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Preliminary Report of the Committee of the Eugenic Section of the American Breeders' Association to Study and to Report on the Best Practical Means for Cutting Off the Defective Germ-Plasm in the Human Population

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PROBLEMS IN EUGENICS.

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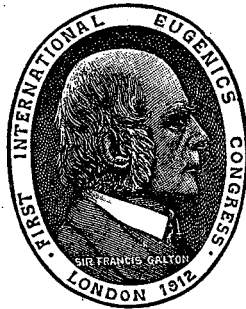
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PRELIMINARY REPORT OF THE COMMITTEE OF THE
EUGENIC SECTION OF THE AMERICAN BREEDERS' ASSOCIATION
TO STUDY AND TO REPORT ON THE BEST PRACTICAL
MEANS FOR CUTTING OFF THE DEFECTIVE GERM-PLASM
IN THE HUMAN POPULATION.

By BLEECKER VAN WAGENEN, *Chairman of Committee.*

1.—*History of the American Breeders Association, Eugenics Section, and
Committee on Defective Germ-plasm.*

The American Breeders Association was organized in 1903 for the purpose of bringing together practical breeders, experimenters, investigators, and teachers interested in the subject of breeding, for the advancement of the science of genetics. Its headquarters are in Washington, D. C., and its President is the Hon. James Wilson, Secretary of the Department of Agriculture, and member of the President's Cabinet. The association has three sections: plants, animals, and Eugenics. The Eugenics Section has now ten research committees, each comprised of eminent specialists, as follows:—

- Committee on Heredity of Feeble-mindedness.
- Committee on Heredity of Insanity.
- Committee on Heredity of Epilepsy.
- Committee on Heredity of Criminality.
- Committee on Heredity of Deafmutism.
- Committee on Heredity of Eye Defects.
- Committee on Immigration.
- Committee on Sterilization and other means of Eliminating Defective Germ-plasm.
- Committee on Genealogy.
- Committee on Inheritance of Mental Traits.

The Eugenics Record Office, located at Cold Spring Harbor, New York, under the direction of Dr. C. B. Davenport, of the Carnegie Station for Experimental Evolution, is closely affiliated with the Eugenics Section.

The purposes of this office, of which Prof. H. H. Laughlin is Superintendent, are:

1. To serve as a clearing house for data on human heredity.
2. To build up an index of the American population, recording families, traits, and their geographical distribution, with special reference to super-normal and sub-normal traits.
3. To train field workers expert in gathering data of Eugenic import.
4. To maintain a field force actively engaged in collecting such data.

5. To co-operate with other institutions and with persons concerned with Eugenic research.
6. To study authentic data, seeking thereby to discover the manner of inheritance of specific traits.
7. To promote and to aid in the organization of new centres of Eugenic research.
8. To advise concerning the Eugenic fitness of contemplated marriages.
9. To disseminate Eugenic truths.

The committee on sterilization and other means for eliminating defective strains from the human population was appointed at the annual meeting of the Eugenics Section of the American Breeders Association held in Palmer, Massachusetts, in May, 1911. Its members are:

- Bleecker Van Wagenen, Chairman, New York City.
- W. H. Carmalt, M.D., Newhaven, Conn.
- Everett Flood, M.D., Palmer, Mass.
- H. W. Mitchell, M.D., Warren, Pa.
- H. H. Laughlin, Secretary, Cold Spring Harbour, N. Y.

This committee has organized an advisory and consulting committee as an adjunct consisting of the following specialists:—

- Medicine, Dr. L. F. Barker, Johns Hopkins University.
- Surgery, Dr. Alexis Carrel, Rockefeller Institute, New York City.
- Physiology, Prof. W. B. Cannon, Harvard University.
- Biology, Prof. H. J. Webber, Cornell University.
- Psychology, Dr. H. H. Goddard, Vineland Training School, New Jersey.
- Psychiatry, Dr. Stewart Paton, Princeton University.
- Thremmatology, Prof. Raymond Pearl, Maine Agricultural College.
- Anthropology, Prof. A. F. Chamberlain, Clark University.
- Criminology, Judge W. W. Foster, Court of General Sessions, New York.
- Sociology, Prof. F. H. Giddings, Columbia University.
- Political Economy, Prof. James A. Field, University of Chicago.
- Law, Hon. James M. Beck and Mr. Louis Marshall, of the New York Bar Association.
- History, Dr. James J. Walsh, Dean of Fordham Medical College, New York.
- Statistics, O. P. Austin, Esq., Chief of the Bureau of Statistics, Washington, D.C.
- Public Affairs, Prof. Irving Fisher, Yale University.
- Woman's Viewpoint, Mrs. Caroline B. Alexander, Hoboken, New Jersey.
- Immigration, Prof. R. De C. Ward, Harvard University.

The committee is seeking and receiving assistance from many sources, both public and private, in contributions of data pertinent to its investigations, and it seeks the co-operation of anyone having such to impart.

2.—Nature of the Problem and Reasons for the Investigation.

In recent years society has become aroused to the fact that the number of individuals within its defective classes has rapidly increased both absolutely and in proportion to the entire population; that eleemosynary expenditure is growing yearly; that some normal strains are becoming contaminated with anti-social and defective traits; and that the shame, the moral retardation, and the economic burden of the presence of such individuals are more keenly felt than ever before. Within the last three years especially there has been a marked development of public interest in this matter. The word "Eugenics" has for the first time become known to thousands of intelligent people who now seek to understand its full significance and application.

Whether wholly of defective inheritance, or mostly of good inheritance, but suffering from an insurmountable hereditary handicap, members of the following classes must be considered as socially unfit, and their supply should, if possible, be eliminated from the human stock: (1) the feeble-minded; (2) the pauper class; (3) the criminal class; (4) the epileptics; (5) the insane; (6) the constitutionally weak, or the asthenic class; (7) those predisposed to specific diseases, or the diathetic class; (8) the deformed; (9) those having defective sense organs, as the blind and the deaf, or the kakaisthetic class.

With the statistics at present available, it is impossible to give an accurate table of the numbers within each of these classes. The following table giving the enumeration of defective and helpless individuals within institutions has been compiled by our committee from the various special reports of the United States Census for the eleventh (1890), twelfth (1900-1904) and thirteenth (1910-1912) censuses.

It is hoped that future censuses will make a more careful classification of defectives, and a more accurate and complete enumeration of such individuals both within and not within institutions.

From the following table it is seen that there are in the United States nearly two-thirds of a million persons so defective that the State must exercise a constant custodial care over them.

It is impossible to measure the industrial and social handicap caused by these individuals. But just as the leaders of successful human endeavour exert an influence altogether incommensurate with their number, so this class, doubtless, constitutes a drag on society of similar magnitude.

Along with penal, hospital, and eleemosynary care, a remedy looking toward the cutting off of the supply of defectives is being sought on every

INMATES OF INSTITUTIONS IN THE UNITED STATES.

ELEVENTH CENSUS-1890			TWELFTH CENSUS-1900 ⁽¹⁾			THIRTEENTH CENSUS-1910			INCREASE (+) DECREASE (-)			INCREASE (+) DECREASE (-)		
TOTAL POPULATION-12,222,250			TOTAL POPULATION-15,994,575			TOTAL POPULATION-91,912,266			TOTAL POPULATION-13,772,325			TOTAL POPULATION-13,772,325		
No. of Institutions	No. of Inmates	Inmates per 100,000 Population	No. of Institutions	No. of Inmates	Inmates per 100,000 Population	No. of Institutions	No. of Inmates	Inmates per 100,000 Population	No. of Institutions	No. of Inmates	Inmates per 100,000 Population	No. of Institutions	No. of Inmates	Inmates per 100,000 Population
88	76,522	12.2	115	15,153	18.				27	7,501	+5.8			
24	5,254	8.4	42	14,347	18.8	20,199	219		18	9,093	+10.4			
162	74,028	118.2	328	150,151	186.2	187,454	203.8		166	76,123	+6.8			
2,602	83,329	131.5	1,337	81,772	100.6	113,579	125.		126.5	-557	-30.4			
58	14,846	21.7	93	23,034	28.3	22,903	24.9		35	8,188	+4.6			
2,373	73,045	116.6	2,476	81,764	101.4	89,944	91.3		103	8,719	-15.2			
1,916	11,910	17.98	4,092	208,156	354.6				2176	+156,746	+17.48			
7,223	369,064	590.4	8,483	634,871	807.9				1260	+265,813	+217.5			

⁽¹⁾ The special enumeration of the 12th Census was made in 1894.

⁽²⁾ 1890 Enumeration found 61,423 Deaf and Dumb, 42,312 Blind, 382 Blind, Deaf and Dumb.

⁽³⁾ The 11th Census enumerated 93,409 in population at large.

⁽⁴⁾ The 11th Census estimated the feeble-minded in 1890 at 154,000 included in the 11th but not included in the 12th Census.

⁽⁵⁾ Per cent under 16 years of age.

⁽⁶⁾ Children under 16 years of age.

⁽⁷⁾ The special enumeration of the 12th Census was made in 1894.

⁽⁸⁾ 1890 Enumeration found 61,423 Deaf and Dumb, 42,312 Blind, 382 Blind, Deaf and Dumb.

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⁽¹¹⁾ Per cent under 16 years of age.

⁽¹²⁾ Children under 16 years of age.

⁽¹³⁾ Her. C. Bell's special enumeration: Blind 14,743 - Deaf 19,387

⁽¹⁴⁾ Epileptics included for the most part with the feeble-minded

⁽¹⁵⁾ U.S. Civil Prisons, State Prisons, State & County Penitentiaries, Reformatories for Adults, County Jails & Work-houses, Municipal Prisons & Work-houses, including 599,000 in 1890 and 1,000,000 in 1900

⁽¹⁶⁾ Includes cases of imprisonment for non-payment of the 100,000 and 1,000,000

⁽¹⁷⁾ Orphanages & Children's Homes, Nurseries, hospitals, dispensaries, permanent and temporary homes

hand. Among other remedies, the following have been proposed as means for promoting or effecting the desired ends:—

1. Life segregation (or segregation during the reproductive period).
2. Sterilization.
3. Restrictive marriage laws and customs.
4. Eugenic education of the public and of prospective marriage mates.
5. Systems of matings purporting to remove defective traits.
6. General environmental betterment.
7. Polygamy.
8. Euthanasia.
9. Neo-Malthusian doctrine, artificial interference to prevent conception.
10. Laissez-faire.

Which of these remedies shall be applied? Shall one, two, several, or all be made to operate? What are the limitations and possibilities of each remedy? Shall one class of the socially unfit be treated with one remedy and another with a different one? Shall the specifically selected remedy be applied to the class or to the individual? What are the principles and limits of compromise between conservation and elimination in cases of individuals bearing a germ-plasm with a mixture of the determiners for both defective and sterling traits? What are the criteria for the identification of individuals bearing defective germ-plasm? What can be hoped from the application of some definite elimination program? What practical difficulties stand in the way? How can they be overcome? These and other questions arise, hence this investigation.

It is difficult, indeed, to make an accurate estimate of the number of defectives not in institutions. The eleventh (1890) census enumerated 95,609 feeble-minded persons not in institutions, while only 5,254 of this class were found within institutions. The special enumeration of the twelfth census (1904) found 15,153 blind and deaf individuals within institutions, while not in institutions Alexander Graham Bell's special enumeration of 1900 found 64,763 blind persons, and 89,287 deaf persons. In 1910 the enumeration returned 61,423 deaf and dumb, 44,312 blind, and 584 blind, deaf, and dumb, total 106,314.

In 1900 (the twelfth census) 634,877, or .8% of the population of the United States, were under custodial care. It is, doubtless, conservative to estimate that at least 3,000,000, or nearly 4%, were equally defective, but not under the State's care. While upon the borderline, just above this class, were, doubtless, 7,000,000, or nearly 10% of the total population, who, though barely able to care for themselves, and only just abstaining from acts which would bring them under the care of the State, are of such inferior blood, and are so interwoven in kinship with those still more defective, that they are totally unfitted to become the parents of useful citizens.

3.—*History of Sterilization Legislation in the United States.*

In eight of the States of the Union there are laws authorizing or requiring sterilization of certain classes of defectives and degenerates.

The first law was passed in Indiana in 1907, and the last in the State of New York in 1912. The other States which have enacted similar laws are Connecticut, California, Iowa, Nevada, New Jersey, and Washington.

Except in Indiana and in California little or nothing has been done to carry out these laws. Their constitutionality is in question. Attorneys-general for the several states do not seem anxious to defend suits and appear to encourage delay in putting the laws into operation, and in Indiana, where for seven or eight years vasectomy was practised without law and exclusively at the request or with the consent of the person operated upon, and for two years thereafter under the law of 1907 compulsorily, there have been no operations since 1909 except a very few cases at their own request, not ten in all.

In New Jersey a suit is pending in the Supreme Court to determine the right of the state to have sterilized certain confirmed criminals, insane, epileptics, and feeble-minded persons who have been certified by the State Commission as proper subjects for the operation. As the entering of a suit stays the execution of the law, it seems likely that these cases may not be pressed for trial for some time, unless a strong public interest should demand a speedy adjudication. Such interest is not apparent at present.

An eminent legal authority of New York City, Mr. Louis Marshall, has given this committee his views about the constitutionality of the law so far as it relates to criminals. He says (I quote in part):—

"Except so far as prohibited by the constitutional prohibition against the imposition of cruel and unusual punishment, I believe that it is within the power of the State to inflict the death penalty in such cases as at common law were subject to that punishment, and to impose imprisonment up to the limit of incarceration for life, due regard being had to the nature and character of the crime sought to be punished."

"The prohibition against the infliction of cruel and inhuman punishment is difficult of precise definition. It is generally understood to have reference to the imposition of torture, of a punishment which is barbarous and wanton and repugnant to the public conscience. Electrocution has been held not to constitute cruel and unusual punishment within the inhibition of the Constitution, in *People ex rel Kemmler v. Durston*, 119 N. Y. 559, Affd. 136 U. S. 436, 446. The decapitation of a hand of a kleptomaniac, the branding of one who has committed the crime of burglary, or the amputation of the sexual organs of one guilty of adultery, would, doubtless, in this age, be deemed cruel and unusual punishment."

"I understand that the operation of vasectomy is painless and has no effect upon the person upon whom it is imposed other than to render it

STATE.	DATE.	PERSONS SUBJECT.	HOW SELECTED.	TYPE OF OPERATION.	MOTIVE.
1. INDIANA	1907	Inmates of all State Institutions deemed by Commission of three surgeons to be unimprovable mentally and physically, and unfit for procreation.	Option of commission within the classes subject.	Any type at option of commission.	Purely Eugenic
2. WASHINGTON	1909	Habitual criminals and persons adjudged guilty of carnal abuse of female persons under 10 years of age, or of rape.	Order of court passing sentence for offence.	Any operation for the prevention of procreation.	Purely punitive
3. CALIFORNIA	1909	Inmates of State Hospitals and Homes for Feeble-minded and Criminals of State Prisons committed for life or having an mental perversion or abnormality for sexual offenses or those unfit for other crimes.	Recommendation of Superintendent or resident physician to a board consisting of three and five members, State Board of Health.	Asexualization	For the physical, mental or moral benefit of inmate.
4. CONNECTICUT	1909	Inmates of State Prisons and of State Hospitals at Middletown and Norwich.	Selected by a board of three surgeons (the resident physician and two others appointed by the Superintendent of the Institution) for each institution on the basis of mental and physical conditions and family history.	Vasectomy or oophorectomy in a safe and humane manner.	Purely Eugenic, also therapeutic
5. NEVADA	1911	Habitual criminals, persons adjudged guilty of carnal abuse of female persons under 10 years of age and of rape.	Order of court passing sentence for offence	Any operation for the prevention of procreation except castration.	Purely punitive
6. IOWA	1911	Inmates of public institutions for criminals, idiots, feeble-minded imbeciles, drunkards, drug fiends, epileptics, typhilitics, etc.	By annual examination by managing officers of each institution deemed inadvisable to allow to procreate or decided a sex or mental perverser. Board of Public Orders heads of institutions to perform operation.	Vasectomy or oophorectomy.	Purely Eugenic
7. NEW JERSEY	1911	Inmates of state reformatories, charitable and penal institutions (negot and confirmed criminals).	Board of selection. Physical, mental conditions and hereditary defects selected by unanimous vote of Board of Examiners. Commissioner of Charities, Correction and Prison and Surgeon General. The latter appoints by the person for whom the operation is to be performed. The latter appoints by the person for whom the operation is to be performed. The latter appoints by the person for whom the operation is to be performed.	Any type of operation for the prevention of procreation as determined by Board of Examiners.	Purely Eugenic
8. NEW YORK	1912	Inmates of State Hospitals for the insane, state prisons, reformatories and charitable institutions and registered and confirmed criminals in penal institutions.	Board of selection. Physical and mental conditions and hereditary defects selected by unanimous vote of Board of Examiners. Commissioner of Charities, Correction and Prison and Surgeon General. The latter appoints by the person for whom the operation is to be performed. The latter appoints by the person for whom the operation is to be performed. The latter appoints by the person for whom the operation is to be performed.	Any operation for the prevention of procreation as determined by Board of Examiners.	Purely Eugenic
SUGGESTED EXPERIMENTAL STATE LAW	—	Inmates of all State and Municipal Hospitals for the insane, institutions for the feeble-minded, epileptic and imbecile, Reformatories, charitable and penal institutions.	Every inmate just prior to release provided it is deemed surgically advisable by a Eupenic Board of Examiners. The latter appoints by the person for whom the operation is to be performed. The latter appoints by the person for whom the operation is to be performed. The latter appoints by the person for whom the operation is to be performed.	Sterilization. Type determined by the Eugenic Board at time of recommendation for sterilization.	Purely Eugenic
SUGGESTED EXPERIMENTAL FEDERAL LAW	—	Inmates of all Federal hospitals, reformatories, and charitable and penal institutions. Defective immigrants and immigrants with defective heredity.	Every inmate or immigrant just prior to release provided it is deemed surgically advisable by a Eupenic Board of Examiners. The latter appoints by the person for whom the operation is to be performed. The latter appoints by the person for whom the operation is to be performed. The latter appoints by the person for whom the operation is to be performed.	Sterilization. Type determined by the Eugenic Board at time of recommendation for sterilization.	Purely Eugenic

impossible for him to have progeny. If it could be said that such a punishment would only be inflicted in the case of confirmed criminals, there would be strong reasons, founded on considerations of public welfare, which would justify its imposition. The danger, however, is that it might be inflicted upon one who is not an habitual criminal, who might have been a victim of circumstances, and who could be reformed. To deprive such an individual of all hope of progeny, would approach closely to the line of cruel and unusual punishment. There are cases where juvenile offenders have been rendered habitual criminals who subsequently became exemplary citizens. It is true that these cases are infrequent, and yet the very fact that they exist would require the exercise of extreme caution in determining whether such a punishment is constitutional."

"Although not entirely certain as to this phase of the case, I have no doubt the imposition of such a penalty by a commission or a state board, or by any tribunal other than a court which is to determine the penalty for the offence of which one charged with crime has been convicted, would be unconstitutional. The determination that such an operation shall be performed necessarily involves the infliction of a penalty. Unless justified by a conviction for crime, it would be a wanton and unauthorized act and an unwarranted deprivation of the liberty of the citizen. In order to justify it, the person upon whom the operation is to be performed has, therefore, the right to insist upon his right to due process of law. That right is withheld if vasectomy is directed, not by the court which imposes the penalty for the crime, but by a board of commission, which acts upon its own initiative, or which, under a general provision of law, undertakes to determine whether or not the operation shall be performed on a specific individual."

"So in regard to the legislation which you now have under consideration, it is my firm opinion that the court which imposes the sentence upon the prisoner can alone impose the penalty of vasectomy, the prisoner being first accorded an opportunity to be heard by the court on the question as to whether or not such punishment shall be inflicted."

"I fear that the public is not, as yet, prepared to deal with this problem; it requires education on the subject. I cannot, however, refrain from expressing the general opinion that the movement is one which is based on sound considerations. The difficulty is, however, in adopting proper safeguards to adequately protect those who are not hopelessly confirmed criminals, degenerates, or defectives."

4.—Sterilization in Indiana and California.

It appears that there have been many more cases of sterilization of different types within institutions, for purely medical or for a combination of medical and Eugenic reasons, usually with the consent of the parents or guardians, without specific legislative authority, than have been performed under the statutes. Thus, in some of the institutions of Pennsylvania,

Kansas, Idaho, Virginia, and Massachusetts, none of which states has a sterilization law, there have been sterilized a considerable number of individuals. Up to the present time the only official records of operations under legal authority are those of the 125 or 130 men vasectomized in the Jeffersonville (Indiana) Reformatory during the years 1907 and 1908, and the 220 persons, both males and females, asexualized in the California institutions since November, 1910.

Indiana was the first (1907) of the several states to pass a law legislating Eugenic sterilization. In order to obtain a first hand report of the history of the movement and to observe at close range the actual working of the law, a sub-committee of the sterilization committee, consisting of the Chairman and Secretary, visited the Jeffersonville (Indiana) Reformatory in January, 1912, this being the only institution in Indiana attempting to enforce the law. Due credit must be given to Dr. H. C. Sharp, Surgeon at the Reformatory, during the agitation for and the execution of the law, for energetically promoting and courageously trying this important Eugenic experiment. The committee was courteously received by Dr. David C. Peyton, Superintendent of the Institution, who was one of the chief advocates of the law, and every opportunity for thorough investigation was given. Three cases of vasectomy were performed on voluntary candidates for the instruction of the committee. More than a dozen sterilized men in the Reformatory were examined by the committee with the view to determining their physical, mental, and moral make-up, with especial reference to the effects of vasectomy on the sexually perverted instincts and practices; and a trained investigator was left in charge to complete the case history records, and to study the family histories of the vasectomized men in their home territories. All of these cases of vasectomy were performed by Dr. H. C. Sharp, Surgeon of the Jeffersonville Reformatory, who was also the chief advocate of the law, and is now a member of the board of control of the Jeffersonville Reformatory. His first operation was performed in 1899, eight years before the enactment of the law, and during this interval the operation was performed by him on 176 men at their own request. In 1907 and 1908 about 125 compulsory operations were performed, until the inauguration of Governor Marshall in January, 1909.

Dr. F. W. Hatch, General Superintendent of the California hospitals for the insane, under date of June 21st, 1912, reports the following situation in regard to sterilization in California:—

"The law of California authorizing asexualization is by no means a perfect law, and yet this very imperfection has been the means possibly of acquainting a portion of the public of the probabilities and benefits of the operation."

"In putting the law in action in the State Hospitals we have proceeded cautiously and avoided in the great majority of cases any arbitrary action in

very radical change in methods, a proceeding about which there was very much disagreement and some considerable feeling. Our plan of proceeding with the work follows an agreement with the Secretary of the State Board of Health and myself, that relatives, where possible, should be consulted, the operation explained to them, and their written consent obtained before the work was performed. In many cases where relatives were not to be located and where patients were on the road to recovery and in a state to sensibly consider the subject, we have obtained the consent of patients. In a few rare cases we have operated against the wish of the patients."

"The Superintendent of a hospital having cases that he believes should be operated upon, takes the case up with the father, mother, husband, or wife, as the case may be, either by letter or personal interview and explains the desirability of the operation, its result, its possible dangers. Consent having been obtained from the nearest relative or relatives, a history of the case with the recommendation of the medical superintendent is sent to my office where the report is considered by the Secretary of the State Board of Health and myself, and our consent granted, if in our opinion it is desirable. The superintendent on being notified of our consent, proceeds with the operation, a report of the work being sent to and kept on file in the office of the Lunacy Commission."

"Among those of the male sex the operation is uniformly a vasectomy: a local anæsthetic is used; the lower end of the vas is left open so that the spermatozoa are discharged into the sac and reabsorbed into the general system."

"In the women the usual operation is a salpingectomy, though an occasional oophorectomy is done in cases where diseased conditions seem to indicate it."

"In all there are 94 women operated upon."

"There has been one death in a case complicated by an appendectomy in which an acute nephritis developed a few days after the operation."

"In all, since November, 1910, there have been performed 220 asexualizations. Of those operated upon, 34 were 19 years of age or under; forty-five were from 20 to 24 years of age, and 54 were from 25 to 29 years old; 37 were from 30 to 34 years. Forty-seven of the women were married, 38 single. A large proportion of the men were single, 76 of them being 29 years of age or under. Fifty per cent. of the men had either an insane or alcoholic inheritance that could be ascertained. Many of those operated upon have been discharged and are living at home in comfort. As a general rule all are benefited to some extent by the operation. In some of the vasectomy cases but little improvement in the mental condition is to be noted. We endeavour to keep track of those who are discharged and receive reports from time to time. We have found no ill effects. No

" Properly applied, I believe that sterilization will be of great benefit to humanity if generally adopted."

" Investigation has made it probable that about 30 per cent. of the general population carry the neuropathic taint; this, of course, includes those under detention probably a little more than one per cent."

" At the present time Indiana, Iowa, Connecticut, Utah, and New Jersey have laws legalizing sterilization and asexualization; but with the exception of Indiana and California little work has been done."

" There is no question but sterilization of confirmed criminals, habitual drunkards and drug habitues, epileptics, sexual and moral perverts in reformatories and other places of detention, those suffering from acute recurrent psychosis, is a proper proceeding, and for the benefit of mankind."

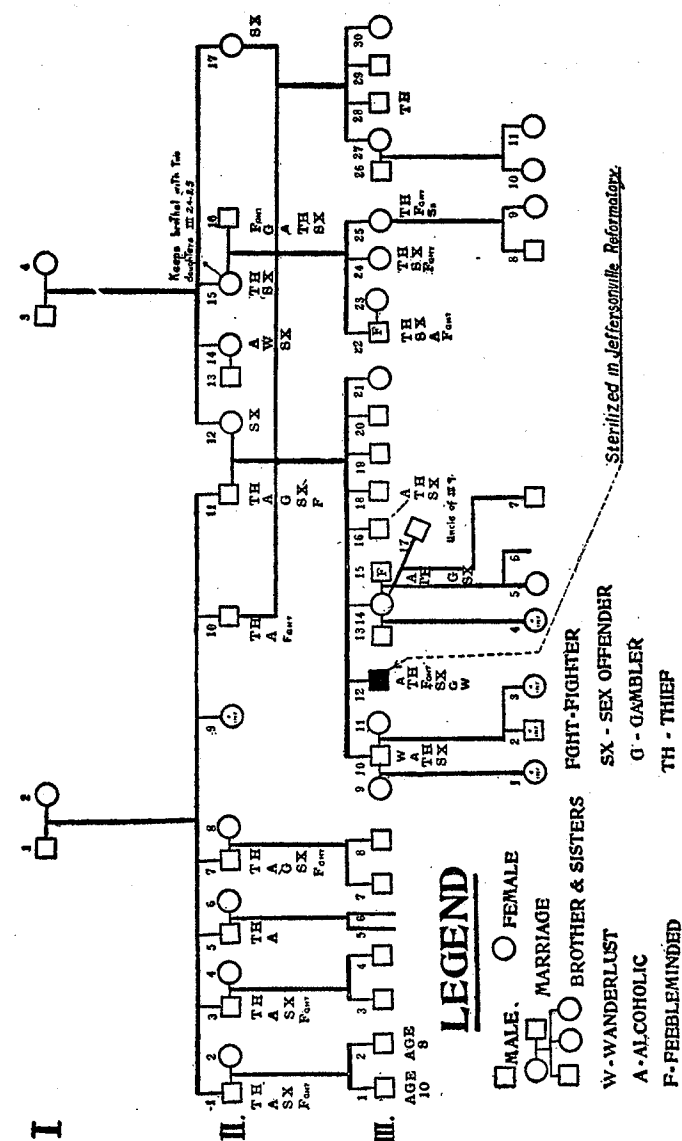
" The figures on heredity that I have given do not fairly represent the actual amount of inheritance as in many cases we could obtain no family history, though the character of the mental affection would indicate previous disease in ancestry. In our experience in this State we find very much less trouble in obtaining consent of relatives at the present time than when we first commenced the work. It is apparent that the public are being educated up to the value of the work."

The following pedigree and description of traits were obtained at first hand by our committee (*see page 471*) and records the family and individual history of a defective individual (III.-12) sterilized in the Jeffersonville (Indiana) Reformatory. Note the general prevalence of wanderlust, alcoholism, low mentality, sex offence, thievish instincts, and other defects. The individual (III.-12) is of Dutch-American descent, born in the United States, age 24 at the date of operation which was performed in the Jeffersonville (Indiana) Reformatory in 1906 at his own request after hearing the subject discussed by two officers of the institution. He wished to decrease his sexual desires, which were constant and excessive, also to avoid the possibility of having children. He was a sexual pervert of a pronounced type, and realized (he said) his bad heredity, and did not wish his kind perpetuated. He had been a criminal from his earliest days, and much of his life had been spent in institutions. No education, except as obtained there. Of slow intelligence. He claimed (1912) to have improved in mind and body after vasectomy, to have gained in weight, in strength, and in power to concentrate. Sleeps better, less nervous, decrease of over-sexuality. Still sexually perverted, however, as shown by his conduct in prison now.

The purpose of this particular study of the individual and family history was to determine whether or not in sterilizing this individual (III.-12) the State effected the cutting off of at least one line of defective inheritance. The committee feels justified in reporting an affirmative answer.

This history is fairly typical of some thirty similar records of men who were sterilized in the Jeffersonville (Indiana) Reformatory from six years to

PEDIGREE OF THE W== FAMILY OF== INDIANA.



From these and other similar records, it would appear that vasectomy of the adult male criminal:—

1. Causes little or no physiological change other than effective sterilization. This, however, is not in all cases permanent.
2. Effects practically no change in sex instincts, and little in sex habits.
3. May have a beneficial mental effect for the time being in aiding the patient to concentrate more on other interests and throw off sexual obsessions.

5.—*Effects of Sterilization.*

Many thousands of sterilization operations have been performed by surgeons in both private and institutional practice. As a rule, these operations have been for purely pathological reasons, and it has been found difficult to obtain authentic records of the more remote effects of these operations. As a matter of fact, records of the effects of such operations extending over a long period of time do not exist to any great extent. As a rule, when a patient has made a satisfactory recovery, the case is dismissed, and the surgeon has no further knowledge of it. The committee has, however, begun the collection of first hand records of cases of sterilization of different types on different types of people at different ages, and in different conditions. The following table explains the nature of the types of operations, and the sorts of people operated upon, the case histories of which it will be necessary to secure in numbers great enough to justify generalization as to the immediate and remote effects.

The committee hopes to secure at first hand some 30 or more cases describing in detail the effects of the operation in each of the several group-combinations above charted. It will be seen that this calls for a grouping into 40 classes, and that some twelve hundred case histories must be secured. Up to the present time (June 26, 1912) the committee has secured over one hundred such histories scattered over the grouping above mentioned. Of this number, however, 31 are of criminalistic males vasectomized after puberty. It was this group of cases that enabled the committee to make the generalizations in connection with the W——— case above reported. There are accessible, of course, cases of sterilization in medical literature, but since this study seeks primarily the effects of the operation on so many different traits, the principal data used must come from first hand observations. It might be of interest to record that the cases thus far reported verify the general conception of the effects of sterilization, namely, that castration or ovariectomy in young individuals stops development of the secondary sexual characteristics. That a sterilizing operation of any sort in adults effects but little change in habits and structure previously formed. One case history is of a man injured at the age of 11 years in such a manner that the testicles ceased growing. The sex instinct is entirely absent in this man now 54 years of age. The pubic and axillary hair did not develop. No beard grew on the face. The hair on the head was fine, the voice tenor. The general appearance was neither decidedly that of a man nor a woman. This same man had a nephew who was injured in the South African War, and was castrated at 21 years of age. As far as our records go, it appears that this individual did not experience a diminution of sex instincts nor a change in sex habits, nor any marked change in mind or body. It also appears from several case histories that ovariectomy does not diminish sex instincts of erotic women: that eight cases of castration of feeble-minded

EFFECTS OF STERILIZATION.

NORMAL PERSONS NEUROPATHIC PERSONS CRIMINALISTIC PERSONS FEEBLE-MINDED PERSONS VENEREALLY INFECTED PERSONS												
OPERATION	MALES		FEMALES		MALES		FEMALES		MALES		FEMALES	
	CASTRATION BEFORE PUBERTY	OVARIOTOMY AFTER PUBERTY	CASTRATION BEFORE PUBERTY	OVARIOTOMY AFTER PUBERTY	CASTRATION BEFORE PUBERTY	OVARIOTOMY AFTER PUBERTY	CASTRATION BEFORE PUBERTY	OVARIOTOMY AFTER PUBERTY	CASTRATION BEFORE PUBERTY	OVARIOTOMY AFTER PUBERTY	CASTRATION BEFORE PUBERTY	OVARIOTOMY AFTER PUBERTY
1. Strength												
2. Sex Organs												
3. Hair												
4. Voice												
5. General Appearance												
6. Sex Instincts												
7. Habits												
8. Mind												
9. Body												
10. Temperament												
11. Condition												
12. Strength												
13. Sex Organs												
14. Hair												
15. Voice												
16. General Appearance												
17. Sex Instincts												
18. Habits												
19. Mind												
20. Body												
21. Temperament												
22. Condition												
23. Strength												
24. Sex Organs												
25. Hair												
26. Voice												
27. General Appearance												
28. Sex Instincts												
29. Habits												
30. Mind												
31. Body												
32. Temperament												
33. Condition												
34. Strength												
35. Sex Organs												
36. Hair												
37. Voice												
38. General Appearance												
39. Sex Instincts												
40. Habits												
41. Mind												
42. Body												
43. Temperament												
44. Condition												
45. Strength												
46. Sex Organs												
47. Hair												
48. Voice												
49. General Appearance												
50. Sex Instincts												
51. Habits												
52. Mind												
53. Body												
54. Temperament												
55. Condition												
56. Strength												
57. Sex Organs												
58. Hair												
59. Voice												
60. General Appearance												
61. Sex Instincts												
62. Habits												
63. Mind												
64. Body												
65. Temperament												
66. Condition												
67. Strength												
68. Sex Organs												
69. Hair												
70. Voice												
71. General Appearance												
72. Sex Instincts												
73. Habits												
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76. Temperament												
77. Condition												
78. Strength												
79. Sex Organs												
80. Hair												
81. Voice												
82. General Appearance												
83. Sex Instincts												
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88. Condition												
89. Strength												
90. Sex Organs												
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92. Voice												
93. General Appearance												
94. Sex Instincts												
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112. Sex Organs												
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123. Sex Organs												
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125. Voice												
126. General Appearance												
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145. Sex Organs												
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147. Voice												
148. General Appearance												
149. Sex Instincts												
150. Habits												
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153. Temperament												
154. Condition												
155. Strength												
156. Sex Organs												
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159. General Appearance												
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164. Temperament												
165. Condition												
166. Strength												
167. Sex Organs												
168. Hair												
169. Voice												
170. General Appearance												
171. Sex Instincts												
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174. Body												
175. Temperament												
176. Condition												
177. Strength												
178. Sex Organs												
179. Hair												
180. Voice												
181. General Appearance												
182. Sex Instincts												
183. Habits												
184. Mind												
185. Body												
186. Temperament												
187. Condition												
188. Strength												

boys and young men reported by Dr. H. H. Goddard, Vineland, N.J., showed, at the expiration of two years, no effects solely attributable to castration. The committee begs to state that this phase of the investigation will continue until the generalizations called for by the above table can be made from first hand evidence.

6.—*An Example of Eugenic Vasectomy in a State not having a Specific Law Authorizing Sterilization.*

Case and family history of H——, an inmate of the Boston State Hospital for the Insane. The patient is 42 years of age, a native of Ireland, had been committed to an insane hospital before coming to America. Good habits, steady worker, can earn ten dollars a week in low grade shipping work. The wife of the patient is of a decidedly inferior make-up, but is a good mother, and keeps a clean and orderly house. She said that they had all the children they could provide for, and that they do not want any more, but realised that probably more would come. The following table shows the nature of the offspring of the patient, subject to attacks of insanity, and of his wife, an individual of decided inferiority:— (see page 475.)

After a few months' treatment it was found that the patient had apparently recovered, and was able to go back to the industrial world, and it was learned that he could secure his old position at ten dollars a week. Meanwhile the patient was a State expense, his family was dependent upon charity. The only objection to his release was the danger of propagating more children of the sort already produced. Vasectomy was proposed, but he objected. The wife was brought in, and the patient, the hospital authorities, and the wife held a conference. Vasectomy was finally agreed to by the man, and was performed (April, 1912) and the patient discharged.

This is an actual, quite recent case illustrating the manner in which institution authorities may promote Eugenic ends by sterilizing certain types of defectives without the aid of a specific sterilization law, and be entirely within their legal rights as custodians of defectives and degenerates, and protectors of society.

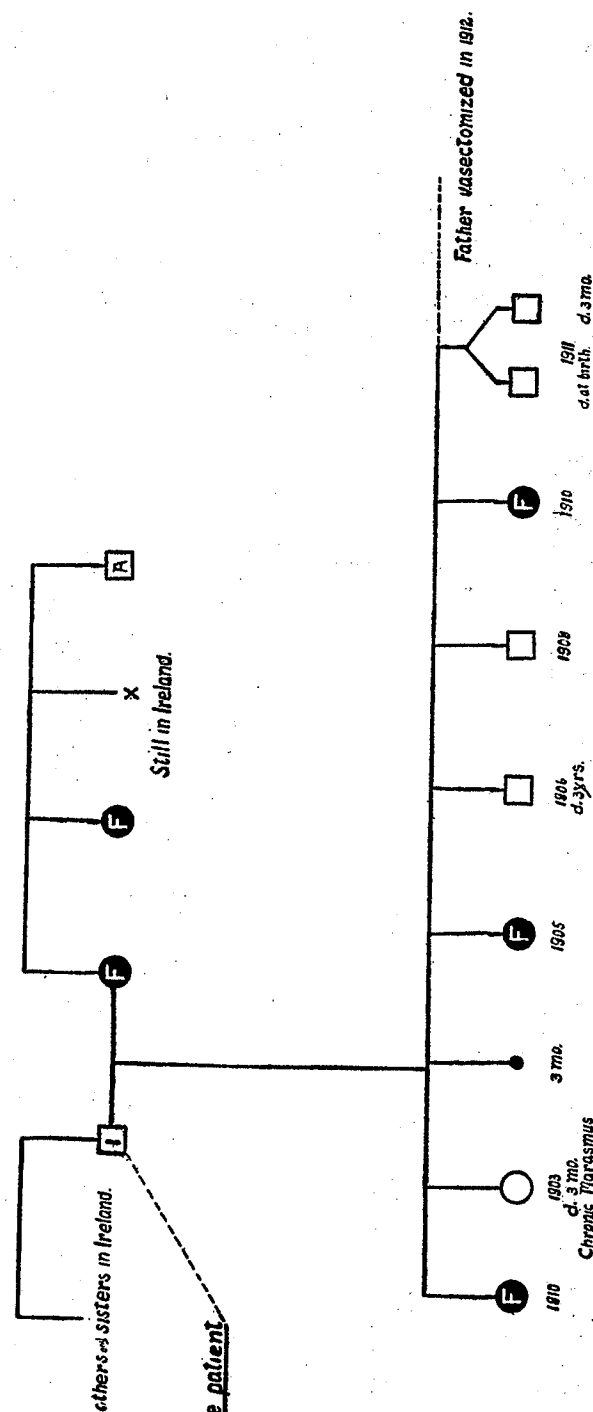
7.—*A Suggestion derived from Observations in Thremmatology.*

Except for the cases recorded in California, no females have been sterilized under any of the sterilization laws. This fact has its biological bearings, as follows:—

In the breeding of the higher and more valuable types of domestic animals, such as horses and cattle, sterilization of surplus males is one custom universally practised. The females of these animals are well cared for and protected from free union with the males; selected matings are the rule. However, in the case of domestic animals of less value, having mongrel and homeless strains and individuals, such as the dog and the cat.

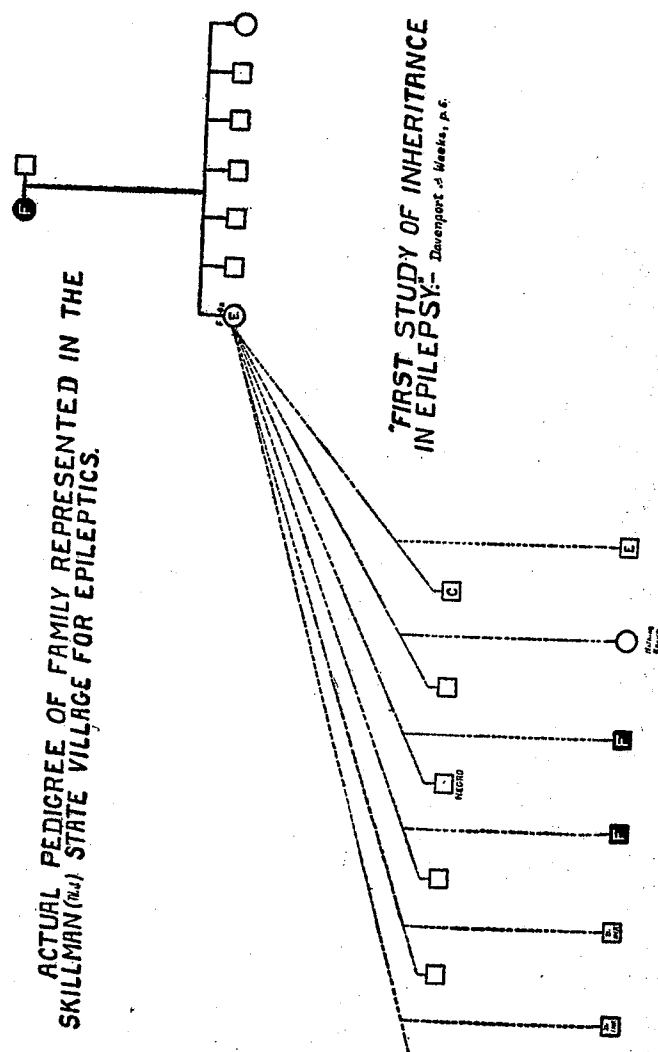
THE M—H—PEDIGREE

Showing the sort of offspring being produced by an insane man until he was sterilized upon being discharged after a short commitment in the Boston State Hospital.



the cutting off of their supply is largely effected through the destruction of the females. As a rule the tax on a female dog is two or three times greater than that on a male dog. The females of this homeless species are not protected, and consequently they increase very rapidly. Consorting freely with equally worthless mates, the progeny of such individuals are often excessive in numbers, and of a worthless mongrel sort. Would the castration of one-half of the male mongrel dogs effect a substantial reduction in the number of mongrel pups born? If not, in an effective sterilization program, would it not be necessary that the unprotected females of the socially unfit classes should be sterilized in relatively large numbers?

POORHOUSE TYPE OF SOURCE OF DEFECTIVES.



As a case in point, the following pedigree illustrates the manner of increase of defective children from defective women. This is an actual example of the type of pedigree so common that it has become known to students of heredity as the "almshouse" type—a sad commentary on the general ineffectiveness of such institutions:—(see page 476.)

"The central figure is a feeble-minded woman subject to epileptic fits, descended from a feeble-minded mother and a shiftless, worthless father. She has spent most of her life in the almshouse, and all of her children have been inmates. One is by a negro whom she met in the almshouse. Two of the children died in infancy; one, of whom little is known, died at the age of 18. Of the remainder, two are feeble-minded, and one, from a sire of criminal tendencies, is an epileptic imbecile." (*Inheritance of Epilepsy*, Davenport and Weeks, p. 5.)

8.—Public Opinion.

While it is true that much public interest has developed in the past few years on the subject of sterilization as a Eugenic measure, and periodical literature discussing it has multiplied, it must still be recognised that there is, as yet, no considerable number of people committed to its propaganda. The laws already enacted have usually been put through by some very small energetic group of enthusiasts, who have had influence in the legislatures. In at least two of the States it was chiefly the work of a physician. In one, of a woman. It is, therefore, easy to understand why little has been actually done. The machinery of administration has to be created. It was a new and untried proposition. Public sentiment demanding action was absent. Law officers of the state were not anxious to undertake the defence of a law the constitutionality of which was questioned. So we must frankly confess that what has sometimes seemed to be, and has been heralded in some quarters as a remarkable development in this movement for race betterment, is, as yet, little more than the hobby of a few groups of people, and does not really indicate the adoption of a settled policy. It is evident that active hostility and opposition will arise as soon as there is any attempt to carry out the laws in a thorough-going manner. Much more extensive education of the public will be necessary before the practice of sterilization can be carried to the extent which will make it a factor of importance in any Eugenic program.

It has been said that the Roman Catholic Church is strongly opposed to sterilization. From Catholic sources, we learn, first, that the Church has no dogma on the subject, and, second, that among the prelates of the Church and the priesthood there are held opposing views. For a year and a half, during 1910 and 1911, an active controversy was carried on in the pages of the "*American Ecclesiastical Review*" on this subject. There were five

principal controversialists, two (Fathers Donovan and Lebourg) were proponents, three (Fathers de Becker, Rigby, and Schmitt) opponents. The arguments were generally in Latin, and centred about these points, viz., the right of a Catholic physician to perform the operation of vasectomy or castration for any but a pathological reason; the right of an individual to submit to such an operation voluntarily for any but a medical necessity; the right of the State (from the ecclesiastical point of view) to permanently deprive an individual of an inherent and God-given right which he would otherwise enjoy by civil law, if society can be protected from his misdeeds by any other methods; and finally, "is vasectomy a mutilation?" The arguments were for the most part theological, and no conclusions appear to have been reached on any of these points, both sides leaving off practically where they began. The preponderance of Roman Catholic sentiment, however, at the present time is undoubtedly opposed to any form of sterilization as a Eugenic measure. In Pennsylvania it is said a sterilization bill was defeated in the Legislature solely by the strong opposition of one Roman Catholic member, who considered it an unjustifiable mutilation.

Among social workers, professional and otherwise, there appears to be a growing interest in sterilization, but doubt about its practicability. It is thought of as more or less brutal. By some the eugenist's attitude is represented as being opposed to humanitarian efforts for the amelioration of conditions of life which burden and handicap the masses, and finally submerge the "tenth." Dr. Edward T. Devine, Professor of Sociology in Columbia University, in an impassioned address at the annual dinner of the Academy of Political Science in New York, recently said: "There are those . . . who have been making extraordinary applications of this Eugenics idea, who have been telling us that philanthropy, the improvement of social conditions, the prevention of child labour, the elimination of infectious diseases, and the like, are to be condemned as contrary to the fundamental and vital interests of the race. Just as in the past war, famine and pestilence were essential to progress . . . , so now we have the slums, tuberculosis, typhoid, industrial accidents, child labour, a twelve-hour day, and a seven day week . . . performing in our day the same beneficent functions." After a vigorous protest against this doctrine, he closed thus: "our last word is of rehabilitation, reintegration, redemption."

The committee has recently received letters from the Governors of Vermont and Kentucky asking for information regarding legislation, and strongly endorsing the proposition that defectives, degenerates, and confirmed criminals should be sterilized. Both hope soon to secure legislation in their respective States legalizing the operation. From officials in several other States inquiries have been received regarding legislation and what has been done elsewhere. It seems probable, therefore, that similar laws will soon be enacted in other States.

9.—*Summing up of the Preliminary Study.*

This is only a preliminary report, and we have touched in a desultory way upon only a few of the many aspects of our subject worthy of consideration. While we do not feel justified in offering conclusions based upon the data already accumulated, we may say tentatively that such as we have seem to indicate:—

1st. That the sterilization of the adult male by vasectomy is a simple, practicable method of preventing procreation by him without otherwise interfering with his sexual functions, but that it is not certainly permanent in this respect. Castration only is sure.

2nd. That sterilization of the adult female by either salpingectomy (ligating or excising), ovariectomy, or hysterectomy, or all three, is never wholly free from danger to life or to disturbance of other bodily and mental functions. Modern surgery and hospital care have greatly reduced these dangers, but they still exist.

3rd. That sterilization of adults by any of these processes does not appear greatly to modify previous sex characteristics, and habits. In females sexual passion is sometimes increased. In males more often somewhat mitigated.

4th. That there is little probability that sexual immorality would be encouraged or increased as a result of the sterilization of those manifestly unfit for parenthood. Our investigations indicate that such persons seldom are deterred from immoral practices by any consideration which sterilizing would remove.

5th. That our knowledge is, as yet, so limited that only a few types could safely be selected at the present time as suitable for compulsory sterilization. Individuals of these types would generally require more or less custodial care throughout life, whether sterilized or not, but their sterilization would be an insurance against unworthy progeny, and so eugenically of value.

6th. That vasectomy may become a Eugenic measure of considerable value if practised under the general protection of law, but by persuasion and with the consent of the individual (or his guardians) who is unfitted for parenthood, instead of by compulsion. That this consent can often be obtained, when conditions warrant it, has been clearly shown.

7th. That the sterilization laws already enacted in United States will have to undergo vigorous attacks before the highest courts before many more compulsory operations are performed, with the probability that there will eventually be material modifications of them.