

From Suffrage to Sterilization: Eugenics and the Women's Movement in 20th Century Alberta

Erin L. Moss and Henderikus J. Stam
University of Calgary

Diane Kattenvilder
Prinsentuin College

In the complicated relationship between early 20th-century feminism and eugenics, Western Canada in general and the Province of Alberta in particular provide a unique case study on the history and practice of the sterilization of the “feeble-minded.” While feminism strove to enable women to control their own reproductive capacities, eugenics attempted to exert control over the reproduction of certain segments of society. Ironically, these movements exerted a significant influence on one another during their respective inception and were inextricably linked for more than 50 years. This paper discusses how misunderstanding and panic surrounding mental illness served to unite feminism with the eugenics movement. Specifically, the paper explores how first-wave feminism adopted a maternal ideology that embraced the role of “guardians of the race.” How these events unfolded within Western Canada and the role that prominent feminists and women’s associations played are reconstructed. Ultimately, it is argued that understanding the role that the feminist movement played in the application of eugenics legislation requires consideration of the importance of maternal feminism in the changing relations between the sexes.

Keywords: eugenics, feminism, feeble-mindedness, sterilization, Alberta

First-wave feminism¹ in Canada had its origins in the late 19th- and early 20th century. Women involved in first-wave feminism began to focus on perceived gender inequalities, and one of the primary goals of the movement was to gain women’s suffrage. Seeking to extend their role in society beyond the confines of their homes, women also wished to participate more actively in public life. In particular, leaders of first-wave feminism espoused the notion that women, as mothers, were particularly well-suited for improving society. The necessity of “bettering” society was especially relevant, given early 20th century social and political changes. Motherhood became a social function for women as they tackled issues of poverty, crime, immigration, and temperance.

The paradoxical support of negative eugenics, in the form of sterilization, by early 20th-century feminists has been complex and sometimes embarrassing. Negative eugenics, which included the practice of compulsory sterilization, refers to the breeding out of certain characteristics in the population. Francis Galton (1822–1911), a half-cousin of Charles Darwin, is credited with being the originator of eugenics, and originally coined the term in the late 1800s (Galton, 1883, p. 17). Galton was initially interested in improving the quality of livestock. However, following the introduction of Darwin’s publication of *The Origin of Species* and the

subsequent pursuit of social Darwinism, he shifted his focus to an interest in improving the quality of the human race (Devereux, 2005). The notion of selective breeding posed the possibility of breeding desirable characteristics into the population. However, selective breeding turned out to be more aspirational than practical. Consequently eugenicists shifted their approach; if it was not possible to improve offspring through pairing up distinguished men and women, it was possible to restrict or prohibit the reproduction of individuals with undesirable characteristics. Furthermore, while eugenics was most frequently used in its negative sense to refer to sexual sterilization, it was also an oblique reference to poverty, social problems, class, and immigration issues.

With the joint aims of improving society, both eugenics and first-wave feminism were inextricably linked during their respective formative years. Dowbiggin (1997) argued, “imperialism, eugenics and maternal feminism frequently intersected” (p. 138), as feminists became deeply involved in the eugenics movement (see, e.g., Black, 2003; Devereux, 2005). Indeed, the breadth of support for eugenics in North America has been well documented by contemporary historians (e.g., Kluchin, 2006). While focusing on home and hearth as the foundation of women’s lives (and the nation’s future), first-wave feminists struggled against all obstacles to this aim, including feeble-mindedness.

In this paper we explore the relationship between first-wave feminism and eugenics, with the aim of examining the history of the sexual sterilization program in 20th-century Alberta. Under-

Erin L. Moss and Henderikus J. Stam, Department of Psychology, University of Calgary, Alberta, Canada; Diane Kattenvilder, Department of Animal Care, Prinsentuin College, Breda, The Netherlands.

We thank the Provincial Archives of Alberta for their assistance in searching the minutes of the Alberta Eugenics Board and the case files.

Correspondence concerning this article should be addressed to Henderikus J. Stam, Department of Psychology, University of Calgary, Calgary, Alberta, Canada T2N 1N4. E-mail: stam@ucalgary.ca

¹ *First-wave feminism* refers to feminist activity that transpired during the late 19th century and early 20th century, sometimes referred to as *maternal feminism* to denote activism for social change while retaining a traditional role for women in the home (see Strong-Boag, 1997; Valverde, 1991).

standing the role that first-wave feminism played with respect to eugenics legislation requires a consideration and analysis of the significance of the ideology of maternal feminism, and the connection between this ideology and mental health concerns at the turn of the century in Western Canada. Indeed, the practices of sterilization were part of a general set of practices intended to alleviate mental illness, family distress, and poverty. We are particularly interested in examining Alberta as a case study through which to understand the historical and social issues that led to the alliance of eugenics and first-wave feminism. As historians of eugenics have noted in recent years, it is important that the history of sterilization practices be delineated at the local level to prevent the erroneous belief that there was a single historical event (Klausen, 2009).

Eugenics and the Epidemic of Mental Illness

Galton's theories concerning eugenics generated interest in the notion of the heredity of human traits, particularly after the publication of Gregor Mendel's research on genetics (Kevles, 1999). The ensuing crude belief was that genetics were entirely responsible for the constitution and character of human beings. Thus, it was thought that not only were physical characteristics passed down through the generations, but that intellectual and moral characteristics, as well as emotional disorders, could be passed down as well (Dowbiggin, 2008; Levine, 2005). Ultimately, one's biology determined who one would become. Mental illness and retardation were consequently thought to be primarily the result of defective genetics (Rennie, 2000). These views continued to be held by policymakers and medical practitioners despite geneticists establishing in the early 1900s that this hereditarian notion of genetics was not scientifically supported (Ludmerer, 1972).

The renewed interest in Galton's work was also due to social and political issues arising during the early 20th century, particularly in North America. There was substantial concern regarding the quality of the population (or "stock") and the quality of future generations; as Edwin Black (2003) has noted in the context of the United States, "America was ready for eugenics before eugenics was ready for America" (p. 21). World War I also had a significant impact on eugenic notions. According to popular opinion of the time, the highest valued members of society (i.e., men with high levels of mental and moral character) were being shipped off to die in the battlefields of Europe, while the mentally defective and feeble-minded were left at home, free to reproduce (Levine, 2005). Feeble-mindedness was the term typically used to describe individuals with mental retardation, but it was also applied to individuals with a variety of other mental disorders (Kevles, 1999) as well as those displaying "immoral behaviour" such as criminal acts and/or sexual promiscuity (Kline, 2001). In addition, birthrates were declining among the Anglo-Saxon population. Birthrates among the college-educated, professional class were especially low in comparison to birthrates among lower classes and immigrants (Katz, 2003). These latter two groups were perceived as being particularly fertile and as including a large proportion of feeble-minded individuals. In fact, Havelock Ellis, the well-known sex researcher and proponent of the eugenics movement in the early 20th century, estimated that feeble-minded individuals had one third more children than normal individuals (Ellis, 1912). He attributed the higher birthrate among feeble-minded individuals to

their lack of self-control and restraint in conjunction with their high libido (Ellis, 1912).²

Together, these factors led to the perception that there was an increasing proportion of feeble-minded or mentally deficient individuals present in society (e.g., Black, 2003; McLaren, 1990). In the words of A.G. Nichols (1870–1946), a physician and one-time editor of the *Canadian Medical Association Journal*, breeding was occurring from the bottom up rather than from the top down (Nichols, 1930). A panic ensued around this epidemic of mental illness. Nichols (1930, p. 91) reported, "it is stated, on excellent authority, that there are now three times as many persons afflicted with mental disease in proportion to the total population as there were 50 years ago." This sentiment was echoed by the Hon. H. A. Bruce, the Lieutenant-Governor of Ontario, (1933, p. 260) who quoted Henry Martin Robinson in 1933 as saying, "If the present rate of increase in mental cases continues for the next three-quarters of a century, half the population of the United States will be in insane asylums and the other half will labour solely to support them." Bruce (1933) added, "life and thought here in Canada are much the same as in the United States and if that dire prediction is a sound one, as it seems to be, we cannot expect a happier outcome in our own country unless action is taken to defeat the disintegrating forces which are now at work unhindered" (p. 260).

The belief that this segment of the population was reproducing at an alarming rate was combined with "the inviolable law of nature that like begets like" (Bruce, 1933, p. 261). This hereditarian attitude was prevalent within the Canadian, and particularly Western Canadian, health care systems (Clarke, 1973). Consequently, there was strong concern about the impending decline of civilization, as Bruce (1933) stated:

By sheer weight of numbers the mentally deficient—the most prolific of all mankind—constitute such a threat to the well-being of the state as to imperil its very existence . . . whereas material wealth can be replaced by man, God's wealth of heredity stored in the germ cells if once lost can never, never be recovered (p. 262).

The prevailing sentiment was that the health of the nation was in jeopardy as a result of mental defectiveness (Dowbiggin, 2008). Thus, eugenics garnered a substantial amount of support (Kevles, 1999) as the attempt to find a cure for "the cancer of mental deficiency" became a major preoccupation (Clarke, 1973). Efforts focusing on improving the race were of utmost importance. What exactly constituted the term *race* during the early 1900s was a complicated matter, given that it concurrently held a variety of different meanings (Valverde, 1992). Race was deeply intertwined with social class, religion, ethnicity, country of origin, social values, and morality. At the same time, Canada was seeing a substantial influx of immigration. Whereas immigrants from Great Britain were perceived as kin, other groups were foreigners. Even

² All forms of feeble-mindedness (or "unfitness") were viewed as inherited conditions. The lack of understanding of genetics led to faulty beliefs about the transmission of various characteristics between parents and offspring (Ellis, 1912). For example, Margaret Sanger, an American proponent of eugenics as well as birth control, stated that, "there should be no children when either mother or father suffers from such diseases as tuberculosis, gonorrhoea, syphilis, cancer, epilepsy, insanity, drunkenness, and mental disorders" (Sanger, 1920, p. 87).

J. S. Woodsworth (1874–1942), a founder of the Cooperative Commonwealth Federation was not only interested in social reform but saw eugenics as a component of that reform. The Anglo-Saxon Protestant was the exemplar of the human race, and concern around preserving the race ultimately meant safeguarding the characteristics of the Anglo-Saxon race (e.g., educated, White, middle- to upper class, and Protestant) (Valverde, 1992). In English Canada, there was a strong emphasis on being a British subject, and immigrants were evaluated based on the degree to which they could easily assimilate and integrate with the Anglo-Saxon culture (Woodsworth, 1909).

Mental Health and Eugenics in Alberta

In Alberta prior to 1911, the issue of insanity fell into the legal domain involving a magistrate. Prior to the establishment of Provincial health departments, the Attorney General's Department had jurisdiction over the insane; consequently, many individuals with mental illness were kept in prisons. However, 1911 marked the opening of the Ponoka Mental Hospital, the first hospital facility for the insane in the province. In 1925, a "Board of Visitors" was formed, with the purpose of inspecting the conditions of mental institutions, such as the Ponoka Hospital, in the province. The first board was composed of five members: Mrs. Emily Murphy, Mrs. Jean Field, Mrs. J. Anderson, Mr. W. Botterhill, and Dr. J. M. MacEachran. MacEachran was the only Canadian to have studied with Wilhelm Wundt, and MacEachran himself was the founder of the Department of Psychology and Philosophy at the University of Alberta. This board not only had a strong agrarian and eugenic flavor, but also counted three females amongst its members (Clarke, 1973). The first report generated by the Board of Visitors strongly emphasised the hereditary nature and promulgation of insanity. Consequently, the Board advocated for the adoption of eugenic principles to resolve this menacing issue. Three years after the formation of the Board of Visitors, the provincial government³ instituted the Sexual Sterilization Act and the Alberta Eugenics Board was formed to enact the sterilization program stipulated by this Act (Grekul, Krahn, & Odynak, 2004). The Alberta Eugenics Board replaced the Board of Visitors; however, two of the members from the Board of Visitors—Jean Field and John MacEachran—joined the newly formed Eugenics Board (Clarke, 1973). The Alberta Eugenics Board was charged with the responsibility of reviewing and approving all sexual sterilization cases. While Alberta and British Columbia were the only Canadian provinces that had legislation allowing for involuntary sterilization, Alberta sterilized 10 times as many individuals (almost 3,000) as her neighboring province (Grekul et al., 2004).

The support for eugenics on the Canadian prairies was based on three factors: First, geography had a significant impact on the interest these provinces had with respect to eugenics (Wahlsten, 1997). Given the geographic proximity these provinces shared with the states directly south of their border, American policies, procedures, and legislature were, in a sense, more relevant to prairie dwellers and their respective governments than influences emanating from Eastern Canada. Emerging American eugenic trends were welcomed in Western Canada. Second, strong anti-immigration sentiment and a low tolerance for racial diversity were common. The new immigrants were believed to be more

predisposed toward feeble-mindedness and mental illness than the Anglo-Saxon majority (Grekul et al., 2004).

A third key factor that was influential in obtaining support for eugenics was the fact that the prairie provinces were primarily agrarian societies. As agrarian societies, these provinces had extremely powerful farming associations, which exerted significant control over the government and were responsible for lobbying for various forms of legislature (Rennie, 2000). The United Farm Association of Alberta had a women's division within the organization entitled the United Farm Women of Alberta (UFWA), which was established in 1915. One of the primary aims of the UFWA was health care within the province. When The United Farm Association of Alberta formed the provincial government in 1921, the UFWA had increased their influence on health care policies in the province. While the initial interest of the UFWA was in terms of physical health care, their scope extended to mental health care needs of the province following a series of public lectures given by Dr. Cooke, the Superintendent of the Ponoka Mental Hospital. Cooke educated the UFWA on mental hygiene and mental defects in the Alberta context, which became a catalyst for the future involvement of the UFWA in mental health care (Clarke, 1973). For the UFWA, it was only a matter of time before eugenics became incorporated within their mandate of meeting the public health care needs of the province (Rennie, 2000). In fact, Jean Field, the Health Convenor of the provincial UFWA, was the one who initially introduced a broad sterilization resolution. As a member of the Visitors Board, she had established extensive connections with the California eugenicists and modelled her resolution on much of what she had learned from that state (Clarke, 1973). Jean Field later went on to become one of the founding members on the Alberta Eugenics Board and remained on the Board until 1948, thereby maintaining the connection of the UFWA to the eugenics movement from the very inception of the movement to its ultimate culmination in the Sexual Sterilization Act. It was largely due to Jean Field's efforts that the UFWA became a forceful voice in advocating and generating public support for the sterilization of feeble-minded individuals in the province (Christian, 1973).

Eugenicists and the Birth of Maternal Feminism

Despite the later involvement of many women's organisations and associations in the campaign for sexual sterilization, the early origins of the eugenic movement had an antifeminist flavor. The early founders of the movement, such as C.W. Saleeby (a Scottish physician) and Galton, had very clear views of what activities women should and should not engage in, and Saleeby clearly articulated that the activities supported by first-wave feminists were certainly not appropriate (Saleeby, 1909). Galton's perception was that the primary responsibility of women was to pass along inherited talents and abilities (Devereux, 2005). A popular conception at the time was that there was greater genetic variability amongst males than females. Therefore, females were simply

³ The United Farmers of Alberta, originally a nonpartisan organization that lobbied for farmers, defeated the ruling Liberals and formed the Government in 1921. They were re-elected in 1926 and 1930 with approximately 40% of the vote each time and would rule until 1935 when the Social Credit Party of Alberta defeated them.

the mechanism by which characteristics were passed down, while males determined the course of evolution (Valverde, 1992). Consequently, controlling female sexuality and reproduction was a key tenet for traditional eugenic theory. Galton went so far as to voice his opinion against suffrage and list himself as one of the supporters of antisuffrage (Love, 1979; Saleeby, 1909). Eugenicists of the day felt that enabling women to vote and allowing them to be involved with politics would not only negatively impact their reproductive abilities, but would result in women engaging in activities that were incompatible with motherhood (Saleeby, 1909).

Some of Galton's later contemporaries had more lenient views of first-wave feminism, to the extent that certain eugenicists involved women in eugenics research and were in favour of the adoption of feminist causes. As initiated and propagated by Davenport and Goddard during the early 20th century, women were invited to become eugenics researchers, which was a significant coup given their general exclusion from other domains of scientific research (Larson, 1995). The women researchers trained at Davenport's Eugenic Records Office and Davenport, in turn, gave lectures at various Women's Clubs, which served to attract more women to the cause. In general, the eugenicists that followed in Galton's footsteps adopted the attitude that man and ultimately the human race were dependent to a large degree on the role that women, particularly mothers, played in society. Consequently, it was argued that men had a vested interest in the woman's movement. One of the eugenicists who was particularly vocal in his support for feminist reforms was Havelock Ellis. Ellis openly advocated for women's causes, as evidenced in his own writing and his correspondence with prominent feminists of the day such as Margaret Sanger (Katz, 2003). According to Ellis, support for women's liberation was crucially important to the development of eugenics. He believed that endowing greater liberties to women, such as the right to vote, would enable them to focus their efforts and energies more fully on eugenic causes (Devereux, 2005). In particular, he felt that women needed to focus on the crucial function of motherhood, as he considered their most important role to be mothers of the race (Ellis, 1912). He noted that, "the most vital problem before our civilization to-day is the problem of motherhood, the question of creating the human beings best fitted for modern life, the practical realisation of a sound eugenics" (Ellis, 1912, p. 86).

From the perspective of second-wave feminism, some scholars have argued that the eugenicists that embraced first-wave feminism had a hidden agenda (Bacchi, 1983). Rather than being altruistically interested in equality for women (as later feminists might put it), they were interested in supporting causes that would improve the maternal capacity of women and ultimately contribute to the betterment of the race (by ensuring that Anglo-Saxon characteristics were not destroyed). In that sense, the views of the later eugenicists were quite similar to the early eugenicists such as Galton because they emphasised the importance of motherhood and all the activities that motherhood entailed. Moreover, the importance of controlling female sexuality (i.e., condemning any immoral sexual behaviour, such as premarital or extramarital sexual encounters) continued to be of great importance. According to the later eugenicists, however, women were not solely breeders, akin to Galton's theories, but their primary value and function was related to their maternal functions. Thus, although the packaging

may have been different, the fundamental belief was essentially the same. Motherhood, and everything related to motherhood, was the best that women could offer to society. Ellis himself noted that motherhood was the only domain in which women could ever have superiority over men (Ellis, 1912).

Whatever their motives may have been, later eugenicists welcomed women into the eugenics cause. Not only were women vital for their childbearing capacities, but they also played a crucial role in the moral education and reform of society (Strong-Boag, 1997; Valverde, 1992).⁴ Thus, women came to be valued in terms of their "mothering" abilities. The continuance of the race meant not only fighting against racial degeneration, but also ensuring the proper environmental conditions for the race. Therefore, given the socio-political climate in conjunction with the attitudes and support of later eugenicists, first-wave feminism adopted a maternal approach in their ideology (Strong-Boag, 1997). Under the rubric of maternal feminism, women were perceived as being an integral part of ensuring the continuance and quality of the Anglo-Saxon Protestant stock (Strong-Boag, 1997). Women were deemed "guardians of the race" (McClung, 1915/1972, p. 22), and the job of mothering the race provided them with a necessary and valuable social function. In a sense, eugenics enabled feminism to carve out a niche for itself. Maternal feminism became an acceptable front from which feminists could push for their liberation interests (Valverde, 1992). Woman's role as guardian of the race was taken seriously, and the adoption of eugenic practices fit within the mandate to lead social reform and progress. Despite this, it is important to note that not all components of traditional eugenics theory was entirely in line with the views espoused by prominent feminists of the day (i.e., especially those of notable American feminists Margaret Sanger, Victoria Woodhull, and Charlotte Perkins Gilman) (Ziegler, 2008). On the one hand, eugenicists were interested in controlling female sexuality and reproductive behaviour, given that sexually "immoral" behaviour could classify one as feeble-minded (Kline, 2001). However, women appeared to be more likely labelled as sexually promiscuous and, consequently, feeble-minded than men. In Alberta, for example, Grekul et al. (2004) have argued that up to 23% of the cases of female clients of the Alberta Eugenics Board contained references to potential promiscuity whereas only 2 of 77 male cases did so.⁵ The control of female sexuality was in direct contradiction to the important feminist ideal of sexual liberty and freedom, which resulted in ongoing tension between feminism and the eugenics movement. In order to resolve this tension, some feminists, including the three American feminists mentioned above, attempted to redefine eugenics and create a new theory of eugenic feminism

⁴ Strong-Boag and Valverde both explore the relationship between feminism and eugenics in the context of the 1990s, in the wake of second-wave feminism (early 1960s to late 1970s), a period of time in which there was greater acknowledgement and exploration of the racist and classist politics of first-wave feminism. From this perspective, Strong-Boag and Valverde provide a critical analysis of the impact of colonialism, race, and class with respect to first-wave feminism, and argue that there was no single all-encompassing feminism that represented women's experience in the early 20th century.

⁵ The analysis was based on the remaining 861 files of the Alberta Eugenics Board, a much reduced sample of the original 4,785 files. Most of the files were destroyed in 1988 on order of the Public Records Commission in Alberta.

(Ziegler, 2008). This redefined theory, however, was never accepted by mainstream eugenicists.

Maternal Feminism, Mental Health, and Eugenics in Alberta

In Alberta, there were many women's groups that were involved in the well-being of the province, including: the UFWA, The National Council of Women, the Imperial Order of Daughters of the Empire, the Women's Christian Temperance Union, and Alberta's Women's Institutes. These groups were particularly interested in advancing societal reforms, and the concept of maternal feminism fit into the Canadian context and feminist ideology of the time. Five Canadian women who are particularly well-known for their advocacy on behalf of women's rights: Emily Murphy, Henrietta Muir Edwards, Louise McKinney, Nellie McClung, and Irene Parlby, known as the *Famous Five*,⁶ all shared the notion of maternal feminism (Devereux, 2005; Valverde, 1991). While these women fought for greater rights and liberties for their Anglo-Saxon counterparts, they all believed in the primacy of motherhood (Devereux, 2005). According to the Famous Five, the instinct of womanhood was the instinct to serve and save the race (McClung, 1915/1972). For these women, achieving the right to participate in the public sphere (e.g., suffrage) was truly a matter of greater social good. Irene Parlby, who was also the president of the UFWA, failed to see any incongruence between believing in women's ability to participate as well as advocating for the chief function of women as mothers (McKinlay, 1953). Given that motherhood involved the care of future generations, it was believed that it should be every woman's number one priority. Essentially, women were perceived as being above men because of their role as mothers and bearers of the future, and leaders of first-wave feminism, such as Nellie McClung, argued that women needed to use their superior morality for the good of the race (McClung, 1915/1972). As stated by McClung, "the hand that rocks the cradle does not rule the world. If it did, human life would be held dearer and the world would be a sweeter, cleaner, safer place than it is now!" (McClung, 1915/1972, p. 22).

According to these feminists, women could only exercise their superior morality if given the opportunity via greater rights and political involvement (Fiamengo, 2002; Strong-Boag, 1997). Although maternal feminism may be perceived as an attempt to accept greater rights for women under the guise of the primacy of motherhood, the first-wave feminist movement did not appear to have a hidden agenda. They proclaimed that their function was to bring children into the world and ensure that they created a world that was better for them to live in (McClung, 1915/1972). In line with the notion of preserving the Anglo-Saxon race, feminists of the time became involved in a variety of different causes that they felt could have significant repercussions on the development of society. Emily Murphy, Louise McKinney, and Nellie McClung were all fierce social activists in the pursuit of female political rights, issues of racism, prohibition, and were all, in some way, interested in problems of mental illness (Clarke, 1973; Gray, 2008). Within first-wave feminism, there was a very clear sense about which women were best suited to lead social progress (Fiamengo, 2002). Unfit women—those with mental defects—were not considered qualified to mother the race. Campaigning for the adoption of eugenic practices was, therefore, in accordance

with their function of race preservation. In addition, European women, particularly women of British descent, were generally considered to be higher on the evolutionary scale and hence better qualified as mothers (Valverde, 1992).

Both Emily Murphy and Louise McKinney gave their full support to the implementation of sterilization laws within the Alberta legislature (Clarke, 1973). Prior to 1911, the issue of insanity fell into the legal domain in Alberta and involved the magistrate. Thus, Emily Murphy, as the first woman police magistrate in Canada and the first woman magistrate in the British Empire, was originally in a position to review insanity cases as these individuals passed through the court system on their way to the Ponoka Mental Hospital. Consequently, she was by profession confronted with many social ills, including "lunacy." From 1906 on, the magistrate had to be provided with the family history—this is the period when family trees were used by eugenicists to make their case (Gould, 1981)—and a report on the physical condition of the insane person. In addition to her work as magistrate, Murphy also served as a founding member on the Board of Visitors. Through her experiences in both of these positions, Murphy was very much influenced with and affected by the cases with which she was confronted and she perceived Alberta to be particularly progressive in the adoption of eugenic practices.⁷ She wrote in the *Vancouver Sun* (Murphy, 1932) that "The only portion of the British Empire which has officially adopted permissive eugenical sterilization of the insane and feeble-minded is the Province of Alberta You are quite right: Alberta prefers to lead the followers rather than follow the leaders."

Murphy argued that sterilization was necessary in order to control the fecundity of the feeble-minded. She cited figures indicating that mentally defective individuals procreated at rates two to six times faster than the normal population (Murphy, 1932). Thus, akin to the views of eugenicists of the time, Murphy affirmed the sentiment that the fertility of unfit individuals was alarming and a threat to the race. Population control, or control of individuals not fitting the mold of the "fit Anglo-Saxon," was of paramount importance. It appears that Murphy did not view compulsory sterilization as a particular loss for the individuals who underwent the operation, but rather an opportunity for them to live happy, fulfilled lives beyond the asylum walls. Murphy spoke on the necessity of sexual sterilization of mental defectives at organized women's meetings throughout the province. Drawing upon her experiences as both magistrate and membership on the Board of Visitors, she was forceful in arguing that the mentally defective needed to be prevented from reproducing more of their kind (Christian, 1973).

It was in large part due to Murphy's campaigning that the Government of Alberta drafted the 1928 Sexual Sterilization Act (Sexual Sterilization Act, 1928) and created the Alberta Eugenics

⁶ The Famous Five were well known as the group of women who successfully petitioned against the British North America Act (the act creating Canada in 1867) that deemed that women were not considered "persons" in the eyes of Canadian law. As a consequence of the petition initiated by the Famous Five, the British Privy Council declared on October 18, 1929 that women are indeed persons.

⁷ One had to be a "dangerous lunatic" to be admitted to the provincial mental hospital, which meant that the magistrate had to convict people of insanity (Clarke, 1973).

Board to carry out the provisions stipulated by this Act. A key part of the act was that the individual, or his or her parents or guardian, were required to consent to the operation if the procedure was to take place, regardless of the board's opinion. However, in 1937, the act was amended by the Social Credit Government to address the issue of consent (*Sexual Sterilization Act, 1937*). In the amendment, consent was no longer required if an individual was deemed mentally defective (mental defectiveness referred to mental retardation or any mental condition leading to arrested development). While consent continued to be required in order to surgically operate on psychotic individuals, the board had complete power over sterilization decisions for mentally defective individuals. The act states:

If, upon examination of any mentally defective person, the Board is unanimously of the opinion that the exercise of power of procreation would result in the transmission to such person's progeny of any mental disability or deficiency, or that the exercise of the power or procreation by any such mentally defective person involves the risk of mental injury either to such person or to his progeny, the Board may direct, in writing, such surgical operation for the sexual sterilization of such mentally defective person as may be specified in the written direction and shall appoint some competent surgeon to perform the operation (*Sexual Sterilization Act, 1937*).

Notably, there was overwhelming approval for the Sexual Sterilization Act from numerous women's associations, including the UFWA (*Clarke, 1973*). Prior to the final passage of the Sexual Sterilization Act in 1928, it received strong approval from innumerable UFWA locals. Moreover, the UFWA was an ardent supporter of the subsequent amendments and resulting expansion of the original Act. For example, on December 31, 1932 Mrs. K. Anderson Bell of the Okotoks UFWA chapter wrote directly to the minister of health, George Hoadley, and said:

In connection with the resolution asking for the strengthening of the Sexual Sterilization Act which our local has sent in for the agenda of the Annual Convention, I should be glad to have any facts which your Department has gathered about the growth of [the] mental deficiency problem I am down to speak to this resolution and although I mean to deal with it in a general way—to open the discussion, I should like to have particulars of some of the serious cases & resultant progeny. The amendment that the Okotoks UFWA was proposing included the following:

“Amendment Sterilization Act, Okotoks U.F.W.A.:

Whereas, the large increase in our feeble-minded and mentally unfit population is a grave menace; and

Whereas, the power given to the authorities to cope with the situation under the terms of the Sexual Sterilization Act is limited to hospital cases;

Therefore be it resolved, that the Government be asked to amend the Act so as to remove its limitations and make it applicable to every known case in the Province” (*Eugenics Board Minutes, 1933–34*).

While asking for the “strengthening” of the legislation, the chapter needed support in the form of data to which it did not have access. The resolution was obviously more ideological than based on presumed necessity. The minister was quite happy to provide this support because he, in turn, needed the support of the UFWA

for the continuing legitimacy of the sterilization program. He wrote an immediate memo to his deputy minister on January 3, 1933 that included the following, “I should like you to prepare something for Mrs. Bell to be used at the convention.” The deputy minister in turn requested that C. A. Baragar, the Commissioner of Mental Institutions and Director of Mental Health, provide support for Mrs. Bell. Baragar would later be the first author of an extensive report on the practices approved by the Alberta Eugenics Board in its first 4 years (*Baragar, Davidson, McAlister, & McCullough, 1935*). Within 4 days, on January 9, 1933, Baragar sent K. Anderson Bell a substantial set of documents including tables of data, and indicated in his letter that “The problem [of mental defectives] has existed as a serious one all along, but for various reasons it is being brought more and more to our attention, and is growing probably numerically, but certainly in seriousness and importance.” In fact, none of the data indicate that the problem was becoming more serious. However, Baragar adds the following in his letter:

On account of the necessity for securing consent in all cases there are a number of cases in which sexual sterilization would be strongly advisable and with respect to whom consent cannot be obtained either because the individual through lack of the sense of responsibility or intelligence does not see the reason for it, or in cases where incapable of giving consent the relatives take the same attitude Again there are women who, though they have never had a mental breakdown, and who are not mentally defective, yet whose mental stability is so affected by child birth that they should be saved that burden and trial, but they do not come within the meaning of the Act (*Eugenics Board Minutes, 1933–34*).

Mrs. Bell responded enthusiastically to the receipt of this information. Although the act would not be changed until 1937 as noted above, it was clear that the government and the UFWA were in agreement, as was the Board itself, that the Act could be expanded. In the case of Alberta, there was no obvious sign of dissent among the elites of the province. In fact, the only notable dissension came in the form of letters written by members and clergy of the Catholic Church.

The UFWA remained interested in the workings of the Alberta Eugenics Board after the United Farmers of Alberta lost the election of 1935 and the Social Credit Party formed the government. On October 28, 1937 the second UFWA vice-president wrote the Board with a request. The UFWA was once again considering a resolution at their next convention that would call for a broadening of the Act:

We are asking for a further broadening of the sterilization act so as to include cases not at present in the Mental Hospitals. Do these “problem cases” come under the jurisdiction of the Mental Hygiene Clinics and can they be dealt with even if they are not patients in either the Mental Hospital or Red Deer? What would be the best way (in case of any suspected case) of having same brought to the attention of the Clinic in rural districts where there is no district nurse?

By this time the act had been amended to allow just such cases to be sterilized. As Board member E. G. Mason indicated in his response to the UFWA on November 2, 1937:

At the regular session of the Legislature in 1937 the Act was amended to provide that mentally defective cases could be examined for presentation to the Alberta Eugenics Board at any of the Mental Hygiene

Clinics held throughout the province . . . The Sterilization Act was further amended to provide that mentally defective persons may be sterilized without their consent, if in the unanimous opinion of the Board they are through their mental deficiency incapable of forming a reasoned judgment, and there is a danger of procreating their kind (*Eugenics Board Minutes, 1937*).

It should be noted that the Board routinely discussed the possibility of expanding the powers of the Act (to include, e.g., epilepsy as a cause for sterilization) and requested meetings with the government on occasion to discuss these possibilities. The Act was amended again in 1942 to allow sterilization of individuals with certain severe forms of medical illnesses such as epilepsy. Thus, the UFWA and prominent women of the time, including Emily Murphy, became forceful voices in advocating and generating public support for the sterilization of feeble-minded individuals in the province (*Christian, 1973*).

The Legislative Assembly finally repealed the act in 1972 after over 2,800 Alberta residents were sterilized (*Wahlsten, 1997, 1999*). The Progressive Conservative party won the 1971 election and they made it a priority to repeal this legislation, much to the chagrin of members of the Alberta Eugenics Board.

Understanding the Relationship Between First-Wave Feminism and Eugenics

The racism, the xenophobia, the movements for sterilization and “positive eugenics” can be seen as adaptational tactics, helping to create a cognitive world picture through which particular individuals could impose a consoling order upon a continually shifting reality. Such ideas reaffirmed in terms comforting scientific the importance of the individual and his moral choices; their emotional appeal was strong indeed. (*Rosenberg, 1976, p. 53*)

Albertans as a whole were preoccupied with the perceived threats menacing the very fabric of society. In this time of social upheaval, first-wave feminism was in the initial throes of attempting to establish its course and direction. And first-wave feminism was exclusively for Anglo-Saxon women. The notion of “fitness” was connected with race and non-White individuals were lumped into the “unfit” category (*Rennie, 2000; Valverde, 1992*). For example, Anglo-Saxons were underrepresented amongst the cases presented to the Eugenics Board, whereas Aboriginals were notably overrepresented. In fact, Aboriginals were the most prominent victims of forced sexual sterilization, given that they made up 6% of all cases presented to the Eugenics Board but represented only 2–3% of the province’s population (*Grekul et al., 2004*). In general, individuals of other races were seen as inferior in terms of both morality and mental abilities. Moreover, individuals from other races were seen as more prone to feeble-mindedness and insanity (*Valverde, 1992*). Emily Murphy warned in her writings of the dangers of immigrant groups—the promiscuity of African Americans and the narcotic-obsessed ways of the Asian communities (*Murphy, 1922*). Murphy perceived these groups as capable of leading the Anglo-Saxon population astray. Murphy’s views were affirmed by other feminists and Alberta women of the day. For example, members of the UFWA wore white ribbons pinned to their dresses to symbolize their commitment to the purity (and “whiteness”) of the race (*Valverde, 1992*). Given that individuals of other races were viewed as having a greater propensity toward feeble-mindedness and as liable for racial degeneration, it was easy

to imagine the necessity of sterilizing such people. And women, as mothers of the race, assumed responsibility for ensuring the continuity of a pure breed of Anglo-Saxon individuals, who were both physically and mentally healthy.

Beyond the cultural forces that had a significant impact on shaping the maternal feminist movement, there are several other factors worthy of consideration. First, as we have already noted above, the general perception of the hereditary nature of mental illness in the early 1900s may have also contributed to the intertwining of maternal feminism and eugenics. Despite contrary evidence from geneticists at the time, the prevailing view of policymakers, medical practitioners, and laypersons was that defective genes were largely responsible for mental illness (*Rennie, 2000*), and mental deficiencies, in turn, were seen as the direct cause of all social ills, including crime, delinquency, alcoholism, prostitution, and other sexual deviancy (*Clarke, 1973*). Moreover, due to a lack of widespread knowledge of genetics, the general claim was that if a parent was feeble-minded or possessed some sort of mental illness, then it was almost a guarantee that the child would manifest a similar affliction. Consequently, these offspring with mental afflictions, would be condemned to “a life of misery” and complete dependence upon the community (*Katz, 2003*). For example, Emily Murphy declared that a child’s future could be predicted by his or her ancestry and heritage. In her writings, she stated that physicians at Ponoka, the mental institution in Alberta, reported that 90% of “insanity” could be directly traced to an individual’s heredity (*Murphy, 1932*).

Second, there is a sense that feminists perceived the eugenic practices as being in the best interests of the feeble-minded individuals. Thus, in their aim to “care for the race” they were caring for these members of society in a manner that they viewed as benevolent and protective. From a maternal feminist perspective, women’s role was to safeguard both the morality and sexuality of society. For example, Helen MacMurchy⁸ once stated:

It is the age of true democracy that will not only give one justice, but will redeem the waste products of humanity and give the mental defective all the chance he needs to develop his gifts and all the protection he needs to keep away from evils and temptations that he never will be grown-up enough to resist, and that society cannot afford to let him fall a victim to (cited in *Levine, 2005*).

According to MacMurchy, society’s ultimate goal was to protect these individuals. Given that it was believed that these individuals could not control their sexuality of their own volition, perhaps it was viewed as merciful to provide them a means to control it. Nellie McClung (1915/1972) further believed that sterilization protects innocent children from being brought into the world by feeble-minded parents. She wrote:

It is a doubtful favour to the child to bring it into life under any circumstances, but to bring children into the world, suffering from the handicaps caused by the ignorance, poverty, or criminality of the

⁸ Helen MacMurchy earned her M.D. in 1901 and was the first woman in the Department of Obstetrics and Gynaecology at Toronto General Hospital (*McConnachie, 1983; McLaren, 1990*). McLaren argues that MacMurchy “probably did more than any other individual in Canada in the first third of the twentieth century to alert the public to the dangers posed to public health” (*McLaren, p. 30*). Feeble-mindedness was one of those dangers, a clear threat to the “race”.

parents, is an appalling crime against the innocent and helpless, and yet one about which practically nothing is said (p. 88).

Similarly, Emily Murphy also stated that one of the main objectives of compulsory sterilization was to prevent sexual crimes against feeble-minded individuals, particularly sexual advances of normal males toward feeble-minded females (Murphy, 1932). She further highlighted that sterilization was more respectful of the rights of feeble-minded individuals than institutionalization. Her belief was that individuals could expect a happy existence following sterilization, knowing none the better that any component of their life was amiss. She wished to see feeble-minded individuals living in their home environment, as this would be the place in which they would most prosper. Quoting from the Royal Commission on Mental Hygiene she stated:

We question very seriously if the alternative proposed by opponents of sterilization—that is, complete institutional segregation during the whole of the reproductive period of life—is not a much greater invasion of personal rights, particularly in cases where the individual might live out a nearly normal life in the community after the possibility of procreation had been removed (cited in Murphy, 1932).

The irony was that a small number of cases discussed by the Alberta Eugenics Board were in fact voluntary requests for sterilization by women who did not wish to have any more children. For example, in 1941 a woman who had “deformed children” wrote the Alberta Eugenics Board requesting to be sterilized. The Board responded by suggesting she attend one of the local mental health clinics for further discussion (Eugenics Board Minutes, 1941). An extensive discussion took place at the Board during several meetings in 1951 about another woman requesting sterilization whose case was transferred between the Attorney General’s Office and the College of Physicians and finally sent to the Alberta Eugenics Board. The woman had given birth to children with “deformities” and the Board urged speedy resolution because “frequent conceptions occurred in the various branches of the (. . .) family, which almost invariably resulted in deformed progeny” (Eugenics Board Minutes, June 22, 1951). Sometimes it is parents who wish to proceed as quickly as possible with the sterilization of their offspring. Even as late as 1967 the Chairman of the Board (now R. K. Thomson) writes that “there have been occasions in which parents of children arriving at a Eugenics Board meeting have been upset because the operation could not be carried out after the meeting” (Eugenics Board Minutes, 1967).⁹ As Boschma (2008) has noted, there was reluctant support for sterilization law in Alberta among the settler families raising developmentally challenged children under especially trying conditions.

Birth control for the general population was a problematic and controversial issue in the early 1900s, given both the illegality (until 1969) and unreliability of existing birth control methods. While contraceptive practices (i.e., condoms, douches, and pessaries) and abortion were widely employed, these methods were not effective, reliable, or safe (McLaren & McLaren, 1997; Tone, 2001). However, women were becoming increasingly interested in the idea of birth control to have smaller families and ease the burden of motherhood, preserving marital and sexual intimacy with their husbands, and reducing economic strain on the family. Consequently, these women were going to great lengths to prevent pregnancies (McLaren & McLaren, 1997). However, even after the

advent of the birth control pill, it was only truly available to women who had sufficient money and means to obtain a physician’s prescription (Watkins, 1998). There is at least one case in the Eugenics Board files of a woman who receives a salpingectomy (surgery to remove the Fallopian tubes) even after taking birth control pills, because she requested one. Indeed, financial status may have played a significant role in the interest in voluntary sterilization. In Schoen’s (2005) study of the North Carolina Eugenics Board, she noted that women who sought sterilization “tended to be the poorest of the poor, and many petitioned for the operation because they felt unable to provide for the children they already had” (p. 114). Schoen notes that the interest in voluntary sterilization was also the result of (1) health problems related to constant childbearing and inadequate health care, and (2) the desire to enjoy sex without the fear of pregnancy.

In Canada, the interest in birth control existed for similar reasons. McLaren and McLaren (1997) noted that Canadians sought the advice of birth control proponents, Marie Stopes and Margaret Sanger. They argue that “it was because these women took so seriously the roles of wife and mother that they were turning to professional counsellors like Stopes to tell them how to respond to the new challenges of the 20th century” (p. 26). Interestingly, both Nellie McClung and Emily Murphy were initially opposed to birth control for the masses, as they were concerned that it undermined the importance and ideal of motherhood (McLaren & McLaren, 1997). Eugenicians were also opposed to the use of birth control as they believed that educated, Anglo-Saxon women were employing them at greater rates than the “unfit” members of society, thus further contributing to the differential fertility rates (Watkins, 1998). McLaren and McLaren (1997) wrote, “it was a cruel irony that many of the eugenically minded doctors who opposed the family limitation of the ‘fit’ were clamouring for the forced sterilization of the ‘unfit’” (pp. 30–31). McClung, Murphy, and eugenicians of the time were proponents of birth control, via sterilization, solely for women deemed unfit.

Conclusion

Despite maternal feminism’s acceptance of the political and cultural ethos of the time, it is important to note that the movement did have the intent of protecting vulnerable individuals and sought to look out for the best interests of the population. The ideal of sterilization as a means to care for unfit women (to enhance their potential opportunities—including release from a life of institutionalization) is clearly reflected in the writings of both Emily Murphy and Nellie McClung. Lack of knowledge and understanding regarding both mental illness and racial differences, and the unavailability of effective birth control, may have been significant contributing factors to the acceptance of eugenic principles.

⁹ Schoen (2005), too, notes the double-edged nature of reproductive technologies such as sterilization in her study of North Carolina; “the eugenic sterilization program did not function only as an assault on women’s reproductive autonomy. Ironically, it also offered access to a form of birth control that women desired” (p. 76). Of the 8,000 sterilization petitions filed in North Carolina between 1929 and 1975, Schoen (2005) found 468 petitions—446 for the sterilization of women and 22 for the sterilization of men—that she deemed voluntary requests for sterilization. See also Dowbiggin’s (2008) argument that the relationship between choice and coercion is not always straightforward in such cases.

The analysis of first-wave feminism has undergone dramatic shifts since the 1970s. First-wave feminists have gone from being admired, celebrated, and respected for their contributions, to being criticised for perpetuating stereotypes of women and seeking to protect the interests and privilege of the ruling Anglo-Saxon class. Fiamengo (2002) suggests a more balanced view may be achieved through a critical analysis that seeks neither to elevate these women to heroic status nor to villainize them by fixating on their failings. A broader perspective requires cognizance of the conflicts that existed between genders as well as those that existed between women as a result of divergent racial, class, and cultural identities.

Résumé

Dans le contexte de la relation complexe entre le féminisme du début du 20^e siècle et l'eugénique, l'Ouest du Canada et l'Alberta, en particulier, fournissent une étude de cas unique sur l'histoire et la pratique de la stérilisation des « faibles d'esprit ». Si le féminisme cherchait à permettre aux femmes de maîtriser leurs propres capacités de reproduction, l'eugénique, quant à elle, cherchait à restreindre la reproduction de certains segments de la société. Ironiquement, ces deux mouvements ont eu une importante influence l'un sur l'autre dès leurs débuts et ont été inextricablement liés pendant plus de 50 ans. Cet article explique en quoi une méconnaissance de la maladie mentale et la panique qu'elle suscitait ont servi à lier le féminisme et le mouvement eugéniste. Il examine en particulier en quoi l'idéologie maternaliste de la première vague de féminisme en est venue à embrasser la notion de « gardiennes de la race ». Sont donc décrits à la fois le déroulement des événements dans l'Ouest du Canada et le rôle d'éminentes féministes et des associations de femmes de l'époque. Finalement, il est soutenu que pour comprendre le rôle du mouvement féministe dans la mise en vigueur de la réglementation sur l'eugénique, il faut tenir compte de l'importance du féminisme maternaliste dans l'évolution des relations entre les sexes.

Mots-clés : eugénique, féminisme, faible d'esprit, stérilisation, Alberta.

References

- Bacchi, C. L. (1983). *Liberation deferred?* Toronto, Canada: University of Toronto Press.
- Baragar, C. A., Davidson, G. A., McAlister, W. J., & McCullough, D. L. (1935). Sexual sterilization: Four years experience in Alberta. *The American Journal of Psychiatry*, 91, 897–923.
- Black, E. (2003). *War against the weak: Eugenics and America's campaign to create a master race*. New York, NY: Four Walls Eight Windows.
- Boschma, G. (2008). A Family point of view: Negotiating asylum care in Alberta, 1905–1930. *Canadian Bulletin of Medical History*, 25, 367–389.
- Bruce, H. A. (1933). Sterilization of the feeble minded. *Canadian Medical Association Journal*, 29, 260–263.
- Christian, T. (1973). *The mentally ill and human rights in Alberta: A study of the Alberta Sexual Sterilization Act*. Edmonton, Canada: Faculty of Law, University of Alberta, Edmonton.
- Clarke, I. H. (1973). *Public provisions for the mentally ill in Alberta, 1907–1936* (Unpublished master's thesis). University of Calgary, Alberta, Canada.
- Devereux, C. (2005). *Growing a race*. Montreal, Canada: McGill-Queen's University Press.
- Dowbiggin, I. (1997). *Keeping America sane: Psychiatry and eugenics in the United States and Canada, 1880–1940*. Ithaca, NY: Cornell University Press.
- Dowbiggin, I. (2008). *The sterilization movement and global fertility in the twentieth century*. New York, NY: Oxford University Press.
- Ellis, H. (1912). *The task of social hygiene*. Boston, MA: Houghton Mifflin Company.
- Eugenics Board Minutes. (1925–1971). Accession GR1988.0211. Edmonton, Canada: Provincial Archives of Alberta.
- Fiamengo, J. (2002). A legacy of ambivalence: Responses to Nellie McClung. In V. Strong-Boag, M. Gleason, & A. Perry (Eds.), *Rethinking Canada: The promise of women's history* (4th ed., pp. 149–163). Toronto, Canada: Oxford University Press.
- Galton, F. (1883). *Inquiries into human faculty and its development*. London, UK: Macmillan. doi:10.1037/14178-000
- Gould, S. J. (1981). *The mismeasure of man*. New York, NY: Norton.
- Gray, C. (2008). *Nellie McClung*. Toronto, Canada: Penguin Canada.
- Grekul, J., Krahn, H., & Odynak, D. (2004). Sterilizing the “feeble-minded”: Eugenics in Alberta, Canada, 1929–1972. *Journal of Historical Sociology*, 17, 358–384. doi:10.1111/j.1467-6443.2004.00237.x
- Katz, E. (Ed.). (2003). *The selected papers of Margaret Sanger*. Urbana, IL: University of Illinois Press.
- Kevels, D. J. (1999). Eugenics and human rights. *British Medical Journal*, 319, 435–438. doi:10.1136/bmj.319.7207.435
- Klausen, S. (2009). Rethinking reproduction: New approaches to the history of sexuality, gender, the family, and reproductive control. *Journal of Contemporary History*, 44, 117–127. doi:10.1177/0022009408098650
- Kline, W. (2001). *Building a better race: Gender, sexuality, and eugenics from the turn of the century to the baby boom*. Berkeley, CA: University of California Press.
- Kluchin, R. (2006). Social engineering in the United States: Eugenics and euthanasia. *American Studies*, 47, 155–162.
- Larson, E. J. (1995). In the finest, most womanly way: Women in the southern eugenics movement. *The American Journal of Legal History*, 39, 119–147. doi:10.2307/845898
- Levine, A. (2005). Perfect people, perfect country: Canada had no place for the feeble-minded—At least according to the gospel of eugenics. *The Beaver: Exploring Canada's History, April 1*. Retrieved from <http://www.highbeam.com/doc/1G1-131126853.html>
- Love, R. (1979). ‘Alice in eugenics-land’: Feminism and eugenics in the scientific careers of Alice Lee and Ethel Elderton. *Annals of Science*, 36, 145–158. doi:10.1080/0003379790200451
- Ludmerer, K. M. (1972). *Genetics and American society: A historical appraisal*. Baltimore, MD: John Hopkins University Press.
- McClung, N. L. (1972). *In times like these*. Toronto, Canada: University of Toronto Press. (Original work published 1915)
- McConnachie, K. (1983). Methodology in the study of women in history: A case study of Helen MacMurchy, M.D. *Ontario History*, 75, 61–70.
- McKinlay, C. M. (1953). *The honorable Irene Parlby*. Edmonton, Canada: University of Alberta.
- McLaren, A. (1990). *Our own master's race. Eugenics in Canada, 1885–1945*. Toronto, Canada: University of Toronto Press.
- McLaren, A., & McLaren, A. T. (1997). *The bedroom and the state: The changing practices and politics of contraception and abortion in Canada*. Toronto, Canada: Oxford University Press.
- Murphy, E. F. (1922). *The black candle*. Toronto, Canada: Thomas Allen.
- Murphy, E. F. (1932). *Sterilization of the insane*. Heritage Community Foundation, Alberta Online Encyclopedia. Retrieved from http://www.abheritage.ca/famous5/achievements/reading/sterilization_insane.html
- Nichols, A. G. (1930). Sterilization for human betterment. *The Canadian Medical Association Journal*, 22, 91–93.

- Rennie, J. B. (2000). *The rise of agrarian democracy: The United Farmers and Farm Women of Alberta 1909–1921*. Toronto, Canada: University of Toronto Press Incorporated.
- Rosenberg, C. E. (1976). *No other gods: On science and American social thought*. Baltimore, MD: John Hopkins University Press.
- Saleeby, C. W. (1909). *Parenthood and race culture: An outline of eugenics*. New York, NY: Moffat, Yard, & Co.
- Sanger, M. (1920). *Women and the new race*. New York, NY: Truth Publishing Company.
- Schoen, J. (2005). *Choice and coercion: Birth control, sterilization and abortion in public health and welfare*. Chapel Hill, NC: University of North Carolina Press.
- Sexual Sterilization Act, Statutes of Alberta, chap. 47 (1937).
- Sexual Sterilization Act, Statutes of Alberta, chap. 37 (1928).
- Strong-Boag, V. (1997). "Ever a Crusader": Nellie McClung, first-Wave feminist. In V. Strong-Boag & A. C. Fellman (Eds.), *Rethinking Canada: The promise of women's history* (3rd ed., pp. 271–284). Toronto, Canada: Oxford University Press.
- Tone, A. (2001). *Devices and desires: A history of contraceptives in America*. New York, NY: Hill and Wang.
- Valverde, M. (1991). *The age of light, soap, and water*. Toronto, Canada: McClelland & Stewart.
- Valverde, M. (1992). When the mother of the race is free. In F. Iacovetta & M. Valverde (Eds.), *Gender conflicts* (pp. 3–26). Toronto, Canada: University of Toronto Press.
- Wahlsten, D. (1997). Leilani Muir versus the philosopher king: Eugenics on trial in Alberta. *Genetica*, 99, 185–198. doi:10.1007/BF02259522
- Wahlsten, D. (1999). The eugenics of John M. MacEachran warrant revocation of honours. *History and Philosophy of Psychology Bulletin*, 10, 22–25.
- Watkins, E. S. (1998). *On the pill: A social history of oral contraceptives 1950–1970*. Baltimore, MD: Johns Hopkins University Press.
- Woodsworth, J. S. (1909). *Strangers within our gates*. Toronto, Canada: F. C. Stephenson, Methodist Mission Rooms.
- Ziegler, M. (2008). Eugenic feminism: Mental hygiene, the women's movement, and the campaign for eugenic legal reform, 1900–1935. *Harvard Journal of Law and Gender*, 31, 211–235.

Received October 20, 2012

Revision received February 27, 2013

Accepted March 5, 2013 ■