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Reaching Beyond the “Moron”: Eugenic Control of Secondary Disability Groups

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While much has been published about the American eugenics movement, few authors have considered the relative status of various disability populations as targets of eugenic control. While many writers focus on persons diagnosed as feeble-minded as the central focus of control, little has been written regarding the status of additional disability groups. This is important since, as described here, a central component of coming to understand past social injustices against marginalized groups and the contemporary relevance of such injustices is gaining an awareness of why specific populations were accepted by control authorities as appropriate or viable targets for control measures.

Key words: Eugenic Movement; Disability Discrimination; Feeble-mindedness

Much has been written over the past few decades about the American eugenics movement. The movement has great importance for social work and related professions as well as our understanding of the mechanisms of social and economic injustice. Indeed, eugenics is again coming to the fore in part because of contemporary discussions relative to the potential social and economic justice aspects of genetic research. Historical eugenics also has current relevance for any social policies or programs that seek to limit the procreative capacity...
of specific segments of the population. Importantly, while most of the various components of the American eugenic movement have been described in great depth in recent years, there has been little systematic analysis of the targets of eugenic control during the first quarter of the twentieth century. While most works focus heavily on the persons with "feeble-mindedness," and particularly "morons," as foci for sterilization or institutionalization, much discussion among eugenicists pertained to the possibility of expanding eugenic policies to other disability and non-disability (e.g., criminals, those living in poverty) groups. This is an important issue since we must, in order to effectively advocate for social and economic justice concerns, develop an awareness not only of the injustices of the past, but of the various rationales that were applied for bringing specific target groups under the control of oppressive social policies.

Following a brief overview of the American eugenics movement, this article will consider the status of persons with various disability conditions as candidates for eugenic control. A large part of this analysis will be given over to the role of insanity within the context of eugenic rhetoric and practice, since this was the prevailing secondary target of eugenic control. Other conditions discussed include epilepsy and sensory impairments.

The American Eugenics Movement

The principle elements of the eugenics movement in the United States have been described in great depth by a number of scholars (see, for example, Chase, 1977; Gould, 1981a; Kevles, 1985; Kline, 2001; O'Brien, 1999; Trent, 1994), and therefore will only be superficially delineated here. Drawing on the writings of England's Sir Francis Galton (1870, 1904, 1907), and gaining research legitimacy following the rediscovery of Mendel's laws in 1900, American eugenicists held that the human species could be directed in a positive evolutionary path if attention was paid to breeding. Eugenicists supported both "positive" and "negative" eugenics. The former included efforts to expand the reproduction rates of the more fit classes, while the latter centered on policies to diminish child-birth among the less fit classes. Obviously fitness was a concept that
was rife with inexactitude and subjectivity, a matter to which we return below.

The movement in the U.S. reached its peak between 1910 and 1930. As the movement grew, efforts to enact eugenic legislation that would restrict breeding among disfavored community groups became its central goal. The majority of states passed involuntary sterilization (Laughlin, 1914; Reilly, 1991) and/or restrictive marriage legislation (Humphrey, 1913); forced institutionalization was often allowed for "dysgenic" persons who were liable to become parents ("Feeble Minded Boys . . .," 1915), and eugenic concerns about the health or mental status of immigrants were an important rationale for passage of the 1921 and 1924 restrictive immigration laws ("Europe as an . . .," 1924). A small number of eugenic advocates within the country also supported euthanasia as a potential eugenic solution (Hollander, 1989; McKim, 1901; Pernick, 1996, "Was the Doctor Right?" 1916).

Eugenic supporters argued that the "unfit" segments of the population were breeding in much greater numbers than their "fit" contemporaries, and would eventually outnumber them. Drawing on the earlier writings of Thomas Malthus and Herbert Spencer, eugenicists contended that this was a particular concern since such groups would, because of their presumably high procreative rates, eventually outnumber the "normal" segment of the population. They often contended that modern charity and governmental support was allowing dysgenic persons to survive, and thus the need for eugenic control was essential (Batten, 1908).

Many eugenicists contended that if these eugenic measures were widely legislated and implemented, important social problems such as crime, poverty and prostitution would be largely diminished, since such problems presumably arose largely from the groups that were targeted by the policies. Of course, this all begged the question, how did one diagnose eugenic unfitness with any degree of rigidity?

The Confusion of Categorization

Especially early in the eugenics movement, unfitness was described by a plethora of inexact and overlapping "diagnoses," many of which were exceedingly vague. As Wright (1891)
wrote prior to the turn of the century,

To a considerable extent these...defective classes link into one another. It is hard to say whether a tramp is a pauper or a criminal. ...A very large per cent of criminals become insane in prison or afterward. A considerable number of paupers become insane. The children of one class pass easily into the other class. ...Here and there in our country, and in every other one, are knots of defectives all tangled up together, families closely related furnishing a whole population of criminals, idiots, and lunatics among themselves.... The interchangability of these defects is very clearly shown in these cases. (p. 227)

Many early supporters of eugenic control simply spoke of defectives, unfit persons or degenerates, and imprecise classifications such as moral insanity, moral imbecility, or moral defectives were developed in an effort to move in the direction of clarity (Broomall, 1887-1895, p. 40). Most eugenists felt that the various “negative” social behaviors largely were found in the same group of persons, and thus focusing on one trait (e.g., alcoholism, prostitution, poverty) was not necessary. Some writers talked of the “bottom 10%” of the population, a group that was characterized by a preponderance of interconnected negative traits (Grant, 1916). When Richard Dugdale wrote his famous book on the “degenerate” Juke family in 1877, no single trait stood out as the primary indicator of eugenic unfitness (Dugdale, 1910). Henry Goddard (1912) noted that Dugdale described a family whose members experienced the full range of anti-social traits, with no clear patterns in regard to either a “master dysgenic characteristic” or even the hereditary transmission of traits. Grandparents with epilepsy and insanity might have children who were identified as prostitutes and paupers, who themselves sired children with feeble-mindedness and alcoholism.

Eugenics Finds its Target: The Menace of the Moron

As noted above, at the beginning of the century no particular group was singled out as the primary target of eugenic
control. Criminals, prostitutes, paupers, the insane, those with epilepsy, persons with physical impairments and individuals diagnosed with feeble-mindedness were by and large accorded similar attention. As the first decade of the century drew to a close, however, feeble-minded individuals began to take center stage as the presumptive primary source of dysgenic evil within society. "Feeble-mindedness" was the broad term to describe persons who would later be labelled as mentally deficient, mentally retarded, or cognitively or intellectually disabled. This classification included, from "lowest" to "highest" functioning, idiots, imbeciles and morons. Within a few short years of the turn of the century, eugenic unfitness would come to be inextricably connected to moronity. This development would be caused by the merging of a number of factors, the most important of which were the rediscovery of Mendel's laws and the development of the intelligence test.

The rediscovery of Gregor Mendel's laws of heredity in 1900 proved to be an extremely important factor in the growth of the American eugenics movement. While some advocacy for a eugenic program existed prior to this point, supporters realized that the nature of trait transmission was an extremely important question that remained to be answered before such a program could be launched in earnest. If environmental modifications could improve the status of "unfit" individuals, then a positive evolutionary path could be fostered through the development of such modifications. Mendel's laws were therefore important in providing focus for a eugenic "target of control." If particular social problems were hereditary in nature, at least in the main, such problems might well be dealt with by reducing procreation among those groups. Educational and environmental uplift would do little to increase the capacity of such families if their "impairments" were intrinsic and largely unalterable (Gould, 1981a; Kevles, 1985).

Eugenicists such as Charles Davenport, the Director of the Eugenic Record Office, argued that there was a clear genetic explanation to most types of feeble-mindedness. As he wrote in 1921:

It appears probable, from extensive pedigrees that have been analyzed, that feeble-mindedness of the middle
and higher grades is inherited as a simple recessive, or approximately so. It follows that two parents who are feeble-minded shall have only feeble-minded children and this is what is empirically found. (p. 393)

The heritability of feeble-mindedness came to be readily accepted by most eugenicists in large part based on eugenic family studies such as Henry Goddard's famous 1912 book on the Kallikak family (Gould, 1981a). Through the extensive use of field research, these studies presumably demonstrated that most negative social traits ran in family lines. Most importantly, using newly developed intelligence tests, the researchers contended that the vast majority of the Kallikaks and similar families were characterized by a massive degree of inherited moronity. This belief was presumed by some professionals, especially those who worked in the area of feeble-mindedness, even before they had knowledge of intelligence testing or Mendel's laws. Barr (1898), for example, wrote that "[n]o other class of defectives transmit ill with such certainty as the feeble-minded" (p. 483), and Bicknell (1895-1896) added that "[t]he curse of feeble-mindedness descends from parents to child as no other defect does" (p. 81).

The intelligence test, developed in France and introduced in the United States shortly after the turn of the century, was helpful to eugenic researchers in pointing out "morons" in the population. This term was coined early in the century by Henry Goddard to describe that segment of the feeble-minded population that graded over into the "normal" population (Gould, 1981a), and therefore could go "undiagnosed" in the community (Stoddard, 1923). As one might speculate, it was this large group of "higher functioning" feeble-minded persons who were said to pose the most threat to the community. As the intelligence test was used more frequently, ever-increasing numbers of morons were found to be living—and procreating—in the country. As Jessie Taft wrote in 1918,

[t]here is no question that the swift rise of the mental test as a center of interest and experiment in applied psychology has had much to do with the growth of popular recognition of feeblemindedness as a social problem. (pp. 543-544)
As supporters of eugenic policies came to embrace the presumption that moronity was the core feature that identified the "unfit" segment of the population, many also believed that it was moronity that caused or at least set the stage for these other social problems (MacMurchy, 1916). Nicole Rafter, in discussing one of the family studies, wrote (1988) that it focused heavily on feeble-mindedness as central identifying feature of family members, but was "also concerned with alcoholism, blindness, criminality, epilepsy, insanity, sex offending, syphilis, and the propensity to wander" (p. 6). Some of the family studies, Rafter (1988) noted, pointed to the centrality of feeble-mindedness in the pseudonym that was given the family. The "Family of Sam Sixty," for example, acquired its name from the presumed I.Q. of the progenitor of the family (p. 28; see also, Koster, 1916).

The focus on moronity benefited eugenic advocates in multiple ways. First, drawing on the intelligence tests as a "scientific" measure of feeble-mindedness allowed them to argue that they were not being arbitrary in what groups were targeted for control. On the other hand, however, diagnoses were not only based on intelligence test results (not that these were in any way objective measures of inborn knowledge), but also on the subjective presumptions and judgments of diagnosticians. As a result, persons from multiple marginalized groups, including those living in poverty, racial minorities, undesirable immigrant populations, and others could easily be pulled into the feeble-minded category (Gould, 1981a).

Interestingly, eugenic advocates won their most important victory at a point in time when the movement was rapidly losing "scientific" legitimacy. In an historic 8-1 decision, the Supreme Court upheld North Carolina's proposed sterilization of Carrie Buck, a young woman who had been placed in an institution after bearing a child out of wedlock. Following dubious I.Q. tests on herself, her mother and her daughter (the "three generations of imbeciles" described by Justice Oliver Wendell Holmes in his decision on the case) and discussions by eugenic authorities, the Court agreed to allow Buck's sterilization. This provided Constitutional approval for the procedure, and allowed States to engage in the measure without fear of judiciary retribution (Gould, 1981a; Smith & Nelson, 1989).
Additional Disability Targets of Eugenics Control

To the supporters of eugenic control, feeble-mindedness was the perfect target classification for proposed policies for the reasons stated above. During the eugenic alarm period, however, there were recommendations and efforts to bring additional disability categories under the eugenic umbrella. We will describe three of the most prominent groups, including: (a) persons with mental illness; (b) persons with epilepsy; and (c) persons with sensory impairments.

Persons with Mental Illness

Prior to the eugenic era, some psychiatrists saw policies that would limit procreation among persons with chronic mental illness as an important factor in controlling such conditions. One is quoted as saying

I am, indeed, not sure that in the progressive future, it will not be deemed a measure of sound policy and commendable statesmanship to stamp out insanity, by castrating all the insane men and spaying all the insane women. (cited in Haller, 1963, p. 30)

Throughout the eugenic period, many supporters of social control policies included insanity alongside feeble-mindedness as a primary indicator of eugenic unfitness. To those eugenicists who weren't experts in medicine or psychiatry, in fact, there was little if any differentiation between the two groups. Many simply spoke of persons with mental disease or other such vague terms, which usually included both broad categories. Many experts, however, saw a clear distinction between insanity and feeble-mindedness even as early as the mid-1800s, when large-scale institutional development for persons with mental illness expanded greatly. While most eugenicists in the United States were in agreement about the advancing "menace" of feeble-mindedness and the necessity of eugenic policies to stop the spread of the condition, this was not true of mental illness, for a number of reasons.

First, feeble-mindedness was seen largely as a singular condition, varying only in its extremity. While some professionals in the field noted that conditions such as Down syndrome could
be classified as a specific type of feeble-mindedness, such cases were seen as encompassing only a small percent of the whole. Mental illness, however, was known to be of various types, each differing from the others in a number of ways. Especially important were questions about the heritability of the various forms of mental illness. While many researchers noted that certain types demonstrated an inheritance pattern, there was much uncertainty about this (Holmes, 1914, p. 307), and many eugenicists felt that mental illness arose from a combination of hereditary and environmental causes, which also made eugenic approaches of questionable effectiveness (Popenoe & Johnson, 1933, p. 126).

The diagnosis of moronity was accepted by most specialists as more accurate than the various forms of insanity. The intelligence test led most to believe that feeble-mindedness was being accurately measured, whereas insanity was much more speculative, especially in its milder stages. Michael Guyer wrote in 1927,

> In general, there is more doubt about the inheritability of some of the insanities than about cases of mental deficiency. The term insanity is merely a loose descriptive one, and we shall gain little definite knowledge about the inheritance of such maladies until we study each separate insane diathesis specifically. Psychiatrists recognize many different forms of insanity, some of them very distinct from others and the product of unrelated underlying causes. ...It is almost impossible in some instances to tell just where the border-line between and abnormal and a normal constitution lies. (p. 341)

When persons might be diagnosed is also an important issue in whether eugenic policies were viewed as appropriate for those with mental illness. Many of those who are so diagnosed only exhibited symptoms (at least to the extent that they came within the purview of professionals), during the middle or later stages of their lives, often after they (especially females) had moved much of the way through their procreative years. Certainly eugenic policies would be of only partial value in diminishing such conditions then. As Popenoe and Johnson (1933) wrote, "[t]he fact that only one in every four of the first
admissions to American psychiatric hospitals is as early as 30 years of age shows a serious limitation of this sort of segregation from a eugenic point of view” (p. 138). Since moronity was believed to be present from birth, it was seen as a much more preventable condition, given the possibility of early diagnosis and procreative control of those so diagnosed (pp. 127-128). For example, Carrie Buck’s daughter Vivian was supposedly diagnosed as an imbecile when she was an infant (Smith & Nelson, 1989, p. 135). It was on this diagnosis that Holmes’s “three generations of imbeciles” rested.

Additionally, much of the severely mentally ill population was already institutionalized when the eugenic era began. As Ferguson (1994) wrote,

> the rates of institutionalization for the two populations...differ dramatically. Even at the height of the eugenics era, less than 10 percent of the identified population of mentally retarded people was actually confined in large, public institutions. By the end of the nineteenth century, the comparable rate for mental illness was in the 70 to 80 percent range. (p. 10)

A major reason for the fear of sweeping moronity was that the vast majority of such individuals were believed to be walking around unrestrained within the community. Eugenicists would argue that the nation’s success in institutionalizing the insane supported similar measures directed at morons. “Many progressive states,” Fenald (1904) wrote, “have already adopted this policy [permanent segregation] in the care of the insane. The feeble-minded have an equal or greater claim in every way” (p 388). Those involuntary institutionalization procedures that were already in place were especially apt to be employed against females with mental illness (Geller & Harris, 1994).

Finally, especially as Freud’s writings began to be embraced in the United States after the First World War, many specialists in the area believed that persons exhibiting insanity could be assisted to regain some measure of pre-morbid functioning. Such hopes did not exist in the case of feeble-mindedness. Indeed, the term “pre-morbid functioning” was largely meaningless in discussing a population that was viewed as impaired from
(or even prior to) birth. A prevailing belief during the eugenic period was that many cases of mental illnesses such as anxiety or hysteria developed largely from the pace of modern urban life (Popenoe & Johnson, 1933, p. 127). Too much stimulation presumably led to such conditions. Environmental etiological causes such as this ran counter to the hereditary focus of the eugenicists. If one's environment caused or exacerbated the symptoms of a mental illness, it was possible that other environmental modifications or therapy could diminish it.

There were a few eugenicists who argued that various aspects of insanity made this population a particularly important target for eugenic control, even if hereditary transmission was not proven. Lothrop Stoddard, for example, noted (1923) that;

[unlike feeble-mindedness, insanity is often associated with very superior qualities, which may render the afflicted individuals an acute menace to society. The feeble-minded never overturned a state. An essentially negative element, they may drag a civilization down toward sodden degeneracy, but they have not the wit to disrupt it. The insane, on the other hand, are apt to be intensely dynamic and to misuse their powers for destructive ends. (p. 98)]

For the most part, however, eugenic rhetoric was fueled by a fear of moronity rather than insanity. Importantly, however, while eugenic propaganda did not largely target persons with mental illness, restrictive procreation policies had a substantial impact on both populations. According to Osborn (1951), "the total number of sterilizations performed in the United States up to January 1, 1950 was 50,707, of which 22,844 were on insane cases, and 25,903 on feeble-minded; 1,860 were sterilized for other reasons" (p. 59). Most marriage restriction policies covered both populations, and certainly a large number of the forcible institutions of persons with mental illness during the eugenic era arose at least in large part from a fear of procreation.

*Persons with Seizure Disorders*

Throughout the eugenic period, but especially during its
formative years early in the century, persons with epilepsy were a principle target of eugenic control. To a large extent this was due to the fact that feeble-mindedness and epilepsy were closely linked. To quote Wilmarth (1902):

...the epileptic and imbecile, ...are almost inseparably connected. Considerably over one-half of the feeble-minded have, at some time of their life, suffered from convulsive disorders as a complication of their condition; while, on the other hand, only a small percentage of confirmed epileptics escape without mental deterioration. (p. 153)

Guyer (1913) added a decade later that "[a]lthough epileptics are not classed as imbeciles ordinarily, as a matter of fact no sharp distinction can be drawn between the two classes" (p. 37).

Not only did many eugenacists perceive persons with seizure conditions to be feeble-minded, they also contended that such persons were incapable of controlling themselves and in many cases were "criminalistic," exhibiting a higher degree of violence than most morons. They were said to "be dangerously antisocial, epilepsy being frequently connected with the worst crimes of violence. The spreading of epileptic strains among sound stocks is unquestionably disastrous, causing grave social dangers..." (Stoddard, 1923, p. 99).

To some degree this pejorative view of persons with epilepsy was fostered by the writings of the early Italian criminologist Cesare Lombroso in the later half of the nineteenth century. Lombroso was interested in the classification of various groups, and, like the phrenologists of the same age, was compelled to study the relationship between physical characteristics (both congenital and acquired) and internal qualities or behaviors of individuals, specifically focusing on the "criminalistic" portion of the populace (Ettinger, 1932).

Lombroso's most influential text was the book *L'uomo Delinquente* (The Criminal Man), which was published in 1876. Writing in the wake of Darwin, Lombroso proposed a theory that criminals constituted an atavistic throw-back to an earlier period of human evolution. Such individuals were, he said, representative of a primitive, more brutal stage in our
Beyond the "Moron"

Beyond the "Moron" cultural past, somewhere presumably between humans and apes. Lombroso utilized phrenology to support his theories, and held the opinion that criminal tendencies originated in the individual's biological constitution. Lombroso contended that he saw ape-like characteristics in the physical features of criminals, which he believed provided evidence to support his theory (Gould, 1981a, 1981b; Lombroso, 1968; 2006).

Lombroso was especially interested in the correlation between criminality and epilepsy, and he contended that the majority of those with epilepsy would eventually become criminals. Such individuals, he said, were unstable and could not be trusted to control themselves. They were likely to turn evil at any time, and therefore their social control was warranted (Lombroso, 1968, pp. 365-375, also see Lombroso, 2006). According to Gould, Lombroso went so far as to recommend a preventative criminology, reasoning that “society need not wait (and suffer) for the act itself.” For since “physical and social stigmata define the potential criminal,” such persons should “be identified (in early childhood), watched, and whisked away at the first manifestation” of criminal behavior (Gould, 1981b, p. 225).

Having a strong interest in the physiological indicators of psychological and behavioral phenomenon, or in the hereditary etiology of criminal behavior, many of the American eugenicists were advocates of Lombrosian theories. His belief in the degeneracy of persons with epilepsy tied in nicely with the eugenic denigration of moronity, especially since the two conditions were closely related to one another in the minds of the early eugenicists. Just as they supported widespread institutionalization of persons with feeble-mindedness, many eugenic supporters called for “sexual segregation” of persons with epilepsy.

As the movement evolved, however, epilepsy became a relatively minor target of control. This was due in large part to the fact that many eugenicists believed that control of moronity would inevitably entail a control of epileptics, since the latter was viewed as one of many indicators of the former condition. As eugenic policies came to be increasingly implemented against the moron class, it was assumed therefore that those with epilepsy were (at least the most problematic segment
of this population) falling within this “net.” Additionally, a number of writers began to question earlier assumptions about the hereditary nature of epilepsy. Popenoe and Johnson (1933), for example, contended that “[t]he ancestry of epileptic patients usually shows a few cases of epilepsy and many other evidences of weak nervous systems such as alcoholism. Cases in which the epileptic actually comes of epileptic parents are the exception” (p. 126).

**Persons with Sensory Disabilities**

Individuals with sensory disabilities, and especially those who were blind and/or deaf, never were a central target for eugenic control. Many eugenicists would include such individuals, especially those with “hereditary” conditions, into the general class of degenerates, but they were not a group that attracted a great deal of attention from eugenicists. In part this was due to the fact that many visual and hearing impairments were acquired rather than hereditary, and little was known at the time about the heritability for either condition. Eugenic advocates Popenoe and Johnson (1933) believed that in only about ten to twenty percent of such cases heredity was the primary etiological explanation. To a large degree, two important personalities of the late nineteenth and early twentieth century had a great deal of impact over how the problem of persons with sensory disabilities would be perceived by American eugenicists. These were Alexander Graham Bell and Helen Keller.

Bell was very interested in deafness, and his wife was deaf. His invention of the telephone, moreover, came about from his efforts to communicate with deaf persons. Bell believed that hereditary deafness arose largely from intermarriage among the deaf population, especially since many such individuals went to segregated schools and largely interacted with other deaf persons. He argued that the integration of deaf persons within the broader community would foster their marriage with non-deaf persons. Since he believed that such intermarriage naturally led to hearing children (since this trait was, to use a term that would later be coined by geneticists, “dominant”), he decried the expansion of segregated environments and any other social practices that would encourage deaf
persons to congregate together (Baynton, 1996; Haller, 1963). Bell was an early leader in the eugenic movement. Like some others who were so interested, he engaged in animal breeding as a hobby. Bell was primarily interested in “positive eugenics,” which would encourage the birthrate among the more “fit” segment of the population, and he argued that only through such policies would eugenicists reach their major goal of improvement of the species (Bell, 1914). As the movement came to focus almost exclusively on negative eugenic policies such as involuntary sterilization, however, he became disenchanted with it.

Helen Keller had a profound symbolic and practical impact on the image the public, as well as professionals, had of persons with sensory disabilities. Her ability to overcome what seemed like insurmountable odds led people to believe in the potential of such individuals. A fundamental reason why those with sensory disabilities were not targets of eugenic control was that they were not viewed as mentally impaired. The story of Helen Keller demonstrated to people that even when they appeared that way, this could simply be due to communication inabilities. One of the aspects of her story that makes it so compelling is the realization that had it not been for Anne Sullivan’s perseverance, Helen might have been institutionalized or otherwise relegated to the world of imbecility.

Helen Keller herself fostered this dichotomy between persons with physical and mental impairments, as well as the belief that they should be given differential consideration and treatment. In a 1915 letter published in the New Republic she responded to the recent “Bollinger baby” case, whereby a Chicago physician allowed, with the consent of the parents, a newborn to die in large part because the baby was thought to be intellectually disabled (Keller, 1915. Also see Gerdtz, 2006). Keller (1915) wrote:

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\text{[i]t is the possibilities happiness, intelligence and power that give life its sanctity, and they are absent in the case of a poor, misshapen, paralyzed, unthinking creature. I think there are many more clear cases of such hopeless death-in-life than the critics of Dr. Haiselden realize. The toleration of such anomalies tends to lessen the sacredness in which normal life is held. (p. 173) }
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Discussion

The eugenic movement in the United States had an important impact on the evolution of the movement in Germany, and was used to provide moral cover for the Nazi’s early eugenic programs, such as their 1933 sterilization law and 1935 marriage restriction policies (Kevles, 1985; Kühl, 1994). While the Nazis fostered a highly pejorative view of all persons with what were presumably hereditary disabilities, their eugenic policies largely impacted those with mental disabilities as opposed to sensory or other physical conditions. An example is the sterilization law, which was primarily directed at nine disability groups. The vast majority of the operations, however, were performed on persons with feeble-mindedness or “hereditary” forms of mental illness. The formal T4 extermination program, which included the first widespread use of poison gas for the purpose of mass murder, also largely targeted “insane” and “feeble-minded” persons.

The Keller (1915) quote above highlights the demarcation between persons with physical and intellectual/mental impairments that characterized the eugenic era, and the presumption that the “weeding of the human garden” (p. 173) should be accomplished by focusing on those with severe cognitive deficits. This prerogative was given weight by the belief that morons were unproductive, that they were lazy and selfish parasites burdening the community, but also by presumptions that such persons were hypersexual, irresponsible, potentially criminalistic and corrupting of the social body, both metaphorically and in the actual spread of venereal and other diseases (O’Brien, 1999). Furthermore, such persons were closely linked to other marginalized groups, including disfavored immigrant populations and the poor.

Additionally, persons diagnosed as being feeble-minded were largely uneducated. In many cases, surely, the pre-existing lack of education paved the way for the diagnosis. Especially in an age predating informed consent guidelines, such persons were easy targets for eugenicists and eugenically-based institutions, as they had little capability of providing a strong defense. As the case against Carrie Buck, the legal cards were stacked against them throughout the entire process (Smith & Nelson, 1989).
Lastly, a bureaucratic infrastructure composed of a new brand of professionals (psychologists, psychiatrists, social workers, public health workers) and encompassing a broad range of social control institutions had developed prior to and during the decades following the turn of the century. This infrastructure was maintained in part by the need to enforce policies of eugenic control. While many eugenicists certainly believed the fear they proselytized, many others saw intelligence testing, institutional-building, sterilization, and other forms of control as a way of expanding their authority and demonstrating the need for their professional expertise.

References


