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PROPAGATING PERFECTION: EUGENIC STERILIZATION
AT THE UTAH STATE TRAINING SCHOOL, 1935 - 1974

by

Jennifer Rust

A thesis submitted in partial fulfillment
Of the requirements for the degree

of

MASTER OF SCIENCE

in

History

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ABSTRACT

Propagating Perfection: Eugenic Sterilization
at the Utah State Training School, 1935 – 1974

by

Jennifer Rust, Master of Science

Utah State University, 2016

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Department: History

Compulsory sterilization as a tool of eugenics occurred in the United States from before the U.S. Supreme Court upheld its' constitutionality in 1927 until the early 1970s. Initial justification for removing a person's ability to procreate was rooted in hereditarian assertions that disability was transmitted from parent to offspring, and incorporated an economic argument that individuals with disabilities placed a financial burden on the state for care. Due to scientific deconstruction of the hereditarian argument, rationalization for sterilization evolved into an anxiety over the perceived inability of the disabled to parent. The state of Utah sterilized 738 individuals with intellectual disabilities from 1935 to 1974. This paper explores how Utah was similar to other states in terms of implementing compulsory sterilization through the establishment of the Utah State Training School and the philosophy of its leadership team.

(108 pages)

PUBLIC ABSTRACT

Propagating Perfection: Eugenic Sterilization
at the Utah State Training School, 1935 – 1974

Jennifer Rust

Compulsory sterilization as a tool of eugenics occurred in the United States from before the U.S. Supreme Court upheld its' constitutionality in 1927 until the early 1970s. Initial justification for removing a person's ability to procreate was rooted in hereditarian assertions that disability was transmitted from parent to offspring, and incorporated an economic argument that individuals with disabilities placed a financial burden on the state for care. Due to scientific deconstruction of the hereditarian argument, rationalization for sterilization evolved into an anxiety over the perceived inability of the disabled to parent. The state of Utah sterilized 738 individuals with intellectual disabilities from 1935 to 1974. This paper explores how Utah was similar to other states in terms of implementing compulsory sterilization through the establishment of the Utah State Training School and the philosophy of its leadership team.

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CHAPTER ONE: INTRODUCTION

A BRIEF HISTORY OF COMPULSORY STERILIZATION IN THE UNITED STATES AND AN INTRODUCTION TO MORMONISM

“I am inclined to agree with Francis Galton in believing that education and environment produce only a small effect on the mind of any one, and that most of our qualities are innate.”¹

- Charles Darwin

Eugenics emerged in the United States at the turn of the twentieth century, a philosophy that led to compulsory sterilization and sanctioned as constitutional by the Supreme Court in 1927. The purpose of this paper is to identify Utah in the historical narrative of eugenics and to determine whether the state was complicit in national trends due to the traditional social, political, and economic arguments of historians or for religious reasons unique to the region. This introductory chapter provides a brief history of eugenics in the United States, including sterilization as a tool specific to the ideology, a brief history of religion in Utah and its eugenic implications, and an outline of concurrent chapters.

Somewhere across the Atlantic Ocean in 1630, Puritan minister John Winthrop addressed his weary congregants in a sermon mythologizing the settlement of the New World: “For we must consider that we shall be as a city upon a hill. The eyes of all people are upon us, so that if we should deal falsely with our God in this work we have undertaken, and so cause Him to withdraw His present

¹ Randall Hansen and Desmond King, *Sterilized by the State: Eugenics, Race, and the Population Scare in Twentieth-Century North America* (New York: Cambridge University Press, 2013), 27.

help from us, we shall be made a story and a by-word through the world.”² Since the time of the Puritans, there was a pervasive belief that Americans were “a peculiar people” chosen by God to settle this “land of Edenic lushness, where material abundance, good health, and moral purity can reign free,” and the descendants of New England Protestants borne the perception that the “purified individual” could transform the American landscape.³ They acknowledged scientific approaches to keep the “American stock” pure by “excising the causes of immoral behavior.”⁴

In 1931, the Utah State Training School opened with the intent to segregate, socialize, and sterilize children and adults with intellectual disabilities. Politics and culture in Utah are largely influenced by the Church of Jesus Christ of Latter-day Saints, a religion that generally discourages any form of birth control. Why, then, was involuntary sterilization mandated for 738 people? While most historians agree on the interplay of race, class, and gender in the application of eugenics, this paper focuses on its convergence with religion and disability to explain why Utah actively pursued this endeavor.

The term used in this paper to refer to its subjects is “individuals with intellectual disabilities,” reflecting the most recent cultural and legislative changes necessary to restore as much dignity as possible to the people at the heart of this study – those with IQs under 70. Historically, terms such as “mentally deficient,”

² Harry Bruinius, *Better For All the World: The Secret History of Forced Sterilization and America's Quest for Racial Purity* (New York: Alfred A. Knopf, 2006), 14.

³ Bruinius, *Better For All the World*, 13.

⁴ Bruinius, *Better For All the World*, 14-15.

“mentally retarded,” “feeble-minded,” and several others were commonly used, though gradually faded due to the pursuit of the individuals themselves as well as human rights activists. When such, now-considered, derogatory terms are used through the text of this paper, every effort has been made to identify both source and context, whether primary or secondary source material, in order to identify the pervasive nature of eugenic belief and intention existing among historical actors and, perhaps even, acting historians.⁵

Scholars who study forced sterilization have connected its history to the rise of eugenics in Europe at the end of the nineteenth century. After Charles Darwin published *On the Origin of Species* in 1859, his cousin and fellow scientist, Francis Galton sought to isolate the genetic nature of intelligence and increase its prevalence as a human character trait. In 1883, Galton argued his conception of eugenics would better society through the increased procreation of the higher classes and discouraged reproduction among those deemed inferior, either because of diminished intellectual capacity or elevated criminal behavior. Scientists, politicians, and financiers in the United States concurred with these beliefs and founded the American Society of Eugenics in 1922.⁶

One of the society's key leaders, Harry H. Laughlin, suggested that sterilization was essential “to purify the breeding stock of the race at all costs.”

⁵ When a primary source uses an outdated term such as “degenerate,” the attribution will occur in the text of the paper. When a term such as “feeble-minded” occurs in quotation marks, it was used in that context and found in the content, without quotation marks, of that scholar’s work and can be located through the footnote.

⁶ Edwin Black, *War Against the Weak: Eugenics and America’s Campaign to Create a Master Race* (New York: Four Walls Eight Windows, 2003), 137.

According to Laughlin and other eugenics advocates, sterilization and incarceration were central to immigration reform. American society at the turn of the twentieth-century was becoming increasingly xenophobic and overwhelmed by immigration on both the eastern seaboard and southwestern border.⁷ Legislators passed laws dictating who could marry and procreate among American citizens.⁸ The prevailing beliefs at the time were that alcoholism, epilepsy, sexual immorality, prostitution, illegitimacy, criminality, mental illness, and all cognitive disorders were passed on genetically to offspring and unrestrained reproduction created an undue economic burden on the state. The state would bear the future cost of incarceration and institutionalization of the next generation of “degenerates” if officials refused to intervene. The constitutional legitimacy was established when Chief Justice Oliver Wendell Holmes wrote in his decision that sterilization was an appropriate measure to “prevent our being swamped with incompetence.”⁹ In *Buck v. Bell*, he notoriously declared, “It is better for all the world if instead of waiting to execute degenerative offspring for crime, or to let them starve for their imbecility, society can prevent those who are manifestly unfit from continuing their kind...Three generations of imbeciles is enough.”¹⁰

Most scholars who have studied eugenics in the United States have debunked Laughlin’s theories and have argued that lawmakers, working in conjunction with doctors, lawyers, and wealthy benefactors, employed compulsory sterilization

⁷ For more information on immigration restriction, see Alexandra Stern’s *Eugenic Nation* or Edwin Black’s *War Against the Weak*.

⁸ Black, *War Against the Weak*, 88.

⁹ Hansen and King, *Sterilized by the State*, 106.

¹⁰ Bruinius, *Better For All the World*, 7.

policies as a means of social control, specifically the prevention of “degenerate” offspring.¹¹ The consensus among historians is that a strong relationship existed between eugenic policies in this country and Germany’s policies up to and during World War II, which ultimately resulted in the Holocaust. While debate persists as to the direct cause, historians point to World War II as the catalyst for the decline in American sterilizations during and after the war. Historians also agree that females were disproportionately targeted for sterilization across the United States based upon their race or class. These arguments do not hold true for Utah where the number of sterilizations held consistent before, during, and after the war and males and females were selected for the procedure at comparatively equal rates.¹²

Eugenics, Race, and Class

Stefan Kühl is a German historian who wrote *The Nazi Connection* in 1994, arguing that American historians minimized the influences of Nazi Germany’s eugenics in the United States. He describes how American eugenicists praised Germany’s compulsory sterilization and anti-miscegenation laws, arguing this camaraderie ended only after the Nazis demonstrated aggression towards Nordic Europeans and Hitler’s declaration of war on the United States.¹³ Edwin Black answered Kühl in *War Against the Weak*, identifying the significant role played by

¹¹ The definition of “degenerate” has been interpreted broadly in the twentieth century, including people government officials assumed would be unproductive members of society: poor, racial minorities, and women.

¹² Demographics will be discussed further in Chapter 3.

¹³ Stefan Kuhl, *The Nazi Connection: Eugenics, American Racism, and German National Socialism* (New York: Oxford University Press, 2002), 106.

notable Americans in the quest for racial purity. Black contended, “Based on the selective breeding of human beings, eugenics began in laboratories on Long Island, but it ended in the concentration camps of Nazi Germany.”¹⁴ Black substantiated Kühl’s argument, contending the United States largely supported Germany’s race hygiene programs, and that sterilizations declined following WWII as American eugenicists distanced themselves from their European counterparts. Harry Bruinius in *Better For All the World* focused on Carrie Bell, the young woman whose sterilization prompted the United States Supreme Court to uphold compulsory sterilization laws throughout the nation. Kühl, Bruinius and Black agreed that government officials and scientists justified compulsory sterilization for people with “diminished mental capacity,” in addition to race, class, and gender.

Jonas Robitscher compiled *Eugenic Sterilization* following a conference on “biomedical interventions on unwilling patients,” with the purpose of expanding the literature available to state lawmakers enacting or repealing compulsory sterilization legislation.¹⁵ The contributors cited institutionalized women of childbearing age, African-Americans, and women on welfare as targets of compulsory sterilization under the discursive generalization of population control. Contributors also claimed the peak of sterilizations occurred during the 1930s and declined during and after World War II.¹⁶

¹⁴ Black, *War Against the Weak*, xvii.

¹⁵ Jonas Robitscher, *Eugenic Sterilization* (Springfield, IL: Charles C. Thomas, 1973), vii.

¹⁶ Robitscher, *Eugenic Sterilization*, 25.

Thomas M. Shapiro in *Population Control Politics: Women, Sterilization, and Reproductive Choice* and Phillip R. Reilly in *The Surgical Solution: A History of Involuntary Sterilization in the United States* both provided comprehensive treatments of the sterilization controversy in the United States. Shapiro introduced the Malthusian argument and acknowledged population controllers as class-oriented, concerned with 'overpopulation' among the lower classes and poorer nations and its impact on the environment, food supplies, and political stability.¹⁷ Reilly agreed with Shapiro about class concerns and illustrated the inseparable connection between medicine and public policy. Reilly established a distinction between geneticists and eugenicists by explaining that the science of genetics was making extraordinary strides through painstakingly methodical practices and were critical of claims made by Harry Laughlin. He contended early geneticists most likely questioned the validity of immigration restriction and involuntary sterilization programs justified with eugenic evidence, but aside from a few critics, most kept silent.¹⁸ He identified that between 1907 and 1960, more than sixty thousand "mentally retarded" and "mentally ill" persons were sterilized without their consent, "All victims of programs designed to cut off the flow of allegedly defective genes into the nation's gene pool."¹⁹

Eugenics and Gender

¹⁷ Thomas M. Shapiro, *Population Control Politics: Women Sterilization, and Reproductive Choice* (Philadelphia: Temple University Press, 1985), 13.

¹⁸ Philip R. Reilly, *The Surgical Solution* (Baltimore: The Johns Hopkins University Press, 1991), 112.

¹⁹ Reilly, *The Surgical Solution*, 12.

Alexandra Stern's *Eugenic Nation*, Simone Caron's book *Who Chooses?*, and Rebecca Kluchin's *Fit To Be Tied*, focus on women specifically, connecting the histories of contraception, sterilization, and abortion on both federal and state levels. Stern counters Black's chronological narrative that eugenics emerged in the eastern United States in the late 19th century leading to the Nazis in World War II Germany by detailing how scientists and politicians in California maintained close relationships with eastern eugenicists and rose to positions of leadership in national organizations and conducted one-third of all sterilizations in the United States between 1909 and the 1960's.²⁰ Caron interlaced histories of contraception, sterilization, and abortion on both federal and state levels, to identify how restrictive reproductive policies, principally implemented by white men, served as obstacles to women's equality for almost two centuries, arguing that the women's rights movement of the 1960s and 1970s wielded less influence in the debate over legalization of birth control and abortion than the population control advocates who hoped to reduce birthrates among poor women and thereby reduce their dependency on welfare.²¹ Kluchin wrote about the contested margins between private choices, public policies and the ways in which race, class, and gender determine these boundaries.²² Kluchin agreed with both Black and Bruinius that eugenicists believed poverty, criminality, illegitimacy, epilepsy, "feeble-mindedness"

²⁰ Alexandra Stern, *Eugenic Nation: Faults and Frontiers of Better Breeding in Modern America* (Berkeley: University of California Press, 2005), 11.

²¹ Caron, Simone M. *Who Chooses?: American Reproductive History since 1830* (Gainesville: University Press of Florida, 2008), 187.

²² Rebecca S. Kluchin, *Critical Issues in Health and Medicine: Fit To Be Tied: Sterilization and Reproductive Rights in America, 1950 – 1980* (New Brunswick, NJ: Rutgers University Press, 2009), 9.

and alcoholism were inherited traits that could not be altered and that by emphasizing the “natural” aptitude of white and native born Americans, eugenicists sought to preserve this group’s social, economic, and political power.²³

Eugenics and Disability

Focusing on mental capacity as criteria for sterilization, Ellen Brantlinger in *Sterilization of People with Mental Disabilities*, argued that disability was as determining a factor for involuntary sterilization as race, class, or gender. She explained the very act of assigning an individual disability status automatically designates them as “Other,” an object of the observer’s experience, and not someone whom could be related to personally. She wrote, “The minority-group paradigm compares how the conditions of segregation, discrimination, and subordination of mentally retarded people are similar to those of certain ethnic, racial, social class, and gender groups.”²⁴ Brantlinger addressed the history of institutionalizing the disabled as it relates to controlling their sexuality. She identified “a prevailing myth” about their presumed asexuality explaining, “Many see disability and sexuality as incompatible concepts – the first automatically precluding the second.”²⁵ This includes an unrealistic justification that diminished mental capacity

²³ Kluchin, *Fit To Be Tied*, 1.

²⁴ Ellen Brantlinger, *The Sterilization of People with Mental Disabilities* (Westport, CT: Auburn House, 1995), xxi.

²⁵ Brantlinger, *Sterilization of People with Disabilities*, 60.

keeps them at a child-like level and therefore asexual beings, which may negatively impact social behaviors.²⁶

Brantlinger agreed with Robitscher's and Reilly's charges that sterilization was employed to prevent the inheritability of "such degeneracies as alcoholism, illegitimacy, sexual immorality, prostitution, criminality, feeble-mindedness, and epilepsy." She wrote, "There was widespread fear that these conditions were on the rise, they would spread perniciously, and their unchecked growth would place an insurmountable burden on others; that degenerates would swamp society and pull others down with them."²⁷ Brantlinger addressed the issue of gender raised by the Oliver Wendell Holmes decision in *Buck v. Bell*. She asserted that by specifically mentioning fallopian tubes and female procreation, Holmes emphasized that sterilization has traditionally been aimed at the potential childbearer rather than the sperm donor. She argued that the reproductive consequences of women's sexual activity received more attention from the courts than any other aspect of sexuality and social life. She wrote, "*Buck* made the sterilizations of MR (mentally retarded) persons without their consent a legitimate public health measure and made preventing the birth of undesirables a national goal." Twenty states passed sterilization laws and the annual rate of sterilizations peaked following the momentous decision.²⁸

Expanding the discussion of disability, Elof Axel Carlson wrote *The Unfit: A History of a Bad Idea* in 2001 and examined the origin of the social category: "unfit."

²⁶ Brantlinger, *Sterilization of People with Disabilities*, xxiii.

²⁷ Brantlinger, *Sterilization of People with Disabilities*, 5.

²⁸ Brantlinger, *Sterilization of People with Disabilities*, 22.

He defined the term as taking hold in the late-nineteenth century to describe “an image of physically and morally weak people associated with society’s failures – paupers, criminals, psychotics, the mentally retarded, vagrants, prostitutes, and beggars.”²⁹ He explained, “Some, especially the feeble-minded, were isolate by containment in asylums, not for treatment, but to protect the public from their presence.”³⁰

In 2013, Hansen and King wrote *Sterilized by the State*, pointing out that superintendents of the institutions that housed the “feeble-minded” possessed a great deal of discretion, as well as legal power, in terms of condoning if not encouraging sterilizations. They argued that post-war coerced sterilization continued due to institutional continuity and the reframing of sterilization in new ideas. After examining the history of eugenics and interplay of international scientists and politicians, Hansen and King traced the origins of mental health institutions in the United States. They discussed varying state laws, court cases, and the American relationship to German eugenics. Regarding *Buck v. Bell*, they identified “the most important legal decision in the history of coerced eugenic sterilization” as “resting on a fraudulent trial record” and “contrived from the beginning.”³¹ They concluded by providing first-hand accounts of those forcibly sterilized and the link between welfare and sterilization.

²⁹ Elof Axel Carlson, *The Unfit: A History of a Bad Idea* (Cold Spring Harbor, NY: Cold Spring Harbor Laboratory Press, 2001), 9.

³⁰ Carlson, *The Unfit*, 388.

³¹ Hansen and King, *Sterilized by the State*, 110.

Eugenics and Religion

Christine Rosen in *Preaching Eugenics: Religious Leaders and the American Eugenics Movement*, argued eugenics provided ministers with an opportunity to contribute to a practical, scientific reform movement. Beginning in 1910, the *American Breeders' Magazine* suggested that churches could exert greater social pressure to prevent marriages among the “unfit” and thus help in the elimination of the “weak fibers” from the network of human descent.³² Roswell Johnson, a member of the American Eugenics Society’s Board of Directors who studied the Latter-day Saints, argued the Mormons added to traditional Christianity “some theological positions and some practices of great moment to eugenics.” The most important of these practices was the Mormon doctrine of “Eternal Progression,” which insisted marriage on earth was necessary for the spirit to reach the highest level of heaven, including the possibility of attaining Godhood. This encouragement of marriage included one notable eugenic exception: “those who through infirmities of mind or body, are not fit for marriage,” an implicit recognition of the importance of limiting defective offspring.³³ Further, because the progression of the soul depended on the fitness of the body it entered, Mormons believed they had a “religious duty to see to it that no defective bodies are provided” for the soul’s housing. According to Johnson, Mormonism was a religion that had “not only eugenic but survival value.”³⁴

³² Christine Rosen, *Preaching Eugenics: Religious Leaders and the American Eugenics Movement* (New York: Oxford University Press, 2004), 36.

³³ Rosen, *Preaching Eugenics*, 134.

³⁴ Rosen, *Preaching Eugenics*, 135.

Mormonism and Eugenics

In order to understand why the state of Utah executed compulsory sterilization, it is important to explore the state's unique entry into the Union. Mormons arguably conceded a great deal of theocratic autonomy to obtain statehood, but the church retained plenty of social, political, and economic influence, particularly in terms of legislative leverage.³⁵ As Winthrop foresaw a "city on a hill," Brigham Young envisioned an earthly Zion for the Great Basin, a gathering place for the true believers of his restored church. His beliefs about how that place would become populated crystallized into polygamy, eventually giving devout followers, who were also policymakers in many cases, the ability to decide who should procreate.

An 1897 article in a Mormon women's magazine described earthly "tabernacles" awaiting "multitudes of spirits." Even before the Mormon expulsion from Missouri and migration to Utah, Brigham Young believed the objective of marriage was to multiply the species, according to the commandment of God. He wrote, "This is the reason why the doctrine of plurality was revealed, that noble spirits which are waiting for tabernacles might be brought forth." There was no ambiguity: The commandment had been to "multiply and replenish the earth," and

³⁵ For further discussion see Brian Q. Cannon and Charles S. Peterson, *The Awkward State of Utah: Coming of Age in the Nation, 1896-1945* (Salt Lake City: University of Utah Press, 2015) and Thomas Alexander, *Mormonism in Transition: A History of the Latter-day Saints, 1890-1930* (Chicago: University of Illinois Press, 1996).

the prime reason for the institution of marriage – plural or otherwise – was to carry out this instruction.³⁶

Early Mormonism is sometimes characterized as an attempt to escape American pluralism and to establish a theocracy in which God's laws directed all aspects of society. Joseph Smith Jr. and other early leaders had taught that as in the days of Noah, the Earth had fallen into corruption and would soon be destroyed. The only hope for God's faithful was to "gather to Zion," where they would establish a kingdom in preparation for the return of Jesus Christ. For the Mormons, this communal "gathering" to specified sacred spaces was an economic as well as religious withdrawal from the world.³⁷

John G. Turner identified Brigham Young as the second prophet to the Mormon people who "became a figure of broader significance within U.S. history." He argued that after the Mormons' expulsion from Illinois, they staked their claim in the Great Basin, "making Brigham Young the greatest colonizer in American history."³⁸ Young remains revered by Latter-day Saints in the twenty-first century, but, as Turner contended, "We should begin by remembering that he was a nineteenth-century man and avoid any tortured attempt to make him palatable for a twenty-first-century audience, Mormon or otherwise." Brigham Young believed that

³⁶ Brigham Young quoted in Lester Bush, "Birth Control Among the Mormons: Introduction to an Insistent Question," *Dialogue: A Journal of Mormon Thought* 10, no. 2 (August 1976): 16.

³⁷ W. Paul Reeve, "Colonization," in *Mormonism: A Historical Encyclopedia*, edited by W. Paul Reeve and Ardis E. Parshall (Santa Barbara, California: ABC-CLIO, Inc., 2010), 281, 75; See also Marvin Hill, *Quest for Refuge* (Salt Lake City: Signature Books, 1989).

³⁸ John G. Turner, *Brigham Young: Pioneer Prophet* (Cambridge: The Belknap Press of Harvard University Press, 2012), 3.

blacks were inferior to whites, American Indians were savages, and women were subservient to men, analogous to the beliefs of most white, nineteenth-century American men and many women.³⁹

Brigham Young was amenable to the doctrine of plural marriage, which is conceivably the reason why he gained leadership of the church after the death of President Joseph Smith Jr.⁴⁰ After leaving Nauvoo, Illinois and before settling the Great Basin, the Mormons camped at Winter Quarters in Nebraska. It was in this place that Zina Huntington, former wife of Joseph Smith and plural wife of Brigham Young, noted how “the church’s altered and expanded family structures” could be lived. She wrote, “Here we now had openly the first examples of noble-minded, virtuous women, bravely commencing to live in the newly-revealed order of celestial marriage.” At Mt. Pisgah, a Mormon way station, Emily Young’s infant son “elicited considerable fascination” by visitors debating whether such children possessed the same intelligence as those conceived by monogamous parents. She wrote, “People would stop at our house to see a spiritual child.”⁴¹ Mormons believed that polygamy was necessary to achieve eternal life and salvation. Young once told his followers, “[T]he religion that you and I have embraced incorporates the life and doing of man, the life of the angels and all the doings of the angels. It incorporates the life of the Gods and the doings of the Gods.”⁴²

³⁹ Turner, *Brigham Young*, 5.

⁴⁰ Reeve and Parshall, *Mormonism: A Historical Encyclopedia*, 220.

⁴¹ Turner, *Brigham Young*, 153.

⁴² Turner, *Brigham Young*, 6.

The church's marriage ceremony, with accompanying endowments, promised tremendous spiritual blessings and power to both male and female participants. Men and women needed each other to achieve celestial glory. At the same time, they did not participate in such rites as equals. Men and women could become kings and queens, but multiple queens added to the eternal kingdoms of a single patriarch. On earth, Young prepared for the anticipated return of Christ and subsequent Millennium. He wholly believed he commanded the restored church of Jesus Christ and led his followers, physically and spiritually, to the Kingdom of God on Earth. Plural marriage was the pathway to populating that kingdom.⁴³

It did not follow that everyone should marry and have children. The drunk, poor, or idle were seen as unfit for marriage. Confidantes of Young's, Orson and Parley Pratt, believed the law of God would not permit "the man of hereditary disease" to marry or "the wicked the same right to the blessings of a numerous posterity." Mormon hierarchy felt "the wicked were multiplying and thereby creating bodies unworthy of the many righteous spirits awaiting their earthly experience." To Brigham Young the implications were clear: "It is the duty of the righteous to prepare tabernacles for all the spirits they can."⁴⁴ Singled out for special recognition were mothers of large families.⁴⁵

As historian John Turner wrote, "The Latter-day Saints were on a divine errand into the wilderness akin to that of their Puritan forebears two centuries earlier...Like the seventeenth-century Puritan divines, the apostles characterized

⁴³ Turner, *Brigham Young*, 159.

⁴⁴ Quoted in Bush, "Birth Control among the Mormons," 17.

⁴⁵ Bush, "Birth Control among the Mormons," 19.

their people's relationship to God as a covenant." Provided that members fulfilled their duties, adhered to commandments, and otherwise lived morally, "God would bless the Saints and their new Zion." Turner explained that unlike the way the Puritans had viewed Massachusetts Bay, Young did not envision Great Salt Lake City as a "city on a hill," a model community that would inspire Americans to reform their churches and societies in accordance with Mormon principles. Instead, Turner clarified, "The Mormons intended to raise "a standard and ensign for truth for the nations of the earth," expecting a righteous remnant to seek refuge among them from an anticipated apocalyptic judgment.⁴⁶ In 1847, Brigham Young led the Mormons to the place where he believed this would happen.⁴⁷ A year later, he addressed his congregants, "The whole kingdom are one family." Members at this time hailed from the eastern United States, Great Britain, and Scandinavia, and were diverse in terms of language, religious background, and socio-economic status. The glaring similarity was that nearly all of them were white.⁴⁸

Turner explained that Young "displayed very little anguish" when he "displaced the prior inhabitants" of the Salt Lake Valley, "which mirrored the broader conquest of the American West by white settlers and the U.S. Army."⁴⁹ Young's emphasis on connecting with Indian tribes had theological implications. He said, "Our people would yet take their squaws & dress them up teach them our language & learn them to labour & learn them the gospel of their forefathers & raise

⁴⁶ Turner, *Brigham Young*, 170.

⁴⁷ Turner, *Brigham Young*, 176.

⁴⁸ Turner, *Brigham Young*, 207.

⁴⁹ Turner, *Brigham Young*, 208.

up children by them.” He predicted that after several generations they would become “A white & delightsome people.” He insisted this process would accelerate if Mormon men married Indian women. His apostle, Heber Kimball, theorized, “If you take a white apple graft and plant it in a red apple tree, it will bring forth a white apple.” The reversal of this sentiment negated the principle as white women were forbidden from marrying Indian men. Young said, “The governing principle is in the husband and by prayer they will bring forth white children.”⁵⁰ He believed the church had a responsibility to “restore the Indians to their ancient faith and usher them into a glorious millennial future.” There would be no similar opportunity for redemption for another “dark-skinned people” he believed to be cursed by God.⁵¹

Contrary to his beliefs about American Indians, Young did not believe that blacks would become white over time.⁵² He said, “The law is their seed shall not be amalgamated,” and should rather lead to sterility, a belief Turner contended was “standard fare among white Americans into the early twentieth century.” Young drew upon the biblical story of Cain and Abel to make his point. When Cain murdered Abel, he deprived him and his wives of the opportunity to further procreate. Young concluded that God had punished the “seed of Cain” with blackness, leading to an inferior position within society, including the church, and finally “eternal worlds.” Turner explained it would be after Abel’s posterity

⁵⁰ Brigham Young quoted in Turner, *Brigham Young*, 210.

⁵¹ Turner, *Brigham Young*, 218.

⁵² W. Paul Reeve, *Religion of a Different Color: Race and the Mormon Struggle for Whiteness* (New York: Oxford University Press, 2015), 263. Reeve wrote, “Mormons thus sought to bring Indians with them on their journey towards whiteness while they left blacks behind.”

(nonblack people) “had received their blessings in full, (that) God would remove the curse.”⁵³

While Brigham Young often used standard Christian language, encouraging the Saints to imitate Jesus, Adam also served as a divine archetype: an exalted man who had built a new world and established a kingdom whose increase would never end.⁵⁴ Turner identified a common theme between Joseph Smith and Brigham Young that stretched from Adam and Jehovah to the present Latter-day Saints: the integral part of godliness to be exemplified on the path to exaltation was eternal increase. In describing the celestial world, Young said, “None but the Gods will be allowed to multiply and increase.” He explained that on earth, the Latter-day Saints provided bodies for those spirit children when they produced mortal offspring. While plural marriage enabled the individuals involved to secure a larger share of eternal glory for themselves, marriage and childrearing also granted Mormons a chance to participate in this larger drama of the human family.⁵⁵

In the mind of Brigham Young, one sign of lukewarm commitment was the hesitancy of many church members to enter into plural marriage. Young pointedly reminded the congregation that “multitudes of pure and holy spirits [were] waiting to take tabernacles.” In what would become known as “positive eugenics” fifty years later, Young pontificated, “It is the duty of every righteous man and woman to prepare tabernacles for all the spirits they can,” and placed heavy responsibility on men to “search up” women who “who will abide the celestial law.” He clearly

⁵³ Quoted in Turner, *Brigham Young*, 222.

⁵⁴ Turner, *Brigham Young*, 233.

⁵⁵ Turner, *Brigham Young*, 236.

explained, “This is why the doctrine of plurality of wives was revealed, that the noble spirits which are waiting for tabernacles might be brought forth.” He continued, “I would almost be ashamed of my body if it would beget a child that would not abide the law of God. Do you not ask for the righteous to increase, while the unrighteous shall decrease and dwindle away?” He concluded by promising faithful women entering into plural marriage “that they shall be queens in heaven, and rulers to all eternity.”⁵⁶

The Women of Mormondom appeared in 1877, written by Mormon historian Edward Tullidge, as a defense to the nation of polygamist women. Continuing on the theme posited by Brigham Young about the importance of Adam in Mormon theology as well as the urgency of women in polygamy to procreate, Tullidge defended plural marriage and exalted the enfranchisement of Latter-day Saint women. Citing that “Adam called his wife’s name Eve because she was the mother of all the living,” Tullidge explained, “Mother is the first grace of God, manifested through woman.” He argued, “See in what divine ordinance woman’s mission on earth began.”⁵⁷

Tullidge stated the “chief faith” concerning the Mormon women “is that they are called with a holy calling to raise up a righteous seed unto the Lord – a holy nation – a people zealous of good works,” and concurred, “The Mormon women have a great truth here.”⁵⁸ In accord with Brigham Young’s vision, Tullidge wrote,

⁵⁶ Brigham Young, *Journal of Discourses* 4 (September 1856), 55-57.

⁵⁷ Edward W. Tullidge, *The Women of Mormondom* (New York: Tullidge and Crandall, 1877), 537.

⁵⁸ Tullidge, *The Women of Mormondom*, 541.

“This is Zion, who shall be mother of many Messiahs, for she shall bring forth many sons, with the anointing of their Lord’s spirit upon them, to exalt his reign.”⁵⁹ He continued, “The lives of the Mormon women are as a testament to the age. The very character which their church has taken, as the literal Zion of the latter days, shall soon be recognized as the symbol of the hour.”⁶⁰ Exalting Mormon women, Tullidge explained the “providence” and “astounding innovation” in their attitudes towards and practice of polygamy as well as commending their bravery during the migration for religious freedom. He wrote, “We have seen them in the awful hour of martyrdom...We have seen them in the exodus of modern Israel from Gentile civilization, following their Moses.”⁶¹ The expectation for women in this Zion built by Brigham Young was the procreation of righteous soldiers for Christ for the coming millennium.

Ida Lowry Allen articulated similar views in the *Woman’s Exponent* in 1897. She compared a mother “full of reverence for God” and “appreciating the most glorious privilege of motherhood and earnestly desiring to perfect herself in every good quality she would desire her child to possess,” to the antithesis. She wrote, “Then for a moment look at another woman, immoral, uncleanly, profane, degraded in thought and action, hating her unborn child, in fact having murderous feelings towards it. Now can it be possible for this low, vile woman to bring into existence as pure, sweet, healthy, intelligent, gifted, sweet-tempered, lovable child as the mother referred to (previously)?” Agreeing with both Brigham Young and Edward Tullidge,

⁵⁹ Tullidge, *The Women of Mormondom*, 544.

⁶⁰ Tullidge, *The Women of Mormondom*, 547.

⁶¹ Tullidge, *The Women of Mormondom*, 551-552.

Ida Lowry Allen moralized, “The reformation of the world can never be accomplished - the millennium of purity, chastity, and intense happiness can never reach the earth except through cheerful obedience to prenatal laws.”⁶²

Mormonism did not escape the controversy over organic evolution, the age of the Earth, biblical higher criticism, and related issues that disturbed other Churches in the late-nineteenth and early-twentieth centuries. These ideas reached the Mormon people slowly, in part because so few Mormons studied at Eastern Universities until the 1890s. BYU adopted a new emphasis on scholarship in the beginning of the twentieth century. Professors with advanced degrees were hired, bringing with them ideas that were largely unfamiliar in the Intermountain West. Modern approaches to education swept through the Mormon school: subjects ranging from “communism to eugenics were hotly debated in and out of class.”⁶³

In the early 1900s, LDS Church President Joseph F. Smith wrote, “the old [American] stock is surely being replaced by the lower classes’ of a sturdier and more worthy race.” These remarks resemble those espoused by birth control proponents, but were also directly relevant to the intensely discussed eugenics movement, then at its height nationally. It is a deeply entrenched Mormon belief and cultural doctrine to “multiply and replenish the earth” that was commented on by the president of the church in reference to the eugenics movement in the United States. President Theodore Roosevelt also abhorred the idea of “race suicide,” which will be discussed further in the following chapter. Pessimistic predictions of

⁶² Ida Lowry Allen, “Prenatal Influence” *Women’s Exponent* 26 (December 1897): 13.

⁶³ Ardis E. Parshall, “Mormonism and Science,” in Reeve and Parshall, *Mormonism: A Historical Encyclopedia*, 325-6.

overpopulation were incompatible with the first great commandment to multiply and replenish the earth. Because this edict remained unchanged, it was “unreasonable to assume that he would send more spirits to the earth than could be accommodated.”⁶⁴

Not until 1969 did the LDS Church hierarchy release their first statement on birth control. They wrote, “We seriously regret that there should exist a sentiment or feeling among any members of the Church to curtail the birth of their children. We have been commanded to multiply and replenish the earth that we may have joy and rejoicing in our posterity.” As long as husband and wife were “free from impurities that would be entailed upon their posterity,” it was contrary to the teachings of the Church to prevent the birth of children. They clearly stated that the mental and physical health of the mother should be considered in the decision to have children as she is primarily responsible for their care and that men should exercise self-control in their relationship. They implored couples to pray to the Lord for guidance and raise their children according to the gospel.⁶⁵

Utah offers an interesting narrative in the history of eugenics in the United States. The predominant religion, Mormonism, held that God commanded marriage

⁶⁴ Bush, “Birth Control among the Mormons, 13; The population control argument posited by eugenicists did not take hold in Utah. Bush wrote, “God had ‘commanded his children to multiply and fill the earth, and the earth is far from full,’” a commandment never “altered, modified, or cancelled.” The suggestion, for some, “verged on blasphemy.” “Are we so naïve as to believe God would fail to provide for his own offspring as they come into the world? That would be to regard the infinite as being less considerate than finite mortals,” or, “...are we to believe also that He is so blind and thoughtless that He will overpopulate this earth? Where is our faith?” *Church News* editorial quoted in footnote 101, page 42.

⁶⁵ Lester Bush, “Ethical Issues in Reproductive Medicine: A Mormon Perspective,” *Dialogue* 18, no. 2 (Summer 1985): 46.

to provide as many virtuous bodies as possible so that spirits may continue their eternal progression. Even as polygamy was outlawed, this theology supported and exerted the social control necessary to segregate and sterilize those found unworthy to procreate. An ambitious woman and devout Mormon would emerge at the turn of the century to marshal in an era of scientific social work, increased cooperation of state and federal governments, and eugenic practice in Utah.

Scholarship on the history of eugenics is diverse in terms of geographical, political, social, educational, sexual, gender-based, racial, and economic frameworks. There is general agreement that eugenicists targeted non-white, impoverished women for compulsory sterilization programs during the course of the twentieth century, and eugenic practices decreased following the conclusion of World War II and continued waning until informed consent legislation emerged in the 1970s. This thesis will demonstrate how scientific principles merged with the goal for social purity that led Utah policymakers to embrace compulsory sterilization.

Chapter Two introduces Amy Lyman as the principle leader in bringing scientific social work practices to Utah and spearheading the campaign to establish the Utah State Training School in 1931, with one of its purposes to sterilize its residents. Chapter Three explores the height of the school's sterilization program under the supervision of Dr. Herbert Ramsey from 1935 to 1950, supporting the argument made by Reilly and Hansen and King regarding the relevance of superintendent tenure. Biennial reports show clear eugenic intention in the sterilization program, with regular requests made to fund an onsite hospital. Chapter Four concludes with an examination of the decline of the sterilization

program from 1951 to 1974 and an overview of attitudes about sterilization held by residents, their parents, and the staff of the school. This thesis places Utah in the historical narrative of eugenics, demonstrating similarities and differences in the application of compulsory sterilization.

CHAPTER TWO

MODERNIZING SOCIAL WORK IN UTAH: AMY BROWN LYMAN AND THE FOUNDING OF THE UTAH STATE TRAINING SCHOOL

Once the science of sexual sterilization materialized, state governments throughout the United States “began a quest for racial purity” in the early decades of the twentieth century with eugenics as the primary justification.¹ Because Utah was the 45th state admitted to the Union, it lagged behind the others in terms of the establishment of state government and its accompanying administrative and financial responsibilities. However, one woman stands out as the predominant force in facilitating Utah’s convergence with the nation in the area of mental hygiene and social service reform, successfully lobbying the legislature to build the Utah State Training School, thus beginning the era of compulsory sterilization.

Amy Brown Lyman lived a life of advocacy, accomplishment, and personal tragedy. She played a crucial role in the establishment of state services for children and adults with disabilities. She served her church and community by establishing cooperative relationships with state and federal welfare and relief agencies. She edited a magazine dedicated to the advancement of women’s interests. She married, raised children and a grandchild. She studied, traveled, counseled, legislated, and homesteaded. She called for women to unite in order to solve the problems of society as she felt they were better suited for the task than men. She insisted

¹ Harry Bruinius, *Better For All the World: The Secret History of Forced Sterilization and America’s Quest for Racial Purity* (New York: Alfred A. Knopf, 2006), 9.

women exercise their right to vote, and after living through two world wars, she advocated for peace.

Born Amy Cassandra Brown in Pleasant Grove, Utah in 1872, she was the twenty-third of her father's children and the daughter of his third wife.² Amy's biographer explained that John Brown's first wife "supported his entry into polygamy" and "they viewed it as part of their religious obligation to build God's kingdom."³ Taught early the central values of church and community service, Amy learned to live industriously and remain loyal to church elders.⁴ She completed her secondary education at Brigham Young Academy in 1890,⁵ and in 1896, she married Richard R. Lyman, son of church apostle Francis M. Lyman.

Living in Chicago while her husband pursued his education, Amy met John D. Rockefeller, benefactor of the Chicago University, and she enrolled in a sociology course taught by Dr. George E. Vincent, subsequent president of the Rockefeller Foundation. The subject of sociology was relatively new and portended a scientific approach to addressing societal problems, including a multi-agency approach to casework, thereby reducing poverty and governmental dependence.⁶ She recalled, "Personal contact with these noted men was worth as much or even more than anything I learned about the subject matter they discussed. It was at this time that I first became interested in social work and social problems." Rockefeller would later

² Vicky Burgess-Olsen, *Sister Saints* (Provo, Utah: Brigham Young University Press, 1978): 97.

³ Dave Hall, *A Faded Legacy: Amy Brown Lyman and Mormon Women's Activism, 1872 – 1959* (Salt Lake City: University of Utah Press, 2015): 13.

⁴ Burgess-Olsen, *Sister Saints*, 98.

⁵ Burgess-Olsen, *Sister Saints*, 100.

⁶ David Hall, "Anxiously Engaged: Amy Brown Lyman and Relief Society Work," *Dialogue: A Journal of Mormon Thought* 27, no. 2 (Summer 1994): 76.

provide financial and organizational support to national eugenics programs.⁷ These experiences, including volunteering at Hull House, the famous social settlement house established by Jane Addams, “started me on my way as a social worker.”⁸ Regarding her time at Hull House and the impact it made on her life, Amy wrote, “No work could be more important and satisfying than that of helping to raise a human life to its highest level.”⁹ In New York, where Richard completed his PhD at Cornell University, Amy again felt exhilarated by the intellectual environment and wrote, “Association with brilliant and well-trained faculty members is in itself a liberal education.”¹⁰

With an educational background established in social work, Amy soon integrated her passion for helping the disadvantaged with her prevailing love of the Church of Jesus Christ of Latter-day Saints. In 1842, Joseph Smith had established an all-woman division of the church, known as the National Women’s Relief Society. Charged with tending to the poor, Relief Society women were empowered and unified, believing that working together in this life would allow them to rejoin as friends in the afterlife.¹¹ Called to serve on the general board of the Relief Society in 1909, Amy said, “I shed tears of anxiety because of the responsibility such an appointment involved.” Thirty-seven years old at the time and concurring with

⁷ Edwin Black, *War Against the Weak: Eugenics and America’s Campaign to Create a Master Race* (New York: Four Walls Eight Windows, 2003), 57.

⁸ Amy Brown Lyman, *In Retrospect Autobiography of Amy Brown Lyman* (Salt Lake City: General Board of Relief Society, 1945), 30.

⁹ Hall, “Amy Brown Lyman,” 45; Burgess-Olsen, *Sister Saints*, 102.

¹⁰ Burgess-Olsen, *Sister Saints*, 102.

¹¹ Jill Mulvay Derr, Janath Russell Cannon, Maureen Ursenbach Beecher, *Women of Covenant: The Story of the Relief Society* (Salt Lake City: Deseret Book Company, 1992), 152.

many of her peers, she lamented it was an “old woman’s organization” for which she was too young. Yet, within years she would advance from board member to assistant general secretary to general secretary.¹² During this time, she modernized the office by standardizing record keeping, overhauling financial affairs, and hiring bookkeepers, typists, and accountants.¹³

From 1901 to 1921, the Relief Society struggled to maintain the attention of young women, which was attributed to the enticements of the Progressive Era. The traditional folk medicine and spiritual bonding that sustained the pioneers was fading and slowly replaced by scientifically based studies of human development.¹⁴ The Relief Society began offering child development classes in order to encourage excellence in providing for the moral, spiritual, and physical needs of children. The progressive approach spread to other areas of women’s work. The prevailing approach to housework evolved into “domestic science,” the term “social work” would become the professional equivalent for charitable services previously performed by families, and progressive education was based on new research into psychology and pedagogy.¹⁵ The practical and common sense approaches taken by many progressives found broad appeal among the Mormons for whom social welfare was inextricably linked with religious obligation.¹⁶

The Relief Society was not alone in holding the importance of educating mothers. President Theodore Roosevelt spoke in 1905 to the Congress of Mothers,

¹² Burgess-Olsen, *Sister Saints*, 102.

¹³ Burgess-Olsen, *Sister Saints*, 103.

¹⁴ Derr, *Women of Covenant*, 157.

¹⁵ Derr, *Women of Covenant*, 159.

¹⁶ Hall, *A Faded Legacy*, 42.

advocating values held dear by Latter-day Saint women. Reported at length in the *Women's Exponent*, the Relief Society magazine, he defended the separation of spheres by gender, i.e., husband as breadwinner, wife as housewife and mother. To women he said, "Yours is the work which is never ended." Children were to be valued and taught a strict work ethic, and expected to "wrest success from labor and adversity." He abhorred restrictions on family size, considering even two-children families to be indications of "race-suicide." The mother's reward for her "loving unselfishness and self-abnegation," he concluded, would be "the highest and holiest joy known to mankind."¹⁷ Emphasizing motherhood as a sacred and eternal calling, Relief Society leaders also warned women against the contemporary movement for birth control. Margaret Sanger's book *Family Limitation* appeared in 1915, and the first American birth control clinic opened in 1916. Church leaders, both men and women, condemned the new movement as "race suicide...one of the great curses of the age."¹⁸

The marked decline in American fertility, particularly among the "old American stock" and the more highly educated, had for some time been the cause of considerable national concern. It was in this context that Theodore Roosevelt popularized the expression "race suicide," which quickly became the "rallying cry for critics of voluntary limitation."¹⁹ His plea to married couples of the white, middle-class to have more children was not fueled by paranoid fears for the nation's

¹⁷ Derr, *Women of Covenant*, 160.

¹⁸ "General Conference of the Relief Society," *Relief Society Magazine* 4 (June 1917): 313.

¹⁹ Bush, "Birth Control among the Mormons," 20.

fecundity, but by fact. In 1840, the average American family had 6.14 children; by 1900, that number had dropped to 3.56.²⁰

A growing population of “feeble-minded” men and women was also seen as a potential menace to social order. The enthusiasm for eugenics was not a mass movement but, rather, part of the beliefs assimilated by elite, progressive, and professional groups eager to support enacting laws for dealing rationally with the financial and social costs incurred by the “national breeding of feeblemindedness.”²¹ A 1916 conference on feeblemindedness and insanity focused heavily on prevention over cure and introduced the purported value of intelligence testing.²² The onset of World War I provided members of the American Breeders Association with the opportunity to examine national intelligence, and they convinced the federal government to fund a sweeping study of U.S. troops utilizing newly developed intelligence testing. First published in 1921, the results of this massive study appeared to “prove a neat racial hierarchy.” Harry Bruinius in *Better For All the World*, quoted Princeton professor and author of *A Study of American Intelligence*, Carl C. Brigham, who wrote, “In a very definite way, the results which we obtain by interpreting the Army data by means of the race hypothesis support Mr. Madison Grant’s thesis of the superiority of the Nordic type...according to all evidence available, then, American intelligence is declining, and will proceed with an

²⁰ Christine Rosen, *Preaching Eugenics: Religious Leaders and the American Eugenics Movement* (New York: Oxford University Press, 2004), 10.

²¹ Randall Hansen and Desmond King, *Sterilized by the State: Eugenics, Race, and the Population Scare in Twentieth-Century North America* (New York: Cambridge University Press, 2013), 100.

²² Black, *War Against the Weak*, 80.

accelerated as the racial admixture becomes more and more extensive.²³ Edwin Black in *War Against the Weak*, also cited the study and one of the test's creators, Stanford's Lewis Terman, who wrote, "If we would preserve our state for a class of people worthy to possess it, we must prevent, as far as possible, the propagation of mental degenerates."²⁴ Black also cited Carl Brigham and wrote, "Quickly, *A Study of American Intelligence* became a scientific standard."²⁵

When the United States entered World War I, Amy again embraced an opportunity to combine church service with her love of social welfare work. The LDS Church worked in conjunction with the American Red Cross to attend to the wellbeing of LDS servicemen and their families.²⁶ Armed with additional training in welfare practices in 1917 and 1918, received in Denver under the oversight of the University of Colorado and the Red Cross, LDS Church President Joseph F. Smith called on Amy to lead the newly established Relief Society Service Department in 1919.²⁷ She received training in three specific areas: "Rehabilitation through diagnosis and case treatment of families in need; education of the public in correct principles of social work and cooperation; and gathering evidence through the first two principles and establishing volunteer networks to eliminate the causes of poverty and dependence." Based on research and investigation, this method of charity was more than a handout and designed to rehabilitate families to

²³ Bruinius, *Better for all the World*, 268.

²⁴ Black, *War Against the Weak*, 82.

²⁵ Black, *War Against the Weak*, 83.

²⁶ David Hall, "Anxiously Engaged," 73.

²⁷ Burgess-Olsen, *Sister Saints*, 104.

independence by “effect(ing) a permanent cure.”²⁸ Amy then gave lectures on “the value of preventative and corrective social work,” emphasizing “the need to strike at the roots of dependency through reform in the larger society.”²⁹ Relief Society President Clarissa S. Williams said, “Since 1917, Mrs. Lyman has spared no pains nor energy in the interest of improving the social work of the Relief Society and in introducing modern scientific methods throughout the organization.”³⁰

In a 1917 *Relief Society Magazine* article written by Amy, she wrote, “The mothers who would bring into the world healthy and normal children must themselves have health and strength, and brain power, the latter of which comes through health and strength.” Quoting a speaker from that year’s Relief Society Conference, she urged women to take care of their health, explaining, “It is the nervous tired women who become the mothers of deficient children, imbeciles, and feebleminded.” She concluded, “The industrial world is studying the problem today.”³¹

The Social Service Department was the most active Relief Society program of the 1920s. According to Lyman, the Relief Society Social Service Department was not a “relief-giving agency, but a service department with emphasis on the study of family situations, the making of plans and budgets, the organizing of relief where LDS families were concerned and the training of workers.” Assisted by board and staff members, Lyman supervised field trips to public facilities dealing with

²⁸ Loretta L. Hefner, “This Decade Was Different: The Relief Society Social Services Department during the 1920s,” *Dialogue: A Journal of Mormon Thought* 15 (Autumn 1983): 65.

²⁹ Hall, *A Faded Legacy*, 83.

³⁰ Burgess-Olsen, *Sister Saints*, 107.

³¹ Amy Brown Lyman, “Untitled,” *Relief Society Magazine* (1917), 312.

problems of health, crime, and dependency, and she studied books by national authorities on social problems.³² The Relief Society Office “was a veritable bureau of information, not only for women of the Church, but for women generally,” recalled Lyman.³³ Visitors included Jane Addams, Carrie Chapman Catt, and Dr. Valeria Parker of the American Social Hygiene Association. In 1921, the Relief Society expressed a specific purpose in providing better care to babies and their mothers, and “relief” evolved into “social services” as core functions of the organization.³⁴ As Derr contended, “Due in part to the energy of the nation’s new female voters, the Progressive Era’s vision of poverty slain by science made headway despite the frivolity and corruption of the ‘roaring twenties.’”³⁵

In building the social services department, Amy relied on professionals already established in the field. Though not members of the LDS Church, Amy considered them friends and mentors. Hefner reported that she incorporated strategies outlined in *Social Methods* (1917) by Mary E. Richmond. Richmond contended social reform and social casework inevitably advanced together.³⁶ She asked, “When a human being, whatever his economic status, develops some marked form of social difficulty and social need, what do we have to know about him and about his difficulty...before we can arrive at a way of meeting his need?” Credited with creating the social work profession, Richmond envisioned it becoming an

³² Derr, et al., *Women of Covenant*, 236.

³³ Lyman, *In Retrospect*, 44.

³⁴ Derr, et al., *Women of Covenant*, 227.

³⁵ Derr, et al., *Women of Covenant*, 230.

³⁶ Mary E. Richmond, *Social Diagnosis* (New York: Russell Sage Foundation, 1917), 25.

adjunct to “the fields of medicine, education, jurisprudence, and industry.”³⁷ She identified early social reformists as being economists searching for the root of dependency, recognized the feeble-minded as being the focus of mental hygiene groups, and contended prevention as being imperative to reducing reliance on the state. By applying a scientific method to the investigation of indigence, the propagation of poverty could end, and it was Amy who applied these practices.

In the fall of 1922, Amy, now fifty years old, and surprised by an unexpected invitation to contend for a seat in the Utah State Legislature, overcame her lack of confidence and political experience to win a place in the Utah House of Representatives. This personal invitation to run for office came from Jeanette A. Hyde, a national Republican committeewoman from Utah.³⁸ Appointed as chairman of the public health committee and as a member of both the labor and appropriations committees, she secured a unique opportunity to pursue her dual interests of improving maternal care and attending to the intellectually disabled.

In childhood, Amy lost her sister and five other family friends to difficult deliveries and remembered watching the funeral procession of children taken by illness pass by her window. As her biographer explained, “Sickness and death were regular visitors to the community and formed a darker side of Amy’s childhood.”³⁹ Her own mother was a “partial invalid” due to complications from childbirth, and she saw to it personally to arrange an obstetrics class taught in Pleasant Grove in an

³⁷ Richmond, *Social Diagnosis*, 26-7.

³⁸ Burgess-Olsen, *Sister Saints*, 106.

³⁹ Hall, “Amy Brown Lyman,” 17.

attempt to improve the lives of her daughters.⁴⁰ The early and sustained loss of loved ones explains Amy's pragmatic and direct compassion and concern for others, while also reflecting her mother's influence by affecting public policy in a manner both preventative and innovative.

As a legislator, Amy sponsored the Sheppard-Towner bill, known formally as the Federal Maternity and Infancy Act of 1921, to foster cooperation between the federal and state governments in order to improve maternity and infant health care, which passed without a dissenting vote.⁴¹ Aimed to distribute literature on prenatal care to pregnant mothers, provide medical examinations to women, infants, and children, and offer conferences on nutrition, hygiene, and childcare, the funding afforded those in rural areas with the first treatment of its kind.⁴² By 1929, the 8 percent reduction in maternity mortality and 19 percent drop in infant deaths was the greatest improvement in all the Union and attributed to the passage of this legislation.⁴³ Amy enjoyed her time in the legislature but not enough to seek a second term. Aside from taking care of her family, her entire focus returned to the Relief Society's welfare efforts.

Amy's concern for the intellectually disabled emerged in a letter penned to a friend in 1923. She identified the respect she held for the superintendent of the Utah State Mental Hospital, Dr. Hyde, who was interested in studying his patients as "scientifically as possible." She wrote, "He persuaded me to go down to the

⁴⁰ Lyman, *In Retrospect*, 7.

⁴¹ Loretta L. Hefner, "The National Women's Relief Society and the U.S. Sheppard-Towner Act," *Utah Historical Quarterly* 50 (Summer 1982): 256.

⁴² Hefner, "The National Women's Relief Society," 259.

⁴³ Hefner, "The National Women's Relief Society," 263; Hefner, "This Decade Was Different," 71; Hall, "Anxiously Engaged," 83.

institution quite often to talk to patients they considered incurable with a view of helping to untangle their difficulties and straighten out some of their ideas. It is all very interesting to me.⁴⁴ Referring to the intellectually disabled as “those who never grow up,” Lyman commented on the importance of mental hygiene and child development as features in the Relief Society’s education department. She wrote, “This study resulted in increased knowledge and enlarged vision with respect to the mentally ill and handicapped, and in a better and more sympathetic understanding regarding them and their needs.”⁴⁵ She arranged for the transportation of Relief Society leaders to the state hospital, lectured on related issues during the excursions, and encouraged the women to write their legislators with their concerns.⁴⁶

Sensitive to the economic condition of both her church and the state of Utah, Lyman discussed her thoughts relative to poverty and disability in her autobiography. Because she believed in the causal and cyclic relationship between physical and mental illness and poverty, (People are often poor because they are sick, or sick because they are poor,) she identified with the close cooperation between health and welfare workers. She wrote, “This alliance of poverty and disease has persisted in all ages and has often formed a vicious circle about its victims. Sickness eats up savings and eventually incapacitates individuals.”⁴⁷ Having witnessed extreme poverty directly, Amy concluded that weak character and laziness were not at the heart of the problem. She identified environmental factors

⁴⁴ Burgess-Olsen, *Sister Saints*, 105.

⁴⁵ Lyman, *In Retrospect*, 71.

⁴⁶ Burgess-Olsen, *Sister Saints*, 105.

⁴⁷ Lyman, *In Retrospect*, 68.

such as substandard nutrition, inadequate housing, and lack of access to medical care as contributors. Poor physical and mental health precipitated a “child’s inability to learn and a parent’s ability to earn,” thus perpetuating a cycle of poverty.

Amy also believed in the hereditary determinants of poverty as she both trained in and provided trainings on prevention and “permanent cures” following World War I and preceding the opening of the Relief Society Office. She held the position, “Poor beget poor, and retarded beget retarded.”⁴⁸ It is unclear if Amy was aware of the decision handed down by Chief Justice Oliver Wendell Holmes in the *Buck v. Bell* case. However, her attitude mirrored the belief held nationally by various Progressive reformers, medical experts, lawmakers, and institutional superintendents that “feble-mindedness” was hereditary, and those diagnosed should be prevented from having children who would necessarily become dependent upon the state for care.⁴⁹

Director of Social Services at the Utah State Hospital during the late 1930s, Charles McKell wrote the early years of this century “were extraordinarily productive of reform movements.” He asserted, “Prevention, both educationally and eugenically, became the keynote of the twentieth century.” He argued that “agitation for sterilization” came as early as 1912 in Utah, suggested first by Dr. D.H. Calder, superintendent at the Utah State Hospital.⁵⁰ Dr. Calder had also petitioned the legislature to establish a Board of Eugenics, as done in other states, but this

⁴⁸ Hefner, “This Decade Was Different,” 69.

⁴⁹ Hansen and King, *Sterilized by the State*, 106.

⁵⁰ McKell, Charles R., “The Utah State Hospital: A Study in the Care of the Mentally Ill,” *Utah Historical Quarterly* 23 (1955): 314.

failed by a single vote.⁵¹ By 1925, permissive sterilization legislation passed, giving broad discretionary powers to superintendents of state institutions to authorize sterilizations if they find,

That the said inmate is habitually sexually criminal, insane, idiotic, imbecile, feeble-minded, or epileptic, and by the laws of heredity is the probable parent of socially inadequate off-spring likewise afflicted, that the said inmate be sexually sterilized or asexualized without detriment to his or her general health, and that the welfare of the inmate and of society will be promoted.⁵²

Reviewed by the Utah Supreme Court in 1927, who determined legislative constitutionality, the law permitted sterilizations, not as punishments for a crime, but for therapeutic and eugenic purposes.⁵³

While the Relief Society of the early 1920s was progressive in terms of activism on behalf of women and children, it ultimately remained under the jurisdiction of LDS patriarchy. Hall wrote that during the late-nineteenth and early-twentieth centuries, women had “carved out a niche for themselves in social welfare work and so dominated a field that most men, who enjoyed access to more promising avenues to power, found uninteresting.” The Mormon community was no exception.⁵⁴ However, the onset of the Great Depression converted social welfare work into a matter of national consequence, necessitating the attention of political leaders and requiring the greater expenditure of community resources. In Utah, this

⁵¹ Eleanor Skeen, “State Care of the Feeble-minded in Utah,” (Salt Lake City: University of Utah Masters of Social Work Thesis, 1943), 106.

⁵² Utah Code Annotated L. 1925, chapter 82.

⁵³ Skeen, “State Care of the Feeble-minded in Utah,” 110.

⁵⁴ Hall, *A Faded Legacy*, 104.

coincided with male LDS church leaders exerting more oversight over charity and relief efforts.⁵⁵

Amy and others anticipated that she would become president of the Relief Society when Clarissa Williams resigned due to illness in 1928. However, her “strong administrative style” had kindled “animosity and jealousy” among fellow board members, while her acute focus on social welfare work concerned church President Heber J. Grant about “a perceived lack of balance in the society’s agenda.”⁵⁶ Called to serve as president of the Relief Society and considered more conservative in her views on women than her predecessors, Louise Y. Robinson was installed to maintain, but not expand, the society’s programs. Hall explained that Amy’s tendency to be forceful and impatient when expressing her opinions, “played into the hands of her detractors.”⁵⁷ Her poor physical health also impeded her ability to influence the organization in the wake of leadership changes as did tending to the health challenges of her granddaughter.⁵⁸ Yet, she seized one final opportunity to entrench her progressive legacy on the people of Utah.

Dr. Franklin G. Baugh, director of the Colorado Psychopathic Hospital, spoke at the Relief Society’s spring conference in 1928, imploring the women to care properly for the “developmentally disabled.” Because this preceded Williams’ resignation, Amy was able to gain Robinson’s reluctant support of Robinson to mobilize Relief Society women in a drive for petition signatures to secure state funding for a specialized institution. According to Hall, the women gathered over

⁵⁵ Hall, *A Faded Legacy*, 105.

⁵⁶ Hall, *A Faded Legacy*, 106.

⁵⁷ Hall, *A Faded Legacy*, 107.

⁵⁸ Hall, *A Faded Legacy*, 109.

50,000 signatures and presented them to the legislature. Faced with such staggering support, the legislature funded the construction of the Utah State Training School as well as ongoing supervision of its activities.⁵⁹

In 1929, Governor George Dern appointed Amy to the commission that selected the American Fork site for the Utah State Training School. She then served on the school's board of trustees from its opening in 1931 until 1940. At Relief Society's general conference in April 1929, President Louise Robison thanked the Utah sisters for their help in gathering 25,065 petition signatures supporting creation of the school. Robison quoted the Mental Hygiene Society, which said, "Had it not been for the Relief Society's efforts, this piece of work could not have been accomplished."⁶⁰ Amy was determined to carry out her mandate from President Joseph F. Smith to "adapt modern methods to Church charity work." This led to the placement of discharged, sterilized female residents of the Training School in domestic service jobs and sterilized male residents as farmhands.⁶¹

Utah became the forty-sixth state to provide state-funded custodial care of the intellectually disabled when the Training School opened, and sterilizations commenced within a few years.⁶² Social reformers had proposed compulsory sterilization for the intellectually disabled much earlier. In 1908, Dr. T.B. Beatty,

⁵⁹ Hall, *A Faded Legacy*, 110.

⁶⁰ Derr, et al., *Women of Covenant*, 265.

⁶¹ Derr, et al., *Women of Covenant*, 237.

⁶² Eleanor Skeen, "State Care of the Feeble-minded in Utah." (Master of Social Work Thesis, University of Utah, 1943), 5, 26. She wrote that while superintendents of the Utah State Hospital, State School for the Deaf, Dumb, and Blind, State Industrial School, and Public Instruction had advocated from 1897 to 1927 for separate and specific placement for those with cognitive delays, the Legislature remained wary of appropriating funds for a population whose financial needs would predictably increase over time.

secretary of the State Board of Health and later president of the Utah State Mental Hygiene Society, said “It is not only a moral obligation, but it is a necessity for the protection of society and the prevention of propagation of the unfit.”⁶³ In 1911, E.G. Gowans, superintendent of the State Industrial School, said “Being feeble-minded...now in an institution...where there would be no opportunity of perpetuating their kind.” He pointed to the birth of thirty babies in five years by nineteen of thirty-two “feeble-minded” females, nine out of wedlock, discharged from the State Industrial School.⁶⁴ In 1926, Dr. George E. Hyde, superintendent of the State Hospital, asserted “Eighty percent of mental defectives could be sterilized at an early age and remain in the community.”⁶⁵

Despite success in opening the school, the economic weight of the Depression hit Utah hard. The Relief Society Social Service Department investigated indigent LDS families, distributing wheat and canned goods according to need. The caseload of one worker in the department escalated from seventy-eight families in 1929 to over seven hundred in 1934.⁶⁶ According to historian Arnold Toynbee, “In 1931, men and women all over the world were seriously and frankly discussing the possibility that the Western system of society might break down and cease to work.”⁶⁷ Yet, even in the darkest days of the Great Depression, Lyman retained her faith in scientific social work. Prevention was better than cure, she insisted, and orderly procedure was important. Her standards represented the Relief Society

⁶³ Skeen, “State Care of the Feeble-minded in Utah,” 8.

⁶⁴ Skeen, “State Care of the Feeble-minded in Utah,” 18.

⁶⁵ Skeen, “State Care of the Feeble-minded in Utah,” 22.

⁶⁶ Derr, et al., *Women of Covenant*, 251.

⁶⁷ Quoted in Derr, et al., *Women of Covenant*, 250.

style of service: individual, not institutional. Commenting in 1931 on the society's modern methods of welfare work, Amy explained that it "has no blanket plan of caring for the needy, but aims to treat individuals according to individual needs, aiming as far as possible to meet the requirements set by standardized social case-working agencies."⁶⁸ The establishment and implementation of an effective system for administering welfare assistance was a recognized and rewarding outcome of the Great Depression for Latter-day Saints.⁶⁹

The May 1929 issue of *The Relief Society Magazine* ran an article entitled "Utah Provides for the Care of the Feeble-Minded," which opened with the statement, "Congratulations to Relief Society workers, to the Utah Society for Mental Hygiene, and to all others interested, on the passage of the bill on behalf of the feeble-minded." The article continued, "Utah now joins the procession of States. She has reduced by one the number not making adequate provision for the feeble-minded, and has added to the long list of States that have recognized with provision as a necessity for the welfare of the unfortunates." It asked the question, "Who can measure the strength that the Relief Society brought to this great cause?" Amy and her peers who spent untold hours over multiple legislative sessions received many compliments and letters of appreciation regarding this "very important piece of work."⁷⁰

⁶⁸ Derr, et al., *Women of Covenant*, 252.

⁶⁹ Derr, *Women of Covenant*, 260.

⁷⁰ "Utah Provides Care for the Feeble-minded," *The Relief Society Magazine*, May 1929, 254.

In all respects, Amy Brown Lyman was the driving force behind the establishment of the Utah State Training School.⁷¹ She established and maintained professional and personal relationships with both her colleagues on the Board of Trustees and administrators of the school. D.A. Skeen, a fellow trustee, expressed Amy's importance in the field of mental hygiene in Utah. He identified her as an innovator in addressing mental health and disability and a primary catalyst for the opening of the Training School. He wrote, "I personally feel that the people of Utah, and elsewhere, engaged in modern methods and interested in progress in the field of Social Welfare must feel a deep appreciation for the active and effective contribution so freely given by Mrs. Lyman to this field of public work."⁷² Superintendent Herbert H. Ramsey also acknowledged Amy's general interest in "mental deficiency" as a social problem in a letter commemorating her service to the state of Utah.⁷³

In *Mormonism in Transition: A History of the Latter-day Saints, 1890 - 1930*, Thomas G. Alexander wrote about the desire of the LDS Church to conform to traditional American ideals following the national protestation of polygamy and the state's admission to the Union. In addition to complying with monogamy mandates, adhering to political pluralism, and adapting to anti-monopolistic business practices, Alexander explained, "The intense activity on the part of the Mormons in

⁷¹ Hall, "Anxiously Engaged," 83, f37.

⁷² D.A. Skeen to Mrs. Joshua Greenwood dated August 18, 1936, Amy Brown Lyman Collection, MSS 316 Box 6a folder 2, L. Tom Perry Special Collections, Harold B. Lee Library, Brigham Young University, Provo, Utah.

⁷³ H.H. Ramsey to Mrs. Joshua Greenwood dated August 17, 1936, Amy Brown Lyman Collection, MSS 316 Box 6a folder 2, L. Tom Perry Special Collections, Harold B. Lee Library, Brigham Young University, Provo, Utah.

support of the war effort helped in changing the national image of the church.”⁷⁴ In all aspects, the LDS Church acclimated to national expectations. Amy’s efforts to modernize the church’s social service department serve as another example of this integration. W. Paul Reeve explained in *Religion of a Different Color: Race and the Mormon Struggle for Whiteness* that Protestants racialized Mormons in the late nineteenth century in order to justify their expulsion from Missouri, and that Mormons used “Roosevelt’s fears of race suicide to aid their acceptance and integration,” but the transition was “rocky and hampered by lingering suspicions about Mormon whiteness.”⁷⁵ It is possible that Utah opened a school for the disabled, complete with a sterilization program, because other states did the same, thus allowing Utah to move into the mainstream of social policy.

Mark Allen, USTS psychological consultant and assistant superintendent, both observed and collaborated with Amy for years. He recalled how she served on the school’s board of trustees with “equally strong-willed and committed individuals” and that “she held her own as a prominent player in steering the development of the institution.” He asserted that she always had the best interests of the residents at heart and could be “outspoken and heated in her indignation” when she found employees derelict in their duties. He credited Amy as “largely responsible” for the creation of the school, though she gave credit to President Robison and her Relief Society sisters.⁷⁶

⁷⁴ Thomas G. Alexander, *Mormonism in Transition: A History of the Latter-day Saints, 1890 – 1930* (Chicago: University of Illinois Press, 1996), 49.

⁷⁵ W. Paul Reeve, *Religion of a Different Color: Race and the Mormon Struggle for Whiteness* (New York: Oxford University Press, 2015), 250-51.

⁷⁶ Hall, *A Faded Legacy*, 111.

Amy Brown Lyman facilitated advancement for women of the LDS Church and social work in the State of Utah in the early decades of the twentieth century. Her involvement with the American Child Hygiene Association, and the American Association for Mental Deficiency as well as her personal interactions with John D. Rockefeller and Dr. Valeria H. Parker of the American Social Hygiene Association demonstrated her connection with the national eugenics movement, as did her initiative to apply related practices locally through the data collection about families on relief. Integral to both the church and state's transition to nationality, Amy persevered, mediated, and labored for the betterment of society. The energy and intelligence she exhibited in her youth carried her through the trials and challenges of her adulthood as her prophetic childhood nickname indicated, "Ready-aim-fire."⁷⁷ Amy Lyman's devotion to social work was part of her religious faith. Indeed, "religion and true social service" were to her "almost one and the same thing." Salvation was their common aim: "To save and rescue human beings is the strongest motive one can conceive, and this is a religious ideal. It is one of the ideals set up by LDS Prophet Joseph Smith for the Relief Society. It is also the chief object of social work."⁷⁸

Amy wrote a piece in 1930 entitled "Organizations in the Intermountain West, Featuring Health Work in the L.D.S. (Mormon) Relief Society with headquarters in Salt Lake City, Utah." She identified a growing sentiment for mental tests in addition to the physical tests utilized to provide vocational guidance for children and adults. She wrote, "Sentiment has also been created in favor of

⁷⁷ Hall, "Anxiously Engaged," 75.

⁷⁸ Derr, et al, *Women of Covenant*, 277.

intelligent and adequate care of the mentally ill and handicapped, and for preventative constructive work in this field.”⁷⁹ In a 1931 *Relief Society Magazine* article written by Amy, she acknowledged the combined support of state, church, and non-sectarian agencies to address the “special needs of the differently handicapped.” She wrote, “A wave of humanitarian sympathy and scientific inquiry had spread over the country creating a new interest in human beings,” and “In the present century attention has been focused on prevention, the idea that prevention is better than relief.” She explained that the current focus of social work called for “getting to the very roots of trouble and sparing nothing which may be involved in the process, preventing a recurrence of those conditions which cause distress and giving people an opportunity for a normal life.” She identified the stages of intervention, “The steps are first curative, - relieving those already in distress and destitution; secondly, preventative, - guarding against the recurrence of conditions which cause distress and poverty and third constructive - raising human life to its highest level.”⁸⁰

Amy addressed the Relief Society conference in 1932, stating, “In any great crisis, in public or private life, there comes to the surface, and to the attention, many weak spots; handicaps, defects, deficiencies; which under ordinary circumstances, would not be noticeable or would be concealed from view.” She said that under

⁷⁹ Amy Brown Lyman, “Organizations in the Intermountain West, Featuring Health Work in the L.D.S. (Mormon) Relief Society with headquarters in Salt Lake City, Utah.” “Organizations in the Intermountain West, Featuring Health Work in the L.D.S. (Mormon) Relief Society with headquarters in Salt Lake City, Utah.” Amy Brown Lyman Collection, MSS 316 box 3 folder 6, L. Tom Perry Special Collections, Harold B. Lee Library, Brigham Young University, Provo, Utah.

⁸⁰ Amy Brown Lyman, “Untitled,” *Relief Society Magazine* (January 1931), 6-7.

normal circumstances nations and people often follow the path of least resistance, giving little thought to the future, and it was not “until some test comes, or some disaster or calamity comes, and reveals conditions, do we know them as they are; and do we get an idea of what a program of prevention should be.” She asserted the conclusions of *A Study of American Intelligence*, “When our country entered the World War, we were greatly surprised that we had many weaknesses, defects, and shortcomings in our national life. We had known our strength virtue, our capabilities, our power as a nation, but we did not know of our deficiencies until they were forced to the surface and revealed to us.”⁸¹

While there is no known record of Amy Lyman outright endorsing compulsory sterilization, her relationships with eugenicists and the use of their arguments, including repetitive references to scientific methods and “prevention” suggest approval. In her private papers, nestled in with Relief Society conference talks, are two pamphlets: “Effects of Eugenic Sterilization as Practiced in California (1937),” and “Human Sterilization Today (undated),” both published by the Human Betterment Foundation.⁸² Similar pamphlets are located in Mark Allen’s private papers as well as in the records of the Utah Developmental Center, formerly the Utah State Training School.⁸³ Amy attended several out-of-state trainings with progressive foci on prevention over cure, and she had direct involvement as a board

⁸¹ Amy Brown Lyman Collection, MSS 316 box 3 folder 6, L. Tom Perry Special Collections, Harold B. Lee Library, Brigham Young University, Provo, Utah.

⁸² Amy Brown Lyman Collection, MSS 316 box 3 folder 5, L. Tom Perry Special Collections, Harold B. Lee Library, Brigham Young University, Provo, Utah.

⁸³ Mark K. Allen Collection, UA 585 box 2 folder 9, L. Tom Perry Special Collections, Harold B. Lee Library, Brigham Young University, Provo, Utah; Utah Developmental Center Records, American Fork, Utah; Copy of “Human Sterilization Today” in author’s possession.

member with selecting a pro-sterilization superintendent. She was a critical player in the establishment of the school and involved in articulating its purpose.

Institutions for the disabled and their superintendents were procedurally crucial to the process of sterilization.⁸⁴ Now that the state of Utah had an institution for the intellectually disabled, it was free to practice eugenic sterilization.

⁸⁴ Hansen and King, *Sterilized by the State*, 92.

CHAPTER THREE

THE HEIGHT OF COMPULSORY STERILIZATION

The Utah State Training School's superintendent and board of trustees submitted their first biennial report to the governor and legislature of Utah on June 30, 1932. An epigraph on the cover of the report aptly reflects the mission that would guide the school for years to come: "The problem child is the immediate Predecessor of the problem Adult."¹ The Utah State Training School Commission retained Dr. B.O. Whitten, superintendent and founder of the State School of South Carolina, to organize and open the Utah State Training School.² Dr. Whitten declared his intention to "put a soul into the School and its work."³ Preference for admission was given to the higher functioning, trainable individuals immediately, with the long-range goal to provide for the classification and care of all intellectually disabled persons in the state requiring institutional care.⁴ After receiving a psychological assessment and medical examination, the first residents, referred to as "children," moved into the school on October 5, 1931. By May 1932, the school was operating smoothly and Dr. Whitten returned to South Carolina. The Board recruited Dr. Hubert H. Ramsey from the Mississippi School and Colony to replace Whitten, and he assumed his duties May 1, 1932.

¹ *First Biennial Report of the Utah State Training School*. (American Fork, Utah, 1932), 1. Quote attributed to Lowrey.

² *First Biennial Report*, 4.

³ *First Biennial Report*, 4.

⁴ *First Biennial Report*, 4.

Historian Phillip Reilly identified the first American institutions dedicated to the care of the intellectually disabled as developing in Massachusetts in 1848. Superintendents of these institutions enhanced their appeals for legislative support by arguing the money spent on “the so-called schools was a wise investment that would reduce the social burden of crime, prostitution, and illegitimacy that would be incurred by failing to isolate the feeble-minded.”⁵ Reilly argued eugenic sterilization programs were implemented only in those states, “in which key persons, such as superintendents of state hospitals, were supportive.”⁶ Hansen and King argued, “Eugenic ideas would not have been translated into practice without doctors, psychiatrists, superintendents (many of whom were doctors in homes for the feeble-minded), and social workers.”⁷ They further asserted the “justificatory strength of eugenics” eased the actors’ implementation of sterilization policies, arguing the commingling of eugenic ideas and institutional intentions effected substantial policy change.⁸

Founded in 1923, the Mississippi School and Colony was initially intended for a male population, females soon exceeded admissions. Hansen and King explained, “This trend reflected the common, though not universal, view that feeble-minded women, as the bearers of children, posed the greater threat than did feeble-minded

⁵ Philip R. Reilly, *The Surgical Solution* (Baltimore: The Johns Hopkins University Press, 1991), 12.

⁶ Reilly, *The Surgical Solution*, 71.

⁷ Randall Hansen and Desmond King, *Sterilized by the State: Eugenics, Race, and the Population Scare in Twentieth-Century North America* (New York: Cambridge University Press, 2013), 27.

⁸ Hansen and King, *Sterilized by the State*, 28.

men and therefore required more attention.”⁹ The Mississippi School implemented compulsory sterilization under the state’s law which required consent be secured from a patient’s parents or guardians prior to the procedure. Dr. Ramsey, along with superintendents in states with similarly constrictive statutes, felt constrained and compelled to “proceed cautiously” under the law. Hansen and King asserted the reason for the more prudent legislation in the South was “the greater role given to the family in Southern states and hostility or, at least, resistance to Progressivist social reforms involving an expanded role for state agencies.” They further stated that Ramsey and his peers felt that because segregation from the community led to long-term, if not lifelong, commitment that “selective sterilization should become an ally to the parole system of the institution.” In other words, discharge should be conditional on an inmate being sterilized.¹⁰ While Ramsey did not have the financial resources to institute a substantial sterilization program, his successor in Mississippi proved more effective in ensuring a significant increase in sterilizations in the 1940s.¹¹

In Utah, Dr. Ramsey hired Mark K. Allen in August 1932 as assistant superintendent, psychologist, and school director. Ramsey and Allen devoted their Saturdays to screening applicants and counseling their parents. This mirrored the system created under the guidance of Henry Goddard, colleague of Harry H. Laughlin, author of *The Kalikak Family*, and pioneer of American intelligence testing. Already instituted in Mississippi under Ramsey, these “traveling clinics” would test

⁹ Hansen and King, *Sterilized by the State*, 94.

¹⁰ Hansen and King, *Sterilized by the State*, 93.

¹¹ Hansen and King, *Sterilized by the State*, 94.

school children to identify the intellectually disabled for institutional care. He argued this arrangement would “enable the state to assume charge of its defectives during the formative period, before they have become a menace and social liability.”¹²

When Ramsey addressed the governor and legislature in the First Biennial Report, he stressed the importance of admitting only individuals classified as “feebleminded.” He explained the difference between them and the insane and epileptic, who, considered incurable, necessitated placement at the state hospital. He asserted one purpose of the school was to provide clinical services to communities throughout the state. He identified this function existed as a part of a “rather broad mental hygiene program” whose primary purpose was “to prevent the reproduction of defective stock.” The secondary purpose was “to train and make useful those defectives, in order to prevent dependency, delinquency and crime.”¹³ Commenting on the economic climate of the time Ramsey acknowledged, “We are fully conscious of the State’s depleted financial condition and understand that no building of any great proportion can be undertaken at this time.”¹⁴

Mark Allen explained the psychological examinations and classification processes utilized by the school in determining admission in his report to the state. He explained that intelligence is only one factor of human potential to be measured and should be taken into consideration along with physical and social

¹² Hansen and King, *Sterilized by the State*, 93.

¹³ *First Biennial Report*, 9.

¹⁴ *First Biennial Report*, 13.

development.¹⁵ Typically, this included individuals with an IQ under 70. He hoped his intervention would improve the child's sense of accomplishment and self-worth. "The thrill of succeeding – which is so often an unknown experience to the retarded child in the public schools and an experience that is extremely essential to building the proper self-feelings for any accomplishment at any mental level – is afforded every child under our organization. There are no failures." He identified vocational, religious, and moral training as focal points. He shared his experience in watching the residents evolve from "fearful reticence to happy playfulness." He stated the cause, "Here they are not made fun of, but they are given encouragement for every little success and school becomes play."¹⁶

Outlined in a 1943 Master's Thesis entitled, "State Care of the Feeble-minded in Utah," is a detailed examination of the school's admissions process. Social work graduate student Eleanor Skeen argued that "the institutional and sterilization programs that have been adopted by the state [served] as measures of social control." She discussed the combined efforts of various state officials' attempts to open a separate facility between 1885 and 1929, for short-term, non-custodial care.¹⁷ Skeen briefly outlined the process by which individuals gained admission to the school. The parent or guardian of an individual with a disability could submit an application to the Board of Trustees, accompanied by physician affidavit confirming mental deficiency. The superintendent also retained the authority to certify mental deficiency. The Court could also legally commit individuals found to be "so mentally

¹⁵ *First Biennial Report*, 15.

¹⁶ *First Biennial Report*, 17.

¹⁷ Eleanor Skeen, "State Care of the Feeble-minded in Utah," (Salt Lake City: University of Utah Masters of Social Work Thesis, 1943), 2.

deficient as to prevent him from receiving proper training in the public schools or to prevent him from properly caring for himself, or who by reason of mental deficiency was a social menace.”¹⁸ The school was prohibited by law from admitting any “feeble-minded convict or defective delinquent” without express judgment of the Superintendent.¹⁹ Skeen further delineated the discretion held by the position. “A legal commitment also prevents a person’s being removed from the school without the consent of the superintendent and therefore makes it possible for the child to stay as long as necessary for training and sterilization.”²⁰

Policy makers justified the school’s sterilization program on economic and eugenic terms. In its *Second Biennial Report*, the trustees recognized the school’s role as an integral part of the state’s educational system, served every county, and supplemented court, welfare, and social agencies. While asserting the right of intellectually disabled child to receive an appropriate education, they identified the proper functioning of the school positively affected the economy of the State by reducing the cost of care of the disabled to the State. The trustees stated,

The true purpose of the School is to detect or discover the mentally deficient while young and adaptable, to take and train them in accordance with their mental abilities, and, when so trained and socialized, and then sterilized, to return them to their respective communities, where, under proper supervision, they may function as normally as is possible and be assets rather than liabilities. Under this plan they will not be permitted to reproduce

¹⁸ Skeen, “State Care of the Feeble-minded in Utah,” 31.

¹⁹ Skeen, “State Care of the Feeble-minded in Utah,” 32.

²⁰ Skeen, “State Care of the Feeble-minded in Utah,” 33; The sources for her analysis come from the *Revised Statutes of Utah 1933 Annotated* (Kaysville, UT: Inland Printing Company, 1933), 1065-66.

their kind, as further public charges.

The board justified their inclinations as based upon the “experience and development of other institutions in other states.”²¹ They requested the funding to establish a traveling clinic in order to reach out to those in corners of the state unable to travel to American Fork and without access to outpatient services.²²

Superintendent Dr. Ramsey concurred with the school’s purpose set forth by the Board of Trustees. He identified “the true purpose” of the school as to train, socialize, and sterilize the “mentally deficient” before returning them to their communities, and called “selective sterilization an ally to the parole system of an institution treating the feeble-minded and others.” Dr. Ramsey attributed two causes for the influx of admissions during 1934: “Community recognition of the social liability of defective children and the desire of the community to escape the support of defective dependents.”²³ Skeen concluded the “defective child” could not escape the attention of Utah’s Depression-era social workers responsible for administering relief, and who made the highest number of referrals to the school.²⁴ In January 1935, the school initiated legal proceedings under the state’s sterilization statute to perform the procedures. The law states:

Whenever the superintendent... of the Utah state training school ...shall be of the opinion that it is for the best interests of the inmates or of society that any inmate confined in the

²¹ *Second Biennial Report of the Utah State Training School*. (American Fork, Utah, 1934), 3.

²² *Second Biennial Report*, 4.

²³ Herbert H. Ramsey, *Second Biennial Report of the Board of Trustees of the Utah State Training School at American Fork, Utah to the Governor and Legislature for the period ending June 30, 1934*, 3.

²⁴ Skeen, “State Care,” 48.

institution under his care shall be sexually sterilized, such superintendent...is authorized to cause to be performed by some capable surgeon the operation of sterilization or asexualization on any such inmate afflicted with...insanity, idiocy, imbecility, feeblemindedness or epilepsy..."

The statute continues, "...and by the laws of heredity is the probable potential parent of socially inadequate offspring."²⁵

Dr. Ramsey reported to the state on June 30, 1936 that 21 operations were performed during the first year. He addressed the process by which he educated family members about the importance of sterilization, including explaining the simplicity of the operation. Once allaying misguided fears of mutilation and offering hope for self-sufficiency, he found receptivity among parents. Ramsey explained, "The tragedy of defectives bearing children is so shocking to any normal individual that this harmless operation should increase in popularity as the school is able to expand its activities." The trustees reaffirmed the purpose and policies of the school: An educational institution with training, socialization, and sterilization of the intellectually disabled as fundamental programs. They acknowledged an increase in admissions and pleaded for additional funding to deliver sterilizations that were the "basic purpose of the school." They wrote, "The State owes a clear duty to provide an adequate hospital service as part of the institution" that would bring "invaluable results to the State."²⁶

The trustees presented the objectives and needs of the school to the Special Legislative Survey Committee on Education. Determined that sterilization must be

²⁵ *Revised Statutes of Utah 1933 Annotated* (Kaysville, UT: Inland Printing Company, 1933), 1065-66.

²⁶ *Third Biennial Report of the Utah State Training School*. (American Fork, Utah, 1936), 4.

included in the school's programming, they wrote, "Here it is appropriate that we briefly discuss the program of eugenical sterilization for the boys and girls who come to this institution and whose intelligence, training and stability will enable us to return them to the community following their full accomplishment here." They explained that while the school's establishing legislation does not require sterilization before discharge, it would be wise to take advantage of the benefits of the sterilization law of this state. In order to "prevent the reproduction of more defective stocks through the marriage of mentally deficient children who may be admitted to this institution and who, in the course of time, would be released." They proposed, "All such cases leaving the institution shall be sterilized before they are returned to the community." The trustees argued the school's program of eugenical sterilization had proven very successful since its initiation in 1935. They explained, "Many fairly useful and harmless boys and girls can be returned to the community after their training has been completed without harm to society provided the operation of sterilization is done before they leave the institution. This serves the purpose of not only rendering these individuals harmless so far as reproduction is concerned, but allows the institution to have a certain turnover through returning cases to the community and admitting new cases."²⁷ They reiterated the importance of an onsite hospital. "It is one of the outstanding needs of the institution in order to meet the demands of our eugenical program with the mentally deficient boys and girls."²⁸

²⁷ Special Legislative Survey, 1936, 4.

²⁸ Special Survey, 1936, 10.

In 1938, the Board cited the growth of the school as removing any doubt that maintaining the institution was a fundamental necessity as a part of the broader program of education, social regulation, and social control. They reflected on their personal experiences since the school opened and asserted,

The presence of a feeble-minded child in a home is more depressing, expensive and tragic than any known disease. Mental defect vitiates the offspring, and wounds our citizenry a thousand times more than any plague man is heir to. Even though this grief is often veiled with a smile, it destroys, demoralizes, and sets at naught the lives of too many of our people.²⁹

The Board reiterated its position that “selective sterilization should be a definite part of the program for handling the feebleminded.” They identified the state’s sterilization law as being “entirely workable and, if conscientiously administered,” would “fully accomplish its purpose.” They described a deficiency in the law that authorized sterilizations could only be performed upon persons confined to a state institution.³⁰

The Board further identified the lack of an accurate and systematic method of identifying the mentally deficient in the State of Utah. However, they did credit the current welfare system as cooperating with the schools to identify and refer the intellectually disabled who have been previously overlooked and held as “problems to their families and immediate neighbors only.” Because of their identification, action could be taken to “prevent their continuing as a menace and their continuing to reproduce their kind to present a further menace of large proportions.” They

²⁹ *Fourth Biennial Report of the Utah State Training School*. (American Fork, Utah, 1938), 3.

³⁰ *Fourth Biennial Report*, 4.

stressed that society could not escape the responsibility and expense of caring for the “mental defective,” but the prevention of their propagation eased the burden.³¹ For the inability to fully maximize the sterilization program, Dr. Ramsey blamed the influx of admissions due to the Depression.³² He expressed that the public opinion has “crystallized favorably with reference to this program,” and there was “no doubt as to the social and economic value of selective sterilization as an ally to the parole system of the institution.”³³

In the *Fifth Biennial Report*, the Board attributed the increase in residents from 205 in 1932 to 731 in 1940 to the active work of the schools and welfare workers. Acknowledging what they identified as a high prevalence of “mental deficiency” in the state, they distinguished the economic importance of sterilization in order to reduce the number of individuals requiring lifelong institutionalization.³⁴ Forced to use the Salt Lake General Hospital for procedures based upon its availability, 99 residents were on a waiting list.³⁵ Pleading for the funds to build an onsite hospital, the Board wrote, “We urge the serious and careful consideration of this report by the Governor and by every member of the legislature.” While distinguishing the statewide impact made by the school, they reiterated the economic necessity: “Such service not only has an immediate value, but sets up definite prevention measures of permanent value.”³⁶ Concurring with the

³¹ *Fourth Biennial Report*, 5.

³² *Fourth Biennial Report*, 8.

³³ *Fourth Biennial Report*, 11.

³⁴ *Fifth Biennial Report of the Utah State Training School*. (American Fork, Utah, 1940), 3.

³⁵ *Fifth Biennial Report*, 4.

³⁶ *Fifth Biennial Report*, 5.

recommendations of the Board of Trustees, Dr. Ramsey wrote, "This program has not reached the proportions desired because of the lack of hospital facilities."³⁷

Dr. Ramsey presented a paper entitled "The Demand for a More Effectual Program for the Social Control of the Mentally Deficient" to the American Association on Mental Deficiency in Atlantic City, New Jersey in 1940. He discussed clinical testing; specifically how adjustments on the IQ scale provided "considerably more latitude in our sterilization program, thus permitting it to reach many of those most vicious carriers of defect."³⁸ He addressed the perpetual issue of providing separate facilities for the "mentally deficient," acknowledging that many conditions, such as epilepsy or insanity, remain confused with "mental deficiency." He said, "There is still considerable misunderstanding as to the function of an institution for mentally defective children."³⁹ He described the lingering effects of the Depression as contributing to the high number of families and social workers seeking placement for disabled children at the Training School. He stated, "The welfare machinery has become more refined and the workers have become much more alert to mental defectives on relief."⁴⁰ However, most of those cases presented an acute need or problem conceivably remedied by the school. He remained concerned for those in the community not referred by families or social workers. He explained, "The mental defectives who are in stable homes, who do not disturb the tranquility of the home, school, or community, and who are of some value or help to someone are

³⁷ *Fifth Biennial Report*, 12.

³⁸ Herbert H. Ramsey. "The Demand for a More Effectual Program for the Social Control of the Mentally Defective." May 22, 1940: 2. Utah State Archives.

³⁹ Ramsey, "The Demand," 3.

⁴⁰ Ramsey, "The Demand," 4.

seldom referred for examination.”⁴¹ Dr. Ramsey found the 70 IQ cut-off to be too constricting in terms of admissions to the school. He identified 331 individuals examined since June 1936, 145 found to have IQs under 70 and admitted to the school. He contended,

The other 186 are still in the communities with a doubtful amount of supervision, some married and reproducing children who are likely to be liabilities. In the course of the examining since 1936, 28 mentally defective persons were located who had already given birth to children and who were still considered serious community problems. Some community control over the reproduction of this group is badly needed.

Dr. Ramsey surmised that only 10 percent of the “mental defectives” in the nation were institutionalized. He claimed, “It is reasonable to assume that for every one birth of a defective prevented by segregation, nine more defectives will be born as charges on society in the community” and state and federal bankruptcy would surely follow. He insisted, “Custody and supervision of all defectives who are potential parents must become the watch word of the whole nation. Freedom for defectives means more defectives; and more defectives mean more millions for their support.”⁴²

Dr. Ramsey strongly favored the South Dakota Plan, presented to this association by Dr. Wilhite in 1937, which enunciated a comprehensive statewide plan for the classification, segregation, and sterilization of all disabled persons. He stated, “A basic and valid research in eugenics and heredity is essential.” Quoting a co-associate of the Mental Hygiene Association, Dr. Ramsey stated,

⁴¹ Ramsey, “The Demand,” 5.

⁴² Ramsey, “The Demand,” 9.

If we develop techniques by which the individual is cured, we shall in a sense be working against eugenics, unless means are taken to control the propagation of these individuals. As we advance in therapeutics, we should advance in eugenics, a eugenics scientific, humane, non-fanatical, and with a chance of being accepted into the mores and legal structure of the American community.⁴³

Dr. Ramsey recognized sterilization was not a “panacea,” but important nonetheless. He argued, “Sterilization of the mentally defective has merit not only as a eugenical prophylactic, but also [provided] social and economic betterment for the individual.” He maintained mere segregation was not sufficient, as it proved too costly without the benefit of sterilization.⁴⁴ Dr. Ramsey added he found the parents of “defective” children “easy to approach on the subject of eugenical control.”⁴⁵

While Dr. Ramsey’s lecture connoted antipathy, his humanity and empathy surfaced when he spoke of the importance of education as an essential component of a broader social hygiene program. He identified the majority of the children “lacking in capacity, but willing and anxious to learn.” He expressed, “With little smothered souls and benighted minds, but withal human beings, (they were) the victims of genetic deficiency in the majority of cases. Their coming into the world was not of their choice. Our interest in them is unceasing, and our love for them is different from any known human feeling. The humanitarian element must ever be our best guide.” He concluded, “The moral element must not be underestimated in

⁴³ Ramsey, “The Demand,” 10.

⁴⁴ Ramsey, “The Demand,” 11.

⁴⁵ Ramsey, “The Demand,” 12.

the prevention of mental deficiency. It is a bulwark of health and strength for the race."⁴⁶

Eleanor Skeen discussed sterilization in her thesis as a specific function of the school. She wrote the return of children to their community depended upon their mental capacity as well as if they acquired enough training to become at least partially self-supporting. The young women who had a period of training from three to six years following sterilization resided with responsible people in the community as domestics, assisting in household work and in the care of children. The institution also had a large number of boys who left the school to work on farms with dairymen and other occupations.⁴⁷ Aspirations to train and parole residents of the Training School met with limited success. From 1931 to 1942, only 464 residents garnered either parole or a discharge. Close to 200 individuals were sterilized, while several more awaited the procedure. Since there was not a hospital on the school campus, residents either awaited release pending sterilization or stayed at the school awaiting admission to the Salt Lake County Hospital.

When the commission made their report to the governor and legislature in 1942, they commended the work of the previous board members. However, they acknowledged the previous requests for additional financial expenditures, presumably the repetitive calls for an onsite hospital, and affirmed they would not be making such appeals, aside from repair needs. They were careful to note it was

⁴⁶ Ramsey, "The Demand," 13.

⁴⁷ Skeen, "State Care," 84.

not because such appeals were unnecessary, but rather due to what was transpiring nationally. They explained,

We sense in a vivid way that our nation is at war with a strong, ruthless enemy, and that in order to win this war, which is all important, it behooves all citizens, and public officials especially, to make all concessions and sacrifices necessary which may be consistent with sound administrative functions. In this connection, it perhaps would be proper to call attention to the fact that the war emergency has caused a considerable amount of upheaval in the regular functions of the institution.

They cited a high staff turnover rate as employees sought higher paying jobs in the war industry and that transportation to and from the institution had become problematic for the remaining employees. They even considered establishing a bussing system similar to one employed by the state hospital.⁴⁸

Regarding sterilization, the commission cited the report made in 1940 by the trustees and wrote, "This commission heartily concurs in the sentiments as outlined... it is essential that the sterilization phase of the program be kept in continual operation." They described the cooperative agreement between the school and the Salt Lake County Hospital, where the procedures had been performed, but stated patients had to wait for availability and that is why so few operations took place.⁴⁹ They indicated arrangements were being made at the state hospital to alleviate the overcrowding at the school because of the surgery waiting list.⁵⁰

⁴⁸ *Sixth Biennial Report of the Utah State Training School*. (American Fork, Utah, 1942), 3.

⁴⁹ *Sixth Biennial Report*, 4.

⁵⁰ *Sixth Biennial Report*, 5.

In the first report written by the commission rather than the former board of trustees, they affirmed the “outstanding service” provided to the citizens of Utah,

We are told that the mentally deficient people residing in the countries ruled by dictators are harshly dealt with, in some countries put to death. This is not the American way. However, we are strongly of the opinion that suppressive measures must be taken in order to hold mental deficiency down to a minimum. Otherwise, in our opinion, the American people in time will become an inferior race, instead of what we all should like them to be – a superior race. The State of Utah should be willing to make its contribution to national health and well-being.⁵¹

They gratefully acknowledged the cooperation of the trustees in the transferring of responsibilities, “in a spirit of giving credit where credit is due.” The commission cited the board’s “keen interest in the welfare of the institution” as lessening the burdens on the state and promoting the “best interests of the school and State of Utah.”⁵²

When Dr. Ramsey wrote his report in 1942, he addressed the negative morale among the staff due to daily resignations, and blamed the increase in admissions to the influx of people moving to Utah for war industry employment. He acknowledged the national state of emergency and how care of the intellectually disabled may seem insignificant in comparison. However, he contended, “We are actually dealing with a biological problem which has to do with the very powers of the race... and the means of adequately providing for dealing with the defectives in every state of the Union as a means of eliminating defect from the race and making

⁵¹ *Sixth Biennial Report*, 5-6.

⁵² *Sixth Biennial Report*, 6.

the population a stronger and better people.”⁵³ He continued the appeal for an onsite hospital.

Hansen and King provided insight into what Dr. Ramsey and the Welfare Commission meant in their references to race. They explained, “Throughout the twentieth century, the target of eugenicist fear and loathing was the feebleminded, but most of those targeted were white.” They identified a basic difference between those who believed eugenics was about improving the lot of all the races and those who thought it was about improving and protecting the white, Nordic race. In either case, eugenicists – German, American, British, and Scandinavian – did agree that the state had an interest in, and even an obligation to, ensure the fitness of the race.⁵⁴

Dr. Ramsey explained that most parents remained open to sterilization.⁵⁵ The few individuals who opposed the procedure, he believed, were intellectually disabled themselves. As further justification for sterilization, he cited the applications received for children of the “many epileptics and feebleminded who were released under pressure in the early years of the work of the institution.” He asserted, “The commitment of mentally defective mothers, some of whom have given birth to several children, would indicate that our sterilization laws should be

⁵³ *Sixth Biennial Report*, 16.

⁵⁴ Hansen and King, *Sterilized by the State*, 58.

⁵⁵ Studies regarding the attitudes of parents towards sterilization were not conducted until the 1960s and are addressed in the following chapter, though reasons for consent at this time may have included a desire for the child to return home, the hope of a more independent future, and/ or a reduction in problematic behaviors as assured by doctors. Later studies posit resistance to sterilization arose from the misunderstanding that sterilization and castration were synonymous.

amended to permit these women to be sterilized without commitment to the institution.”⁵⁶

Dr. Ramsey again compared his work at the school to having national consequences. He explained the “crippled human minds and bodies” were the result of “weakened heredity and slow-acting, deteriorating influences which are sapping the intelligence of the citizenry of this country.” Stating there was no “greater importance” than dealing with the “very fundamentals of life,” he asserted, “Deterioration of physical and mental powers will certainly let us fall victim of some more powerful nation or nations unless we protect our own from the weaknesses which beset us.” Ramsey rationalized,

We have always in the past taken pride in the fact that we take care of our own, that sympathy and protection for those who are weak is a Christian principle of which we are proud and one of the characteristics of our democratic form of government, and yet if we go no farther than this, our work will fail.

He necessitated a “sympathetic understanding of the defective,” while arguing for segregation and sterilization as prevention of reproduction. He concluded by stating that expansive education was essential “to bring all the people of the country to a realization that we may finally defeat ourselves through our toleration of weakness.”⁵⁷

A letter between the Public Welfare Commission and the Salt Lake County General Hospital in 1942 highlights the economic motivations behind sterilization by detailing the savings to the state through a simple medical procedure compared

⁵⁶ *Sixth Biennial Report*, 16.

⁵⁷ *Sixth Biennial Report*, 18.

to a lifetime of custodial care at the Training School. Hospital Superintendent Dr. George N. Curtis addressed the commission. He wrote,

Dr. Ramsey had told me that he estimated that every one of these cases we sterilized meant a saving to the State of Utah of \$10,000.00, when the training, schooling, and care of such feeble minded in jails and reformatories is considered. I think this figure is quite fair and correct. The savings to the state... (equals) a grand total of \$1,260,000.00. These figures are given you in order to let you see the contribution made by Salt Lake General Hospital to the welfare of the state.

Dr. Curtis confirmed the inability of the hospital to perform all the necessary procedures due to a lack of space. He anticipated the opening of a new maternity ward would alleviate this impediment. He stated, "We...will be able to speed up the number of operations done on the people from American Fork. In the past these cases have had to wait until we could empty beds in the surgery."⁵⁸

When the commission addressed the governor and legislature in 1944, they acknowledged that because no improvements transpired at the school since their last report, "The need is greater now than it was then." They wrote, "Now that the war against the axis powers has progressed favorably, to such an extent that victory is assured and shouldn't be far off, it seems advisable to think in terms of post-war projects."⁵⁹ Dr. Ramsey began his report by declaring that 308 residents were sterilized since the school's opening in 1935. He reiterated the importance of amending the sterilization law to include those not institutionalized, boldly implicating that "mentally deficient" mothers bore from one to ten children and that

⁵⁸ Letter from George N. Curtis to Sophus Bertelson of the Public Welfare Commission dated December 12, 1942. Copy in author's possession.

⁵⁹ *Seventh Biennial Report of the Utah State Training School*. (American Fork, Utah, 1944), 3.

an onsite hospital “would pay immense social and economic dividends.”⁶⁰ He asserted the importance of sterilization could not be overestimated,

It deals with the prevention of biologic decay, and making the best of those unfortunates who are either the victims of accident, disease, or hereditary taint. An institution of this kind must be composed of something more than brick and mortar. It must have a soul. Great humanitarian and Christian principles are involved in our work. The misery of defect with its attendant grief can be more easily prevented than cured.⁶¹

The Public Welfare Commission opened their 1946 report by acknowledging the impact of World War II. Regarding their 1944 report, they wrote, “We anticipated then that the war was almost at an end and that with the cessation of hostilities, conditions would improve to such an extent that the long neglected repairs could be brought about. However, we have experienced some disappointment in this respect.”⁶² They repeated that they “heartily” concurred with the previous board’s focus on the importance of sterilization.⁶³ They pointed to the rise in custodial case, those who were unable to be discharged after sterilization due to their “untrainable” nature.⁶⁴

In 1946, Dr. Ramsey reasserted his position that the preventative phase of the problem of “mental deficiency has received too little consideration.” He said,

The causes of mental defect are said to be obscure and no doubt in some cases where biologic function miscarries in even normal parents, there are medical and eugenical problems yet to solve. But where we find from twenty-five

⁶⁰ *Seventh Biennial Report*, 8.

⁶¹ *Seventh Biennial Report*, 9.

⁶² *Eighth Biennial Report of the Utah State Training School*. (American Fork, Utah, 1946), 3.

⁶³ *Eighth Biennial Report*, 4.

⁶⁴ *Eighth Biennial Report*, 5.

to fifty defectives originating from a single family tree, there should be no doubt as to the cause.

He stressed the “control of defective stocks” must be carried out effectively in the community.⁶⁵ In 1948, the Commission believed the school performed as well as could be expected during the tenuous circumstances of the decade and that “severe” criticism was unjustified, though the nature of that source is not revealed. They attributed the “discontent” among employees to the low wages paid compared with other state institutions.⁶⁶ They pleaded with the legislature to address the “perplexing” issue of rising custodial cases, claiming that within a few years, the original intentions of the institution’s founding legislators would deviate from a focus on training.⁶⁷

Dr. Ramsey underscored that “mental deficiency be placed in the fore front of preventative medicine.” He identified a lack of public concern and “passing consideration from the medical profession” stemmed from “the elusive manner of transmission from generation to generation.” He restated there was no cure for “mental deficiency” and a long-term vision of prevention was imperative. He wrote,

For the unfortunate defective, who is in no way responsible for his condition, we must continue to respond to his needs to the end that he be made as useful and happy as possible. Our defectives are the children of our fellow citizens, of both low and high estate. The grief and sorrow is theirs, and we must share in the full responsibility of our duty.

⁶⁵ *Eighth Biennial Report*, 11.

⁶⁶ *Ninth Biennial Report of the Utah State Training School*. (American Fork, Utah, 1948), 3.

⁶⁷ *Ninth Biennial Report*, 4.

Dr. Ramsey announced that due to provision of the State's Retirement Act, he would be retiring at the end of the calendar year. He hoped that "through tireless effort and careful consideration" a well-qualified medical superintendent would be selected to well "go forward with the work so well begun."⁶⁸

Hansen and King identified John Pero, Director of Social Services at the Utah State Training School when they cited his confident conclusion in *The Problem of Mental Deficiency* that "mental deficiency...has grown to be one of the major problems in every state. When one sees the strain of mental deficiency, insanity, and the like, running thru family after family we wonder...why there can be any objection to sexual sterilization in any section of our country."⁶⁹ Pero began the report by prefacing his research study, based on results of psychological tests and various social studies, with a statement that the tests and studies were not entirely for the purpose of research, "but for the practical purpose of learning something of a particular child's potentialities in order to help the child and the community." The information contained in his report, "considered reliable and authentic," was obtained on all 1399 cases (744 males, 655 females) committed to the Utah State Training School from October 1931 to December 31, 1945. He concluded his introduction by writing, "It would make a neat study in economics to calculate twenty years from now, the amount of money spent on the cases listed in this study

⁶⁸ *Ninth Biennial Report*, 10.

⁶⁹ Hansen and King, *Sterilized By the State*, 24.

--- the amount spent by public and private agencies, public and private institutions, courts, and correctional institutions.”⁷⁰

Pero defined “mental deficiency” as “A state of social incompetence obtaining at maturity, or likely to obtain at maturity, resulting from developmental arrest of intelligence because of constitutional (hereditary or acquired) origin.” He identified the condition as incurable through treatment and “unremedial” through training, though he recognized treatment and training could instill habits, which “superficially compensate for the limitations of the person so affected while under favorable circumstances and for more or less limited periods of time.” Pero elaborated that the definition assumes that interest in the “mentally deficient” person “derives from his inherent inability to manage his own affairs successfully and to live effectively without need of supervision or assistance.” It further assumed that such interest is “directed toward suitable measures of social protection, help and control without which the person so affected would sooner or later become a burden or menace to society.” Pero described that a diagnosis of “mental deficiency” should include the following fields of inquiry: physical examination, family history, developmental history, school progress, practical knowledge, economic efficiency, social history, moral reaction, and psychological tests.

Concerning “Social Control of the Defective,” Pero acknowledged that “During recent years there has been much research work done in the field of mental deficiency. Many states have undertaken extensive research in an effort to organize

⁷⁰ John Pero. *The Problem of Mental Deficiency*. J. Willard Marriott Library Special Collections, University of Utah, Salt Lake City, Utah. Undated. Unpaginated. (RC570.5 .U6 P47 1945).

some sort of control. Utah has done practically nothing in the field of control.” He argued, “In order to have prevention, we must first plan for control of the mentally deficient. Only then is it possible to organize and establish an adequate program of social control of the mentally deficient.” He identified the primary purpose of such control would be the identity of all the intellectually disabled in the state, regardless of institutional residency, and a plan for their control under a definite authority.

The fact that Utah, or any other state, finds it impossible to institutionalize all of the mentally deficient, should not mean that we must abandon the problem as it relates to those in the community, but rather it should stimulate us to find a plan for their control. It is not enuf (sic) that we sterilize a very small percentage of our total population of mentally deficient. In this we are just scratching the surface.

Pero asserted that all states should have a “control law,” which would “provide for the identification, registration, adjudication, prevention of marriage, sexual sterilization in selected cases, and supervision in the community of all the mentally deficient persons in the state.” He explained that the program’s authority would rest in a state commission, with sub-commissions in each county. He contended, “Until we do this we cannot hope to solve the problems of mental deficiency.”

Regarding “Sexual Sterilization,” Pero wrote, “Eugenic sterilization is not a novelty or an experiment,” and had been continuously used in American institutions since 1899 when the first sterilization operation occurred in Indiana. He declared, “Sterilization is no panacea for these ills of mankind, but it is one of the many measures indispensable to any far sighted and humanitarian program for dealing with society’s burden of mental disease, deficiency, and dependency. He cited Oliver Wendell Holmes’ “Three generations of imbeciles are enough,” and explained the

principle of state-sanctioned, compulsory sterilization, instituted under proper safeguards, was upheld as constitutional by the U.S. Supreme Court in the 1927 *Buck v. Bell* case. He argued that sterilization, when “conservatively and sympathetically administered,” was “a practical humane and necessary step to prevent race deterioration.” Of the 331 sterilizations performed from 1935 to 1945, 151 were male and 180 were female.

Pero detailed the familial relationships of all 1399 residents to the extent he wrote statements such as “From these 33 separate families, 69 individuals in Training School,” and “This group includes 4 separate families from which 17 individuals have been in the Training School.” He identified that there were 233 separate families with relatives in the Training School and noted which off-spring were illegitimate. Every resident of the school was listed alphabetically and entries included their parents’ names, dates of admission, sterilization dates where applicable, and IQs. Demographic information such as race and gender were not included.⁷¹

In 1950, the Public Welfare Commission expressed admiration with the service of Dr. Ramsey. They wrote,

Dr. Ramsey led and directed the growth of the School almost from its inception. He stayed through a period of investigation

⁷¹ Entries also included information such as “the paternal grandmother was insane and a patient in Idaho State Hospital,” “Five children in the family are retarded mentally,” “father died of syphilis, paternal uncle epileptic and in state hospital,” and “two other mentally deficient children died in infancy.” One particularly detailed entry identified a Park City prostitute, who “did a rushing business with the miners, going to their rooms every day,” this after her children were turned over to the Children’s Service Society of Salt Lake City. Identified as a heavy drinker on public assistance, she had maternal grandparents that were “drunkards” and siblings that were illegitimate.

into administrative practices at the school. His years of service have been honorable and his practices found to be professional by impartial committees. Since he had reached retirement age and could not be assured any substantial continued employment in the State, he chose to accept a bid for his services from an adjoining State where no question of retirement age exists.⁷²

They allowed him to submit his report covering the previous two years. Criticizing the social welfare system, Dr. Ramsey alleged that instead of providing for the prevention of “mental deficiency,” the state was “investing millions of dollars in the reproduction of defectives. The survival of the unfit is promoted through charity without consideration of all the causes of dependency.”⁷³ Probably based upon his experience in Mississippi, Ramsey wrote, “The sterilization law of Utah is a good one.” He attested to the constitutional protection afforded the patient, noting Utah’s law was not as “cumbersome” as those in other states. He recognized the shift to “protecting the child against the responsibility of parenthood” as explaining an increase in referrals for admission to the school.⁷⁴ He expressed gratitude for the “many kind favors” shown during the interim between his retirement age and the present. His disappointment at never having opened an on-site hospital is reflected in his conclusion. “My interest will always be with the institution, although I have been unable to accomplish many of the ideals and plans which I have had for the institution and for the work with the mentally deficient in Utah in order to make it a sound program for the state.”⁷⁵

⁷² *Tenth Biennial Report of the Utah State Training School*. (American Fork, Utah, 1950), 3.

⁷³ *Tenth Biennial Report*, 8.

⁷⁴ *Ibid.*

⁷⁵ *Tenth Biennial Report*, 14.

Ramsey also illustrates Hansen and King's argument that superintendents governing the institutions were convinced that residence at the institution would be temporary or cyclical and that the purpose of the institutions would be educational. Because people both entered and left the institutions regularly, numbers in them would be small and manageable. Within a few decades, all of this changed. Funding became tighter and the medical and psychiatric professions to which institutional superintendents belonged became pessimistic about their patients' curability. The lack of financial resources, coupled with the grim prognoses held by medical professionals, led to an increase in decisions to commit patients on a permanent basis. The institutions became the end, rather than the means, for educational advancement. Because fewer patients left the institutions than initially envisioned, the volume of individuals committed increased exponentially through the second half of the twentieth century.⁷⁶ It is this professional disappointment pointed to in Dr. Ramsey's final remarks to the state.

Amy Brown Lyman thought highly of Dr. Ramsey as demonstrated in a tribute she wrote following his death:

(Dr. H.H. Ramsey) is one of the finest characters I have ever met...efficient, experienced, and outstanding in the field of psychology and institutional management...giving us new insight and understanding with respect to the many problems of these patients who are unable to plan for themselves or work in their own interest.

She conveyed her inspiration by his "simultaneous patience with the children and management of the institution."⁷⁷ While Dr. Ramsey demonstrated a kindness

⁷⁶ Hansen and King, *Sterilized by the State*, 64.

⁷⁷ Amy Brown Lyman, *In Retrospect Autobiography of Amy Brown Lyman* (Salt Lake

towards the residents of the school, his eugenical intentions remained clear: “So long as we consider mental deficiency an act of God, we shall have more and more of it.”⁷⁸ Under Ramsey’s tenure from 1935 to 1950, 505 of the total 738 patients were sterilized, validating the assertion made by Hansen and King, “Ramsey’s salient role is evidence of the influence of superintendents in the eugenic sterilization process.”⁷⁹ Dr. Ramsey referred to growing opposition nationally about compulsory sterilization. The end of Dr. Ramsey’s tenure brought with it the end to consistent, compulsory sterilization at the Utah State Training School. Up to this point, Utah followed national trends in the segregation and sterilization of people with intellectual disabilities. The following decade would see a decline in sterilizations due to the evolution of human rights movements.

City: General Board of Relief Society, 1945), 72.

⁷⁸ *Tenth Biennial Report*, 13.

⁷⁹ Hansen and King, *Sterilized by the State*, 93.

CHAPTER FOUR

THE DECLINE OF THE STERILIZATION PROGRAM

The end of Dr. Ramsey's tenure brought a gradual closure to the sterilization program at the Utah State Training School. The following two decades offer a contradiction in terms of historical theory. Phillip Reilly in *The Surgical Solution*, specified the 1930s as the "high water mark" of eugenic sterilization with a decline following in the 1940s and 1950s. He attributed the decline to the high number of surgeons serving in the military during World War II. He wrote, "From 1942 – 1946, every available surgeon was in the armed forces. Those who stayed home had heavy practices, and eugenic sterilization programs were a low priority."¹ Brantlinger added to Reilly's argument about the decline of sterilizations after WWII. She argued, "The status of eugenics sharply declined in reaction to Hitler's genocidal practices. Ideas linking race to cognition became unmentionable – condemned and silenced by strong public sentiments. Even before the war, genetic explanations had been increasingly countered with theories about the influence of environmental circumstances on mental and moral development, and environmental explanations began to take precedence."² The fact that sterilizations continued consistently in Utah following the war could be attributed to Ramsey's tenure.

¹ Philip R. Reilly, *The Surgical Solution* (Baltimore: The Johns Hopkins University Press, 1991), 122.

² Ellen Brantlinger, *The Sterilization of People with Mental Disabilities* (Westport, CT: Auburn House, 1995), 15.

From 1951 to 1974, 233 residents were sterilized under the supervision of four different superintendents compared to the 505 sterilized during Ramsey's fifteen-year administration. Hansen and King argued that in the pre-WWII period, once sterilization laws were on the books, superintendents determined which patients would be selected for sterilization.³ After World War II, sterilizations continued due to institutional continuity and a transformation of the ideology.⁴ Eugenicists now argued, "Should we not protect the Birthright of the unborn from violation by defective and irresponsible parents...Would unborn children willingly sacrifice a happy, intelligent home and a good heredity for feeble-mindedness, neglect, and institutional care so that mentally defective persons might have the *right to parenthood*?" An unaltered argument had been repackaged.⁵ Coerced sterilizations continued after the war due to the relationship between agents, ideas, and institutions. Because the supervising superintendents decided the majority of sterilizations in institutions for the "feeble-minded," the rules and ethos of the mental health institution are central to understanding how sterilization could continue, especially in the postwar years.⁶

Hansen and King contended no correspondence occurred between scientists and policymakers, arguing that journalists and activists did not always keep abreast of the latest intellectual developments. Although geneticists may have been convinced that "feeble-mindedness" was not hereditary, it took a long time before

³ Randall Hansen and Desmond King, *Sterilized by the State: Eugenics, Race, and the Population Scare in Twentieth-Century North America* (New York: Cambridge University Press, 2013), 22.

⁴ Hansen and King, *Sterilized by the State*, 25.

⁵ Hansen and King, *Sterilized by the State*, 171.

⁶ Hansen and King, *Sterilized by the State*, 7.

everyone else reached the same conclusion. Hansen and King asserted, “Once institutional arrangements and routines are established for a policy, they prove resilient,” defining “a lagtime” between a scientific discovery and its circulation among the public and/ or government. They argued this “lag time” was longer than usual in this case because eugenics “granted legitimacy, through nothing less than science itself, to peoples’ fears and prejudices” and had the endorsement of the U. S. Supreme Court in the *Buck v Bell* case. Hansen and King suggested that these fears did not disappear because geneticists developed more sophisticated explanations of heredity’s complexity or because new techniques in psychiatry inspired therapeutic optimism. Instead, they argued, “the more sophisticated and nuanced the arguments became, the less likely they were to filter out of the academy.” From the 1930s to the 1960s, lay people worked with assumptions that were considered disproven by scientists.⁷

Biennial Reports for 1952 and 1954 for the Training School are unavailable.⁸ There were 164 sterilizations performed between 1951 and 1960, though not formally reported to the Legislature. Written by the Public Welfare Commission, the 1956 Biennial Report of the Training School addressed personnel, public relations activities, and the Social Service Department. The school added “competent personnel” due to “increased salaries and more favorable working conditions.”⁹ The Commission explained selective sterilization fell under the purview of the Social Service Department and supervision of the Superintendent, describing how “Each

⁷ Hansen and King, *Sterilized by the State*, 165.

⁸ Ken Williams at the Utah State Archives believes this could be because the reports simply were not submitted during those years due to administration transition.

⁹ *Thirteenth Biennial Report*, 1956, 6.

candidate...is carefully chosen on the basis of what is in the best interest of the child and secondly for the betterment of society. However, we must never forget that this program looks first to the overall long range welfare of the child and has no element of punishment connected with it.”¹⁰ The last mention of sterilization is in the 1958 Biennial Report. The Commission reported, “Since the training school has been operating 100 students have been placed back into society as self-supporting citizens who are able to make a social adjustment and are able to be useful. Of this 1100, 728 have been sterilized to prevent reproduction of more mental defectives.”¹¹

There were no sterilizations performed between 1961 and 1963, which could be explained by both a 1961 amendment to the sterilization law and a superintendent transition in 1962. There were 27 sterilizations in 1964 and then a hiatus occurred until the 42 procedures between 1971 and 1974 when the program officially came to a halt. However, Mark K. Allen, who served as assistant superintendent under Ramsey from 1932 to 1946, kept the program active throughout those years following Ramsey’s tenure. Allen, who earned a PhD in Psychology, continued advocating for sterilization as an administrator of the Training School throughout the 1960s.

The amendments to the sterilization law were two-fold. First, legislators altered the language used to describe the individual: The terms “idiot,” “imbecile,” and “feeble-minded,” changed to “mentally deficient.” Second, the amended law sought cause for sterilization under the terms that the person was “incurable” and

¹⁰ *Thirteenth Biennial Report*, 1956, 9.

¹¹ *Fourteenth Biennial Report*, 1958, 141.

“unlikely to perform properly the functions of parenthood.”¹² According to Hansen and King, the support for sterilization after World War II was “re-anchoring” in new ideas. Pro-sterilization organizations active in the United States, many of which Mark Allen actively corresponded with, including the Human Betterment Foundation, Birthright, Inc., and the Association for Voluntary Sterilization reframed their argument in terms of the right of the unborn child to proper parents, population growth management, and prevention of welfare abuses.¹³ In 1945, Birthright, Inc., for example, launched a campaign to “foster, by educational means, a nationwide program of sterilization,” writing directly to superintendents of institutions for insane and “feebleminded” people across the United States.¹⁴

Dr. Allen responded to an inquiry from the American Psychological Association in 1962 in a letter where he wrote, “Utah has a sterilization law which has been implemented rather vigorously from time to time since 1934. Approximately 800 mental defectives have been sexually sterilized or authorized for the operation,” demonstrating the loyalty Dr. Allen felt towards eugenic sterilization. He addressed the evolution of Utah’s sterilization statute in a report entitled “Legal Provisions for the Mentally Retarded and Training School Procedures.” He explained the initial, “permissive” legislation passed in 1929 (sec 64-10) allowed for the sterilization of intellectually disabled persons who “were thought likely to transmit their defects biologically.” He identified the 1961 amendment as changing the basis for decision from heredity to “probable

¹² Utah Code Annotated L. 1961, ch. 155.

¹³ Hansen and King, *Sterilized by the State*, 25.

¹⁴ Hansen and King, *Sterilized by the State*, 69.

permanent incompetence to perform the functions of parenthood,” effectively articulating the right of the unborn child to proper parenting.¹⁵

Dr. Allen drafted a document entitled “What the Utah State Training School Does,” in which he differentiated the evolution of the care of the “feeble-minded” and of the insane. He began by explaining that before Christianity, “feeble-minded” children were treated the same as the criminal or insane, and with the religious advent came the responsibility to care for “the meek and the lowly.” The “feeble-minded” and insane sometimes “entertained the royalty,” made “babblings” considered “divine revelations,” or even called “children of the good God.” He explained that discernment between the “feeble-minded” and insane evidenced toward the end of the nineteenth century. He introduced the intelligence testing developed by Alfred Binet and discussed language specific to diagnosis.¹⁶ Allen explained that prior to the development of mental testing, only the lower categories of “feeble-mindedness” were recognized: the imbecile and the idiot. Binet conceived the distinction between mental deficiency and insanity, with the former describing degrees of intellectual development and the latter mental organization. Allen wrote,

For Binet, the feeble-minded are those born in intellectual poverty and who always remain poor; the insane are those born intellectually wealthy but who have become mentally bankrupt. Mental deficiency is a question of deviation from normal in intellectual ability. The condition has no sharp

¹⁵ Letter from Mark K. Allen to American Psychological Association dated 1962, and report entitled “Legal Provisions for the Mentally Retarded,” Both items located in the same folder. Mark K. Allen, The Mark K. Allen Papers UA 585 box 2 folder 8, L. Tom Perry Special Collections, Harold B. Lee Library, Brigham Young University, Provo, Utah.

¹⁶ Alfred Binet was inspired by Francis Galton’s attempts to record individual differences through standardized testing.
<http://www.britannica.com/biography/Alfred-Binet>

demarcation from those we call normal people. The difference between an idiot and a genius is more a question of degree than of quality.

He continued, "The problem of mental deficiency today is one of the gravest confronting our nation."

Dr. Allen asserted, "Utah's systematic effort to meet the problem of the mentally defective began with the establishment by legislative act of the Utah State Training School at American Fork in 1931. Compared with the country as a whole, Utah's provision for the proper care of these unfortunates is very favorable." He cited it was through institutionalization that individuals were prevented from having children, "which would probably simply add to the economic burden of our communities." Allen further contended, "Many of the homes of the mentally deficient afford the poorest kind of cultural advantages, and the instability of such homes is notorious. Thirty percent of the children brought to the Training School for examination preparatory to admission have been found to have broken homes." "The long-term program of an institution aims at curbing the reproduction of individuals who are not likely to be successful parents and who are likely to have defective children," explained Dr. Allen. He stated that sterilization procedures did not remove any organs or alter an individual's personality or sex life and explained, "Persons who might make a fair adjustment economically and socially, except for the danger of reproduction, are sterilized and permitted to return to society after period of socialization." He justified how a sterilization program has both "immediate and remote aims." Allen argued, "Certain selected mentally defective persons show promise that they might live in the community if their responsibilities

are not so great.” He further stipulated that those individuals were “almost sure to fail when burdened with a large family,” and “we consider it unkind to them to permit such failure.” He concluded, “The long view of the mentally deficient problem holds that only through striking at the biological source can future generations be spared a geometrically increasing burden of retarded persons who are likely to be an economic burden to the more mentally fit.”¹⁷

In 1963, Congress authorized funding for states to conduct studies on intellectual disabilities and to develop programs to meet related needs on a comprehensive basis. In 1964, Utah’s governor created the Advisory Committee on Mental Retardation, placing it under the oversight of the State Department of Health to administer the application of the federal grant. Regarding intellectual disabilities, the committee was charged with developing public awareness, determining the action needed and resources available in the state, coordinating state and local activities in prevention, treatment, and amelioration, and to develop a comprehensive and coordinated plan to address these issues. Dr. Mark K. Allen served on this committee and co-wrote the comprehensive plan for intellectual disability in Utah that was the result of the committee’s findings.¹⁸

The multi-disciplinary team assembled collectively felt the “immensity and severity” of the “mental retardation problem” in Utah as well as a sense of hope that a program of action would be developed to meet the demands of this long-

¹⁷ Mark K. Allen, Mark K Allen Papers MSS 2031 box 7, “What Utah State Training School Does,” L. Tom Perry Special Collections, Harold B. Lee Library, Brigham Young University, Provo, Utah.

¹⁸ The term “mental retardation” is used in this and the following paragraph because of its prevalent use in the report and exists in the title of the Commission.

overlooked responsibility. In an introductory letter to the plan, Chairman Alton Lund wrote on behalf of the committee,

It is our sincere hope that this plan will become the foundation for a state program, which will not only provide an adequate program for our present mentally retarded children, but will also set up a program that will eventually result in future children being born beyond the limits of this shadow.¹⁹

Displaying an attitude similar to Ramsey, the commission identified the financial burden associated with intellectual disability, estimating a \$2,000 institutional cost per year, totaling \$100,000 over an individual's lifetime. In addition to facilities and services, the report indicates an incalculable loss of adult manpower "since the majority of the mentally retarded are non-productive units of the state and national economy."²⁰ The Commission quoted President John F. Kennedy's position on "mental retardation" in their introduction:

We have conquered the atom, but we have not yet begun to make a major assault on the mysteries of the human mind. In spite of dramatic discoveries of medicine, the number of mentally retarded is increasing. Every year 126,000 children are born who will become mentally retarded. This tragic human waste which, of course, not only affects the child, but the family which is involved, can and must be stopped.

Kennedy further suggested, "We must seek out the causes and eradicate them."²¹

¹⁹ Alton Lund, Harold Pope, Mark K. Allen, Ph.D., Guy A Richards, M.D., et al. "Mental Retardation: A Comprehensive Plan for Utah: A Report of the Governor's Advisory Committee on Mental Retardation to the State Department of Health" (Salt Lake City, Utah: Utah State Department of Health, December 1965), xii. University of Utah Marriott Library General Collection.

²⁰ Lund, et al, "A Comprehensive Plan for Utah," 8.

²¹ Lund, et al, "A Comprehensive Plan for Utah," 10.

The Commission described the sterilization program at the Utah State Training School, stating more than 700 individuals were sterilized over a period of thirty years. Acknowledging social, religious, and legal objections, the writers explained the overriding recognition of the danger to society in allowing the “retarded...to have offspring promiscuously.” They asserted an appropriate program for the intellectually disabled must not cease at the age of physical maturity, but continue through adulthood, claiming, “Over the years, our experience bears out the fact that many are capable of a happy but limited kind of marriage.” They characterized alternatives to a sterilization program as “ominous,” citing either lifelong institutionalization or the deprivation of life-affirming activities such as marriage as reasons. Because they were operating under the assumption that the intellectually disabled would produce intellectually disabled children, the authors argued that in addition to creating a further financial burden for the state, having a child would be a complication such that would negate a “happy” adjustment following institutionalization.²²

These objections came from longstanding critics who assailed that not only were methods for diagnosing intellectual disabilities inadequate, but the inheritability of such diagnoses remained unproven.²³ Without reliable indicators for competent parenthood, a correlation could not be found between sub-normal IQs and inadequacy as a parent. Ninety percent of those with intellectual disabilities were considered “only mildly retarded and educable,” may have normal children,

²² Lund, et al, “A Comprehensive Plan for Utah,” 44.

²³ Dodge, “Sterilization, Retardation, and Parental Authority,” 404, Edwin Black asserted that by 1929 recantations from scientists were relegated to obscure medical journals, *War Against the Weak*, 85.

and function as adequate parents, especially after education and training to that end. One judge declared, "It is a matter of common knowledge that many married men or women continue in a satisfactory marital status although they may not possess high grade mentality or be successful in the conduct of business ventures."²⁴ In response to the argument that the state was justified in preventing the births of children to unfit parents, the sentiment growing among critics of compulsory sterilization was that procreation was a fundamental human right that should not be infringed by the state, either by prohibiting voluntary or compelling involuntary sterilization.²⁵

While the Commission stated the USTS "can carry out a sterilization program" at its present status, they further noted, "In Utah, there is no illusion that such a program will be a solution to the mental retardation problem." Defending the selection process and civil rights protection outlined in the state's sterilization statute and explained in Eleanor Skeen's thesis, the Commission specified individuals could only be sterilized "on the basis of probable incompetence to carry out the functions of parenthood." They explained, "This is a preventative measure which aims at both elimination of any hereditary biological defects, and prevention of the propagation of cultural impoverishment, recently recognized as a primary factor in the largest single clinical category of mental retardation."²⁶

²⁴ Dodge, "Sterilization, Retardation, and Parental Authority," 401.

²⁵ Dodge, "Sterilization, Retardation, and Parental Authority," 383.

²⁶ Lund, et al, "A Comprehensive Plan for Utah," 45; Reilly identified the catalyst for the "fitness for parenthood" requirement that began replacing the eugenics defense present in most states' legislation in the 1950s. In April 1943, Birthright, Inc., a nonprofit corporation with an professed purpose to "devote itself primarily to a program of selective sterilization for those whose parenthood would violate The

It is difficult to determine exactly why sterilization did not continue consistently throughout the 1960s, especially with such a strong recommendation from the state's advisory committee. Discussion of sterilization disappears at this point from the public record. Conflicting internal reports cite either 1973 or 1974 as the final year sterilizations occurred under the authority of the Utah State Training School, and no indication as to whether it was in response to a 1974 federal moratorium on the procedures done in institutions that received federal funding until informed consent clauses could be added. It is also difficult to determine the impact on the persons who were sterilized without their knowledge or consent, especially given the scope of this paper and federal privacy laws. Some insight must be gleaned from graduate and doctoral studies done on the attitudes of sterilized patients, their parents, and institutional caregivers.

An article titled "Attitudes of Parents of Retarded Children Toward Voluntary Sterilization" appeared in *Eugenics Quarterly* in 1967. The researchers found that 60% of parents surveyed approved of sterilization and the majority of those who disapproved believed that sterilization was synonymous with castration. This led the researchers to strongly recommend educational counseling for parents so that they would better understand the scientific, legal, and moral aspects of sterilization. The researchers determined that the level of parental approval suggested that

Child's Bill of Rights." The White House Conference on Child Health and Protection drafted this bill of rights in 1930.

parental attitudes were not responsible for the national decline in the number of procedures performed each year.²⁷

In 1971, Larry Edward Clark, Terry Kent Jensen, Charles Paul Lambert, and Yvonne H. Searle wrote a group social work thesis entitled "Parental Opinions Regarding Protective Services for the Mentally Retarded in Utah." The purpose of the paper was to provide initial research in areas related to the intellectually disabled including guardianship, marriage, sterilization, and the quality of care perceived by parents of residents of the Utah State Training School. The authors attempted to "elicit and analyze attitudes and opinions" on the topic of sterilization from parents of residents at the Training School.²⁸ They concluded, "Parents were not unified in their answers regarding sexual sterilization for their mentally retarded child, but gave differing and varied answers and comments because of the highly individualized nature of this subject in its application." The only quantitative data provided on this particular matter was the following statement: "There was a 19.04% who favored sterilization in the case of marriage, and 30.95% who favored it, regardless of marriage or not."²⁹ The authors concluded, "It is suggested that the decision to sterilize a mentally retarded person remain a highly individualized matter, since there are a myriad of differing attitudes, feelings beliefs, and opinions held by the families of these persons."³⁰

²⁷ Medora S. Bass, "Attitudes of Parents of Retarded Children Toward Voluntary Sterilization." *Eugenics Quarterly* 14 (March 1967), 52-3.

²⁸ Larry Edward Clark, Terry Kent Jensen, Charles Paul Lambert, and Yvonne H. Searle, "Parental Opinions Regarding Protective Services for the Mentally Retarded in Utah" (Salt Lake City: University of Utah Master of Social Work Thesis, 1971), 71.

²⁹ Clark et al, "Parental Opinions," 78.

³⁰ Clark et al, "Parental Opinions," 79.

In 1973, Paul Murland Ricks wrote his master's thesis to determine the attitudes of training school personnel towards the need for and effectiveness of sterilization practices for the "mentally retarded" in Utah. While the majority of the staff respondents felt society had the right to prevent procreation among the disabled, they also felt the rights of the disabled should be protected through legal statutes governing the implementation of sterilization. Consensus also revealed that the decision to sterilize should be individualized to each person's situation, parental desires should be considered, and sterilization should be expanded to include more residents. The need for the continued practice was unanimously recognized by the staff surveyed. The respondents felt that the intellectually disabled were not generally "fit" for parenthood but that should not be the only consideration in recommending sterilization. Personnel at the school did not feel there was a problem with illegitimate pregnancies at the school, nor did they feel oral contraceptives or contraceptive devices were acceptable alternatives to sterilization.³¹

Ricks identified "changes in scientific knowledge" as causing the 1961 amendments to Utah's sterilization law, including the development of oral contraceptives as an alternative and the "fitness for parenthood" argument.³² He cited Dr. Vernon Houston, USTS superintendent in 1957, who stated, "Our thinking on mental retardation is in a stage of transition...Of this 1100 have been placed, 728

³¹ Paul Murland Ricks, "Attitudes of Administrative and Professional staff Personnel at the Utah State Training School Towards Sterilization of the Mentally Retarded" (MSW Thesis, University of Utah, 1973), x, xi.

³² Ricks, "Attitudes of Administrative," 5.

have been sterilized to prevent reproduction of more mental defectives.”³³ Ricks argued that Utah’s “era of hereditary sterilization” ended in 1961 because the state was unable to prove the hereditary nature of intellectual disability. The amended 1961 law deleted hereditary clause and was changed to “And that the person or inmate with any of these disorders is, in the opinion of the expert witness, probably incurable and unlikely to be able to perform properly the functions of parenthood.”³⁴

The first hearing following the 1961 amendment was held on April 10, 1964. Dr. Guy S. Richards, USTS Superintendent, testified the hearings disregarded heredity as a determining factor while Dr. Mark Allen, USTS psychologist, cited immediate and future social benefits of sterilization. Specifically, he stated that future benefits would come from reducing the responsibilities and problems that would result if the disabled were to marry later. The immediate benefits included protecting the individual and society from the risk of an illegitimate pregnancy, a risk he considered greater among the intellectually disabled. Dr. Allen further clarified the benefits of sterilizing the disabled based on parental unfitness by stating, “We are talking about the economic capacity of the person to support a family, the ability to give proper guidance, and upbringing to children.”³⁵ Ricks wrote that while 27 sterilizations were completed in 1964, there were none until

³³ Ricks, “Attitudes of Administrative,” 16.

³⁴ Ricks, “Attitudes of Administrative,” 17.

³⁵ Ricks, “Attitudes of Administrative,” 18.

1971.³⁶ Ricks stated Superintendent Paul Sagers suspended sterilizations during his tenure between 1968 until 1971.³⁷

Ricks identified the religious climate in Utah as contributing to the limited practice of sterilization in Utah, but he did not explain that connection. He identified the confusion with respect to the rights of society justifying the “preemption of the rights of the retarded.” A majority of the staff survey respondents indicated support of governmental interference into the procreative rights of the intellectually disabled. A larger majority did not think compulsory sterilization of the disabled was an “unreasonable or arbitrary deprivation of liberty,” especially true when the person was seen as unable to exercise the rights, responsibilities, and privileges of society. Respondents agreed unanimously that the disabled should have the right to marry following sterilization.³⁸ A majority of respondents identified an adequate basis to justify involuntary sterilization laws for the intellectually disabled and favored expansion of the sterilization practices at the school. It was unanimous that there was a need to continue to the practice in Utah and that the need was not greater for one biological sex over the other.³⁹

Gary Nakao, a sociologist graduate student wrote his dissertation entitled “Sterilization and the Mentally Retarded” in 1974. He found that the majority of the respondents both understood the procedure and had no regrets but had initially

³⁶ Ricks, “Attitudes of Administrative,” 17.

³⁷ Ricks, “Attitudes of Administrative,” 19.

³⁸ Ricks, “Attitudes of Administrative,” 66.

³⁹ Ricks “Attitudes of Administrative,” 67.

expressed fear of having an operation.⁴⁰ The small number of those rejecting the procedure did so because they desired to have children.⁴¹ All parent respondents supported the sterilization of their disabled children.⁴² Nakao recommended six specific factors to be included in a counseling program directed at individuals selected for sterilization: the capability of an individual to understand the procedure and implications of sterilization; the influence of significant others; the developmental opportunities afforded the individual; their attitude toward parenting; the amount of time elapsed since the procedure; and mental health counseling specific to the sterilization.⁴³

Nakao interviewed Mark K. Allen, who began his association with the school in 1931. At the time of this dissertation, Dr. Allen was the psychologist of record, conducting the patient assessments for admissions and sterilization recommendations. Dr. Allen shared his conclusions based on the data collected by Nakao. It was his opinion that the residents understood both the purpose and reason for the procedure. The exceptions he cited (those he felt did not possess a cognitive understanding of the procedure) had extremely poor communication skills, and the procedure was for hygienic purposes, i.e. menses management. It was his supposition that initial reluctance to consent stemmed more from a general fear of surgery rather than anxiety over the purpose of a specific procedure. He claimed that most residents were glad for the operation as they saw it as increasing their

⁴⁰ Gary Nakao, "Sterilization and the Mentally Retarded," (PhD dissertation, University of Utah, 1974), 62, 64.

⁴¹ Nakao, "Sterilization and the Mentally Retarded," 84, 92.

⁴² Nakao, "Sterilization and the Mentally Retarded," 102.

⁴³ Nakao, "Sterilization and the Mentally Retarded," 117.

chances for marriage and provided sexual freedom without fear of pregnancy. He stated that personally he knew of very few individuals who regretted the procedure, and those individuals previously expressed a desire to have children. In his experience, it was individual counseling and the passage of time that mitigated any initial disappointment.

Dr. Allen discussed the influence of primary caregivers in the decision-making process of the “retardate,” whom he viewed as “dependent and suggestible,” “not critical in their judgments,” and “often trusting of decisions made for them.” He stated this was consistent with the idea that they were dependent on others for the development of attitudes.⁴⁴ Dr. Allen addressed the issue of stigma, explaining how the individuals who reside at the school felt less stigma than those in the community. The resident who was discharged following the procedure, returned home to view having babies “as part of the picture of ‘normal,’” consequently developing a feeling of stigma due to their inability to have children.⁴⁵

While Utah eventually followed suit in terminating its compulsory sterilization program, a concrete explanation is elusive. Solidified in state law was the motivation behind opening the school, as were the sterilizations that transpired under Dr. Ramsey’s tenure, contrary to historians argument that procedures decreased after the war. While national trends signaled the impending doom of eugenics, Utah continued to desire a continuation. Further research is necessary to determine exactly how the human rights movement affected Utah, eventually improving the rights of the disabled.

⁴⁴ Nakao, “Sterilization and the Mentally Retarded,” 40.

⁴⁵ Nakao, “Sterilization and the Mentally Retarded,” 41.

CONCLUSION

Utah's history of sterilization followed the same general trajectory as other states. An institution to house the intellectually disabled opened with the necessary approval of the state legislature after tens of thousands of citizen signatures accumulated supporting the endeavor. The legislature had already endorsed compulsory sterilization and the first superintendent of the Utah State Training School enthusiastically endorsed its application. The passing of decades saw an ideological shift in eugenics as the justification for sterilization evolved from preventing the birth of disabled individuals to protecting the unborn child from disabled parents.

This paper contends that while Utah was similar to other states in its use of compulsory sterilization, the motivations for doing so may have differed due to the influence of Mormon culture. Before Gregor Mendel began his pea plant experiments or Charles Darwin published *On the Origin of Species*, Brigham Young colonized a vast basin, initially necessitating plural marriage to bring forth a perfect human race in his present-day Zion. While polygamy was outlawed, the pulpit message to "replenish and populate the earth" remained. Amy Lyman's father was part of the initial migration into Utah and held as a confidante to Brigham Young. Mark Allen's mother had served on the Relief Society Board with Amy Lyman, observing his growing-up years and later working with him at the Utah State Training School. Amy may have been motivated to pursue eugenic goals in the Training School as an extension of the belief of her church that only the "fittest" in the community should be allowed to reproduce. Finding Dr. Herbert Ramsey, a

superintendent with equivalent goals, allowed a sterilization program to proceed for the duration of his tenure. Mark Allen, having been at the school since it opened, continued to keep a pulse in the program as support dwindled nationally. The pattern of compulsory sterilization in Utah did not follow the traditional race, class, and gender arguments introduced by other scholars, but the ideas about “purity” that permeated discussions on procreation may have motivated eugenics in Utah. The desire to create and maintain a perfect race existed in Utah as it did nationally and globally.

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