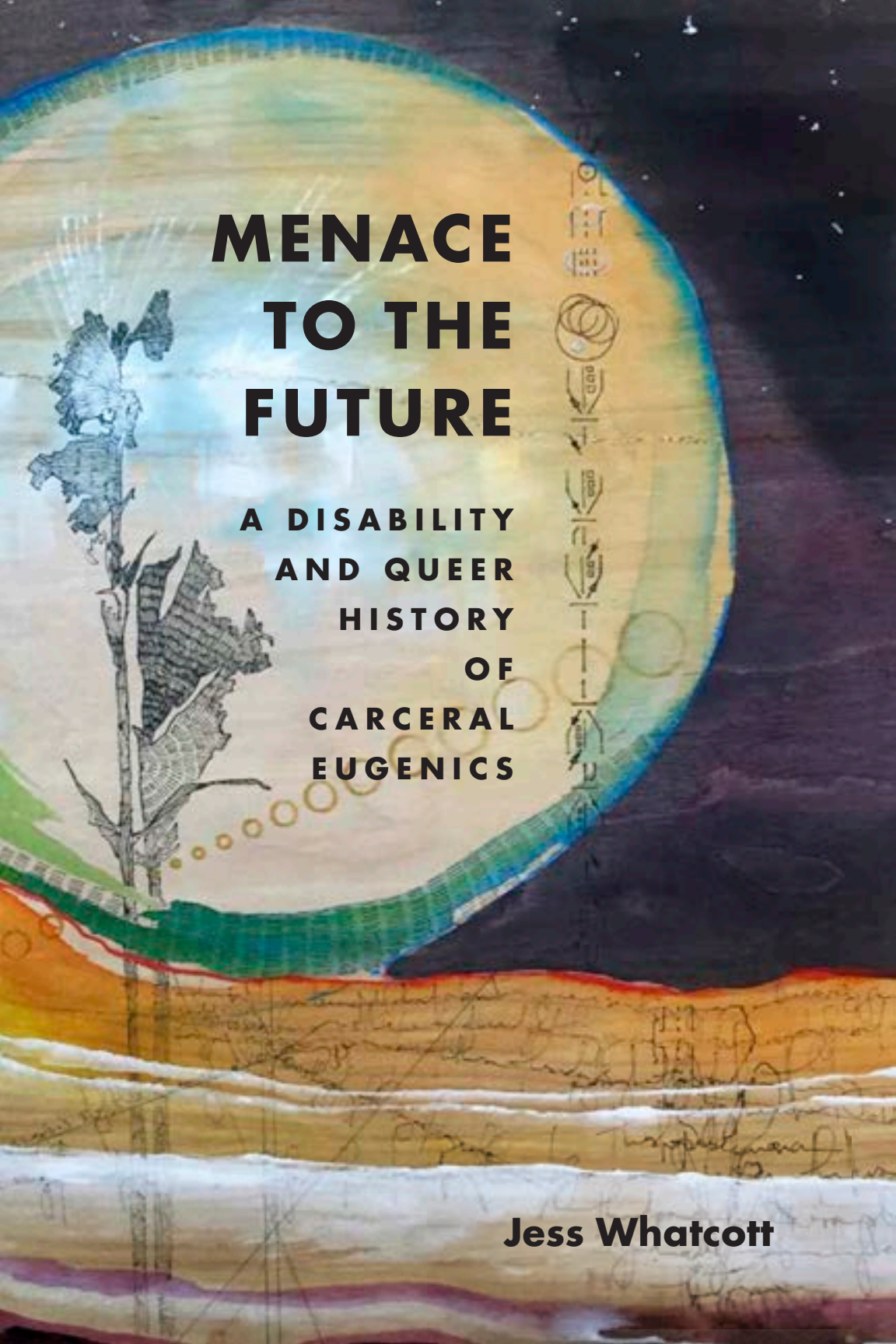
MENACE TO THE FUTURE
A DISABILITY AND QUEER HISTORY OF CARCERAL EUGENICS
Jess Whatcott

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Menace to the Future

A Disability and Queer History of Carceral Eugenics

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CONTENTS

ABBREVIATIONS

AAC	augmentative and alternative communication
CDCR	California Department of Corrections and Rehabilitation
CHCF	California Health Care Facility
CIW	California Institute for Women
CMF	California Medical Facility
CRC	California Rehabilitation Center
COVID-19	coronavirus disease 2019
CURB	Californians United for a Responsible Budget
CYA	California Youth Authority
DJJ	Department of Juvenile Justice
HIV/AIDS	human immunodeficiency virus/acquired immunodeficiency syndrome
ICE	United States Office of Immigration and Customs Enforcement
IFW	Industrial Farm for Women
IQ	Intelligence Quotient
I/DD	intellectually and developmentally disabled person

LPS Act	Lanterman-Petris-Short Act of 1967 (California)
OMDC	Otay Mesa Detention Center
PPE	personal protective equipment
PSAP	Disability Rights California's Peer Self-Advocacy Program
SP	Southern Pacific Railroad
STI	sexually transmitted infection

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PROLOGUE

Detention Is Eugenics

I first whispered the words "detention is eugenics" in the fall of 2020. In the United States, stories about immigration detention had exploded in news media. Many were outraged by the detention of children and families and the policy of separating parents from children. Yet another example of reproductive injustice took place at Irwin County Detention Center in the US state of Georgia. According to testimony collected by Project South, detained people had undergone unnecessary surgeries at the direction of a private doctor contracted to provide gynecological health care.[1] The sterilizations brought renewed attention to the history of state-sponsored eugenics in the United States.

While horrified by the sterilizations, I was equally disturbed by what happened to the survivors after their surgeries and after public attention to their plight diminished; many were deported out of the United States while others remained in detention for indefinite periods of time, fighting against deportation. The detention and deportation machine is just one of the ways that asylum seekers and criminalized undocumented people face structural violence in the United States every day. Migrant detention centers are sites of pervasive medical neglect, under conditions that cause injury, illness, mental crises, and exposure to contagious diseases.[2] Incarcerated people are more likely to have untreated underlying health conditions and to experience accelerated aging that leads to weaker immune systems.[3] These

experiences have long-term effects on reproduction opportunities and parental relationships and also lead to premature death. Some detained people are fighting deportation to places where they have never lived as adults or where they have fled violence, economic insecurity, or climate chaos. At worst, deportation can mean a death sentence for some migrants, and at best it is a massive disruption to partnerships, parent-child relationships, and other forms of life-giving care. Even without surgeries that cause sterilization, detention curtails reproductive autonomy by impacting migrants' ability to parent when, where, and how they choose, as well as disrupting other life-giving-care relationships. Detention in privately run facilities contracted by the US office of Immigration and Customs Enforcement (ICE) is one of the primary ways that the government is involved in the reproductive control of migrants. My realization that reproductive injustice continues even if sterilization surgeries are halted helped me discern the core argument of this book: that detention itself is eugenics. By this I mean that incarceration, in all its forms, continues to function as eugenics, just as policies of institutionalization did in the early twentieth century.

Just months prior to the start of the pandemic, I moved to occupied Kumeyaay territory of the US-Mexico borderlands, also known as the San Diego-Tijuana metro region. Seeking to get involved in prisoner solidarity work as I had done in Northern California, I joined a grassroots organization that wrote letters to people confined in Otay Mesa Detention Center (OMDC) about twenty-five miles southeast of the city of San Diego. I learned that OMDC is run by a private corporation called CoreCivic that contracts with two agencies of the US federal government—ICE and the US Marshals Service—to detain a variety of people, including those seeking asylum; long-term residents of the United States undergoing deportation proceedings; and immigrants with a variety of statuses who are facing federal criminal charges, including but not limited to unauthorized reentry into the United States.

I also learned that facilities like OMDC are relatively new forms of state confinement in the United States. They were first invented in the 1980s to detain migrants from Haiti, Cuba, and Central America, and by 1994 immigrant detention centers in the United States held approximately 6,700 people per day.[4] However, it was two pieces of federal legislation passed in 1996—the Anti-Effective Death Penalty Act and the Illegal Immigration Reform and Immigrant Responsibility Act—that dramatically expanded the categories for which detention of an immigrant was mandatory. These policies incentivized private detention companies like

Corrections Corporation of America to expand from the criminal legal system into contracts to detain criminalized migrants. The company has operated a private detention center in the San Diego border region almost continuously since 1997. By 2019, Corrections Corporation of America had become CoreCivic, and the OMDC facility was part of the national detention of more than fifty thousand people daily by ICE.

The current five-year contract to operate OMDC was signed in 2019 in a midnight deal, an attempt to outrun a California state law outlawing private prisons (since overturned by courts). The contract ensures that a minimum of six hundred beds will be paid to CoreCivic by the federal government at least through 2024 (and potentially ten years beyond that), and for every person detained in excess of six hundred, CoreCivic earns $138.29 per day.[5] Such contracts create an incentive for the two migrant policing agencies (ICE and US Border Patrol) to detain asylum seekers and to aggressively enforce laws against undocumented immigrants. ICE paid CoreCivic $54 million for the fiscal year of 2019 at OMDC alone.[6]

Otay Mesa Detention Center is one of only a handful of facilities in the nation that also holds prisoners of the US Marshals Service, a shadowy federal law enforcement agency that contracts with county, state, and federal agencies to detain prisoners. As local organizers in San Diego, we know very little about this contract. Language appearing in the 2019 ICE contract with CoreCivic indicates that at OMDC, "a minimum of 596 beds will be available to the US Marshals. Of these 96 will be designed for females." What we have heard from individuals being held in US Marshals' custody is that they face a variety of immigration-related charges, including illegal reentry into the United States following a prior deportation.

The stakes of theorizing detention as a form of ongoing state-sponsored eugenics are made clear through an examination of the impact of the COVID-19 pandemic on people in migrant detention. The novel coronavirus had deadly consequences for people in congregate living settings such as nursing homes, and nowhere was this more acute than in carceral settings such as jails, prisons, detention centers, and state hospitals. I had only been writing to people detained at OMDC for a few weeks when the state of California shut down all but essential services to stop the spread of the novel coronavirus. We scrambled to move our letter-writing operations virtually and tried not to panic. From my years of human rights monitoring in Northern California prisons and researching this book, I had witnessed rampant medical neglect, medical abuse, and exposure to premature aging and death inside of institutions. I worried that the disease that came to be

known as COVID-19 would kill many loved ones and comrades who were locked up. Indeed, as of July 2023, the COVID Prison Project estimates that 2,933 incarcerated people in the United States have died from complications related to the novel coronavirus.[7] This includes people in state custody, Federal Bureau of Prisons custody, and eleven people in the custody of ICE. This number does not include people confined to other forced congregate living settings; for example, seventy-eight people died while testing positive for COVID-19 in California state hospitals by July 2023.[8]

The first person to die in ICE custody due to COVID-19 on May 6, 2020, was a fifty-seven-year-old man named Carlos Ernesto Escobar Mejia. Escobar Mejia lived in the United States in the Los Angeles area for forty years, having fled the brutal war in El Salvador in 1980 with his sisters.[9] He was unfortunately the only member of his family who never received legal status in the United States. Escobar Mejia was detained in Los Angeles in January 2020 and sent to OMDC to await deportation proceedings back to a country that he had not lived in his entire adult life. On March 22, the organization that I volunteered with received a letter regarding the ill health of Escobar Mejia from another person in the same housing unit. The letter pleaded with us to add Carlos to the list of people for whom local advocates were working to gain humanitarian release on the grounds that they were medically vulnerable to COVID-19. Under pressure, ICE officials conducted two reviews of medically vulnerable detainees in late March and early April and from that review knew that Escobar Mejia had underlying health conditions, including hypertension and diabetes, that put him at risk of severe COVID-19. In addition to these chronic illnesses, Escobar Mejia was also disabled in another way: he had recently undergone a surgery to remove his right foot and used a wheelchair the entire length of his detention. A judge ruled against Escobar Mejia's release on April 15, 2020, citing an arrest that occurred in the 1990s, which, according to the judge's interpretation, made Escobar Mejia a safety risk. At the time, OMDC had the highest number of confirmed cases of COVID-19 within an ICE-contracted facility in the nation—and the official number was probably a vast undercount given the shortage of testing kits at the time and practices of only testing the most seriously ill. It was probably inevitable that Escobar Mejia, stuck inside OMDC, would contract COVID-19. He was hospitalized on April 24, placed on a ventilator three days later, and, like many others, died alone in a hospital during the early stages of the novel coronavirus pandemic.

Escobar Mejia's death was not surprising given the history of medical neglect in detention centers nationwide, but it was still a shock. Even more

so because the same week that we learned of Escobar Mejia's death, a lawsuit filed by the American Civil Liberties Union of San Diego and Imperial Counties was successful in forcing ICE to release ninety-one medically vulnerable people from OMDC. Advocates scrambled to provide post-release support in the form of transportation, food, cell phones, and clean clothes.

Meanwhile, we continued to be alarmed about our *compas* who were still inside.[10] On May 11, 2020, I summarized what we were hearing from detained people, including:

- a lack of adequate cleaning supplies (not just hand soap was needed but also disinfectant to spray down surfaces);
- a lack of access to adequate masks and gloves (two masks per month, three gloves shared among a pod);
- that CoreCivic predicated access to masks and gloves on a signature on a form intended to release CoreCivic from liability of detainees getting sick, and the form was written in English only;
- retaliation for refusal to sign release-of-liability forms (April 10) and for making masks from T-shirts (ICE disputed use of pepper spray on detainees for making masks but confirmed removing women who refused to sign the liability form from a pod);
- movement of people within the facility, among pods, without testing or quarantining;
- testing limited to those with only the most severe symptoms (i.e., fever over 104 degrees); and
- inadequate quarantining of people who tested positive for COVID-19 (awaiting test results while still in the pod; returning to their pod after only seven days).

These refusals to protect detained migrants from the virus were later substantiated in multiple reports from local and national organizations.[11]

The unnecessary exposure of people in migrant detention to a highly contagious and deadly respiratory virus is only the latest manifestation of a long-standing practice of what I name in this book as carceral eugenics. During the COVID-19 pandemic, the ways that detention disables migrants and exposes them to premature death became apparent. However, there does not need to be a pandemic for migrant detention centers to

function as eugenics. Detention is part of a longer history of state confinement functioning to diminish the life opportunities of populations deemed undesirable. State confinement limits bodily autonomy, cuts people off from parental and other life-affirming relationships, and risks their early death. In this book I historicize the function of detention as a form of state-sponsored eugenics by telling the story of state hospitals, institutions for disability confinement, and reformatories in early twentieth-century California. This history shows that the deadly effects of migrant detention in the twenty-first century are not new problems or the aberration of a xenophobic US presidency. Instead, migrant detention continues a more than one-hundred-year legacy of carceral eugenics.

Introduction

A Disability and Queer History of Carceral Eugenics

Detention is eugenics. The seed for this theory was planted during a conversation with a friend who, in 2011, was part of a team collecting testimony from people in women's prisons operated by the California Department of Corrections and Rehabilitation (CDCR).[1] The story that was eventually published focused on those imprisoned people who had received tubal ligations, an irreversible form of surgery that blocks the fallopian tubes to prevent pregnancy, without giving proper consent.[2] However, testimony given by imprisoned people recounted a wider variety of abuses that diminished reproductive autonomy, including pervasive medical neglect that left conditions untreated until surgeries such as hysterectomies were required.[3] At the time we talked about this testimony, my friend Sam remarked

to me that the team believed they were witnessing "modern day eugenics" in California prisons and that history was repeating itself. I wanted to know what eugenics was and wondered: What did Sam mean that the state of California had done this before?

The lack of familiarity I had with the term *eugenics* in 2011 is striking given just how popular the movement was one hundred years ago. Although the concept of human breeding can be traced far back in Western thought, the word *eugenics* was coined by a British statistician named Francis Galton at the end of the nineteenth century. Insisting that social and behavioral traits were biologically inherited by humans from their parents and previous generations, Galton called for a socially directed process of human evolution to amplify desirable qualities within humanity. Those who took up the philosophy of eugenics designed programs that manipulated human reproduction with the goal of correcting, curing, improving, purifying, and perfecting the heredity of the human race. Reformers in the United States and across the world called themselves eugenicists and advocated a range of programs that attempted to control the biological makeup of nations.[4] These programs included the promotion of reproduction among elite groups imagined to uplift the race, but also the suppression of reproduction by populations deemed "unfit" or whose heredity was imagined to threaten the health of society. The most well-known of these eugenics programs in the United States are the nonconsensual reproductive sterilizations that several states legislated in the early twentieth century.[5] California had one of the earliest state-sponsored eugenicist sterilization programs, passed in 1909, targeting people institutionalized in state hospitals, homes for the feebleminded, and state prisons.[6]

As I researched California's eugenics history, I was disturbed that the confinement of disability in state institutions was also motivated by eugenics. The segregation of disabled people was described by eugenicists in the early twentieth century as a strategy for controlling human reproduction. No wonder, then, that abolitionists in the present argue that incarceration is a form of reproductive injustice. Building on scholarship on the history of sterilization programs, this study focuses instead on the eugenics policy called segregation.[7] While the most common historical association with the term *segregation* references legal racial apartheid (such as in the US South), the eugenicist usage had a different but not altogether unrelated meaning. Segregation for eugenicist purposes was the long-term confinement in state institutions of classes of people whose heredity was deemed threatening to the body politic. The primary sites proposed for eugenicist

segregation were institutions for the confinement of disability, including psychiatric hospitals, homes for the feebleminded, and epileptic colonies. Institutions used for punishment and rehabilitation, such as industrial farms and prisons, were also indicated as sites for segregation. Eugenicists argued that segregation of the so-called feebleminded, mentally diseased, and criminal classes was only partially effective given that there were not enough institutions to contain everyone whose reproduction was a threat.[8] Nevertheless, the managers of state institutions adopted eugenics philosophy to varying degrees, assuming that what they called "custodial care" had a role to play in the project of controlling human reproduction.[9] Eugenics ideology ultimately justified the long-term warehousing of tens of thousands of disabled, mad, neurodivergent, queer, and racialized people in state institutions throughout the twentieth century. Although initially concentrated in institutions for disability confinement, state investment in detention shifted over time into the criminal legal system. County jails, state prisons, and immigrant detention centers have now become primary sites for controlling the reproduction of disabled, impoverished, and racialized communities.

Bringing together a variety of sites of detention, this book investigates the role that eugenics philosophy played in structuring confinement in the carceral state of California. Etymologically, the word *carceral* comes from Medieval Latin to describe a prison, jail, or enclosed space. Scholars use this term to describe how logics of control and confinement have become embedded in the operation of the modern state.[10] While most often applied to the practices of criminalization and the prison industrial complex, disability activists argue that the confinement of disability in institutions comes from the same carceral logic.[11] Liat Ben-Moshe proposes shifting from the term *prison industrial complex* to "carceral-industrial complex" to recognize the shared logics among institutions of confinement.[12] My contribution to carceral studies is to theorize how state confinement was shaped by the philosophy of eugenics in the early twentieth century. To do that, I examine the practice of segregation in early twentieth-century California to theorize what I call *carceral eugenics*. Carceral eugenics is a concept that analyzes how state confinement functions to control the reproduction and life chances of groups of people who have been deemed biologically undesirable. Reproductive control of individuals and groups through detention is legitimated in the name of solving broader social, economic, and political problems that are at least partially blamed on biological inheritance.

Why revisit the early twentieth-century history of eugenics segregation? My theorizing of carceral eugenics is practically oriented toward the movements for disability justice, carceral abolition, and reproductive justice. Disability justice advocates have long sought freedom for all disabled people who are confined against their will, whether in a large state institution or a privately run group home.[13] Motivated by the principles of disability justice as articulated by queer and trans disabled people of color, this book counters the regret that animates the discourse around deinstitutionalization and, instead, bolsters the claim that ongoing disability detention is harmful.[14] Additionally, I and my fellow carceral abolitionist organizers need more information about eugenics to counter historical narratives created by the state. These narratives present eugenics as only existing in the past, as part of some bygone era that has since been overcome or as worthy of attention only when it rises to the anachronistic level of medical abuse in the form of unnecessary tubal ligations. As carceral abolitionists, we can use historical evidence to insist that detention in the present is also eugenics. Further, to recognize the ways that carcerality and eugenics are intertwined strengthens coalitions among the movements for carceral abolition and reproductive justice. If one of the ways that eugenics operates is through detention, then carceral abolition must include an explicit analysis of how eugenicist desires to control reproduction continue to motivate confinement. At the same time, this book contributes to the argument that in order to create reproductive justice, we must abolish carceral logics and structures in all forms.

An Origin Story of Eugenics

How did the philosophy of eugenics come to undergird carceral social policy? Francis Galton coined the term *eugenics* in an 1883 book, wherein he liberally borrowed and mutated Charles Darwin's (his distant cousin) theory of evolution, arguing that human behavioral traits were biologically inherited from parents by offspring.[15] Debating the "competition between nature and nurture," Galton argued that it is biological heredity that determines a person's genius and greatness.[16] Of this process, Galton equated human heredity to dog breeding, implying that "mixed" genetic inheritance in humans created "a mongrel, nondescript type, because ancestral peculiarities are apt to crop out in the offspring."[17] Building on this belief in biologically based behavioral inheritance, Galton demanded direct social intervention into human evolution. He advocated for the breeding of

society's elites to increase the percent of the human population with desirable traits, through subtle methods such as incentivizing early marriage of the rich and talented. However, he also wrote about the need for purging humanity of poor "stock" by preventing the reproduction of human weakness, embodied by the so-called defective class. Although not the first to suggest both types of human breeding, Galton's contribution was to create a word—*eugenics*—that gave shorthand to the idea of improving the human race through mathematical and scientific methods. It was a useful word that gave momentum to ongoing fears of degradation of white civilization that plagued imperial and former slave economy states at the end of the nineteenth century. Eugenics organized into a single program multiple efforts to control the reproduction of undesirable members of the human race.

While Galton is credited with coining the term *eugenics*, similar philosophies and organized human breeding projects predate Galton by centuries. According to Dorothy Roberts, the largest ever human breeding project took place during the enslavement of people of African origin in the Americas from the seventeenth century through the nineteenth century.[18] Human breeding was especially heightened after the slave trade was made illegal in some countries while the practice of slavery allowed to continue. These policies perversely incentivized human breeding to perpetuate the population of people who inherited the condition of slavery in the Americas. Eugenics emerged following the outlawing of slavery in the Americas, and this context illustrates the precise danger of the idea of self-directed human evolution: eugenics promoted the reproduction of white elites while pathologizing, criminalizing, and illegalizing the biological inheritance of impoverished, racialized subjects. The philosophy revitalized colonial ideologies of racial purity, recreating Western gendered, racialized, and ableist hierarchies of human value. Drawing on Western philosophies such as Malthusianism, social Darwinism, and racial science, Galton named and revitalized the movement to naturalize social hierarchies by depicting entire classes and races of people as biologically inferior, a threat to the health of the body politic, and therefore legitimate targets of legal restrictions and social control.

Following Galton's coinage of the term, the name *eugenics* became popular among a growing middle class of professionals across the world. Intellectuals took up Galton's term at the turn of the twentieth century to articulate their focus; as the slogan of the Second International Congress of Eugenics proclaimed: "Eugenics is the self-direction of human

evolution."[19] While the fantasy of breeding a superior human has since been popularized in science fiction representations of clones and cyborgs, many state-sponsored eugenics programs in the twentieth century focused on excising human weaknesses—and the humans who embodied these weaknesses—from society's biological gene pool. The eugenicist fantasy of human perfection most notoriously authorized the genocide of millions of people under the Nazi Holocaust, wherein Jewish people, homosexuals, and disabled people were targeted for eradication in the name of purifying the so-called Aryan race.[20] The philosophy of eugenics also travelled globally from Europe to the Soviet Union, European colonies, former colonies (such as Australia), Latin America, and Asia.[21]

Eugenic ideas were widespread in the United States at the beginning of the twentieth century and adopted to some degree by people as diverse as President Theodore Roosevelt, the founder of Planned Parenthood Margaret Sanger, and social scientist W. E. B. Du Bois.[22] In California, eugenics theory was embraced by elite men such as David Starr Jordan, the first president of Stanford University and cofounder of the Sierra Club, and Charles Goethe, founder of what is now California State University, Sacramento.[23] Luther Burbank, a Santa Rosa–based horticulturist and agricultural scientist who invented hundreds of strains of fruits, vegetables (including the russet potato), flowers, and grains, espoused many eugenicist beliefs. Eugenics influenced social scientist and educator Lewis Terman, famous for adapting the Stanford-Binet intelligence test and using it to determine the educational placement of thousands of California children. Elite women in California also promoted eugenics, including Dr. Margaret H. Smyth who is credited with "perfecting" salpingectomy surgery for reproductive sterilization in her tenure as a physician and later superintendent of Stockton State Hospital.[24] A sibling to the East Coast's Cold Springs Harbor laboratory, California's eugenicist think tank called the Human Betterment Foundation was founded by Pasadena-based philanthropists Ezra Gosney and Paul Popenoe. Gosney funded Popenoe's study of the state's records on eugenics (to which he was given complete access, patient confidentiality be damned) and published the treatise *Sterilization for Human Betterment* in 1929.[25] This book was once a highly influential argument for eugenics. According to records left by Goethe, the book travelled as far as Germany and inspired intellectuals in Hitler's regime.[26]

Self-proclaimed eugenicists organized programs that they believed would protect the social order from ruin, save the race from degradation,

and form a more perfect nation. Eugenicists worked within municipal, state, and the federal governments in the United States to create programs intended to shape human evolution through social and physical interventions. In addition to state-sanctioned sterilization programs, policymakers lobbied for exclusionary immigration laws and aggressive immigrant deportation, enacted marriage restrictions and anti-miscegenation laws, promoted the exclusion of disabled and neurodivergent children from public schools, and argued for the segregation of adults and children in state institutions. In California alone, approximately twenty thousand people were sterilized between 1909 and the 1960s.[27] An untold number of disabled children were excluded from public education throughout the twentieth century. Countless others were divided from their families and exposed to premature death through restrictive immigration laws and the creation of the US Border Patrol.[28] Over forty-five thousand people died while confined to California state hospitals and other disability institutions between the 1880s and the 1960s, the subject of this book.[29] These and other disparate legacies have yet to be fully grappled with by a US public whose cultural, political, and economic systems have been indelibly shaped by the philosophy of eugenics.

Institutions as Reproductive Control

Feminist scholars have demonstrated the ways that Black, Indigenous, Puerto Rican, Chicana, and other people of color in the United States were systematically targeted for reproductive control throughout the twentieth century.[30] Eugenics contributed to these practices of control, including by justifying various state-sponsored sterilization programs. This history is one of the reasons that feminists of color theorized reproductive justice. Reproductive justice shifts the discourse away from choice, which connotes the ability to make decisions about one's body, especially the right to choose an abortion. Reproductive justice emphasizes both bodily autonomy and the conditions necessary to allow people to choose to give birth and to parent—conditions that were historically denied through programs like nonconsensual and forced sterilization.[31]

As a result of the reproductive justice framework, as well as scholarship on eugenics and the advocacy of scholars at the legislative level, more people are now aware of one of California's programs to control reproduction: the Asexualization Act first passed in 1909.[32] Between 1909 and 1964,

an estimated twenty thousand people were legally "asexualized," meaning they were reproductively sterilized, in California. However, scholarship also shows that sterilization was not the only reproductive control program undertaken by the state of California in the name of eugenics. Wendy Kline describes how another policy, called "segregation" by eugenicists, was used to control the reproduction of institutionalized people at the Sonoma State Home in Northern California.[33] Kline argues that segregation faded in importance for eugenicists as sterilization took over as the primary strategy promoted by organizations like the Human Betterment Foundation. While eugenicists increasingly promoted sterilization as a cheaper and more comprehensive strategy, the way that California's Asexualization Act was written required victims of sterilization to first be institutionalized. The result, according to Kline, is that eugenicists resorted to temporarily institutionalizing those they sought to sterilize, hinging release from detention on completed surgery.

While this is a startling revelation, I also draw attention to the thousands of people who were considered too disabled or mentally "defective" to parole, whether they were sterilized or not. One way to measure the scale of the impact of segregation comes from a 1928 report by the California Department of Institutions, which reviewed deaths among state hospital patients. Over twelve hundred patients are recorded as having died each year of 1927 and 1928. The department found that one-third of people who died had been institutionalized for over five years, 16 percent had been there for nine years or longer, and a shocking 6.5 percent had lived in the institution for twenty years or longer before their deaths. The vast majority of those who died while institutionalized—estimated to be at least forty-five thousand between the mid-1880s and the 1960s—were buried in unmarked, poorly marked, or mass graves, according to the California Memorial Project.[34] From this heartbreaking statistic, I make the case that medium- and long-term confinement in sex-segregated institutions was an effective reproductive control strategy and a form of reproductive injustice, even without sterilization surgery.

Reproductive justice advocates and abolitionist organizers have made a similar point about present-day incarceration in the criminal legal system. Indeed, I first learned to associate detention with eugenics from organizers who demand carceral abolition to end reproductive injustice. Specifically, my involvement with the prisoner solidarity organization Bar None from 2003 to 2011 connected me with people at the former human rights legal

clinic Justice Now, based in Oakland, California. As participants in Justice Now explained it:

> Women's prisons, with their consistent destruction of reproductive capacity, abysmal treatment of pregnant individuals, obstruction of abortion rights, and policing of gender, are themselves tools of reproductive oppression. . . . Our findings specifically focus on: (1) the overuse of often nonconsensual hysterectomies (i.e., surgical removal of the uterus) and oophorectomies (i.e., the surgical removal of one or both ovaries) within California's women's prisons; (2) poor reproductive health care that leads to infertility; (3) the imprisonment of people throughout their reproductive years, in part because of mandatory minimum sentences and three strikes laws; and (4) the specific destruction of reproductive capacity for transgender people.[35]

Even absent surgeries with the only purpose of sterilization, state confinement functionally exerts state control over reproduction, dictating when, where, and how incarcerated people can have and parent children.[36] As Justice Now points out, the disproportionate sentencing of Black, Indigenous, Latine, people of color, queer, trans, disabled, and poor people to jails and state prisons means that incarceration is disproportionately impacting the reproduction of these groups. I argue that the reproductive control enacted by the system of incarceration can be traced back in part to the early twentieth-century policy of segregation. Joining Justice Now, I also argue that reforming the prison system is inadequate to the goal of reproductive justice. As this book reinforces, systems of confinement were first invented in the name of humanitarian reform, and further reform only entrenches carceral systems. Reformism is unable to generate the political will to intervene unless there is egregious medical abuse in the form of nonconsensual sterilization surgery.[37] An anti-eugenics politics demands carceral abolition instead of reform. To create reproductive justice we must build a world without bars, cages, and borders.

In addition to interfering with the ability of people to have and parent children, incarceration and institutionalization cut people off from their parents, biological and chosen families, and other life-giving care networks. This could also be considered reproductive injustice by drawing on Marxist feminist conceptions of social reproduction. Social reproduction identifies how the system of capitalism is reproduced through the labor of

birthing the future workforce and of caring for those children, including teaching children the ideologies of capitalism that will make them docile workers.[38] (Resistance to capitalist social reproduction includes the birth strike and forms of motherwork that give people the tools to imagine different futures and organize themselves.) Disability writers, including Akemi Nishida and Leah Lakshmi Piepzna-Samarasinha, have "cripped" the concept of social reproduction, undermining ableist capitalist notions of independence and productivity by articulating forms of crip care work that empower disabled people not only to survive but to thrive.[39] Nishida and Piepzna-Samarasinha expand notions of care work beyond that which is given by parents to children, to include the care that is exchanged with aging, chronically ill, neurodivergent, and mad people, particularly care that takes place outside of the bounds of the capitalist heteropatriarchal nuclear family. While eugenics programs intervene in biological reproduction, carceral forms of eugenics also limit how institutionalized people can engage in the broader spectrum of social reproduction including care work. Eugenicist restrictions on social reproduction are a form of enclosure, constructing borders and boundaries between the collective and institutionalized people, cutting each off from each the vital resources necessary for liberatory social reproduction.

Disability institutionalization was and is a form of reproductive injustice deeply rooted in the philosophy of eugenics. Despite eugenicist concern about the cost of confining the entire defective class, the concepts of heredity and notions of danger attached to disabled bodies naturalized the practice of confinement for decades, with consequences that linger into the present. Long- and medium-term confinement in state psychiatric hospitals, institutions for intellectually and developmentally disabled (I/DD) people, epileptic colonies, and labor colonies was and is an effective way to control sexual contact as well as to deny other methods of conception. Institutionalization was and is part of the spectrum of strategies used to enforce ableist ideologies rooted in eugenics that treat disabled sexuality, reproduction, and parenting as undesirable. Due to these ideologies, the lack of bodily autonomy among disabled persons, especially during institutionalization, is unquestioned. Institutionalization denies detained people relationships with their children, biological and chosen families, and other life-giving and life-affirming community networks of care necessary for social reproduction. For these reasons, medium- and long-term institutionalization, far from being unfair only if there is sterilization surgery, deserves its own historicization as a form of reproductive injustice with roots in eugenics.

Institutions and the Carceral Industrial Complex

Scholars have detailed the carceral history of California from the garrisons built by Spanish colonizers, to the first state prison built on the rocky northern shore of the San Francisco Bay in 1852, to the emergence of some of the biggest jail and prison systems in the entire world.[40] Colonial governance in California has innovated many carceral technologies, from the Spanish mission system in the eighteenth century to the super-maximum prison of the 1990s. However, with exceptions such as Miroslava Chávez-García's *States of Delinquency*, in almost none of this history is there an explicit discussion of the impact of eugenics, nor are the histories of other related state institutions of confinement addressed.[41] The interrelated trajectories of California's institutions of disability confinement with jails and prisons require more historicization.

Kelly Lytle Hernández argues that California has been a settler state developed through the carceral laws, infrastructure, and logics that enact what she calls a "logic of elimination."[42] This logic, I argue, was perpetuated by eugenics and can also be found in segregation in institutions of disability confinement. The extension of the carceral system from the jail and prison system builds on the scholarship of Liat Ben-Moshe who argues that any analysis of the prison industrial complex is incomplete without including institutions of disability confinement.[43] Ben-Moshe, Allison Carey, and Chris Chapman contend that institutions of disability confinement are part of what Michel Foucault called the "carceral archipelago."[44] They explain that carceral logics cross the terrain from the criminal-legal into the medical-pathological, connecting diverse institutions in "what Foucault called a 'protective continuum,' ranging from the medical to the penal. . . . Differentiated institutions were created, to classify, to control and treat danger, and to safeguard the rest of the population from the dangerous individual."[45] Collectively, jails, prisons, and institutions (usually thought of in more humanitarian terms as sites of care and treatment) operate under shared carceral rationalizations. Disciplinary techniques travel back and forth across institutions of care and punitiveness, subjecting incarcerated people to both punitive practices of neglect and pathological investment as objects of treatment. This present study takes up Ben-Moshe's call to examine how pathologization and criminalization have been used concurrently to develop the carceral state.[46] Further, I take up Angela Y. Davis's point that these concurrent systems are gendered, so that "deviant men have been constructed as criminal, while deviant women have been constructed as

insane," resulting in the confinement of women in psychiatric and disability institutions at high rates.[47]

Richard Fox gives the history of California's institutions of disability confinement, focusing on San Francisco's system of civil commitment.[48] Importantly, Fox's book gestures toward institutions as part of the carceral logic of the state. As Bernard Harcourt suggests, studying institutions of disability confinement specifically as carceral technologies creates new timelines for the story of incarceration.[49] The roots of the modern day carceral system in California are often dated to the 1960s, when there was a backlash against civil rights, anti-capitalist, and anti-imperialist movements, as well as the economic gains of the working class.[50] Widening the scope of carceral analysis to include disability institutions, it is necessary to start this history earlier in time—namely, in the Progressive Era. Within this new carceral timeline, the influence of eugenics is unmistakable. Eugenics, I argue, was a pre-"law and order" philosophical justification for confinement, and progressivism was a political movement that fought to construct a carceral apparatus in California prior to the more well-known prison booms of the 1930s to the 1950s and the 1980s to the 1990s.

While California had at least one institution for disability confinement as early as 1851 (Stockton State Hospital), it and the others that followed were deeply transformed by the philosophy of eugenics in the early twentieth century.[51] Other institutions that were built during the so-called eugenics era of the 1890s through the 1940s were established more explicitly for eugenicist purposes. I historicize eugenics institutions by studying together civil commitment in state psychiatric hospitals and so-called homes for the feebleminded alongside juvenile reform schools and the state's reformatory for adult women, more often associated with the criminal legal system. The disability institutions along with the reformatories and prisons were monitored by a single government agency in the early twentieth century: first called the Board of Charities and Corrections and later changed to the Department of Institutions. This shared governance allowed for reform philosophies like eugenics to spread across both the criminal legal system and the civil commitment system. Administrators who embraced eugenics promoted the farm colony model for both the prison and the institution. Under this model, disability institutions and criminal reformatories were hundreds of acres in size and resembled self-contained villages. In the eugenics imaginary, these institutions existed as a parallel world to regular society, fantasized as places where the defective class could indefinitely live

out sex-segregated lives, dying humane deaths that prevented them from passing on their socially unwanted heredity.

Just as scholars have examined the racialization of the criminal legal system, groundbreaking scholarship on eugenics history has demonstrated that categories like "feeble-minded" in historical records were specifically gendered and racialized judgments about national belonging.[52] Despite current day narration that state institutions were legitimate sites for the treatment of disability and mental illness, many people were targeted for eugenics that today would be characterized as able-bodied and of normal mentality. Similar to how *criminal* became a code word for racialized and queered people in the late nineteenth century, immoral and sexually deviant behavior was interpreted through racial and gender scripts as disability or, to use the parlance of the time, "defective." This is particularly true of those categorized as female by the state. It is for this reason that scholars have argued that Californian eugenics ideology was not just about direct reproductive control but was also a strategy for enforcing patriarchal gender roles, including limiting sex to monogamous, legal conjugal, nonmiscegenating marriage.[53] Racialized communities in California, especially people of Asian origin and Mexican origin, were coded as gender and sexual deviants due to constructions of womanhood and manhood that revolved around whiteness.[54] At least one eugenics policy, that of sterilization, was used to target these racialized communities in California. As Novak and colleagues have shown, in the southern parts of the state where Spanish-speaking communities were concentrated, people with Spanish surnames disproportionately underwent eugenics sterilization.[55] Marie Kaniecki and colleagues similarly found that people with Asian surnames disproportionately underwent eugenics sterilization.[56] Ethnic groups who were legally categorized as white but also represented as racially "unfit"—namely, people of Portuguese, Italian, and Irish descent—were also targeted.

There is no easy answer to the question of the racial makeup of people institutionalized in California in the early twentieth century due to reasons ranging from inconsistent record-keeping across institutions to evolving racial categorizations. A possible data set with which to explore the race and ethnicity of institutionalized people was recently suggested to me; however, it was beyond my capacities to analyze it for this book.[57] Additionally, any data points of ethnicity and race in institutions need to be read contextually, given that other methods of intervention were used to remove undesirable foreigners (coded as Asian and Mexican) from the country and leave "native" US citizens (coded as white) in expensive long-term custodial

care. The point I emphasize is that the discourse surrounding eugenicist segregation reinforced white supremacist views of desirability and national belonging. Importantly, this racist eugenicist discourse sowed the grounds for the disproportionate imprisonment of Black, Latine, Indigenous, Pacific Islander, and some Asian populations in jails and prisons for the remainder of the twentieth century, which continued to reproductively control these communities.[58]

With some notable exceptions, both prison histories and eugenics histories have emphasized gendered and racial disproportionality while neglecting the material ways that carceral eugenics policies also disabled populations.[59] Records of those institutionalized indicate a range of physical impairments that could be recognized as legal disabilities today, including epilepsy, paralysis, limb difference, blindness, and deafness. Also contained in eugenics-era institutions were people experiencing madness, people who today would be called intellectually and developmentally disabled (I/DD), and people experiencing conditions of aging such as dementia. While disability is often coded as white in contemporary discourse, people of color are also disabled people. For one, environmental conditions have always impacted poor and racialized communities disproportionately, including agricultural and industrial exposures and accidents, as well as the trauma of racism, classism, and sexism. Accounts of eugenics that emphasize gender and race without disability run the risk of reproducing the binary distinctions between people of color and disabled people. The race-disability binary implies that disabled people actually did and do belong in eugenics institutions, as long as there was or is no use of institutionalization to unfairly punish (assumed to be nondisabled) people of color. This present study is inspired by the next generation of eugenics history, such as Natalie Lira's account of California's Pacific Colony, that shows how racialization operates through pathologization and practices of disability confinement.[60] This book joins Lira in insisting on a simultaneous race, gender, and disability analysis.

From carceral studies I also bring a feminist commitment to abolition. Carceral abolitionism is a set of practices of liberation rooted in Black feminist resistance to slavery, policing, and the prison industrial complex.[61] In addressing why abolition is necessary, Angela Y. Davis points out that it was through a series of reforms enacted in the name of humanitarianism that the modern carceral system was constructed in the first place.[62] This is nowhere more true than in the system of disability confinement, which was built through intersecting philosophies of eugenics and humanitarian

concern for the lives of disabled, mad, and neurodivergent people. Carceral abolitionists use the phrase "reformist reforms" to refer to policy changes that legitimate and reestablish social reliance on the carceral system, and nonreformist or abolitionist reforms to refer to dismantling the carceral system and rebuilding a new world.[63] From an abolitionist perspective, the danger of reformist reforms is that they re-entrench carceral logics, and, therefore, reforms themselves can become a means of biopolitical discipline.[64] Feminist abolitionism instead seeks to dismantle the structures and logics of oppression that sustain cages, borders, and policing by employing what Liat Ben-Moshe calls "dis-epistemologies of abolition."[65] Abolition is not simply (as if it were simple) a matter of dismantling carceral systems—it is also the practice of imagining new horizons for possible futures and of creating new worlds by forming networks of mutual aid and transformative justice. In contrast to reformist reforms that purport to solve problems with quick fixes, abolition is an unfinished project, always a collective becoming.[66] As a perpetual practice of both unlearning and re-creating, carceral abolition is an essential framework for offering life-giving and life-affirming futures that can counter ongoing practices of eugenics.

Critical Disability Studies

Encountering Julie Avril Minich's essay on critical disability studies while in the early stages of writing this book gave me much-needed direction to interpret the archive of carceral eugenics.[67] Minich identifies a version of disability studies not organized around the object of taken-for-granted disability but as a methodology of analyzing texts for how disability is produced. With this insight, I revisited my archive. No longer did I seek evidence for how people were falsely labeled as disabled to justify their institutionalization, but instead I identified how institutionalization was a material process of disablement.

This concept is rooted in an older and now-contested theory, that of the social model of disability. Until disabled people began articulating alternatives in the 1960s, the dominant model of disability identified disability as a problem, an inherent pathological condition of the body or mind.[68] Under the "individual" or "medical" model of disability, to say that someone is disabled is to point to a physical or neurological condition—such as paralysis, autism, or limb difference—that renders their body and/or mind incapable of performing the tasks needed for social reproduction, such as completing

schooling, holding down a job, or feeding themselves. The medical model is deeply rooted in the eugenicist assumption that biology is destiny. The dominance of the individual/medical model legitimates disability exclusion and inaccessibility by depicting the problem as emanating from a body or mind that is not up to the standards of modern life.

Social models of disability, articulated by activists as early as the 1960s, argue instead that variable bodyminds (a term chosen to reject Cartesian dualism) are not inherently defective but, rather, are constructed as limited through social, political, and economic understandings of normal and abnormal.[69] Alison Kafer points out that the version that gets called "the social model" of disability draws a distinction between "impairment" as a limiting property of the bodymind and "disability" that refers to the social barriers that prevent access for people with impairments.[70] Kafer insists that impairments are also constructed as such by social, economic, and political contexts. Kafer coined the term "political/relational model" to emphasize that body and mind differences are filtered through discourses that structure understanding of which so-called impairments constitute suffering or limitations of functioning. Dominant understandings of impairment and disability may or may not have a correlation with a person's visceral experience of pain or suffering. For example, many people who use wheelchairs do not necessarily experience pain or suffering until they encounter a built environment that is inaccessible or the bias of people who make assumptions about wheelchair users. Some impairments and disabilities, especially chronic illness, do cause pain that people wish to be rid of. This discrepancy between social assumptions and individual experience has led to a debate within the field of disability studies about how to attend to the materiality of pain and suffering and the interests of some for pursuing medical interventions while still critiquing the denial of access to those who have been socially dis-abled. For my purpose of explaining critical disability studies as methodology, I will summarize that these social or political and relational models emphasize that people become legally disabled not through a necessary limitation associated with a biological impairment but through a process of being categorized as abnormal and excluded from access to public space. These models shift disability from an immutable property of the bodymind to a socially constructed "sign of and justification for inferiority."[71] These models draw attention to how "problem bodies"—to adapt a phrase from Clare Sears—become the targets of cure, rehabilitation, or elimination by naturalizing the source of their difference as immanent to their bodies.[72]

Accepting disability as socially constructed rather than immutable, the methodology of critical disability studies is a practice of "scrutinizing . . . the social norms that define particular attributes as impairments, as well as the social conditions that concentrate stigmatized attributes in particular populations."[73] That is, rather than disability studies as a genre that tells the stories of the lives of people who are generally accepted as disabled (a move that reproduces the medical model and also tends to reinforce the whiteness of the field), critical disability studies instead reads texts to analyze how disability, and related categories such as crazy or fat, are produced and re-produced. Mobilizing cultural studies and discourse analysis methods, what counts as a text is broadly construed, including visual, sonic, performative, and archival. These texts are analyzed and interpreted for how they produce social understandings of normality, as well as how the resulting discourses obscure or justify differential material treatment of people based on whether they are considered abnormal.

Applying this methodology to my archive, I join others in pointing out that categories such as "feeblemindedness" and "mentally defective" were deployed in the early twentieth century to justify eugenics interventions. However, rather than take these terms as arbitrarily deployed merely to justify institutionalization, I use critical disability studies to interpret these as meaningful categories of disability within historical context. Instead of arguing that a person was falsely labeled feebleminded to justify their confinement, I instead analyze the ways that categorization as feebleminded materially "disabled" people and cut off their access to public space. Disability was—in the eugenics era, just as in the present—created in and through gender and racial formations. A *critical* disability studies methodology requires also examining the assumptions of gender and whiteness that attend the concept of disability. In this case, those who were disabled by eugenics policies include those people institutionalized due to gender deviance and white supremacist notions of national belonging. For example, a person assigned to the category of female who was diagnosed as a moral imbecile in the 1910s was materially disabled by the state of California, just as were Mexican American youth diagnosed as feebleminded and confined to the state's epileptic colony.[74] This emphasis on disability opens up the possibilities for crip kinship with institutionalized people, a chosen family that crosses the timespan of the twentieth and twenty-first centuries.

Critical disability studies as a methodology is driven by what Merri Lisa Johnson and Robert McRuer name "cripistemologies"—what they define as the ways of knowing and forms of "prohibited knowledge about disability"

that emerge from a collective, politicized reflection on the experience of disability.[75] Deriving from the derogatory term *crippled*, the term *crip* has been reclaimed by some scholars and activists as a political affiliation among those who practice anti-assimilationism and reject unwanted efforts to cure, treat, or fix the disabled body.[76] Crip epistemologies, genealogically descended from women of color feminisms (according to Johnson and McRuer), disrupt the expectation that knowledge about disability will come from nondisabled experts and prioritize instead the knowledges of those whose bodyminds cannot or will not be cured into normativity. Critical disability studies centers the reading practices developed by those of us who are disabled, sick or chronically ill, mad, unwell, and neurodivergent. Although the conception of a eugenics history from below is most strongly theorized in chapter 4, the prohibited knowledges of disabled people drive the analysis throughout the book.[77] For example, it is from talking about my own experiences with bodily impairment and neurodivergence that I learned to conceive of the medical exam as a possible form of violence and to understand the ways that treatment can veer into punishment for deviant behavior. This understanding allowed me to critically interrogate descriptions of medical examinations in the archive that others may have interpreted as routine or unremarkable. However, as a white, queer, nonbinary, neurodivergent person with invisible physical impairments, including an autoimmune disorder, I do not believe that my experiences give me inherent access to disability knowledge, and I also recognize that I have missed many things that a person with a different socially located disability might have emphasized. I have cultivated a critical mode of disability analysis through being in relation with queer and trans disabled scholars, activists, and friends of color, but although my mode of analysis is collectively generated, I take personal responsibility for any ableism or carceral logics that crop up in this book.

As a white person trained in ethnic studies, I am especially attentive to challenging the white-centric cripistemologies and understandings of disability that have been dominant within disability studies. I am humbled to be writing this book at a time when the field that Jina B. Kim calls "crip-of-color critique" is being foregrounded in disability studies.[78] Crip-of-color critique reconstructs a genealogy of knowledge about disability grounded in women-of-color feminisms and queer-of-color critique, one that reads disability in and through its coproduction with race, class, gender, and sexuality. Crip-of-color critique is aligned with the nonacademic movement for disability justice, which centers "disabled people of color, moreover queer and gender non-conforming disabled people of color."[79] Just as critical forms

of disability studies have intervened in academic fields, disability justice pushes back on disability movements that seek rights through appeals to the state. According to the Sins Invalid collective, "Our understanding of able-bodied supremacy has been formed in relation to intersecting systems of domination and exploitation. The histories of white supremacy and ableism are, after all, inextricably entwined, both forged in the crucible of colonial conquest and capitalist domination."[80] As such, the disability justice movement challenges the technologies of the state that materially disable racialized and classed populations, including through surveillance, policing, borders, imperialism, militarism, and incarceration. Both crip-of-color critique and disability justice inform my methodology, calling me to examine how states and their empires "debilitate"—a concept used by Jasbir Puar to decenter white and settler-infused notions of preexisting disability—racialized, gendered, and poor communities.[81] Disability justice is a guiding frame for this examination of eugenics as a form of state violence that invaded the body in order to limit reproductive potential, and institutionalization as a form of state violence that created illness, injury, and premature death.

By enacting disability justice as an ethic, the stories of violence in this book attend to the epistemologies of institutionalized people who repeatedly asserted the value of their lives. Their yearnings for freedom resisted the carceral state. While some institutionalized people voluntarily chose to be institutionalized, this experience has been overblown into a fantastical Hollywood trope.[82] Those who were targeted for carceral eugenics were also unruly, rejected cultural norms and the law, escaped, pursued legal remedies, and engaged in everyday acts of refusal that constitute civil disobedience. Throughout the descriptions of state violence in these books are also many moments where those with problem bodies resisted state efforts to contain them and articulated yearnings for life that can be interpreted as anti-eugenicist. These crip epistemologies of institutionalized people in the early twentieth century are the roots of anti-eugenics practices that today can propel our movements toward the horizon of feminist, queer, and crip abolition.

Destroying Crip Futurity

In Alison Kafer's description of the cultural imaginary of disability, she demonstrates that a healthy future is secured by obliterating disability and disabled life.[83] This ableist imaginary of a future without disability is

pervasive in the archive of eugenics confinement, such as when the superintendent of the California State School for Girls in 1920 had a "vision of a society in which heredity will be so controlled that children will not be born with handicaps that can not [*sic*] be overcome and in which home, school, amusements, church, courts—all factors of environment, in short—will so function that segregation of young girls in schools like the California School for Girls will be unnecessary."[84] The superintendent describes a utopic future that arrives by eliminating disabled people and disability itself through the strict control of reproduction. As this example demonstrates, eugenics was at the root of many Californians' early twentieth-century imagination of the future.

In addition to a physical intervention through confinement, eugenics was a form of temporal enclosure. By attempting to control the timeline of human evolution, eugenicists also diminished the possible futures that could unfold. Those people deemed "bad stock" were, as the title of this book references, considered "a serious menace to the future" of society, the race, and civilization itself.[85] As threats to the future, the defective class was subjected to what Ruha Benjamin calls a "temporal penitentiary."[86] Theorizing the "carceral imagination," Benjamin writes, "Black people routinely are either degraded in popular representations of progress or completely written out of futuristic visions . . . , a kind of temporal penitentiary in which oppressed people are locked in to a dystopic present."[87] Benjamin uses this concept to describe the discursive strategies of excluding Black people from imaginaries of the future. Similarly, eugenics institutionalization both physically contained the defective class and denied people categorized as defective the possibility of being part of the future. In addition to functioning as sexual control, confinement exposes populations to disablement, premature aging, and eventually premature death. The social acceptance of carceral exposure to premature death is rooted in eugenicist ideologies about the value of human lives.

Temporally, institutionalization also induced a kind of social death. By this I mean that institutionalized people had little opportunity for imagining their own futures because they had limited access to cultural creation and expression of their own. People institutionalized in the early twentieth century were offered infrequent religious, recreational, educational, or other programming; they were more frequently denied the resources necessary for the independent creation of art, music, writing, and other expressive artifacts. Although undoubtedly within institutions there were affirming spaces, most likely created by institutionalized people themselves,

the evidence of temporary autonomous zones and other unsettled places for intimacy (such as within the tunnels underneath the Oregon State Hospital described by Diane L. Goeres-Gardner) is ephemeral or recorded only in ableist ways in the archive.[88] Forms of social reproduction and creativity did occur inside of institutions; however, the practice of segregation limited the reach of such creation to the outside world by attempting to disappear the defective class and any evidence of their ideas. Institutionalized people may have created alternative embodiments and occupations of time, including the cultivation of chosen family that offered alternate lineages exceeding blood inheritance. These practices had the potential to disrupt eugenicist timelines for human evolution. However, through practices of confinement, eugenics limited the possibilities for creating potentially transformative culture, ultimately diminishing the horizons of crip futurity.

Eugenics institutionalization not only foreclosed on the futures of those who were labeled as defective but also delimited the possible futures for us all. The mere existence of eugenics institutions impacted noninstitutionalized individuals by incentivizing the adoption of the time-telling, time-keeping, and future planning required to be liberal workers and citizens. If individuals did not or could not embody liberal time properly, they ran the risk of being categorized as defective and committed to an institution. Disabled people who could not learn to embody liberal time and progressive timelines included gender-nonconforming, sexually deviant, neurodivergent, and mad people assigned to the category of women and girls and racialized as other. In this way, eugenics detention perpetuated a carceral logic that subtly terrorized the population against experimenting with other ways of being and being-in-relation in the world. Normative regimes of time and temporality were consolidated by the threat of physical enclosure. Through carceral eugenics practices, the state in California claimed jurisdiction over which possible futures could be allowed to unfold. As a result, the carceral logic of eugenics has never been safely contained in the past but has always been reaching through time, attempting to control both our present and our futures.

A Queer Desire to Touch the Other across Time

Archival work can be an isolating enterprise. Yet, as I squinted into the microfiche screen or carefully handled illegible and delicate papers, I recognized kin in the state's records of the defective class. I recognized kin in the girls with goiters (enlarged thyroid glands in the neck) and low vision

requiring thick glasses. I cringed to know that for eugenicists, this was proof of our hereditary weakness and degeneracy. I recognized kin in the assigned women that were declared "peculiar," "excitable," and "nervous"—early twentieth-century code words for *neurodivergence*. I recognized my appendectomy scar and my missing tonsils in the records of tens of thousands of institutionalized people experimentally operated upon. I recognized kin in the family histories of those who surrounded themselves with queer family and questionable friends. I recognized kin in the troublemakers, the unruly bodies, the strange affects, and the awkward, chronically ill people.[89]

Employing the queer concept of chosen family, I imagine these archival figures as lost ancestors. I use *queer* as a concept in the ways it has been taken up in Black feminist thought for at least twenty-five years. Described succinctly by Sarah Haley, queer is a racialized, subjugated subject position "produced outside of binary oppositional gender categories as something else altogether."[90] This understanding of queer as a material process of weaponizing sexuality to subjugate populations is applicable in relation to disability that is treated as an asexualized subject position. This usage of queer also works to explore how deviant sexualities were disabled in the early twentieth-century eugenics era. As far back as Cathy Cohen's seminal essay, the interventions of Black feminism and queer-of-color critique demand political implications, shifting movements to embrace as family those whose struggles may not look exactly like ours or who do not match the identity formations we mobilize to seek recognition.[91] Instead of biologically essentialist notions of solidarity with those who we presume were "just like us" in the past, I propose forms of queer kinship that are created by acting as accomplices to those rendered materially deviant in the past, a methodological practice that opens up new possibilities for collective queer futures.[92]

This kinship-building exercise is what Carolyn Dinshaw describes as "contingent," in the etymological sense of the word: a queer genealogical method that tries "to 'touch' bodies across time. Resurrection is the aim of this history, unreached but nonetheless signaled."[93] The resurrection is unreached because the histories of those who lived and died in institutions for disability confinement "[strain] against the limits of the archive," to borrow from Saidiya Hartman, requiring accounts that grapple with the impossibility of representation.[94] The straining toward resurrection is necessary in the case of state institutions, however, in order to counter the logic of eugenics that attempted to obliterate dysgenic populations both physically and temporally. Through queer reading and reaching across time, I do not

attempt to recuperate the truth of the eugenicist past or include all historical details about California's institutional history, but I insist on remembering the dysgenic other locked in the past by the ongoing circulation of eugenicist ableism. I offer this genealogy as a form of anti-eugenics—that is, I counter the imaginary of a future without disabled people by deconstructing eugenicist logic, opening up queer and crip possibilities of an otherwise.

Michel Foucault theorized that the method he called "genealogy" is necessary to challenge historiographies that posit a seamless teleology from the past to the present in order to uphold sacred ideas and sentiments.[95] According to Foucault, a genealogical method demonstrates the historical contingency of these sacred ideas and reveals them instead as "unstable assemblages." Genealogical history is highly speculative, because, as Dinshaw theorizes, "queer historical projects aim to promote a queer future."[96] In contrast to liberal temporalities, queer genealogy is not congratulatory about an imagined queer present that we have collectively arrived at due to a steady overcoming of the oppressive past. Nor is queer genealogy invested in establishing an inevitable final destination, which we will collectively arrive at if only we keep marching forward. Queer genealogy draws on temporalities that are nonlinear, not inevitable, and not teleological. Instead, queer genealogy is a practice of what José Esteban Muñoz names as critical hope: a methodology that "can be best described as a backward glance that enacts a future vision."[97] Although grappling with queer and critical disability theory snatches from us the assurance of inevitable future freedom through steady reforms, the alternative temporality offered is far more powerful. By tracking the carceral eugenics technologies through which queer and crip futures were foreclosed, I reveal this present dimension of existence as historically contingent and therefore changeable. Genealogy is a practice of yearning for what Muñoz calls a queer "then and there," a future we can feel but have not yet arrived at.[98] Marking these "days of future past" gestures toward other possible ways of living and being in the world, modes of social reproduction, and ways of organizing human value, countering the future imagined by eugenicists.[99] Queerly reaching across time to touch the other splits the future wide open from carceral eugenics logics to create the space for anti-eugenicist abolition to emerge.

The core archive of this study is a compilation of state records that provide a sense of the day-to-day operations of early twentieth-century eugenics institutions in California, including written records of individual institutionalized people, staged group photographs, and observations from visiting the physical campus of Patton State Hospital and its museum of

mental health. A significant component of this archive is state records of long-term plans for institutions, including administrative reports submitted to the state legislature. Examining these reports reveals the role that eugenics theory played in constructing who should be confined to state institutions in the long term, how differences between treatment and punishment were collapsed, and how spending on state institutions was justified through eugenics rationale. Meeting records and correspondence of the League of Women Voters of San Francisco, a club that visited institutions and lobbied the state to build additional facilities, provide insight into the contributions of reformers outside of the government in developing carceral eugenics specifically for wayward girls and women. To provide additional context of the social imaginary in the early twentieth century, I describe two novels written by authors with California connections: *The Octopus: A Story of California*, by Frank Norris; and *Herland*, by Charlotte Perkins Gilman.[100] Through descriptions of these novels, I draw out the dystopic and utopic visions of Progressive reformers. Finally, in addition to reading the state archive against the grain, seeking the perspectives of those targeted for carceral eugenics, I located limited correspondence of institutionalized people and newspaper columns and letters to newspaper editors published in the book *Alice: Memoirs of a Barbary Coast Prostitute*.[101]

Chapter 1 uses "defective class," a term repeated in the archive, as a heuristic device to explore how agents of the state of California created a population of people that could justifiably be segregated in state institutions. By analyzing the documentation of people committed to state institutions between the years 1900 and 1940, I show how agents of the state used the process of commitment, including medical examinations, family histories, and psychological testing, to attach difference to bodies. Through routine practices that physically invaded the body, the discourse of defectiveness was made material—no longer living just in the pages of administrative reports but embodied in the defective class. A body made materially different could legitimately lose autonomy in the name of public health. I examine the process of losing autonomy through the interrelated and coconstitutive frameworks of disablement, racialization, and queering.

Chapter 2 tracks the everyday experience of life at a eugenics institution in the early twentieth century, specifically focusing on the types of care, treatment, and rehabilitation that institutionalized people were purported to receive. Building on Ben-Moshe's identification of eugenics institutions as part of the carceral industrial complex, this chapter identifies the many ways that care, treatment, and rehabilitation also acted as punishment.[102]

My purpose for this line of inquiry is to draw out the ways that pathologization and criminalization overlap and operate simultaneously to create the carceral state. This expands on what Angela Y. Davis calls the "punishment continuum"—specifically, I build on Davis's point that psychiatric institutions operated as an additional site for the punishment of those assigned to the category of girls and women.[103]

Chapter 3 follows the money, situating eugenics institutions in the political economic transformation of California at the turn of the twentieth century, from laissez-faire to administrative state. According to political economist Thomas C. Leonard, Progressives sought to establish a scientific, administrative state as the solution to the threats of economic greed of the corporate trusts and the growing population of defectives.[104] Where Leonard leaves off, I pick up to examine how surplus value continued to be extracted from the defective class, even after confinement in institutions. As Natalie Lira has discussed, eugenics institutions were places for disciplining gendered and racialized labor.[105] To this I add that institutions also extracted nonlabor surplus value from disabled populations. If part of the transition away from laissez-faire was through building state capacity to discipline labor and extracting surplus value that could be funneled for capitalist interests, my point is to emphasize that institutions played an important role in expanding this state capacity.

Drawing on Gilman's utopian novel *Herland*, chapter 4 starts by describing the imaginaries of middle-class and elite activist women of a maternal, caring state that enacted eugenics consensually.[106] The second half of the chapter resists consensual eugenics by telling the stories of unruly and undisciplined patients in state institutions. While locating the consciousness of institutionalized people is difficult for a variety of reasons, I insist on trying. To forget the perspective of the institutionalized person is to collude with eugenics, to disappear those labeled as dysgenic, and to obliterate the other possible futures that disabled and queer people could have created. By reading against the grain in the archive of institutions, I work toward a eugenics history from below.

To make the case that detention is eugenics, chapter 5 jumps ahead in time and provides a compressed history of California's institutions, from the 1950s into the present. While the population of people living in institutions for disability confinement has declined dramatically, and many institutions have been closed and converted for other uses, institutions are still here. Today, these institutions resist closure through the integration of publicly supported practices of criminal incarceration and containment of the

so-called mentally ill. I also describe how the California Department of Corrections and Rehabilitation (CDCR) has, since the 1950s, leveraged public fear of the so-called mentally ill and substance abusers to build innovative prisons that continue to conflate care, treatment, rehabilitation, and punishment. However, I show that this fantasy of state care is undermined by endemic medical neglect and other forms of death-dealing that reproduce the logic of eugenics in a variety of carceral settings.

Chapter 5 makes clear the stakes for engaging in this archive: grappling with the policy of segregation is part of the process of recognizing that eugenics continues to be one of the philosophies motivating carceral systems. Programs that segregate populations functionally control human reproduction. They also cause disablement, premature aging, and premature death. Carceral projects separate people from their children, families, and life-giving and life-affirming support networks. Although it may no longer be done explicitly in the name of eugenics, detention continues to promote old fantasies of self-directed human evolution. Even when laws are put in place designed to prevent eugenics, civil servants and the increasing number of private contractors who carry out government services under neoliberalism have found loopholes or acted in violation of the law in order to continue enacting what they understand to be necessary forms of social control.[107] Even when actions do not rise to the level of medical abuse, I observe eugenics in the rationales used for incarceration and detention, the adaptation of eugenics institutions for new carceral purposes, and the acceptance of massive carceral budgets at a time when voters reject all other forms of state spending.

While I am cautious of reproducing violence through the repetition of stories of abuse and neglect inside institutions for disability confinement, I am frightened by the ongoing abuse and neglect of disabled, impoverished, racialized, queer, and gender nonconforming people in a variety of institutions. Even as some forms of confinement have become limited, one of the adaptive forms of detention that has emerged with a vengeance is immigrant detention. The epilogue returns to where the prologue left off, discussing how organizers in accompaniment with detained migrants are resisting confinement. While this book is not a detailed study of migrant detention, reconfronting historic state violence is one small piece of undermining the romance of detention as a solution to political, economic, and social problems, including mass global displacement. This book is my act of anti-eugenics. I define anti-eugenics as a counter-philosophy, one that is expressed by those deemed broken and threatening, as a will for creating

life beyond the carceral state. Wherever the practice of carceral eugenics is exposed, an epistemology of anti-eugenics can be found. As much as this book is an examination of truly horrific state violence in the form of carceral eugenics, witnessing it is also an articulation of an abolitionist anti-eugenics that revalues disabled, mad, neurodivergent, queer, gender nonconforming, and immigrant life. To borrow from Muñoz, it is to feel toward an anti-eugenicist, abolitionist horizon that I tell the stories in this book.[108]

NOTES

Prologue

1 Bhatt et al., *Violence and Violation*.

2 American Friends Service Committee, Detention Resistance, and Pueblo Sin Fronteras, *Compounding Suffering during a Pandemic*; Langarica, Vakili, and Grano, *CoreCivic's Decades of Abuse*.

3 Kilgore, "COVID-19 Is Turning Prisons into 'Kill-Boxes.'"

4 Paik, *Bans, Walls, Raids, Sanctuary*; Ordaz, *The Shadow of El Centro*.

5 Langarica, Vakili, and Grano, *CoreCivic's Decades of Abuse*.

6 Langarica, Vakili, and Grano, *CoreCivic's Decades of Abuse*.

7 "The COVID Prison Project Tracks Data and Policy across the Country to Monitor COVID-19 in Prisons," COVID Prison Project.

8 "Patient & Staff Covid Tracking," California Department of State Hospitals.

9 Levin, "He Lived in the US for 40 Years."

10 The Spanish term *compa*, short for *compañero/a*, is a colloquialism for a friend, yet it also has a connotation of a comrade in revolutionary struggle. It is used within migrant justice organizations in San Diego to refer to people who are attempting to enter the United States or who have been targeted by US immigration enforcement.

11 American Friends Service Committee, Detention Resistance, and Pueblo Sin Fronteras, *Compounding Suffering During a Pandemic*; Langarica, Vakili, and Grano, *CoreCivic's Decades of Abuse*.

Introduction

1 At the point of incarceration or institutionalization, the state makes a determination of sex in order to place persons in sex-segregated facilities. This determination of sex does not always align with a person's sex or gender identity. I use the phrase "people in women's prisons" to observe this distinction. Elsewhere, I use terms such as "assigned female" to note that in most cases the only records available are based on the state's assignment of sex and gender.

2 Johnson, "Female Inmates Sterilized in California Prisons without Approval."

3 Chandler, "Female Offenders, Budget Issues Related to Conditions of Confinement and Illegal Sterilizations."

4 Ordover, *American Eugenics*; Stern, *Eugenic Nation*; Lombardo, *A Century of Eugenics in America*.

5 Stern, "From Legislation to Lived Experience."

6 Stern, "From Legislation to Lived Experience."

7 Russell and Stewart, "Disablement, Prison, and Historical Segregation."

8 Popenoe, *Applied Eugenics*.

9 Fox, *So Far Disordered in Mind*.

10 Brown and Schept, "New Abolition, Criminology and a Critical Carceral Studies."

11 Russell and Stewart, "Disablement, Prison, and Historical Segregation"; Ben-Moshe, Carey, and Chapman, *Disability Incarcerated*.

12 Ben-Moshe, "Disabling Incarceration."

13 Russell and Stewart, "Disablement, Prison, and Historical Segregation."

14 Sins Invalid, *Skin, Tooth, and Bone*.

15 Galton, *Inquiries into Human Faculty and Its Development*.

16 Galton, *English Men of Science*, 16.

17 Galton, *Hereditary Genius*, 64.

18 Roberts, *Killing the Black Body*.

19 Lombardo, *Three Generations, No Imbeciles*.

20 Ordover, *American Eugenics*.

21 Stepan, *The Hour of Eugenics*; Solomon, *Doing Medicine Together*; Kim, *Curative Violence*; Paul, Stenhouse, and Spencer, *Eugenics at the Edges of Empire*.

22 Roberts, *Killing the Black Body*.

23 Kline, *Building a Better Race*; Stern, *Eugenic Nation*.

24 Gohlke, *Remarkable Women of Stockton*.

25 Gosney and Popenoe, *Sterilization for Human Betterment*.

26 Black, "Eugenics and the Nazis."

27 California Senate Resolution 47: Relative to Eugenics.

28 Hernández, *Migra!*

29 "California Memorial Project," Disability Rights California.

30 Roberts, *Killing the Black Body*; Briggs, *Reproducing Empire*; Carpio, "The Lost Generation"; Schoen, *Choice & Coercion*; Tajima-Peña, *No Más Bebés*; Theobald, *Reproduction on the Reservation*; Villarosa, *Under the Skin*.

31 Ross et al., *Radical Reproductive Justice*.

32 Kline, *Building a Better Race*; Stern, *Eugenic Nation*; Stern, "From Legislation to Lived Experience"; Khanmalek, "Slavery"; Lira and Stern, "Mexican Americans and Eugenic Sterilization"; Novak et al., "Disproportionate Sterilization of Latinos under California's Eugenic Sterilization Program, 1920–1945"; Lira, *Laboratory of Deficiency*.

33 Kline, *Building a Better Race*.

34 "California Memorial Project," Disability Rights California.

35 Human Rights Program at Justice Now, "Prisons as a Tool of Reproductive Oppression."

36 Roth, "'She Doesn't Deserve to Be Treated like This.'"

37 Whatcott, "No Selves to Consent."

38 Bhattcharya, "What Is Social Reproduction Theory?"

39 Nishida, *Just Care*; Piepzna-Samarasinha, *Care Work*.

40 Bookspan, *A Germ of Goodness*; Faith, *Unruly Women*; Gilmore, *Golden Gulag*; Cairns, *Hard Time at Tehachapi*; Blue, *Doing Time in the Depression*; Hernández, *City of Inmates*.

41 Chávez-García, *States of Delinquency*.

42 Hernández, *City of Inmates*.

43 Ben-Moshe, "Disabling Incarceration."

44 Ben-Moshe, Carey, and Chapman, *Disability Incarcerated*.

45 Ben-Moshe, Carey, and Chapman, *Disability Incarcerated*, 10.

46 Ben-Moshe, "Disabling Incarceration."

47 Davis, *Are Prisons Obsolete?*, 66.

48 Fox, *So Far Disordered in Mind*.

49 Harcourt, "From the Asylum to the Prison."

50 Gilmore, *Golden Gulag*.

51 Fox, *So Far Disordered in Mind*.

52 Kline, *Building a Better Race*; Stern, *Eugenic Nation*; Lira, *Laboratory of Deficiency*.

53 Kline, *Building a Better Race*; Stern, *Eugenic Nation*.

54 Lira, *Laboratory of Deficiency*; Kaniecki et al., "Racialization and Reproduction."

55 Lira and Stern, "Mexican Americans and Eugenic Sterilization"; Novak et al., "Disproportionate Sterilization of Latinos under California's Eugenic Sterilization Program, 1920–1945."

56 Kaniecki et al., "Racialization and Reproduction."

57 Marie Kaniecki of the Sterilization and Social Justice Lab suggested to me that it could be possible to cross-reference US Census data on institutionalized people with county-level census data. Individual US census forms from the early twentieth century have been digitized by IPUMS and are available to researchers. IPUMS, "Home," Regents of the University of Minnesota, accessed November 10, 2023, https://www.ipums.org/.

58 Sentencing Project, *The Color of Justice*.

59 Rembis, *Defining Deviance*; Lira, *Laboratory of Deficiency*.

60 Lira, *Laboratory of Deficiency*.

61 Davis et al., *Abolition. Feminism. Now*; Kaba, *We Do This 'til We Free Us*; Bierria, Caruthers, and Lober, *Abolition Feminism*.

62 Davis, *Are Prisons Obsolete?*

63 Gilmore, *Golden Gulag*, 242.

64 Whatcott, "No Selves to Consent."

65 Ben-Moshe, *Decarcerating Disability*.

66 Ben-Moshe, "Dis-Epistemologies of Abolition."

67 Minich, "Enabling Whom?"

68 Kafer, *Feminist, Queer, Crip*.

69 Oliver, *The Politics of Disablement*.

70 Kafer, *Feminist, Queer, Crip*.

71 Baynton, "Disability and the Justification of Inequality in American History," 34.

72 Kafer, *Feminist, Queer, Crip*; Clare, *Brilliant Imperfection*; Sears, *Arresting Dress*.

73 Minich, "Enabling Whom?"

74 Lira, *Laboratory of Deficiency*.

75 Johnson and McRuer, "Cripistemologies," 130.

76 Clare, *Exile and Pride*; Kafer, *Feminist, Queer, Crip*; McRuer, *Crip Times*.

77 Throughout this book I default to identity-first language (*disabled person*, rather than *person with disability*) and, following that convention, default to the term "institutionalized people" to refer to persons confined to state institutions. This is not done out of disrespect for the People First movement, which began in the 1970s as part of the broader movement of self-advocacy by people who had been institutionalized. One of the demands of the movement was to recognize that they were people, not just their disability label. This has over time been distilled to a request to use so-called person-first language, such as "a person with Down syndrome." However, it is still within the spirit of the self-advocacy movement to promote the social model of disability and to make a political choice to start with disability as a form of identification. In this conception, to say "disabled person" is not to dehumanize or devalue but to draw attention to the ways that someone is materially debilitated through the structure of ableism. Other choices, such as the use of the term *patient*, are made to acknowledge common usage by the state to refer to institutionalized people, but with recognition that this term obscures the eugenicist function of institutionalization and dramatically overstates the amount of medical treatment that was available to institutionalized people. On a practical level, the overcrowded and understaffed conditions at eugenics institutions through much of the twentieth century meant that medical care was inadequate at best. The term *inmate* is used occasionally to acknowledge common usage by the state but also strategically to emphasize the discursive connections between carceral institutions and institutions of care. Throughout, I attempt to emphasize the humanity of people as much as possible while maintaining clarity of language.

78 Kim, "Toward a Crip-of-Color Critique."

79 Sins Invalid, *Skin, Tooth, and Bone*, 4.

80 Sins Invalid, *Skin, Tooth, and Bone*, 57.

81 Puar, *The Right to Maim*.

82 Forman, *One Flew Over the Cuckoo's Nest*.

83 Kafer, *Feminist, Queer, Crip*.

84 "Report of the California School for Girls, 1918–20," 8.

85 "Report of the State Board of Charities and Corrections, 1912–14," 19.

86 Benjamin, "Catching Our Breath."

87 Benjamin, "Catching Our Breath," 150.

88 Goeres-Gardner, *Inside Oregon State Hospital*.

89 Saidiya Hartman's scholarship, especially the book *Wayward Lives, Beautiful Experiments*, gave me the courage to write this paragraph. Although my subjects are very different from Hartman's, the care with which she treats those whose stories she attempts to recover, as well as the way she thoughtfully grapples with the impossibility of an unproblematic recovery, has heavily influenced my methods.

90 Haley, *No Mercy Here*, 88.

91 Cohen, "Punks, Bulldaggers, and Welfare Queens."

92 Whatcott, "Aiding and Abetting the Unruly Past."

93 Dinshaw, *Getting Medieval*, 47.

94 Hartman, "Venus in Two Acts," 11.

95 Foucault, "Nietzsche. Genealogy. History."

96 Benjamin, "Theses on the Concept of History"; Dinshaw, *Getting Medieval*, 140.

97 Muñoz, *Cruising Utopia*, 4.

98 Muñoz, *Cruising Utopia*.

99 "Days of Future Past" is the name of a storyline in the comic book series *The Uncanny X-Men*, spanning issues no. 141–42, originally published in 1981. In the storyline, X-Men from an apocalyptic future create technology to send a member of their team into the past with the goal of interrupting events to create an alternate timeline.

100 Norris, *The Octopus*; Gilman, *Herland*.

101 Smith, *Alice*.

102 Ben-Moshe, "Disabling Incarceration."

103 Davis, "Public Imprisonment and Private Violence."

104 Leonard, *Illiberal Reformers*.

105 Lira, *Laboratory of Deficiency*.

106 Gilman, *Herland*.

107 Whatcott, "No Selves to Consent."

108 Muñoz, *Cruising Utopia*.

Chapter 1. Making the Defective Class

1 "Report of the State Board of Charities and Corrections, 1916–18," 62.

2 "Report of the State Commission in Lunacy, 1910–1912," 22.

3 "Report of the State Board of Charities and Corrections, 1918–20," 10.

4 California Senate Resolution 47: Relative to Eugenics.

5 Ben-Moshe, Carey, and Chapman, *Disability Incarcerated*.

6 Clare, *Brilliant Imperfection*.

7 Fox, *So Far Disordered in Mind*.

8 Fox, *So Far Disordered in Mind*.

9 Abbott, *I Cried, You Didn't Listen*.

10 Williams et al., "Whittier Social Case History Manual."

11 Williams et al., "Whittier Social Case History Manual."

12 Miroslava Chávez-García, *States of Delinquency*.

13 "Report of the State Commission in Lunacy, 1906–8," 10–11.

14 "Report of the State Commission in Lunacy, 1906–8," 10.

15 Williams et al., "Whittier Social Case History Manual," 43.

16 Fernald, "Report of the Psychological Work in the California School for Girls"; Chávez-García, *States of Delinquency*.

17 Fernald, "Report of the Psychological Work in the California School for Girls."

18 "Report of the State Board of Charities and Corrections, 1912–14."

19 Fernald, "Report of the Psychological Work in the California School for Girls."

20 Fernald, "Report of the Psychological Work in the California School for Girls," 29, 32.

21 Fernald, "Report of the Psychological Work in the California School for Girls," 30.

22 "Report of the State Commission in Lunacy, 1898–1900," 93.

23 Erevelles, *Disability and Difference in Global Contexts*, 40.

24 Spillers, "Mama's Baby, Papa's Maybe."