

The Evolution of Eugenics and Research Policies Within the United States

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ABSTRACT

The purpose of this paper is to investigate how the United States has changed its policies around eugenic sterilization of minorities within the 20th century. Using the cases of *Buck v. Bell* and Henrietta Lacks, as well as peer-reviewed research articles, the change in societal views regarding eugenics forced the United States government to revise its policies regarding the mentally unwell and minorities.

Introduction

Throughout the 1900s, scientific advancements throughout the world influenced the United States. With new knowledge and theories in genetics, inheritance, and medicine, the United States government began to worry about the “uncontrolled” population of undesirable citizens. This led to the impeding of civil rights for minority citizens deemed “undesirable” by law. The United States government has changed its view surrounding the treatment of “undesirables” only in response to public outcry. Through multiple court cases and changes in legislation, the federal government slowly changed its views regarding the civil and reproductive rights of undesirable groups. If not for these outcries, the policies surrounding the rights of undesirable citizens would not have changed.

The Origins of Eugenics Within the United States

The scientific discoveries of Gregor Mendel left many scientists of the time searching for a link between intelligence and inheritance. The leading theory during the mid-1800s was eugenics- a theory that combined genetic knowledge known with social theories proposed at the time. This theory was first proposed by Sir Francis Galton in 1838, stating that the inferior traits of a child’s parents could be passed on to that same child¹. This theory was implemented by eugenicists with the idea that those inferior mated more frequently than others, creating the need for sterilization². The traits targeted with eugenic sterilization ranged from feeble-mindedness, drug addiction, and insanity, to syphilis, economic failure, and even orphanism³.

¹ Charles P. Kendregan, "Sixty Years of Compulsory Eugenics: Three Generations of Imbeciles and the Constitution of the United States." *Chicago-Kent Law Review*, Vol. 43 (Fall 1966): pp 123.; D. Marie Ralstin-Lewis, "The Continuing Struggle against Genocide: Indigenous Women's Reproductive Rights." *Wicazo Sa Review*, Vol 20 no. 1 (2005): pp 74.

² Kendregan, "Sixty Years," pp 123.; Allison C. Carey, "Gender and Compulsory Sterilization Programs in America: 1907–1950." *Journal of Historical Sociology* Vol. 11, No. 1 (1998): pp 78. <https://doi.org/10.1111/1467-6443.00054>

³ Kendregan, "Sixty Years," pp 123.

While Galton's theory was proposed in 1838, the United States would not see the height of the eugenics movement until much later. Although there were debates regarding eugenic legislation as early as the 1850s, the United States only saw a dramatic increase in sterilization during the early 1900s.⁴ Charles Davenport, one of the most influential people in the eugenics movement, hypothesized that the connection between these widespread undesirable traits was caused by "defective genes." His book, *Hereditary in Relation to Eugenics*, provided the intellectual legitimacy to protect the human gene pool. Davenport recruited Dr. Harry Hamilton Laughlin to direct the Eugenics Record Office in Cold Spring Harbor, Long Island.⁵ Dr. Laughlin was already a great advocate for proposed eugenic theories and would become a major influence for government compulsory sterilization.⁶

With this peaked interest within the scientific community regarding compulsory sterilization, the individual governments of states began debating the rights of the people regarding sterilization. In 1907, Indiana enacted the first state-wide sterilization law, expanding on an existing program that Dr. Harvey Sharp had initiated in 1905- this program forced male convicts to undergo vasectomies to prevent prisoners from masturbating. Following this, Dr. Laughlin drafted his "model sterilization law," which became the model for most sterilization laws that followed. Between this time and 1939, 30 states enacted legislature to allow those who oversaw the operation of homes for the mentally ill to be compulsorily sterilized.⁷

While arguments surrounding eugenics were based on the scientific knowledge concerning genetics, the programs that fueled the sterilization movement emerged out of individuals' personal beliefs concerning politics and racism. Due to the uncontrolled reproduction of these "undesirables," eugenicists believed that the nation was rushing towards a "race suicide" of the white population.⁸ Conservative eugenicists used sterilization to control and eliminate the problem of those deemed unfit by using rhetoric, stating that vasectomies were used as a punishment for sexual crimes and the control of "deviant behavior."⁹ This is highlighted by voting data, showing that the Virginia Sterilization Act- which allowed for the sterilization of both men and women- was upheld by the low-class, nonurban population. Before 1928, the rates of eugenic sterilization were roughly equal between both genders; however, after 1928 there was a substantial change in the rates of sterilization, with women having higher sterilization rates compared to men, and procedures occurring more frequently between 1928 and 1932. During this change, sterilization was mainly used to control reproduction of a wide spectrum, including poor, disabled, minority, and promiscuous women.¹⁰

⁴ Kendregan, "Sixty Years," pp 124.; Philip R. Reilly, "Eugenics and Involuntary Sterilization: 1907-2015." *Annual Review of Genomics and Human Genetics* Vol. 16, 2015: pp 355.

⁵ Reilly, "Eugenics and Involuntary," pp 355; "Eugenics." Correspondence, Clark Wissler Collection at Ball State University. pp 1.

⁶ Reilly, "Eugenics and Involuntary," pp 354-355.

⁷ Reilly, "Eugenics and Involuntary," pp 355-356.

⁸ Allison C. Carey, "Gender and Compulsory Sterilization Programs in America: 1907-1950." *Journal of Historical Sociology* Vol. 11, No. 1 (1998): pp 78. <https://doi.org/10.1111/1467-6443.00054>; Edgar Schuster, *Eugenics*, "Introduction." *Colins' Clear Type Press* (1912): pp 15.

⁹ Carey, "Gender and Compulsory," pp 74-78.

¹⁰ Charles Windle, "Factors in the Passage of Sterilization Legislation: The Case of Virginia." *Public Opinion Quarterly* Vol. 29, No. 2 (1965): pp. 314. <https://doi.org/10.1086/267326>.

Changing Points of Eugenic Legislation

Buck v. Bell

As a direct result of changes in sterilization rates and its uses in reproductive control, the case of *Buck v. Bell* ignited. Carrie Buck, a “feeble minded” woman under the ward of the State of Virginia, was sterilized under the Virginia Sterilization Act. The Virginia Sterilization Act allowed for the sterilization of the feeble minded and of criminal inmates, not granting them the same protection as other citizens. The trial was held by the Supreme Court of the United States in response to the compulsory sterilization of Carrie Buck. The State of Virginia used a ruling done by Dr. Laughlin declaring Carrie Buck as feeble minded, a ruling made without him seeing Carrie Buck.¹¹ The Supreme Court found that compulsory cutting of the Fallopian tubes was constitutional, with Chief Justice Holmes citing both the Fourteenth Amendment and *Munn v. Indiana*. The court further states that while Buck’s consent was not given prior to the procedure, this sole fact does not constitute a case for the Supreme Court due to the nature of the Virginia Sterilization Act. This led to the court’s decision of the act as constitutional, stating if the state government passes this act to “rid themselves of [undesirable] citizens” that the federal government will not intervene.¹²

The court’s decision of *Buck v. Bell* was a unanimous decision. This was an incredibly jarring court decision in comparison to those of the same argument- in fact, most sterilization laws from states had been struck down by the Supreme Court before *Buck v. Bell*. This is partly due to the defense and opposition of Carrie Buck. Due to Carrie Buck being feeble minded, without family of sound mind, or friends to stand for her, the defense for Carrie Buck’s case was nonexistent. In direct contrast, opposing her were her doctors and those in high standing within the world of sterilization, including Dr. Laughlin. This, however, is not shown within the vagueness and absurdity of the argument by these well-educated individuals against Carrie Buck. The primary argument by the opposition does not stand light examination, stating that “the principle that sustains compulsory vaccination is broad enough to cover the cutting of the fallopian tubes [...]”¹³. Nonetheless, the high esteem of those in opposition of Carrie Buck won the case against her.

Skinner v. Oklahoma

Opposing the outcome of the case *Buck v. Bell* was the case of *Skinner v. Oklahoma ex rel. Williamson*. The case surrounds a prisoner named Jack Skinner. Skinner was convicted of three felonies that “[involve] moral turpitude,” and was sentenced to the Oklahoma penitentiary¹⁴. When legislation was passed in Oklahoma to sterilize those convicted of three felonies, Skinner received a trial by jury to see if sterilization should be done on him.¹⁵ Instead, the jury was only asked if a vasectomy could be done without serious detriment to Skinner’s general health. There were several objections to the act on the argument that sterilization could not be conducted by police power by the Fourteenth Amendment.¹⁶ This argument was considered due to the defendant given no chance to be heard, unlike in *Buck v. Bell*. Therefore, the only thing being tried in the case was whether the defendant had been a habitual criminal and whether sterilization would be detrimental to the defendant’s

¹¹ Buck, 272 U.S. at 292; Walter Berns, “Buck v. Bell: Due Process of Law?” *The Western Political Quarterly* Vol. 6 (December 1953): pp 765.

¹² Buck, 272 U.S. at 292

¹³ Walter Berns, “Buck v. Bell: Due Process of Law?” *The Western Political Quarterly* Vol. 6 (December 1953): pp 762-765.

¹⁴ Skinner, 316 U.S. at 535.

¹⁵ Skinner, 316 U.S. at 535; “Constitutional Law: Compulsory Sterilization Statute.” *Michigan Law Review* Vol. 41 No. 2 (1942): pp 318. <https://doi.org/10.2307/1282814>.

¹⁶ Skinner, 316 U.S. at 535.

health.¹⁷ In a decision by the Oklahoma Supreme Court, the constitutionality of the sterilization act was upheld, while the Supreme Court of the United States stated that the previous decision should be reversed on grounds of a denial of equal protection due to these exclusions.¹⁸

This stance on eugenic sterilization would quickly fall, however, as more people debated the morality of eugenic sterilization. This is shown in a political cartoon of moths labeled as “SCIENCE” and “ETHICS” arguing over the closeness of a flame- “SCIENCE” argues that the death of other moths will preserve only the “fire-resistant” gene.¹⁹ While *Skinner v. Oklahoma* focused solely on equal protection, it would be used to connect separate cases to support this idea of familial privacy.²⁰ This is shown in both the cases of *Madrigal v. Quiligan* and in *James Poe, et al., Plaintiffs v. Lynchburg Training School and Hospital, et al., Defendants*.

Madrigal v. Quiligan

The case of *Madrigal v. Quiligan* starts during the summer of 1973 when Guadalupe Acosta, a Mexican woman, was taken to Los Angeles County Hospital and doctors induced labor by repeatedly punching and pushing on her stomach. Months after this, Guadalupe Acosta realized that she was sterilized against her will by the same doctors who caused her stillborn baby.²¹ This was one of the many cases where Mexican women were compulsorily sterilized in the University of California- Los Angeles (UCLA)-based hospital, either by manipulation, coercion, or misinformation, which is still prevalent today.²² The lawsuit against the Los Angeles County Hospital was, in part, due to a sterilization bill passed in 1909, which authorized medical superintendents of mental institutions authority to “asexualize” a patient if would improve his or her “physical, mental, or moral condition.” The law was then expanded to protect physicians against legal retaliation from eugenic sterilization, stating that “mental disease [...] is likely to be transmitted to descendants” warrants grounds for sterilization.²³

The lawsuit against the Los Angeles County Hospital led to the removal of the California sterilization act. Plaintiffs Dolores Madrigal, Maria Hurtado, Jovita Rivera, Maria Figueroa, Helena Orozco, Guadalupe Acosta, Georgina Hernandez, Consuelo Hermosillo, Estela Benavides, and Rebeca Figueroa all demanded that the hospital be held responsible for the coerced sterilization.²⁴ Surprisingly, Assemblyman Art Torres heard about the lawsuit concerning the several Hispanic women compulsorily sterilized at the UCLA-based hospital and was shocked at its existence. This caused the repeal of the California Sterilization Act on the grounds of no evidence for genetic origin of mental disease.²⁵ Although the women of the case did not win the lawsuit against

¹⁷ Skinner, 316 at U.S. 535; “Constitutional Law,” pp 318.

¹⁸ “Constitutional Law,” pp 318.

¹⁹ Asay, Chuck. *Eugenics Candle*.

²⁰ Carter Dillard, “Future Children as Property.” *Duke Journal of Gender Law and Policy* Vol. 17: pp 57.

²¹ Karina Cardenas, “Who Makes the Decision to Sterilize Mexican Women?: The Doctor-Patient Debate in *Madrigal v. Quiligan* in the 1970s.” *Hospital* Vol. 45 (1974): pp 63.

²² Cardenas, “Who Makes the Decision,” pp 63; Alexandra Stern, “Sterilized in the Name of Public Health: Race, Immigration, and Reproductive Control in Modern California.” *Public Health Then and Now* Vol. 95: pp 1128; David S. Dalton and Douglas Weatherford, “Eugenics and Doubly Marginalized Mexican and Chicana Women: Forced Sterilizations in Renee Tajima-Peña’s No Más Bebés/No More Babies,” essay, in *Healthcare in Latin America History, Society, Culture* (Gainesville, Florida: University of Florida Press, 2022), pp 130-131; “The Law, the Courts, and Sexual and Reproductive Rights.” *Reproductive Health Matters* Vol. 22, No. 44 (2014): pp 228. [https://doi.org/10.1016/s0968-8080\(14\)44816-x](https://doi.org/10.1016/s0968-8080(14)44816-x).

²³ Stern, “Sterilized,” pp 1129.

²⁴ Cardenas, “Who Makes the Decision,” pp 64.

²⁵ Stern, “Sterilized,” pp 1128.

the Los Angeles County Hospital, *Madrigal v. Quiligan* highlights the changes in how eugenics was truly perceived- as a way of population control instead of “defective hereditary.”²⁶

James Poe, et al., Plaintiffs v. Lynchburg Training School and Hospital, et al., Defendants

Within the case of *James Poe, et al., Plaintiffs v. Lynchburg Training School and Hospital, et al., Defendants*, many of the plaintiffs involved in the case were involuntarily sterilized in accordance with the 1929 *Acts of Assembly* and sued for individuals sterilized within governmental institutions. The plaintiffs seek compensation for all legal fees and costs, a judgment that states that forced sterilization violated the Fourteenth Amendment, and the entry of an order protecting others from the same surgical procedure without consent.

While the defendants argue that the request is barred by the Eleventh Amendment and the statute of limitations, the courts decide that doctors must be given consent to operate on anyone, and that the case is not barred by either of the statutes argued. In a groundbreaking ruling, the courts state that the physicians can no longer treat sterilized patients; however, due to the ruling of *Buck v. Bell*, the court has no right to question the constitutionality of the Virginia statute allowing involuntary sterilization. The courts state the need to distinguish the actual practitioners of involuntary sterilization for further ruling, but with this case, the courts finally defend the reproductive rights of those who were deemed “undesirable.”²⁷ While the reproductive rights of these undesirable groups, many ethical problems would still arise regarding research done with these groups.

Henrietta Lacks: How Researcher Ethics Coincides with Eugenic Sterilization

The case of Henrietta Lacks, however, is what forces the United States to reconsider its privacy policies regarding both sterilization and research participants. Henrietta Lacks was seen at John Hopkins University Hospital for cancer treatment, where she dies on October 4th, 1951. Following her death, the cells of her tumor had remained alive- noticing this, the team of Dr. Gey harvested the cells from her deceased body without the consent of her or her family. These cells, coined the HeLa Cells, were able to regenerate every 24 hours and mass produced for scientific research. John R. Masters called them a “constant supply of precious and essential research.” However, with the widespread distribution of the HeLa cells and their genetic makeup, attention to the lack of donor privacy and medical ethics were brought up. This was further highlighted when a geneticist contacted the family of Henrietta Lacks in 1973 to assess their genetics for the same traits as the HeLa cells. Following this infringement on Henrietta’s rights, the United States created a historic and monumental agreement between the U.S. National Institutes of Health and the Lack’s family, stating that two representatives will oversee and approve all research involving the HeLa cell line. Even after this, the United States must maintain a delicate balancing act concerning patients and their doctors.²⁸

Conclusion

As society races towards new medical and technological advances, societal ethics regarding individual’s rights must be kept into consideration. With changes in legislation resulting from the outcomes of cases like *Madrigal v. Quiligan* and *James Poe, et al., Plaintiffs v. Lynchburg Training School and Hospital, et al., Defendants*, the United States altered previous legislative decisions regarding the rights of marginalized groups through public outcry. With this, however, it is important to note that societies change in response to many outside factors.

²⁶ Stern, “Sterilized,” pp 1128; Dalton and Weatherford, “Eugenics and Doubly,” pp 132.

²⁷ James Poe, 518 F. Supp at 789

²⁸ Jessica L. Stump, “Henrietta Lacks and the HeLa Cells: Rights of Patients and Responsibilities of Medical Researchers.” *The History Teacher* Vol. 48 (November 2014): pp 127-180

Research into these possible societal changes must be conducted to fully understand the rapid change in the nation's stance on eugenic sterilization and research ethics from cases like *Buck v. Bell* and Henrietta Lacks.

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