

Eugenic Sterilization in Minnesota

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In 1927, nearly two months after the U.S. Supreme Court issued *Buck v. Bell*, its famous ruling upholding eugenic sterilization, 18-year-old “Edna Collins” became the ninety-eighth person legally sterilized at the Minnesota School for the Feeble-minded in Faribault. Seven other women, aged 22 to 36, and a 19-year-old man were sterilized the same day. Edna had a difficult and prolonged convalescence, but six weeks after the operation she was

well enough to be discharged to the Harmon Club, a residence for “feeble-minded” girls in Minneapolis. She was readmitted to Faribault the following year but eventually escaped and was discharged into her mother’s care.¹

Edna’s story is unique only because her experience is better documented than most. As many as 2,204 persons (77 percent of them women) were sterilized under the state’s eugenics law between 1925 and 1945—and the law remained on

the books for another 30 years. Most sterilized Minnesotans were much like Edna: they were “feeble-minded” or “mentally deficient” women of childbearing age who got ensnared in the welfare or juvenile-justice system and were committed to state guardianship. Ironically, Minnesota’s

BELOW: *Postcard view of Skinner Hall, Minnesota School for the Feeble-minded, Faribault, 1926*



sterilization program existed alongside a liberal child-welfare system and guardianship program for people with disabilities that won national praise.² The state's history of eugenic sterilization reveals the tragic consequences of basing social policy on righteous scientific certainty and the belief that individual reproduction can—and should—be controlled for the greater good.

Eugenic sterilization has received a great deal of attention in recent years and, to date, five governors have apologized to survivors. In Minnesota, however, the history of surgical sterilization remains obscure. This is partly because the state did not have a central eugenics board that made (and recorded) decisions, and partly because most surgeries were performed before World War II. Although Minnesota had one of the nation's most active sterilization programs between the two world wars, by 1963 it ranked far behind California and North Carolina in total number of sterilizations (2,350) and even behind other midwestern states such as Michigan and Indiana. Indeed, Minnesota boasted fewer than 4 percent of the 63,678 sterilizations performed nationwide.³ Despite the relatively small numbers, eugenic sterilization was integrated into Minnesota's highly praised welfare system for more than a generation and caused harm to disadvantaged families throughout the state.

The campaign to legalize the sterilization of “defectives” emerged out of two popular movements of the Progressive Era: eugenics and social welfare reform. Eugenics, the “science” of improving the human race through better breeding, was founded in the early



A child climbs toward the pinnacle that selectively bred animals have already reached in this sketch from the papers of eugenics crusader Charles F. Dight.

1880s by British scientist Francis Galton, a cousin of Charles Darwin, and swept across North America in the 1910s. Because it was a versatile social ideology that promised to prevent social problems such as poverty and crime through scientific intervention and rational planning, eugenics appealed to people with very different political and social interests. “Positive” eugenics strategies, such as the “fitter families” contests held at many state fairs, encouraged childbearing among the fit, while “negative” eugenics, such as surgical sterilization, attempted to reduce the fertility of those deemed unfit. Positive and negative eugenics were two sides of the same coin, joined together by the new Progressive Era momentum in public health and social welfare.⁴

Support for eugenics developed in tandem with the progressive reform movement that swept Minnesota and the nation in the 1900s and 1910s.⁵ Like progressivism as a whole,

eugenics denoted an unwavering faith in science, efficiency, and professional expertise and a firm conviction that most social problems could be averted through government intervention. Although eugenic influences are evident in a variety of progressive reforms, their greatest impact in Minnesota was on child welfare.

Like most states, Minnesota modernized its child-welfare system in the first decades of the twentieth century. A juvenile court was established in 1905 and a mothers' pensions law was enacted in 1913. Three years later, Governor J. A. A. Burnquist appointed a commission, chaired by juvenile-court judge Edward F. Waite, to “revise and codify” state laws affecting children. In 1917 the Child Welfare Commis-



Judge Edward F. Waite, who would soon chair the Child Welfare Commission, about 1915

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sion issued its influential report that affirmed the state's role as the "ultimate guardian of all children who need what they cannot provide for themselves and what natural or legal guardians are not providing."⁶

Minnesota was recognized as "one of the leading states as measured by its children's laws."

The commission recommended dozens of new laws to strengthen and streamline the state's child-welfare system. Thirty-five laws were passed in the pioneering Children's Code, and Minnesota was recognized as "one of the leading states as measured by its children's laws." The code created an administrative apparatus, including a state children's bureau and county child-welfare boards, which extended the state's responsibility into rural areas. It set up a licensing system for maternity hospitals and boarding homes; revised Minnesota's mothers' pensions and juvenile court laws; and promised illegitimate children the same support and education as children whose parents were married. Minnesota became the first state to require that parental suitability and a child's adoptability be investigated before adoption. Most important to the history of eugenic sterilization, the Children's Code also empowered county probate judges to commit neglected, dependent, and delinquent children—and any person "alleged to be Feeble Minded, Inebriate or Insane"—to state guardianship without the approval of parent or kin.

The fact that a compulsory commitment law for "defectives" of all ages was a key recommendation of the Child Welfare Commission is a stark reminder of the influence of eu-

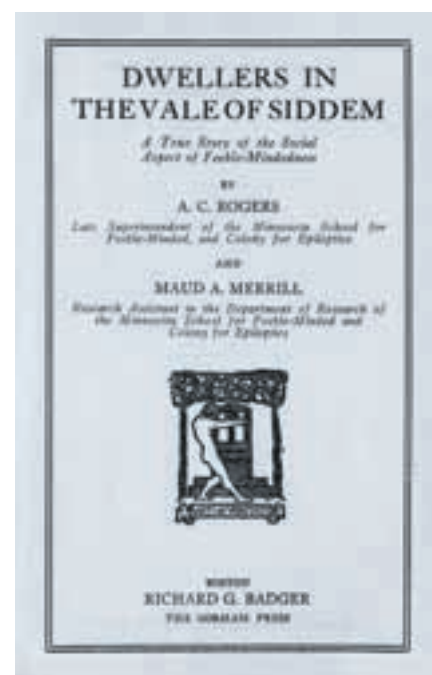


Arthur C. Rogers, the influential superintendent of the Minnesota School for the Feeble-minded

genics on Minnesota progressivism. More specifically, it demonstrates the considerable clout of Dr. Arthur C. Rogers, the highly respected superintendent of the Minnesota School for the Feeble-minded in Faribault from 1885 to 1917. Although Rogers died shortly before the commission released its report (and seven years before eugenic sterilization was legalized), his commanding presence in charitable and medical-institutional circles helped to shape Minnesota disability policy well into the 1930s. As editor-in-chief of the *Journal of Psycho-Asthenics* (later the *Journal of the American Association for Mental Deficiency*) and a leader in both the state and national Conferences on Charities and Corrections, Rogers had been a longtime advocate of compulsory commitment, which he considered especially important for women of childbearing age. He also expressed cautious support for the principle of eugenic sterilization.⁷

Roger's greatest contribution to Minnesota's eugenics movement, however, was in education and re-

search. In 1911 he arranged with the prominent eugenicist Charles Davenport for two fieldworkers from the Eugenics Record Office in Cold Spring Harbor, Long Island, to study the families of inmates at the Minnesota School for the Feeble-minded. The result was the sensationalist *Dwellers in the Vale of Siddem* (1919), published posthumously by Rogers's co-author Maud Merrill. Like the better-known eugenics family studies by Arthur Estabrook and Henry H. Goddard, *Dwellers* was a shocking exposé of the "appalling amount" of hereditary defectiveness in a Minnesota community called Hog Hollow. It depicted Minnesota's feeble-minded as the "gravest sort of social menace" and described in lurid detail the wicked misdeeds of women and men who were so depraved that they lived beneath the level of animals. Communities like Hog Hollow provided an "inexhaustible supply" of mental and moral defectives, Rogers and Merrill warned. The uncontrolled reproduction of the feeble-minded placed a huge burden



on the state and rendered charity or institutional care futile, “like trying to stamp out malaria or yellow fever in the neighborhood of a mosquito breeding swamp.”

Rogers also brought psychologist Frederick Kuhlmann, who became one of the state’s most effective eugenics advocates, to Minnesota. Kuhlmann had been a student of the legendary Clark University psychologists G. Stanley Hall and Edmund Sanford and a classmate of Lewis Terman, whose revision to the Binet intelligence test and vigorous promotion of IQ testing shaped both psychology and education for generations. Appointed director of research at the Faribault school in 1910, Kuhlmann rapidly emerged as one of Minnesota’s leading psychologists. He designed and administered

IQ tests to thousands of Minnesota schoolchildren, assisted in developing special classes for the mentally retarded in the public schools, and, with Rogers, vigorously promoted statewide testing so that “high-grade mental defectives—people not immediately recognizable as retarded—could be more easily identified and controlled. Kuhlmann’s work contributed to the substantial increase in the numbers of Minnesotans who were labeled feeble-minded.”⁸

By the time the Child Welfare Commission set about its work, then, Rogers’s contention that hereditary feeble-mindedness was a large and growing social problem seemed impossible to dispute. “Almost every community in the state furnishes examples of hereditary feeble-mindedness,” warned the commission in its 1917 report. There were many “mentally subnormal children whose presence in the community is a serious public menace.” Since little could

be done as long as parents had legal control, the commissioners recommended a compulsory commitment law. Following Rogers, they stressed the law’s particular importance for “girls and women of child-bearing age.” The commission also commented favorably on the principle of eugenic sterilization but, finding no state law worth emulating, called for further study.⁹

With its compulsory commitment law, Minnesota took a major step toward eugenic sterilization. The expanded powers of the courts to make commitments, along with the post-World War I growth of intelligence testing and popular panic about the “menace of the feeble-minded” led to a startling increase in the number of Minnesotans labeled feeble-minded and committed to state guardianship. By 1924, 1,802 people had been placed under state

BELOW: *Classroom at the Faribault school, 1910s*



guardianship, with an average of 27 new commitments each month. The state institution was crowded beyond capacity.¹⁰

Many new commitments—and most of the people eventually sterilized—were “high-grade” feeble-minded or “morons,” who would not be considered to have a disability today. The statutory definition of a “feeble-minded person”—as someone “so mentally defective as to be incapable of managing himself and his affairs, and to require supervision, control and care for his own or the public welfare”—was vague, and it gave the county probate judge wide latitude in making commitment decisions. Although mental deficiency theoretically was to be determined by a board of examiners comprised of the probate judge and two licensed physicians, the judge was permitted to dispense with the examiners if he considered someone “obviously feeble-minded.” Most judges looked at a variety of factors, including IQ, physical health, family background, home environment, school or work record, and general deportment. But judges were elected officials. They were not required to have any legal or medical training, and they mainly encountered people already in trouble with welfare agencies or the law. In practice, judicial commitment decisions often had as much to do with nonstandard behavior or lower-class status as with a low IQ. For example, “sex delinquency” and economic dependency were considered symptoms of feeble-mindedness. Judges often brought unmarried mothers under state guardianship because they had a child outside of wedlock and could not provide support.¹¹

As the number of allegedly feeble-minded Minnesotans swelled, eugenicists stepped up their campaign

for a sterilization law. In the early 1920s their most vocal and persistent crusader was the idiosyncratic physician Charles Dight, who founded and presided over the Minnesota Eugenics Society. An outspoken socialist who had served on the Minneapolis city council before taking up the cause of eugenics, Dight bombarded Minnesotans with pro-eugenics newspaper articles, letters to the editor, pamphlets, radio programs, and a relentless lobbying campaign. The socially unfit have become “a peril to this nation,” Dight proclaimed in a 1922 pamphlet. They were increasing at a “dangerous rate,” had a “strong predisposition” to criminality, and constituted a burden on society. Immigration from southern and eastern Europe lowered the standards of American citizenship and obstructed efforts to improve social conditions. Dight warned: “We will never recover from it except by the use of eugenic measures.”¹²

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Historians have considered Dight to be “largely responsible” for the Minnesota sterilization law, for he kept an extensive record of his activities and, in his 1935 history of the Minnesota eugenics movement, gave himself the leading role. In reality, however, the bill would not have passed without strong backing from Kuhlmann and the social welfare establishment. The State Board of Control, which administered state-wide children’s services, and its allies in the social welfare field shared the Eugenics Society’s concerns about the menace of the feeble-minded, but



Charles F. Dight, the indefatigable promoter of eugenics

they objected to Dight’s “overzealous” goal of sterilizing all of Minnesota’s “unfit”—about ten percent of the state’s population. Their interest in sterilization was far more practical: it would ameliorate high relief costs, poor parenting, and serious overcrowding in the state institution.¹³

COn April 8, 1925, Governor Theodore Christianson signed a bill making Minnesota the seventeenth state to legalize eugenic sterilization. The law permitted the sterilization of a feeble-minded person committed to state guardianship or an insane person who had been hospitalized for six months—but only after careful investigation, consultation with three experts (a “reputable” physician, a psychologist, and the superintendent of the relevant institution), and the written consent of the spouse or nearest kin. If no relative could be located, the State Board of Control as legal guardian could give consent. (In cases of insanity, the

patient also had to give consent.) In contrast to most states, Minnesota's sterilization law was "voluntary"—no operation could be performed unless consent was secured; it was not administered by a central Eugenics Board; and it did not necessarily entail a period of confinement in a state institution.¹⁴

As in other states, Minnesota's sterilization program was shaped by the distinct professional perspectives of medicine, psychology, and social work. Physician-eugenicists such as Dight, Walter E. List, superintendent of Minneapolis General Hospital, and surgeon George G. Eitel had lobbied actively for the bill. Dight's unique contribution was recognized when he was given the privilege of attending the first six surgeries in January 1926, but the responsibilities of the other medical men were more professional and longer lasting. The law required two doctors—the institutional superintendent and another "reputable" physician (in practice, usually a member of the staff)—to authorize the operation, and of course a surgeon was necessary to perform it. Eitel, the founder of the private Eitel Hospital and a vice-president of Dight's eugenics society, performed the first 150 surgeries; his nephew Dr. George D. Eitel took over the work after the older man died in 1928. Psychologists also had a crucial role in the sterilization program, as consultation with a psychologist (usually Kuhlmann) was required to authorize the operation. "Consultation" meant at least one IQ test.¹⁵

Finally, social workers were responsible for administering the law at the state and local levels. Key in deciding who would be sterilized was Mildred Thomson, who as director of the control board's Bureau for the Feeble-minded and Epilep-



Legislative lobbying by surgeon George G. Eitel, who hoped to limit the population of "this most unfortunate and very expensive class of citizens"

tic from 1924 to 1959 was the de facto guardian of most of the state's feeble-minded charges. Thomson, who had studied with psychologist Terman while working on her master's degree at Stanford University, worked with local welfare boards and the superintendent of the Fari-bault school, as well as feeble-minded individuals and their families. She advised them about official procedures, recommended placement in a state institution, and decided on the

appropriateness of sterilization. Like other social workers involved with Minnesota's sterilization program, Thomson was convinced that she was implementing a humane and unbiased social policy. Minnesota officials solicited personal consent from the patient, even though such consent was not required by law. They did not sterilize very young children and rarely authorized operations over the objections of family members.¹⁶

The majority of persons sterilized under Minnesota's eugenics program in the 1920s and 1930s were impoverished, sexually active women who violated conventional standards of morality and had (or might have) children they could not support. Although the wide range of cases warns against overgeneralization, the intake records of four women admitted to the School for the Feeble-minded in July 1924 (and eventually sterilized) reveal the interplay of social, behavioral, and physiological factors that could result in a diagnosis of feeble-mindedness. Eighteen-year-old Kate, a farmer's daughter, suffered from polio, heart trouble, and a stubborn disposition; she had also had sexual intercourse with her neighbor and a brother. Sixteen-year-old Prudence had venereal disease and an "incurable" disposition, the result of sexual relations with her uncle and several other men. Twenty-nine-year-old Alice, the daughter of German immigrants (her father was deceased), had "slow speech." Another twenty-nine-year-old, Lucy, came from a Swedish immigrant farm family. Her father was disabled from rheumatism and her

brother had spent a year in a state hospital for the insane. She had a sixth-grade education. Lucy's problems were said to have begun when she contracted diphtheria at the age of 12. She was "immoral" and suffered from venereal disease.¹⁷

As these examples illustrate, a diagnosis of feeble-mindedness in women usually resulted from an assortment of factors, and the infertility following surgical sterilization was only part of a larger misfortune that often included family violence, sexual abuse, disability, and abject poverty. Edna Collins, for example, had serious family troubles as well as a low IQ test. Her father, a laborer, had deserted his family. Her mother was described by social workers as "a strange looking woman" with a "crippled arm," who was "very well suited" to her filthy surroundings. By the age of 14, Edna stayed out late at night, disobeyed her mother, and was known to have had sex with three men, including a married man over 50 who paid her to have intercourse in the back of his car. Brought before the court on the charge of "sex delinquency," she was committed to the Sauk Centre Home School for Girls

but later transferred to Faribault "on account of her mentality." An IQ test in 1925 found the girl, then 16, to have a mental age of 10. Psychologist Kuhlmann described Edna as "personally dirty" and "vicious morally" and noted that she taught "immoral acts" to other children. The fact that Edna's six-year-old sister had died at the Faribault school led Mildred Thomson to surmise that "possibly the family stock is bad." Edna's hard-luck experiences—a broken family beset by poverty and disability, and an early sexual encounter with an older man—were not unusual for a sterilization survivor. Indeed, a disproportionate number of sterilized women were probable victims of incest or sexual abuse. The state archives document many sad stories of women like the "coarse" and "self-willed" Annie, who was the mother of her father's child. Sterilized at age 23, Annie was discharged from the state institution and sent off to work.¹⁸

Feeble-minded women should not be seen merely as victims, however, for many vigorously resisted the state's efforts to label and control them. A few petitioned the court to be discharged from guardianship, although most rebelled in more individual ways. When feeble-minded women demonstrated their resistance to the state's eugenics program by acting "proud" or running away, however, the authorities usually viewed their defiance as further evidence of mental defect.¹⁹

Officials saw the sterilization program as a way to reduce overcrowding at the state institution, and most survivors were discharged within three months. About half were released to parents, siblings, or spouses. Before 1937, another



Postcard of the Home School for Girls, about 1910



one-fifth were sent to transitional residences, such as the state-run clubhouses that functioned as group homes for feeble-minded wards working in the community. Edna and Annie, for example, were “paroled” to the Harmon Club, a Minneapolis facility established in 1924 with the assistance of the Women’s Welfare League. This residence, which housed 20 women discharged from the Faribault school to the Hennepin County Welfare Board, was conceived as an intermediate facility between institution and community, a way for feeble-minded women to become more independent and live relatively inexpensively outside the state institution.²⁰

Although the main objective of sterilization was to reduce overcrowding at Faribault, the steady supply of low-wage workers who could do “useful labor under supervision” was an added economic benefit. Still, Thomson reflected years later, at the time clubhouses were a “great advance” for the mentally retarded:

residents were “much happier than they could be inside the institution.” The Board of Control paid \$20 per month for each woman’s supervision, but the residents themselves paid room and board out of the wages they earned working in laundries, restaurants, or domestic service. With the rest of their earnings (and the aid of the supervisor), they purchased extra clothes, paid for movies and vacations, sent money to their families, and opened savings accounts. Despite its early promise, however, the clubhouse system collapsed along with the economy during the Great Depression. The Minneapolis Harmon Club and two other clubhouses in St. Paul and Duluth all closed their doors in the 1930s.

Meanwhile, commitments and sterilizations rose along with the economic and social crisis of the 1930s. Many social workers believed that unemployment and the depressed economy had ag-

gravated longstanding social problems, such as idleness; they thought that the easy availability of movies, automobiles, and men (transients and construction crews roaming the countryside) created more opportunities for misbehavior. At the same time, the rapid increase in the number of individuals and families on relief strained the resources of local communities traditionally responsible for assisting the poor. Since hereditary feeble-mindedness was seen as a *cause* of poverty, sexual misconduct, and crime, the concept of mental deficiency offered a convenient explanation for disorderly families. The well-established procedures for the economic support and legal control of feeble-minded people thus offered a practical solution to the mounting crisis. Nearly half of all recorded sterilizations in Minnesota took place between 1934 and 1940, with the greatest annual number (188) performed in 1937.²¹

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Although the enormity of the Great Depression eclipsed programs for the feeble-minded—both in terms of resources and public consciousness—dramatic changes to the welfare system bolstered the ability of state and county officials to meddle in the everyday lives of Minnesota’s poorest and most vulnerable residents. Early in the New Deal, the State Board of Control—already the legal guardian of the state’s feeble-minded wards, with the power to authorize sterilizations—was designated the State Emergency Relief Administration. Children’s Bureau



Workers at the Model Launderers and Cleaners, Minneapolis, about 1930

field agents then took on the additional role of representing the relief organization. In 1937 Minnesota's welfare agencies were reorganized to meet the child-welfare provisions in the 1935 Social Security Act, and the child-welfare boards were transformed into "county welfare boards" with higher budgets and greater investigative and economic powers. These new agencies retained their earlier responsibility for children and "mental defectives" but acquired a daunting new mission: administering all other forms of public assistance. County judges, often driven by political considerations, and welfare agents, many of whom had heavy case loads but little training in social work, must have been overwhelmed. In many cases, Thomson recalled, they ordered IQ tests for parents and children living in "deplorable" conditions and committed entire families to state guardianship as feeble-minded. Subsequent testing proved that many of these families were not feeble-minded, she observed, and

"their frustrating experiences made them resentful" and "difficult" to manage.²²

The 1930s boosted state control over the feeble-minded in two other ways. First, Kuhlmann's long-standing dream of a statewide census for the feeble-minded was partially realized when Governor Floyd B. Olson signed a bill authorizing a census on April 29, 1935—although



Dr. Frederick Kuhlmann, one of Minnesota's leading psychologists, who eventually directed the division of research at the State Board of Control

no appropriation or statewide census was ever made. Four years later, after a wave of sex crimes in St. Paul, the state legislature enacted the nation's third "sexual irresponsibles" law, permitting the indefinite commitment of "defective" sex offenders. An Annex for Defective Delinquents was established at the St. Cloud Reformatory in 1945. (It closed 19 years later after a series of scandals.)²³

Although state control over the feeble-minded intensified in the 1930s, the decade also exposed mounting dissatisfaction with state institutions and bureaucracy. Partisan disputes exacerbated by the election of (and conflict within) the Farmer-Labor Party and the nasty political struggles over patronage brought unprecedented publicity to the failings of state agencies and elected officials. Several high-profile cases in the 1930s and 1940s revealed a growing unease about "mass sterilizations" at Faribault and led to charges of mismanagement and abuse in the state institutions. A particularly dramatic case made public as a result of a 1939 legislative investigation concerned the appalling treatment of a Faribault inmate named Blanche Harkner. Harkner had climbed out a window at the school hospital in a desperate attempt to escape a scheduled sterilization operation and fell two-and-one-half stories to the ground, shattering both legs and injuring her spine. Six days passed before Faribault officials transferred her to a Minneapolis hospital where she could receive the necessary medical care. Significantly, the ensuing political scandal concerned the failure of institution officials to provide medical treatment—not the prospect of her sterilization.²⁴

Minnesota's program of committing, institutionalizing, and possibly sterilizing "mentally deficient" citizens faced two major legal challenges in the 1940s. First, in 1944 the state supreme court overturned a lower court's commitment of Rose Masters, an allegedly feeble-minded mother of nine. Mrs. Masters and her husband were Catholic tenant farmers who had fallen on hard times during the depression, and their desperate need for assistance led the county welfare board to conclude that the couple had too many children they could not support. Mrs. Masters was committed to state guardianship in 1940 and institutionalized two years later. Three months after that, her neighbors petitioned for her release. The district court rejected their appeal, but its decision was reversed by the Minnesota Supreme Court. In a powerful repudiation of eugenics and the large numbers of compulsory commitments in the past, the court ruled that "human liberty is too precious, the family home too fundamental, and mother love too sacred" to make Mrs. Masters prove that she was *not* feeble-minded, as the district court had required. The burden of proof should be on the welfare board instead. Because the family was Catholic, this precedent-setting case focused only on compulsory commitment and institutionalization, and not sterilization.²⁵

Sterilization was a larger issue during a bitter election campaign two years later, when former governor and Farmer-Labor candidate Hjalmar Petersen charged the Republican administrations of governors Harold E. Stassen and Edward J. Thye of failing to investigate charges of brutality and mass sterilization at the Faribault school. Since Stassen took power in 1939, the Petersen

campaign alleged, Faribault patients had been beaten, tied to toilets for 24 hours at a time, served food unfit for human consumption, and forced to consent to sterilization as their "price of freedom" from the institution. A grand jury investigated the charges, and, in a report made public the month after the election, concluded that the charges of "wholesale and unauthorized sterilization . . . were unwarranted and not substantiated," according to Thomson. Sterilizations were indeed performed, but they were sanctioned by law.²⁶

By the 1960s, support for eugenics had waned.

Petersen's political posturing obscured a bitter irony: Minnesota's sterilization program was a bipartisan effort that was, in fact, more active under the Farmer-Labor government of the 1930s than under the Republican administrations that followed. The drop in sterilization during the early 1940s, however, was due not to moral or political conviction, but to a shortage of medical and nursing personnel. Sterilizations were performed regularly, although in reduced numbers, throughout the 1950s.²⁷

By the 1960s, support for eugenics had waned. Greater knowledge of human genetics, a new understanding of the capabilities of people with mental disabilities, and the changed philosophy of a new generation of mental health professionals began to challenge the outdated views that were the basis of Minnesota's sterilization policy. Although the longtime superintendent of the Faribault school continued to defend eugenic sterilization on the

grounds that specific operations were authorized on the basis of "scientific and objective findings" and patients were not pressured to consent, the future belonged to reformers such as Dr. David J. Vail, who believed that surgical sterilization should be avoided. After Vail was appointed medical director of the Minnesota Department of Welfare in 1961, the number of sterilizations dropped. Yet attitudes were slow to change, and it was not until 1975 that the law was altered to provide greater protection from unwanted sterilization. The School for the Feeble-minded (then called the Faribault Regional Center) closed in 1998 and was replaced by a medium-security correctional facility. Sterilization is still permitted upon a court order.²⁸

Mildred Thomson ended her 1963 memoir of "thirty-five years with the mentally retarded" on a high note. She looked back with satisfaction on her long career and was sanguine about new research, educational programs, and social services that made the prospects for "retarded" Minnesotans increasingly bright.²⁹ Yet, as Thomson was aware, the men and women who created Minnesota's eugenics program had also expressed optimism about the scientific discoveries and enlightened social programs of their era. One can only wonder how future generations will look back on today's advances in medical genetics and welfare reforms. Minnesota's eugenic sterilization program may seem like the product of a bygone era, but until its history is better known, the mistakes of the past will continue to cast a shadow on the state. □

Notes

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1. "Edna Collins," case no. 98, Record of Sterilization Cases, 1916–37, Records of the Faribault State School and Hospital (FSSH), Minnesota State Archives, Minnesota Historical Society (MHS), St. Paul. See also Case Files, 1903–78, Minnesota Home School for Girls, State Archives, MHS. I have invented pseudonyms for all "feeble-minded" persons in this article except those whose names already appear in the public record (for example, in court cases).

This essay retains period terms such as "feeble-minded," "mentally defective," and "retarded." Highly offensive today, these words reveal the mind-set of their time, referring to people who were thought to have a cognitive disability. Today such behavior would be viewed through a cultural or psychological lens.

2. Human Betterment Association of America, "Sterilizations Officially Reported From States Having a Sterilization Law Up to January 1, 1946," Association for Voluntary Sterilization Records, Sterilization Statistics series, Social Welfare History Archives, University of Minnesota, Minneapolis (SWHA). Minnesota sterilization statistics are unreliable. While the Human Betterment Association counted 1,810 feeble-minded and 394 "insane" persons sterilized, the superintendent of the Faribault school reported 1,842 sterilizations; E. J. Engberg to Carl Swanson, June 22, 1946, Superintendent's Correspondence, FSSH. Gioh-Fang Ma, *One Hundred Years of Public Services for Children in Minnesota* (Chicago: University of Chicago Press, 1948); President's Panel on Mental Retardation, *A Proposed Program for National Action to Combat Mental Retardation* (Washington: Government Printing Office, 1962), 152. See also Philip R. Reilly, *The Surgical Solution: A History of Involuntary Sterilization in the United States* (Baltimore: Johns Hopkins University Press, 1991), 140–43.

3. The governors of Virginia, North Carolina, South Carolina, California, and Oregon have issued apologies. See, for example, "Easley Apologizes to Sterilization Survivors," *Winston-Salem Journal*, Dec. 13, 2002; "Hodges Apologizes for Sterilizations," *Greenville News*, Jan. 8, 2003; "State Issues Apology for Policy of Sterilization," *Los Angeles Times*, Mar. 12, 2003. For sterilization totals, see Human Betterment Association, "Sterilizations Performed Under



Superintendent Arthur Rogers in his office, Minnesota School for the Feeble-minded, about 1900

U.S. State Sterilization Statues through December 31, 1963," SWHA.

4. On the history of American eugenics, see Diane Paul, *Controlling Human Heredity: 1865 to the Present* (Atlantic Highlands, NJ: Humanities Press, 1995); Daniel J. Kevles, *In the Name of Eugenics: Genetics and the Uses of Human Heredity* (Cambridge: Harvard University Press, 1995); and Dolan DNA Learning Center, Cold Spring Harbor Laboratory, "The Image Archive of the American Eugenics Movement," www.eugenicsarchive.org. On the relationship between positive and negative eugenics, see Molly Ladd-Taylor, "Eugenics, Sterilization and Modern Marriage: The Strange Career of Paul Popenoe," *Gender & History* 13 (Aug. 2001): 298–327; Alexandra Minna Stern, "Making Better Babies: Public Health and Race Betterment in Indiana, 1920–1935," *American Journal of Public Health* 92 (May 2002): 742–52. See also Martin Pernick, "Eugenics and Public Health in American History," *American Journal of Public Health* 87 (Nov. 1997): 1767–72.

5. The history of eugenics and progressivism in Minnesota awaits its historian. The classic national study is Donald K. Pickens, *Eugenics and the Progressives* (Nashville: Vanderbilt University Press, 1968). On Minnesota in this period, see Carl H. Chrislock, *The Progressive Era in Minnesota, 1899–1918* (St. Paul: Minnesota Historical Society, 1971).

6. Here and below, *Report of the Minnesota Child Welfare Commission* (St. Paul: the Commission, 1917), 8, 9, 26; Ma, *One Hundred Years*, 90; Edward MacGaffey, "A Pattern for Progress: The Minnesota Children's Code," *Minnesota History* 41 (Spring 1969): 229–36.

7. Here and below, A. C. Rogers and Maud A. Merrill, *Dwellers in the Vale of Sidem: A True Story of the Social Aspect of*

Feeble-Mindedness (Boston: Richard G. Badger, 1919), 9, 24, 11; Mildred Thomson, *Dr. Arthur C. Rogers: Pioneer Leader in Minnesota's Program for the Mentally Retarded* (Minneapolis: Minnesota Association for Retarded Children, n.d.); Nicole Hahn Rafter, ed. *White Trash: The Eugenic Family Studies, 1877–1919* (Boston: Northeastern University Press, 1988). *Dwellers* does not reveal the identity of the community, but a letter bound into the copy presented by the Board of Control to the MHS states that the research was done in Wabasha County near Lake City.

8. "Fred Kuhlmann, 1876–1941," *American Journal of Mental Deficiency* 46 (1941): 17–18; Mildred Thomson, *Prologue: A Minnesota Story of Mental Retardation* (Minneapolis: Gilbert Publishing Company, 1963), 30–32, 58–63.

9. *Report of the Child Welfare Commission*, 11–12, 18.

10. Children's Bureau, State Board of Control, *Report of the Director of the Bureau to the Board for the Biennial Period Ended June 30, 1926*, 12; Minnesota School for the Feeble Minded, *Report of the Superintendent to the State Board of Control, Biennial Period Ended June 30, 1924*, 3, both in State Board of Control, Biennial Reports, State Archives, MHS.

11. State of Minnesota, *Session Laws for 1917*, ch. 344; Agnes Crowley, "New Laws Relating to the Feeble-Minded and Some Statistics," *Proceedings of the Minnesota State Conference of Social Work*, Sept. 22–25, 1923, p. 268–78.

12. Charles F. Dight, "Human Thoroughbreds, Why Not?" 1922, p. 18, 30–32, Charles Fremont Dight Papers, MHS. See also Charles Dight, *History of the Early Stages of the Organized Eugenics Movement for Human Betterment in Minnesota* (Minneapolis: Minnesota Eugenics Society,

1935); Neal Ross Holtan, "Breeding to Brains: Eugenics, Physicians, and Politics in Minnesota in the 1920s" (master's thesis, University of Minnesota, 2000); Gary Phelps, "The Eugenics Crusade of Charles Dight," *Minnesota History* 49 (Fall 1984): 99–108; Evadene B. Swanson, "Some Sources for Northwest History: The Dight Papers," *Minnesota History* 25 (Mar. 1944): 62–64.

13. Swanson, "Sources," 63; Reilly, *Surgical Solution*, 90; Dight, *Early Stages*, especially 8–10, 36–38; Thomson, *Prologue*, 55–56; Molly Ladd-Taylor, "The 'Sociological Advantages' of Sterilization: Fiscal Politics and Feeble-minded Women in Interwar Minnesota," in *Mental Retardation in America: A Historical Anthology*, ed. Steven Noll and James W. Trent (New York: New York University Press, 2004), 281–99.

14. Minnesota, *Session Laws for 1925*, ch. 154; J. H. Landman, *Human Sterilization: The History of the Sexual Sterilization Movement* (New York: Macmillan, 1932).

15. Dight, *Early Stages*, 9–11; Holtan, "Breeding to Brains," 61–64.

16. See Thomson's *Prologue* for an account of her career.

17. Admissions Records, 1879–1998, FSSH.

18. Edna's story is told in Minnesota Home School for Girls, Case Files, 1903–78; Annie's is in List of Cases Recommended by Mr. Hanna for the Club House, enclosed in Mildred Thomson to G. K. Hanna, Nov. 21,

1924, Superintendent's Correspondence, FSSH. Annie was case no. 35, Record of Sterilization Cases, 1916–37, FSSH.

19. See, for example, Mildred Thomson to Dr. J. M. Murdoch, Apr. 27, Sept. 18, 1928, Superintendent's Correspondence, FSSH.

20. Here and below, Elizabeth Piper, "Analysis of Faribault Sterilization Records" (2003), unpublished report in author's possession; Thomson, *Prologue*, 50, 53–55, 84–86. See also the biennial reports of the Board of Control.

21. Children's Bureau, Minutes of Staff Meeting, June 20, 1932, Records of the State Board of Control, MHS; William Anderson, *Local Government and Finance in Minnesota* (Minneapolis: University of Minnesota Press, 1935), 264–73; Engberg to Swanson, June 22, 1946.

22. Ma, *One Hundred Years*, 233; Thomson, *Prologue*, 79–80.

23. Thomson, *Prologue*, 141–42; James E. Hughes, "The Minnesota 'Sexual Irresponsibles' Law," *Mental Hygiene* 25 (Jan. 1941): 76–86; Estelle B. Freedman, "'Uncontrolled Desires': The Response to the Sexual Psychopath, 1920–1960," *Journal of American History* 74 (June 1987): 83–106.

24. Richard M. Valelly, *Radicalism in the States: The Minnesota Farmer-Labor Party and the American Political Economy* (Chicago: University of Chicago Press, 1989), 60–67; Minnesota Legislature, "Report from the Joint Senate and House In-

vestigating Committee Covering the Acts and Activities of the Various Governmental Departments and Agencies of the State of Minnesota," 1939–40, p. 14–18 (Harkner case, p. 17).

25. *Masters, Tuebner et al. v. State*, 13 N. W. 2d, 487 (1944).

26. Thomson, *Prologue*, 147; "Cruelty in State School Charged," *Veterans' News* (June 19, 1946).

27. Engberg to Swanson, June 22, 1946; Reilly, *Surgical Solution*, 140–43; Thomson, *Prologue*, 182–83. There are no statistics for this period, but Reilly concluded from interviews with Faribault officials that at least 76 persons were sterilized between 1951 and 1960. For different numbers, see Sandra Bisgaard, "Sexual Sterilization in the United States," unpublished paper, Nov. 20, 1969, Minnesota Department of Public Welfare, Policy and Research Office, Miscellaneous Research Reports and Studies, State Archives, MHS.

28. Minutes of the Inter-Institutional Meeting, Nov. 21, 1960, FSSH; Reilly, *Surgical Solution*, 142–43; *Minnesota Statutes 1975 Supplement*, ch. 252A.13; *Minnesota Statutes 2002*, sec. 525.56 54c; *Minneapolis Star Tribune*, June 28, 1998, p. B 1; Minnesota Department of Corrections, "Minnesota Correctional Facility—Faribault," www.doc.state.mn.us/facilities/faribault.htm.

29. Thomson, *Prologue*, 230–37.

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