



It Never Stopped: The Continued Violation of Forced, Coerced, and Involuntary Sterilization

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In September 2020, alarming details emerged from the Irwin County Detention Center in Georgia outlining the mistreatment of immigrant detainees under ICE custody. In a report issued by Project South, The Institute for the Elimination of Poverty & Genocide, a complaint was filed on behalf of the detained immigrants held at the Irwin County Detention Center, citing lack of protection against the COVID-19 virus, medical neglect, unsanitary conditions, safety issues, and other human rights abuses and violations (Project South, 2020). One of the biggest red flags brought forward by the complaint was the alarming rate of hysterectomies that were being performed of the women under ICE custody (Project South, 2020).

Project South conducted several interviews with immigrant detainees who reported undergoing medical procedures without a clear understanding as to why the procedure needed to be done (Project South, 2020). According to detainee interviews, many women did not receive proper education and information from the doctor and the medical staff and were not able to properly consent to medical treatment (Project South, 2020). Additionally, detainees reported that there were no Spanish speaking medical staff available to explain and clarify the doctor's orders; instead, medical staff resorted to using improper Spanish translation measures such as Google Translate to communicate with the detainees (Project South, 2020).

Horrifically, the recent ICE detention story is just a continuation of a long history of forced, coerced, and involuntary sterilization practices that still exist in this country and globally. Eugenics, the practice of selective reproduction, has been used since the beginning of the 1900s to control and limit certain communities deemed undesirable (Roelcke, 2004).

History of Sterilization in the United States

The arrival of the 20th century marked the beginning of forced reproductive sterilization all over the world (Reilly, 1987). The main purpose of this government-imposed tactic was for population control while other governments used sterilization to prevent those considered socially unsatisfactory from reproducing (Roelcke, 2004). Indiana became the first state to adopt involuntary sterilization statutes in 1907; from 1907-1939, 30 states followed with their own sterilization laws (Reilly, 1987).

In the South, sterilization was used as a means of racial control and as a way to break the dependency of residents on welfare (Kluchin, 2009). Up until 1977, nearly 7600 individuals were sterilized in North Carolina; the vast majority were Black (Klutchin, 2009; Gartner, Krome-Lukens, & Delamater, 2020). Girls and boys as young as ten years old were deemed "feebleminded" and declared unfit to be parents, according to state records (Klutchin, 2009; Brophy & Troutman, 2016). In order to aggressively promote the sterilization agenda, the government used tactics such as threats of losing welfare benefits and other assistance provided by the state if sterilization consent forms were not signed (Klutchin, 2009; Gartner, Krome-Lukens, & Delamater, 2020).

As an effort to reduce immigration in California, Mexican men and women were sterilized at a significantly higher rate than non-Latinos between 1920-1945 (Novak, Lira, O'Connor, Harlow, Kardia, & Stern, 2018). According to accounts from several California eugenics programs, Mexican women were classified as "hyperfertile, inadequate mothers, criminally inclined, and more prone to feeble-mindedness" therefore, sterilization was justified in order to control the spread of these undesirable qualities (Novak, et.al., 2018).

Forced sterilization was a key tactic of government funded assimilation campaigns that targeted Indigenous and Native communities throughout the 19th and 20th centuries (Annett, 2001). Native women describe coercion and non-consensual surgical sterilization; chemical sterilization, such as ingestion of radioactive iodine, was administered often on a daily basis (Annett, 2001). Between 1970 and 1976 alone, it is estimated that over 3,400 Native women had been sterilized, forced to abort, or received hysterectomies; some reservations reported a sterilization rate of 80% or higher (Rutecki, 2011). Additionally, the creation of residential schools in the 1800s saw the forcible removal of Native children from their families and their land, as an attempt to force children to assimilate into White society (Annett, 2001). Upon reaching puberty, administrators of the residential schools were given the right to sterilize any Native student that was under their care (Annett, 2001).

Global Cases of Sterilization

All over Latin America, women and men have been reproductively violated in order to comply with their government's strategy to eliminate poverty by limiting family size (Vasquez del Aguila, 2006). As a tactic, many governments began to limit access to forms of birth control as a way to promote a more permanent solution in the way of sterilization (Vasquez del Aguila, 2006). Additionally, there is evidence that many governments developed financial incentives that were awarded to health care workers for every woman they brought in for sterilization (Vasquez del Aguila, 2006). These types of claims have also been made in Honduras, Mexico, Guatemala, Argentina, and other Spanish-speaking countries (Reggiani, 2010).

In recent years, the government of Peru launched an investigation based on claims that 300,000 women were subjected to forced sterilization under the ten-year reign of former president Alberto Fujimori (Vasquez del Aguila, 2006). It had been reported that poor, uneducated women were lured into medical offices with promise of free medical checkups; once the women were on the examination table, the medical staff allegedly restrained the women, anesthetized them, and then performed the tubal ligation (Vasquez del Aguila, 2006).

For over two decades, Puerto Rico had the highest rate of coerced sterilization in the world (Salvo, Powers & Cooney, 1992). It was determined that by 1954, 16% of the women on the island had been sterilized (Presser, 1969) and that "no other country-industrialized or developing had sterilization ever achieved such popularity" (Presser, 1969, p. 344). Research and studies have concluded that the reason sterilization was so popular on the island was due to the adamant encouragement, persistence, and coercion by American physicians who practiced on the island (Presser, 1964; Salvo, et.al., 1992).

In parts of Africa, there have been thousands of cases of involuntary sterilization occurring with women living with HIV/AIDS. Based on presumptions, miseducation, and stereotyping, the African government pursued sterilization as a method of preventing the transmission of the virus to unborn children (Mamad, 2009). Without proper information and consultation, women have reported being forced to sign consent forms under stress and duress (Mamad, 2009).

Adopting American ideology on the matter, perhaps the biggest proponents of sterilization were the German Nazi leaders (Roelcke, 2004). Known as Rassenhygiene, or racial hygiene, Nazi German doctors performed involuntary sterilization for the sake of eradicating the inferior from society (Roelcke, 2004). Medical documentation accounted for the sterilization of 400,000 men and women but scholars believe the numbers are much higher (Annas & Grodin, 1992; Roelcke, 2004); it had been argued that "as many as 10-15 percent of the population were defected and ought to be sterilized (Annas & Grodin, 1992, p. 21). Feeling that surgical sterilization was too slow of a process for mass efforts, the Nazis experimented with medicinal methods that would allow sterilization via ingestion or injection (Annas & Grodin, 1992).

Sterilization for Targeted Groups

In the United States, sterilization was used for depopulation but it was also heavily used to prevent those considered to be “retarded and insane” from reproducing (Reilly, 1987, p.153). Labeled feeble-minded, individuals who were mentally and physically differently abled were subjected to sterilization in order to remove the option of family planning (Diekema, 2003). Although sterilization of these communities still occurs today, new guidelines have been created by human interest groups such as The World Health Organization in order to lobby for the best interest of the person (Diekema, 2003).

Up until 1987, the American Psychological Association (APA) considered gender and orientation variance a mental illness in its Diagnostic and Statistical Manual of Mental Disorders (DSM); therefore, for those who identified as LGBT, sterilization was justified under those criteria (Drescher, 2015). Currently in the US, there are ten states that actively mirror coercive sterilization against transgender and gender non-conforming individuals by requiring a Trans individual to be sterilized as part of the transition process (Lowik, 2018). Adopting American’s lead, many other countries followed in enacting laws sterilizing LGBT-identified individuals (Honkasalo, 2018; McLelland, 2004); many countries such as Japan and Finland also require sterilization before an individual is able to legally and medically transition (Honkasalo, 2018; McLelland, 2004).

It Must Stop

The latest allegations of what has occurred in the ICE detention center in Georgia should not be perceived as new news; it should not be received as shocking. The recent reports are just another reminder of the continued systemic acts of violence against women, the LGBT community, and so many other targeted groups. Human rights organizations such as The Campaign to Stop Torture in Health Care, The National Latina Institute for Reproductive Justice, Human Rights Watch, and Amnesty International, continue to fight against forced, coerced, and involuntary sterilization. Globally, advocates, activists, and world leaders are tirelessly working to end injustices to ensure reproductive freedom and proper informed consent for all communities.

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Further Readings

The National Latina Institute for Reproductive Justice <https://www.latinainstitute.org/en/content/latinas-and-sterilization-article>

Amnesty International

<https://www.amnesty.org/en/latest/news/2018/04/peru-order-to-indict-fujimori-is-a-milestone-in-search-for-justice-for-victims-of-forced-sterilization/>

The Center for Constitutional Rights <https://ccrjustice.org/home/blog/2020/09/18/allegations-forced-sterilization-ice-detention-evoke-long-legacy-eugenics>

Project South - ICDC Complaint

<https://projectsouth.org/wp-content/uploads/2020/09/OIG-ICDC-Complaint-1.pdf>

World Health Organization

https://apps.who.int/iris/bitstream/handle/10665/112848/9789241507325_eng.pdf

References

- Annas, G. J., & Grodin, M. A. (1995). *The Nazi doctors and the Nuremberg Code: Human rights in human experimentation*. New York, N.Y: Oxford University Press.
- Annett, K. D. (2001). *Hidden from History: The Canadian Holocaust: the Untold Story of the Genocide of Aboriginal Peoples by Church and State in Canada: a Summary of an Ongoing, Independent Inquiry Into Canadian Native "residential Schools" and Their Legacy*. Truth Commission into Genocide in Canada.
- Brophy, Alfred L., & Troutman, Elizabeth. *The Eugenics Movement in North Carolina*, 94 N.C. L. Rev. 1871 (2016). Retrieved from: <https://scholarship.law.unc.edu/cgi/viewcontent.cgi?article=4876&context=nclr>
- Diekema, D. S.(2003). Involuntary sterilization of persons with mental retardation: An ethical analysis. *Mental Retardation & Developmental Disabilities Research Reviews*, 9(1), 21-26. Retrieved from: doi:10.1002/mrdd.10053
- Drescher, J. (2015). Out of DSM: Depathologizing Homosexuality. *Behavioral sciences (Basel, Switzerland)*, 5(4), 565–575. <https://doi.org/10.3390/bs5040565>
- Gartner, D.R., Krome-Lukens, A.L., & Delamater, P.L. (2020). Implementation of Eugenic Sterilization in North Carolina: Geographic Proximity to Raleigh and its Association with Female Sterilization During the Mid-20th Century. *Southeastern Geographer* 60(3), 254-274. doi:10.1353/sgo.2020.0020.
- Honkasalo, Julian (2018). Unfit for Parenthood? Compulsory Sterilization and Transgender Reproductive Justice in Finland. *Journal of International Women's Studies*, 20(1), 40-52. Retrieved from: <https://vc.bridgew.edu/jiws/vol20/iss1/4>
- Kluchin, R. (2009). *Fit to Be Tied: Sterilization and Reproductive Rights in America, 1950-1980*. Rutgers University Press. Retrieved November 13, 2020, from <http://www.jstor.org/stable/j.ctt5hj13v>
- Lowik, A. J. (2018). Reproducing eugenics, reproducing while trans: The state sterilization of trans people. *Journal of GLBT Family Studies*, 14(5), 425-445.
- Mamad, F. (2009). *Forced sterilization of women living the HIV/AIDS in Africa (Unpublished doctoral dissertation)*. University of Pretoria. Retrieved from <http://hdl.handle.net/2263/12645>
- McLelland, M. (2004). Living More "Like Oneself" Transgender Identities and Sexualities in Japan. *Journal of Bisexuality*, 3(3-4), 203-230.
- Novak, Nicole L., Lira Natalie, O'Connor, Kate E., Harlow, Siobán D., Kardia, Sharon L. R., Minna Stern, Alexandra, 2018: Disproportionate Sterilization of Latinos Under California's Eugenic Sterilization Program, 1920–1945. *American Journal of Public Health* 108, 611_613. <https://doi.org/10.2105/AJPH.2018.304369>
- Presser, H. (1969). The Role of Sterilization in Controlling Puerto Rican Fertility. *Population Studies*, 23(3), pp. 343-361.
- Reggiani, A. H. (2010). Depopulation, Fascism, and Eugenics in 1930s Argentina. *Hispanic American Historical Review*, 90(2), 283-318. Retrieved from: doi:10.1215/00182168-2009-135
- Reilly, P. (1987). Involuntary Sterilization in the United States: A Surgical Solution. *The Quarterly Review of Biology*, 62 (2), pp. 153-170. Retrieved from <http://www.jstor.org.libcat.widener.edu/stable/2829217>
- Roelcke, V.(2004). Nazi medicine and research on human beings. *Lancet*, 3646-7.

Rutecki, G. W. (2011). Forced Sterilization of Native Americans: Later Twentieth Century Physician Cooperation with National Eugenic Policies?. *Ethics & Medicine*, 27(1), 33.

Salvo, J., Powers, M., & Cooney, R. (1992). Contraceptive Use and Sterilization Among Puerto Rican Women. *Family Planning Perspectives*, 24(5), 219.

Vasquez del Aguila, Ernesto Invisible women: forced sterilization, reproductive rights, and structural inequalities in Peru of Fujimori and Toledo *Estudos e Pesquisas em Psicologia*, vol. 6, núm. 1, enero-junio, 2006, pp. 109-124 Universidade do Estado do Rio de Janeiro Rio de Janeiro, Brasil