

Primary Source Material

Learning Goals

- Understand how individuals acted to counter the misuse of genetics research to further racist and sexist ideologies
- Connect historical examples of ethical problems to the modern-day case studies presented in this course
- Analyze how scientists' ideologies impacted their interpretation of science

Categories

1. Behavioral Genetics (criminality) – alvina
2. Sterilization – alanna
3. Race + IQ – justin
4. Activism – naiomi
5. Eugenics + Miscegenation – anjali

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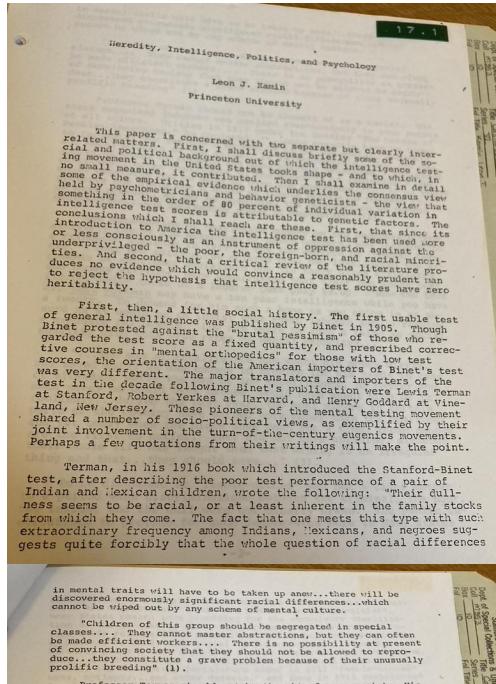
Race, IQ, and Genetics

Discussion Questions

- What beliefs did Terman hold? How did this impact his creation and interpretation of the Stanford-Binet IQ tests? Are there alternate explanations he could have come to if he held different beliefs?
- How does the conflation of race, ancestry, class, and genetics impact views represented?
- How are IQ, race, eugenics, and xenophobia connected?
- How were people countering incorrect views of IQ and race?
- Educational attainment polygenic risk scores are being promoted today, spearheaded by Paige Harden (???). Harden argues for XXX, and opponents argue this is a new form of eugenics or whatever. Which side do you take? . How does this document inform your opinions?
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Castañeda Box 10 M0353 Folder 10

- On Terman, IQ, and immigration, eugenics



17.1

itics and Correspondence. Further, numerous states have passed laws providing for the compulsory sterilization of inmates of such taxpayer-supported institutions before their release. The preamble of the first such "hercules" bill in 1911 reads: "Whereas, heredity plays a most important part in the transmission of crime, idocy, and imbecility. To this list of disabilities must be added blindness, deafness, leprosy, in 1911 'feeble-mindedness, epilepsy...and other defects,' and now in 1913 constitutes "...lunatics, drunkards, paupers, vagrants, moral and sexual perverts, and other persons..."

The lot of those officially diagnosed as feeble-minded was not enviable, and it is of interest to read Yerkes' opinion: "...never should such a diagnosis be made on the strength of... We must learn what he can about his past, his economic history, what is his occupation; his pay...we must learn what we can about his immediate family... What is the economic situation of the family? What has been collected...the psychologist may be of great value in getting the subject into the most suitable place in society..." (4).

The genetic interpretation of socio-economic class differences in test scores, presented by Terman, Goddard, and Yerkes, clearly served to legitimate the existing social order. Perhaps the first major practical effect of the testing movement, however, lay in its contribution to the passage and ratification of the controversial racial immigration law of 1924. This disastrous chapter in the history of American psychology is not without contemporary relevance.

Prior to the first World War, though certain classes of undesirables were excluded, there was no numerical limitation on immigration to the United States, nor were geographic distinctions drawn among European countries. But as early as 1911 the U.S. could hardly ignore the growing numbers Goddard sent to Ellis Island to apply the new mental tests to arriving European immigrants. Goddard reported that, based upon his examination of the "great mass of average immigrants, 83 percent of Jews, 80 percent of Hungarians, 79 percent of Italians, 76 percent of Spaniards were 'feeble-minded'" (4). He was able to report in 1917 (6) that the use of mental tests "for the detection of feeble-minded aliens" had vastly increased the number of aliens deported.

The significance of these scientific findings was not lost upon the members of the Eugenics Research Association, who in 1917 appointed Yerkes as chairman of their Committee on Inheritance of Mental Traits." The biologist Harry Laughlin, secretary of the Association and editor of its journal, "Eugenic News," wrote under the heading "The New Immigration Law": "When the knowledge of the existence of this science [mental testing] be-

Herbert Aptheker M1032 Box 182 Folder 5

“Intelligence of Negro recruits”

- Article argues “black people are biologically less able to be educated and therefore we should not try” (paraphrasing)
- Note from WEB DuBois on the first page (we think!!) referring to author of article as a “jackass”

Stephen J Gould M1437 Series III manuscripts box 148

Folder 32

Essay dismantling Jensen's arguments on genetic differences between races driving differences in IQ

- “Statements that seem to have the sanction of science have been continually invoked in attempts to equate egalitarianism with sentimental hope and emotional blindness. People who are unaware of this historical pattern tend to accept each recurrence at face value: that is, they assume that each statement arises from the ‘data’ actually presented, rather than from the social conditions that truly inspire it.”
- “If current biological determinism in the study of human intelligence rests upon no new facts (actually, no facts at all), then why has it become popular of late? The answer must be social and political – and the sooner we realize how much of science is so influenced, the sooner we will de-mythologize it as an inexorable ‘truth-making machine’.”

Gould M1437 box 774 Folder 18

Letter from John Cirace in response to The Mismeasure of Man – lots to discuss re: genetic determinism of athleticism and intelligence but also the conflation of race and genetics/ancestry

I S Karkan Shockley Collection, " Shockley, X, Cavalli
Debate" from Stanford Daily
[SC 595, Box1, fl. 9, 1973]

Gould M1437 Box 875 Folder 16

- Black journalist perspective on scientific activism
- Black journalist reacting to lewontin, shockley, and AAAS announcement that “the good Lord didnt make black people inferior”

Blacks should say thanks

2/29/76

By CARL T. ROWAN

WASHINGTON — Get on your knees, black Americans, and say thank you to five white scientists.

They've just told the annual meeting of the American Association for the Advancement of Science that the Good Lord didn't make black people inferior. That ought to come as quite a relief to all those blacks lined up to get unemployment checks, welfare checks, food stamps — or who are shouting "innocent" as they try to get out of the local jail.

What would we do if some scientist didn't say, periodically: "It wasn't nature that cheated you"?

Well, what the panel actually said is that there is no relationship between race and intelligence. One of the scientists, Dr. Richard Lewontin of Harvard, told the press that "It is simply wrong to speak of different racial groups having a lower or higher genetic potential." What I don't know and don't understand is when we're going to stop trying to find an intellectual difference based on genetics.

We black Americans know the

answer: never. The racists in America have a deep psychological need to rationalize 300 years of brutalizations of black people. How could white Americans properly celebrate a Bicentennial if their hearts and minds had to accept the truth that they have abused, castrated, dehumanized a tenth of the fellow citizens in ways not much less shameful than what the Nazis did to the Jews?

So white America has got to have a William Shockley at Stanford, an Arthur Jensen at Harvard, crying that God — or nature — made blacks unequal and that this is why whites have treated them as unequals.

The racist killers couldn't keep their semi-sanity were they not able to say that "Jews are" in some way offensive and despicable, or that "niggers are" in some way offensive and subhuman.

Lewontin dealt with the absurdity that blacks have to be inferior since they have smaller brains than whites, pointing out that even if the brain size argument were proven, brain size has nothing to do with intelligence. He pointed out that the National Institutes of Health recently advised scientists that "studies of the heritability of IQ are not worth doing."

But the studies will go on. And the folly of it is evident in the reality that even if someone could prove that black

people are born with only 85 per cent of the intellectual potential of whites, there still would be thousands of black Americans with intellects far superior to those of average whites.

If Congress supposed to pass laws restricting all gifted blacks, all Negro geniuses, to jobs as charwomen or short-order cooks because some statistical average proves blacks "inferior"? We've got a lot of racial madness in America, but we're a long way from that kind of insanity.

One of Lewontin's colleagues on the panel, Dr. Bernard Davis of Harvard, says he is uncomfortable at the thought of ending research on this subject. Perhaps he is just a scientist reluctant to back away from possible new truth.

I'm willing to have the race and IQ tests go on, but I'd like a little time to build up a fair sample. Give us just one generation in which black family income is comparable to that of whites (instead of 56 per cent, as is now the case); when blacks can afford the same food, schools, concerts, books; when blacks can enjoy roughly the same neighborhood and other environments as whites, then let's see what the IQ measurers find.

This will never happen, of course. The racists will say, "We won't give a generation of equality to people we know are not our equals."



Eugenics and anti-miscegenation

Discussion Questions Eugenics and Miscegenation

- For what purpose did President David Starr Jordan create this genealogical tree? Why would it matter to him?
- Who is missing in the Jordan genealogical tree?
- What were concerns around interracial marriages?
- How was eugenics connected to segregation?
- How does the conflation of race, ancestry, and genetics impact views represented?

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Stephen J Gould M1437 box 877 Folder 5

1950s pamphlet “The Races of Mankind” – illustrated explanation of how the races are actually not that different

Stephen J Gould M1437 box 754 Folder 8

- Agendas from the second and third international eugenics congresses – lots to look at in terms of who is presenting (some familiar faces ) and what their talks are titled
- Booklet “The New Family and Race Improvement” → “Shall America Head for Race Suicide or Race Improvement?”

Herbert Aptheker M1032 Box 145 Folder 45

“Miscegenation Law, Court Cases, and Ideologies of ‘Race’”

- First two pages are transcript of 1922 court case on miscegenation where it becomes obvious that nobody has a clue what “race” is (bc it is biologically meaningless)

David Starr Jordan, "Chart of Fitness", rolled hand drawn chart.

[SC 58, Box 9, Miscellaneous]

Gould M1437 Box 875 Folder 16

- US News and World Report “Intermarriage and the race problem”
- Connects eugenics to segregation
- Really awful stuff (on right)
- Perspective from mixed Howard professor (below)

"I DO NOT BELIEVE THERE IS A SUPERIOR RACE"

Interview with Dr. W. Montague Cobb, head of the anatomy department, Howard University, Washington, D.C.

Q Dr. Cobb, what is the attitude among Negroes toward interracial marriages?

A I would say that, on the whole, the Negro community accepts both partners in an interracial marriage—or should we say the "foreign" partner—more readily than the white community does. There is not so much intolerance.

But there is no particular desire among Negroes to intermarry or intermarry with whites.

Q Is there objection among Negroes to marrying whites?

A No, I would say just indifference. Both of my daughters married Negroes. They had other opportunities.

Q Among Negroes, is intermarriage considered an important factor in race relations?

A It never has been.

Q Do you anticipate any big increase in mixed marriages?

A There would be no deluge of interracial marriages if there were no bars to them whatsoever, because that is not taking place now, where the opportunity exists.

Q Do you think that, if there were more mixed marriages,

it would increase social acceptance of them? Or would it increase racial tension?

A I can't evaluate that, but I don't think that anyone would advocate increasing mixed marriages. Marriage is a personal thing. I don't see how you can force it.

Q Do interracial marriages face considerable difficulties in the United States at present?

A Sometimes. There are places where an employee could be discharged if it is known that he or she is married to a member of the other racial group. In small communities, no matter how enlightened-like, say, university towns—the metropolitan areas, where identities are not so important and there is relatively little neighborhood gossip, it doesn't matter so much. I know of a number of interracial marriages which are successful, and some that have broken up—but not on the grounds of race.

Q Does the child of an interracial marriage face a severe handicap?

ability that creates a modern technical society. That is, it is not so able to think in terms of symbols—words, numbers, formulas, diagrams.

Q What is the evidence for that?

A The evidence goes back over nearly 50 years of psychological testing in this country. The differences between the two racial groups in a variety of mental tests are so large, so regular and so persistent under all sorts of conditions that it is almost unthinkable to conclude that they are entirely a matter of environment.

Dr. Henry E. Garrett is a psychologist. Born in Virginia in 1894, he is a graduate of the University of Richmond and Columbia University. He taught at Columbia for 33 years, was head of the psychology department there from 1941 to 1956, now is professor emeritus at Columbia and visiting professor at the University of Virginia. He has written several books and made studies of racial comparisons.

Q What are these differences?

A In recent studies in the South, it has been confirmed that, on the average, the Negro pupil is from 15 to 20 points in I.Q. behind the average white pupil in the kind of abstract intelligence that I spoke of. In school performance in the elementary grades the Negro lags from one to three grades behind the white student. In high school the lag is much greater.

Q Do you mean that the Negro race is somehow inferior to the white race?

A I don't mean that the Negro is *generally* inferior. Physically, he is certainly as strong and agile as the white man. But there are differences in the biology, in the brain structure and in the blood groupings of whites and Negroes. These are not very large, to be sure, but they are large enough to convince many of us that there are significant differences between the two racial strains, besides those brought out on the tests.

Q Have any of these differences shown up in the Negro's behavior or accomplishment?

A The fact that the Negro lags in abstract intelligence—in the ability to deal with symbols—is shown, I think, in his history.

The Negro in Africa has exhibited little capacity for creating a civilization such as that in Europe. He is today pretty much where he was 5,000 years ago. South of the Sahara Desert there was never any *literate* civilization. The Negro invented no system of writing. He didn't build a bridge or a terrace, domesticated no animals, did not discover the principle of the wheel, probably did not discover how to build a fire.

Arnold Toynbee, the eminent British historian, has said that, of the 21 great civilizations of the past, not one was in black Africa.

It seems to me that this fits in with the lag which we find in this country in mental testing.

Now, when you come to a race mixture, I don't see that there would be any evil effects so far as the physical structure of the hybrid is concerned. We all know that the mulatto is viable—he lives as long as the Negro or the white man. The difficulty, it seems to me, comes in mass mixing, which is the goal of the Negro pressure groups.

Q Do you think that mass intermarriage is a major Negro goal?

A You can't help but think so. If you look at any Negro

newspaper or magazine, or if you listen to the statements made by such people as Adam Clayton Powell, the Negro Congressman from New York, you get the idea clearly brought out that what they look to is an amalgamation with the white group. I think they strive for amalgamation because they feel that they'll never get social equality without it.

Q Do you foresee a material increase in racial intermarriage as a result of integration in this country?

A I don't see how intermarriage can fail to increase if young people of both races are thrown together in their formative years. I think that's what the Southern white parents dread most.

I am afraid that what a good many white parents are去做 what they think might be the result of intimate personal contacts.

This would lead to a very unhappy situation. We regard any alien group as people to be treated courteously and fairly only when they constitute no threat to us.

Q Isn't the Negro improving as his status improves in this country?

A The Negro has not improved intellectually in this country, relative to the white man, in spite of his great social and economic progress. In the first World War, for example, about one Negro out of seven did as well as the average white soldier. In World War II, about one in seven or eight did as well, and in the Korean War we had exactly the same ratio. That is, while both groups improved, they maintained the same relative distance, the one from the other.

I think one of the fundamental fallacies in the thinking of many people today is that the Negro is a sunburned white man, and if he is treated fairly will behave like a white man. My contention is that he will never behave like a white man because he is not a white man.

The Poles, the Italians and the Irish were assimilated into the American populace because they are all Caucasian. If the Negro is assimilated, however, you are likely to get a mixture such as one sees in some of the West Indian islands, in Puerto Rico, in parts of Brazil and in Central America.

Q What have been the results of racial amalgamation in other countries?

A I don't believe that, historically, amalgamation with the Negro has ever done anything except lower the general level of the national life of those people who have been willing to mix.

Q How long would it take to obtain a racial amalgamation in this country?

A It would probably take 200 or 300 years to absorb all of the Negroes in this country or to get their number down to a very small proportion. Even then we would probably have a caste system based on race and color—a stratification of society in which you would have a group of white people who would refuse to mix, a group of very black people of low intelligence who would not mix because they couldn't, and a large intermediate group that would continually be pressuring to divide the upper white group.

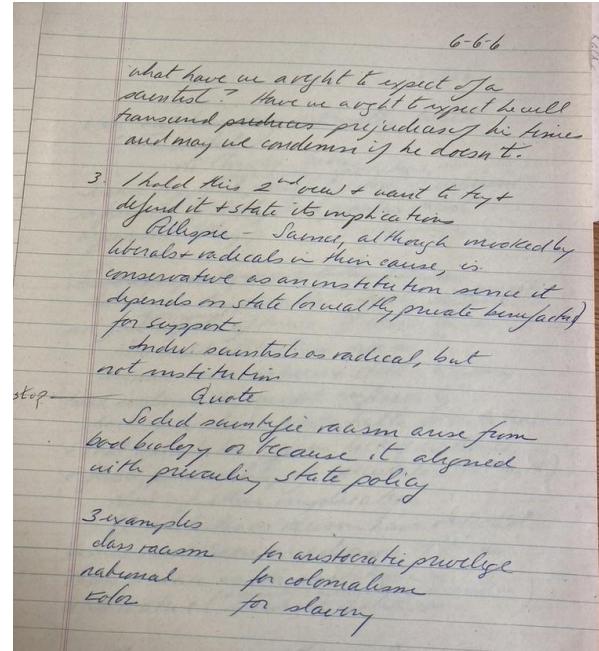
Q What do you see as the ultimate solution to the race problem in the United States?

A I don't think there is any pat solution. I suspect that there will be a long series of adjustments over the years. It might well be that, as the Negro gets more status, better jobs and more acceptance in public accommodations, then he will cease to strive so hard to push into white society.

But whatever happens, I believe we'll continue to have a kind of segregated society—a society that is segregated socially, though not segregated in some other respects. [END]

Gould M1437 Box 875 Folder 14

- Personal notes labelled 6-6-6
 - What have we a right to expect of a scientist? Have we a right to expect he will transcend prejudice of his times and we condemn if he doesn't.
 - So did scientific racism arise from bad biology or because it aligned with state policy



Scientific Activism and Social Responsibility

Stephen J Gould M1437 box 877 Folder 2

Photocopied article on how medical school standards are dropping because of rise in minority students; response from C.A.R. saying “racists – not minorities – undermine health care”

Discussion Questions (scientific activism)

1. What were the sociobiology study group and committee against racism working to fight? How does this connect to contemporary issues?
2. What actions did they take? How might they be different or similar to modern efforts?
3. Were these groups successful?
4. Answer Gould's question to himself: "What have we a right to expect of a scientist?" in regards to:
 - a. modern biases and prejudices
 - b. relationship with the government/state
 - c. Relationship with society

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Gould M1437 Box 888 Folder 1

- Laying the foundation for a racist synthesis by Committee Against Racism
- Nicely outlines what's happening, describes committee against racism and sociobiology study group

With pick up
What to do by staff
Please mail
Work to be done by patron

Sociobiology: Laying the Foundation For a Racist Synthesis

By BOSTON COMMITTEE AGAINST RACISM



The members of human societies sometimes cooperate closely in important fashion, and sometimes they compete for the limited resources available in their environment. p. 356

In 1967 the Harvard Educational Review published an article by Jensen's revised theory of Black ghetto life, initiating a new wave of academic racism. Jensen's theory was to improve Black education during the 1960s. By the next year, segregated vote learning (for Blacks) admissions were to be stopped. Thus, Donald Moynihan was selected to write the "White paper" on the winds of Jensen were gusting through the country. That same year, in 1971, Richard Herrnstein extended the argument presented indirectly in the entire working class in his *Adaptation and Human Behavior*.

Strong rebuttals quickly came forth from anti-racist faculty and students, who argued that Jensen's revised theory would soon be used to justify negative attitudes toward Black admissions, affirmative actions, and school integration, and deadly cutbacks in health care, education, and welfare programs. Thus, the Committee Against Racism (CAR) was born. A multi-racial, multi-class organization, CAR recognized that a multi-racial organization of racists would first attack minorities but soon turn on whites as well. CAR circulated a resolution condemning the IQ theory as unscientific and racist. CAR defined as "racist" any theory which legitimates racial oppression and inequality based on the victim's race or class, "genes" or "culture". CAR appeared with over 1000 signatures of academics in New York Times on Oct. 28, 1972.

Jensen's article in 1967 got 47 colleagues published a resolution in *American Psychologist*, July 1972, comprising themselves as the "Herrnstein-Jensen Study Group". In this resolution, they attacked the "orthodox environmentalists" who claimed that "hereditary influences...are very strong"; strongly encouraged research into the biological heredity of human behavior, and said they "deplored the evasion of heredity resulting in current textbooks and the failure to give responsible weight to heredity in disciplines such as sociology, social psychology, social anthropology, genetic physiology, measurement, and many others."

Meanwhile, Princeton psychologist Leon Kamin, inspired by the emphasis of the opposition to Jensen and Herrnstein, thoroughly reviewed all the scientific studies on which the hereditarians had based their IQ evaluation. He discovered that the lynchpin of the Jensen-Herrnstein argument, the study of identical twins reared apart, was utterly worthless. Kamin pointed out that correlations meant that the correlations could just as easily be attributed to environmental as to hereditary influences. The only study of identical twins which claimed to have controlled for environmental factors, the English psychologist Cyril Burt, proved to be a classic scientific fraud. As early as 1973 Kamin pointed out that Burt's data had to be "cooked" (see L. Kamin, *The Science and Politics of I.Q.*, 1974). For example, in three

articles, published over an eleven year period, with a 350 per cent increase in average IQ scores among Black children, Burt claimed that the constant to those figures was that 177 Black students who reported what Science in 1970 would be "of great importance" in results would be awarded the highest prize of the American Psychological Association.

From October 24, 1970, The London Times reported that Burt's research, which had been credited with advancing the IQ theory, apparently never existed. All but Burt's name and address had not had to acknowledge that the original evidence for high heritability of I.Q. was worthless. The hereditarians have nevertheless continued to propagate their theory.

In the recent *Annual Review of Psychology*, a long article on genetics of cognitive behavior, remarkably reviews a segment of the large and growing literature on genetic bases of inequality, and repeatedly attacks the IQ theory for its sharp criticisms of the I.Q. studies.

The main new vehicle for continuing the hereditarian argument, however, has become Professor E.O. Wilson's *Sociobiology*. This book, published in 1975 by Harvard University Press, purports to establish sociobiology as "the systematic study of the biological bases of all social behavior."

The Harvard University Press has an advertising campaign for *Sociobiology*, and widespread publicity in professional and popular media.

In addition, the Sociology Study Group of Science for Social Research has undertaken a systematic critique of Wilson's book, publishing first a letter in *The New York Review of Books* and a longer article in *Daedalus*, the journal of the American Academy of Arts and Sciences.

The Sociology Study Group pointed out that Wilson offers no scientific evidence that human social behavior is biologically determined. He merely postulates the existence of all sorts of hypothetical genes: genes for entrepreneurship, creativity, altruism, spite, homophobia, etc. He asserts that "human beings are absolutely destined to indoctrinate—they seek it," and then discusses whether genes for conformity are selected on an individual or group level.

The Sociology Study Group criticized Wilson's claim that "there is a human biogram" or human nature. Wilson claims that competition, aggression, territoriality, xenophobia, warfare, and genocide are genetically based human universals.

My own guess is that the genetic bias is intense enough to cause a substantial division of labor even in the most free and egalitarian of human groups. Thus, even with identical education and equal access to opportunities, men are likely to play a disproportionate role in politics, business and science. (New York Times, 10/12/75)

CAR agrees with the Sociology Study Group that "Wilson joins in the long parade of biological determinists whose work has served to buttress the institutional racism by excusing them from responsibility for social problems." CAR has further declared, "We believe that Sociobiology is dangerously racist. Although CAR has nothing explicitly to say about race in his book, we consider for a moment what a sociobiological analysis would be like for the following:

(1) In Boston a violently racist organization, ROAR, fights integration of schools and neighborhoods and organizes vigilante groups of "marshals" in the tradition of the Ku Klux Klan. (CVR)

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AUDIENCE: The film must be seen by students of biology, anthropology, sociology, psychology—simply anyone who is interested in the origins and evolution of man's behavior in society. Its timely message may help us understand our impulses and actions.

"It time we started viewing ourselves as having biological, genetic, and natural components to our behavior. And that we should start seeing it as a physical and social world which matches those tendencies . . ." Dr. Robert Trivers

SOCIOBIOLOGY
Doing What Comes Naturally.

A film on a new area of scientific inquiry with revolutionary implications for the disciplines of BIOLOGY, ANTHROPOLOGY, SOCIOLOGY, and PSYCHOLOGY.

Featuring Harvard University Professors Eren Devore, renowned social anthropologist; Robert Trivers, prominent biologist and social theorist; and Edward O. Wilson, zoologist and author of *Sociobiology: The New Synthesis*.

HOW SOCIOBIOLOGY IS BEING PROMOTED:

From the *Harvard Crimson*, February 8, 1977:

"The Harvard Crimson Opinion FEBRUARY 8, 1977

"Sociobiology: Laying the Foundation For a Racist Synthesis" by Boston Committee Against Racism

Stephen J Gould M1437 box 761 Folder 2

- C.A.R. statement on academic racism and busing: “As academics we have a special responsibility to discredit the university research and teaching that continues to be used by policy planners, politicians, and the media to divide black from white and discourage us from fighting together for a decent, non-racist educational system and a non-racist society.”
- Anti-busing pamphlets

Gould M1437 Box 875 Folder 14

- History of Science
- Failure to act = complicit

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ment. That movement had fallen under the control of an ageing group of overt racists who used arguments long abandoned by genetics. Yet, with the exception of a belated foray by H. S. Jennings, established geneticists kept completely silent. No one (besides Jennings) testified: no one even wrote a letter to the Congressman sponsoring the bill (p. 113). Eugenicist leaders wrote and testified in great numbers and successfully fostered the myth that they spoke for science. Ludmerer writes of Harry Laughlin's testimony to Congress (p. 102): "In the early 1920s, however, virtually no geneticist or biologist of note publicly contradicted Laughlin's work. Thus, what gave his reports so much influence was that the public *thought* they were unbiased and scientifically accurate". A leading opponent of restriction argued (pp. 102-3): "We feel that Dr Laughlin's arguments for further restriction are difficult to combat if they are true, and that his facts will in the future be thrown at us every time we plead liberal treatment of the immigration question". To Ludmerer, this silence is a mystery. He advances only a weak excuse, *using* the claim that scientists often shun the overt racism. I suspect that they were

Gould M1437 Box 888 Folder 1

- Biological determinism workshop and talk overview and questions

Questions for the workshop on the film

1. Emotional impact - Does the film make you feel
 - ... excited about a "new" science?
 - ... reassured about our society?
 - ... outraged by its sexism and racism?
2. Messages -
 - (Male) dominance behavior is natural, genetic, universal among humans and primates.
 - A class-stratified society is biologically programmed.
 - Family structure and behavior are biologically determined.
 - Violence is inevitable because of our biological nature.
 - We can discover the fundamental aspects of human behavior by the study of the behavior of other animals.
3. Conveying the messages -
 - a. Link to popular ideas -
 - Archaic speculation about human nature is reliable.
 - The things we commonly do, sports, competition in business, our sex role behavior, are natural and healthy.
 - Animals can tell us a lot (cf. work with Washoe, et al.)
 - We may be over-civilized - it's time to return to a simpler life based on our "true" nature (cf. current emphasis on back-to-nature foods, clothes, etc.: Small is Beautiful)
 - b. Racial implications -
 - We should tolerate homosexuality because science can now tell us that it's natural (I'm not sure whether this was explicitly in the film).
4. We need to recognize problems before we can solve them, e.g. an end to war can come only when we learn how to control our aggressive nature.

c. Scientific cloathing -

Scientific results (extrapolated a little, of course) confirm our common sense about human nature.

It is good to have the courage to seek "truth" in these "new" areas of scientific endeavor.

d. Scientific Basis -

To what extent does empirical evidence support the claims of sociobiology?

Regardless of the degree of support for the claims, is it even reasonable to look for biological (in the sense of current state of biological research) explanations for complex cultural traits such as aggression, dominance, sexual behavior, etc?

e. History -

Is this film unique in its presentation of the biological determinism position, i.e. are there other films, books, etc. past or present that present the position?

f. Conclusion -

What are the net implications of the biological determinism position regarding warfare, competition, sex roles, race, power and class?

Who benefits most from this position?

Who does/supports the research that bolsters the biological determinism position?

g. Action -

What can we do?

A CRITIQUE OF BIOLOGICAL DETERMINISM

TALKS & WORKSHOPS
TUES., MARCH 15, 8 P.M.
Conference Auditorium George Sherman Union
BOSTON UNIVERSITY

Speakers: Stephan Chorover, Psychologist, MIT
Marian Lowe, Chemist, Boston University
Film: Sociobiology: Doing What Comes Naturally

Workshops
8 pm Room 1-190 MIT Massachusetts Avenue Entrance

2. ARE SEX ROLES BIOLOGICALLY DETERMINED?

(Co-sponsored by the Boston University Women's Center)
Speakers: Barbara Chasin, Sociologist, Harvard School of Public Health
Freda Salzman, Physicist, U. Mass. Boston
Film: Sociobiology: Doing What Comes Naturally

Workshops
8 pm Conference Auditorium George Sherman Union
Boston University Commonwealth Avenue

3. SCIENTIFIC RACISM PAST AND PRESENT

TUES., MARCH 22, 8 P.M.
Workshops
8 pm 350 Eli Center Northeastern Univ. Huntington Ave.

Speakers: Stephen Gould, Biologist, Harvard University
Leon Kamin, Psychologist, Princeton University

4. SOCIOBIOLOGY: SCIENTIFIC AND POLITICAL ISSUES

MON., APRIL 11, 8 P.M.
Workshops
8 pm Lecture Room B Harvard Science Center
Oxford and Kirkland Streets

PUBLIC FORUM
TALKS AND WORKSHOPS
ARE SEX ROLES BIOLOGICALLY DETERMINED?

Barbara Chasin - Sociologist - Harvard School of Public Health
Freda Salzman - Physicist - U. Mass. Boston

Researchers in many fields, from anthropology to zoology, have been involved in searching for differences between the sexes and relating such differences to social structure. But is there any evidence from the study of humans which leads us to believe that male dominance is biologically innate? Can evidence from the study of lower animals shed light on our roles in human society?

The speakers will present a critical scientific and political review of work on innate differences. Following the speakers, as an illustration of the claims they are criticizing, a short film will be shown entitled "Sociobiology: Doing What Comes Naturally".

The forum will then break up into workshops where these issues can be discussed more fully.

TUES., MARCH 15, 8 P.M.
Conference Auditorium George Sherman Union
BOSTON UNIVERSITY

For More Information: 547-0370
Additional Forums:
March 22, 8 P.M.

ENTER, NORTHEASTERN: SCIENTIFIC RACISM
SCIENCE CENTER: SOCIOBIOLOGY

SCIENCE STUDY GROUP OF SCIENCE FOR THE PEOPLE
on University Campus
ARE SIX ROLES BIOLOGICALLY DETERMINED?
March 1, 1977

I. Introduction
Sociobiology, a widely popularized theory, is being used to support the idea that male-female differences are centrally biological and inevitable. Barbara Chasin and Freda Salzman will argue that these sex role differences have their basis in social and economic factors, and that sex differences are central to sociobiology. Sociobiologists' use of neo-Darwinian theory is also critiqued.

II. PERSPECTIVES ON MALE-FEMALE DIFFERENCES IN SOCIAL TRAITS
1. No room for evidence - Barbara will deal with McCay and Franklin's claim for biological basis of greater aggressiveness in males than females. Workshops
2. Arguments for possible biological bases are drawn from psychology, biology, and extrapolation of effects of sex hormones on brain development in animals to humans. Barbara will argue that research of sex hormones in humans, anthropology, and ethology - particularly primates - is limited. She will then try to show why these traits are adaptive - this does not prove that they are.

III. REEMERGENCE OF THE NATURE-NURTURE QUESTION
It is argued with extreme detail with respect to the IQ controversy, this question is flawed and still meaningless scientifically. Example: Brain Differentiation by Sex Hormones, *Reproductive Techniques* (Sci. Amer., Feb. 1972) show environmental effects on brains of rats. Rats were raised at different sizes/handicaps. At 20 years old, we cannot determine the relative genetic-environmental interaction in the capacity to learn. Jonathan Beckwith and Richard Lewontin will argue that sex hormones and the environment being given so much publicity is misleading. Chorover and Lowe speak about the political uses of biological determinist theories to support the status quo. Lowe attempted to show how corporate capital has influenced the movement. Barbara will talk more about the implications of the women's movement.

V. HISTORICAL PERSPECTIVE
It is argued that some past ideologies because we can see what unsubstantiated generalities they were, resulting their downfall in prevailing popular prejudice.

1. Medieval dualist view of women: The Cult of the Lady and Courtly Love, on one hand; The Cult of The Impishly Wicked on the other hand.

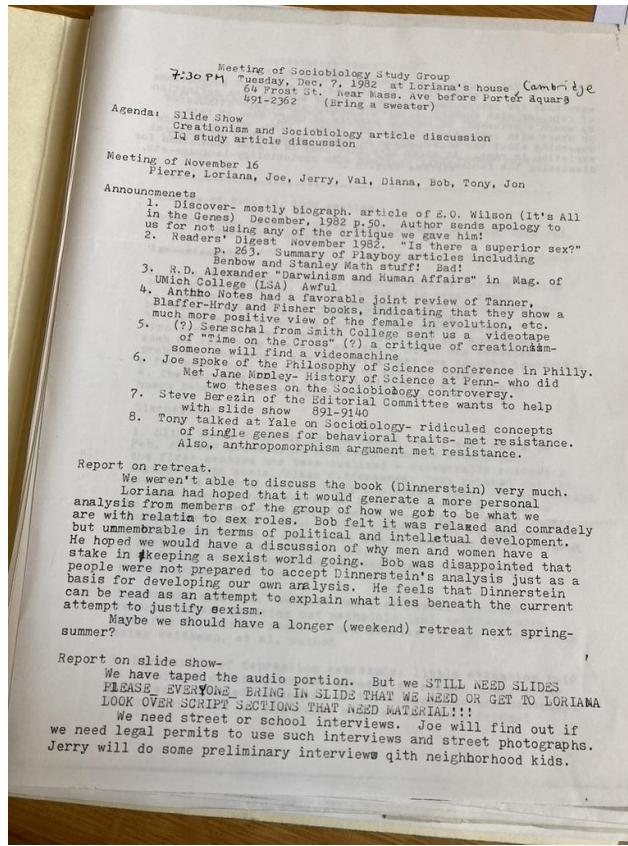
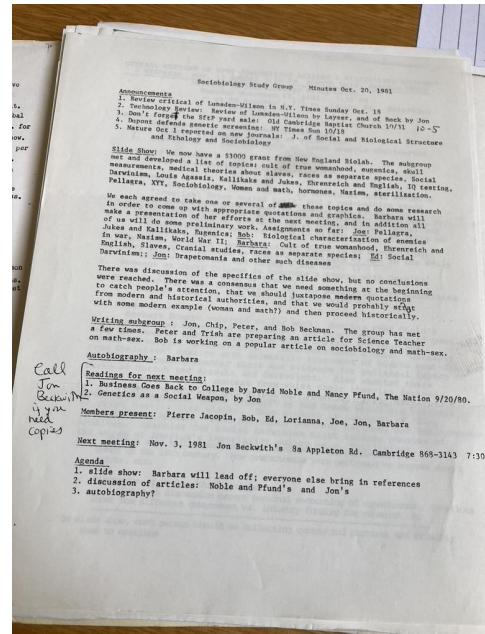
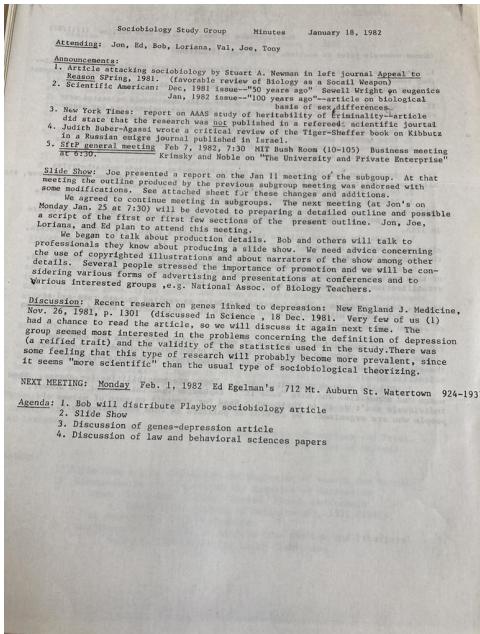
2. Sexuality of women and witch-beliefs development of witch-doubts by the hand of Malibus Maleficarum (1486) - Why witches are chiefly women? Quote: "To conceive by witchcraft comes from carnal lust, which is in women insatiable, etc." Not exactly the right candidate for Darwinian sexual selection.

3. Growth of the Middle-Class Ideal: Man, The Protector and Provider, 1500's-1600's. Progeny Darington gave tremendous legitimacy and support to the idea that various races lower classes and women were biologically inferior.

4. Arguments of evolutionary biologists and anthropologists; Spencer's view, Distant, quote 1874, *Journal of the Royal Anthropological Institute*. This turned out by Psychology: Women came out ahead in brain-to-weight meas. 1916 IQ Tests c) Freud!

Gould M1437 Box 888 Folder 1

- Sociobiology study group notes
(none in particular, just generally important, here are a couple)



Gould M1437 Box 875 Folder 14

- American scientist 1968 remarks on social selection as a factor in the progressivism of science charles coulston gillispie
- Relationship between social responsibility and the state

One need not go to that emotional extreme, however, in order to conclude that the function of science in relation to the state historically has not been to liberalize it. That function has been rather to enhance the powers of the state and in return to draw advantage from the state for science.

One of many recent European journalistic surveys of American politics observes that it is surprising to what a slight extent students in the technical schools take part in the agitation against the government's conduct of the Viet Nam war. It may be that scientists share emotionally in this alienation of the intelligentsia from the men in government. If one were to judge merely from conversations with many mathematicians or physicists, one would assume they do. Yet it never occurs to them that they are in a peculiarly strategic position among liberals and intellectuals, in that they alone could do something directly to stay the hands of statesmen and to lighten the menace of destruction that weighs from many sides. They could do so in all countries simply by refusing the state their services. They have it in their power to do that, though no sooner is so naive an observation advanced than it meets with the recognition that for obvious reasons nothing of the sort will happen, and it is meant less as a serious suggestion than as a reminder that science can be seen in different guises politically. There is what most scientists themselves see when they look into what they take for the mirror of history: the reflection of peaceful benefactors of humanity bringing about the progress in welfare and enlightenment foretold by Bacon. In the recent past of the

Gould M1437 box 774 Folder 3

- “The latest, and perhaps most insidious use of the new biological determinism lies in its support of male privilege against a growing women’s movement”
- “‘Patriarchy,’ as Kate Millett remarks (Sexual Politics, p. 58) has a ‘tenacious or powerful hold through its successful habit of passing itself off as nature.’”
- “But I raise against these monolithic explanations the very same objection that countered the older biological determinism: that the immediate influences of class and culture far outweigh the feeble predispositions of our genetic constitution”

Sterilization

Discussion questions

1. How do sterilization efforts within and by the United States connect to
 - a. Race
 - b. Class
 - c. Colonialism
2. What efforts did activists take against sterilization efforts?
3. What is your reaction to seeing discussion of sterilizations in these community-driven newspapers? What can we learn from this today?

Learning goals

- Understand how individuals acted to counter the misuse of genetics research to further racist and sexist ideologies
- Connect historical examples of ethical problems to the modern-day case studies presented in this course
- Analyze how scientists' ideologies impacted their interpretation of science

Corona M0248 box 31 papers 1923-1948

- In spanish but could be nice for any spanish speakers
- Covers a protest at the hospital
- Good overview about the state of sterilizations across LA and the world at the time
- (translated by me) doctors try to rationalize their actions saying its “for the betterment of the nation”
- (translated by me) – the way in which these sterilization are done only can be interpreted as a form of genocide and a brutal attempt by part of the dominant class of americans to ease their economic crisis by trying to prevent the growth of certain races



Gritando "Alto a las Esterilizaciones forzadas, ahora" y "el Pueblo unido jamás sera vencido" mas de 150 mujeres, niños, y hombres marcharon hacia el Centro Médico Universidad del Sur de California/Condado de Los Angeles el 15 de noviembre de 1974, protestando las esterilizaciones forzadas que se practican en ese hospital. La marcha siguió un mitin en el Parque State en el área Boyle Heights en Los Angeles. La marcha fue organizada por el Comité de Los Angeles para poner un alto a las esterilizaciones forzadas.

El problema de las esterilizaciones se vino a saber cuando varias mujeres individualmente o de organizaciones se dieron cuenta de mas de 150 mujeres que entraron al hospital general y fueron esterilizadas bajo situaciones que demuestran que no dieron su permiso completo. Segun Isabel Chavez y Liz Hall, doctores pidien el permiso "cuando ya estan en las salas de operacion, estan drogadas o simplemente manejando en abuso de la falta de hablar el ingles de mujeres mexicanas y latinas, contraponiendo el esposo con la mujer, o diciendoles que la operacion no es permanente o que es necesaria para el bienestar de las mujeres..."

El Doctor Rosenfeld que tambien ha sacado estas practicas a la luz indicó que estas mismas situaciones existen por

todo el pais en hospitales donde la clientela es pobre o de grupos étnicos. La verdad es que lo hacen para el mejoramiento de la clase a que ellos pertenecen, la clase alta o dominante.

Las esterilizaciones de mexicanas, latinos, asiáticos, y africanos, y el pueblo negro estadounidense y de anglo-sajones pobres cae dentro de lo que se denomina el control de la población. La idea se hizo mundial en 1952 cuando la familia Rockefeller llamo una conferencia mundial para tratar el tema. Actualmente, el Departamento para la Educacion, la Salud, y el Bienestar (HEW) da los fondos a los hospitales para el control de la natalidad. HEW calcula que antes de 1973 se han esterilizado a 110,000 a 200,000 mujeres. En el extranjero la Agencia para el Desarrollo Internacional (la misma que entrena a los asesinos del pueblo) es la fuente gubernamental para llevar acabo el control de la natalidad. Otras fuentes privadas son la Fundación Rockefeller, la Fundación Internacional para el Parentesco Planificado, el Consejo de Población, y la Fundación Ford.

El Comité para poner el alto a las esterilizaciones forzadas hizo la denuncia tanto de los monopolios y el gobierno estadounidense de perpetrar esta agresión. Poco el fraude que la pobreza crea por la sobrepoblación, esto en un país que consume la mayor parte de las grandesz del mundo y se cree el país mas avanzado y civilizado del

“mundo,” declaro el Comité. Acusaron a los monopolios transnacionales de crear la pobreza robando a los países de America Latina, Asia y Africa de sus riquezas. También indicaron que aqui son estas compañias con su clase de producción que crean el desempleo, los precios altos y la pobreza. “Es historia americana que al trabajador organizado se le culpa de crear la inflación. A trabajadores inmigrantes sin documentos se le culpa de crear las crisis económicas. Ahora a grupos étnicos y al pobre se le culpa de crear su propia pobreza,” declararon Isabel Chavez y Liz Hall.

Respondiendo a como abordia una mujer puede prevenir que esto le pase, Patricia Cordova dijo, “Como una protección mínima, la mujer debe exigir al doctor toda información sobre la esterilización, las desventajas y tambien conocer otras alternativas anti-conceptivas. En cualesquier caso, si existen condiciones que hagan creer a una mujer que se le están violando sus derechos o se le han violado, sus derechos esa mujer tiene el derecho de consultar con un abogado y traer una demanda en contra del hospital o doctor. Pero este problema es solo uno de los que se enfrentan en hospitales del gobierno en lo que se refiere al tratamiento que se le da al mexicano y todo el pobre en general. Si, debemos protegernos lo mas posible, pero nosotros creamos que estos atropellos y el tratamiento inadecuado se eliminaran bajo una sociedad donde los bienes y las riquezas que produce el pueblo sean disfrutadas por ese pueblo, y esto incluye el tratamiento medico.”

Para mas informacion, eschita o llame al Comité para Poner Fin a las Esterilizaciones Forzadas, 416 S. Pecan St., L.A., Ca. (213) 268-9929, 268-9920.

Corona M0248 flat box 52 Folder 4

- Vol 1 Prensa estudiantil 1976 No 4

The National Coalition Against Sterilization Abuse (N.C.A.S.A.) is a non-profit organization that was established in mid-July of 1975 by a group of concerned citizens and community leaders. The coalition was formed in response to the multitude of sterilization related violations against civil liberties. N.C.A.S.A. wishes to make as many people aware of a most critical problem that being coerced or forced sterilization.

In Los Angeles between 1968 and 1970 the number of sterilizations not medically necessary increased dramatically at the Women's Hospital-USC Medical Center, Hysterectomies increased 742% and Tubal Ligations increased 470%. In New York thousands of sterilizations are performed monthly. In Puerto Rico by 1965 34% of the women had been sterilized, the number since then has increased drastically. These are only a FEW examples of the increasing number of sterilizations that are taking place both nationally and internationally.

As many more people become conscious of the problem, more people will see the importance of joining organizations such as N.C.A.S.A. to fight these attacks on our civil rights. It is the right of a woman to decide if she wants to bare more children or not.

Currently seventeen women which were sterilized, and numerous husbands are fighting this attack on their right by suing the Los Angeles County General Hospital; the University of Southern California and individual doctors, nurses and administrators for having permanently sterilized them without their consent.

Ten of the women which are Mexicanas/Chicanas have filed Civil Rights cases in the U.S. District Court. The other seven women and their husbands (3 Mexicanas, 2 black, 2 Anglo, 1 Argentinian) have filed State damage cases. The women average approximately twenty-five years and on the average have two children. One of the cases is as follows:

Ms. X is a woman with three children and speaks Spanish only. The consent was signed by the father of the child for what he believed to be the only cesarean section. Ms X was approached during labor concerning a tubal ligation but refused. She doesn't remember N.C.A.S.A. and stop forced sterilization anything after going into surgery. Ms. X was not aware of her sterilization until her six week post-partum check up. Ms. X's child was dead at birth and not told about it until seven days after delivery.

CONTACT KATHY BORUNDA IN THE MODEL CITIES OFFICE OR CALL 224-2187.

This is shocking but happens every day to many women through out the country and world. This case and the other cases are still pending and will take a few years until they are finally resolved.

But the problem of forced sterilization does not stop with these law suits it is a continual struggle that must be waged against a Medical system that does not provide adequate health care for the majority of people through out this country.

The results of the growing numbers of sterilizations are yet to be seen in a few years, as in the example of Puerto Rico where one-third of their women are already sterilized and the number growing each and every day. What else can this be called but Genocide?

These sterilizations and other attacks on our rights must be stopped but the only way we can stop them is through an organized effort.

N.C.A.S.A. is one organization that recognizes these problems and is taking an active role in the struggle against them. Join N.C.A.S.A. and stop forced sterilization.

5226 East Whittier Boulevard
Los Angeles, California 90022
Phone: (213) 261-7154

Corona M0248 flat box 52 Folder 4

- La razon mestiza II
summer 1975
- Update on puerto rican women
- “An intern in an obstetrics ward of a hospital which performs these sterilizations said in the bay area women’s coalition newsletter that “the who atmosphere was to push sterilization.... They would wait for the first labor pains, give them a little less Demerol (pain reliever) and then ask them if they wanted any more kids.”

THE FIRST "GUINEA PIGS" of the original birth control pill research show no evidence of long-term ill effects. Of the 836 Puerto Rican women who took the very first pill, the 10 mg. Enovid, in 1956, 400 are still being monitored medically and 45 are still on the pill. Another group of close to 5000 women who have been on the pill since 1961 have been compared with a control group of nonusers. Some reassuring statistics:

- 43.9 per cent of those on the pill showed one or more changes in cervical cells, while 44.3 per cent of the non-pill takers also did—indicating that such changes are not unusual.
- IQ tests of 210 children born to mothers who had used the pill showed no adverse effect on the children's intelligence.
- No definite correlation was found between the prolonged use of oral contraceptives and the development or aggravation of diabetes.

Marin Women's News

FORCED STERILIZATION OF THIRD WORLD WOMEN

By, Pettie Garcia

Three women who were sterilized without their knowledge have filed a \$16 million damage claim suit against the County University of Southern California, Los Angeles Center in Los Angeles. Melvinia Hernandez, Eddie Sykes, and Beverly Groves, claim that the hospital was granted permission for tubal ligations to be performed on them when they were in pain and under heavy sedation during childbirth by doctors who sectioned the uterus. Women said they thought the tubal ligations were a means of temporary sterilization, not permanent. Groves was an IUD for 2 years after the operation until she discovered she had been sterilized.

These forced sterilizations are part of the U.S. government's campaign to isolate the "over-population" of poor and Third World people at the cause of the economic crisis. In a memorandum (Circular April 11-May 1973), a November 1973 government report entitled "Opportunities for Employment, Education and Training," called forced sterilization as the solution to the unemployment problem.

The government has therefore channeled funds into sterilization programs. The Department of Health, Education and Welfare has allegedly financed forced sterilizations at six Los Angeles hospitals—L.A. County General, Long Beach, Loma Linda, White Memorial, Glendale Adventist, and UCLA Medical Center. According to HED official Carl Butt, HED funded between 100,000 and 200,000 sterilizations in 1972. About 90% of these operations were performed on poor, non-white, non-English speaking women through public welfare agencies and county hospitals. The women came to clinics to receive contraceptive information and the operation is the method which is pushed on them.

The ways in which women are intimidated into consenting to sterilization are horrifying. An intern in an obstetrics ward of a hospital which has a sterilization clinic in the Bay Area Women's Coalition Newsletter that "the whole atmosphere was to push sterilization... they would wait for the first labor pains, give them a little less Demerol (pain reliever) and then ask if they wanted any more kids."

A recent at LAUSC Hospital recalled "I had to make my pitch while sewing up the episiotomy when the anesthesia started wearing off." Duke University County Hospital, doctors are said to threaten to drop a newborn baby on the floor if the mother doesn't consent immediately to signing sterilization consent papers. Welfare workers in Oklahoma and North Carolina have reported that social workers have claimed it is a rule that after having two "illegitimate" children, the mother's tubes must be tied. Social workers have even lied and told women that "a woman can have her tubes tied temporarily, and at a later date she can have them untied." Women who are not familiar with contraception methods unwittingly consent to sterilization methods when they are told this lie. Then, when they desire to have more children, they discover it is impossible.

Dawn Star/SW



Statistics on the numbers of victims of this "population control program" are grim. In the U.S., between 100,000 and 150,000 low income persons have been sterilized each year since 1970. This is according to a recently funded program, At County-UCLA Medical Center, there has been a 742% increase in "elective" hysterectomies and sterilizations in tubal ligations from 1971 to 1973. Puerto Rico, HED was responsible for sterilizing one-third of the women between the ages of 20-49 by 1965, and two-thirds of Puerto Ricans between the ages of 20-49 were sterilized by 1973. (According to Puerto Rico Libre, Puerto Rico has the highest sterilization rate in the world.) At a hospital in Claremore, Oklahoma, 52 Native American women were sterilized in one month July 1973.

In Brazil, an agency indirectly funded by the U.S. Agency for International Development (AID) sterilized nearly 1 million women in 1971.

And in Colombia, another massive sterilization program has been initiated by the U.S. and World Bank. The force behind it is the Population Council, founded by John D. Rockefeller III, in Colombia from 1965-1969, 40,000 women were sterilized in a program funded with a Rockefeller Foundation grant. Payments of \$1.50, gifts of lipstick and artificial pearls and offers of free medical service were used to persuade the women to consent to sterilization.

In the United States, objections to procedures followed by hospitals in getting women to consent to sterilization have made news. In April 1974, HED drafted guidelines for sterilizations, supposedly to regulate coercion on the part of hospitals and doctors. They require that a woman be fully informed of a sterilization operation and her alternatives, but they do not fully cover the question of informed consent. A study conducted in January 1975 by Health Research Group in Washington, D.C., on non-compliance with

new guidelines revealed that in 74% of the U.S. hospitals performing sterilizations, there have been flagrant violations of the regulations. In 33% of these hospitals, health care providers failed to meet all requirements. Samples of consent forms from the various hospitals show a widespread interpretation of the regulations. Some hospitals do not even use consent forms.

A group of women's health and legal organizations throughout California have submitted a petition to the Governor's Office of Health which would provide some legal protection against involuntary and uninformed sterilizations. They include:

- that informed sterilizations be prohibited unless informed consent is given at least 72 hours prior to the operation;
- that definition of informed consent be provided;
- that in non-therapeutic sterilizations, alternative methods of sterilization and birth control be used;
- that in therapeutic cases, alternative treatments be explained, including the right to a medical examination by a second physician;
- that consent documents be signed by the patient and a witness selected by the patient. Any form signed while the patient is drugged or under duress would be invalid;
- that the entire informed consent process be in English, Spanish and Cantonese;
- that the Department of Health provide for enforcement of these regulations.

For fact sheet on forced sterilization, write:

Jenny Jennings
433 Turk Street
San Francisco, California

THE FIRST "GUINEA PIGS" of the original birth control pill research show no evidence of long-term ill effects. Of the 836 Puerto Rican women who took the very first pill, the 10 mg. Enovid, in 1956, 400 are still being monitored medically and 45 are still on the pill. Another group of close to 5000 women who have been on the pill since 1961 have been compared with a control group of nonusers. Some reassuring statistics:

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Aptheker M1032 Box 106 series 2 Folder 22

- Laundry list of sterilization
- Intersection of race, class, biological determinism, colonialism, and more (pg 10)
- Mentions Shockley

. of Special Collections
The Africville Project
Series 2. Africville
Vol. 1. Africville
1990

not only was criminality biologically explained but that appeared the idea that poverty was a reflection of the biological inadequacy of the poor, and there developed concepts of the "worthy poor" and the "unworthy poor" and frequently an equating of the "poorer classes" and the "criminal classes". From this is not a very long step to the view of Marxism and Socialism as the ideology of those who "threatened civilization". Hence, the concept of the "criminality" of Marxism, institutionalized in the legislation of Bismarck, the "criminal syndicalism" laws of the United States and its Smith and McCarran Acts and the practices of distinguished statesmen, such as Mussolini, Hitler, Franco and other Excellencies in South Africa, South Vietnam, South Korea, Guatemala, Greece, Iran, Portugal, Brazil, Paraguay, Chile and other bulwarks of the "Free World." With imperialism, this elitism and racism become blatant and pervasive. A mixture of Social Darwinism and eugenicism became prominent, as in Henry Martyn Boies' Prisoners and Paupers (1893) where the suggestion was made that both the impoverished and the imprisoned should be not only segregated but also castrated.

Dr. Martin Waddell and Human

Sánchez M562 box 57 folder 7

INTRODUCTION

Population control in the Third World and among minority peoples in the United States has become a major focus of U.S. efforts to stem the growing demands of oppressed groups for a more equitable share in the world's resources of food and energy. In recent years, policy efforts have shifted from the propagation of birth control devices to the massive sterilization of women as the solution to population growth in the Third World and in the ghettos, barrios and tribal reservations of the U.S.

By 1975, more than 35% of Puerto Rican women had been sterilized in a population program instituted jointly by the Puerto Rican and U.S. governments—the highest rate of female sterilization in the world. In the United States, an estimated 32% of all black women are sterilized before the age of 30. High rates of female sterilization have also been reported for Mexican American and Native American women in the U.S.

The incidence of sterilization in the United States shows both a class and racial bias in the promotion of sterilization as a means of permanent birth control. Only 5.6% of college educated white women were sterilized in 1970, compared to 9.7% of college educated black women. Among women with less than a high school education, 14.5% of white women and 31.6% of black women had been surgically sterilized. In the Third World, the sterilization of lower class women has been particularly pronounced in Puerto Rico, Brazil, Columbia, and India. Between 1963 and 1965, more than 400,000 women in Colombia were sterilized in a program funded by the Rockefeller foundation. In Bolivia, a U.S.-imposed population control program, administered by the Peace Corps, sterilized Quechua Indian women without their knowledge or consent, according to the Committee to End Sterilization Abuse.

CORPORATE INTERESTS BEHIND POPULATION CONTROL PROGRAMS

The funding of population control programs in the Third World and within the U.S. is indicative of U.S. corporate

and government interests in restricting population increase among certain groups of people. Although previously supported by large U.S. corporations, private funding for population programs in the Third World today comes from Agency for International Development (AID). In recent years, AID has spent more in population control programs (\$125 million in 1973) than in combined agricultural and rural development planning. Native sterilization in India has been based on findings of the Khanna Study of 1954, funded jointly by the Rockefeller Foundation and the Indian government. The Ford Foundation has set up "pilot programs" for population control in Latin America which guarantee any individual \$5 to \$7 a month if the person agrees to permanent sterilization.

In the United States, sterilization campaigns since 1966 have been funded by the Department of Health, Education and Welfare (HEW). Between 1966 and 1974 the family planning budget of HEW increased from \$51 million to over \$250 million. HEW now funds 90% of the cost of sterilization for the poor, but is prohibited from dispensing federal funds for elective abortion. The results of HEW funding are evident in the rapid increase in the number of sterilizations performed in recent years. Since 1970, female sterilization in the U.S. has increased almost 300%—from 192,000 to 548,000 sterilizations performed each year.

WHY POPULATION CONTROL?

To understand the promotion of population control measures among minority groups in the U.S. and lower class people in the Third World it is necessary to understand population control policies in a social and political context. Historically, population control has been aimed at protecting the domination of white upper class groups over world resources by restricting the growth of racially or economically oppressed groups. This policy of economic control has been justified by promoting the idea that increases in population ("over-population") in the Third World is the major cause of poverty and underdevelopment of these nations. This article will trace the development of the population control movement in the United States.

FROM EUGENICS TO "FAMILY PLANNING"

By the late 1930s, the ideas of the birth control movement were indistinguishable from those of the eugenics movement—a defense against high birth rates of blacks and immigrants in the U.S. With the practice of eugenics in Nazi Germany, however, population planners shifted their position from the overtly racist rhetoric of the eugenics movement to the more reputable sphere of "family planning." Yet, the political beliefs of the dominant power group promoting contraceptive usage had changed little from the time of the eugenics movement.

In 1952, John D. Rockefeller III sponsored a conference on population control and established the Population Council. Rockefeller himself served as president of the Population Council from 1952-1957, succeeded by Frederick Osborn, a prominent eugenicist of the 1940s. With funding from the Ford Foundation (\$1 million) and the Rockefeller Foundation (\$3.2 million) for the period 1952-1958, the Population Council was firmly under the direction of the largest U.S. industrialists. Lewis Strauss (director: RCA), Thomas Parran (officer: Mellon Foundation) and Detlev W. Bronk (Rockefeller associate) served as charter members of the Population Council.

THE MONEY BEHIND POPULATION CONTROL

The Population Council and affiliated organizations (Population Crisis Committee; Planned Parenthood-World Population) continued to receive their major funding from the Ford, Rockefeller and Mellon Foundations until 1965 when government agencies began to assume financial responsibility for population control programs. By 1968, the Agency for International Development (AID) and the National Institutes of Health (NIH) supplied 67% of population control funding.

How were population control funds used by the Population Council and associated institutions? Funding for population programs has generally been spent in three areas: (1) funding major university programs and research in the areas of contraception development and techniques to administer contraceptives to selected

Third World and U.S. minority groups; (2) cooperative programs with foreign governments seeking (through birth control and sterilization) to reduce birth control growth in Third World nations; and (3) establishment of population control ("family planning") agencies in the United States, especially in black and minority communities.

POPULATION GROWTH AND PRESSURES ON RAW MATERIALS

Concern over population growth in the Third World has been intimately linked to the interest of U.S. industrialists for reliable and profitable sources of raw materials in the Third World. In 1952, (under the direction of Laurence Rockwood, Frank Pace, George P. Brown and other industrialists) warned that population growth in the Third World countries "presses hard on available natural resources." Growth of population in the Third World threatened the ability of the United States to acquire cheap and plentiful raw materials and challenged the position of U.S. industry in the world market.

POVERTY AND OVER-POPULATION IN THE THIRD WORLD

The need of U.S. industry to control population growth in the Third World in order to protect sources of raw materials has been disguised behind the myth that population growth produces poverty in the Third World and that limiting birth rates will permit economic development and a higher standard of living in the developing nations. Using demographic data which show higher rates of population increase in the Third World than in the industrial nations, population control agencies have argued that high birth rates are a prime cause of poverty and underdevelopment in the Third World.

This argument linking poverty to overpopulation in the Third World presents a justification for massive population control campaigns by U.S. agencies and ignores the economic realities of power in the developing nations. In order to understand the actual relationship between poverty and population in the Third World it is necessary to examine the complex



Source: "Families," a pamphlet by Linda Gordon

social and political realities involved in the process of development and corporate economic control of resources.

The rate of population growth in a country is dependent both upon the birth rate (fertility) and the death rate (mortality). If mortality rates decline (due to improved nutrition, sanitation, hygiene and medical care) faster than fertility rates, net population increases. It is this process which accounts for the rapid population growth of the developed countries in the 19th and early 20th centuries. While fertility rates in the developed nations have been dropping since 1850, mortality rates declined even more rapidly, resulting in growth of population. In the developed nations, the decline in the death rate and the increase in population happened over a long period of time so that annual population growth rates are now slight, in the Third World, however, decreases in deaths have occurred very rapidly so that the annual population growth of these countries has been rapid.

The reasons for this imbalance between birth and death rates in the Third World must be sought in social and economic factors affecting families in the developing nations. As nations of the Third World came under colonial or foreign

corporate domination by Europe and the United States in the last four centuries, the standard of living in the colonial nations was initially increased. The provision of roads, medical services, sanitation systems and food processing centers by the colonial powers led to a rapid decline in the mortality rates and an increase in life expectancy in Third World nations.

Once these services which are necessary for corporate operation in the Third World had been established, however, raw materials and natural resources extracted from the colonial country were taken back to the developed nations. As wealth was brought back to the colonial powers, resources for internal development and social services in the colony were unavailable and the standard of living in Third World nations stagnated.

Imperialist domination of the Third World has two effects on the fertility rates of the developing nations. First, the standard of living in the Third World has not increased sufficiently to lower child mortality to the level of the developed nations. While the decrease in child death rates has been enough to spur a population growth for the country, an individual couple cannot be certain that their own children will live to adult age. Unless

Sánchez M562 box 57 folder 7

- 6 -

child mortality rates are very low, a woman needs many births to ensure several children surviving to adulthood. But, more importantly, fertility rates are dependent upon the need for children in any economic system. In Third World nations children working in economic activity are a necessity for the family's survival. In rural agricultural areas children are employed as field hands or cultivators while children in the cities earn money for the family through peddling, selling produce or making handicrafts. In colonial economies, therefore, children are not only a necessity for familial survival and a social insurance for parents in old age.

POPULATION CONTROL IN MANIPUR, INDIA

A study of the population control programs in Manipur, India indicates the effects of economic and social structures upon the birth rate of Third World nations. In 1954, a team of Harvard scientists, under the sponsorship of the Rockefeller Foundation and the Indian government, undertook a massive campaign in a number of Indian villages to promote contraceptive devices and education about family planning. An analysis of population growth in 1959 showed that the birth control campaign had been a failure. While the birth rate in villages provided with contraceptive programs had fallen, other villages which had not been in the population program had similar decreases in birth rates.

Mahmood Mandani in *The Myth of Population Control* explains why this population control and other attempts to provide birth control to the Third World, have failed. By interviewing villagers in Manipur, India, he discovered that those who had consistently accepted birth control devices from the Harvard investigators, but failed to use them. More importantly, Mandani discovered why the Indian villagers rejected contraception. The nature of the economy in India means that all members of the family (except very young and very old) make some productive contribution to the family's income. Child-rear work in agriculture, make handicrafts for sale in the market and tend the younger children. A large number of children, therefore, is vital for the family's economic security.

STERILIZATION ABUSE IN PUERTO RICO

Puerto Rico is a case study of the manipulation of population programs for U.S. corporate needs. From 1954 to 1964 the Rockefeller-funded Population Council

economic development and the establishment of secondary and college education in India during this period had the effect of raising the average age of marriage in the villages (from 17.5 years in 1956 to 20 in 1969). Thus, there were fewer births. It was economic and social change, not the birth control program, which curbed population growth in the villages.

Research indicates that birth rates decrease when economic development and increases in the standard of living occur. Families become less dependent on their children for survival. Now it is no longer necessary for women to marry at an early age and begin having children. When Third World nations are able to achieve independent development and a higher level of welfare for their populations, birth and death rates can achieve an equilibrium.



Source: *Women: A Journal of Liberation*

Promoting balanced population growth through the independent development of the Third World, however, has not been in the interests of U.S. corporate powers. Rather, U.S. agencies have promoted a policy of sharply curbing birth rates in the Third World through aggressive "family planning" programs and involuntary sterilization.

STERILIZATION ABUSE AND COLONIAL CONTROL OF PUERTO RICO'S RESOURCES

had subsidized sterilization in private facilities for 11,000 Puerto Ricans. Sterilization was advocated as a contraceptive method by physicians who considered other techniques too difficult for poorly educated Puerto Ricans to understand. As a standard part of their training, medical students were taught that any pregnant women who already had two or more children must be sterilized during childbirth.

Statistics from the Population Studies Department of Puerto Rico confirm the use of sterilization primarily for working class Puerto Rican women of all ages on the island with a family income under \$4,000, 13.5% have been sterilized. In addition, almost 2/3 of sterilizations are done on women under the age of 30-making Puerto Rican women the youngest in the world to be sterilized.

STERILIZATION ABUSE AND COLONIAL CONTROL OF PUERTO RICO'S RESOURCES

This massive sterilization program has taken place in the context of U.S. colonial control over the island of Puerto Rico. Major petroleum and petrochemical industries now represent over 1/2 (11.3 billion) of total U.S. investment in Puerto Rico. These industries are basic and intermediate products for export to the U.S.--requiring large amounts of capital but a relatively small workforce. To reduce the problem of increasing unemployment caused by these industries, as well as to curb the growing militancy of the Puerto Rican people, the U.S. has decided to reduce the "excess" working population--through sterilization. Promotion of sterilization and other population control policies reinforces the myth that it is the growing populations of the Third World, rather than the exploitation of these people by multi-national corporations that is at the root of poverty in the developing world.

A similar interest in reducing the growth of minority groups has led to the promotion of sterilization among Cuban-Americans, blacks and Native American women in the Third World." NACLA "Population Control in the Third World," NACLA Newsletter (Nov.-Dec. 1976); NACLA "Population Control in the Third World," NACLA Newsletter (Dec. 1970); Linda Gordon, *Woman's Right, Woman's Right: A Social History of Birth Control in America* (1976); Barry Commoner, "How Poor People Breed Overpopulation," *Ecology* (Aug.-Sept., 1975); Mahmood Mandani, *The Myth of Population Control* (1972); "Sterilization," *Health Care Bulletin* (Jan.-Feb., 1975); *The Guardian*; CESA pamphlets and literature.

- 7 -

medical care in labor. Spanish-speaking women have been particularly vulnerable to the practice of forcing women to sign consent forms printed in English, often with the assurance that it is a routine consent for medical care. The ethics of U.S. medical profession. Teaching hospitals often push sterilizations, especially clowns. Commented a resident at Boston City Hospital, "We like to do hysterectomies...it's more of a challenge...we know, a well-trained chimpanzee can do a tubal ligation...and it's good experience for the Junior residents, good training."

The abuse of sterilization in the United States and Puerto Rico has been challenged by progressive political groups and women's organizations. On the Claremore Native American reservation in Oklahoma, organized protest forced the government hospital to stop sterilizing women without their privilege or consent.

Three young Mexican women have filed suit against the University of Southern California Medical Center for sterilizations done, without consent, during childbirth. Following this example, the Committee to End Sterilization Abuse (CESA) has developed guidelines for hospitals. These guidelines prohibit sterilization of women without informed consent of the risks of surgery, the permanency of sterilization, and the alternative forms of birth control available. CESA and the American Civil Liberties Union (ACLU) have also been prominent in lawsuits filed against city and county hospitals which use sterilization as a form of population control for minority women. For more information on sterilization abuse and the enforcement of women's rights to quality health care, write CESA, Box A244, Cooper Station, New York, NY 10003 or contact CALA. --Kathleen Elee

Sources: Nancy Polke, "Economics and Population Control," *Science for the People* (Nov.-Dec. 1976); NACLA "Population Control in the Third World," NACLA Newsletter (Dec. 1970); Linda Gordon, *Woman's Right, Woman's Right: A Social History of Birth Control in America* (1976); Barry Commoner, "How Poor People Breed Overpopulation," *Ecology* (Aug.-Sept., 1975); Mahmood Mandani, *The Myth of Population Control* (1972); "Sterilization," *Health Care Bulletin* (Jan.-Feb., 1975); *The Guardian*; CESA pamphlets and literature.

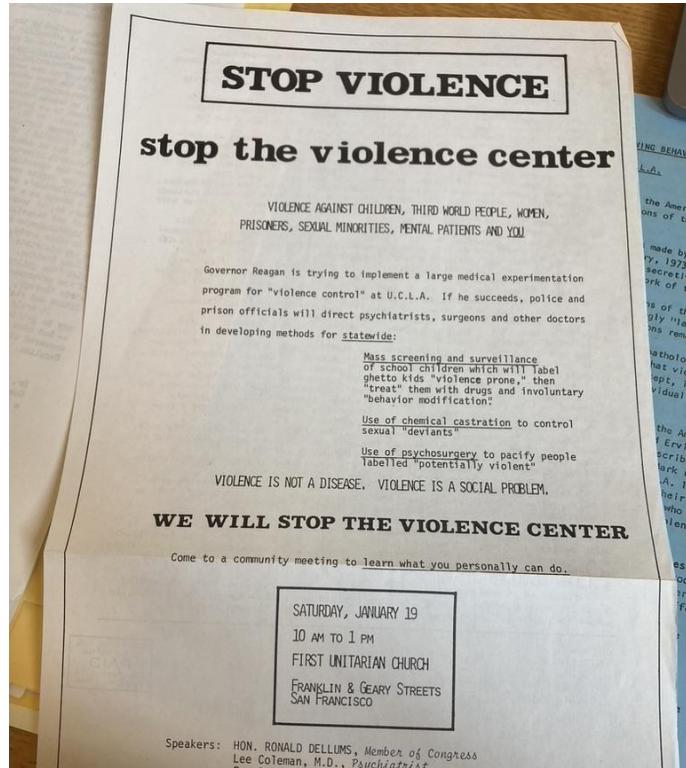
Behavioral Genetics (criminality)

Social activism against center for the study and reduction of violence, and connection to differences in sex chromosomes

Discussion questions

1. What was the reason the UCLA Center for Study and Reduction against Violence was initially created?
2. Who were the stakeholders?
3. What were some of the major concerns around this center, specifically connected to genetics? How would these concerns about these scientific proposals impact society?
4. What actions did activists take to work against the UCLA Center for Study and Reduction against Violence?
5. What was the ultimate result of the activism?

Shapiro M0928 Box 25 Folders 1, 3, 8



Gould M1437 box 774 Folder 8

Newspaper cutting: "Gene's May Tell One's Potential to Commit Crimes"

Shapiro M0928 Box 25 Folder 3

- Another good overview of the whole situation

Proposed violence center 'swirling in controversy'

by Sharland Trotter

If there is a single project most responsible for the Law Enforcement Assistance Administration's hasty renunciation of behavioral modification, it was probably the proposed \$1.5 million Center for the Study and Reduction of Violence, which the California Council on Criminal Justice—the state planning agency for independent LEA block grants—founded "in principle" to fund in July, 1973.

Plans for the center were financed by the LEAA and in part by the California legislature, which voted up prior to Dr. Louis Jolyon West, head of UCLA's prestigious Neuro-psychiatry Institute. His proposal, when first presented to the state Health and Welfare Agency in 1972, had recommended a combination of first-rate research and eminently feasible reforms to develop "practical applications" of models for the detection, prevention, control and treatment of violent behavior.

The Boston project was carried out under the direction of Dr. Edward Donnelly, Reagan announced the soon-to-be-named Violence Center in his state of the same message. "John West (who is currently a candidate for President-elect of the American Psychiatric Association) found himself and his project embroiled in a swirling controversy that has become almost unbroken for more than a year."

Rights groups opposed

Congressional and other groups research on violent behavior aroused opposition from a number of civil rights organizations in California, including the NAACP, National Organization for Women, the Mexican-American Political Association and the California Prisoners Union. These groups and others charged the proposed Center, as best they could, with a public relations gimmick for the Reagan administration and a boondoggle for behavioral scientists starting from federal budget cutbacks. They contended the Center would encourage behavior modification experiments on political protesters, inmates of prisons and mental hospitals, racial minorities and women.

Such fears, if perhaps exaggerated, have not been fully allayed by Dr. West and his colleagues at UCLA. According to West, these fears and others, at least ominous about the proposed Center; it's merely an effort on the part of a number of UCLA faculty members to obtain public support for various studies of "life-threatening" behavior. "All of these studies," said West in a telephone interview, "are socially important, ethically sound and useful." The opposition, he continued, "has been to a phantom organization drummed up by people on this campus with a political agenda."

Despite such reassurances, the list of critics and questioners has expanded far beyond the UCLA campus to include Senator Sam Ervin, the Senate Select Subcommittee on Constitutional Rights, the Children's Defense Fund, members of the California legislature, a public interest law group (Public Advocates, Inc. of San Francisco), and several psychiatrists and psychologists. At least six draft reports have gone through the process to date, and the final report is due in about a month. Some of the details of the research to be carried out, as well as the specific programs proposed, are sketchy—many of whom would be primary or mental patient "volunteers."

Psychosurgery feared

One of the most controversial aspects of the Violence Center proposal(s) is its (their) similarity to the "shock therapy" in order "to clarify their relationship to various types of violent behavior." The purpose of such studies would include "hyperkinetic children" who "have been found to commit aggressive or violent sex crimes."

A scientific screening of boys would determine the presence of an extra Y (male) chromosome and its possible relation to violent behavior. The Boston project was carried out under the direction of Dr. Edward Donnelly, who has attained a certain amount of notoriety for his work at the Violence Center in his state of the same message. "John West (who is currently a candidate for President-elect of the American Psychiatric Association) found himself and his project embroiled in a swirling controversy that has become almost unbroken for more than a year."

Dr. Richard Wasserstein, head of the Neuropsychiatry Institute and a former resident at UCLA and a former resident at the Neuro-psychiatry Foundation, has also been involved in the NIMH and LEAA. The purpose of that research was to refine criteria for "detecting and treating violent behavior and to develop an early treatment for the potentially violent person at an early stage."

The Boston project was carried out under the direction of Dr. Edward Donnelly, who has attained a certain amount of notoriety for his work at the Violence Center in his state of the same message. "John West (who is currently a candidate for President-elect of the American Psychiatric Association) found himself and his project embroiled in a swirling controversy that has become almost unbroken for more than a year."

Attention to proper research design, while important, no longer seems to be a priority.

Ethical considerations must receive major consideration, and in this case are generally ignored. Dr. Richard Wasserstein, who was to have been head of law and ethics committee for the Violence Center, abruptly withdrew from the project. His decision was based in part on the lack of a clear and defensible conception of the Center: in part upon "doubts" about the adequacy of the proposed project to safeguard against certain kinds of improper experimentation; and in part because of his belief that "the creation of the Center may very well be used by those outside the Uni-

versity of California for their own purposes."

In the wake of all this protest medical and behavioral scientists, equivalently their critics, have suggested killing the UCLA proposal, said questions about the "specimens" the project would use.

"The violence project," he explained, "has never received a single grant from UCLA, although offices in the university in California might have."

Dr. West, for his part, is still despite the opposition, pushing forward.

"We have heard about this ban on human experimentation, but I don't know whether or not it's true," he said.

The Violence Center, proposed drawing on the resources of the

University of California, will be called the Isaac Ray Symposium on Life-Threatening Behavior and will be under the direction of psychologist Edwin Schneidman, whose major interest is suicid-

ality.

The significance of the name

choice is unclear. In any case,

the Children's Defense Fund, which

had led the fight against the project—say they will continue to support development in California and elsewhere,

and will keep a sharp eye

on other possible sources of fed-

eral funding.

Isaac Ray Symposium

HUMAN RIGHTS, THE LAW, AND PSYCHIATRIC TREATMENT

May 24 - 25, 1974

Speakers will include

THE HONORABLE DAVID L. BAZELON
U.S. Court of Appeals for the District of Columbia Circuit
"Is the Adversary Process Essential to Democracy in Psychiatry?"

ALAN M. DERSHOWITZ, LL.B.
Professor of Law, Harvard Law School
"Dangerous Patients in Confinement"

BRUCE J. JANIS, J.D.
Director, Civil Liberties and Mental Illness Project,
New York Civil Liberties Union

"Emerging Trends in the Treatment of Handicapped"

A. LOUIS McCARRY, M.D.
Director of Legal Medicine, Massachusetts Department of Mental Health
"The Empirical Approach: The Voice of the Supreme Court"

Clinical Associate Professor, Cornell University Medical Center
"Isaac Ray: Have We Learned His Lessons?"

JONAS R. RAFFREPORT, M.D.
Chairman, Department of Psychiatry, University of Baltimore
"Enforced Treatment—is It Treatment?"

ALAN A. STONE, M.D.
Professor of Law and Psychiatry, Harvard University
"The Law and Psychiatry: How Far Have We Come?"

JOSEPH P. WEISBERGER,
President, American Psychiatric Court
"Panetist and Discusser"

Bulfer Hospital, 333 Daniels Avenue, Providence, Rhode Island
(A Brown University Teaching Hospital)
In affiliation with the R. I. Distaff Branch,
American Psychiatric Association

and the R. I. Bar Association

Registration Fee — \$15.00
Registration fee includes admission to the Isaac Ray Symposium, Bulfer Hospital, 333 Daniels Avenue, Providence, Rhode Island 02905. Deposit required. Send name, address and check to Isaac Ray Symposium, Bulfer Hospital, 333 Daniels Avenue, Providence, Rhode Island 02905. Make checks payable to Bulfer Hospital — Isaac Ray Symposium.

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- Proposal to do mass male screening of sex chromosomes for XYY to prevent violence

**Merits of Center For The
Study Of Violence Debated**

Continued From Page 1

he said. Coleman also spoke of the project researchers' intent to study what he termed "mythological syndromes" such as "hidden brain disease" and the "XYY chromosome syndrome" in people who were thought to have a "low threshold" for violence, although they had not yet evidenced violent behavior.

"There was a recommendation to conduct mass screening of (male) children to find out who had an extra Y chromosome, so they could 'follow them up.' We call that surveillance," Coleman said.

He asserted that the "core and philosophy" of the proposed center is that of UCLA psychiatrist Dr. Frank Ervin, co-author of the book, *Violence and the Brain*, and that Ervin was one of the founders of the center.

West flatly refuted Coleman's assertion that the center planned to perform psychosurgery on experimental subjects. "It was never our intent to do any kind of surgery in these studies — to plant electrodes in anybody's head," he said.

When a member of the audience charged that plans for brain implantations appeared in the center's preliminary proposal, West replied that this was "an early paper which reviewed the literature for the purpose of people in Sacramento who weren't familiar with it ... a great deal had been taken out of context and widely misinterpreted."

West stated that preliminary studies have shown a relation between violent behavior and the XYY chromo-

some pattern in men, and that it is therefore a plausible hypothesis. He denied that Frank Ervin was ever involved with the center. "I hoped he would be, but he had other fish to fry," West said.

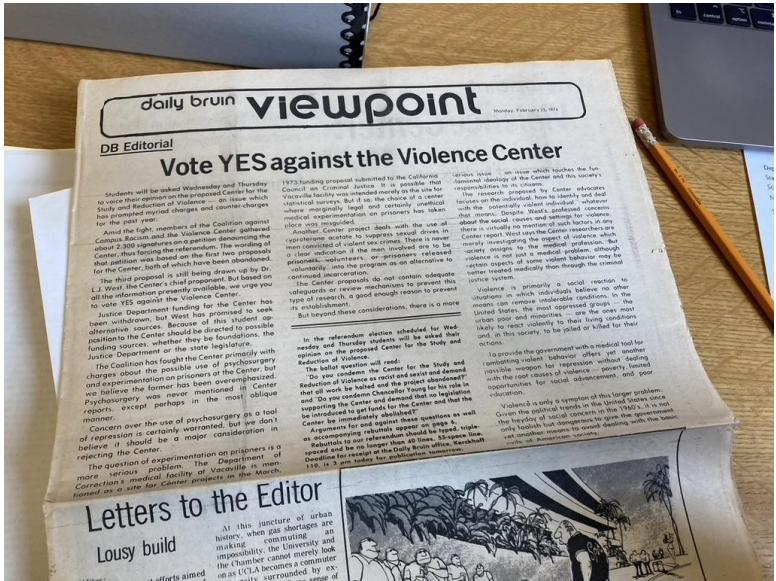
Among the more vocal people in the audience were members of Students for a Democratic Society and the Committee Against Racism, two organizations which are not affiliated with UCSF. Members of these groups, as well as some people from the campus community, passed out literature after the debate which opposed the center.

Coleman described West as a "naive" and "liberal" physician "who won't tune into the social and political realities of the state and the use to which it will put his research." He charged that by doing such research "we make the system of punishment worse, and get away with it because we label it as therapy."

Coleman said that the creation of the violence center "is typical of the abuse of the medical model for social problem solving. We choose to define problems as medical ill-

Shapiro M0928 Box 25 Folder 3

- UCLA student activism



Shapiro M0928 Box 25 Folder 3

- Special interest groups representing marginalized communities protest letter

Office of Public Advocates, Inc.

Robert L. Charles, Managing Attorney
Paul A. Karpinski, Associate Attorney
Tina H. Johnson, Associate Attorney
Albert F. Lorraine, Associate Attorney
Ruth M. Sander, Associate Attorney
Linda Marquez, Administrator

Division of Research,
Western State Hospital
Charles B. Lawrence

August 17, 1973

Chancellor Charles Young
University of California
at Los Angeles
Los Angeles, California 90024

Re: Center for the Study and Reduction of Violence

Dear Chancellor Young:

I represent a number of single men and women, an organization which opposed the formation and operation of the Center for the Study and Reduction of Violence, until such time until certain safeguards are written into the proposal which will protect the public interest and the public interest. These safeguards were discussed on August 1 of this year between representatives of the proposed Center, Dr. Louis J. West and myself, and your representative, representatives of my client organizations: the NAMC, Western American Political Association (WAPA), the United Workers Party; American Farmers Organizing Committee (AFOC); Prisoner-American Political Association (MAPA); California Prisoner-American (CPAP); and the Committee to Abolish the Abuse of Prisoners (COAPP). Also present at that meeting, as you perhaps know, was Dr. J.M. Stuhlebech of the California Dept. of Corrections. Although several of these safeguards have probably been communicated to you by your representatives or through your attorney, Alvin Charles, who has disseminated them to us, I would like to call your attention to the fact that we that we can receive a prompt and specific response from you as to whether you are willing to have these safeguards written into any legislation approving the Center.

(1) Establishment of independent citizens' review board.

The proposed Center intends to study and ostensibly benefit the public in general by focusing on violence in certain "subcultures" and selected segments of society. This includes, for example, the study of violence in schools by concentrating on applying treatment models to two Los Angeles schools, one Black and one Chicano, attempting to correlate violence in individual women with their life-style cycles, and attempting to predict violence in order to guide the criminal and judicial authorities in determining when to release an individual from custody. Yet surprisingly, there

(2) No experimentation to be done on persons all volunteers human subject to parole or probation without pay.

This requirement goes directly to the issue of informed consent. As you will know there is general agreement that an informed person can consent to be informed. The desire for the person to regain his or her virtually anything so overwhelming that he would undertake virtually anything that he would risk exposing himself to scientific experimentation, in exchange for the complete prohibition on experimentation. The Center proposes, in the sixth and most recent version of its proposal mentioned thus far, as experiment on prisoners. Indeed, it does not prohibit on experimentation on the sixth and most recent version of its proposal mentioned thus far, as experiment on prisoners. It is the same as to "experiment first" with latitude on that they find "inconvenient". This will not wash with us, nor, I believe, with the Legislator or the public. This includes the experiment under duress. This includes all those who may give consent in the name of authority or other factors. Persons on parole who, perhaps, in view of their parole, agreed to participate in risks that they would otherwise not take. Persons on probation, in addition, as the inducement for them to do particularly strenuous work element for those who are poor we submit that all volunteers should be required to come along with pay. We would be more than willing to elaborate on what these requirements are necessary if you are at all interested in considering them as prerequisites for the final approval of the Center. There are some technical questions which make these requirements presently exist in law; we would hope that the legislature would want to bring the forefront of protecting the citizens and subjects of human experimentation, rather than arguing what the law requires as a minimum. We will, of course, be pleased to work with you in enacting the language of these suggested requirements.

(3) Additional procedures to insure true informed consent.

Informed consent forms presently used by the University, which are contained as exhibits in the sixth draft proposal, are fine except for their reference to determinants of pay for participation. It is to withdraws from an experiment As stated above, there should be no inducement whatsoever. Moreover, it is unclear that these forms are provided in language other than English if the person undergoing the experiment has

Page 5

I understand that the University intends to find an authorizing bill and seeking approval for the Senate, and disassociating itself from the original draft of the legislation bill which Dr. Stubblebine presented at our August 1 meeting. We would like to assure you that we have been, and we believe, open and sincere about their intentions with respect to the University's position on this issue. We therefore ask, whether you intend to make any changes, and if not, that you inform us of your intentions with respect to seeking legislative approval for this matter. This includes informing us in advance of the intended authorizing bill, the date of its introduction, and of your willingness to have hearings around this bill. This would be, of course, not only for the remaining weeks of the present legislative session, but for next year's session as well.

I look forward to hearing from you at your earliest possible convenience on these matters.

Very truly yours,

Fred J. Hiestand

Fred J. Hiestand

FJH:am
cc: Our Client Organizations
Dr. Stubblebine

Shapiro M0928 Box 25 Folder 3

- Asking folks to write to their state representatives
- Note willie brown (see next slide)

IF YOU OPPOSE
FEDERAL AND STATE FUNDING
of the Project on
LIFE THREATENING BEHAVIOR
AT THE NEUROPSYCHIATRIC INSTITUTE
AT UCLA

PLEASE WRITE TO:

YOUR CONGRESSPERSON
YOUR TWO SENATORS

—AND THESE CALIFORNIA LEGISLATORS

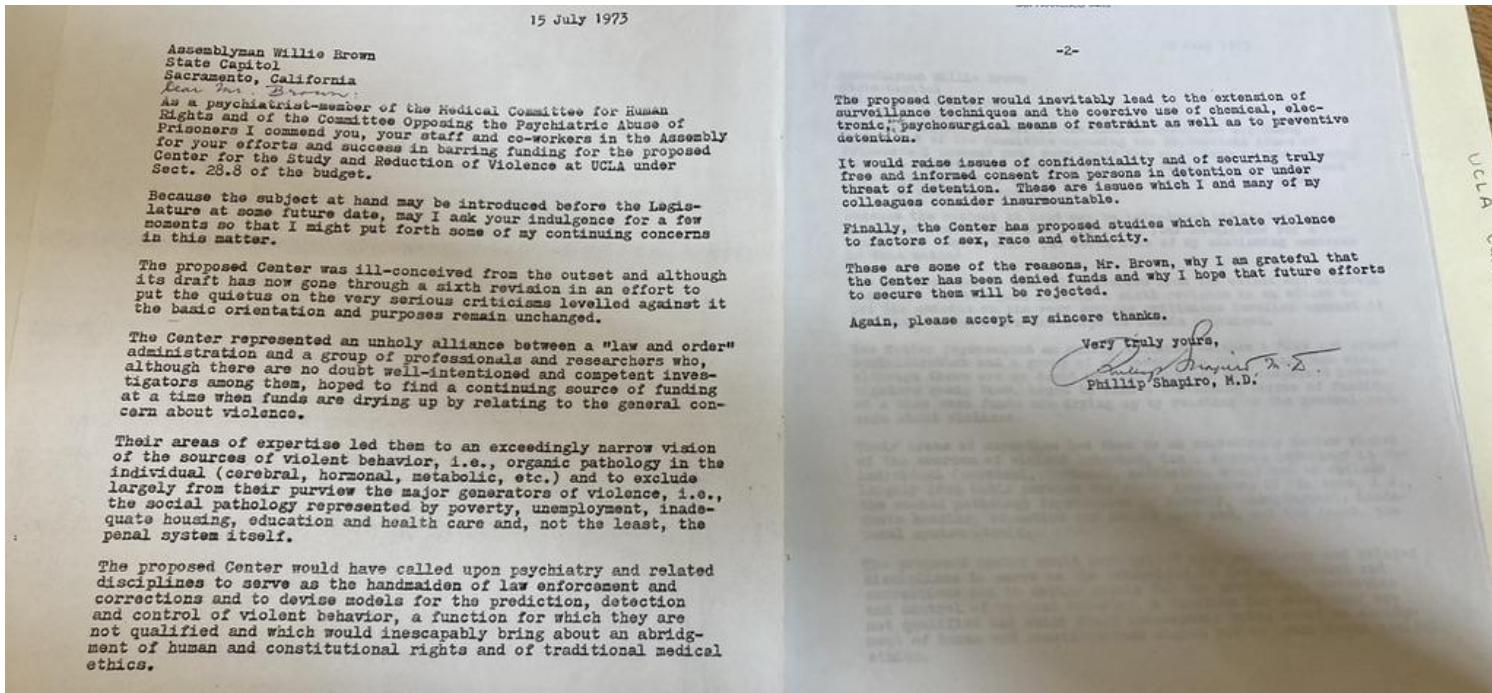
ASSEMBLYMAN WILLIE L. BROWN JR.
ASSEMBLYMAN ALAN SIEROTY
STATE SENATOR ANTHONY C. BEILINSON

at: STATE CAPITOL
SACRAMENTO, CA. 95814

COALITION OPPOSING MISUSE OF SCIENCE
FOR REPRESSION

Shapiro M0928 Box 25 Folder 3

- Congratulations in preventing funding in state



Shapiro M0928 Box 25 Folder 1

- Chromosomal differences and criminality

Chromosomal studies (Tables I, II, III, Fig. 1).

Zublin (1953) noted the tendency to psychopathy in (XXY) Klinefelter's Syndrome: this was before cytogenetical studies on humans had been made. After 1960 a series of studies on institutionalized and criminal male populations showed that the prevalence of XYY's was always significantly higher than in newborns (2-4% vs 0.2%). A summary of results from 12,000 individuals in 11 chromatin surveys of institutionalized populations showed that there was a firm quantitative basis for the assertion that gonosomal aneuploidy (sex chromosomal abnormality) was associated with behavioural problems (Casey et al., 1966 a, collating their own studies with those of Hosier et al., 1960; Miller, 1964; McLean et al., 1962; Barr et al., 1960; Ferguson Smith, 1958; Shapiro et al. 1960; dela Chapelle, 1953; Brug, 1953; Anderson, 1964). Of 10,685 male mental defectives 90 (0.84%) were XXY and where the mental deficiency was allied with anti-social behaviour 21/942 or 2.2% were XXY. This suggested that behavioural problems were particularly liable to occur in male sexual aneuploids, but whether this was a complication of mental (cortical) deficiency or a direct result of aneuploidy itself was unclear.

The critical test of this question came in Forssman's studies (1963) in which 15/760 (2.0%) of those in whom mental deficiency was mild or absent, and instead behaviour was severely even criminally psychopathic, were chromatin positive (XXY-XXXYY); whereas only 10/1625 (0.6%) of simple mental defectives were chromatin positive. In the criminal group early crime, recidivism and successful (i.e. intelligent) absconding were frequent; chromosomal mosaics (those with only parts of the body carrying cells with abnormal chromosomes) were often physically normal, and there were no distinctions in behaviour among the various genotypes such as XYY and XXXYY. Casey et al (1966b) extended this study by showing that the dichotomy between anti-social behaviour and intellectual defects was greatest in males having extra Y chromosomes. The Edinburgh group (Price, 1966) confirmed this and added the findings that criminal XYY's were usually tall. The link with tall stature proved useful in other studies (Goodman et al., 1968; Telfer et al., 1968; Wiener et al., 1968).

This was the basis for the description of the so-called "YY Syndrome": aggressive and violent temperament, tall stature, early delinquency, crime against property rather than the person, frequent abscondment and recidivism and excess male determining chromosomes.

In recent years further studies have shown that the highest rates of sexual aneuploidy may be found in sexual offenders and in inmates who are persistently violent (usually sexually) inside prison as well as out - a practice which, in the absence of mental deficiency, argues the presence of behavioural dyscontrol (Razavi, 1969; Melnyk, 1969; Razavi and Roth, 1970). The rate of aneuploidy in these groups is on average 10% - fifty-fold increase over newborns. About half of the cases are mosaic and most appear physically normal by standard clinical examination (Tables IV, V). They are only rarely infertile, and anomalies of both the X and Y chromosomes are equally frequent. This suggested a different syndrome: X or Y anomaly, irregular schooling and sporadic job maintenance in small urban settings, normal intellectual and physical maturation (the distributions of I.Q. and height are the same as the general population); and early, repeated and specifically sexual crime against the person.

Shapiro M0928 Box 25 Folder 1

- Good overview of the proposed institute

THE PROPOSED "PROJECT ON LIFE-THREATENING BEHAVIOR"
AT THE NEUROPSYCHIATRIC INSTITUTE, U.C.L.A.

We take this occasion to alert our colleagues in the American Orthopsychiatric Association to some dangerous implications of the proposed "Project on Life-Threatening Behavior".

The first public announcement about the Project was made by Governor Ronald Reagan in his "State of the State" message in January, 1973. Since then, those connected with the planning of the Project have been secretive, evasive, and contradictory in their replies to questions about the work of the Project.

We have carefully studied five successive modifications of the proposal for the Project. Each successive proposal has been increasingly "landered" -- to remove objectionable features. However, the basic objections remain.

The proposed Project avowedly will concentrate on "the pathologically violent individual". The main problem with such a Project is that violence as a social phenomenon, even if lip service is paid to this concept, is pushed into the background, while the biology or psychology of the individual is highlighted.

Characteristic of this approach is a letter in the Journal of the American Medical Association of September 11, 1967, by Drs. Mark, Sweet, and Ervin, two of whom are co-authors of "Violence and the Brain", a book which describes their use of psychosurgery, (or "neurosurgery of behavior"), as Dr. Mark refers to it, in the treatment of violence-prone individuals. In the J.A.M.A. letter, the authors suggest that "violent slum dwellers" are different from their "peaceful neighbors", and perhaps if we could better diagnose the many who have some organic brain pathology, we could treat them and thus decrease violence in the ghetto.

In a Project such as is proposed at UCLA, biological and organic research become a relative priority, even when some mention is made of the social roots of violence. E.g., researches are proposed which include the use of cyproterone acetate, which suppresses androgen secretion, in treating violent sexual offenders.

There is a distinct possibility that neurosurgical treatments will be introduced, and that prisoners and patients in mental hospitals will be the subjects. This raises serious ethical and civil liberties issues, revolving around the question of "informed consent" by persons under detention.

Dr. Frank R. Ervin, whose researches on violence in Boston involved the use of amygdalotomies, is now a Professor-in-Residence at the Neuropsychiatric Institute at UCLA. His name was attached to two research projects in an early proposal, but was removed from later versions. Dr. West, Director of the NPI,

(over, please)

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maintains that no neurosurgery will be done, and that Dr. Ervin has nothing to do with the Project. However, in testimony before a State Senate Committee, Dr. James Stubblebine, Director of the State Department of Health of California, indicated that psychosurgery could indeed be a part of the Project's work.

There are a number of facts about the proposed Project which are a source of apprehension; the fact that at a time when the Reagan and Nixon administrations are cutting back on urgently needed mental health and social welfare projects, \$1 million to \$1.5 million of federal and state money is being poured into research on "the violent individual"; the fact that most of the funding will be done by the California Council for Criminal Justice, which is dominated by law-enforcement officials and is headed by Attorney-General Evelle J. Younger, who is strongly prosecution- and punishment-oriented; the fact that the Adult Authority of California, in March, 1973, announced a new "get tough" policy, in which rehabilitation is listed as a last priority and only for those who are "amenable to and capable of it" (this is reminiscent of the position of Ervin and Mark in "Violence and the Brain", that once the brain structure has been permanently affected - even by environmental influences - one can no longer hope to rehabilitate such a violent individual by sending him to jail or by giving him love and understanding, through psychotherapy or education. "It is the brain malfunction itself that must be dealt with."); the fact that Dr. Ervin whose researches in Boston did involve performing amygdalotomies, the proposed Project; the fact that the Department of Corrections did in the past secretly carry out amygdalotomies at Vacaville, California, and that a broader program for performing psychosurgery on "serious management problem inmates" in California in 1971, was stopped only as a result of disclosure of the program to the public and considerable protest; the fact that State Secretary of Health and Welfare Earl W. Brian, Jr., said on January 12, 1973, "It certainly is a possibility" that prison inmates might be used as volunteer subjects in such a Center. (San Francisco Chronicle, January 13, 1973)

The proposed Project poses the danger that psychiatrists will be maneuvered increasingly into the position of being used as agents of social control; that the aim will be to perfect ways to "manage" the violent individual, be he prisoner, mental patient, or rebellious ghetto resident, by subduing him through the use of chemical or neurosurgical procedures.

There is much more to be said about the Project than can be included in this brief statement. More detailed information and documentation are available. We hope that you who read this will be sufficiently concerned to write to one of us, requesting this additional information.

Shapiro M0928 Box 25 Folder 3

- Good overview of ethical concerns

by Lee Coleman, M.D. (edited reprint from FREEDOM NEWS, Dec. 1973)

For nearly a year, the State of California and the UCLA Neuropsychiatric Institute (NPI) have attempted to establish the Center for the Study and Reduction of Violence (CSV). The official rationale is the need to "predict, detect, control, prevent and treat" individual violence, thereby improving the "safety of Californians."

What the proposed Center in fact represents is an unholy alliance in which medical researchers would obtain funding from swollen law enforcement budgets (at a time when other funding for research is rapidly shrinking), while the State gets the promise of sophisticated control techniques.

When the Center was first proposed, by this year, groups slated as experimental material included prisoners, incarcerated mental patients, women, racial minorities and children. Experiments included brain electrode implantations, with the aim of developing "...large scale screening that might permit detection of a violent episode..." (Center proposal, L.J. West, M.D., Sept. 1972).

Other planned experiments were chemical castration of convicted sex offenders, using the drug cyproterone acetate; drug experimentation to study female violence "associated with menstrual periods;" and long range surveillance of children said to possess "violence-producing" chromosomes.

Nowhere in the proposals issued from Sacramento or UCLA was there a single word of concern regarding the use of powerless subjects for dangerous experimentation. The profound dangers of medically disguised preventive detention in the name of "predicting" violence were similarly unmentioned.

Dr. L.J. West, Chief of the NPI, and Dr. J. Stubblebine, Chief of the Dept. of Health, claimed that "basic research" was planned, yet study of the protocols clearly indicated the plans for an intimate relationship between the CSV and the law enforcement network of California.

Prisons, local jails, courts, mental hospitals, delinquency facilities—all were to maintain a close working relationship with the doctors.

Saturation of the "helping professions" has also been promised: "...the Center will develop behavioral indicators, profiles, scales, biological correlates, and social and environmental predictors of life threatening behavior. These detectors will be structured into transportable models for use by teachers, clergy, social workers, counselors, psychologists, physicians, penologists, etc."

With growing opposition has come tactical retrenchment and efforts to clean things up. A task force on "Ethics, Law Enforcement, and Law" was appointed, and chosen to lead it was a 30 year veteran of the Los Angeles Police Department! He was quickly dropped when critics questioned his appropriateness, and a professor of Philosophy and Law at UCLA was substituted.

He soon quit, however, stating that: "...the creation of the Center may very well be misused by those outside the University as confirmation of their view of what is the answer to the problem of violence in our culture..."

Californians are confronted with the very real danger of a therapeutic police state in which preventive detention will be justified as therapy.

Detention of individuals pseudoscientifically pronounced as "violence-prone" would inevitably focus on the most powerless segments of our community, such as racial minorities, juveniles, ex-cons, and women.

The exclusively medical focus of the proposed Center is a tip-off to its essentially political nature. Violence in the U.S. has virtually nothing to do with medical problems. A medical model, in which doctors "treat" sick individuals merely serves to divert attention from the social and economic and political roots of crime and violence. We must focus not on "sick" individuals, but on sick political institutions.

Our elected representatives must be urged to turn away from the path leading to the therapeutic state, away from the brain wave-chromosome-hormone cop out, in order to squarely face the agonizing dimensions of our violent society.

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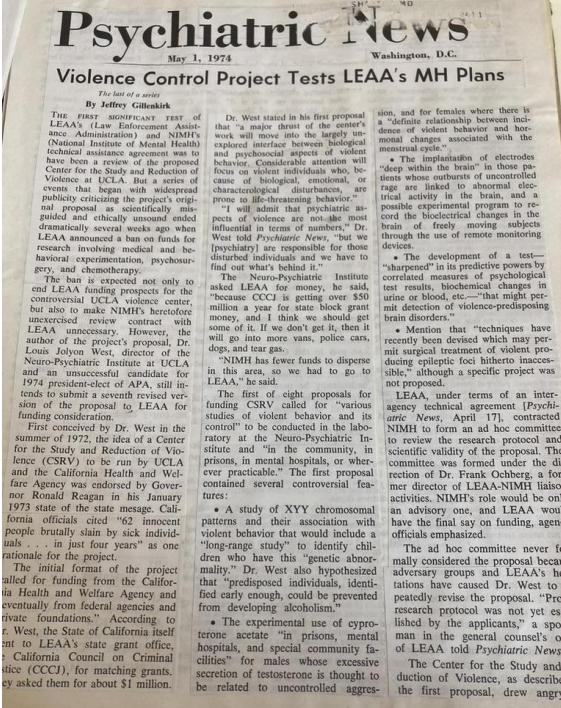
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- Funding has been blocked due to public outcry, overview of potential sex chromosome study with this



The proposed project was set up by the *Committee on the Status of Women*, which had been designated as "Chief Executive Officer" of the *Women's Commission for the Advancement of Research in the Social Sciences*. The *Commission* is composed of the *Scholarly Societies*, the *Scientific, Professional Public Agencies*, the *Universities*, the *Colleges*, the *Chapters of Fraternities*, the *Alumnae Associations*, and the *League of Women of Tomorrow*.

On behalf of the *Commission*, Dr. J. D. K. Johnson, associate director of *APA*—affiliated with the *Commission*—proposed a "profound de-emphasis" of the emphasis of diagnosis and treatment, and a "concentration of psychiatric efforts" to "work our way back to the individual," to legitimate "the right of the individual to determine his own fate."

From the report of the *Commission* it appears that the *Commission* had been constituted to "explore the possibility of establishing a center for the study of the problems of women in society." It had been proposed that the center be funded by the *Commission* itself, and that it be housed at the *University of California* at Los Angeles.

In a letter to the *Commission*, Dr. Richard W. Rives, president of the *University*, expressed his "doubts about the adequacy of the proposed center" and his "doubts about the kind of research contemplated." In particular, he pointed in his letter to the *Commission* that "we confine outside the university the consideration of their view of what is the best way to develop our culture."

The *California Council on Research* approved the proposal "in principle," but asked for more information before final approval.

At the early stage of the project, Dr. Paul W. Eysenck, chairman of the *Psychology Department* of the *University*, and Dr. G. H. Dill, chairman of the *Department of Sociology*, were invited to serve on the *Commission*.

On April 1, 1973, the Board of Directors of the Los Angeles County Mental Health Hospital, California, filed a complaint with the National Psychiatric Institute. The critics continued to hound Dr. Lasker. In August of 1973, Dr. Francesco filed an administrative complaint with CCCA, which was "too vague and general" and lacks "safeguards and any adequate abuse." The allegation was dismissed.

The situation became so sensitive by April of 1973 that all requests for information from LEAA and CCCA were referred to the general counsel's office within Lasker's office. Later, the Office of the ombudsman would comment only that "LEAA was still waiting for a new proposal."

A sixth revision of the LEAA plan, which little effort to define treatment charges, Violence, screening and treatment planning were planned with a predominantly black school and a Central American immigrant population in mind, and the UCLA student body.

lence center and the LEAA ban, NIMH memoranda about the center reflect a growing uneasiness within LEAA about their involvement in medical research funding.

"I would say that this is the straw that broke the camel's back," commented a disgruntled researcher whose own violence center was refused funding by LEAA. "This could have been a breakthrough year."

To consider the proposed funding for the project, Committee on Health and Welfare of the California State Legislature held public hearings. Terry Krupers told the committee that "this project for some time has gotten by as one of the worst slippshod, sloppy, and unworkable proposals and schemes that I have met my eye."

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of the most
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cedures that has ever
dress the issues raised in public
said," a spokesman for the C.
said.

While revising the proposal
and over again, Dr. West was
fending his project from public
slaughter. He told *Psychiatric*
that no aspect of the program would
involve psychosurgery; there would
no "Clockwork Orange"-type pro-
cedures; and no procedures would

in one of the largest campus vote turnouts in UCLA history, voted 3 to 1 that the proposed center was "racist and sexist" in nature and should be barred from the campus. The site proposal included the following search projects:

- Aggressiveness in hyperkinetic children, an intense longitudinal study
- Anterior pituitary hormone secretion patterns in XY/YY males;

The new LEAA guidelines concerning medical experimentation allow funding of projects that do not

Other critics from civil rights groups criticized the proposed captive populations for being "coercive," the special programs as ethically unacceptable, the focus on minority groups, and the review mechanism as inadequate. Many of the groups overruled the project's association with LEAA, claiming that all criminal justice forces would jeopardize the scientific nature of the program and endanger medical confidentiality.

civil liberties have been grievously abused of use of the program. Offenders abound, the program as racist, the standards as inadequate, the association with segregation to be a clear and palpable violation of the principles of the program.

* A study of life-threatening behavior during the menstrual cycle.
"We had adequate review of mechanisms detailed in this last proposal," Dr. West said in a telephone interview. "There is a policy committee for the School of Medicine, a special UCLA research protocol that I adhered to, CCCJ and NIMH mechanisms, review by the California State Legislature, a chancellor's advisory committee [of the University of California], a national advisory council, and a campus advisory

involve physical or psychological risk to the patient. Dr. West intends to re-submit another revised version of the proposal to LEAA under the assumption that his projects do not involve any risk to human subjects.

No one in LEAA could say whether or not his proposal would fit within their guidelines.

Dr. West retreated and the proposal, this time changing the title to the Center for Lifelong Behavior. The thrust and the specific aims of the proposal were the same, but more elaborate review mechanisms and patient safeguards were proposed.

The fifth proposal for the violence center would have involved experimental programs with population

But the proposal may never be submitted to Congress because it is unlikely to pass any of these committees, for it would cut off all funding for medical research, which was proposed shortly after CCCJ forwarded its report to Washington. A similar proposal was made by LEAA and NIMH officials, but they were unable to establish any cause-effect relationship between the controversial U.S. policy and the increase in violent crime.

"Let's wait until we see it," an LEAA official said.

Final activity

Please make a mind map of how class, race, sex, intelligence, immigration, government, colonialism, and Stanford connect to eugenics. Then, choose 3 links and provide a historical example of how scientific activists attempted to address this. (maybe we can use as a stepping off point for next time?)