.
and influence to the secretary to control the flow of information and dictate the direction of the board.

One such executive secretary was Sue Casebolt. Casebolt served as the third Executive Secretary to the Eugenics Board of North Carolina during the 1960’s. The Biennial Report of the Eugenics Board of North Carolina (July 1960 – June 1962) reported the admission of Casebolt as a development over the biennium. Cases approved by the Board under her tenure in part reflected her views on the purpose of the program. In 1965, the Raleigh News & Observer ran an article entitled “Sterilization of Retarded: ‘Society Benefits’” which offered an anecdote to explain the need for the sterilization program. The article stated:

Little five-month old Billy cries out from his play pen on the floor. He is hungry. He wants his bottle. His mother, busy with her nine other children, hears Billy crying, but pays little attention. She doesn’t really know why Billy is crying. Billy needs love and security but his mother can’t give it to him. She’s too busy with the other children. She is pregnant with her 11th child in as many years.  

This article uses a fictional story to sway readers into thinking this situation is the norm for sterilization victims and that the victims themselves seek sterilization. The article also included a statement from Casebolt, “Many people think the Eugenics Board just whisks people away, willy, nilly or why and think it is so terrible when it isn’t.” The article was printed near the end of the program but continues to reinforce the view that the Eugenics Board was only concerned with their distorted idea of the “public good” and had no concept of the human rights of those sterilized. For Casebolt and others of the era, the “public good” could be improved by eliminating low income families burden on other

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citizens. Their classist view held that these victims deserved to be sterilized because of their economic status and perceived drain on government spending.

The same article included statistics from the 1962 – 1964 biennium. It states that no sterilizations approved by the Board over the period were forced. Of the 521 operations, only 14 of the victims were men. Sue Casebolt rationalizes this vast discrepancy by stating, “Many husbands are willing for their wives to have the operation but wouldn’t consider it for themselves.” Casebolt does not discuss the wife’s consent, only the husband’s desires. This speaks to the generalization that married women must and do consent to the wishes of their husbands. Women alone held the burden of reproduction; men were eliminated from the responsibility and thus from the sterilization process.

Upon her selection, Sue Casebolt began a targeted campaign against young women stating in the board minutes in 1961,

I now propose to have as my objective as Executive Secretary to work to promote earlier use of the (sterilization) program; that is, after the first rather than third of (sic) fourth child, which would result in prevention of problems requiring staff time, money, and use of other needed community resources. To this plan to use all resources available to secure information as to persons who need to be offered the service.

The language in her statement is a deliberate tactic used to mask the coercion used by the Eugenics Board and all levels of petition-initiating parties. Casebolt spoke of targeting young women who have had at least one child while at the same time offering sterilization as a service.

143 Railer, “Sign this or else…”
These individuals changed the course of the sterilization program in North Carolina. Dr. Gamble and James Hanes were able to reinvigorate the sterilization program in the state during a time when the national eugenics movement was ending. The process created by the 1933 law allowed for welfare departments within counties to decide for themselves how far to take the program. They were empowered by the Eugenics Board of North Carolina and specifically the executive board secretary to target low socio-economic women during the second half of the program. These individuals took their own personal beliefs and imposed them on the wider public and victimized the powerless in North Carolina.
CHAPTER 5

THE END OF THE STERILIZATION PROGRAM IN NORTH CAROLINA

The program in North Carolina began with an emphasis on improving the racial stock of society and as a tool limit the number and influence of mental defectives. But the post-World War II movement gained new focus and instead targeted a different part of North Carolina’s population. The new focus became poor, unmarried women,

During the 1950s and 1960s eugenic sterilization became a way both to regulate undesirable sexual behavior and to control the size of state welfare rolls.... As a number of institutional sterilizations declined, a growing emphasis on poverty and sex outside of marriage drew the attention of the Eugenics Board to female welfare recipients who were having sex outside of marriage.144

As the North Carolina program came to a close, this marked difference in victims led to the disproportionate sterilization of women, minority, and non-institutional individuals.

The last documented sterilizations came in 1974. The Eugenics Board of North Carolina was not disbanded until 1977; at which time the powers of the Board were transferred to the state court system.145 In 2002 a formal apology was issued to the victims of the Eugenics Board and the North Carolina General Assembly repealed the eugenics legislation.146 The apology by Governor Gray Davis was provided via press

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144 Schoen, Choice & Coercion, 134.
release instead of being spoken to the actual victims of the eugenics program.\textsuperscript{147} This indicates the apology was not meant to open a discussion on the horrendous acts of the state, instead it was done out of duty through an avenue that would draw the least attention.

From 2003 until 2011, the legislature introduced various versions of legislation concerning the damages to be paid to the surviving victims but none were put into effect. Victims such as Nial Ramirez had presented their personal testimony to various committees and had nothing to show for their heartbreak. Ramirez states, “To me, it as a waste of time, because nobody did anything. It was a whole bunch of talk.”\textsuperscript{148} Talks had begun for compensation but those victims still alive were aging and there did not seem to be a resolution in sight. A government task force was created by Executive Order 83 on March 8, 2011 whose goal was to research ways to compensate the surviving victims of the Eugenics Board.\textsuperscript{149} Compensating victims became a realistic proposition once again after the task force recommended a series of payments as well as funding for education on the horrific movement in North Carolina.

In 2013, the North Carolina legislature passed Senate Bill 402, a budget bill that included appropriations for compensation of victims of the Eugenics Board of North Carolina. The law set aside ten million dollars to be divided between victims who submitted an accepted claim.\textsuperscript{150} It created a commission which created the rules and procedures of verified claims and created the North Carolina Office of Justice for Sterilization Victims.

\textsuperscript{148} Begos et al., \textit{Against Their Will}, 218-9.
\textsuperscript{149} “Preliminary Report to the Governor of the State of North Carolina,” A-3.
\textsuperscript{150} Senate Bill 402, General Assembly of North Carolina Session Law 2013-360.
When the compensation rules were set in place some victims were excluded from the pool who could potentially receive some form of compensation. The 2013 legislation defined a qualified victim as “an individual who was asexualized involuntarily or sterilized involuntarily under the authority of the Eugenics Board of North Carolina in accordance with Chapter 224 of the Public Laws of 1933.”\textsuperscript{151} Not all sterilization petitions were documented properly and submitted to the Board for review. In the case of Debra Blackmon, her sterilization was initiated by a visit from two social workers and labeled as a “eugenics sterilization” in her medical records in 1972.\textsuperscript{152} The social workers were given authority under the 1933 legislation to work within the welfare departments to initiate sterilization petitions and the social workers in Blackmon’s case operated under this grant of power. But the correct paperwork was not submitted to the Eugenics Board for approval, thus excluding Blackmon from reparations. The commission has been very clear that cases such as these do not comply with the rules set forth to receive compensation. A judge ordered Debra Blackmon’s sterilization operation and cited the state law as reasoning in favor of her sterilization.\textsuperscript{153} Even with all of this evidence, Blackmon will likely be stripped of her personal control once again as the state makes yet another arbitrary decision. Blackmon has evidence that her sterilization was coerced, that the sterilization was conducted for eugenics purposes, and that the county officials operated under the 1933 law. Debra Blackmon has been left out of the first payment to victims as she mounts her appeal.

\textsuperscript{151} Senate Bill 402, General Assembly of North Carolina Session Law 2013-360.
\textsuperscript{153} Mennel, “Payments Start For N.C. Eugenics Victims, But Many Won’t Qualify.”
In November 2014, 219 checks were mailed out to surviving victims by the state that totaled $20,000. A second payment will be released in June 2015 that will make the total paid to each victim less than $50,000.\textsuperscript{154} Willis Lynch, a surviving victim from Warren County, assumes that the process of preparing and sending out reparations payments took so long because, “North Carolina was waiting for him and other sterilization victims to die so it wouldn’t have to pay them compensation.”\textsuperscript{155} The checks mailed in two parts finally end the twelve year process to gain acknowledgment for victims of the Eugenics Board of North Carolina and victims of the movement in North Carolina.

Apologies have been issued, reparations set to be paid to victims, and Eugenics Board records have been sealed to protect the identity of the victims. But that is not enough. The state of North Carolina currently holds in its possession all of the records produced by the Eugenics Board and has no obligation to open them back up to the public in the future. Research on this horrific program cannot end here. While reparations are a step in a positive direction in admitting guilt and acknowledging the pain and emotional suffering of the victims, the narrative cannot end in June 2015 when the last checks are mailed. North Carolina was the first state to approve and pay reparations to sterilization victims but the state cannot be seen as the hero of this narrative. No amount of money can replace a lost family or the emotional trauma of sterilization. The state’s actions, while


\textsuperscript{155} Railey, “Compensation Checks Arrive with Loaded Meaning.”
honorable, seek to pacify the critics and close the discussion on the atrocious period in the state’s history.

The records have been sealed but the pain and suffering does not just disappear and the actions of the Eugenics Board cannot be erased. It is dangerous to frame eugenics as a long-past movement connected to the Holocaust and racism in the early twentieth century. The post-World War II program created in North Carolina allowed for individuals at all levels to operate independently and pursue personal agendas. Social workers and other government officials were motivated by racism, classism, and able-ism. The Eugenics Board itself changed its focus over the course of its 41-year history. While race was a contributing factor to the selection of victims, it cannot be disputed that the social status and gender status of the individual mattered greatly. Women were disproportionately targeted because they were seen as the carrier of reproduction and the best way to eliminate bad genes was to sterilize the mother. Low socio-economic women suffered even more because in the eyes of society, a woman on welfare did not deserve to have children no matter her mental state. “Feeblemindedness” was used as an excuse to target otherwise healthy women who happened to fall below the poverty line. The right to reproduce and raise a family did not exist. It was a privileged only allowed to a select few as a means to control marginalized groups who had no way of appealing the decisions made by the state of North Carolina. Eugenics and the rights of women and low socio-economic status groups cannot be relegated to a file cabinet locked away.
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