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**STIGMATIZATION AND THE RE-ARTICULATION OF
EUGENIC IDEOLOGY: A STUDY OF CODED RACISM IN
FAMILY PLANNING POLICY FROM THE 1920S TO THE 1990S**

by

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DISSERTATION

Submitted in Partial Fulfillment of the
Requirements for the Degree of

Doctor of Philosophy
Sociology

The University of New Mexico
Albuquerque, New Mexico

July, 2014

DEDICATION

In the name of Allah, the Beneficent, the Merciful.

I bear witness there is no God but Allah, and Muhammad is His Messenger.

This work is dedicated to the countless individuals victimized by colonialism, racism, sexism and class exploitation. Justice has entered the land...

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Stigmatization and the Re-Articulation of Eugenic Ideology: A Study of Coded
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Abstract

This study investigates the use of coded racism in the evolution of fertility control policies from the 1920s to the 1990s. I propose a theory of welfare eugenics that explains stigmatization of the fertility of poor, racial and ethnic minorities through a re-articulation of overtly racist language in terms of cultural symbols, stereotypes, and labels referred to as coded racism. I conduct a discourse analysis of scientific papers presented at the Third International Congress of Eugenics in 1932, and witness testimony from congressional hearings held in the 1920s, 1965 – 1966, and 1995 – 1996 for evidence of eugenic ideology in public discourse about poverty, social welfare, and federal family planning policy. Results from a discourse analysis of the data partially supported a theory of welfare eugenics. The concept of welfare dependency emerged as the primary target of elite political discourse in the 1990s. Welfare dependency is presumed to be a failure of subordinate group members to fully assimilate dominant group traditional values about work ethic, meritocracy, morality, and family creation. These findings lead to a revision of my original theoretical perspective under a new conceptual framework for assimilation eugenics. A theory of assimilation eugenics explains discourse about the termination of the social welfare state as primarily an institutional stigmatization of the entire social welfare system to end the social and cultural reproduction of welfare dependency at the interpersonal level. Findings from this study will be used to advance understanding of how powerful elites adapt subtle forms of racist speech to set an agenda that reproduces structural forms of inequality in social and public policy.

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Chapter 1: Introduction

Overview

My efforts to disentangle a systemic practice of violating human rights uncovered a broader literature on the struggle of women over reproductive rights in the U.S. and the dark legacy of eugenic sterilization in the early 20th century. The subject of eugenic sterilization and reproductive rights is further contextualized through frameworks of racial, gender, and class inequalities. U.S. social control policy seems to track along three dimensions (segregation, incarceration, and fertility control) with respect to groups unable to assimilate fully or conform to middle-class norms and values. Historically, reproductive rights have not been equally distributed in society. The same forces that structure resource allocation, social goods, and cultural capital also impact the distribution of reproductive rights. Intersections of class, gender, and race operate to privilege some segments of society to produce as many offspring as they choose while constraining the choices of others. A recurring theme in the debate over reproductive justice concerns the power of the dominant group to construct knowledge about fertility and the reproductive behavior of subordinate groups.

In this dissertation, I seek to document the influence of eugenic ideology in a vital policy area, the right of human procreation. In developing my prospectus, I found indications that eugenic ideology has been at the bedrock of U.S. social and public policies since the start of the 20th century. Racial segregation, immigration restriction, reproductive sterilization, intelligence testing, and custodial institutionalization are a few examples of policies informed by eugenic

ideology. I hope to use the analysis and tools developed here to challenge sociologists to re-examine the importance of eugenic ideology in shaping race relations in contemporary U.S. society, especially within the context of social welfare and family planning policy. According to eugenic classification schemes, certain classes of individuals unable to support themselves or their families are considered burdens on society. In the early decades of the 20th century (1900s to 1930s), deportation, segregation, and eugenic sterilization were seen as viable public policies to control the 'breeding' of the so-called unfit populations. Close scrutiny of the logic behind eugenic thought illustrates a strong reliance upon labeling, stereotypes, and stigmatization to categorize specific groups as being unfit or socially inadequate and thereby justifying the limiting or elimination of particular human rights (i.e. the right of procreation).

A documented history of applied eugenics as remedies for social problems presents a fertile ground for studying the intersection of race, gender, and class in public policy. Beginning with Indiana in 1907, twenty-nine states had some form of compulsory sterilization law on their books. Within the next 30 years, 25,000 sterilizations were performed (Cogdell, 2000). The idea of eugenic sterilization proposed as an effective public policy for social control was so entrenched that California's sterilization statute was used as a guide for the 1933 compulsory sterilization laws enacted in Nazi Germany (Cogdell, 2000). The U.S. also sought to deal with its undesirable populations after World War II. According to Ryan (2007) several states introduced bills to sterilize "poor unwed mothers,"

including Virginia (1956), North Carolina (1957, 1959), Mississippi (1958, 1964), Maryland (1960, 1963), Delaware (1962), and Tennessee (1971).

The passage of the Family Planning and Population Research Act of 1970 established the first national birth control law elevating the debate over sterilization “from the realm of state public health departments and eugenics boards to federal family planning” (Kluchin, 2007 p. 133). The Family Planning Act authorized “\$382 million for family planning services, research, and training” making it second only to Medicaid as a “single source of federal funding for family planning” (Kluchin, 2007 p.134). Under the new legislation, the federal ban on funding sterilizations was lifted by the Department of Health, Education, and Welfare (HEW). The authorization of federal funding for sterilizations under the Family Planning Act increased the potential for sterilization abuse for poor Black, Latino, and American Indian women. Inconsistencies in state implementation of federal sterilization policies were further exacerbated when HEW announced in 1974 that abortion would no longer be covered under federal family planning grants (Kluchin, 2007). States providing family planning services funded through federal grants were motivated to regulate the fertility of women receiving welfare benefits to reduce expenditures in Medicaid, Aid to Families with Dependent Children (AFDC), and other safety net programs (Diamond, 1976). With sterilization now a covered service (federally funded), poor and minority women became targeted for reproductive sterilization as states attempted to manage growing welfare expenditures. Sterilization abuse often involved coercing welfare recipients into accepting sterilization by threatening to terminate their government

benefits (Diamond, 1976). In response to charges of coercive sterilization practices, HEW issued a series of regulations (1974) designed to ensure that women thoroughly understood the consequences of the procedure and that there would be no loss of benefits should they refuse sterilization (Diamond, 1976; Staats, 1976).

From the inception of the eugenic policies of the early 20th century through reforms implemented under an array of federally funded family planning services in the 1960s and 1970s, marginalized groups (immigrants, low-income, racial and ethnic minorities, minors, and the mentally incompetent) have borne the brunt of coercive reproductive health policies. Findings from the 1976 study, "Knowledge, Attitudes and Usage of Family Planning Methods: Survey of General Population in Puerto Rico," indicate significant trends in rates of sterilization on the island of Puerto Rico. Data reported for a sample of ever-married women between the ages of 20 and 49 (N=1,148) show that 31.4% were sterilized by 1965 decreasing slightly to 29.7% (N=424) by 1974. (Clapp and Mayne Inc., 1976 Table 2; Diamond, 1976; Kingdom, 1985; Presser, 1980; Romero and Agenor, 2009;).

One independent study found that during the 1970s, the Indian Health Service (IHS) had sterilized some 25% of all Native American women between the ages of 15 and 44 (Romero and Agenor, 2009; Lawrence, 2000). In 1974, Dr. Constance Redbird Pinkerton-Uri, a Choctaw/Cherokee physician with the Claremore Oklahoma IHS facility spent several years reviewing IHS records interviewing victims and medical staff (Lawrence, 2000). Dr. Uri determined that

full-blood Indian women were targeted by the IHS for sterilization. Dr. Uri estimated that given current trends in rates of sterilization and a population of only 100,000 Indian women of child-bearing age (between the ages of 15 and 44) twenty-five thousand American Indian women would be sterilized by the end of 1975 ¹.

Prompted by requests from Dr. Uri, the chairman of the subcommittee on Indian Affairs Senator James Abourezk (South Dakota) requested an investigation of the allegations by the General Accounting Office (GAO) on April 30, 1975. In the final report dated November 4, 1976, the GAO summarized its findings regarding sterilization abuses of Native women at IHS facilities. Only 4 of 12 regions served by IHS facilities were investigated: Aberdeen, Albuquerque, Oklahoma City and Phoenix. Findings showed that during a three year period (1973 – 1976) a documented 3,406 Native American women were sterilized. (Lawrence, 2000; Ralston-Lewis, 2005; Staats, 1976). The GAO examined a three-year period, 1973 to 1976, and found that 3,406 Indian women were sterilized. According to Carpio (2004 p. 41) “in 1973, 857 sterilizations were performed; 886 sterilizations were done in 1974, 901 in 1975, and 762 in 1976. Of total sterilizations, 3,001 were done during childbearing ages (15 to 44) and

¹ See also Brint Dillingham, “Sterilization of Native Americans, American Indian.” *Journal 3* (January 1977): 16; Brint Dillingham, “Indian Women and IHS Sterilization Practices,” *American Indian Journal 3*, no. 1 (1977): 27–28; Gail Mark Jarvis, “The Theft of Life,” *Akwesasne Notes* (September 1977): 30-32; “Killing Our Future: Sterilization and Experiments,” *Akwesasne Notes 9* (early spring 1977): 4; Janet Karston Larson, “And Then There Were None,” *Christian Century 26* (January 1977): 62-63; “Oklahoma: Sterilization of Native Women,” *Akwesasne Notes 6* (early winter 1974) 6-7; James Robison, “U.S. Sterilizes 25 Percent of Indian Women: Study,” *Chicago Tribune*, 22 May 1977, sec. 1, p. 36; “Sterilization of Young Native Women Alleged at Indian Hospital- 48 Operations in July, 1974 Alone,” *Akwesasne Notes* (early summer, 1974): 22.

1,024 (30%) were sterilized at contract health facilities (Staats, 1976; Dillingham, 1977).” These findings led Senator Abourezk to comment that, “given the small American Indian population, the 3,400 Indian sterilization figure would be compared to sterilizing 452,000 non-Indian women [out of 55,000 Indian women of childbearing age]” (Wagner, 1977 p. 75).

From 100,000 to 150,000 low-income individuals were sterilized annually under federally funded programs during the early 1970s² (Chandra, 1998; Horsburgh, 1996). Between 1970 and 1980, sterilization rates increased 300%³ (Horsburgh, 1996). In one year alone (1972-1973) it was found that “2000 involuntary sterilizations were performed in birth control clinics” on low-income Black women without their knowledge or consent (Monroe and Alexander, 2005; Ward, 1986). Findings from a 1972 study indicate that 97% of doctors surveyed reported that they would recommend or even prefer sterilization for mothers with 2 or 3 children receiving public assistance benefits (Diamond, 1976; Horsburgh, 1996; Ralstin–Lewis, 2005). Studies conducted by the Health Research Group and other independent researchers reported that the majority of physicians performing sterilizations “were White Euro-American males who believed that they were helping society by limiting the number of births in low-income, minority families” (Lawrence, 2000 p. 410). Additionally, studies found that physicians could generate larger incomes through performing sterilization as opposed to prescribing contraceptives. Some doctors admitted that they “wanted to gain

² See *Relf v. Weinberger*, 372 F. Supp. 1196, 1199 (D.D.C. 1974).

³ See Linda Gordon, *Woman's Body, Woman's Right: A Social History of Birth Control in America* 271-272 (rev. ed. 1990).

experience to specialize in obstetrics and gynecology and used minority women as a means to get that experience at government expense” (Lawrence, 2000 p. 410). By 1982, fifteen percent of White women, twenty-four percent of Black, thirty-five percent of Puerto Rican, and forty-two percent of Native American were sterilized ⁴ (Horsburgh, 1996; Rutherford, 1992).

Theory and Methods

The focus of this dissertation is to investigate elite discourse about issues relating to the fertility of subordinate groups for evidence of embedded eugenic ideology in the formation of family planning policy. I use theories on the social construction of race, social psychological approaches, structural racism, and intersectional analysis to analyze political discourse about poverty, overpopulation, social welfare policy, and family planning from the 1920s to the mid-1990s. Next, I conduct a qualitative analysis of scientific papers on eugenics and congressional testimony covering some 75 years for evidence of references to eugenic beliefs in elite communication about issues pertaining to the formulation of family planning policy. Finally, I apply a theory of welfare eugenics to explain the presence of eugenic ideology as coded racism in elite discourse about the fertility of welfare beneficiaries.

In this dissertation, I operationalize race, class, and gender in the following manner. Race is a macro-level, socially-constructed category of “identity and group association” historically attributable to differences in phenotype (Bonilla-Silva, 2001 p. 40). The concept *race* refers to socially-defined categories

⁴ See Vicki Alexander, *Black Women and Health*, 6 Choices 6, 16 (Women's Medical Ctr. 1986).

inhabited with sociohistorically produced meanings to explain human difference. This human difference is grounded in essentialist notions that biologically based human races exist, are ordered along a racialized hierarchy informed by scientific-racism and Social Darwinist theories of inferior and superior races (Omi and Winant, 1994). Sociologists form a consensus that there is no biological basis by which distinct races can be consistently determined, and agree that races are socially-constructed categories of meaning that are continually challenged and situated within a racialized social structure sociohistorically erected to mediate a reallocation of society's resources along a continuum of racially-assigned privileges (Bonilla-Silva, 2001; Omi and Winant, 1994). Within the context of U.S. based racism, descendants of Europeans are labeled as "White" and enjoy privileges of a dominant group status while "Blacks" are generally associated with the legacy of African slavery and are relegated to a subordinated group status.

The concepts *ethnic* or *ethnicity* are used to indicate socially-defined racial groups other than Black or White that are largely defined (in the U.S.) by a common history, culture, language and religion, along with an acknowledged group identity linked to a common ancestry and geographic location of national origin (i.e. Southern or Eastern Europeans). I acknowledge that ethnic groups exhibit certain racialized in-group differences (i.e. Black Puerto Ricans or White Cubans) however, the data analyzed in this study do not include such disaggregation. Whenever possible, I refer to widely used terms when discussing specific groups such as American Indians, Asians, Blacks, Latinos, and Whites. I

use the term race when referring to Whites and Blacks. I use ethnic or ethnicity when referring generally to social groups other than Whites and Blacks. Class is understood in terms of a macro-level description of social groups loosely arranged hierarchically according to socioeconomic status. I use the designation upper and affluent class to describe the wealthier ruling elite who occupy the higher positions of power in society. The middle and working class refer to groups that occupy the socioeconomic position between the upper and lower classes. The lower classes are normally the most vulnerable to disruptions in income and are generally more dependent on public charity to supplement their standard of living (Stark, 1994). Gender is a socially meaningful identity attributable to sex difference with ascribed or achieved statuses for men and women (West and Zimmerman, 1987). As constructs, race, class, and gender have continuously contested meanings shaped over time according to historical and political processes.

Research Questions

The data and methods chosen for this study are designed to answer the following key research questions. How has eugenic ideology appeared in elite discourse stigmatizing the fertility of the undeserving poor from the eugenics period of the 1920s to the period of welfare reform in the 1990s? How has eugenic ideology in elite discourse on issues pertaining to fertility contributed to cultural symbols, stereotypes, and prejudice about the meaning of race difference in the U.S? In answering the first two questions, I attempt to explain the socio-cognitive processes of elite communication in creating knowledge

about subordinate groups to negate their claims for access to resources considered to be in the control of dominant groups. Is there evidence of a reliance upon coded racism in elite public communication that uses stigmatization to activate pre-conceived ideas about subordinate groups to disenfranchise their right of procreation?

Purpose of Dissertation

The goal of this research is threefold: to document the influence of eugenic thought in shaping family planning policy; to analyze political discourse for appeals to eugenic ideology promoting fertility control of non-white welfare beneficiaries; and to test the usefulness of a theory of welfare eugenics for the study of racism in U.S. family planning policy.

Contribution of Research

It is my view that sociologists may have under theorized the influence of eugenic ideology in maintaining race prejudice and its influence on social welfare policy in the post-Civil Rights era. The topics discussed in this dissertation (eugenics, fertility control, and reproductive rights) are areas of health policy and medical sociology for which ethics is a major consideration (Silliman et al., 2004; Weisman, 1998). I outline how oppression functions in U.S. society in the area of family planning delivered through the public welfare system. My research centers on the use of eugenic ideology and political discourse in shaping the formation of fertility control policies originating from early influences of the reform-minded Progressive Era to the period of welfare reforms in the mid-1990s.

I suggest that White racial superiority is a central tenet of eugenic ideology and is a social fact, embedded within multiple social locations and domains of influence. I argue that identifying and dislodging White racial superiority as a social fact accomplishes several outcomes. As whiteness loses its connotation of superiority, it necessarily loses ideological dominance and so-called traditional values lose their normativity (Myser, 2003). Social problems, once framed by the majority population under racist paradigms of “White,” “mainstream,” or “traditional” become re-articulated as “ethical” when the inherent right of White privilege to monopolize problem definition is challenged by anti-racist Whites, subordinate, and oppressed group members. When social inequality becomes redefined as a matter of ethics, the relationship between affluence and oppression comes into question. Implementing an ethical test or measure of public welfare and family planning policy will improve the policymaking and decision process in formulating policies that consider equity and social justice as valuable goals.

One of my main theoretical suppositions guiding this dissertation is that White racial superiority is a social fact embedded in every facet of U.S. society. As a result, racial inequities in socioeconomic status and reproductive rights will persist without a decentering and deconstruction of whiteness as normative (Myser, 2003). I believe that linking eugenic ideology with coded racism is a first step. This honest and reflexive dialogue will be painful however; the entire world has and continues to suffer under the legacy of White racial superiority and

western global hegemony. I suggest that the only way to deconstruct embedded racism is to expose its ideological underpinnings to scientific and social inquiry.

Summary of Chapters

Chapter 1: Introduction and Overview

I introduce my primary objective for choosing to write this dissertation on the subject of eugenic ideology and family planning. I provide a brief historical context juxtaposing the involuntary sterilization of poor, American Indian, Black, and Latino women in the 1970s against the eugenic sterilization of unfit populations in the first half of 20th century. According to eugenic classification schemes, certain classes of individuals unable to support themselves or their families are considered a needless drain on the socioeconomic resources of society. In the early 20th century, eugenic sterilization was seen as a viable public policy to control the 'breeding' of the so-called unfit populations. A close scrutiny of the logic behind eugenic thought illustrates a strong reliance upon labeling, stereotypes, and stigmatization in the construction of classification schemes for unfit or socially inadequate populations.

I use theories on the social construction of race, social-psychological approaches, structural racism, and intersectionality to analyze political discourse about poverty, overpopulation, social welfare policy, and family planning from three periods of time extending from the 1920s to the 1990s. I conduct a qualitative analysis of scientific papers on eugenics and congressional testimony covering some 75 years for evidence of eugenic discourse in the formulation of family planning policy. Finally, I apply a theory of welfare eugenics to explain the

presence of eugenic ideology in discourse about the fertility of welfare beneficiaries. I attempt to explain the socio-cognitive processes of elite communication in creating knowledge about subordinate groups to negate their claims for access to resources considered to be in the control of dominant groups. The data and methods are designed to answer the following key research questions.

How has eugenic ideology influenced elite discourse stigmatizing the fertility of the undeserving poor from the eugenics period of the 1920s to the period of welfare reform in the 1990s?

How has eugenic ideology contributed to cultural symbols, stereotypes, and prejudice about the meaning of race difference in the U.S.?

Is there evidence of reliance upon *hidden discourse* in elite public communication that uses stigmatization to activate preconceived ideas about subordinate groups to disenfranchise their right of procreation?

Chapter 2: The Socio-Historical Context of Fertility Control: From Eugenics to Family Planning

In chapter 2, I trace the idea of fertility control from its beginning under the Progressive Era reforms of the early 20th century. I examine the reasons why eugenic ideology appealed to policy makers struggling to address problems of immigration, poverty, urbanization, and population growth. I also investigate the issues leading to a reformed eugenics in the growing field of social demography during which the focus shifted from a study of the biological factors of population dynamics to the social and cultural aspects.

I present a brief outline of key figures and organizations contributing to an 'orthodoxy' in demography and the institutionalization of a global effort to reduce world population growth rates, especially in former colonial possessions of European powers. I have two main reasons for selecting this topic. First, the key individuals discussed in chapter two form an elite within the population movement that wielded enormous power in formulating global population control efforts that have a bearing on the development of U.S. family planning policies. Second, a discussion of this topic will illuminate the importance of population control to western industrialized nations in maintaining an economic advantage over nations formerly held by European colonial powers.

I present a chronicle of the intellectual history of how eugenic ideology became embedded in the theoretical support for modern fertility control policies, beginning with a brief discussion of the influences of Malthus (1798), Thompson (1929), and Notestein (1945) in the evolution of population studies. Their work precipitated the establishment of demographic transition theory as the guiding principle for global fertility control policy in the post-World War II period. During this period, a major shift in demography changed the focus from predicting population growth rates to influencing them. I put forth an explanation for how eugenic ideology became situated in the idea of fertility control through demographers' efforts to address fears of global overpopulation. I provide an examination of several reasons for the expansion of the welfare state, from the Johnson administration's "war on poverty" to a critical reassessment of its impact on reducing socioeconomic disparities leading to the welfare reform hearings of

1995 to 1996. I conclude with a discussion of the issues that contributed to the adoption of family planning services as a component of social welfare programs.

Chapter 3: Theoretical Framework

In this chapter, I detail my theoretical approach guiding this dissertation, starting with an overview of eugenic theory and a discussion of the contributing theories that support its account of inequality. I explain my perspective on the fundamental concepts of eugenic ideology: White racial superiority, White purity, feeble-mindedness, and race hygiene and how these categories are organized into a socio-cognitive framework that constructs knowledge about human difference. An in-depth discussion is provided on the theoretical tenets of reform eugenics and transition theory that link fertility differentials with intelligence and culture, suggested as an explanation for socioeconomic disparities. I propose that eugenic ideology is embedded within transition theory couched in language about cultural difference as a factor for socioeconomic inequality. I investigate the proposition that elites use cultural symbols and stereotypes to construct knowledge stigmatizing subordinate groups for fertility control initiatives that are then delivered through the social welfare system.

I discuss alternative theories that could explain the justification for including family planning programs as part of the federally funded services provided to poor and low-income populations. I present a brief review of the theoretical perspectives of Blumer (1958), Berger and Luckman (1967), Omi and Winant (1994), Bonilla-Silva (2001) and a discussion of those areas of their analysis that do not fully capture the dynamics of racist discourse in elite communication about

fertility control. Next, I propose a theory of welfare eugenics intended to fill a void in our comprehension of the influence of eugenic ideology in political discourse about the reproductive behavior of subordinate groups. I suggest that a theoretical perspective about the possible influence of eugenic ideology in family planning policy is lacking. A new theory is needed to explain political discourse and racism in family planning policy as well as how coded racism is used by elites to frame an agenda that is very similar to eugenic policies in expected outcomes. I draw upon the Collins (2000) matrix of domination to validate my theoretical perspective describing the domination of subordinate groups through the hegemonic, disciplinary, structural, and interpersonal domains of power operating within the social welfare system and society at large.

Chapter 4: Research Design and Methods

In chapter 4, I describe the research design and methods used to answer my primary research questions. A critical discourse analysis of elite communication is utilized to study the influence of eugenic ideology and stigmatization in public debates on issues relating to the formulation of family planning policy extending from 1920 to 1996. Critical discourse analysis (CDA) is a discipline combining methodologies and perspectives from across multiple disciplines and schools of analysis that examines how communication is accomplished through language use. Dominant group elites use language to activate socially formed attitudes and prejudices about *others* that are cognitively stored in mental maps to influence social behavior in ways that reproduce inequality. This study centers on the

connection between eugenic ideology, power, and dominance and how they function within implicit forms of political discourse to reproduce inequality.

I use Atlas t.i., a software package for qualitative analysis, to code all texts. The data collection methods are described in this chapter. ProQuest Congressional was queried for transcripts of congressional testimony and a sample of eugenic articles was drawn from a bound collection of scientific papers presented at the Third International Congress on Eugenics in 1932, in portable document format (pdf). I outline the sampling procedures using a mix of purposeful and random selection to ensure saturation was achieved. The sample of congressional testimony and scientific papers on eugenics was coded to establish a baseline of eugenic constructs to be used in further analysis of congressional testimony for evidence of eugenic ideology in hearings conducted from 1965 to 1966 and 1995 to 1996. I queried all texts coded with eugenic codes from the transcripts sampled from 1965 to 1966 and 1995 to 1996 for further analysis. A discourse analysis was conducted, applying my theory of welfare eugenics for evidence of eugenic ideology appearing in the form of coded racism as stereotypes, cultural symbols, labeling, and stigma. Where permissible, I applied an intersectional analysis of the data to deepen my understanding of how oppression and domination may occur during the policy formation process.

Chapter 5: Eugenic Ideology and Policy Applications, 1920–1932: The Social Construction of White Racial Superiority

I report the results from a qualitative coding and discourse analysis of congressional testimony by eugenics expert Dr. Harry H. Laughlin of the Eugenics Record Office and a sample of scientific papers presented at the Third International Congress of Eugenics in 1932. The discussions contained in the transcripts and papers detail the essential features of eugenics, as a pure science and as a policy proscription. Descriptives are presented from the qualitative coding of documents from the eugenic period. The findings are reported by witness category, eugenic code family, and eugenic codes. My research design calls for the development of a baseline of codes representing eugenic ideology established from the literature and through qualitative coding of documents sampled from the eugenics period.

I present an interpretation of the way eugenic discourse is used to construct knowledge, identities, social relations, and formulate policy. Additionally, I analyze discourse in each of four eugenic code families: eugenic principles, policy areas/social problems for applying eugenics, specific policy tools for applied eugenics, and eugenic population classifications. My coding technique involves the cross coding of text with multiple codes from different code families when appropriate. This method of coding permits the researcher to construct numerous query combinations designed to investigate inter-related constructs and themes appearing in the data that may lead to important theoretical insights. A supercode is constructed from the four eugenic code families to query data for

evidence of eugenic ideology. The query results are reported and discussed in chapter 5.

Chapter 6: Population Crisis, 1965–1966: Demographic Transition and the Expansion of Social Welfare Programs

Findings are reported in chapter 6 from the qualitative coding and discourse analysis of congressional testimony presented during the population crisis hearings sampled from 1965 to 1966. At this time, social programs were legislated to address high rates of poverty especially among Blacks migrating to large metropolitan cities. Powerful groups that served as the mobilizing force in the population control movement leading to the hearings were mostly wealthy philanthropists, political elites, and academics. These highly organized groups effectively lobbied Congress for the establishment of a national birth control program. Advocates of population control framed the poverty issue in terms of the poor having more children than they could afford. I document the influence of eugenic ideology on the debate over poverty and the expansion of social welfare programs for the poor. I triangulate the results of the qualitative coding and discourse analysis with an intersectional examination of power and domination using Collins' (2000) matrix of domination when the data allows an intersectional approach.

Chapter 7: Welfare Reform: Racialized and Gendered Discourses About the Undeserving Poor, 1995–1996

I provide the results from the qualitative coding and discourse analysis of witness testimony from the 1995 -1996 congressional hearings on welfare reform. A supercode for eugenic ideology (combining all four eugenic code families) is created and used to query data sampled from the welfare reform hearings. I investigate the discourse used to frame arguments about specific policy changes and how welfare beneficiaries are characterized in the testimony analyzed. Where possible, I apply an intersectional analysis of the selected discourse for an analysis of power and domination using Collins (2000) matrix of domination.

Chapter 8: Towards A Theory of Welfare Eugenics: Findings and Revisions

In the concluding chapter, I present my interpretation of findings from the qualitative coding, discourse, and intersectional analyses conducted in this dissertation. The outline of chapter eight is as follows. First, I summarize my expected findings and present a synopsis of results presented in chapters five through seven. Second, I discuss an analysis of the questions left unanswered by my original model. Third, I postulate a revision of my original theory under the new designation assimilation eugenics. Finally, I conclude this dissertation with implications for future research.

Chapter 2: The Socio-Historical Context of Fertility Control: From Eugenics to Family Planning

Beginning in the Progressive Era (1880 to 1920), the professionalization of the social sciences and a desire to repair the financial and economic infrastructure of the United States combined to create an atmosphere for the scientific management of society. Dispassionate technocrats were considered to have the professionalism and expertise to efficiently manage societies' institutions, leading to political, social, and economic stability. Eugenics offered a scientifically supported policy approach for the efficient management of population growth and more importantly, quality (Mitchell and Snyder, 2003).

Progressive reformers called for efficiency and scientific management of society to address the growing social problems attributed to immigration, industrialization, and a nation transitioning from an agrarian to an urban industrialized economy. Critics believed that monopoly capitalism and unregulated capital markets contributed to rampant speculation, fraud, and an unstable banking system (Allen, 1989; Leonard, 2009). The era of Laissez-Faire economics and the extremes of selfish individualism had created an environment that demanded reform.

Opponents held that unregulated markets under the Laissez-Faire doctrine contributed to the social, political, and economic instability in the late 19th century. What was needed was a state-regulated society administered by a professionally trained intellectual class who would apply scientific methods on behalf of the public good (Leonard, 2005a). It was believed that an increasingly

complex society required professional experts to function as objective and dispassionate public servants. According to Leonard (2005b):

The progressive intellectual commitments were to the following:

1. the explanatory power of scientific (especially statistical) social inquiry to get at the root causes of social and economic problems;
2. the legitimacy of social control, which derives from an organic conception of society as prior to and greater than the sum of its constituent individuals;
3. the efficacy of social control via expert scientific management of public administration, where
4. expertise is both sufficient and necessary for the task of wise public administration.

A growing concern among the wealthier native (early European colonial stock) population was the differential fertility of the poor and immigrant population (Freedman, 1979; Leonard, 2003). Powerful elites advocating for reform of social and public policies claimed that the lower classes (poor, immigrant, and non-white) were out-populating the wealthier (White) founding stock that had been practicing birth-control among themselves as a means of increasing their standard of living. The more recent southern European immigrants, Blacks, and other non-white groups were viewed as introducing defective traits into the older native population (White descendants of the early colonial settlers) U.S. population (Aldrich, 1975; Leonard, 2005a). For eugenicists, the adaptation of Darwin's theory of natural selection was not working (Leonard, 2005b). Social Darwinists believed that natural selection operating in human populations could be interpreted to mean that evolutionary forces in natural reproduction would produce a more intelligent, healthier, pure White race filling the upper strata of

the higher socioeconomic classes. The superior White race would form a ruling class able to maintain their dominant position over inferior people through the forces of evolution. However, the unfit lower classes were believed to have a differential fertility rate, and this was undermining the laws of natural selection. Eugenicists felt that the state needed to regulate the selection process by identifying, classifying, and controlling the fertility of defective classes. Aldrich (1975) sees eugenics as a war of aggression against the lower classes waged by wealthy elites.

The concept of social control was developed during the Progressive Era, as heightened tensions erupted into class conflict between the wealthy, upper-class elites and the immigrant, poor, industrial laboring classes. The upper-class blamed most of the nation's social problems on the poor and newly arriving southern European immigrants. Race mixing was considered a serious biological threat to the purity of the older White population as the popularity of eugenics and scientific-racism grew in the early 20th century. Eugenics provided the means through which social controls could be extended into the reproductive behavior of the poor and defective classes deemed to threaten the stability of the United States (Vecoli, 1960).

Eugenic ideology and policies were well suited for the mood of the nation in the Progressive Era. Eugenics offered tailor-made theories for the scientific management of the germ plasm as a means of addressing social ills believed to be biological in nature (Aldrich, 1975; Leonard, 2005a). Eugenic ideology attempts to explain variations in the quality of human populations in terms of

racial purity, physical and mental degeneration, intellectual and moral character as functions of inheritable genetic traits (Davenport, 1910; Popenoe and Johnson, 1933). The rediscovery of Mendelian genetics, theories of scientific-racism, adaptations to Darwin's theory of human evolution, and the development of statistical science all contributed theoretical elements which helped to legitimate the field of eugenics in population studies (Allen, 2000; Drescher, 1990; Leonard, 2005b).

By the time of the Third International Congress of Eugenics in 1932, scientific support for eugenics began to wane. The passage of the Immigration Restriction Act of 1924 effectively closed the border to U.S. immigration for specific nations, limiting immigration from those countries back to 1890 census levels until the implementation of reforms to immigration laws in the 1960s (Stillwell, 2012). Mendelian single-gene theory, believed to explain a wide range of physical, mental, behavioral, and social problems, was discredited by genetic scientists, who had begun distancing themselves from radical eugenics in the late 1920s. Eugenics became less popular at colleges and universities, and was replaced by courses in modern genetics and advances in biology and human reproduction (Selden, 1999). Eugenics remained widely popular in the southern states under Jim Crow segregation laws, fueled by eugenic fears of race amalgamation and the threat Blacks represented to White racial purity. A number of states in the south maintained laws against interracial marriage and anti-miscegenation well into the 1960s and continue to

sustain de-facto racial segregation in housing and education up to the present time (Stubblefield, 2007).

As geneticists distanced themselves from the virulent race and classism of hardline eugenicists, the need to revise the assumptions of eugenic thought gave birth to a reformed eugenics in the 1930s. The eugenics of the 1920s was concerned with immigration and the degeneration of “native” White populations and American culture from the integration of what was considered inferior European and Asian immigrants into the majority population (Aldrich, 1975). In the 1930s, reform eugenics focused more on differential fertility rates between social classes and racial and/or ethnic groups.

From Reform Eugenics To Social Demography

During the 1920s and 30s, population studies adopted a more social science perspective as the field of demography evolved. Demographers became interested in applying social science theories to better understand and explain factors affecting population dynamics (Ramsden, 1993). Interest in population studies witnessed the involvement of organizations like the Milbank Memorial Fund, the Scripps Foundation, and Princeton’s Office of Population Research. In 1938, these organizations conducted the Study of Social and Psychological Factors Affecting Fertility, (commonly known as the “Indianapolis Study”) heralding the rise of demography as a social science with applications for policymaking (Ramsden, 1993). The field of demography was attended with individuals from different backgrounds and ideologies in the area of population studies. Since the birth-control movement, immigration restrictionists and

eugenicists had been involved in studying population problems for years, and joined the ranks of the new organizations working on population issues in the 1930s. The interaction of researchers and activists working from different ideological perspectives produced critiques of biological explanations of group-based fertility differentials long proposed by mainline eugenicists. Working on the problem of fertility decline, W.F. Ogburn promoted the idea of “social evolution” as an explanation. He suggested that urbanization and industrialization served to influence individuals to control their fertility and not some inherent biological difference as proposed by hardline eugenicists. Ogburn indicated that a “cultural lag” existed between different groups that influenced their fertility decisions (Ramsden, 1993).

The science of demography evolved in response to the need for accurate population data and scientific methods in estimating fertility trends. The Depression and the New Deal Era presented policy makers with a new set of problems requiring the expertise of economic and social planners. It became increasingly important to understand factors influencing fertility rates as the government tried to address problems of high unemployment, public health, food distribution, and poverty in developing programs leading to recovery (Szreter, 1993). During this era, a social eugenics became embedded in theories explaining fertility rate differentials in demography.

The Institutionalization of Population Studies: 1920s To 1960s

A central aim of this dissertation is to investigate the presence of eugenic ideology in family planning policy. Prominent members of the population

movement were also active in the eugenics movement. Therefore, it is of some value to identify those individuals and organizations instrumental in the growth of a population control movement and to articulate their role in framing global overpopulation as a crisis (Connelly, 2008).

Early interest in population studies were initiated by the Scripps Foundation, the Milbank Memorial Fund, the Population Association of America, and the Office of Population Research, housed at Princeton University (Critchlow, 1999; Notestein, 1971). Fredrick Osborn was very active in promoting research in population issues. Osborn served as a trustee of the Social Science Research Council, Princeton University, Milbank Memorial Fund, the Carnegie Corporation, and was an officer with the Population Council. Corporations such as the Ford Motor Company and Standard Oil also showed an interest in utilizing population data and supported population research (Notestein, 1971). Socioeconomic conditions significantly affecting the structure of the U.S. economy from the Depression to the transition to a wartime economy created a demand for social scientists to play an important role in providing the government with expertise in social and economic planning. In the aftermath of World War II, planners working on the problems of rebuilding nations devastated by war sought population estimates needed in devising plans for reconstruction. Professional demographers were commissioned to conduct population studies for the League of Nations that lead to four monumental studies discussed by Notestein:

The Future Population of Europe and the Soviet Union, by Notestein, Taeuber, Kirk, Coale and Louise Kiser; Economic Demography of Eastern and Southern Europe, by Moore; Europe's

Population in the Interwar Years, by Kirk; and the Population of the Soviet Union: History and Prospects, by Lorimer. Meanwhile, the Department of State asked us to extend our studies to Asia. This work resulted in two books: The Population of India and Pakistan, by Kingsley Davis; and The Population of Japan, by Irene Taeuber. (1971)

John D. Rockefeller III provided funding for “eugenics inspired domestic projects in demography and ‘social hygiene’” between the first and second world wars, becoming more involved in international affairs after World War II (Szreter, 1993 p. 677). Rockefeller funded (through the Rockefeller Foundation) a fact-finding trip for a demographer and public health expert to provide the Foundation with expert advice “as to the interrelation of its policies in the medical, social science and demographic fields” (Notestein, 1971). Later in 1952, he founded the influential Population Council as a major contributor to the population control movement into the 1970s (Critchlow, 1999). Governments attempting to rebuild in the post-war period relied heavily on social scientists for information on health, economics, and population growth in strategic planning for redevelopment. Professional demographers, supported by private foundations, wealthy philanthropists, universities, and governmental bodies performed a critical role in supplying needed research.

The socioeconomic and political upheavals of the Depression, the New Deal, and World War II aided in the transition of eugenics-oriented population studies obsessed with race purity, race degeneration, and race hygiene towards the generation of reliable estimates for predicting trends in population growth rates (Hodgson, 1983,1988; Kirk, 1996). Early proponents of population research

included eugenicists who positioned themselves to inaugurate the professionalization of social science and its contributions in policymaking. Planners depended on their ability to forecast changes in population demographics to develop and implement programs for food distribution, agriculture, delivery of medicine and health care, and to fund investments for development and post-war reconstruction.

From Malthus To Demography

The first general theory attempting to explain the dynamics of population growth is attributed to Thomas Robert Malthus in 1798. Malthus's "Essay on Population" drew from his observations of fertility patterns in Western Europe around 1700 to 1800. Malthus stated a very simple model positing that population growth exhibited a geometric progression starting with 2 parents producing 2 children then each successive generation doubling from 2, 4, 8, 16, 32 and so on. Food production was assumed to progress arithmetically on the order of (assuming annual food production in tons) 10, 20, 30, 40, and 50 (etc.) due to the finite availability of agricultural land under cultivation. The model was further specified with positive checks to population growth such as famine, disease, and war. Malthus believed that without a systematic control of fertility, population growth would outpace food production, leading to global overpopulation, massive food shortages, political instability, and the eventual collapse of civilization (Stark, 1994).

Malthusian theory generally holds that over time, fertility will remain high, and that an increase in mortality is required to offset population growth. Malthus thought that the upper-classes were more capable of consistently using available birth-control measures to restrict their fertility than the lower-classes. Malthus' predictions led to a widely held view that high fertility in the lower-classes would eventually threaten a nation's political stability when resources were in short supply. This simple model overlooks a number of factors that eventually proved Malthusian theory wrong: migration, advances in food production and storage, contraceptive technology, reduction in mortality from advances in medicine, disease prevention and treatment, sanitation, and hygiene (Hodgson, 1983; Macionis, 2007; Stark, 1994). However, eugenicists in the early 20th century adopted aspects of Malthusian theory on class differences in fertility rates, incorporating his ideas into eugenic conceptions of race degeneration, purity, and hygiene (Davenport, 1910; Freedman, 1979; Leonard, 2009; Vicolini, 1960).

Demography As Applied Policy Science

A significant change in the assumptions about population growth developed after the Second World War that would guide the future direction of family planning policy. From the 1930s on, knowledge about factors leading to demographic change had been primarily garnered from the history of the Western European transition from an agrarian based to a modern industrialized economy. Classical transition theory had been built upon assumptions about the modernization of independent European nations. Therefore, what eventually became known as demographic transition theory had not specified the factors

leading to demographic change for *colonized non-European* nations (Stark, 1994). The early theoretical formulations of transition theory had not included the influence of colonization on mortality. The effect of colonization on population demographics lead to an artificially high rate of mortality suffered by people living under often harsh conditions of colonial subjugation. Independence and modernization reduced mortality faster than what was anticipated, leading to rapid population growth.

Demographers presumed that fertility patterns observed in Europe were constant across the globe. Population experts believed that the end of colonization and modern industrial development would naturally produce a change in attitudes towards the number of children families had. Since the reduction in the rate of mortality was not followed by a reduction in fertility rates, demographers feared overpopulation in underdeveloped nations. Demographers and international development experts recommended government sponsored family planning along with development aid to induce fertility change (Connelly, 2008; Eager, 2004; Hartmann, 1995). Demography became a tool for policy change instead of social science theory about population demographics. The logic for inducing fertility change in developing nations was also extended to poor populations in the United States. Policy makers believed that the U.S. needed to demonstrate a commitment to government sponsored family planning in order to effectively lobby other nations to adopt similar measures.

The Origins of a “Population Crisis”

As seen in the preceding discussion, colonization had a tendency to slow population growth for the colonized populace. European powers intentionally impeded the development of their colonial holdings, impacting population growth. Population growth accelerated in developing nations as the Second World War helped to end the system of European colonization of Africa, Asia, and Latin America. The need to control birth rates in developing nations shifted demography from social science to policy science (Hodgson, 1983; Szreter, 1993).

I see a correlation between the influence of racist and imperialist attitudes of Europeans justifying the colonization of the so-called “third world” with the racist and class-based biases against the fertility of the poor in the U.S. (Kasun, 1988; Solinger, 2005; Ward, 1986). The political emphasis of post-World War II demography changed to an interventionist policy approach centered on inducement of fertility decline in developing nations and the poor in the United States. Demographers began to view high fertility rates in third world countries as a hindrance to policies encouraging economic development after the Second World War. The same perspective is applied to poor populations in this country, dependent on public assistance to survive. In the United States, the poor increasingly are viewed in terms of the public cost of their care. It is feared that reductions in mortality will not be offset with a conscious effort to reduce fertility, especially in developing nations and poor racial and ethnic minority groups in the U. S. (Connelly, 2008; Eager, 2004; Kasun, 1988).

How dependent variables are constructed is a primary revision to transition theory. In the original model, fertility was specified as the dependent variable subject to the influences of socioeconomic variation. The revised model describes fertility as an independent variable theorized to exhibit an inverse relationship with socioeconomic factors such as disposable income, wealth, and standard of living (Hodgson, 1983). The new model allows for the fertility of particular populations to be identified for initiatives that contain plans for inducing changes in fertility behavior.

The initial challenge for demographers was conceptualized as the need to combine advances in reproductive technology with birth control propaganda to change public attitudes about birth control. The development of the oral contraceptive known as “the pill” symbolized a great stride towards the adoption of government and privately funded population control programs. The oral contraceptive revolutionized the delivery of fertility control services, reducing the degree of medical intervention required by the intra-uterine device (IUD) and the inconsistency of condom use on the part of male partners. The pill was also viewed as a cost-effective means of reducing unwanted births by poor and low-income women representing a cost-savings to public welfare agencies (Hartmann, 1995).

Expansion of the Social Welfare State

During the decade of the 1950s, families receiving AFDC increased by 17 percent or about 110,000. However, from 1960 to early 1969, the number increased by approximately 800,000 families or 107 percent in less than 9 years

(Fox and Cloward, 1971). What is striking about the significant expansion in the AFDC program is that 71 percent of the increase during the 1960s occurred from 1964 to 1969. A welfare rights movement arose in the mid-1960s that was able to gain momentum from the civil rights movement, marshaling forces with a host of civil rights activists and organizations, organized labor, feminists, student organizations, women's reproductive rights activists, and social welfare activists to advocate for equality in access to welfare benefits (Nelson, 2003; Quadagno, 1994; Weisman, 1988). This activist climate was in part a response to a series of federal initiatives created under President Johnson's Great Society anti-poverty programs. The sudden rise in welfare applications is attributable to an increase in the demands for the rights of the poor and welfare recipients in response to a change in the political climate under the Johnson administration (Nuebeck and Cazenave, 2001; Patterson, 2000). According to Fox and Cloward, federal intervention took three distinct directions:

The establishment of new services, both public and private, that offered the poor information about welfare entitlements and the assistance of experts in obtaining benefits. The initiation of litigation to challenge a host of local laws and policies that kept people off the welfare rolls. The support of new organizations of the poor which informed people of their entitlement to public welfare and mounted pressure on officials to approve their applications for assistance. (1971 p. 250)

The rise of a welfare rights movement can be traced to a second wave of migration of Blacks from the rural south and the discrimination they experienced in applying for welfare benefits. Modernization in southern agriculture significantly

reduced the demand for farm labor. From 1950 to 1969 one million farms vanished. From 1950 to 1965, mechanization and agricultural innovations increased farm output by 45 percent and reduced agricultural labor by the same figure. Unemployment among farm laborers ran as high as 37 percent versus a 4 percent national unemployment average in 1967 (Fox and Cloward, 1971). After World War II, there was a sharp decline in demand for agricultural products. Modernization in farming increased agricultural unemployment, especially in the south. Black farm laborers bore the brunt of job loss in agriculture (Baldwin, 2010; Patterson, 2000).

From 1940 to 1945, 6 million people left agricultural employment, often migrating to urban areas in search of jobs in the defense industry. After 1945, some 14 million people migrated from rural areas into the urban centers seeking work. According to the U.S. census, approximately 50 percent of all Blacks lived in urban cities in 1940. By 1950, the number reached 62 percent, 73 percent in 1960, and 80 percent by 1980 (Fox and Cloward, 1971). Mechanization of agriculture led to a massive dislocation of Blacks from southern rural areas into northern and mid-western urban centers. Structural forms of racism in housing, employment, and welfare benefits kept many of the poor Blacks moving to urban areas in the 1950s segregated into poverty-ridden racial ghettos. Concentrated poverty and racial discrimination limited socioeconomic mobility and led to growing resentment and civil unrest among urban Blacks, precipitating a series of urban riots in the 1960s (Gilens, 1999; Patterson, 2000; Quadagno, 1994; Schram, 2002).

The massive out-migration of Blacks had the unanticipated consequence of increasing Black political power in the largest urban cities in the North. In response to the political upheavals of the civil rights movement and urban riots, the federal government moved to address racial socioeconomic inequality with a policy of temporary employment initiatives and an expansion in social welfare benefits (Fox and Cloward, 1971; Littleton, 1977; Quadagno, 1994). In other words, the federal government's response to Black discontent over poverty, unemployment, and racial discrimination was a massive expansion in social programs providing temporary relief for Blacks displaced from agricultural and defense industry employment after 1945. In the early 1960s, a number of key federal programs were implemented to address social problems in urban cities (Fox and Cloward, 1971, p. 256-257):

1961 - The Juvenile Delinquency and Youth Offenses Control Act (juvenile delinquency in "inner city" neighborhoods), \$10 million.

1963 - The Community Mental Health Centers Act (to address mental illness in city core areas), \$150 million.

1964 - Title II of the Economic Opportunity Act (antipoverty program), \$350 million.

1966 - Title I of the Demonstration Cities and Metropolitan Development Act (rehabilitation of slums and urban blight areas).

Poverty and the demand for social welfare assistance can be broadly conceptualized as a problem arising from the fluctuations of demand in the labor market (Piven and Cloward, 1971; Schram, 2002). The state has assumed the responsibility to care for citizens that are unable to work due to legitimate reasons such as age, health status, or inability to find employment (Gilens, 1999;

Patterson, 2000). Individuals unable to work or provide for themselves and their families have legitimate reasons in the mind of the public for relying upon public assistance and are considered the worthy poor. A central debate concerns the public support of mothers who are unable to work in the wage economy due to the presence of young children in the home:

What is the responsibility of the state with respect to support of mothers caring for non-school age children and therefore unable to work outside of the home?

In providing support to mothers, does the state undermine the responsibility of fathers to provide for the children they have produced?

Does this support also incentivize promiscuity and laziness among low skilled and unskilled individuals?

Does this support undermine the institution of marriage and the formation and stability of traditional nuclear families?

Mothers' Pensions were created during the Progressive Era to provide care for poor women and children. Progressive reformers were concerned about the children of mothers who had to work due to the death of the father. The program principally provided benefits to White women and widows. Also, with approximately 5.3 million women in the workforce, some children were left at home alone to fend for themselves while their mother worked. Some individuals believed that working mothers took jobs away from men and undermined the traditional role of the male breadwinner (Seccombe, 1999; Quadagno, 1994). Key issues debated were child delinquency, children

placed in orphanages while their mother worked, and children living in poverty caused by the death of the father. The idea of social motherhood is important. Mothers are seen as providing a valuable social function in rearing children, contributing to the moral character of children in preparing good citizens (Collins, 1999; Quadagno, 1994). A major theme for many social programs of that era was moral reform. However, the aid was used to reinforce traditional norms and values about gender roles and morality (primarily) of women:

[A]gency caseworkers monitored the women for signs of drinking, poor housekeeping, improper childbearing techniques, and relationships with men. Foreign-born women were urged to assimilate and to adopt white, middle-class values, reformers generally held the view that immigrants were inferior to the native born. (Abramovitz, 1996b as appearing in Seccombe, 1999 p. 27)

A number of “safety net” programs were created under New Deal programs in response to the Great Depression. Aid To Dependent Children (ADC), the forerunner of AFDC, was created from Title IV of the Social Security Act of 1935. Proponents of ADC felt that women performed a valuable social role in childrearing and that they should be relieved from working while trying to care for children (Patterson, 2000; Seccombe, 1999; Quadagno, 1994). ADC extended benefits to women who had been abandoned, never married, divorced, or who had husbands unable to work. Even though more Black women were able to qualify for ADC than Mothers’ Pensions, state welfare regulations, particularly in the south, were crafted so as to exclude Black women (Baldwin, 2010). Mothers’ Pensions were rolled into ADC under the 1935 Social Security Act (Patterson, 2000; Seccombe, 1999; Quadagno, 1994).

ADC was a means-tested federal program that allowed states to determine their own eligibility guidelines, leading to wide regional variations among the states with respect to benefit payments and program eligibility. A number of factors lead to changing demographics of individuals receiving some form of public welfare assistance. Amendments to ADC in 1939 transferred widows receiving benefits into the Social Security's Old Age Insurance Program, leaving ADC recipients to be principally women with children, usually defined by marital status (never-married or divorced). There were several popular welfare programs benefiting White middle-class populations that did not carry the stigma of ADC, including the Mental Health Act, the Hill-Burton Hospital Act, the GI Bill, and Veteran's Administration (VA) Housing Loans (Seccombe, 1999). During the 1950s ADC expanded significantly from around 50 percent to nearly 75 percent of the total expenditures for the public assistance population. Between 1950 and 1960, the ADC expenditures increased 90 percent to over \$1 billion.

A number of factors transpired in the 1950s and 1960s that contributed to a change in the view of ADC recipients. During this period, ADC was publically stigmatized and underwent further restrictions. A significant decrease in the number of women in the labor force left a severe shortage in positions that were gendered as "women's jobs" such as "typists, stenographers, nurses social workers, teachers, and medical aides" (Kessler-Harris, 1982 as cited in Seccombe, 1999 p. 31). A shortage of workers to fill female-gendered positions lead many to view non-working women on ADC as lazy or unfairly taking advantage of the welfare system with the ultimate goal of forcing women into low-

paying wage employment, especially in the south during harvest season. Able-bodied individuals who have the capacity for work but rely upon public assistance for other reasons are considered the unworthy poor in the public's view. Critics of the welfare state suggest that welfare induces the unworthy poor to unjustifiably claim welfare benefits funded through the labor of tax-paying citizens, conduct deemed to be socially and morally reprehensible (Gilens, 1999; Patterson, 2000; Quadagno, 1994).

President Johnson's War on Poverty employed an approach referred to as "human capital enhancement." His strategy was based on the premise that poverty could be better addressed at the individual level by making a person more competitive in the labor market through education and job training. The Johnson administration assumed that the poor were unprepared to compete for available jobs and that the government should help to provide the necessary skills and training to make them more employable, thus removing their dependence on public assistance through wage labor. A number of programs were initiated in the 1960s with the goal of enhancing "human capital" and providing better health care for children, the elderly, and the poor such as: the Economic Opportunity Act, Head Start, Medicare, Medicaid, and Volunteers in Service To America (VISTA) (Seccombe, 1999). However, the number of welfare recipients continued to increase during the 1960s and 1970s. Increased benefits and a relaxing of certain restrictions on eligibility were blamed by opponents for the continued rise in welfare expenditures. The number of individuals receiving some type of welfare benefit increased from 3.5 million in 1961 to 5 million in

1967 with total expenditures of \$2.2 billion, leading to what critics deemed a “welfare crisis” (Seccombe, 1999). By 1970, the number of people on welfare reached 12.4 million with 25% living in two states, California and New York (Quadagno, 1994).

Poor women come under attack either because it interferes with the dynamics of the free enterprise system or because it undermines the traditional family structure. During such periods of “panic”, welfare and women receiving it are bashed in order to divert attention away from the true cause of the nations’ ills. It is these concerns rather than making life better for poor women and children, which have been the driving force behind welfare reform for the past 150 years.

(Abramovitz, 1996b p.15 as cited in Seccombe, 1999 p. 36)

In 1970, Richard Nixon proposed a guaranteed income plan designed to increase benefits by allowing welfare recipients to earn income from employment while being able to maintain a graduated portion of benefits up to a ceiling. The Family Assistance Plan (FAP) proposed a guaranteed minimum of \$1,600 annually for a family of four. Poor families with employment would be allowed to keep public assistance benefits until their annual income reached \$4,000 (Critchlow, 1999; Seccombe, 1999). Critics of FAP claimed that provisions of the plan offered no real support for single working mothers while encouraging married mothers to remain in the home. There were no skills or job training components geared towards helping single mothers move away from reliance on welfare. Federal officials stated that the FAP was primarily directed toward helping unemployed men with the skills and training they needed to become employed heads of household (Patterson, 2000; Seccombe, 1999). It was

commonly held that most women who ended up on welfare did so because they were not receiving financial support from husbands or the fathers of their children due to divorce, abandonment, or illegitimacy. Some policy makers formed the opinion that providing men with the ability to support a family through employment would encourage more men to marry and ultimately reduce the welfare rolls. However, the FAP was widely unpopular for a number of groups, including southern political leaders, organized labor, and welfare rights activists to name a few. After receiving initial passage in the House, the FAP died in committee, and support for the legislation was withdrawn by the Nixon administration in 1972 (Quadagno, 1994).

Unemployment and poverty continued to grow into the 1980s. The rate of the nation's unemployed population reached 10 percent between 1980 and 1982. Official poverty rates rose from 11 percent in 1979 to 15 percent in 1983. Poverty rates increased steadily to reach the highest rates since the mid-1960s. In the 1980s there were between 33.7 million and 35.5 million people living in poverty in the United States (Patterson, 2000). In 1984, poverty rates varied considerably by racial and ethnic groups, with Whites at 11.5 percent, Hispanics at 28.4 percent, and Blacks at 33.8 percent. During the years of the Reagan administration, severe cutbacks occurred in the midst of rising poverty and unemployment. Critics charged that Regan welfare reforms under the Omnibus Budget Reconciliation Act of 1981 increased the U.S. poverty rate by 2 percent. By 1983, total state and federal expenditures for public assistance had been reduced by \$1.1 billion. Over 400,000 families had been pared from the welfare

rolls and at least 300,000 had experienced some reduction in benefits (Patterson, 2000). During this period of conservative social reform, a return to the crisis rhetoric of prior eras occurred. Conservatives and liberals began raising alarms over the rise of an “underclass” of groups (primarily Black and Hispanic) in the urban centers who seemed to be unaffected by any social program designed to move them from poverty and welfare dependency to employment in the wage economy (Fraser and Gordon, 1994; Marchevsky and Theoharis, 2000; Neubeck and Cazenave, 2001; Sparks, 2003).

What became to be known as the “feminization of poverty” resulted from the changing demographics of poor families, especially women with children. By early 1985, nearly 14 million children (22 percent of all American children) lived in families with incomes below the poverty line. They made up nearly 40 percent of the total impoverished population. More than half of these poor children lived in families headed by women. They were disproportionately Black and Hispanic, with 47 percent of all Black children and 39 percent of all Hispanic children under 18 living under the poverty level in 1984. Experts calculated that the average Black child would spend more than five years of his or her childhood in poverty; for the average white child, it would be less than 10 months. (Patterson, 2000 p. 212)

The number of AFDC recipients increased due to the economic recession of 1989 to 1991, resulting in a record increase of state and federal expenditures in AFDC to \$23 billion by 1992. AFDC was only a small part of the expenditures supporting a burgeoning social welfare system. By 1993, the cost of maintaining the nation’s safety net programs was considerable: \$320 billion for Social

Security, \$140 billion for Medicare, and \$26 billion for the food stamp program (Patterson, 2000). The rise in the number of households headed by unmarried women with children and the explosion in the number of children born out-of-wedlock created an atmosphere ripe for reforms that reflected the interest of both social conservatives and the population control establishment (Critchlow, 1999; Patterson, 2000; Neubeck and Cazenave, 2001; Quadagno, 1994). Illegitimacy rates for Blacks rose alarmingly from 20 percent to 67 percent, while the rate for Whites rose from 2 percent to 22 percent in the period since the 1960s (Patterson, 2000 p. 232). High rates of out-of-wedlock births appeared to be class-based, with women living under the poverty line experiencing the highest rates of illegitimacy. Welfare and the fertility of poor women came under increasing scrutiny from the 1960s to the period of welfare reforms in the mid-1990s (Smith, 2007).

Welfare Reform and U.S. Family Planning: 1960-1995

Social welfare policies granting preferential treatment for Whites (before such discrimination was outlawed) created a welfare system designed to exclude or minimize minority access to public assistance. Racial discrimination in U.S. society extended to public policy and social programs. Racial and ethnic minorities were perceived as being less worthy of receiving welfare benefits than Whites. Public perceptions of non-whites, especially Blacks, blamed poverty on an array reasons, including the inability (or refusal) to fully integrate into mainstream society, the failure to adopt mainstream values and norms about work ethic, morality, and family formation, and lower levels of intelligence (Gilens,

1999; Neubeck and Cazenave, 2001; Patterson, 2000; Quadagno, 1994). The rapid growth of funding for antipoverty programs in the 1960s, the inclusion of Blacks and other minority groups in the distribution of welfare benefits, and changing socioeconomic conditions all acted to produce a social climate demanding welfare reforms and the reduction of certain program expenditures such as AFDC in later years.

Almost from the beginning, starting with the Eugenics period of the 1920s, public views of contraception and family planning services have had a distinctively class bias. The restriction of fertility was believed to aid in the upward mobility and preservation of a higher standard of living for the upper and middle-classes. However, the fertility of the poor has generally been perceived (by the non-poor) as the cause of their impoverishment and a questionable demand upon the resources of the upper and middle-classes. Public attitudes about contraception have also exhibited a racial, ethnic, and gender bias as well. Patriarchal views of women's sexuality, combined with White stereotypes about the perceived hyper-sexuality of American Indians, Blacks, and Latinos have combined to create a public sentiment advocating for fertility regulation of poor and non-white populations. Federal funding of U.S. contraceptive programs became a primary political instrument for reducing welfare costs in the decades of the 1970s and 1980s (Littleton, 1977; Ward, 1986).

The expansion of public welfare programs under Johnson's War on Poverty and a summary of milestones in the evolution of U.S. family planning policy from 1960 to 1995

The Foreign Assistance Act of 1967 contained provisions that allowed federal expenditures for family planning to be funded through state and private agencies. Key agencies receiving federal family planning dollars were the Office of Economic Opportunity (OEO), agencies funded through Health, Education, and Welfare (HEW), Planned Parenthood, the Population Council, and the Ford Foundation for family planning clinics and demonstration projects (Critchlow, 1999; Littleton, 1977). The Social Security Amendments of 1967 authorized direct funding of family planning by the federal government. Provisions earmarked 6 percent of HEW funding for family planning. Local welfare agencies were mandated to develop family planning programs and provide services to adult welfare recipients.

Family planning offered a means of solving a social problem through technique without directly confronting the underlying structural issues of income inequality, race, or the breakdown of traditional values and culture, as evidenced by a growing divorce rate and out-of-wedlock births that began to skyrocket in the mid-1960s. If the federal government could prevail upon the poor to have fewer children, it followed the rate of poverty could be reduced.

(Critchlow, 1999 p. 51)

The challenge for policy makers was how to deliver contraceptive and family planning services to the poor, without a national health care system or national infrastructure for providing such services, without a major investment. In

the mid-1960s, civil unrest and rioting in northern Black urban ghettos and the Watts riots in California influenced policy makers to increase efforts to control the birth rate of poor and unmarried Blacks. Fertility control was a major focus of political elites attempting to deal with poverty, illegitimate births, and social unrest in urban areas during the 1960s (Quadagno, 1994). This view dominated the thinking of social welfare programs for the next 30 years. From 1960 to 1990, the rate of out-of-wedlock births increased by 600 percent (Critchlow, 1999). Large increases in the rates of teen pregnancy, especially among poor Blacks, shifted family planning policy away from concerns with global overpopulation to U.S. population issues relating to welfare dependency, poverty, the breakdown of traditional male-headed families, and illegitimate births (Patterson, 2000).

HEW funding for family planning rose from \$8.6 million in 1965 to \$28.2 million in 1968 and was doubled to \$56.3 million in 1969. (Critchlow, 1999) In 1970, the Family Planning Services and Population Research Act was passed. The act authorized the creation of the National Center for Population and Family Planning and the National Center for Family Planning Services, both within HEW. Funding of \$382 million was authorized for program services, including research and training. Title X of the Public Health Services Act was also enacted which ultimately served as the primary source of federally funded contraception outside of Medicaid (Critchlow, 1999). The Commission on Population Growth and the American Future, headed by John D. Rockefeller III, was commissioned in 1970. By 1972, when the report was released, Nixon had begun to distance his administration from support for the population movement's fears of global

overpopulation as a looming crisis (Hoff, 2010). The change in Nixon's position on overpopulation came in response to a downward trend in global and domestic fertility rates beginning in the 1950s, the increased politicization of family planning impacted by the women's rights movement, the Catholic response to artificial contraception, sterilization, and the hotly contested abortion debate that began to divide the nation across ideological lines (Critchlow, 1999).

During the administrations of both Johnson and Nixon, federal spending for public welfare programs increased significantly for programs like Medicaid and Medicare, family planning, housing, and social services for the poor, and job training and employment services. Between 1965 and 1980, federal spending on social welfare programs (adjusted for inflation) rose by 263 percent (Critchlow, 1999). Under the Nixon administration, family planning became firmly entrenched in the mix of social services of the welfare state. Significant increases in social spending were combined with policies aimed at reducing or at least controlling the number of people dependent on public assistance, especially poor unwed mothers and racial and ethnic minorities in metropolitan cities. In 1969, HEW provided state grants for Maternal and Child Health Services amounting to \$2.5 million. Funding for additional programs for mothers and infants and family planning had risen to \$21 million in 1969 from just \$350,000 in 1965. The OEO was providing funding for 160 family planning programs in 36 states, as well as the District of Columbia and Puerto Rico (Critchlow, 1999). Between 1980 and 1994, approximately \$3.5 billion (adjusted for inflation) went to fund family

planning programs without a significant reduction in out-of wedlock births (Critchlow, 1999).

From Nixon to the Regan era, this nation witnessed a gradual change in attitudes towards the welfare state. Regan set the tone with his use of the label “welfare queen” to demonize Black women as morally corrupt in their exploitation of the welfare system. Changes in the U.S. economy, including a recession in the 80s, job losses in manufacturing and industry, anti-union legislation, and deregulation, shifted public opinion toward welfare recipients as being an undue drain on the economy. A public campaign waged by politicians and in the media blamed welfare dependency as creating an underclass of non-productive, mostly Black and Latino unemployed workers who would rather live on the public dole than work in the wage economy.

AFDC became imbued with cultural meaning for race laziness, immorality, and irresponsibility (Rogers-Dillon, 1995). Although in 1991 the actual rates of Black and White families receiving AFDC was very close, with Blacks at less than 39%, Whites at just over 38%, and Latinos at around 17% (HLR, 1994). The public was led by critics of the welfare system to believe that welfare recipients would rather live off the public largesse than earn a living in the wage economy. Critics went so far as to imply that welfare recipients were enriching themselves and their families while on welfare. However, inflation adjusted trends in cash benefits tell a different story:

Based on maximum benefit levels, a nonworking, one-parent family of three persons in a typical state would receive \$367 per month in AFDC assistance. That same family would also be eligible for \$285

per month in food stamps, for a total of \$652 per month, which amounts to seventy percent of the poverty threshold. Between 1972 and 1991, inflation reduced the real dollar value of the average grant by forty-one percent. Taking food stamps into account, the real dollar value declined by twenty-seven percent. (HLR, 1994 p. 2020)

Welfare recipients were stereotyped by elites as “sexually promiscuous” people who used their welfare benefits to buy drugs and alcohol while tax-payers cared for children fathered by “dead-beat dads.” The idea was to recast Black and Latino women on welfare as being undeserving poor due to immoral behavior and sexual promiscuity (Neubeck and Cazenave, 2001; Sparks, 2003). Illegitimacy was touted as the number one reason why the poor, especially Blacks and Latinos, were unable to break free from welfare dependency. However, the size of the typical family receiving AFDC benefits exhibited a downward trend from 1969 to 1991, decreasing from 4 to 2.9 family members with almost 75% of AFDC families having just one or two children (HLR, 1994). The “dead-beat dad” label was used to advocate for stronger enforcement policies in the establishment of paternity and collection of child support payments.

The “culture of poverty” rhetoric was reinvented in the 80s as the rhetoric of the “culture of dependency” (Baldwin, 2010; Niskanen, 1996; Sparks, 2003). According to the new logic, the poor were trapped in a cycle of dependency, as each succeeding generation of welfare parents transferred to their children a culture of entitlement to public charity that undermined self-reliance and moral values. Absent any legal barriers to full assimilation, critics charged that cultural

differences were the main reason people preferred to live on welfare instead of becoming working taxpayers who provided for themselves and their children. Race was recast in the political discourse of the 1980s and 1990s as culture, then culture was subsequently equated with social and class position. Debates over welfare reform relied upon culture as a criteria for classifying immigrants and minorities as undeserving of public assistance, on the premise that welfare dependency undermined traditional values and the assimilation of immigrants (HLR, 1994; Marchevsky and Theoharis, 2000). The growing sentiment was that the only way to really help the poor get off welfare was to severely limit benefits for additional children, impose mandatory work requirements, sanction full or partial benefit payments, and implement lifetime limits for welfare benefits.

The political climate leading up to the debates over welfare reform from 1995 to 1996 had already framed the issues publically around middle-class cultural values about wage labor, sexuality, family structure, and citizenship. The fertility rate of the poor was stigmatized as the cause of poverty, especially for Black and Latino women and immigrants. Much of the debate centered on ending the safety net programs expanded during the Johnson administration, which had dramatically increased the welfare rolls of Black women and children largely excluded in the New Deal Era. Low-income and poor women were also criticized over their sexuality, marital status, and giving birth outside of marriage. Critics blamed women's changing views of their own sexuality as undermining the traditional views of family and the proper role of women as wives and mothers. Concurrently, working mothers also came under attack for abandoning their

children, with charges that unsupervised children were at greater risk of child abuse, delinquency, and truancy resulting from a women's desire to pursue employment outside of the home (Baldwin, 2010; Harvard Law Review, 1994; Smith, 2007). Welfare was framed as contributing to a generational dependency on public assistance, as each successive generation inherited an expectation that the government would provide the means for achieving an adequate standard of living through a variety of social welfare programs. That, opponents of the welfare state suggested, undermined the individual's work ethic, leading to a cycle of poverty, immoral behavior, criminality, and welfare dependency (Baldwin, 2010; Fraser and Gordon, 1994; Marchevsky and Theoharis, 2000).

I do not suggest the existence of uniform family planning elite of policy makers operating across all three historical periods with the same ideological and political motives in advocating for a national program of fertility control. The fertility of subordinate groups is constructed as a social problem differently in each period and by various interested parties. The following summarizes the prevailing viewpoints of some of the groups most vocal in shaping the debate over family planning issues.

Elites and Family Planning: Eugenics Period

Eugenicists generally consider fertility as a problem based on the assumption of the inequality of races and the heritability of immutable factors leading to human (and racial) degeneracy and a change in U.S. population demographics. I group the major advocates of fertility control during the eugenics period in three broad categories: nativists, White Supremacists, and Social Darwinists. Nativists

are concerned with socio-cultural factors (i.e. language, traditional values, culture, and religion) threatening to change the demographic characteristics of the U.S. population in the early 20th century from uncontrolled immigration. Their main fears are that Whites will lose a dominant social and cultural status from competition with "unassimilable races." White Supremacists - exhibit more concern over the loss of a social and intellectual advantage (from the heritability of intelligence) through race-mixing with inferior races. Fertility control for this group is centered on the maintenance of White purity. Social Darwinists are similarly worried over the degenerative effects of reproduction with "unfit" populations (i.e. inferior races and ethnic groups, the mentally deficient, lower social classes, and individuals with genetic abnormalities) believed to contribute to human degeneracy and reverse the gains of social evolution. Proponents of social Darwinism understand social welfare programs as promoting "survival of the unfit" which undermines the natural laws of evolution. Social Darwinists see family planning as a major tool for addressing the problem of differential fertility between upper and lower classes.

Elites and Family Planning: Population Crisis Period

During this era the issue of poverty and the threat of over-population is directly related to a host of structural factors including the inability of the poor to access or consistently use modern contraceptive techniques. Approaches to the problem of fertility control track along three ideological alignments segregationists, conservatives, and liberals. Segregationists extend the assumption of the inequality of races and the existence of immutable biological

factors producing a natural racial hierarchy. They view the threat of miscegenation and the tainting of racial purity (from inter-breeding with inferior races) as a major component of any national family planning policy. Fertility control is discussed as a protection against "mongrelization" and the undermining of White racial superiority. Conservatives frame poverty and social disintegration in terms of the inability of the poor to control their fertility leading unwanted births and reliance on welfare. Birth control is seen as a means of aiding poor families to improve their socioeconomic condition the same way that the middle-class does by limiting family size and thereby reducing poverty and dependence on social welfare programs. The liberal tradition adopts a more egalitarian attitude about family planning. Liberals target the barriers to socioeconomic mobility through civil rights legislation and expansion of government programs designed to provide direct aid to the poor and racial and ethnic minorities. Family planning is similarly viewed as a means of helping the poor to overcome poverty through limiting family size by providing contraceptive services regardless of the inability to pay.

Elites and Family Planning: Welfare Reform Period

During the congressional hearings on welfare reform uncontrolled fertility of the poor is debated as contributing to welfare dependency. Family planning represents a component of a comprehensive overhauling of the present welfare system that will break the cycle of dependency and chronic poverty (in part) by promoting traditional values, personal responsibility, work-ethic, and morals. I identify two main perspectives on the problem of welfare dependency the

political ideologies of the new right and the neo-conservatives. Proponents of the new right believe that welfare is undermining traditional values (i.e. promoting promiscuity, single-parent families, and welfare dependency) through a culture of poverty and dependency. Reforming the welfare system includes family planning as part of a plan to reduce public expenditures for burgeoning welfare costs and ending chronic poverty. The new right frames fertility control as a means of aiding the poor to limit family size to levels that can be provided for through wage-labor while also promoting middle-class values and integration into the mainstream. Neo-Conservatives promote publically funded contraception as a means of aiding the poor to end a generational cycle of poverty and dependence by encouraging individualism, meritocracy, and personal responsibility. The adherence to traditional values and morals are considered fundamental to achieving middle-class success. Comprehensive reforms to the social welfare system which include a focus on reducing births for welfare beneficiaries is characterized as helping low-income women to become freer to pursue a path into the middle-class through education, job training, and stable employment while also promoting traditional family values.

Chapter 3: Theoretical Framework

In this chapter, I study the use of eugenic ideology over time as it is used in political discourse about welfare and family planning. Additionally, I outline a series of general statements that describe how eugenic ideology came to influence the formation of family planning policy, especially in light of the fact that overt forms of public discriminatory speech and practices became unpopular after World War II.

Immigrant receiving nations, such as the United States, often experience competition among diverse immigrant groups for racial, ethnic, and cultural dominance. Powerful groups seek to establish values, norms, and beliefs that structure social relations to their advantage against competing groups. In capitalist economies, the control of and access to scarce economic resources is central to economic and political competition for power and dominance. Where such hegemonic interests clash, the struggle for power becomes a conflict over whose ideals will become established as the social norms and values that govern society.

In civil societies, the public sphere is the site for expressing social opinions on issues important to members of the society (Cohen and Arato, 1992). In the U.S., social inequality has led to an unequal distribution of power throughout society. Elites are recognized as possessing a privileged social status stemming from an expertise that provides them with greater power than non-elites (the general public). Elites bring this privilege status and recognized expertise to the public sphere in an effort to shape popular opinion and ultimately influence social policy.

Empirically produced knowledge, which has passed the rigors required for scientific evidence, carries a greater authority in public discourse than unsubstantiated opinion (Fuchs, 2002). Political elites often rely upon the expert knowledge of academic elites, which is believed to have been confirmed through empirical research. However, not all knowledge is produced through a scientific method.

The focus of this dissertation is to understand how ideology influences powerful groups to construct knowledge about the fertility of poor, racial, and ethnic minorities, and women. I am essentially studying the impact of eugenic ideology on elite discourse to accomplish a policy agenda that constrains the reproductive freedom of poor non-whites. I employ a definition of ideology that aids in understanding how eugenics is communicated through discourse to categorize groups for fertility control measures. Hall (1996, p. 26) defines ideology as, “the mental frameworks - the languages, the concepts, categories, imagery of thought, and the systems of representation...” used by members of society to construct and interpret social reality (van Dijk, 1998, 2006). Ideologies are worldviews that are comprised of various theoretical perspectives, opinions, and belief systems woven together to structure an interpretation of social reality. Therefore, an ideology can lay claim to scientifically based theories that are supported with interpretations of reality that are influenced by cultural beliefs and attitudes.

Eugenics and Eugenic Ideology

Writing in his memoirs, Sir Francis Galton summarized his theory on eugenics or “race improvement” with a statement of its two primary objectives. The first was “to check the birth-rate of the Unfit, instead of allowing them to come into being...” Second, was the “improvement of the race by furthering the productivity of the Fit by early marriages and healthful rearing of their children” (Galton, 1907 p. 323). In applied eugenics, negative eugenics is the inhibiting the fertility of those deemed unfit to reproduce, while positive eugenics encourages reproduction among the fit (Johnson, 1909; Hutchinson, 1913; Leonard, 2003 and Harvard Law Review, 2008). From the late 19th century to the post-World War II period, eugenicists (primarily in Europe and the United States) produced extensive research on schemes for classifying fit and unfit populations. Much of this prior work addressed rising concerns over immigration, criminality, poverty, and public health (Cogdell, 2000; Hansen and King, 2001; and Lombardo and Dorr, 2006). The general term *socially inadequate* applies to various subgroups deemed to be “...in need of special restraint, direction, or care” (Laughlin, 1921 p.70). The emphasis eugenics places on fertility control of subpopulations whose reproduction is considered somewhat detrimental to society provides policy makers with a rationale for initiatives that target the reproduction of marginalized populations. In this dissertation, I study how elite discourse is used to construct knowledge that legitimizes the fertility control of certain groups and whether or not there is evidence that elites used a re-articulation of eugenic ideology in

political discourse to accomplish a eugenic-oriented national birth control agenda using data sampled from three periods: 1921-1932, 1965-1966, and 1995-1996.

Eugenics is comprised of multiple theoretical perspectives adapted to form a belief system that explains social inequality (i.e., race difference, human value, and social dysfunction) as expressions of human degeneration (Guyer, 1916; Sandall, 2008). Eugenics has four basic concepts that organize it into a belief-system: White racial superiority, White purity, feeble-mindedness, and race hygiene (Goddard, 1926; Popenoe and Johnson, 1933; Stubblefield, 2007; Whetham and Whetham, 1912).

White racial superiority is grounded in essentialist notions about the process of human evolution resulting in various human species. Scientific-racism proposes that evolution led to a variation in human species called races (Smedley, 1993). The various races are primarily circumscribed by physical appearance (phenotype), behavior, and mental capacity. Human traits and abilities differ by race according to the laws of evolution and are therefore inheritable (Gossett, 1963). Under this rubric a natural racial hierarchy exists, endowing Whites with superior genetic traits and, accordingly, non-whites with inferior traits. Eugenics treats the presumed purity of whiteness as the crux of human and social evolution, linking socioeconomic class to biological classifications of race (Stubblefield, 2007; Popenoe and Johnson, 1933). This feat is accomplished through the frame that whiteness and intelligence produce higher socioeconomic classes. The belief in White purity is a central premise in constructing White racial superiority as a social fact, and in the development of a

conceptual model for interpreting social reality under the rubric of eugenic ideology.

I outline my reasoning for asserting that White racial superiority is a social fact supported and maintained through cultural beliefs about Whites. A social fact is a subjective interpretation of reality produced through our social interactions as we construct meaning from interpersonal communication. Members of a society are bound together through a shared meaning of reality, forming the culture, norms, and traditions that establish the rules governing social activity. The habituation of our interactions, guided by social norms and cultural observances become institutionalized overtime. The repetitive nature of social interaction and communication, which form into institutional processes, serves to embed a commonsense knowledge (or meaning) about interpretations of reality as a socially accepted fact. In this manner, *subjective* interpretations of reality become established in society as *objective* social facts. Berger and Luckmann (1966) outline three stages in the process by which society constructs knowledge about reality. Culture is generated through human activity, whether in the creation of physical objects, beliefs, values, or complex social systems. *Externalization* occurs when the cultural products become external to those creating them. With time, society evolves a system for transmitting shared knowledge about the cultural products generated through repetitive human activity. *Objectification* is accomplished through the systemic transmission of knowledge to other members of society “learned as objective truth in the course of socialization.” Under *internalization*, individuals are indoctrinated into a culture’s commonsense

knowledge acquired through the socialization process, which then becomes “internalized as subjective reality” (Berger and Luckmann, 1966 p. 84).

The concept of race is essentially a commonsense knowledge about the meaning of human difference. European expansion into Africa and the Americas (beginning in the 15th century) lead to a subjective interpretation that non-Europeans and their cultures were inferior. Races are the cultural product of a largely European belief system that categorizes humans into inferior and superior biological races. Europeans and individuals of European ancestry became labeled ‘White’ and racialized as superior in societies where systems of racial hierarchy are established. Racial superiority implies the power to establish social dominance and systemic privilege for the dominant race in a racialized state. The dominant culture, norms, and traditions of a racialized society provide the rules regulating social interaction between the dominant White population and subordinate non-white groups. The commonsense knowledge about the superiority of whiteness is objectified as non-whites learn their expected social roles and ascribed identities through socialization. When non-whites internalize their presumed inferiority and transfer (consciously or unconsciously) this commonsense to other non-whites, White racial superiority becomes established within a given society as a social fact.

The colonization of the Americas can be understood as much more than wars fought over land tenure between European powers and against Indigenous people of the western hemisphere. Colonization was also as an ideological conflict over the establishment of European culture in the west. The discovery of

the western hemisphere in 1492 offered European nations an opportunity to transport (externalization) European culture to the New World in the Americas. The dominance and superiority of Europeans established an objective reality in the New World accomplished through the colonization of Indian lands and the importation of African slaves. The further progression of objectifying the dominance of European culture involved the imposition of European language, religion, traditions, and belief-systems on American Indians and African slaves as subordinated groups. The process of internalization occurs as subordinated groups become socialized into the dominant culture. Culture is a key mechanism providing the context governing social relations within society. Through culture, individuals learn the cultural clues (beliefs, values, and attitudes) that regulate behaviors and situate one's social location. European cultural dominance was also established through the power to structure social identity for both dominant and subordinate groups. Over time, European cultural identity became subsumed within the broader conceptualization of a White race as the dominant social group in the United States. The White race is a social construction, initially conceptualized as a product of human evolution ascribed with preeminent traits of intelligence and moral character, and inheritable through genetic transmission of superior biological characteristics (Selden, 1999).

The eugenic classification of "feeble-mindedness" clarifies the eugenicist fear that impurities would threaten the socioeconomic and political dominance of Whites as a racial group. Higher intelligence is considered to be a factor of racial purity. According to eugenics, the transmission of impure genetic material or

“germ plasm” has a degenerative effect on mental capabilities. Feeble-mindedness is a eugenic classification that categorizes individuals as possessing degenerative traits, posing risks to intelligence and thereby White racial purity (Goddard, 1926). Threats to White racial purity contain elements that taint whiteness (Stubblefield, 2007). During the early 20th century, intelligence testing of European immigrants was suggested as a way of testing for the trait of feeble-mindedness (Peart and Levy, 2003). It was believed that southern and eastern European immigrants were less intelligent than northern Europeans and that their immigration introduced genetic and biological qualities tainting pure whiteness (Stubblefield, 2007).

Race hygiene is premised on the assumption that Whites (a pan-ethnic amalgamation of Europeans) are the superior human race substantiated by level of civilization, historical accomplishments, cultural developments, technical superiority, and the ability to conquer, colonize, and enslave other peoples (Drescher, 1990; Peart and Levy, 2003). Western domination of Africa, Asia, and the entire indigenous population of the western hemisphere is supported by a belief in White racial superiority. Accordingly, Whites have been able to successfully dominate the darker people of the earth because they possess superior intelligence. To maintain the intellectual advantage over non-whites, racial purity must be defended against the contamination of impure germ plasm transmitted through genetic anomalies, interbreeding with inferior White populations, or through race-mixing with non-white races (Goddard, 1926; Leonard, 2003). Race hygiene includes a number of techniques for maintaining

a healthy, intelligent, and dominant White population is summarized as follows:

1) establish a system for identifying and classifying individuals according to the value of human traits; 2) segregate populations into inferior and superior breeding classes and; 3) apply birth-control measures discouraging the reproduction of inferior classes (such as legislation, institutionalization, sterilization, and contraception) while encouraging the reproduction of the superior classes (Stubblefield, 2007; Popenoe and Johnson, 1933).

Eugenic ideology presupposes that human beings are inherently unequal and that social inequality is predicated on the idea that genetic factors largely account for the formation of socioeconomic classes. According to eugenic thought, inequality is a function of the socioeconomic distribution of wealth related to intelligence. The superiority of the dominant group is attributed to the possession of a higher level of intelligence that members of the group are able to translate into wealth. The subordinate groups (i.e. racial and ethnic minorities and the poor) are in an inferior position because they are less intelligent and less able to compete against the superior dominant group (Herrnstein and Murray, 1994).

The general viewpoints forming eugenic ideology can be stated as follows: 1) The difference between social classes can be explained by level of intelligence, cultural development, moral character, and population health. 2) Natural selection in human evolution accounts for phenotype and genetic variation forming human races. A natural hierarchy exists for human races that situates Whites as superior to non-whites. 3) The quality and health of human populations can be improved through a controlled breeding program that eliminates defective

genetic traits and enhances desired human characteristics. 4) Most health and social problems are caused by genetic defect that can be 'bred' out of the general population by controlling the reproduction of individuals and groups that possess a genetic taint. 5) Interbreeding between Whites and non-whites will dilute the purity of whiteness and undermine White racial superiority.

I believe that eugenic ideology presents powerful groups with the rationale that society would benefit from fertility control policies designed to reduce (or at least manage) the population of poor racial and ethnic minorities. Eugenic ideology contains racist and classist beliefs that supply the logic for constructing the reproduction of subordinate groups as a socioeconomic burden on society. These beliefs include the knowledge that: 1) Whites view themselves as the dominant racial group, are conscious of their superior position, and perceive non-whites as a challenge to their status and power; 2) chronic poverty is indicative of low intelligence, poor work-ethic, immorality, and a failure to assimilate into mainstream society; 3) controlling the reproduction of the poor will reduce expenditures for social welfare programs and force minorities to adopt traditional values about work, family size, and morality.

Reform Eugenics and Transition Theory

Early studies of population demographics showed a gradual fertility decline in certain European populations. It was also observed that there seemed to be a class differential related to fertility management, with the more affluent classes exhibiting a greater use of birth-control than the lower-classes. This phenomenon provided an opportunity to apply a newly

revised eugenic approach to population policy. The shift towards a socially oriented eugenics framed the issue of differential fecundity as a problem concerned with the intellectual degeneration by class and race, an idea first proposed by Francis Galton in 1869. An attention to intelligence and culture enabled eugenicists to extend an essentialist argument into contemporary population studies of the 1930s and beyond.

The eugenicists believed that intelligent women have fewer children than “dull” women, and that the lower fertility of intelligent or “privileged” women produced a downward shift in the abilities of the population as a whole. Because intelligence was thought to differ between racial subgroups, different racial groups were thought to make different contributions to the demographic development of the population... (McDaniel, 1996 p. 136)

Since the birth-control movement, immigration-restrictionists and eugenicists had been involved in studying population problems for years, and they joined the ranks of the new organizations working on population issues in the 1930s. The interaction of researchers and activists working from different ideological perspectives produced critiques of the biological explanations of group-based fertility differentials long proposed by mainline eugenicists. Working on the problem of fertility decline, W.F. Ogburn promoted the idea of “social evolution” as an explanation. He suggested that increased levels of urbanization and industrialization motivated individuals to control their fertility and not some inherent biological difference as proposed by the eugenicists. Ogburn indicated

that a “cultural lag” existed between different groups that influenced their fertility decisions (Ramsden, 1993).

Fredrick Osborn, instrumental in efforts to promote a reformed eugenics, suggested the idea “that different rates of reproduction as between socio-economic or occupational groups may effect significant changes in the distribution of various types of culture” (Osborn, 1938 p.121). This line of thought altered a biological explanation of difference in fertility to a social interpretation thereby, helping to legitimize reformed eugenics as a new application in social science and demography. A reformed eugenics emphasized the transmission of culture and intelligence through inheritance, positing a eugenic framing of fertility differentials between racial and ethnic groups and socioeconomic classes, without directly attributing a biological or genetic inferiority as the basis for the suggested difference. Likewise, social demographers placed importance on the cultural and economic harm of differential fertility as opposed to the genetic harm proposed by hardline eugenicists (Ramsden, 1993).

In 1929, Warren S. Thompson published *Population* outlining three types of countries exhibiting different stages of population growth. Group A countries have near replacement level or declining growth rates due to rapidly falling birth-rates, low mortality rates, and wide-spread contraceptive practices. For group B countries, mortality rates decline more rapidly and prior to declining birth rates, resulting first in a rising population until falling birth rates begin to slow population

growth. In group C types, neither mortality nor fertility rates are under control, reflecting Malthusian predictions (Thompson, 1929). In the mid-1940s, demographers developed a more elaborate theory aimed at explaining and predicting population growth. Demographic transition theory in its original conception specifies the relationship between population patterns and socioeconomic changes in society (Hodgson, 1983; Macionis, 2007). Nations undergoing a transition from an agrarian economy by becoming more industrialized show a progressive decline in mortality and fertility rates. Demographic transition theory (or simply transition theory) provided a relatively accurate history of the demographic changes in Europe and western industrial nations as socioeconomic changes occurred under modernization (Kirk, 1996). Transition theory seemed to explain demographic trends in European nations from the 17th to the 20th centuries and it was assumed that it could be relied upon to predict population patterns as well. Demographers believed that the assumptions of transition theory gave them the ability to explain the relationship between changes in structural factors and population growth as functions of industrial development and modernization. An important revision to transition theory considers colonization as an explanation for the differential lag in fertility rates of former colonies. European powers introduced modernization to their colonial holdings with the intent of improving the extraction of raw materials for the so-called "mother country." The complete benefit from modernization was not fully experienced by European colonies because the goal was to improve efficiency using modern science and technology, not to create a more

contemporary independent state. Colonial powers intentionally underdeveloped their colonies, limiting modernization to what would most benefit the continuation of an exploitative form of international economic development. The colonial system was designed to produce industrialized and manufactured goods benefiting European economies and using the natural resources of the colony. Under colonization, a different picture of demographic transition evolved. The theory predicted that modernization would eventually lead to lower fertility rates. However, demographers saw that much the opposite was happening, especially in India and Asia, where improvements in food production, public health, and infrastructure reduced mortality without a considerable reduction in fertility rates, leading to a population explosion in colonized nations (Hodgson, 1983, 1991).

A significant rise in the populations of European colonies added to the challenges of rebuilding the global economy after World War II. Colonialism is an important assumption added to later revisions of transition theory, explaining what Thompson referred to as “the Malthusian dilemma of all colonialism” (Hodgson, 1983). Colonial exploitation would need to end in order for underdeveloped nations to receive the full benefits of modernization, enabling them to better control their growing populations. Demographers noted that cultural attitudes about family seemed to influence the relationship between fertility and social-structural improvements in developing nations. This is probably one of the main reasons why Frank Notestein revised transition theory in 1945 to include fertility control. During postwar reconstruction, mortality was reduced (especially for former colonial possessions), but an explosive growth in

population was unavoidable due to social, religious, and cultural attitudes that hindered changes in reproductive behavior.

A number of criticisms of transition theory emerged when considering non-European nations in the postwar period. First, the rapid rise in population was assumed to be impeding efforts to reduce poverty. High birth rates were seen as an economic cost born by individual families that held them in impoverished conditions due to the expense of caring for additional children. Traditional societies held rigidly maintained roles for women as child-bearers and caretakers. Children served an important labor function in agrarian systems, contributing economically to the family. Modernization reduced infant mortality and increased the level of urbanization and the growth of a wage economy. A change in the status of women as wage earners began to effect traditional family structures and the need to maintain high replacement level fertility. Poor women as wage earners have a greater economic value in an industrializing nation than as producers of large families (Hodgson, 1983). In order to continue to maintain large families, children would need to work in the wage economy, or their numbers would have to be reduced to a number that could be economically justified (Aldrich, 1975; Hodgson, 1988; Kirk, 1996; McDaniel, 1996). Modernity also threatened family stability through changes in the work environment, substance abuse, and social cultural attitudes about sexual relations and gender roles.

After World War II, European colonial exploitation was effectively replaced with a modern, capitalistic exploitation, reinforcing or creating class divisions that

helped to perpetuate poverty along class rather than at national levels.

Government-sponsored family planning incorporates a western economic model that defines children as economic costs within a wage economy. In developing nations, poverty may result as much from centuries of European imperialism, colonial exploitation, and the imposition of western capitalism after World War II, than from a change in cultural attitudes towards fertility practices. Revised transition theory offers an opportunity to extend eugenic ideology into family planning policy without the use of overtly racist language. I investigate this assumption with a critical discourse analysis and present my findings later in this dissertation.

Alternative Theoretical Perspectives Explaining Family Planning Policies

I acknowledge that there may be alternative explanations for the adoption of federally funded programs providing contraceptive services to poor and low-income families that may depend on a host of structural factors (i.e. patriarchy, discrimination, or socioeconomic inequality). Eugenic ideology consists of beliefs that range from the moderate (i.e. improvements in sanitation for poor communities) to the extremely racist (i.e. sterilization of poor American Indians, Blacks, and Latinos) in promoting a utopian society largely dominated by Whites. I undertake this study (in part) to aid in my understanding of the legacy of sterilization abuse claimed by poor women of color during the 1970s (Carpio, 2004; Diamond, 1976; Horsburgh, 1996; Lawrence, 2000; Ralstin-Lewis, 2005; Roberts, 1997; Torpy, 2000). Activists, scholars, and women's groups assert that federally funded fertility control programs target lower socioeconomic classes

and racial and ethnic minorities as a cost savings of public expenditures for social welfare programs (Littlewood, 1977; Monroe and Alexander, 2005; Nelson, 2001 and 2003; Romero and Agenor, 2009). My research centers on the extreme end of the ideological spectrum (i.e. racism) and therefore adopts a stance that may overlook less severe motivations guiding policy makers in their formulation of family planning policies. I consider several perspectives offering other reasons for the inclusion of family planning services in social welfare programs.

Race Prejudice and Group Position

The racial prejudice of White elites who exercise power to influence policy development at the federal level is a view widely held by critics of birth control policies who charge racism in family planning (Nelson, 2003; Neubeck and Cazenave 2001; Roberts, 1997; Silliman, 2004). Allport (1954) popularized “scapegoat theory” as a means of formally stating how prejudice develops for individual group members resulting from inter-group conflict. Briefly stated, scapegoat theory posits that inter-group competition over social rewards (employment, housing, justice, and political power) lead to frustration and aggression on the interpersonal level. Aggression becomes displaced onto the subordinate minority group (“goats”). Stereotypes and blame justify the displaced hostility onto the subordinate minority population. Prejudice and discrimination then become rational responses in maintaining racial and ethnic inequality. It is conceivable that individual policy makers hold prejudiced views of poor non-whites and promote policies that are inherently discriminatory in an effort to deny them access to public resources.

Blumer (1958) challenged the concept of prejudice as an individual formulation, suggesting that race prejudice originates more out of a sense of group consciousness. Powerful groups possess an awareness of their social status and seek to maintain it. White racial superiority is rooted in essentialist notions of race difference. In this respect, Whites see themselves as the dominant *racial* group in society and conceive non-whites (especially, American Indians, Blacks, and Latinos) as racially subordinate to themselves. Dominant group membership confers rights, benefits, and privileges exclusive to that group. Stereotypes are used to negatively characterize racial and ethnic minorities as being unworthy to enjoy the same rights and advantages as the superior group. Blumer states that “[t]he source of race prejudice lies in a felt challenge to this sense of group position” (1958, p. 5).

According to Blumer, a perceived threat to dominant group status that motivates dominant group members to protect their social position from subordinate group claims does not require individuals to personally hold racist beliefs to act in discriminatory ways. White elites can rely upon cultural attitudes and beliefs about the fertility of poor non-whites that are widely held in society while advocating for policies that they believe will genuinely improve the socioeconomic condition of marginalized populations. Blumer suggests that cultural attitudes and beliefs about minorities form a schema that provides the social rules and common knowledge guiding majority and minority group relations. A social psychological analysis of the conceptual maps used by Whites when thinking about the identities of racial and ethnic minorities could identify

evidence of racist ideologies leading to racial discrimination in social policy. Blumer attributes the structuring of dominant racial group schemas to *feelings* dominant group members share about racial and ethnic minorities. He categorizes these *feelings* of racial prejudice held by the dominant group towards minorities into four basic types: “1) a feeling of superiority, 2) a feeling that the subordinate race is intrinsically different and alien 3) a feeling of proprietary claim to certain areas of privilege and advantage, and 4) a fear and suspicion that the subordinate race harbors designs on the prerogatives of the dominant race” (1958, p.4). Blumer lays a solid foundation for explaining racial inequality in demonstrating that racial prejudice is best analyzed as a collective accomplishment, as a sense of group awareness of racial superiority and privilege. What is lacking in his analysis is a more in depth discussion of how a dominant racial group schema becomes translated into state policies that disadvantage minority groups. In other words, how do political actors embed racial ideologies in social and public policy in ways that support the self-interests of the dominant racial group without appearing to be racially motivated to the public?

Racial Formation Theory

Omi and Winant’s (1994) racial formation theory is one of the most completely specified social constructionist models for explaining the participation of the state in fostering racial inequality in the United States. Their approach describes the socio-political aspect of racial identity creation and destruction and the participation of the state in maintaining these constructs. Racial formation

provides a broader analysis of the persistence of racial inequality in light of desegregation, anti-discrimination legislation, and improvements in race relations (especially between Blacks and Whites). Racial formation is “the sociohistorical process by which racial categories are created, inhabited, transformed, and destroyed” (Omi and Winant, 1994, p. 55). A central component in the racial formation process occurs through racial projects. “A racial project is simultaneously an interpretation, representation, or explanation of racial dynamics, and an effort to reorganize and redistribute resources along particular racial lines” (Omi and Winant, 1994 p. 56).

Racial projects can be understood as ideological mechanisms supporting the establishment of a racialized social, economic, and political system. Individuals are classified into races and located within a racialized hierarchy that is largely dependent on phenotypical variations between population groups. Racial categorization determines social status, access to economic resources, and political power. Social stratification is then accomplished through this process, using race as the fundamental determinant for one’s location within the system. Racial formation theory explains how political elites would be able to embed eugenic ideology in shaping family planning as a racial project when the outcomes contain race specific targets. When formulating policies that may affect racial groups differently, elites could emphasize attributes, characteristics, or cultural differences believed to exist between dominant and subordinate racial groups. Dominant group members could draw upon the dominant group schema

that furnishes knowledge about racial and ethnic minorities and regulates majority group relations with them.

During the early part of the 20th century, public acceptance of the existence of superior and inferior races was greater than after World War II. Political efforts to integrate minorities (especially Blacks) into mainstream society required a reconceptualization of race difference that would make minorities more acceptable to Whites. As a result, race categories would no longer be explained as containing immutable properties according to the tenets of scientific racism. Racial equality could be improved through policies promoting social mobility and assimilation of racial and ethnic minorities. Under racial formation theory, state policies that reproduce racial inequality without overt reference to race express a different form of social domination. A racial project is racist when it “creates or reproduces structures of domination based on essentialist categories of race” (Omi and Winant 1994, p. 71).

In my estimation, this view suggests that in order to classify as a racist policy that impacts racial groups unequally, it must be influenced by conceptions of race difference that (at least) imply a belief in the existence of superior and inferior races. In this sense, for a policy that targets poor women of color for reproductive control to be considered a racial project, advocates must explicitly state that as a policy goal. This somewhat rigid definition of a ‘racist racial project’ does not explain the unconscious or subtle influences of racism on the social cognitive process that arise from existing dominant group schemas about subordinate

racial groups, which are no longer constructed according to essentialist notions of race, but nevertheless contain social rules that reproduce racial inequality.

Omi and Winant (1994) add to our understanding of how elites, operating through state bureaucracies, would be able to embed eugenic ideology in family planning policy through racial projects. However, they would not consider a racial project as racist unless the language used to advocate such policies was more openly based on race difference. I believe this view to be lacking in accounting for the lingering effects of stereotypes that have historically been used to denigrate minority claims for equality. To be effective in accomplishing policy objectives, racial projects must be communicated in the public arena. If dominant group members have a shared knowledge about minorities, (i.e., cultural symbols, stereotypes, and world-views) a reliance on overt racist language would not be required to convey racist meaning; only a sufficient amount of information that stimulates existing conceptions of minorities cognitively stored as abstract images is needed to be communicated. I suggest that more emphasis be placed on the *communication* of subtle forms of racism. In this respect, a social psychological approach would help to focus my analysis of eugenic ideology in policy making on the social cognitive functions of prejudice, stereotypes, and discrimination in structuring and maintaining systems of majority group dominance.

Color-Blind Racism

Bonilla-Silva's (2001) approach recognizes that structural racism is accomplished through the communication of racist ideology. He extends the

analysis of racism with the concept of a racialized social system. His main argument is that prevalent theories on race neglect to account for the description of structures supporting and maintaining systems of racial ideologies. Racism is accomplished through racial stratification and the creation of belief-systems or frameworks supporting racist ideologies. Racist belief-systems organize and govern social relations between groups within the racialized social structure. Alterations in the racial frameworks that serve to collapse the social distance between Whites and non-whites (integration) will impact the structure of a racialized society, especially in terms of socioeconomic and political relationships. Bonilla-Silva (2001) contributes to sociologists' understanding of racial inequality with his structural analysis of the racialized social system and how its integrity is maintained through frameworks, belief-systems, common sense, and public discourse. Bonilla-Silva also documents the "new racism" with illustrations of how language is re-cast into seemingly innocuous non-racist terminology, while leaving the racial structure of White supremacy intact.

Racial ideologies are relied upon to make sense of racial inequality. Color-blind racism uses the same general racist schema, while supplying a new conceptual map using individual, social, and cultural explanations to describe inequality without dependence on racist terminology. Color-blind racism is essentially a racial ideology relied upon to justify a racialized social system that situates Whites in the dominant position. The discourse of color-blind racism avoids using bio-deterministic ideas of racial inequality (beliefs that Whites are genetically or biologically superior to non-whites as an outcome of human

evolution) employed to justify and defend Whites' dominant position in the racialized social system. A color-blind discourse attributes racial inequality to factors such as culture, individualism, work ethic, and moral character, terms that cannot be easily linked to race prejudice. According to Bonilla-Silva's thesis, the maintenance of racial inequality does not depend on prejudice but more on the defense of one's social location. Given this perspective, the fertility of subordinate groups can be re-stated in terms of culture or morality when the speaker implies race.

I find Bonilla-Silva's analysis most useful for explaining evidence of eugenic ideology in discourse about family planning when speakers avoid use of openly racist language. The primary method for influencing policy formulation is the effective communication of one's policy position. Let us suppose that political elites are aware they are dominant group members, do not believe that they hold racist views, nor do they seek to be associated with racial prejudice, especially in public discussions. How would they advocate for policies that appear to disadvantage subordinate racial groups (i.e. reductions in social welfare spending) while acknowledging their dominant group status or institutional affiliation, or when they speak to a constituency that holds some degree of prejudice? I suggest that elites rely upon stigma and stereotypes to communicate information about racial and ethnic minorities (and the poor in general) in clarifying a policy position without appearing to be elitist or racist.

I basically agree with the explanation of color-blind racism except that I view the non-racial explanations/justifications for racial inequality as race codes or

abstractions for ideologies of White racial superiority. However, I treat White racial superiority as a social fact, no longer needing to be directly stated but merely inferred with coded language, stereotypes, and cultural symbols implying the racial inferiority of non-whites. Race meanings are embedded in coded language as stereotypes, cultural symbols, and labels. I propose that the bio-deterministic idea of racial inferiority has remained essentially intact within the American psyche, enshrouded within a protective discourse of benign non-racist language evolving in concert with policies promoting racial integration after World War II. I examine this proposition in this dissertation.

In some disagreement with Bonilla-Silva, I assert that it is not simply that Whites are defending their position of privilege due to social location (whether or not motivated by race prejudice) but that Whites hold a general consensus of a socio-historically formed group identity that allows them to view themselves as inherently different from Blacks and other minorities. This consensus holds that Whites are in the dominant socioeconomic, political, and cultural position in U.S. society. The assumption of White racial superiority is so deeply entrenched in social relations that it has become a social fact no longer requiring scientific, historical, technological, or cultural explanations. The entrenchment of White racial superiority can be seen in the difficulty some scholars have found in disentangling the effects of political ideology, socioeconomic class, and special interests when studying the extent of White prejudice against minorities (Sniderman and Carmines, 1997; Iceland and Wilkes, 2004; Freeman, 2008; Carmines et al., 2011).

Matrix of Domination

Patricia Hill Collins (2000) presents an additional perspective in explaining fertility control policies leading to unequal outcomes for poor women of color that may not be guided by the extremes of eugenic ideology. In the paradigm put forward by Collins (2000) known as the Matrix of Domination, race, class, and gender are conceptualized as distinct and interdependent forms of oppression, situated along various axes inside a generalized matrix of power. Within this matrix, intersecting forms of power are organized along interrelated spheres of influence and control in the forms of structural, disciplinary, hegemonic, and interpersonal domains (Collins, 2000). An analysis of racist fertility control policies would center on how power impacts subordinate groups differently from dominant groups. At the macro level, structural domains serve to establish the parameters through which power is distributed within society at large. Bureaucracies serve a disciplinary function, providing the rules and rationale for organizing and regulating social actions. Oppression is managed at the meso level as institutions and organizations reproduce well-established structural forms of domination. In the hegemonic domain, culture also operates at the meso level to replicate world-views and social constructions of reality that legitimate forms of oppression. The interpersonal domain is a micro-level analysis of the ways in which oppression is experienced, recreated, and resisted through personal interactions with the other domains of power. Collins (2000) places emphasis on the interrelatedness of different forms of oppression and the multiplicative effects of their operation within structures of social inequality.

With respect to the legacy of intersecting oppressions faced by Black women, Dorothy Roberts (1997) illustrates the sociohistorical context framing the treatment of Black women's reproduction. During the period of chattel slavery, Black women's reproduction was encouraged as a means of providing an economic benefit to the slave owner. As Black women began to gain access to welfare benefits in the 1960s, their reproduction was discouraged on the basis that it represented an economic cost to the White middle-class (tax expenditures). Black motherhood was recast as deviant through embedded racist and cultural narratives that were communicated through the media in the form of stereotypes: jezebel, mammy, and welfare queen. Collins refers to these stereotypes as racist controlling-images. A primary focus of this dissertation seeks to clarify the ideologies relied upon in stigmatizing poor women of color and the regulation of their fertility. An intersectional analysis of power extends my analysis to include a study of how the majority group exerts power at various levels in society to maintain its dominance beyond the use of subtle forms of racist communication in policy debates about the fertility of women of color.

A Theory of Welfare Eugenics

I theorize that eugenic ideology serves to package the ideas of scientific, essentialist notions of race difference in a belief-system that insulates the core ideas of racial inferiority from progressive thinking about race into and beyond the civil rights era. The stigmatization of racial and ethnic minorities as being inferior to Whites is facilitated through stereotypes about minorities that justify systems of inequality (Link and Phelan, 2001). Eugenic ideology is a system for

maintaining the cultural meanings of racial inferiority rooted in essentialist notions of race difference. I propose that a theoretical perspective about the influence of eugenic ideology in family planning policy is lacking. A new theory is needed to explain political discourse and racism in family planning policy and to explain how coded racism is used by elites to frame an agenda that is very similar to eugenic-oriented policies in expected outcomes.

In this dissertation, I define coded racism as a re-articulation of racist eugenic ideology in the form of stereotypes, cultural symbols, and labeling to accomplish policy outcomes consistent with eugenic thought: fertility control of a subpopulation. Coded racism is used by political elites to defend against the claims of subordinate groups (lower socioeconomic groups, racial and ethnic minorities) seeking social welfare benefits. Subordinate groups are socially constructed as undeserving of these resources when failing to become fully socialized into the dominant culture. Political elites construct members of subordinate groups as deviants, thereby establishing procedures by which their social status may be repaired. I suggest that policy makers rely upon the use of coded racism when framing policies specifically targeting non-white welfare beneficiaries to avoid public accusations of racial prejudice and discrimination in family planning policy (Bonilla-Silva, 2006; Neubeck and Cazenave, 2001). I propose that stigmatization of non-white welfare recipients (using coded racism) as morally deviant and in need of fertility control is a re-articulation of eugenic ideology.

Ideology may become embedded during policy development at any phase in the process, including policy design, formulation, agenda setting, implementation, and consequences (Schneider and Ingram, 1993). I find a social-constructionist approach useful for describing how ideology is used to shape public policy. Political power is translated into policies that benefit powerful, positively constructed groups and ensure more “punitive, punishment-oriented” outcomes for weaker, negatively constructed groups (Schneider and Ingram, 1993 p.334). Stereotypes, cultural images, metaphors, euphemisms, and symbolic language are used to influence popular support for policy recommendations directed towards target populations (Henry and Sears, 2002). Through what Domke (2001) refers to as *associative-priming*, racial cues are used in political discourse to induce the public to form cognitive associations between race, ideology, and the issue being framed. Racial stereotypes and cultural symbols prime individuals to rely upon cognitively held perceptions of race when considering issues not specifically racial in nature, such as crime, poverty, or welfare (Daniels and Kitano, 1970). In this respect, stereotypes and race-associated euphemisms (i.e. gang-banger, dope-boy, or welfare queen) can be used to induce racial associations without resorting to openly racist language (van Dijk, 1983). The same process is used when constructing stereotypes about gender, socioeconomic status, age, and citizenship status. I present my theoretical perspective for welfare eugenics in the following generalized statements:

1. Whites possess a cognitive map developed socio-historically that contains the characteristics, privileges, and status of a dominant group identity and the social rules governing interaction with non-

white subordinate racial groups. A dominant group identity treats the traditions, values, norms, and culture of the dominant racial group as normative (van Dijk, 1993a, 1993b).

2. Whites possess a cognitive map for non-white subordinate group identity activated by racial and ethnic stereotypes, labels, and cultural symbols that reproduces inequality between dominant and subordinate groups when acted upon.

3. Powerful elites use coded racism in public discourse when attempting to influence popular opinion about policies that disadvantage minority groups. Coded racism appears in public communication as a re-articulation of eugenic ideology when the discourse is about the fertility of racial and ethnic minorities.

4. Coded racism indicates subtle or implied racist discourse, cultural symbols, labels, and stereotypes used to construct knowledge that stigmatizes racial and ethnic minorities as inferior to Whites.

5. Welfare eugenics (WE) describes the use of coded racism to stigmatize racial and ethnic minorities as socially inadequate and unfit to receive social welfare benefits. Under welfare eugenics, racial and ethnic minorities require state control of their fertility to eliminate chronic poverty and welfare dependence.

6. Federally funded family planning is a eugenically oriented program designed to control the fertility of poor racial and ethnic minorities to reduce public expenditures for social welfare programs believed to primarily benefit minorities.

7. A re-articulated eugenic ideology frames discourse about race and ethnicity in terms of social values, culture, personal morality, and individual character. Any public discourse referencing mainstream or traditional values as the normative type signifies

Whites as the dominant racial group. Any discourse about failure to assimilate into mainstream society or internalize traditional values and norms indicates non-white subordinate groups or socially deviant Whites.

In the next chapter, I explicate the data, methods of analysis, and interpretation used to study discourse appearing in congressional testimony and scientific papers about issues relating to family planning policy from the 1920s to the 1990s for evidence of embedded eugenic ideology.

Chapter 4: Research Design and Methods

Data Collection

I collected the data for this study from the ProQuest Congressional database website using a simple key word search for the following periods: Eugenics period – “Harry Laughlin;” Population Crisis period – “family planning.” I reviewed the title, table of contents, and appendixes of each document to determine if there was sufficient textual data for coding. In the case of documents collected for the eugenics periods, I purposefully selected testimony from Dr. Laughlin that appeared to contain a wide range of discussion about eugenics. I selected a total of 4 transcripts of testimony given by Dr. Laughlin. I supplemented my data with an additional 63 scientific papers, published between 1921 and 1932, on pure and applied eugenics to improve the variability of eugenic thought in the sample. For convenience, all of the documents collected (other than Laughlin's testimony) appeared in a bound volume of paper presentations of the Third International Congress of Eugenics held in 1932. I randomly sampled 6 documents on eugenics added to the 4 Laughlin transcripts for a total sample size of 10. Next, I selected the entire universe of documents containing transcripts of the congressional hearings on the “population crisis” resulting in a total of 95 witnesses providing congressional testimony during 28 hearings from 1965 to 1966. While sampling from the population crisis hearings, I purposefully selected 4 transcripts for analysis after 3 draws for a total sample of 15 transcripts. For the Welfare Reform period, I used a more focused search protocol. I sought specifically for transcripts from the main hearings on welfare reform held by the

House of Representatives 104th Congress (1995-1996), Ways and Means Committee. I used a keyword search for “welfare” resulting in 24 hearings. I reviewed summaries of the hearings, examining lists of witnesses, testimony subjects, statements, and discussion topics for indications that the testimony would provide data relating to my research question. I selected 11 hearings with 256 witnesses from which to draw my sample. I sampled 26 transcripts from the hearings on welfare reform.

Sampling Frame

I employed a purposeful stratified sampling strategy (Patton, 1990; Teddlie and Yu, 2007). In the first stage, I used a starting date of 2.22.2013 and added all digits separately: $2+2+2+2+0+1+3 = 1+2=3$ to identify which column of random numbers I would use to begin my sampling frame. Choosing the number 3, I selected the 3rd column in the table for a list of random numbers. I entered all transcripts into an excel spreadsheet with the following procedure: the first 63 articles in Decade of Eugenics, then the next 4 H.H. Laughlin transcripts (according to date), then the remaining transcripts from the other historical periods (according to date) and numbered each document with a corresponding random number beginning with the first number in the 3rd column moving down the table.

I totaled the number of documents for each period resulting in the following sample sizes for each period: eugenics period - 67, population crisis period - 95, and welfare reform period - 256. For the eugenics period I sampled approximately 10% of the 63 scientific articles and added that number to the 4

purposefully sampled transcripts of Harry H. Laughlin for a total sample size of 10 documents selected for coding. For each of the other two periods I selected approximately 10% of the total population for samples of 10 and 26 respectively. To begin the sampling process, all documents were arranged in a spreadsheet according to historical period and date. For the eugenics period, I began with the first document that had a random number with the last two digits ending in 06, for the population crisis period - 95 and welfare reform – the last three digits ending in 256. If no number was found, I rounded up until the next corresponding random number was located. I continued sampling every 10th document until I felt confident that saturation had been reached.

Testimony from the population crisis hearings did not provide enough data for coding and warranted a slight modification of my sampling procedure. I conducted a random sampling of 10 transcripts in two rounds each. I was not satisfied that I had achieved data saturation with the first two random draws. I randomly sampled an additional 8 transcripts and still felt that saturation of the data had not been achieved. I then purposefully selected 4 transcripts to satisfy my data requirements. From the 32 transcripts reviewed sampled from the population crisis hearings, I was able to code 15 that I believed provided sufficient data for a critical discourse analysis. The final sample size for each period was 10, 15, and 26 respectively (Table 4.2). I originally intended to sample 1 document from a wider range of witness types in an attempt to produce a sample representative of all the witnesses giving testimony. I later felt this approach was inappropriate, as I did not have a sufficient number of documents

to draw a genuinely random sample from each of the witness categories. I also believed that the planned sampling procedure would not provide any measurable increase in validity to my study. I therefore settled on the more simplified sampling strategy presented here.

Research Design and Method of Analysis

In this dissertation, I compare political discourse between the eugenics (1920-1932), population crisis (1965-1966), and welfare reform (1995-1996) periods to study the influence of eugenic ideology and stigmatization in the policy formation process extending some 75 years. A critical assessment of the social construction of sexual deviance for poor women of color follows, with a search for evidence of eugenic ideology in discourse about family planning by applying sociological theory and an intersectional lens to interpret results from a discourse analysis of text and talk. The theories discussed in chapter 3 provide a lens for understanding the different ways dominant groups may act to construct a social reality that justifies oppression of subordinated groups. Issues relating to immigration, crime, health, employment, poverty, and population growth entail some form of conflict over resource allocation and the distribution of power. Public debates conducted during the policy formation process serve as communicative events in which differing ideological perspectives are revealed. As rational actors, powerful elites attempt to direct the discussion towards political solutions that require a minimal loss of the power, resources, and privileges enjoyed by them. A critical analysis of political discourse provides a window for uncovering ideologies in social and public policies that reproduce

systems of oppression and domination. I integrate several methodological and multi-disciplinary approaches in conducting this study of eugenic ideology and family planning.

Critical discourse analysis is particularly effective for the research undertaken in this dissertation. A central focus of this study pays particular attention to the concepts of power, ideology, dominance, and oppression. Wodak and Meyer see critical discourse analysis (CDA):

[A]s being fundamentally interested in analysing opaque as well as transparent structural relationships of dominance, discrimination, power and control as manifested in language. In other words, CDA aims to investigate critically social inequality as it is expressed, constituted, legitimized, and so on, by language use (or in discourse). Most critical discourse analysts would thus endorse Habermas's claim that 'language is also a medium of domination and social force. It serves to legitimize relations of organized power. Insofar as the legitimizations of power relations...are not articulated...language is also ideological' (2008, p. 10).

The assumption, then, is that elites (representatives of dominant groups or institutions) will use language in ways that attempt to *hide* controversial ideologies reproducing structural inequality from the general public when *communicating with other elites*. Rahimi and Riasati (2011) present a more explicit understanding of the scope of a critical discourse approach in qualitative analysis: "CDA aims at examining the dominant culture in a society to discover the mechanisms that have made that culture dominant." The goal of CDA is to conduct a critical appraisal of structural forms of inequality in a given society (i.e.

sexism, classism, and racism) through an examination of language used in reproducing unequal social relations. Hegemonic domination of subordinates is communicated through ideologies that explain, rationalize, and justify social inequality. An analysis of the ideologies used to frame social inequality by dominant groups is also to some degree a study of the power relations undergirding forms of inequality. More precisely, the power to construct the knowledge that marginalizes subordinate groups is also the power to structure the social relations that reproduce their marginalization. A focus of this study is on the connection between ideology, power, and dominance and how they function within implicit forms of political discourse to reproduce inequality. Discourse analysis is a suitable approach for uncovering implied ideologies in political discourse.

Blommaert (2005) suggests that a study of language must consider a number of important factors when conducting discourse analysis: the meaning a user intends to communicate, the social setting or situation of the speech environment, the subtle variations in language, and intertextual subjectivity (meaning depends on context). Language users are also subject to a range of conceptual maps or repertoires, each with different social rules that constrain how language is used, and communication should be understood as occurring within a broader set of social systems whose various structures (i.e. a racialized or gendered hierarchy) must be acknowledged. A critical discourse analysis should move beyond a mere criticism of power inequality in social relations to a more in depth investigation of how power is used to structure social relations

...it should be an analysis of power effects, of the outcome of power, of what power does to people, groups, and societies, and of how this impact comes about. The deepest effect of power everywhere is inequality, as power differentiates and selects, includes and excludes...The focus will be on how language is an ingredient of power processes resulting in, and sustained by, forms of inequality, and how discourse can be or become a justifiable object of analysis, crucial to understanding wider aspects of power relations. (Blommaert, 2005 p. 1-2; Scollo, 2011)

Fairclough (1995) identifies a more direct pathway between discourse, power and how they are used to structure unequal relations. "The power to control discourse is seen as the power to sustain particular discursive practices with particular ideological investments in dominance over other alternative (including oppositional) practices." This perspective presupposes that social inequality does not generally form by happenstance. Systems of inequality are produced through socially constructed meaning attributed to difference (i.e. gender, racial, ethnic, religious, or class). When knowledge is created to justify dominance, it is often understood as hegemonic power (Park, 2005). Hegemony can be seen in the construction of social identities that rationalize social inequality and unequal difference. The general population does not normally recognize that ideology (as a knowledge or belief-system) provides the schema or repertoire upon which social identities are defined and given value. Identities such as majority/minority, dominant/subordinate, normative/other, and upper/lower, all rest upon knowledge systems or ideologies that form a constructed reality, usually taken for granted as being *real* without a recognition that social identities are created by powerful groups seeking to maintain their advantaged position.

Some prominent researchers using critical discourse analysis adopt a socio-cognitive approach in their investigations of how a study of discourse uncovers the influence of ideology in the reproduction of social inequality. Van Dijk (1993a, p. 254-255) outlines several key principles for critical discourse analysis that emphasize the significance of social cognition in reproducing social inequality:

- 1) "Social power is based on privileged access to socially valued resources, such as wealth, income, position status, force, group membership, education or knowledge."
- 2) "Power involves *control*, namely by (members of) one group over (those of) other groups. Such control may pertain to *action* and *cognition*: that is, a powerful group may limit the freedom of action of others, but also influence their minds...dominance may be enacted and reproduced by subtle, routine, everyday forms of text and talk that appear 'natural' and quite 'acceptable'."
- 3) "If the minds of the dominated can be influenced in such a way that they accept dominance, and act in the interests of the powerful out of their own free will, we use the term *hegemony* (Gramsci, 1971; Hall et al., 1977)."
- 4) "Power and dominance are usually organized and *institutionalized*...This social, political and cultural organization of dominance also implies a *hierarchy of power*: Some members of dominant groups and organizations have a special role in planning, decision-making and control over the relations and processes of the enactment of power...called the *power elites*."

Powerful elites use their advantaged position to construct knowledge that becomes the traditions, norms, values, and belief-systems forming the dominant culture in society. Racist, classist, and sexist ideologies provide the clues, rules for social interaction, and values upon which mental maps evolve that inform

social behavior functioning at the micro, meso, and macro levels in society. Mental maps are constructed with language containing explicit and implicit meanings about *others* (i.e. women, the poor, immigrants, and racial and ethnic minorities) that are context dependent; given the social rules governing the setting, speakers will determine whether explicit or implicit 'othering' is appropriate. Dominant group elites use language to activate socially formed attitudes and prejudices about *others* that are cognitively stored in mental maps to influence social behavior in ways that reproduce inequality (van Dijk, 1993b). The context of the communicative event determines how language is used and which map or repertoire the speaker will rely upon for rules governing their social discourse (van Dijk, 1993a, 2000). It is my goal in conducting a discourse analysis of text and talk about family planning to determine whether implicit references to eugenic ideology are present in communication as elites shape policies that curtail the fertility of poor (primarily) women of color.

Ruth Wodak (2001) builds upon the socio-cognitive approach by integrating the historical context in which a discourse is communicated. Background historical information surrounding the communicative events under analysis aids in understanding how popular discourses and the social behaviors associated with them change over time. Overt forms of racist behavior and discourse, acceptable during the Progressive Era (1880 to 1920), would not be appropriate in the 1990s. A discourse-historical method of discourse analysis is useful for my study, because I examine text and talk across time when attitudes about race, gender, and class are in transition. According to Wodak (2001), one of the

advantages of a discourse-historical analysis is the use of grand theories to ground the broader analysis and the incorporation of middle-range theories to investigate specific social contexts. For example, I frame my analysis within the worldview of eugenic ideology (a knowledge system premised on genetically and biologically predetermined social inequality) as a grand theory grounded in scientific racism. My analysis of the actual data (discourse from 1920 to 1996) is guided by middle-range theory (i.e. social-construction, coded racism, and intersectionality) in developing what I refer to as a theory of welfare eugenics, which is effectively an integration of grand and middle-range theories that guide my investigation of the data. Sociologists have developed different approaches for studying social problems over time, as reflected in the middle-range theories advanced to explain new and different problems appearing in society. The inclusion of “sociopolitical and historical contexts” along with the study of embedded discourse helps to triangulate data analysis by attempting to account for the dialogic shifts in language use (Wodak, 2001 p. 67).

I combine several approaches in qualitative data analysis to code, analyze, and interpret open (manifest) and hidden (latent) meaning in political communication. In communication, manifest content is “easily observable” such as a particular word or phrase (i.e. Blacks, women, immigrants, or illegal aliens) whose meaning is clearly understood by the recipient without requiring any interpretation. A communication is considered to be latent when the intended meaning of the speech act (written or spoken) is not readily apparent and must be inferred from a subjective interpretation. According to Potter and Levine-

Donnerstein, a distinction should be made when analyzing coded text for subjective interpretation:

If the locus of meaning is contained in a discrete element of the content, then, the content is manifest. If the locus of meaning is in the content but must be inferred by recognizing a pattern across elements, then this is the pattern form of latent content. And if the locus of meaning is regarded as resting primarily in the way people construct judgments from the content cues, then this is the projective form of latent content. (2009, p. 261)

The interpretive rule for discerning locus of meaning follows three basic procedures for determining manifest and latent (pattern or projective) forms of language use. No theory is required for interpreting manifest content. I apply the sociological and feminist theories discussed in chapter 3 to deductively interpret patterns and themes requiring a subjective interpretation. An inductive approach is more appropriate when latent patterns or themes are less clearly supported by existent theory. In such cases, where emerging patterns do not sufficiently satisfy a given theory's main concepts (latent projective), subjective interpretations will be made beginning deductively with weak theory and reasoning inductively towards strong theory (Potter and Levine-Donnerstein, 2009).

In this dissertation, I seek to answer a primary question: Is there evidence of eugenic ideology in political discourse over issues relating to family planning policy formation? To answer this question I developed initial codes for eugenic ideology from expert witness testimony, scientific papers on eugenics, and a review of the literature on the early development of the field of eugenics (Creswell, 2007; Maxwell, 2005). I used Atlas t.i., a software package, for

qualitative analysis to code all texts. I coded a sample of congressional testimony and scientific papers on eugenics to establish a baseline of eugenic constructs to be used in further coding of congressional testimony for evidence of eugenic ideology in hearings conducted from 1965 to 1966 and 1995 to 1996 (Denzin and Lincoln, 2000; Miles and Huberman, 1994). Next, I coded each transcript for broad themes developed a priori and from themes emerging during the coding process (Charmaz, 2006; Glaser and Strauss, 1967). I report the qualitative code structure developed for use in this study in table 4.1. The coding rules were applied when interpreting the manifest or latent meaning determined to be contained in the text (Potter and Levine-Donnerstein, 2009). I queried all texts sampled from the population crisis period (1965 to 1966) and welfare reform period (1995 to 1996) with a supercode created from all four eugenic code families (see table 4.1). I then conducted a discourse analysis, applying a theory of welfare eugenics for evidence of eugenic ideology appearing in the form of coded racism as stereotypes, cultural symbols, labeling, and stigma. I applied an intersectional analysis of the data to deepen my understanding of how oppression and domination may occur during the policy formation process (Collins, 1999). I present an outline of the methodology used in this dissertation, employing content (qualitative coding), discourse, and intersectional analyses of the data and applying a theory of welfare eugenics to interpret discourse about family planning policy.

Outline for Method of Data Analysis and Interpretation of Findings

Step 1. Content Analysis of Eugenic Ideology

- Qualitative Coding of Sampled Texts Using Atlas t.i. of Text Blocks, Phrases, and Words
 - Eugenic Period: 1920 to 1932
 - Expert Eugenic Witness Testimony from Dr. H. Laughlin (4 transcripts)
 - Scientific Paper Presentations on Eugenics (6 documents)
 - Population Crisis Period: 1965 to 1966
 - Congressional Hearings Witness Testimony (15 transcripts)
 - Welfare Reform Period: 1995 to 1996
 - Congressional Hearings Witness Testimony (26 transcripts)
 - Initial Codes Developed A Priori
 - Eugenic Literature Review
 - Scientific Racism
 - Bio-Determinism
 - Additional Codes Developed From Textual Analysis
 - Emergent Themes From Coding
 - Memos
 - Arrangement of Major Themes Into Code Families
 - Eugenic Principles
 - Policy Areas/Social Problems for Applying Eugenics
 - Specific Policy Tools for Applied Eugenics
 - Eugenic Population Classifications
 - Query of Sampled Texts for Evidence of Eugenic Ideology
 - All Four Eugenic Code Families Combined Into Supercode For Eugenic Ideology
 - Transcripts From Population Crisis and Welfare Reform Periods Queried for Eugenic Ideology
 - Query Results Contain Evidence of Eugenic Ideology For Further Analysis
 - Discourse Analysis for Manifest and Latent Content
 - Intersectional Analysis of Power and Domination
 - Interpretation of Findings Applying A Theory of Welfare Eugenics

Step 2. Discourse Analysis of Coded Text Applying Sociological Theory

- Interpretative Rules
 - Manifest Content
 - Overt Racist, Classist, or Sexist Language
 - No Interpretive Theory Required
 - Latent Content
 - Subjective Interpretation Required
- Latent Pattern: Identify patterns in use of words and phrases that suggest discrimination based on race, class, and feminist theories
- Latent Projective: Identify discourse intended to induce judgments to be made about poor racial and ethnic minorities
 - Select Text for Further Analysis

Step 3. Interpretation of Findings Applying A Theory of Welfare Eugenics

Analyze Discourse for Evidence of Coded Racism

Major Theoretical Constructs for Welfare Eugenics

White Racial Superiority

Essentialist Notions of Race Difference

Dominant Group Identity

Social Construction of Knowledge

Mental Maps For Communication of White Racial Superiority

Overt Racist Discourse For Communicating Eugenic Ideology:

Manifest Racism

Scientific Racism

Bio-Determinism

Coded Racist Discourse For Communicating Eugenic ideology:

Hidden Racism

Stereotypes

Labeling

Stigmatization

Main Theoretical Proposition: Reproduction of Inequality In Family Planning Policy

Planned Policy Outcomes:

Fertility Control of Poor Racial and Ethnic Minority Populations

Reduction in Welfare Expenditures

Step 4. Intersectional Analysis of Power and Domination: 1965 –1966 and 1995 –1996

Analyze Discourse for Reproduction of Social Inequality at Different Social Locations

Micro: Interpersonal Interactions of Social Relations

Meso: Hegemonic and Disciplinary Functions of Culture and Bureaucracies

Macro: State, Political and Large Institutional Effects of Laws, Regulations, and Policies

Step 5. Report Findings

Data Description

Prior studies have documented how groups targeted for specific policy initiatives are socially constructed as needing the regulations mandated by the policy recommendations. Schneider and Ingram (1993) have identified key elements of the policy process namely, “agenda setting, formulation, implementation, consequences, and policy design” that provide insight into how

the social construction of target populations reproduces power inequality in society. Populations are either positively constructed as deserving of favorable policy outcomes or negatively constructed for more “punitive, punishment-oriented policy” outcomes (Schneider and Ingram, 1993 p. 334).

For each of the three historical periods of congressional testimony, I analyze the political discourse used to set the policy agenda on fertility control of the poor. During each period, key issues were framed differently to advocate for the need for birth control legislation or reforms to existing policy. The periods selected are delineated by the issues raised in the political debate, references to the most critical problems in that era, and the rationalizations used to support fertility control as a political alternative for addressing those issues.

The first period I refer to as the eugenics period (1920 –1932). For this period, I draw from congressional testimony provided by Harry H. Laughlin, Director of the Eugenics Record Office, Department of Genetics of the Carnegie Institute. Dr. Laughlin served as the expert on eugenics for the Committee on Immigration and Naturalization for the U.S. House of Representatives (1921–1931), as Eugenics Associate of the Municipal Court of Chicago (1921–1930), as President of the American Eugenics Society (1927–1928), and as associate editor of the *Eugenical News* from 1916 to 1939 (Truman State University, 2012). In 1922, Dr. Laughlin published his Model Sterilization Law, providing expert opinion on eugenic sterilization to state legislators, courts, and administrators in some 30 states having sterilization laws. As a leading expert on eugenics, Dr. Laughlin testified extensively on the application of eugenics to inform a variety of social

and public policies. I supplement Dr. Laughlin's congressional testimony with a sample drawn from 63 scientific papers on theoretical and applied eugenics published between 1921 and 1932 and delivered at the Third International Congress on Eugenics in 1932. I include the research published by leading scholars on eugenics to provide a wider range of textual data in the sample. During the eugenics period, vital issues thought to require some measure of fertility control included immigration, poverty, criminality, public health, child welfare, and race hygiene.

I examine a second historical period designated as the population crisis period (1965 –1966). After the Second World War, concerns with global overpopulation led to the growth of a population movement in the United States. Wealthy philanthropists, foundations, and academic institutions promoted the view that global poverty was the contributing factor leading to international political instability. In 1964, President Lyndon Johnson announced that his administration was committed to eliminating poverty in this country. Sweeping legislation in civil rights, education, and medical care for the poor and elderly provided a policy window for the population lobby. Senator Ernest Gruening (D-Alaska), Chairman of the Subcommittee on Foreign Aid Expenditures, presided over hearings from June 1965 to February 1968 titled, "Population Crisis." The focus of the hearings was on the need for the United States to take an active role in formulating a strategy to reduce the threat of global overpopulation. In this dissertation, I sample testimony from the first year of the hearings conducted from June 1965 to June 1966.

Senator Gruening was a strong political ally in the birth control movement. In 1921, he attended the First American Birth Control Congress as a delegate along with Margaret Sanger. A Harvard-trained physician, Gruening was appointed in 1934 as head of the U.S. Division of Territories, where he supported U.S. funded birth control programs in Puerto Rico (Critchlow, 1999). The hearings were wholly dedicated to population control (both foreign and domestic) and were critical in laying the ideological groundwork for U.S. family planning policy. In 1967, family planning services were required under Title V of the Social Security Act (McFarlane and Meier, 2001). During this era, political debate was marked by appeals for a national birth control policy to remediate social problems relating to immigration, poverty, urban over-crowding, environmental resources, teen pregnancy, unwed mothers, and urban crime.

The third period in this study I call the welfare reform period (1995 –1996). In 1996, the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA), or “welfare reform,” was signed into law. Welfare reform represented a shift in public support for cash-assistance entitlement programs for the poor. The federal entitlement program Aid to Families with Dependent Children (AFDC) was replaced with Temporary Assistance to Needy Families (TANF) as a block grant to the states. Mandatory work requirements, child exclusion policies, enhanced child support enforcement, sanctions, and time limits were imposed on recipients under welfare reform (McFarlane and Meier, 2001; Smith, 2007). I examine the main hearings held by the 104th Congress on welfare reform conducted by the House of Representatives Subcommittee on Human

Resources of the Committee on Ways and Means from January 13, 1995, to
September 19, 1996.

Chapter 5: Eugenic Ideology and Policy Applications, 1920 – 1932: The Social Construction of White Racial Superiority

This chapter contains the report of my findings from a qualitative coding and discourse analysis of congressional testimony by eugenics expert Dr. Harry H. Laughlin (of the Eugenics Record Office) and of a sample of scientific papers presented at the Third International Congress of Eugenics in 1932. The discussions from the transcripts detail the essential features of eugenics both as a pure science and as a policy proscription. The field of eugenics is mainly concerned with the problem of human reproduction as a means of breeding into the population desirable genetic traits (such as intelligence) and breeding out of the human population certain undesirable characteristics (such as genetic abnormalities or feeble-mindedness). In table 5.1, I present descriptives from the qualitative coding of documents from the eugenic period. I report the findings by witness category, eugenic code family, and eugenic codes. My research design calls for the development of a baseline of codes representing eugenic ideology established both from the literature and through qualitative coding of documents sampled from the eugenics period. I use the coding results presented here to analyze data for evidence of eugenic ideology in congressional hearings reported elsewhere (chapters 6 and 7).

My analytical approach calls for a discourse analysis of witness testimony from Dr. Harry H. Laughlin, congressional expert on eugenics, supplemented with paper presentations from the 1932 Third International Congress on Eugenics. Dr. Laughlin, Director of the Eugenics Record Office, served as a

congressional expert on eugenics for the Committee on Immigration and Naturalization for the U.S. House of Representatives from 1921 to 1932. Policy makers seeking to formulate national policies relating to immigration, public health, poverty, and crime, actively sought Dr. Laughlin's testimony and expertise for over ten years. The scientific papers sampled were presented at the Third International Congress of Eugenics, held at the American Museum of Natural History in New York City from August 21 through 23 of 1932. The presentations were expected to summarize the advancements in the fields of theoretical and applied eugenics since the meeting of the Second International Congress of Eugenics in 1921. The papers delivered at the conference are organized under the following topic headings: anthropometric methods, tests; race amalgamation; education and eugenics, society and eugenics; positive and negative eugenics; selection, disease, and infertility; differential fecundity; and human genetics. I present an analysis of the way manifestly eugenic discourse is used to construct knowledge, identities, social relations, and social and public policy.

Eugenic ideology is categorized into four general code families: eugenic principles, eugenic policy areas, eugenic policy applications (applied eugenics), and eugenic population classifications (Table 5.1). The codes serve to organize dialogue containing eugenic ideology into four discrete categories: 1) when the speech is about eugenic principles, 2) a policy area or social problem in which a eugenic solution is proposed, 3) a specific policy tool for applied eugenics, or 4) the populations targeted for eugenics categorized according to one of the designated eugenic classifications for social inadequacy. I examined each

section of coded text for specific references to eugenic ideology and organized my findings according to major themes appearing under one of the eugenic code family headings. My coding technique involved the cross coding of text with multiple codes from different code families when appropriate. This method of coding permits the researcher to construct numerous query combinations designed to investigate inter-related constructs and themes appearing in the data that may lead to important theoretical insights (Charmaz, 2006; Maxwell, 2005). As a result of my cross coding technique, some overlap between codes and code families was unavoidable. I made the best estimate in assigning a family for texts coded with codes from multiple code families. I identified 268 quotations containing eugenic ideology. Here I present a selection of 14 passages containing eugenic ideology appearing in each of the four code families.

Eugenic Principles

The Discourse analyzed in this section contains statements that are substantiated with fundamental concepts of eugenic theory. According to Francis Galton, “[e]ugenics is the study of the agencies under social control that may improve or impair the racial qualities of future generations either physically or mentally” (quoted in Laughlin, 1934 p. iv). The “racial qualities” referred to by Galton are subject to the laws of inheritance and the transference of dominant and recessive genetic traits. Eugenics relies on the assumption that attributes basic human characteristics (i.e. physical, moral, and intellectual) to be largely determined by the influence of recessive genetic traits inherited from one’s parents (Davenport, 1911). The greater the proportion of defective ‘germ plasm’

transferred through reproduction, the greater the potential for human degeneracy (Davenport, 1910). Recessive genetic traits are believed to be the source of low intelligence, immorality, disease, mental and behavioral health problems, pauperism, and criminality (Guyer, 1916). In sum, from the perspective of eugenics, most of society's health and social problems are believed to be genetic in nature and can be efficiently solved through elimination of defective germ plasm from the population (Popenoe and Johnson, 1933).

Eugenic theory also claims that differences between biological races are expressions of the heritability of dominant and recessive genetic characteristics. These differences are thought to result in superior and inferior races. Accordingly, superior races make the greatest contributions to world civilization because they possess a higher level of intellectual and moral development (Grant, 1916; Stoddard, 1921). White racial superiority is a fundamental principle of eugenic ideology. The texts appearing in this section contain discourse about eugenic principles. The discussions analyzed here emphasize the importance placed on the eugenic benefit to society when considering social policies.

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“Europe as an Emigrant-Exporting Continent and the United States as an Immigrant-Receiving Nation, Hearings before the Committee on Immigration and Naturalization, House of representatives, 68th Congress, first session, March 8, 1924.” p. 1294.

Witness: Dr. Harry H. Laughlin, Eugenics Record Office of the Carnegie Institution of Washington.

“The United States has been at work for 300 years in establishing

its nationality. The colonial immigrants were racially quite homogeneous... They developed many settlements and maintained much interstate migration and nationwide mate selection, so that the American people achieved a distinctive nationality and race very early in its history. The result is that the American race, although of composite origin, has long since established its racial ideals for development by immigration and national eugenics.”

“The American people have advanced far enough in their history, have treasured traditions of law, government, and race for nearly 300 years, so that we are entitled to define an American race and to use the term in law and letters. The American race, then (omitting for the time being the descendants of persons who came to the United States involuntarily), is a race of white people who have fused into a national mosaic composed originally of European stocks (themselves mosaics), in rapidly descending proportion, as follows: Primarily, British, Irish, German, Scandinavian, French, and Dutch; secondarily, American Indian, Jewish, Spanish, Swiss, Italian, Austro-Hungarian, and Russian. These represent the body of the materials from which the American race was principally made, while a few scattered immigrants from all other nations have been incorporated in the making of the American race.”

Dr. Laughlin testifies that a national eugenic breeding program has been in operation in the United States for 300 years. According to Laughlin, Whites have been able to establish themselves as the dominant American racial type through a culture of eugenic breeding since the founding of this nation. First, Whites must be acknowledged as the normative type of American. This recognition should be codified into law and social practice and would establish the White population as the racial ideal type for breeding purposes. Immigration policies could then be devised to ensure that Whites would maintain their privileged status through the

continued practice of a national eugenics. Here we have several clearly described policy goals formulated according to eugenic principles: the construction, maintenance, and defense of Whites as the normative American racial type; the interweaving of White racial superiority, culture, and a racial standard for determining national ideals; and the suggestion that the dominant status of Whites should be afforded certain legal and institutionalized protection.

Laughlin discusses White racial superiority as a fundamental tenet of eugenic ideology, describing two steps in the social construction of an American race as racially White. First, the founding colonists are styled as “immigrants,” which places them in a more positive characterization than being referred to as colonizers who waged wars of extermination and genocide against the indigenous American Indian populations. Second, European culture is objectified through a recounting of the historicity of the American people and a discussion of the institutions that legitimate the establishment of European American culture as dominant (Berger and Luckman, 1966). The racialization process appears in the following quote, “[t]he American people have advanced far enough in their history, have treasured traditions of law, government, and race for nearly 300 years, so that we are entitled to define an American race and to use the term in law and letters.”

Laughlin also presents the categories of European ethnic groups (excepting American Indians) that overtime became racialized as White. “Primarily, British, Irish, German, Scandinavian, French, and Dutch; secondarily, American Indian, Jewish, Spanish, Swiss, Italian, Austro-Hungarian, and Russian.” One of the four

basic tenets of eugenic ideology is White racial superiority. In this passage, we have a discussion of the social construction of the American Race, acknowledged to be of a “composite origin” of European immigrants (excepting American Indians). Laughlin implies a second component of eugenic ideology (race hygiene) that will enable the American race to retain its White racial identity through immigration policy and a program of national eugenics.

From this brief discussion, we see the sociohistorical process of how the racial category of ‘White’ was created, occupied, and transformed from this nation’s colonial origins. The importance of American traditional values and culture being linked to one’s social location can be understood as a racial project (Omi and Winant, 1994). The ideology of *Americanism* is imbued with racial meaning. The testimony shows how American culture, traditions, and norms were racialized and helps to explain the reason whiteness is treated as normative. Here we also see a rationalization for the formation of a racial state situating Whites at the top of a racial hierarchy as the dominant American race. The speaker chooses to omit mentioning the possibility of Blacks being categorized for inclusion in the American race. According to eugenic theory, Blacks are considered to contain a defective germ plasm that would taint White racial purity, reversing the 300 years invested in the making of the White race in the United States.

The next two texts discuss fundamental eugenic principles on social inequality and the heritability of intelligence. Eugenicists believe that inequality is a social fact according to the distribution of biological and genetic factors in the

breeding population. Francis Galton (1869) proposed the idea that human evolution is a function of the transmissibility of human traits and characteristics according to the quality of the germ plasm. Human populations that make significant contributions to civilization in the areas of technology, historical progress, and culture do so because of superior genetic material and intelligence (Stoddard, 1921). According to the principles of eugenics, the preeminence of European culture and civilization (in comparison to more primitive people) is evidence of a higher degree of 'fitness' for reproduction. Social Darwinists adapted Galton's theories to explain social inequality in terms of biology based on the presupposed relationship between family size, level of intelligence, and the distribution of wealth (Leonard, 2005b).

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"A Discussion of Sir Bernard Mallet's Paper on "The Reduction of the Fecundity of the Socially Inadequate." Scientific Papers of the Third International Congress of Eugenics, August 21– 23, 1932. p. 369.

E. S. Gosney, President, Human Betterment Foundation, Pasadena, California.

"Poverty in this country is little proof of deficiency in mental endowments. On the contrary it is often a material stimulant to effort, and to ultimate success. Many of our most prominent and successful citizens have profited by the stimulant of poverty in their youth. The "fit" youth will succeed anywhere. It is the unfit youth that is dangerous to the state and to posterity. The intelligent, successful, educated citizens will control the number of their offspring to suit themselves. We hope that in time it will become popular and fashionable for such parents to have four or more children. It is the unfit that is dangerous to civilization. The real problem is to prevent their inferior posterity from deteriorating the race."

Medical Professional

“Selective Sterilization for Race Culture.” Scientific Papers of the Third International Congress of Eugenics, August 21– 23, 1932. p. 207.

Dr. Theodore R. Robie, Essex County Mental Hygiene Clinic, Cedar Grove, N. J.

“[T]he situation should convince anyone that if we go on propagating according to the rules in force at present, there must result a decrease in the quality of our racial stock. The reason for this lies in the fact that the lowered birth rate centers around the more intelligent portion of the population, while the inferior and mentally defective portions of the population are continuing to propagate at the same rapid rate as formerly. In fact studies have shown only too graphically that the super intellectual group per se is not propagating fast enough to maintain itself, while the former is multiplying itself almost threefold.”

Here we have an interesting argument about the causes of poverty being related to the eugenic principles of reproductive fitness. These two selections both relate intelligence to fitness or superiority. On the one hand, fit populations are more intelligent, successful, and limit their family size according to their wishes. Inferior or unfit populations are unable to control their reproduction and are a threat to society because they supply an increasingly unintelligent number of progeny into the breeding population. The more intelligent and superior families are encouraged to have larger families, while the less intelligent and inferior groups are in need of fertility control measures for the benefit of society.

In the early 20th century, one of the concerns was the growing rate of poverty among newly arriving European immigrants. Popular opinion attributed poverty to an individual lack of character development and intelligence. Eugenicists

believed that morals and intelligence were genetically driven. Presented in this passage is a view that individuals with a higher quality of 'germ plasm' will be able to rise above poverty because they are genetically superior, linking poverty with intelligence in this argument. This perspective establishes early views of the poor as being somehow less intelligent than the wealthy, a perception that provides some theoretical support for the concept of meritocracy and avoids any discussion of structural inequality as an explanation for impoverishment. The argument follows a logic suggesting that the poor will not be able to overcome poverty because of defective germ plasm, which essentially causes them to be less intelligent and moral. As a result, unfit populations should have their fertility controlled as central component of antipoverty policies and to avoid a degeneration of the race. Eugenists also believed that the lower classes were inherently less capable of limiting their fertility, which could lead to overpopulation and result in social, economic, and political instability.

In this passage, the influence of Social Darwinism is expressed in the following statement: "The intelligent, successful, educated citizens will control the number of their offspring to suit themselves. We hope that in time it will become popular and fashionable for such parents to have four or more children." Proponents of Social Darwinism believed that natural selection would eventually produce a wealthier class of intelligent elites who also exhibited a greater control over their fertility to maintain a higher standard of living (Aldrich, 1975; Leonard, 2005b). The differential fecundity of the poor was understood as socially undesirable due to the introduction of defective genetic material into the breeding

population in greater proportion than the upper classes. The fertility of the poor is framed as a threat to society which ultimately undermines the social location of the wealthier class. The speaker advocates for the wealthy to increase their family size because of their perceived contribution of superior germ plasm to the breeding stock, while the poor are targeted for fertility control because their fertility is a threat to society. This passage reflects early concerns over the class based differences in fecundity and establishes fertility control of the poor as a central tenet of eugenics.

Eugenic Policy Areas/Social Problems

A basic assumption of eugenic theory presupposes that most social problems are caused by the effects of defective genetic material in the population. Defective genes explain socioeconomic inequality, violations of social norms, degenerative and communicable disease, under education, criminal behavior, and out of wedlock births (Laughlin, 1920, 1922). Under this view, almost any social issue can be addressed through a controlled breeding process designed to eliminate genetic defects. The inherent class bias when applying a eugenic interpretation to social problems provides elites with a justification to implement policy initiatives that do not entail adjustments to structural inequality as a potential policy alternative. A eugenic orientation to policy formation frames social problems in terms requiring a eugenic solution.

Eugenic ideology's racist framework also leads to interpretations of social issues that may potentially threaten the status of Whites as requiring a eugenic response. The racial and ethnic composition of the U.S. can be understood as a

major concern for elites seeking to maintain the White social dominance. Eugenics is well-suited for issues concerning population demographics such as poverty rate, urban density, nationality, language, culture, crime rate, and differential fertility. Eugenicists would naturally see changing population characteristics that portend a loss of ascendancy for racial superiority as being ripe for eugenic policies that reduce the size of a growing minority population. The texts analyzed in this section contain discourse about social problems that are outlined for eugenic policies. Several themes are presented: a competition between groups over the forming of a dominant racial consciousness and culture; the threat to the social and political stability of the country from immigration and race-mixing; and the problem of marriageability for upper class women.

Foundation/Institute/Center

“Europe as an Emigrant-Exporting Continent and the United States as an Immigrant-Receiving Nation, Hearings before the Committee on Immigration and Naturalization, House of representatives, 68th Congress, first session, March 8, 1924.” p. 1306.

Witness: Dr. Harry H. Laughlin, Eugenics Record Office of the Carnegie Institution of Washington.

“It has been assumed that there is not an American race, but the alien groups in the country have a race consciousness of their own, and feel that if it is a free-for-all contest in making the American race, their own particular proportion of race, culture, and ideals may quite properly seek to be a large factor... While all of these interests, pro and con, have immediate economic and racial considerations, the larger consideration is the ultimate effect of the immigration policy on the racial composition and the physical, mental, and temperamental qualities of the American people.”

Social Welfare/Public Health Agency

“Virginia’s Effort to Preserve Racial Integrity.” Scientific Papers of the Third International Congress of Eugenics, August 21 – 23, 1932. p. 107.

Dr. W. A. Plecker, Bureau of Vital Statistics, Richmond, Virginia.

“The clouds, however, in our homeland are not wholly black but have their golden border. The subject has been studied from all angles and in all lands. The public has in recent years shown an interest in learning the facts, and in considering the means, if possible, of saving the dominant race of America from being submerged in the rising flood of mongrelization.”

In this section, immigration and race-mixing are portrayed as policy areas ripe for eugenic policies. The central idea is continued with the view that Whites are the privileged or preferred American race whose culture and ideals must be defended against threat. In the first passage, we see the involvement of the state in creating a racialized social system through federal immigration policy. The concern is that unassimilable races and cultures (labeled as ‘alien’) would threaten the dominance of the *native* White population. Under eugenic ideology, physical, psychological, behavioral, social, or racial constructions of human difference are all grounded with a biological and genetic basis. Under this perspective, certain racial or ethnic groups deemed to possess defective germ plasm would be excluded from entering the U.S. in an effort to promote White racial superiority as a state policy.

Eugenic ideology provides the logic supporting immigration restrictions for populations believed to be so culturally different that their assimilation is characterized as a threat to society. I interpret the motive to construct an

idealized White American race as a racial project that would be implemented through proposed immigration policies (Omi and Winant, 1994). The importance of assimilation to the maintenance of White racial superiority is a key theme expressed in this excerpt. Once the American race is established as dominant, conceptualized as racially White, whose traditions, values, and culture are recognized as normative, then immigration policy (informed by eugenic ideology) would function to maintain the dominance of Whites. In this testimony, eugenic ideology influences racial formation through proposed immigration restrictions using racial and cultural assimilation as a policy objective (Omi and Winant, 1994).

In the second passage, the threat to White purity through miscegenation is the major issue raised. Blacks are considered to possess a racial taint that adulterates the purity of whiteness, leading to racial degeneration. The witness advocates for public support in promoting legislation that would outlaw race-mixing to preserve the genetic and biological superiority of Whites. Whites are clearly recognized as the dominant American race by advocates of eugenics. According to eugenic ideology, the logic of White racial superiority is dependent on the supposed inferiority of unassimilable races such as Blacks. Whites are deemed to be in the dominant social position because they are intellectually, culturally, and morally superior. Therefore, social dominance can only be preserved through policies that institutionalize the privileges and status of Whites. The view that Blacks and other so-called inferior races carried a

defective germ plasm that would taint White purity sheds light on the obsession that southern segregationists displayed in promoting anti-miscegenation laws.

Academic

“Birth Rates of Coeducational Graduates.” *Scientific Papers of the Third International Congress of Eugenics, August 21–23, 1932.* p. 401.

Mrs. Caroline H. Robinson, Swarthmore, Pennsylvania.

“On the other hand, the highly intelligent women when they marry are really prolific and moderate wealth is perhaps favorable in both sexes to both matrimony and progeny. It occurs to me that the most direct aid to eugenics open to a college for women would be for it to appoint a psychologist to labor with all the high ranking students. He should study and report on each individual as to the likelihood of her marrying, and if it is unlikely should recommend any corrective measures that may be developed. Say not that there are no such measures. A college is in a position to arrange it that its girls should not spend their summers, as now they often do, in places containing ten girls to every young man, and also in places which suggest to both men and girls that a wife is an ornament to be supported rather than a hardworking partner. Since grain was first sown in ground by the women of the tribe, women have usually done the arduous work of this world, “from sun to sun . . . never done,” while men were making many of the military, artistic and scientific advances. It is still the same old world, and girls had better make choice: will they reconcile themselves to working harder than men both before and after marriage, or will they weakly commit race suicide? A girl of hardworking economic views cheerfully held, with slight savings of her own earmarked to buy the furniture, might expect to increase the number of her suitors. Honor students, if only they can be persuaded to marry sound men early, would, it seems, have very large families, as families run among the educated classes.”

Galton (1869) saw marriage as an important institution for implementing eugenically informed social policies. The text above describes the problem of reproduction in terms of class. Here, women from wealthier families are encouraged to marry and reproduce many offspring to promote the growth and stability of the upper class. Eugenicists believe that the upper classes represent a higher grade of breeding stock and produce an intelligent class of superior families. Failure of the wealthy to reproduce through marriage and controlled mating is characterized as “race suicide” for the upper class, while the successful reproduction of inferior groups (i.e. poor, non-whites) is considered the same. The eugenic beliefs about the centrality of women to maintain the purity of the upper class carries racial overtones as well.

A strong emphasis is placed on a subordinate gender role for women who are encouraged to focus on issues of marriage, children, and home making, in spite of being college educated and from wealthy backgrounds. This is the normative type of social motherhood prescribed for affluent White women, and it became the standard gender role for comparing women from other social classes and minority groups (Collins, 1999). However, only the affluent White mother is encouraged to produce many offspring, with a recommendation that psychologist assist in developing an institutionalized approach to supporting motherhood for this class of mother. Since the upper class in the early 20th century is conceivably majority White, class becomes a proxy for race. Therefore, class position and the dominance of Whites as a racialized group are both predicated on the belief in White purity.

Eugenic Policy Applications (Specific Policy Tool for Applied Eugenics)

Applied eugenics focuses on the control of the genetic and biological factors that produce superior and inferior individuals. The problem for eugenicists is twofold: 1) the prevention of human degeneration from the reproduction of individuals possessing defective genetic material and 2) the improvement of the population by promoting proper mating and reproduction of superior individuals. Four primary strategies are employed in the application of eugenics in modifying human population characteristics: contraception, sterilization, selection, and segregation (Popenoe and Johnson, 1933). Contraception is often employed to provide eugenically classified 'fit' (and married) mothers the proper time between pregnancies to recuperate and to reduce infant mortality. Sterilization, on the other hand is advocated for the 'unfit' (both men and women) who are believed to carry genetic traits that produce various diseases, diminish intelligence, induce immorality and criminal behavior, increase the social and economic cost of custodial care, and transfer its degenerative effects to future generations. Segregation, like sterilization, is designed to reduce the potential for unfit individuals to reproduce with healthier persons by limiting contact between fit and unfit populations. Historically, American Indians, Asians, Blacks, and Latinos have borne the brunt of eugenic segregation policies in housing, employment, health care, education, and laws regarding marriage due to a *theorized* threat to White purity. Mate selection is a form of positive eugenics where marriages are between fit individuals, and their progeny are likely to improve the population.

The following transcripts contain references to the use of applied eugenics in social and public policy.

Foundation/Institute/Center

“The Eugenic Aspects of Deportation, Hearings before the Committee on Immigration and Naturalization, House of Representatives, 70th Congress,

first session, February 21, 1928.” p. 19.

Witness: Dr. Harry H. Laughlin, Eugenics Record Office of the Carnegie Institution of Washington.

Question: “May I ask right there, is it not true that the upper classes are subjected constantly to the tendency to have very small families?”

Laughlin: Yes, sir; and that is a matter of differential fecundity that calls for still another study. The time will come when the several States, rather than the Federal Government, in making marriage laws, and the people in building up their customs, will have to demand fit mating and high fertility from the classes who are better endowed physically, mentally, and morally by heredity, and to prevent, either by segregation or sterilization or otherwise, the reproduction by the more degenerate classes. That is the job of the biological control of population, and immigration, of course, is one of the three great factors and the only one the Federal Government can now use effectively. Immigration control is the greatest instrument which the Federal Government can use in promoting race conservation of the Nation.”

The major concern discussed is the problem of “differential fecundity.” Dr. Laughlin testified that census data showed immigrants (primarily from southern and eastern Europe) and the lower classes in general had higher birth rates than the upper classes of so-called *native* White Americans. According to eugenic

ideology, wealth and intelligence are positively related. The upper classes are described as being physically, mentally, and morally superior to the “more degenerate classes.” If left unchecked, the reproduction of these degenerate classes would undermine the existing social order and introduce a genetic taint that would negatively impact the process of human evolution.

The notion that the population can be biologically controlled is an essential belief within eugenic ideology. The ultimate goal for applied eugenics is to promote the reproduction of the more fit and inhibit those individuals considered less fit from reproducing. In this selection, the witness identifies policy tools that can be implemented to reduce the distribution of defective genes within the breeding population. The main fear is that the differential fecundity of the lower class (and inferior racial or ethnic groups) will lead to a devolution of positive genetic traits in the human population. A degeneration in the U.S. population is predicted to occur without the necessary policies restricting the reproductive behavior of both upper and lower classes. Four specific applications of eugenic theory are indicated in this text: immigration control, marriage restriction, social segregation, and sterilization. The applications of these policy tools are designed to maintain the dominance of the more affluent Whites through a primary component of eugenic ideology known as race hygiene, which aims to preserve whiteness from being tainted by inferior or defective genetic material.

Immigration control is touted as “the greatest instrument which the Federal Government can use in promoting race conservation of the Nation.” The proposed immigration restrictions are designed to protect the American

population from hereditary forms of degeneracy, referred to as social inadequacy (see table 5.2). Dr. Laughlin and other leaders were concerned that immigrant-exporting nations were 'dumping' their lower class populations, people believed to carry traits (i.e. feeble-mindedness, insanity, criminals, and those with communicable disease) that would degenerate the U.S. population. Immigrants from Asia, eastern Europe, and southern Europe were thought to be less assimilable because they were believed to be racially inferior to the founding colonial stock of northern and western Europe. It was also believed that these ethnic groups had a greater preponderance of undesirable genetic traits, since poverty was considered to be an indication of low intelligence and human degeneracy.

Immigration policies sought to prevent undesirables from entering the U.S. by strengthening the type of inspections conducted at Ellis Island, including intelligence testing and examination by a specialist trained in eugenics for evidence of degeneracy and social inadequacy. The objective is to reduce the cost of institutionalizing immigrants for all types of inadequacy. Dr. Laughlin advocated for the adoption of a passport system in the home country of origin that required foreign officials to verify the health, moral character, and mental condition of the prospective immigrant so that if they became socially inadequate they could more easily be deported (Laughlin, 1920, 1922).

Proposals for implementing marriage restrictions were based on the view that the European immigrants, rural Blacks, and the lower class in general, were marrying at earlier ages than the overwhelmingly White upper class. As a result,

earlier marriages lead to larger families and the potential to spread defective genes among an ever-increasing lower class. Eugenacists believed that the less intelligent were poorly educated and out populating the wealthier classes who voluntarily practiced birth control and produced smaller families. It was believed that raising the minimum age for marriage to 16 with consent and 18 without would reduce the capability of the uneducated population to producing eugenically inferior children. Other recommendations suggested the establishment of waiting periods between the application for marriage and the granting of a license to reduce marriages based on the desire for immediate sexual gratification and without allowing for the gathering of information regarding infectious disease, previous marriage, or misrepresentation of age. Eugenacists also suggested that marriages between 2nd and 3rd cousins (to reduce in-breeding), the insane, and the feeble-minded should be prohibited to avoid the dysgenic effects on the breeding population (Popenoe and Johnson, 1933).

Segregation is a policy for socially controlling the reproduction of degenerative classes. Since eugenic ideology holds that most social problems are attributable to Mendelian single-gene theory (the existence of dominant and recessive genetic traits explaining human degeneracy) the common solution is to segregate populations according to eugenic classification schemes (see table 5.2). One goal of segregation is to treat defective germ plasm as a contagion to be isolated and eliminated from the breeding population. Applied eugenics appealed to elites who advocated for a scientific management of the gene pool to keep the upper classes from being degenerated by the inferior germ plasm of the

lower class. The concept of social motherhood has a central role in the policy of social segregation.

The purpose for social and racial segregation was to ensure that women from the upper class were not mating with men from lower classes and so-called “inferior races,” because the result would undermine the superiority of the upper classes. The more affluent class tended to maintain themselves because of the purity of the women from the upper classes who only mated with men of the same racial and social background as themselves. Women from the lower classes and the so-called “inferior races” tended to mate with people from the dominant or upper races. The result was considered to be a ‘breeding up’ of lower class women but a degeneration of the upper class when women from higher social backgrounds mated with men from the lower class (and inferior races). “The consequence is that the perpetuity of a race depends upon the virtue of its women...the upper levels are always recruited by the mothers of the upper class” (Laughlin, 1928 p.19).

Eugenic sterilization is a more drastic and permanent solution to weed out genetic traits for human degeneracy that could find their way into the upper classes. The idea of “sterilization” suggests that the affected populations are impure. The racial and class dominance of Whites is predicated on the belief in White purity. The upper class is considered to be of superior intellect, culture, and morals, which are desired characteristics for the advancement of civilization and the stability of the existing racialized social order. Eugenic sterilization carries both a race and class bias against the poor and people of color because

its ultimate goal, as described in the transcript above, is to “prevent...the reproduction [of] the more degenerate classes.” Social inadequacy also presents a cost of care issue for the states, and elites sought scientific evidence for policies that would help control costs for their custodial care. A national eugenics program was seen as a long-term policy for eradicating human degeneracy from the U.S. breeding population and to provide an efficient means of scientifically managing defective germ plasm.

Academic

“The Genetic Effects of War in Hungary.” Scientific Papers of the Third International Congress of Eugenics, August 21– 23, 1932. p. 252.

Dr. Theodore Szal, Budapest, Hungary.

“For instance, even the United States of North America, which is so sparsely populated compared with Europe (14 inhabitants per km) protects the Anglo-Saxon race forming the majority of its population. In its new immigration law it adheres to the principle of ‘the preferred race’ and places a strict limit upon the immigration of undesired peoples.”

In 1920, Dr. Laughlin testified before the Committee on Immigration and Naturalization, claiming that hereditary material was polluting the breeding population as a result of immigration policies neglecting the degenerative effect of socially inadequate immigrants, primarily from eastern and southern Europe (especially Italians and Russian Jews). He conducted research using U.S. Census data and surveys on the number of institutionalized foreign-born persons to determine the cost of caring for social inadequates borne by U.S. taxpayers. Laughlin’s research was instrumental in the drafting of the Immigration Restriction Act of 1924 that created quotas of 2 percent for each nationality

based on their number in the U.S. population according to the 1890 census. The restrictions favored northern and western Europeans (Anglo-Saxons) who were immigrating in large numbers at that time (Laughlin, 1924). The influence of eugenic ideology on fears of hereditary degeneration, institutionalized with immigration policy, contributed to the social construction of an American cultural identity, an identity that is racially White and ethnically either northern or western European (i.e. British, Irish, German, Scandinavian, French, and Dutch).

In this selection, the witness characterizes immigration law as a tool for privileging and protecting the dominant White population as “the preferred race.” The “undesired” populations are considered to have defective genetic material or germ plasm believed to have a degenerative effect on human intelligence, morals, and health. Immigration policy is openly applied as a racial project in the 1920s. White racial superiority is not just a racist ideology, but a legal franchise granted to maintain the dominance of Whites as a racial group. Immigration restrictions placed on specific ethnic groups exemplifies how eugenic ideology and systemic racism are embedded in the very fabric of U.S. social and public policy during this era. I suggest that this obsession with creating an idealized American race comprised of a select group of European ethnics is a major factor producing structural and social psychological forms of U.S. racism since the beginning of the 20th century. In this respect, systemic racism embedded in social policy reinforces the maintenance of White racial superiority and dominance.

Foundation/Institute/Center

“Europe as an Emigrant-Exporting Continent and the United States

as an Immigrant-Receiving Nation, Hearings before the Committee on Immigration and Naturalization, House of representatives, 68th Congress, first session, March 8, 1924.” p. 1297.

Witness: Dr. Harry H. Laughlin, Eugenics Record Office of the Carnegie Institution of Washington.

“There is a continual succession of dominant strains or family stocks within a given population. A strain represented by 5 per cent today in subsequent generations may represent 90 per cent of the population of a given territory, while the dominant strain of today may die out completely or almost in subsequent generations or centuries.”

“The nation, in setting an ideal in race and family qualities, can work by law and custom toward this ideal, and properly controlled immigration is one of the greatest factors. If the American Nation decides that it is still unmade as a people, then it might well throw open the doors and admit all comers, but if it decides that we have national ideals worth saving, not only in national tradition and individual quality, but also by racial ingredients, the Nation must exercise stricter control over immigration. This is a critical period in American history. We can continue to be American, to recruit and to develop our racial qualities, or we can allow ourselves to be supplanted by other racial stocks. The individual standard for immigrants must always be high, and, for would-be immigrants of blood distantly related to the average American, the standard must call for talent of an especially high order, to compensate for distance in blood. Superior stock is the ideal. From the international point of view, international friendship and close cultural and commercial contacts are entirely compatible with the development of our own race and culture along those lines which lead to our own ideals.”

Eugenic ideology provides the context for organizing and structuring social, cultural, and racial hierarchy. Applied eugenics provides a set of policy tools that

maintain the system of inequality according to the principle of the inherent inequality of races. Immigration policy accomplishes several goals in the formation of a racialized state: 1) The creation of a dominant American race (labeled White) comprised of northern and eastern European stocks who share historical, cultural, and social affinity with the founding colonists; 2) the privileging of the traditions, values, and norms of the dominant American race; 3) the development of a theoretical frame explaining human degeneration (i.e. intellectual, moral, and health) and racial inequality in terms of genetic and biological factors manageable through controlled reproduction; 4) the establishment of a criterion or standard for ascertaining the potential for assimilating less closely related racial or ethnic groups; 5) and the formation and implementation of social policies that institutionalize and replicate the privileging and dominance of a White American race.

In this selection, the Dr. Laughlin speaks consistently about the need to for legislators to commit to the establishment of the U.S. as a racialized state with references to a national “ideal in race,” “racial ingredients,” or to recruit and develop “our racial qualities” and to the development of “our own race.” The idealized American racial state is to be organized through “law and custom,” “national tradition,” and “culture.” Laughlin provides insight into the sociohistorical process by which American culture, traditions, values, and social norms became embedded with White racism. Laughlin’s use of the term *American* applies exclusively to the United States and does not extend to the various racial and ethnic groups living in Central and South America. Immigration restrictions

placed on nationalities thought to be less desirable for assimilation into the American race is touted as “one of the greatest factors” for maintaining the eugenic ideal of a dominant White American race.

Here again, we can see immigration policy is considered to be an important mechanism for the social and legal construction of an idealized American racial type. Culture, tradition, and national ideals are all contextualized within the concept of race. Though not mentioned specifically in this excerpt, White descendants of the colonial founders are seen as the dominant racial group. We are able to see in this selection some of the process of establishing White racial superiority as a social fact. Immigration policy is used to defend against racial stocks of “distant blood,” described as potential supplanters to the founding White population. Certain immigrant groups are constructed as racial, biological, and genetic threats to the socially constructed White American race. The application of eugenic ideology in shaping restrictive immigration legislation helped to institutionalize racial and ethnic prejudice in U.S. social and public policy.

Medical Professional

“Selective Sterilization for Race Culture.” Scientific Papers of the Third International Congress of Eugenics, August 21–23, 1932. p. 206.

Dr. Theodore R. Robie, Essex County Mental Hygiene Clinic, Cedar Grove, N. J.

“It is recognized that the use of contraceptive methods by the intelligent portion of the population is improving the physical and mental caliber of the individuals born into this group because of the better physique of the mother who undergoes pregnancy less frequently than was the

case in previous generations. But it is also recognized that it is this intelligent portion of the population that is having fewer children than in previous generations. Because of the fact that the unintelligent portion of the population are continuing to propagate at the same rapid rate as formerly (which means they will increase in proportion to the population at large) and since they cannot be brought to use contraceptive methods because of ignorance and disinterest, it becomes evident that we need sterilization (of defectives) as a measure for protecting and perpetuating the human betterment brought about through the improvement wrought in the intelligent portion.”

Dr. Robie presents an argument that emphasizes the concept of social motherhood in maintaining social dominance and inequality (Collins, 1999). The reproductive behavior of upper class women is an important site for reproducing class difference. According to eugenic beliefs, chronic poverty has a genetic basis with the heritability of intelligence. The upper class are believed to possess and pass on superior germ plasm engage in reproductive practices that result in the birth of intellectually superior individuals who are better able to acquire wealth and garner a higher standard of living. As a consequence, their fertility is framed as a social good to be encouraged. The essential gender role for more affluent women is to breed upper class children for males of the same status and social background. Conversely, the ranks of the lower class are filled with a higher proportion of mental defectives of lower intelligence who threaten the position of the upper class from overpopulation and degeneracy. Fertility and reproduction are central to the beliefs of eugenic ideology. Most of the discussion about eugenic policies targets women for fertility control measures. The social value of women is constructed in terms of their reproductive capacity, based on female

gender roles that place their sexual practices under greater surveillance in a male-dominated society.

Advocates of eugenics suggest that high birth rates are evidence of lower intelligence, except in the case of the upper class, who are encouraged to have large families because they are considered to have more desirable human qualities. According to eugenic ideology, intelligence is inheritable. The more intelligent have a biological and genetic superiority that should be protected and cultivated for the improvement of society. Similarly, the less intelligent and unintelligent are characterized as “defectives” and their fertility is deemed a threat to society. Clearly, the idea that differential fertility can be explained by culture and intelligence is an important belief of eugenic ideology. Eugenic sterilization is an initiative for maintaining the dominance of an intelligent class over populations considered to be intellectually inferior. When class and race intersect in the implementation of a birth control policy that disadvantages a subordinate racial group, eugenic sterilization becomes a racial project.

Eugenic Population Classifications

Eugenic classification schemes categorize individuals who pose the greatest threat to the degeneration of the White race (Stubblefield, 2007). The umbrella term “social inadequacy” covers a range of maladies believed to erode the evolutionary progress represented by a pure White race (see table 5.2). According to eugenic ideology, pure Whites (free from racial and genetic taints) are socially constructed as the moral, cultural, and intellectual superior to all other non-white racial and ethnic groups. The concept of *purity* is fundamental to

the eugenic classification scheme. Whiteness is degenerated through the heritability of defective genetic material, under a strict interpretation of the Mendelian single-gene theory, explaining gene mutation as an expression of recessive genetic traits (Allen, 1989, 2000). Non-whites are believed to possess a biological impurity that *taints* the purity of whiteness (Drescher, 1990; Stubblefield, 2007).

During the early 20th century, superior intelligence is understood to be the primary factor explaining the social dominance of Whites in the United States. Advanced civilizations and cultures are produced by races that have evolved greater intellectual capacity for problem solving, planning, and building complex societies (Galton, 1869; Gossett, 1963). Eugenicists assert that individuals carrying a heritable defect will degrade the cognitive abilities of pure Whites, ultimately undermining the status and social dominance of the *native* White population (Guyer, 1916). In this respect, “feeble-mindedness” is especially harmful to White racial superiority (Goddard, 1926). Feeble-mindedness is a construction for cognitive disability, expressed along a continuum indicating a relative degree of mental incapacity described with such eugenic terms as moron, imbecile, and idiot (Laughlin, 1920). Being classified as feeble-minded and racially or ethnically unassimilable (inferior) subjects one to a range of eugenically informed social policies designed to protect the dominant White race from impurity.

In the following texts, discourse appears containing references to populations classified according to the eugenic classification scheme prepared by Dr.

Laughlin for presentation during the congressional hearings (table 5.2). Here, elites construct knowledge about groups for eugenic purposes. Individuals classified as unfit for reproduction, due to defective germ plasm or inheritable inferior genetic traits, become targets for policies designed to restrict the transmission of their defective genetic material. Once given a eugenic classification, groups can be more readily subjected to policies informed by eugenic ideology (i.e. sterilization, deportation, institutionalization, or segregation).

Foundation/Institute/Center

“Analysis of America’s Modern Melting Pot, Hearings before the Committee on Immigration and Naturalization, House of Representatives, 67th Congress, third session, November 21, 1922.” p. 731.

Witness: Dr. Harry H. Laughlin, Eugenics Record Office of the Carnegie Institution of Washington.

Question: “Such individuals are people who, through some infirmity mental, physical, or moral can not support themselves and can not be left at large.”

Laughlin: “These are the classes which the immigration law and its administration have attempted to keep out of the United States. Social inadequacy is a double debit; not only do the inadequates not pull their own weight in the boat, but they require, for their care, the services of normal and socially valuable persons who could well be employed in more constructive work.”

“Social inadequacy as an effect and racial degeneracy as a primary cause, go hand in hand; therefore our modern States must strive earnestly to reduce them, especially and more directly the latter, to the minimum,

if our best and most talented family strains, races and cultures, are to prosper.”

According to eugenic ideology, social inadequacy is an umbrella term for classifying individuals as possessing an inherent biological or genetic trait that affects the germ plasm, thereby causing some form of human degeneracy or social pathology. Eugenacists believe that social inadequacy is subject to the laws of inheritance and can be removed from the human population through a program of sterilization or fertility control of individuals determined to have defective germ plasm. Reforms extending beyond the Progressive Era called for the scientific management of public institutions in hopes of achieving greater social efficiency. Eugenics presupposes that social problems such as poverty, crime, and illegitimacy can be bred out of the population through the scientific management of the germ plasm under controlled breeding programs.

Laughlin is responding to the growing concern about existing immigration policy allowing eugenically defective populations into the U.S. who later become public charges through mental illness, genetic disease, criminality, or chronic poverty. His view is that immigration officials should include eugenically trained experts to examine potential immigrants for indications of social inadequacy through intelligence testing, physical examination, or detailed family histories to determine whether or not they had traits that might result in any form of degeneracy requiring custodial care (Laughlin, 1920, 1928). Those persons deemed to be socially unproductive due to genetic defects were thought to pass defective traits into the general population through reproduction. As a result,

fertility control of social inadequates reduces the social and economic burden on more productive members of society.

Laughlin characterizes existing immigration policy in terms of a sieve designed to capture or strain out undesirable genetic material that could degenerate the U.S. breeding population. "These are the classes which the immigration law and its administration have attempted to keep out of the United States." Immigrants who are allowed into the country carrying hereditary defects present a threat to the health and social stability of the United States. A eugenic lens treats social dysfunction and mental or behavioral health problems as evidence of defective hereditary material. Individuals who are so impacted by the presumed hereditary defect as to be incapable of providing for their upkeep are categorized as socially inadequate, and they require segregation, custodial incarceration, and/or fertility control. This perspective requires that anyone falling into the category of the socially inadequate (i.e. poor ethnic immigrants, racial minorities, women with children out of wedlock, or the mentally and emotionally challenged) be subject to fertility control, including reproductive sterilization.

In this passage, immigrant populations are constructed according to eugenic classification for fertility control initiatives. The testimony carries a racial aspect to the recommendations with the following statement that identifies who is not being *othered* by these policies, "if our best and most talented family strains, races and cultures, are to prosper." This view represents a bias against immigrants who are believed to belong to inferior races and ethnic groups that possess inherent defective genetic material. The racist element in eugenic ideology opens the door

to abuses of minorities, motivated by efforts to safeguard the health, morals, and intelligence of the majority White population.

Foundation/Institute/Center

“Analysis of America’s Modern Melting Pot, Hearings before the Committee on Immigration and Naturalization, House of Representatives, 67th Congress, third session, November 21, 1922.” p. 750.

Witness: Dr. Harry H. Laughlin, Eugenics Record Office of the Carnegie Institution of Washington.

“The second important factor is the difference in institutionalization in different geographical sections of the United States. We have already reviewed a portion of this feature when reference was made to the relative development of custodial institutions in the North and the South. Associated with, and perhaps the principal cause of differential racial treatment, in geographical sections of the country, is to be found in the geographical concentration of races.”

“The result of this differential treatment in different sections of the country shows itself when we find that the negro does not, to any great extent, get into institutions for the dependent, He does not get into institutions for the feeble-minded, nor, to any large extent, for the insane, but when he becomes institutionalized, it is principally in prison his quota fulfillment here is relatively high.”

Eugenic ideology incorporates tenets of scientific-racism about the inherent inequality of races, and serves as a logical justification for organizing the U.S. as a racial state. In the U.S. (during the 1920s) status, privileges, and access to resources are ordered along a continuum that constructs an identity for Whites as dominant/superior and for Blacks as subordinate/inferior racialized groups. I contend that institutionalized racism is the primary explanation for the “differential

racial treatment” discussed in this passage. The function of a social system based on structural inequality is to ensure that the privileged race has greater access to resources and preferential consideration of one’s needs.

The existence of a hierarchically arranged social structure means that social ills (i.e. social inadequacy) are interpreted differently according to one’s race, which also dictates the availability of resources society is willing to commit for care and treatment. In this selection, Black social dysfunction (i.e. poverty or mental or behavioral health issues) is more likely to be criminalized by the dominant group: “[T]he negro does not, to any great extent, get into institutions for the dependent, He does not get into institutions for the feeble-minded, nor, to any large extent, for the insane, but when he becomes institutionalized, it is principally in prison...” The statement suggests that in certain regions of the country, such as the south, it is a crime for Blacks to become dependent on the state for their care. This attitude may be rooted in the legacy of slavery and the view that Blacks are seen as a source of cheap and easily exploitable labor. It may also reflect the caste like status of Blacks who, being more easily identified by phenotype and skin complexion, can be targeted for differential treatment (Cox, 1948). Alternatively, the tendency to criminalize Black social inadequacy may be designed to ensure their custodial segregation, reflecting fears eugenicists have about the threat to White purity.

In constructing an idealized (White) American race, eugenics promotes anti-miscegenation laws as a racial project, advocating legal definitions for Whites and Blacks. One of the primary goals of anti-miscegenation laws is to

legitimize White racial purity as a protected class. Blacks who threaten the racial purity of Whites through violation of anti-miscegenation laws are stigmatized and labeled as criminals. This stigmatization as a criminal threat to White racial purity may also influence the availability of institutional alternatives for therapeutic treatment when Blacks are classified as socially inadequate.

The next two selections below contain discourse on the significance of women's work in reproducing social class. The power of women to reproduce inheritable racial and social characteristics is a central focus of eugenic ideology. Within a eugenic framework, human degeneracy and White racial superiority is transmitted through the child-bearing and child-rearing functions of mothering. White women are constructed as the principal medium for maintaining White racial purity from defilement by inferior germ plasm. Children are socialized into the values and belief-systems of the dominant White, middle-class, and affluent members of the American race, primarily through the gender roles assigned to women in patriarchal family structures. The upper and more affluent classes are perceived as forming an *intelligentsia* whose reproduction is to be encouraged among a genetic pool of elites. Conversely, the fertility of women from subordinate groups is viewed as a social problem and potential threat to the status of the dominant American race.

Medical Professional

"Selective Sterilization for Race Culture." Scientific Papers of the Third International Congress of Eugenics, August 21–23, 1932. p. 202.

Dr. Theodore R. Robie, Essex County Mental Hygiene Clinic, Cedar Grove, N. J.

“It is believed that the need for selectively sterilizing the entire group of hereditary mental defectives will be readily conceded by all students of race culture. But quite apart from this group which includes 50 to 65 per cent of feeble-minded, it would also be conducive to racial improvement to sterilize even those feeble-minded who do not necessarily fall in the hereditary group. Ample justification for this is found in the fact that regardless of our theories of heredity, mental defectives tend to maintain inferior homes in inferior environments, and they quite generally rear their children in an inferior manner. This is readily understandable, for they do not possess the requisite knowledge necessary to train children along normal lines. The rearing of children into normal adults is a much neglected art, and able parenthood is the most important profession on earth, requiring a store of knowledge which is possessed by few parents of even average intelligence, and certainly we can never expect feeble-minded persons to acquire sufficient knowledge to carry out child rearing properly. In this sphere it must be remembered that the faultily reared children of each generation make up the greater proportion of the insane, criminals, prostitutes, paupers, and social misfits of the next generation.”

Medical Professional

“Selective Sterilization for Race Culture.” Scientific Papers of the Third International Congress of Eugenics, August 21–23, 1932. p. 202.

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“A large proportion of illegitimate children are born by mentally deficient mothers, and it may also be stated that a relatively large proportion of fathers of illegitimate children would be found to be inferior individuals if reliable data could be secured on this question. We would therefore decrease in great measure the extent of this problem of illegitimacy if all

feeble-minded persons were sterilized and thereby prevented from procreating. It follows quite naturally that the problem of prostitution would be considerably decreased, since a greater proportion of prostitutes are mentally inferior and many are definitely feeble-minded—so that by decreasing the whole number of mentally deficient persons we would naturally decrease this problem of prostitution proportionately.”

This first text contains an alternative conceptualization of social inadequacy rooted in cultural and social factors rather than genetics. The term ‘race culture’ is akin to race hygiene, where controlled breeding to produce a population free from genetic defects and increased levels of intelligence is the objective. In this passage, Dr. Robie suggests that it would be beneficial “to sterilize even those feeble-minded who do not necessarily fall in the hereditary group.” According to eugenic beliefs, feeble-mindedness is a general term describing some degree of mental deficiency, usually attributed to a hereditary defect, that results in reduced intelligence or incompetency. However, Dr. Robie proposes that “mental defectives” should be sterilized because their children are inadequately parented and come from inferior homes and living conditions. This argument supports the view that social inequality and social dysfunction are related to culture and level of intelligence. I believe that this view provides the rationale for embedding fertility control within the delivery of social welfare services to the poor. The implied message stigmatizes the fertility of the lower class as undermining social stability because they are culturally deficient and lacking the intellectual capacity to socialize their children into the dominant culture. This view is expressed with the following: “it must be remembered that the faultily reared children of each

generation make up the greater proportion of the insane, criminals, prostitutes, paupers, and social misfits of the next generation.”

In the second example, Dr. Robie draws upon eugenic beliefs about the heritability of intelligence and moral character in discussing the problem of illegitimacy. The majority of individuals who engage in sexual activity leading to children born outside of wedlock are stigmatized as being “inferior,” “feeble-minded,” and “mentally deficient.” Most persons who violate dominant group social norms about sexual behavior are considered to be of lower intellectual capacity. The hereditary transference of intelligence is a central idea within a eugenic framework. Fertility control becomes equated with social control under the view that individuals who are unable to function in accordance with social norms (i.e. hard working, moral, good parents, or law abiding) contain hereditary defects which must be systematically culled from the breeding population.

In the above discussions, the concept of race carries different connotations: as a general term for the human race and a more specific reference to a racial or ethnic group. At times it is difficult to determine the precise meaning the speaker intends to convey when using the term race. I rely upon several assumptions to interpret the speaker’s intention when the term race is used. If the speaker is a member of the dominant group communicating to other like-minded elites or dominant group members, race will usually imply upper and middle class Whites as representative of the human race when the discourse is about a potential threat or harm. When the speaker intends to convey knowledge about non-whites and lower class White ethnics a eugenic classification is used to stigmatize and

activate pre-conceived ideas about the groups being mentioned. Applying this approach, I understand the groups targeted for sterilization as primarily referring to lower-class White ethnics and poor non-white women. I believe the view, that the most urgent social problems affecting society are attributable to the failure of women to internalize and reproduce the social and cultural values of the dominant group, is a central component in the evolution of family planning policy.

Summary

During the Progressive Era, the public mood was focused on reform. The complexities of industrialization, immigration, and an increasingly urbanized population brought new and different social problems as the United States of America entered the 20th century. A textual analysis of the documents and transcripts from the 1920s to 1930s indicates a general concern with the changing racial and ethnic demographics of the U.S. population, protection of traditional values and morals, public health, and the defense of Whiteness. In partial response, an idealized American race is constructed, primarily from middle and upper class Whites of European ancestry. The appellation *American*, when prefixed to terms such as race, family, people, ideals, traditions, values, is imbued with meaning as a cultural symbol referring to the original colonial founders. In sum, the use of the designation *American* in the transcripts and documents analyzed means White. This is an important insight in comprehending the construction, maintenance, and defense of White racial superiority.

According to my interpretation of the data I consider the equating of whiteness with the designation American as accomplishing two primary

objectives: 1) to instate Whites with status and power as the dominant socioeconomic group; and 2) to socially construct Whites as the preferred American race. When viewed as a racial project, the construction of an idealized American race serves to conflate the idea of Whites as the dominant American race with White racial superiority (Omi and Winant, 1994). In this respect, White racial superiority is treated as a social and cultural fact, and as such, only needs to be inferred through the use of the appellation American. During the Civil Rights era, the idea of what it means to be an American was contested. The relative success of efforts to broaden the definition of who is considered an American is beyond the scope of this dissertation. However, my analysis of the data sampled allows me to identify five primary objectives in which eugenic ideology is employed to accumulate and exercise power by a White racial majority through the social control of fertility: 1) the maintenance of White racial superiority; 2) the creation of the socioeconomic dominance of an affluent class; 3) the social construction of an idealized American race; 4) the domination of subordinated groups; 5) and the internalized oppression of subordinated groups. In chapters 6 and 7, I will investigate the processes of power and domination in accomplishing these five objectives using an intersectional approach in combination with a discourse analysis of congressional testimony when the analyzed passage allows for an intersectional treatment of the data.

To summarize the findings in this chapter, I view discourse about the need to revise immigration policy resting on two main issues: 1) the cost of care being provided to immigrants, and 2) concerns over the changing demographics of the

U.S. population. Eugenic ideology provides a rational explanation for both problems. The rising cost of caring for the dysfunctional is due to the fact that they possess heritable genetic and biological traits that cause a degeneration in the physical, mental, and emotional faculties of the general population, resulting in a condition known as social inadequacy. According to expert testimony, the most effective strategy for addressing the problem of social inadequacy is to implement a program of national eugenics. Through an analysis of the documents sampled from the eugenics period, I outline a number of requirements that are discussed in formulating a national eugenics program.

First, an idealized American race needs to be legally defined as White to ensure that their culture, traditions, and norms receive a privileged and normative status; the U.S. is to be officially structured as a racist state with institutionalized racism a recognized national policy. Second, the social dominance of a White American race needs to be ensured through immigration restrictions reducing the number of unassimilable and inferior racial and ethnic groups. In the United States, immigration policy is the most important federal policy for protecting the dominance and status of White Americans. Third, class inequality is to be encouraged through efforts that promote reproduction in the upper classes and curtail the fertility of the lower classes. The White population needs to maintain class inequality since the upper class is more intelligent and moral, and form an intellectual elite who are better equipped to manage public affairs. Fourth, a process for determining the presence of human degeneracy, especially the condition known as feeble-mindedness, should be instituted. Feeble-mindedness

is a primary cause of social inadequacy and is evidenced by illegitimacy, pauperism, criminality, poor parenting, and low intelligence. Feeble-minded women are the greatest contributors to social inadequacy, and as such, they are more easily identifiable through their reproductive behavior, the quality of their home life, and the condition of their children. Feeble-minded women fail to properly socialize their children into the culture and norms of the dominant White American race and thereby, they should be sterilized because they are not intelligent enough to function as social mothers. Finally, a national strategy for controlling the fertility of the socially inadequate should be developed. Social inadequacy is a threat to the socioeconomic and political stability of the U.S. and the dominance of White Americans.

In this study, I investigate the presence of eugenic ideology in political discourse about issues relating to family planning. The findings presented in this chapter form an outline by which policy makers of the 20th century would embed eugenic ideology at some stage in the formation of a national family planning policy. During the eugenic period, fertility control is motivated out of a desire to protect the privileges, status, and dominance of the socially constructed White American race. Racist, classist, and sexist social policies (i.e. immigration, custodial segregation, and fertility control) are proposed to counter perceived threats to the culture, traditions, and norms of the White American race. I find compelling evidence that eugenic ideology is present in the early stages of deliberations over the need for a national program of fertility control. The next

task for this study is to determine whether this trend continued in later historical periods.

Chapter 6: Population Crisis, 1965 – 1966: Demographic Transition and the Expansion of Social Welfare Programs

In this chapter, I report results from the qualitative coding of testimony from the Population Crisis congressional hearings conducted between 1965 and 1966. After the first round of coding, using codes developed a priori and those emerging from the data, I queried the data with all four eugenic code families combined into a supercode for eugenic ideology. In table 6.1, I report coding results by witness category and eugenic code family. Here, I present the results of a discourse analysis and interpretation of findings for 5 selections deemed to contain coded racism. Each passage is analyzed in terms of the use of power as a mechanism for domination of subordinate groups along the lines of sex, class, and race or ethnicity when possible.

I maintain several assumptions guiding my analysis of the witness testimony sampled from the hearings. First is setting or context. I assume that witnesses are aware of the social rules appropriate for language use during public congressional hearings in 1965 and 1966. The mood of the country was shifting away from overt racist language that denigrated racial and ethnic minorities. I would not expect any but die-hard southern segregationists (who may be pandering to the racial animus of their constituency) to feel comfortable expressing open racial prejudice in a congressional hearing. The purpose for the hearings was the potential global population crisis that demographers and foreign policy experts anticipated in developing nations. According to transition theory, demographers believed that modernization would induce the poor in developing

regions to reduce their family size to enjoy a higher standard of living. What they found however, was that cultural attitudes lagged behind the effects of modernization, resulting in higher population growth rates in Asia, Africa, and Latin America. The concerns were that global overpopulation would lead to political instability, depletion of natural resources, and ecological disaster. Policy makers also felt that for the U.S. to have credibility with foreign governments in crafting global population control initiatives, the U.S. must institute similar domestic birth control policies at home.

A second assumption considers *who* is testifying in support of foreign and domestic fertility control programs. The chair (Senator Gruening) and other committee members are political elites who represent dominant group interests, have the power to set the agenda, invite (and vet) witnesses to provide testimony, and report and disseminate their findings with respect to the pending legislation (S 1676) that included appropriations for foreign and domestic population control initiatives. Senator Gruening had a long affiliation with the population control movement dating back to the 1930s and maintained ties with the founder of Planned Parenthood (and eugenicist) Margaret Sanger. I assume that elites representing dominant group interests are aware of the committee's position in favor of global population control, and are fully capable of drawing from a conceptual map constructed with values, norms, and ideals that support dominant group interests and goals.

A third assumption is predicated on the subject of the *other*. Members of the dominant group refer to subordinate groups in terms that indicate that they do not

have the identity, status, or privileges accruing to dominant group members. When powerful elites intend to communicate information about subordinate groups they rely upon existing conceptual maps shared by other elites that contain knowledge about *others* that include stereotypes, labels, and cultural symbols (van Dijk, 1993a, 1998, 2000). The crux of this research rests on the idea that powerful elites and dominant group members share a mental map about subordinates that provide the rules governing social relations, including access to resources under the control of the dominant group. When elites intend to convey knowledge about subordinates (i.e. racial and ethnic minorities, the lower class, and/or women) they use sufficient language to activate existing cognitions known to be shared by other elites without needing overt language.

Eugenic Policy Areas/Social Problems

In the following text, the witness is making a recommendation that fertility control measures should be instituted as part of federal efforts to reduce poverty. The witness frames his argument as a critique of those producing large families merely for status seeking purposes. Eugenicists advocate for the upper class to maintain large families, as it is believed that wealth is an indication of intelligence (which can be transferred to progeny through inheritability). It would be reasonable for individuals attempting to mirror upper class habits to view large families as representing claims of higher social status. Conversely, transition theory explains differential birth rates between upper and lower classes as a conscious decision to improve one's standard of living under modernization.

Private Agency/Council/Association

"Hearings Before the Subcommittee on Foreign Aid Expenditures of

the Committee on Government Operations, United States Senate, 89th Congress, first session, July 21, 1965.” p. 776.

Witness: George J. Hecht, Publisher, Parents Magazine and Chairman, American Parents Committee

“Unfortunately the large family is today a status symbol in many well-to-do communities in the United States and perhaps in other countries, just as owning a high-priced automobile used to be. Whether or not by design, many publications and advertisements have been glamorizing the big family. **Parents need to be convinced that if they have two or three children they can provide for them more adequately and can do a better job in rearing and training them than they can if they have four or five or more children.** Certainly no one wishes to see families have unwanted children. I think that it might not be inappropriate to state here that in my opinion **a major activity of the Federal Government’s antipoverty program should be, but isn’t, the motivation of families, especially those of limited means, to the idea that they should have no more than two or three children, certainly not four or five or more children, as too many families still have.** Also the greatest possible publicity should be given to the fact that safe and inexpensive means are widely available which enable families **to space or limit the number of their children as they desire.**”

The primary social problem discussed in this selection is that the poor and lower socioeconomic classes have higher birth rates than the more affluent. The need to “convince” or motivate parents to limit fertility for socioeconomic considerations is important. The proposal reflects the concerns of a reform-minded eugenics, under transition theory, that suggests culture and social values account more for differential fertility between classes than biology. The speaker uses language to activate knowledge the dominant group already possess about

the poor and lower classes. However, in order to categorize this quote as containing coded racism I need to identify implicit references to race or ethnicity through the use of stereotypes or cultural symbols that are employed to activate dominant group knowledge about minorities. The use of “high-priced automobile” as a cultural symbol for social status would activate preconceived ideas about the poor attempting to achieve middle class status, but in my determination, this is not sufficient to refer specifically to racial and ethnic minorities.

In the above passage, the speaker suggests that policy makers structure social policy to include initiatives that constrain the reproduction of specific subpopulations of citizens whose fertility is framed as infringing on the well-being of the middle and upper class majority population. The Johnson administration’s federal antipoverty program is organized at the macro level as federal policy consisting of an assortment of social and public policies created to reduce the wide disparities in socioeconomic conditions between the majority White population and poor racial and ethnic minorities in the 1960s. At the macro and meso levels, power is structured in the form of legislation and policies implemented through federal and state agencies, institutions, and organizations that support dominant group interests. The notion that poverty is caused by irresponsible reproductive habits reflects dominant group norms constructing poverty as a moral failure. Transition theory proposes that (lower class) high fertility groups must have their cultural attitudes about family creation changed to be more in line with that of the majority group (which holds the view that urbanization increases the economic cost of children). I see efforts to change

social and cultural attitudes about family size of subordinate groups to satisfy dominant group interests as a hegemonic form of elite domination of poor racial and ethnic minorities. Dominant groups have socio-historically constructed knowledge about the fertility of poor minorities that serves dominant group interests depending on whether the children of subordinate groups represent an economic benefit or loss to dominant group members (i.e. chattel slavery versus welfare payments). I find strong support for a re-articulation of eugenic ideology that relies upon a discourse to activate dominant group ideas that frame fertility in terms of social class and culture according to the tenets of transition theory.

In the next selection, the witness frames poverty and a host of other social problems in terms of morality. Specifically, illegitimacy and the lack of fathers supporting their family are implied as the causes of poverty. However, the speaker intends to identify poor racial and ethnic minorities as the primary focus of the discourse without mentioning race. She relies upon a shared conceptual map to communicate with dominant group members using a repertoire of terms to activate conceptual images of racial and ethnic minorities.

Private Agency/Council/Association

“Hearings Before the Subcommittee on Foreign Aid Expenditures of the Committee on Government Operations, United States Senate, 89th Congress, first session, August 31, 1965.” p. 776.

Witness: Dr. Mary S. Calderone, Executive Director, Sex Information And Education Council Of The United States (SEICUS)

“Also under behavior, we are beginning to identify some of the roots of such common human dislocations as homosexuality and addiction to alcohol, narcotics, or promiscuousness. These roots are

seen to lie in emotional deprivations during early childhood, particularly with loss or absence of the father figure. The absence of the father is not only experienced in broken homes, but in unbroken homes where the father may be handicapped by having to travel long, exhausting distances to and from work so that he is not around when his children need him; or where he may have to go on the road as a part of his work; or where he may be emotionally so immature that even if he is physically present it is not in the role of the father, but of yet another competing child. **It is our most disadvantaged families living under the worst and most crowded conditions everywhere that particularly suffer from this absence of a father figure.** For this reason, I am concerned that very young children from deprived environments, for instance those in **Operation Head Start programs**, should be assured contacts with substitute father figures, perhaps by volunteer young men and older boys. Involving our adolescent males in responsible activities will help them to develop too—for our society has for far too long placed the burden of moral responsibility on its girls. **Only when the men of a society assume the primary responsibility for that society's moral standards—setting them, supporting them—will the society and its families be cohesive and strong.**”

I interpret this passage to contain both latent pattern and latent projective indications of coded racism. The interpretation for coded racism appearing in the pattern form of latent content follows a deductive approach applying the concepts of color-blind racism (Bonilla-Silva, 2001). I see this as a two-stage process. First, coded language is used in a pattern that implies race. The speaker uses coded language that requires elites to make subjective interpretations about the racial and ethnic identity of the individuals described by Dr. Calderone. The objective race codes become symbols for race or ethnicity subjectively held by

elites. The race meaning is socio-cognitively held in mental maps that dominant groups have constructed about minorities over time (van Dijk, 1993b). In this passage, Calderone uses several labels to convey to other elites *who* she is speaking about. I interpret the following phrases to contain code words possessing an implied racial content: “disadvantaged families,” “worst and most crowded” living conditions, “deprived environments,” and “Operation Head Start.”

The speaker communicates to other powerful elites information that activates mental maps about racial and ethnic minorities by using a label for poor minorities: “disadvantaged families.” The communities are “disadvantaged” not simply because minority populations experience barriers to resources (i.e. employment and credit) in control of Whites, but also due to the effect of constructing racialized communities that can be discriminated against in an entirety with respect to public services and investment. What disadvantages minorities is a racialized system structured on White privilege and advantage. These “disadvantaged families” are then associated with a place that carries racial stigma. However, this witness avoids any direct mention of race or ethnicity in discussing these issues, choosing to adopt what Bonilla-Silva (2001) describes as a “color-blind” argument to avoid charges of racism. The speaker uses implied references to racially segregated communities, commonly known as ghettos, with the phrases “worst and most crowded” living conditions and “deprived environments.” Some of the most pressing issues at the time of the hearings were urban poverty, overcrowding, and crime, all related in some degree to the urban migration of Blacks and Latinos concentrated in racially segregated

metropolitan areas. Racial segregation patterns in housing are rooted in eugenic beliefs that deplore race-mixing to avoid the tainting of White racial purity, considered a preeminent threat to White racial superiority (Davenport, 1910; Popenoe and Johnson, 1933). As the dominant racial group, Whites have the power to designate and enforce housing patterns that consolidate minorities into racialized communities. A critical discourse analysis includes the historical context of the speech environment as an important element for inductively determining meaning (Wodak, 2001). Political elites, as members of the dominant group, know that these are not the communities that they live in. During the 1960s, legalized housing discrimination was practiced extensively throughout the major metropolitan areas experiencing problems associated with racially segregated “inner-cities” as Whites fled to outer-ring suburbs (Massey, 1990; Wilson, 2009; Quillion, 1999).

As part of an agenda setting strategy, the witnesses provides clues to indicate that racial and ethnic minorities are the implied focus of this testimony by linking the targeted group to Head Start: “I am concerned that very young children from deprived environments, for instance those in Operation Head Start programs, should be assured contacts with substitute father figures.” Children enrolled in the Head Start program are stigmatized as being low-income minorities who are culturally ill equipped to compete with children from the dominant group. I contend that “head start” is a racially loaded code word designed to activate a dominant group stereotypes about minorities by linking race, poverty, family structure, culture, and intelligence (Farkas, 2003; Herrnstein and Murray, 1994).

It is the *other* children (i.e. poor American Indian, Black, and Latino) who are the primary focus of federal legislation funding head start programs (Smith, 1970;). According to van Dijk (1993b), othering is a method dominant group elites use to activate socially formed attitudes and prejudices cognitively stored in mental maps to induce social behavior in ways that reproduce inequality. In this passage, elite communication is conveyed through coded racism to target minorities for fertility control as a means of addressing a host of social problems relating to the failure of non-whites to adopt traditional values and morality.

My interpretation of the projective form of racial content in this passage is derived inductively, beginning with the argument about the problem of dysfunctional fathers. "These roots are seen to lie in emotional deprivations during early childhood, particularly with loss or absence of the father figure... It is our most disadvantaged families living under the worst and most crowded conditions everywhere that particularly suffer from this absence of a father figure." The argument is logically arranged to lead the listener to infer that "fertility control" (along with "substitute fathers") in some respect will reduce the negative impact of "absentee or dysfunctional fathers" The witness also invokes the stereotype of the *absentee father* to communicate the idea that the educational ill-preparedness of minority children is related to the problem of single-parenthood and out-of-wedlock births. The phrase has no latent racial or ethnic content in and of itself. However, used within the context of political discourse about the problems of urban overcrowding, social movements advocating for welfare rights for Blacks, and concerns over the rise in Black teenage

pregnancies, the absentee father becomes racialized in the minds of dominant group elites (Commission on Population Growth and the American Future. 1972; Critchlow, 1999; Littleton, 1977; Quadagno, 1994). Therefore, fertility control for racial and ethnic minorities is implied as a means of reducing the number of out-of-wedlock births believed to negatively impact the educational performance of poor minority children, without the overt mention of race or the effects of structural racism in maintaining segregated under-funded inner-city schools on educational performance (Farkas, 2003).

The main theme of this testimony centers on the need to address an array of social problems attributed to absentee fathers that are affecting the poor and minorities. The speaker relies upon a morality frame to imply that poverty is the result of moral failure, primarily on the part of men. Under welfare eugenics, this is a re-articulation of eugenic ideology that attributes socioeconomic inequality to failures of subordinate groups to adopt dominant group moral values. The original formulation of eugenic ideology held White women largely responsible for maintaining class position and racial purity according to strict moral standards that characterized non-marital sex as deviant. The shifting focus of the “morality” argument from girls to men is a re-articulation of eugenic ideology emphasizing female sexual immorality as contributing to social inadequacy. A central component of welfare eugenics states: “A re-articulated eugenic ideology frames discourse about race and ethnicity in terms of social values, culture, personal morality and individual character. Any public discourse referencing mainstream or traditional values as the normative type signifies Whites as the dominant racial

group. Any discourse about failure to assimilate into mainstream society or internalize traditional values and norms indicates non-white subordinate groups or socially deviant Whites.”

Dominant group norms and culture serve a meso-level function to legitimate the bureaucratic operations of state agencies and institutions that cater to a patriarchal society where “society’s moral standards” are “set” by men. Feminist theory explains the recommendation to imbue men with the responsibility for maintenance of society’s moral standards, combined with a socially constructed gender role for men as the head of a normative family structure, as patriarchal. The system of patriarchal oppression of women is reproduced when female-headed families are stigmatized as deviant. The sexuality of poor minority women who establish families outside of the traditional norms of the more affluent majority group is also labeled as deviant to categorize them for fertility control measures. I consider patriarchy a hegemonic domination of women which impacts poor, non-white women disproportionately greater than White women. Patriarchy and sexual norms about family structure and the idealized traditional family are used as the standard to attribute “human dislocations” of homosexuality, promiscuity, and substance abuse to the absent father.

This perspective serves to project hegemonic ideals of normative family structures emanating from dominant group values onto the poor. Under this rubric, working women contribute to the problem of dysfunctional families by not being in the home to socialize the children and support the hard working male head of household. Conversely, substandard education and employment

discrimination relegates American Indian, Black, and Latino men to low-wage occupations that are insufficient to support a family on a single income. At the interpersonal (micro) level, the male head of household is viewed as providing an example of the proper gender role model for children. Poor women on welfare are compelled to reflect the ideal type of social mother that will socialize children into roles supporting the position and status of the dominant group. I view the socialization of traditional norms, values, and belief-systems of the dominant group to be a form of internalized oppression accomplished through patriarchal conceptions of family structure, size, and formation.

The general tone of the following selection suggests that uncontrolled fertility is the cause of poverty and that a reformed eugenics (under the tenets of transition theory), which focuses on changing social and cultural attitudes towards reproduction in the lower classes, must be instituted. Transition theory posits that one's economic position can be improved through limiting family size. However, the affluent classes are believed to be more knowledgeable about modern contraceptive practices than the poor. Family planning education is suggested as a remedy for poverty without any mention of the structural factors contributing to racial and socioeconomic inequality.

Member of U.S. Congress

"Hearings Before the Subcommittee on Foreign Aid Expenditures of the Committee on Government Operations, United States Senate, 89th Congress, first session, June 22, 1965." p. 105.

Witness: Representative D. R. Matthews, Democrat, of Florida (Gainesville), a U.S. Representative from the Eighth Congressional District of the State of Florida.

“May I add here, I am not against babies, but I am just pointing out the problem as pointed out by Mr. Hauser. Mr. Chairman, I submit that such developments are in direct contrast to the Great Society which we envision and to the goals of the war on poverty which we are now spending millions of dollars to achieve. **Families with too little income and too many offspring found in the slums of every large city are directly and indirectly amounting to a drain on public funds.** Public health and welfare authorities contend that lack of access to knowledge of modern, effective child-spacing methods is an important reason why more than half of the 7,800,000 persons on relief in this country are mothers and their dependent children. **For this reason I welcome the proposal to promote in this country programs which will provide help and information to those seeking to improve their economic position by a more fortunate spacing of their children.** Several States have already begun action in this field in recent years—in my own State of Florida a recent survey conducted by the State health department indicates that 49 of 67 counties offer family planning services through the health departments. Encouragement is given to local units through the State maternal and child health division. In 1964, Florida spent \$25,000 to supply necessary materials to county projects. Mr. Chairman, I recommend that the Federal Government now make an effort to extend and coordinate the various State programs now in operation.”

Coded racism appears in this selection as a latent pattern form of racial content. The label “slum” is a socially constructed space that carries the connotation of a racially segregated, urban ghetto primarily populated by Blacks and Latinos in the large metropolitan cities of the east coast and Midwest (Massey, 1990; Quillion, 1999; Rankin and Quane, 2000; South and Crowder, 1997; Wilkes and Iceland, 2004). Without using race or ethnicity, the speaker uses a label to infer a latent (pattern form) racial meaning that activates dominant

group preconceptions about the identity of *who* lives in a community stigmatized as a “slum.” The use of slum is a color-blind code for race or ethnicity (Bonilla-Silva, 2001). In this passage, the speaker also draws upon transition theory to imply that the reason why people are confined to slums is because they fail to limit their family size according to their income. The argument is a re-articulation of eugenic ideology about the socially inadequate, who are believed to be unable or unwilling to provide for their children and must be supported by the state.

Blumer’s (1958) theory of prejudice as a sense of group position explains another code appearing in a projected form of race meaning. In the above argument, the fertility of poor minorities is characterized as a “drain on public funds,” funds that are largely under the control and authority of the dominant group elites. In a projected form of latent racial meaning, Rep. Mathews uses language to influence the listener to make a subjective interpretation about minorities. The fertility of poor minorities is characterized as a threat to the socioeconomic resources of Whites as the unnamed dominant racial group (Blumer, 1958; Frankenberg, 1993). In other terms, *they* (the slum dwellers) are wasting *our* (we the majority public’s) resources. In this passage, fertility control represents a dominant group response to the claims of racial and ethnic minorities advocating for welfare benefits, especially programs such as ADC that provide direct funding to mothers and children in the 1960s (Gilens, 1999; Patterson, 2000; Quadagno, 1994).

Under the proposed policy (in the testimony analyzed), family planning education would operate at the meso level as a hegemonic domination of

subordinate group reproduction through the recommendations that elites impose dominant group cultural views about family size and through a disciplinary function that proposes to curtail the fertility of poor non-whites as a cost savings to the state. High birth rates of the urban poor are constructed by the witness as representing an unwarranted claim against public resources, according to dominant group views of poor children as an economic cost to be borne solely by their parents. Family planning is touted as a primary method for improving the socioeconomic position of poor minorities. No discussion appears in this excerpt about structural adjustments to the distribution of wealth or access to resources that may reduce the systemic barriers contributing to racial and ethnic inequality.

Eugenic Policy Applications (Specific Policy Tool for Applied Eugenics)

In this section I analyze discourse that contains particular references to the application of eugenic theory as a policy proscription. The witness in this selection advocates for family planning policies to be implemented equally across all population demographics to avoid the potential abuses in fertility control policies that could reproduce inequality. I include this selection because it is the only open acknowledgement of a state sponsored eugenics program using birth control as an instrument for social control and the only mention of “minority” with respect to fertility control.

Private Citizen

“Hearings Before the Subcommittee on Foreign Aid Expenditures of the Committee on Government Operations, United States Senate, 89th Congress, first session, July 9, 1965.” p. 719.

Witness: Ben H. Bagdikian, Washington, D.C., author of “In the Midst of

Plenty: The Poor in America”

“If I may, I should like to urge this committee not to overestimate the amount of birth control information known to the public at large, certainly to the poor. There is a great deal of concealment of ignorance and a great deal of hypocrisy on the subject. Even among educated Americans with sophisticated social contacts giving them access to modern medical advice there are lingering taboos and fears which restrain rational thought on the subject. And this is aggravated among the poor who are even more isolated from competent medical advice. May I add that while most of the poor know little or nothing of sound medical family planning, many are aware that birth control is considered by some as a weapon against the poor to prevent creation of what they consider “the wrong kind of people.” This suspicion and the danger that it could be justified increases the argument, it seems to me, for the adoption of this program as a matter of public policy for the country as a whole and not as a special instrument directed at the poor or any minority.”

Here we see discourse containing clear references to the past abuses of eugenics with respect to race hygiene: “...birth control is considered by some as a weapon against the poor to prevent creation of what they consider ‘the wrong kind of people.’” “According to eugenic ideology, the ‘wrong kind of people’ are the feeble-minded, unfit, and socially-inadequate whose reproduction introduces defective germ plasm into the general population as the source of social, cultural, and medical problems” (Davenport, 1910; Leonard, 2009; Selden, 1999).

Transition theory shifts the focus away from biological or genetic explanations for social inequality to that of culture and class. A central proposition of transition theory is that the poor lack the knowledge or culture to limit family size to increase their living standards. However, transition theory evolved out of a

reformed eugenics that postulated a relationship between class, culture, and intelligence, which varied among different racial groups.

I find evidence for a re-articulation of eugenic ideology in the testimony about family planning in the recommendation that the state adopt a policy for changing U.S. fertility patterns, a central tenet of transition theory. I do not find any support for coded racism that would induce elites to draw upon mental maps for non-whites alone when receiving the messages in this testimony. The witness providing testimony in this passage appears to advocate for family planning policies that are made equally available to all citizens to avoid the past abuses of eugenic sterilization programs of earlier years (Roberts, 1997; Selden, 1999; Silliman et al., 2004). However, an intersectional approach to policy analysis considers the disproportional impact a policy is expected to have on groups with unequal power and status. Most Whites are better able to improve their standard of living by limiting family size because they do not face the same employment and educational barriers that American Indians, Blacks, and Latinos experienced in the 1960s. Poor families may view their children as a potential economic benefit, as parents look forward to old age and the future support of their adult children. In another example of hegemonic domination, elites construct knowledge about the poor as being in need of education and help in controlling their fertility. Structural inequality is reproduced through antipoverty policies framing the reproductive knowledge and behaviors of the poor as a social problem, without acknowledging the unequal distribution of power largely residing under the control of elites.

In the following discussion, the U.S. domestic birth control program is framed as a demonstration project to influence foreign nations to control their population growth through dissemination of family planning propaganda and contraceptives. I consider transition theory as a reformed eugenics when used to justify fertility control measures advocated by western industrialized economies for underdeveloped nations and poor domestic minority populations.

Foundation/Institute/Center

“Hearings Before the Subcommittee on Foreign Aid Expenditures of the Committee on Government Operations, United States Senate, 89th Congress, second session, January 26, 1966.” p. 110.

Witness: Dr. Philip M. Hauser, Chicago, Illinois, Professor of Sociology, and Director, Population Research and Training Center and Chicago Community Inventory, University of Chicago

“The provisions of S. 1676 constitute minimum provisions for facing up to the world and our own domestic population problems. They should certainly become law and be implemented. Moreover, the activities which will be initiated under the provisions of S.1676 will undoubtedly point to further steps to be taken. We have reached a most encouraging stage in population history in the sense that the United States has in the Kennedy and Johnson administrations, for the first time, begun to face up to the population problem at home as well as abroad. **In facing our problems at home we are strengthening the moral force with which we can help to solve the problem abroad. The recent revision of our immigration policy as well as our increasing provisions for transmitting know-how and methods for regulating family size to our own disadvantaged population is placing us in a stronger position to counsel and assist other nations.**”

In this passage, I found one clear reference to a transition theory upon which to base my analysis on the appearance of a re-articulation of eugenic ideology. The recent change to immigration mentioned by Dr. Hauser reversed immigration policy that for more than 40 years had imposed strict quotas on the number of non-white immigrants from Asia, Africa, and Latin America. "In facing our problems at home we are strengthening the moral force with which we can help to solve the problem abroad. The recent revision of our immigration policy as well as our increasing provisions for transmitting know-how and methods for regulating family size to our own disadvantaged population is placing us in a stronger position to counsel and assist other nations." What can be inferred from this statement?

First, it might imply that since immigration to the U.S. is likely to increase, a possible population growth problem could occur similar to that of other nations. Second, it could suggest that the U.S. will be in a more advantageous position to lobby other nations on their population problems because more foreigners will be able to immigrate to the United States. Transition theory developed out of the need to predict and influence the population growth rate of underdeveloped nations in the aftermath of World War II. The belief was that modernization would lead people in underdeveloped countries to limit their family size in a way similar to what occurred in the industrialized west. However, there appeared to be a cultural lag in a change in reproductive practices that resulted in sudden population growth, especially in India and Latin America (Hodgson, 1983; Kirk, 1996; Notestein, 1945).

The preceding quote also carries an implied racial meaning interpreted as containing a projected form of racial content. The label “disadvantaged population” may have an inferred racial or ethnic meaning depending on the context of its use. The label can serve as a cue to influence elites to make a subjective interpretation about the racial or ethnic composition of the “disadvantaged population” mentioned by Dr. Hauser. I am not suggesting that the plight of poor Whites was not being considered by elites, who saw the link between poverty, overpopulation, and fertility control. I am simply stating that a major domestic concern (largely influenced by the Civil Rights movement) was over urban and rural Black poverty in 1965-1966. There is insufficient language in his statement to indicate a direct reference to Blacks or other minorities; although we can reason inductively to clarify Dr. Hauser's meaning using the socio-historical context of the population crisis hearings to make inferences about the suspected target population.

A social-cognitive approach to discourse analysis considers activation of shared conceptual maps a central element for analyzing communication objectives (van Dijk, 1993). I combine this method with a discursive-historical analysis of language use to account for the historical context of the speech act. My goal is to explore how language is used when the speaker is communicating with other dominant group members. The speaker draws from transition theory as demographers shifted from estimating population growth rates to proposing policies aimed at influencing the social and cultural attitudes of the poor and minority populations. The ultimate goal is to change reproductive behavior to be

more in accordance with policies established by political elites and population experts on behalf of western industrialized nations.

The witness does not need to mention specific racial or ethnic groups because he knows that the focus of the hearings is on overpopulation in developing nations and that the countries being threatened with explosive population growth are in Asia, Africa, and Latin America. The political and economic stability of the more industrialized economies are being threatened by population growth in developing nations. The historical context surrounding the topic of overpopulation is shared by powerful elites and representatives of dominant group institutions asked by the committee to provide testimony.

It is clear that domestic population growth is framed as a problem that has been partially addressed through the revision of U.S. immigration policy and the transmission of knowledge and methods in fertility control. In applying my analytical framework for interpreting this passage, the question is whether or not the witness uses the phrase “our own disadvantaged population” to imply minorities. In an earlier quote, I found that “disadvantaged population” was used to stigmatize racial and ethnic minorities when additionally prompted with references to stereotypes for segregated communities: “worst and most crowded” and “deprived environments.” However, in this selection there is no additional language that could be interpreted as stereotypes or cultural symbols except for the mention of immigration policy. I am unable to confidently claim that this witness specifically means racial and ethnic minorities. My intuition suggest otherwise, but my theoretical frame requires a greater reliance upon stereotypes,

labels, and cultural symbols to stigmatize minorities for fertility control. I find no such stigmatization in this passage.

Summary

The primary focus of my investigation is to conduct a discourse analysis of testimony that appears to contain elements of eugenic ideology identified through a query of all four eugenic code families. I conducted an analysis of all text that contained evidence of eugenic ideology resulting from the query and identified 24 segments of coded text containing manifest or latent racist, classist, or sexist content. I next reviewed each selection for evidence of coded racism in the form of stereotypes, labeling, or cultural symbols used by the speaker to stigmatize non-whites for fertility control measures. In only two of the five passages initially thought to contain elements of coded racism was I able to determine the presence of language used to stigmatize poor and racial and ethnic minorities for fertility control measures.

Only under one eugenic code family was I able to determine the evidence of coded racism in discourse about issues relating to family planning policy. For the eugenic code family: eugenic policy areas/social problems I found one example of coded racism (projective content) used to identify racial and ethnic minorities for fertility control policies with discourse that implied absentee fathers were deficient in moral or cultural attitudes about the responsibilities of reproductive practices (Dr. Mary Calderone). I also found an example of coded racism (pattern content) indicating that the reproductive practices of racial and ethnic minorities were a “drain on public funds.” In both instances, race codes for

places (“worst and most crowded” living conditions, “deprived environments,” and “slum”) are used as racialized social spaces known by elites to be largely inhabited by minorities. My theory of welfare eugenics however, is generally unsupported by these findings. I expected to find greater reliance on racial stereotypes from witnesses providing testimony than was evident in the transcripts analyzed. The results from the data analyzed in this chapter provide some additional insights about coded racism that I did not initially incorporate into my theoretical framework.

In analyzing testimony provided during the population crisis hearings, I find that demographic transition theory adopted theoretical components that reflect a reformed eugenics. Transition theory is a re-articulation of eugenic ideology into a discourse about culture and class and fertility differentials as an explanation for social inequality. The main emphasis of reform eugenics is to influence populations to base reproductive decision making according to socioeconomic conditions under a rapidly modernizing world economy. Given this model, fertility behavior is subject to factors that structure economic production, political power, racial and ethnic relations, gender equality, and the distribution of power in society. The witnesses providing testimony (in my samples) describe the fertility of the poor as the primary cause of poverty, crime, out-of-wedlock births, and social dysfunctions. These claims were made without regard to the structural inequalities that preceded and complicate those policy recommendations. The observations drawn from the discourse analysis of testimony sampled from the

Population Crisis Hearings from 1965 to 1966 are used to revise my original theory of welfare eugenics and presented in chapter 8.

Chapter 7: Welfare Reform, 1995 –1996: Racialized and Gendered Discourses About the Undeserving Poor

The following is a report of the results from a qualitative coding and discourse analysis of witness testimony from the 1995 –1996 congressional hearings on welfare reform. Specifically, the political debate during the welfare reform hearings of 1995 –1996 is examined for evidence of a re-articulated eugenic ideology. I created a supercode for eugenic ideology (combining all four eugenic code families) and queried the data sampled from the welfare reform hearings. Data reported in table 7.1 display the results of the qualitative coding of witness testimony from the 1995 –1996 Congressional hearings on welfare reform. The findings are reported by witness category, eugenic code family, and eugenic codes. In this chapter, I present the results of a discourse analysis with interpretation of findings for three selections judged to contain coded racism. All three selections appear under the eugenic policy areas/social problems code family. Each passage is analyzed in terms of the use of power as a mechanism for domination of subordinate groups along the lines of sex, class, and race or ethnicity when possible. I continue the same approach of discourse analysis as discussed in chapter 6 with the following assumptions: who is speaking, what is the context or setting of the communicative event, and who is being *othered* in the speech act.

By the mid-1990s, welfare reform had become central to the political debate over the rising cost of caring for the nation's poor. Elites used their control of the media to communicate the view that many of the poor were unduly enriching

themselves at tax-payers' expense (Seccombe, 1999; Sparks, 2003). It was suggested by representatives of dominant group institutions and political elites that poor women (especially racial and ethnic minorities) were giving birth to children out-of-wedlock to increase their monthly welfare benefits. Elites used labels such as *welfare queens* and *dead-beat Dads* to activate dominant group cognitive maps to further stigmatize welfare recipients as unworthy of receiving social welfare benefits (Gilens, 1999; Harvard Law Review, 2008). I believe that the political and social climate of this era, combined with the racial and ethnic composition of the poor, would provide policy makers with the opportunity to advocate for fertility control policies aimed at reducing the cost of social welfare programs. I consider this proposition as I analyze witness testimony sampled from the welfare reform hearings held from January 1995 to December 1996.

Eugenic Policy Areas/Social Problems

The following selections all appear under a single code family and contain discourse coded as generally referring to social problems that fall under policy areas for which a eugenic solution could be advocated. In the first quotation, the speaker is discussing the living conditions, community, and environment facing children of AFDC beneficiaries. The purpose of these hearings was to hear testimony from interested parties (mostly from powerful elites) on proposed legislation to substantially reform the welfare system. In these forums, elites communicate information to other elites about subordinate groups who are making claims against the resources that are in control of the dominant group. To determine whether elites support or reject subordinate efforts to increase access

to majority group controlled resources, I examine how subordinate groups (i.e. racial and ethnic minorities, lower class, and poor women) are portrayed by the speaker.

Medical Professional

“Contract With America - Welfare Reform, Hearing Before the Subcommittee on Human Resources of the Committee on Ways and Means, House of Representatives, 104th Congress, first session, February 2, 1995.” p. 1046

Witness: Dr. Jack P. Shonkoff, M.D., On Behalf of the American Academy of Pediatrics

“To understand the problems, let’s look at the faces and the environment of the children in need of the welfare system. Since the early 1970s, the poverty rate among children has steadily increased. Between 1987 and 1992, a staggering one million more young children became poor. As you know, two-thirds of the nation’s AFDC recipients are children. Even with the current welfare safety net, however, 25 percent of all children under age six, or six million children, now live in poverty. **Most are the children of working parents. Low-income children are more likely to live in dangerous neighborhoods and have a higher incidence of low-birth weight, asthma, infectious diseases, out-of-wedlock births, and exposure to lead than other children. They have lower immunization rates, poorer nutrition, and are more likely to attend below-average schools than non-poor children. As teens, low-income children have higher rates of suicide, drug abuse, and violent injuries and deaths, including homicide, than their more well-off counterparts. We cannot abandon these children. For their sake, and the sake of our nation’s future, we all want to break this cycle of poverty and dependence on welfare. How can this be done?”**

In this passage, I identify a series of code words that may have no latent meaning alone, but when used in a pattern are intended to convey race or ethnicity in the minds of elites. The label “low-income children” in and of itself may not be sufficient to induce elites to subjectively interpret this reference as meaning racial or ethnic minorities. However, as a consequence of residential segregation, elites are able to use community or neighborhood as a proxy for race and ethnicity when activating dominant group conceptual maps about poor minority groups, especially in metropolitan areas with large minority populations, hyper-segregation, and in communities with pockets of concentrated poverty (Quillion, 1999; Rankin and Quane, 2000; South and Crowder, 1997; Wilkes and Iceland, 2004). When “low-income” is contextualized with labels such as “dangerous neighborhoods,” “below-average schools,” “out-of-wedlock births,” “violent...deaths, including homicide,” and “dependence on welfare,” racial or ethnic identity can be *inferred* from social and community context without any overt mentioning of race or ethnicity. Whites *know* who primarily lives in the communities described as dysfunctional and poverty stricken because these are the types of communities Whites typically avoid (Harris, 2001; Quillion and Pager, 2001).

I take a deductive approach in reasoning through the logic of the argument presented in this quote. On the surface, Dr. Shonkoff’s argument may appear to reflect a class-based interpretation of the “cycle of poverty” and the resulting social dysfunctions created by welfare dependency. However, race is often subsumed within class, and can be re-articulated by political elites who want to

oppose government-funded social programs for the unworthy poor while appearing to be in support of social justice and equality. Omi and Winant (1994) refer to this stratagem as the political ideology of the new right. The new right re-articulates racial ideology in terms of class to avoid charges of racism. In deconstructing the code words “semipermanent welfare constituency” the authors make the claim that what is meant is “implicitly non-white in the popular political imagination” (Omi and Winant, 1994 p. 127). The re-articulation of race into a discourse about class is a racial project. Racial inequality and lower social status preceded class inequality for non-white populations, racialized as minorities under state-sponsored racial formation. Health inequity, residential segregation, concentrated poverty, and poor schools are all rooted in the legacy of structural racism. Racial and ethnic minorities are disadvantaged by state and federal policies that legalized discrimination, and they are trying to recover from such discriminatory practices that produced “welfare dependency” and the “cycles of poverty.”

I presume that the overall objective of the welfare reform hearings is to implement reforms that reduce federal expenditures for AFDC and other cash benefit programs. If this is logical, then it follows that the welfare system needs to be described as contributing to the problem of welfare dependency, which is described as a drain on the nation’s resources. This perspective would be in accordance with Blumer’s (1958) theory of prejudice being accomplished as a sense of group consciousness motivated by a desire to defend against perceived threats to group status. Given the assumptions that Whites see themselves as

the dominant group and that they are in large part responsible for the public administration of the nation's economic resources, then unwarranted claims against those resources will be viewed unfavorably. Popular attitudes associating welfare with minorities is well documented (Gilens, 1999; Harvard Law Review, 2008; Marchevsky and Theoharis, 2000; Neubeck and Cazenave, 2001). It follows that welfare dependency is more likely to be viewed as an urgent problem if it can be racialized in the minds of political elites without using overtly racist language. Targeting a subordinate minority population for a specific policy initiative requires that minority groups be socially constructed more negatively with language that contains racial meaning (Domke, 2001; Schneider and Ingram, 1993). I interpret the patterned use of labels and cultural symbols as coded racism employed to identify racial and ethnic minorities as the main focus of this argument about ending welfare dependency.

According to my theoretical framework, I must also distinguish stereotypes, labels or cultural symbols that activate preconceived ideas members of dominant groups have about minorities as a means of stigmatizing them for fertility control. Here, the speaker draws on preconceived ideas held by dominant group elites about the sexual irresponsibility of welfare recipients, especially poor women of color (Neubeck and Cazenave, 2001). A focus on poor children may be used to induce elites to make a cognitive association to the fertility of racial and ethnic minorities on welfare. This device is possible because the White majority has the misperception that most welfare beneficiaries are Black and Latino (Gilens, 1999; Quadagno, 1994). Coded discourse that stigmatizes the fertility of non-white

welfare recipients can be activated through stereotypes in the mind of elites. As a result, coded language such as “low income children” who live in “dangerous neighborhoods” and are born to mothers “out of wedlock” carry the connotation of the racialized other (i.e. minority) for dominant group members (Bonilla-Silva, 2001; Feagin and Elias, 2013).

The witness succinctly summarizes his description of the living conditions and social problems faced by low-income children on AFDC as a “cycle of poverty,” conveying the idea that it is a self-replicating system transferred from parents to children. The cause of this systemic reproduction of impoverishment is attributed to “welfare dependency.” This argument suggests that low-income minority children suffer the debilitating life conditions mentioned in the excerpt, due in part to their mother’s dependence on the welfare system. One of the consistent themes appearing in the transcripts from the hearings on welfare reform is the perception that illegitimacy is a significant contributor to welfare dependency and poverty. The speaker here does not expressly advocate for fertility control of poor minorities. Instead, the case for termination of the welfare system is relied upon because it appears to be a “color-blind” policy recommendation that openly stigmatizes the entire welfare system as contributing to a cycle of poverty and welfare dependency while covertly implying that the fertility behavior of poor women is blamed for the suffering of their children.

A key to understanding how coded racism operates requires an understanding of the mechanism for communicating subtle racist language. Whites are able to say that they don’t see racism because the discourse is not

expressed as classic racial prejudice. Sophisticated systems of communicating White advantage and dominance evolved along with the radical transformation in race relations in an effort to maintain White racial superiority without being viewed as a bigot. “[R]earticulation does not require an explicitly racial discourse, and would in fact be severely limited by any direct advocacy of racial inequality” (Omi and Winant, 1994 p. 127). A socio-cognitive approach in critical discourse analysis aids in the explication of the mechanism for communicating ideas about non-whites. These ideas are cognitively held and continuously reproduced through subtle forms of racism that rely upon cultural symbols for essentialist notions of racial inferiority (Bobo et al., 1996; Bonilla-Silva, 2001; Coates, 2011). Dominant group institutions, traditional values, beliefs, and culture are established through a socio-historical process that racialized a White social identity as normative. Anti-racist Whites can also be subject to unconscious racism when failing to recognize that White privilege and advantage is structured upon a past legacy of beliefs in the inferiority of non-whites. The normativity of whiteness is an artifact of White racism and remains hidden in the social institutions where Whites hold power until identified and critically challenged (Frankenberg, 1993; Myser, 2003).

According to Omi and Winant (1994), a backlash against the gains received by minorities from the social movements of the Civil Rights era lead to the rise of new political ideologies and the evolution of code words used by elites to tap into a populist appeal largely held by Whites. The new right emerged during the campaign of George Wallace with themes of law and order, equal opportunity,

and patriotism. Neo-conservatives gained popularity under President Reagan in the 1980s using themes such as personal responsibility, free-enterprise, and traditional values. Omi and Winant (1994) refer to the language of the new political ideologies as code words used in substitution for race. I adopt a similar frame for interpreting discourse relying upon coded language in the form of stereotypes or cultural symbols used by a speaker desiring to refer indirectly to race or ethnicity.

Private Agency/Council/Association

“Contract With America - Welfare Reform, Hearing Before the Subcommittee on Human Resources of the Committee on Ways and Means, House of Representatives, 104th Congress, first session, February 2, 1995.” p. 943

Witness: Hon. Ed Austin, Mayor, Jacksonville, Fl. National League of Cities and Florida League of Cities

“Mr. Chairman and Members of the Committee, my name is Ed Austin and I am mayor of the city of Jacksonville, Florida, and I am testifying today on behalf of the Florida League of Cities and the National League of Cities on the important issue of welfare reform. Mr. Chairman, I have submitted the league’s written statement for the record and, if I may, I will summarize briefly the contents of that statement. I have been mayor of the city of Jacksonville for only 3 years, but before that I served for over 25 years as the chief prosecutor and earlier as a public defender in northeast Florida. Over the course of my career in the courtroom, **I watched the explosion of crime and the weakening of the American family. Both juvenile and adult offenders typically came from single-parent or no-parent homes, dropped out of school, often grew up in public housing and did not receive the nurturing, care and parental love necessary for normal development in a competitive society. Mr.**

Chairman, in my judgment, all of this is largely the result of the current welfare system. Are there other causes? Of course there are. But this is a cause that we can address and eliminate now.”

In this excerpted quote, I interpret the presence of coded racism appearing in a latent pattern form of race meaning. First, the speaker arranges his argument in such manner that leads the listener to form the conclusion that welfare induces family formation where one or both of the parents have no commitment to their children. “Both juvenile and adult offenders typically came from single-parent or no-parent homes, dropped out of school, often grew up in public housing and did not receive the nurturing, care and parental love necessary for normal development in a competitive society...all of this is largely the result of the current welfare system.” Elites are then left to draw upon cognitively held stereotypes about how this process occurs, making the subjective interpretation that the children are probably born out of wedlock. Coded language is then used to induce the listener to form a subjective interpretation about the racial or ethnic identity of the dysfunctional *welfare families* being discussed. The code words convey the idea of reproductive practices and stimulate dominant group preconceptions of race and ethnicity. When used in combination with one another, the effect stigmatizes poor minorities with children who are beneficiaries of the social welfare system.

The two primary codes are “single-parent” and “public housing.” The main argument is about the contribution of the welfare system to the breakdown of the American family. The implied message is that the welfare system contributes to family formation patterns that result in dysfunctional families, poor parenting

skills, educational under achievement, and crime. Here, the witness activates dominant group conceptions of who the speaker is referring to without making any mention of race or ethnicity. Dominant group members *know* who lives in public housing projects, come from single-parent homes, and are high school dropouts. I suggest that actual data on the racial and ethnic composition of these categories are not consciously held by any majority group members; only the images or mental creations supplied from a shared mental map of stereotypes and symbols are required to construct knowledge about minority groups. The purpose of elite discourse is to activate preconceived notions about subordinate groups when seeking to avoid charges of racism in communication. The listener is lead to draw the conclusion that welfare dependency threatens social stability without overtly demonizing poor racial and ethnic minorities as the type of welfare beneficiary being stigmatized in the argument.

The tenets of color-blind racism assume that the speaker desires to communicate race meaning without using language that carries expressed racial content (Bonilla-Silva, 2001). Terms are used that have no race meaning of themselves, but when they are used in an observable pattern or in a given social context contain an implied racial or ethnic content. Mr. Austin draws upon a dominant group frame which down plays or even negates the existence of race for a variety of issues he cites that have well documented outcomes differing by race and ethnicity (Wilson, 2009).

The media has played an important role in constructing the images of (primarily) poor Black and Latino women, often stigmatized as *welfare mothers*,

who also reside in public housing or “projects” (Gilens, 1999; Seccombe, 1999). A transformation in federal housing policy led to public housing being recognized as a racially segregated social space for poor inner-city minorities (Wilson, 2009). The label “single-parent” is associated with other stereotypes held by dominant groups for poor women of color such as unwed mother, hyper-sexual, or promiscuous. As long as the dominant group benefits from the reproductive capacities of women of color (i.e. chattel slavery or as cheap labor) their fertility is framed more positively (Roberts, 1997). However, as poor women of color, especially Blacks, gain greater access to social welfare benefits, their fertility is represented by elites as requiring surveillance and discipline to promote fiscally responsible use of public resources by social welfare agencies (Nelson, 2003; Neubeck and Cazenave, 2001; Roberts, 1997; Silliman, 2004). Whites (as dominant group members) generally feel a sense of entitlement to the economic and financial resources of the state. And, out of this awareness of group position, view higher fertility rates among poor racial and ethnic minorities as unwarranted claims against these resources (Blumer, 1958).

According to Collins (1999), women are tasked with the gendered role of social motherhood, and they are held chiefly responsible for socializing children into their established social roles. The witness uses the following argument to stigmatize poor, unmarried mothers on welfare as failing to perform their role in socialization: “Both juvenile and adult offenders typically came from single-parent or no-parent homes...and did not receive the nurturing, care and parental love necessary for normal development in a competitive society.” This claim is a re-

articulation of eugenic ideology with similar charges previously made about the “feeble-minded” and “unfit” women who produced socially inadequate children unable to function normally in society due to the genetic influences of defective germ plasm. This construction is designed to accomplish two goals 1) to activate existing dominant group stereotypes that welfare mothers are irresponsible parents who produce children that are unwanted, unloved, and uncared for, resulting in the children being unable to assimilate traditional values, morals and culture; and 2) to stigmatize the social welfare system as incentivizing irresponsible reproductive behavior among poor women of color. The speaker can confidently advocate for the curtailment of the fertility of poor minority women on welfare, not by overtly targeting their fertility, but by calling for the elimination of the current welfare system as the causal factor for social dysfunction.

The witness suggests that the welfare system impedes the transference of traditional American values and social norms, thereby contributing to social inadequacy and resulting in crime and low educational attainment. The primary implication is that family creation and structure are the sources of most social problems of the poor, and that the public welfare system undermines traditional values that impact how poor families are formed. The dominant group has the power to erect social and moral standards that are then imposed on subordinate groups and serve to maintain unequal power relations. According to this logic, the poor are impoverished not because they have been historically oppressed, but because they fail to adopt the norms and culture of the dominant group. The implications of this argument are that poor women of color are failing as social

mothers in the responsibility of socializing their children into the traditional values and beliefs that support dominant group status. As in the previous selected passage analyzed, the public welfare system is described by a political elite as a source of oppression for the poor. The witness highlights the micro-level effects of domination on the poor through a system that was largely created by elites to reduce social inequality. Whites are held blameless for the legacy of legalized discrimination in employment, housing, education, and criminal justice that socioeconomically disadvantaged non-whites, requiring the federal government to provide subsidies where the free market has been unable to effectively create equal access to scarce resources.

A major focus of eugenic ideology is the control of human reproduction for the betterment of society. According to eugenics, the lower classes are generally less able to control their reproductive behavior than the more affluent upper class. Furthermore, eugenicists presume that wealth, moral character, and intelligence are positively related and heritable traits (Aldrich, 1975; Davenport, 1910; Galton, 1869; Guyer, 1916). Classical ideas of human degeneracy as an explanation for inequality underwent a major revision with the advent of transition theory. According to a re-articulated eugenic ideology (within transition theory), socioeconomic inequality is better explained by family size and socioeconomic status in societies undergoing modernization. Individuals seeking to improve their standard of living will limit fertility according to their economic situation. The notion that the chronic poor are somewhat less intelligent than the more affluent is a long held opinion in the U.S. and supported (in part) by the concept of

meritocracy (Gilens, 1999; Patterson, 2000; Rogers-Dillon, 1995). Eugenicists have used the links between intelligence, morality, sexual behavior, and socioeconomic status to explain chronic poverty and inequality. A similar theme appears in the next excerpted quote.

Medical Professional

“Causes of Poverty, With a Focus on Out-of-Wedlock Births, Hearing Before the Subcommittee on Human Resources of the Committee on Ways and Means, House of Representatives, 104th Congress, second session, March 12, 1996.” p. 67

Witness: Dr. Joe S. McIlhaney, Jr., M.D. President, Medical Institute for Sexual Health, Austin, Texas

“Our failure to break this cycle of teenage sexual activity will only allow further victimization of these young people. **Clients of the present welfare system represent a large group of people whose lifestyle includes activity that increases risk of out-of-wedlock pregnancy and sexually transmitted disease. These activities not only hurt the individual but they also hurt society.** You have heard some examples of that, another example is that 82 percent of incarcerated individuals, by one study, are high school dropouts, most of whom are from low-wealth communities. **Therefore, as much as we might like to separate all of these things there is no way of separating this potpourri of welfare, medical, and societal problems. For those in the welfare system, I think we need to provide a safety net for the extreme problems but we do not want to make it so comfortable that it induces people into the single parent family life that has helped produce two communities in our society.**”

The primary focus of this argument is to persuade the listener to make a subjective interpretation that welfare contributes to the social problem of sexual

promiscuity and illegitimacy. Race codes are employed as cues to induce elites to draw on socio-cognitive preconceptions about the sexuality of poor minorities who receive welfare benefits. I interpret this passage as containing racial meaning in a projective form calling for an inductive analysis of the text. The topic of the preceding passage is about the deviant “lifestyle” of a subgroup of the welfare population that increases the risk of out-of-wedlock pregnancy and sexually transmitted disease. The witness implies that the welfare system contributes to irresponsible sexual behavior, which is part of a broad array of societal problems. The speaker once again (as in other examples) uses the idea of community as a proxy for race and ethnicity due to the effects of residential segregation. Dominant group members are prompted to draw upon conceptual maps about clients of the welfare system who live in “low-wealth communities” that are different from their own. The interactive effects of class and race or ethnic discrimination contributes to the creation of “low-wealth” and racially segregated communities that elites can refer to without using racial or ethnic identifiers when communicating with other elites.

In this selection, the witness attempts to activate preconceived beliefs held by other elites that welfare promotes promiscuity and unwanted pregnancies: “[W]e do not want to make it so comfortable that it [welfare] induces people into the single parent family life...” Omi and Winant (1994) refer to this as a neoconservative argument that characterizes social inequality in terms of moral deficiency or failures of personal responsibility. According to welfare eugenics, dominant group members are prompted to use a conceptual map that frames

poverty as a moral problem. I contend that this approach is a re-articulation of eugenic ideology linking poverty, culture, and intelligence.

The witness uses a stereotype to communicate information cognitively held about racial and ethnic minorities: 1) that *they* (not us) live in “low-wealth communities,” an implied reference to racially segregated, poor communities, and 2) that *they* live in communities different from ours. In elite communication, subordinate groups are usually characterized as others so as to activate socio-cognitively held information about the identity of who is being othered by the speaker (van Dijk, 1993b). In this passage, a number of codes are used to convey that the speaker implies racial and ethnic minorities in his statement: “incarcerated individuals,” “high school dropouts,” “low-wealth communities,” and “two communities in our society.” It is not that these terms have any intrinsic racial meaning; they become cultural symbols for race in the mind of powerful elites once a mental map providing social rules governing relations with non-whites has been activated, as is often the case when the subject of welfare is discussed (Gilens, 1999; Nelson, 2003; Neubeck and Cazenave, 2001; Secombe, 1999; Quadagno, 1994; van Dijk, 1993a, 1998, 2000).

I also see a subtle gender bias presented in this testimony. The primary message conveyed is that the welfare system induces violations of traditional norms about family creation as a product of welfare dependency, which leads to the creation of two different communities: one filled with single parent families. The assumption is that a single parent family (normally female headed) is a

deviant family type and violates traditional norms and social values that undermine patriarchal gender roles that support male headed families.

In the structural domain, the social welfare system is held accountable for inducing welfare dependency on individuals, with effects being observed at the interpersonal level (social dysfunction). The welfare system is charged with instilling a culture of dependency on the state, attributed as the primary cause of social, criminal, and health problems for the poor. The federal government is accused of undermining the moral foundation of U.S. society by encouraging illegitimacy through the existing welfare system. In this respect, the federal welfare system is conceptualized as an oppressive institution which fails to support a socialization process for constructing ideal family types and reproduction of the existing social order. I interpret the rhetoric of *moral deficiency* and *individual responsibility* as a neoconservative racial project employed to accomplish the following aims: 1) to establish dominant group beliefs as the social and moral norms for poor minorities to emulate; 2) to foster the construction of a normative identity for subordinate group members; and 3) to facilitate a hegemonic reproduction of the unequal power relations maintaining White advantage, privilege, and dominant group status (Collins, 1999; Frankenberg, 1993; Myser, 2003; Omi and Winant, 1994). I interpret the projective racial content in this passage, consisting of elite discourse that explains social inequality in terms of a failure to internalize dominant group ideals and values about reproductive behavior, as a re-articulation of eugenic ideology embedded within the tenets of transition theory.

Summary

In chapter 7, I analyze discourse used to frame arguments about specific policy changes and how welfare beneficiaries are characterized during the welfare reform hearings of 1995 and 1996. A query of the data for eugenic ideology, using the combination of codes from all four code families, produced 15 passages considered to contain manifest or latent expressions of racist, sexist, or class-based discourse. The text is examined for evidence of coded racism in the form of stereotypes, labels, or cultural symbols to stigmatize welfare beneficiaries as needing some form of federally funded fertility control (i.e. contraception, family planning education, or sterilization). I determined that discourse appearing only under the eugenic policy area/social problems code family contained elements of coded racism.

I found two selections that provided some indication that the speaker implied the need for fertility control and one passage that specifically mentioned it as a policy recommendation. In the first selection, (Dr. Shonkoff) social-class (“low-income”) is contextualized with stereotypes for typically non-white communities (“dangerous neighborhoods” and “below-average schools”) to communicate messages with implied racial content without using overt references to race or ethnicity. Then, “dependence on welfare” is associated with “out-of-wedlock births” to convey the idea that fertility control is needed to reduce minority dependence on social welfare programs. In the second quote, the Hon. Ed Austin uses just two codes to activate elite knowledge about the reproductive practices of poor minorities, “public housing,” and “single-parent.” Both witnesses are able

to communicate implied racial content in speech about places known to be inhabited by minorities, due in part to the lingering effects of racial segregation in housing. Violations of norms about acceptable reproductive behavior imply the need for fertility control once elites are prompted to use socio-cognitively generated maps about minorities receiving welfare benefits. In the final selection, Dr. McIlhanev more closely links welfare dependency to a “lifestyle” of sexual activity that produces social dysfunction and out-of-wedlock births, although he less clearly attributes a racial or ethnic identity to the welfare population being discussed. The identity of the targeted population must be inferred with additional context supplied in the testimony from two references: 1) racial disparities in the rate of incarceration, and 2) the social meaning of “low-wealth communities.” The effects of structural racism serves to maintain systemic inequality that contributes to a racialized social location (and identity) in society. Elites may only need to mention the places known to be inhabited by non-whites (i.e. poor schools, prisons, or impoverished communities) to communicate race meaning in discourse without overtly mentioning race or ethnicity. These findings are important but insufficient to support a theory of welfare eugenics. It appears from analysis of the data sampled that elites do not rely upon the use of coded racism in any substantive form to stigmatize welfare recipients for fertility control policies during the welfare reform hearings of 1995 to 1996. However, I gained new insights on the practice of subtle forms of elite discourse that use expertise about the outcomes of systemic inequality to communicate knowledge about racial and ethnic minorities. I provide a summary of those insights here.

Structural racism (i.e. segregation, employment discrimination) allows geographic and social locations to be used as stereotypes for minorities. A color-blind approach to welfare reform calls for termination of the entire system to end welfare dependency while avoiding charges of racism. In the 1990s, powerful elites appear to have developed more sophisticated systems of communicating White advantage and dominance in an effort to maintain their status without being viewed as racist. The welfare system is described as undermining the traditional role women perform in socializing children into the values and beliefs of the majority group. An elimination of the welfare system will remove the incentive to reproduce children that the poor can ill afford. This perspective reflects the view that the state must act to change the fertility behavior of the subordinate population to protect the advantages retained by the dominant group. Poor women of color who rely upon the welfare system to maintain their families are stigmatized as being dysfunctional at socializing children into a system that is structured on power inequality that advantages Whites. However, elites frame their argument as a critique of the welfare state to avoid claims of racism. In the 1990s, a re-articulated eugenic ideology has shifted the discourse to a macro- and meso-level analysis of the institutions which support the reproductive behavior of poor women of color. Analysts who use a micro level lens to study the use of coded racism grounded in classic race prejudice may take a too narrow lens in the analysis. I apply this new insight in revising my original theory.

The debate over welfare reform is framed as a moral issue having social and economic implications. Welfare is viewed as a commodity to be used sparingly and only under certain acceptable conditions. Welfare is also characterized as an addiction that requires “tough-love” in weaning welfare addicts from dependency. During the hearings, witnesses were concerned with crime, health, children and families, poverty, and the socioeconomic costs associated with caring for poor and low income populations. However, policy recommendations are primarily centered on influencing the social and moral values of beneficiaries as they relate to improving one’s standard of living. These findings suggest that reform eugenics as a component of transition theory is evident in the data sampled from the hearings on welfare reform.

Welfare dependency is described as the fundamental cause of chronic poverty and socioeconomic inequality. According to the views present in the transcripts analyzed, the poor, especially racial and ethnic minorities, have become increasingly dependent upon the public welfare system. As a result, the poor have lost the moral character to control their reproductive behavior and lack the personal motivation to work themselves out of a condition of chronic poverty, which is attributed to the influence of the federal welfare system. According to my findings, the *socially inadequate* (to use eugenic terminology) need to have their economic reliance on the state substituted with self-reliance and moral teachings. On the surface, the discourse appearing in the welfare reform hearings seems logical. However, the lack of evidence I found for a re-articulated eugenic ideology in elite discourse stigmatizing the fertility of poor women of color does

not suggest that further study of the political intent of welfare reform should be discontinued.

In my estimation, powerful elites consider the persistence of racial and socioeconomic inequality to be largely characterized as assimilation failure. The failure of subordinated groups to adopt the traditional values and culture of the majority White population with respect to morality, work ethic, and family formation is touted as a major contributor to socioeconomic inequality. By the mid-1990s, the expansion of the public welfare system was unsuccessful in ending poverty in the United States. Public welfare is seen as impeding the socialization of traditional American values and undermining the moral fabric of the nation in what has been characterized as the underclass. Reform eugenics, with its emphasis on behavior modification and the social control of fertility, appears in the testimony as a solution to the welfare problem.

I expected to see discussions relying upon stereotypes, labels, and cultural symbols (coded racism) to stigmatize poor racial and ethnic minorities for fertility control measures that included temporary and permanent reproductive sterilization. I found very little evidence of coded racism in the welfare reform hearings. However, I unexpectedly found that the “germ plasm” suggested as the cause of social inadequacy during the eugenic period had become transformed into a rhetoric of welfare dependency in the debates over welfare reform. In postulating a theory of welfare eugenics, I theorized that stigmatization and social construction would occur on the micro level, exclusively targeting welfare recipients. What I found (and this was completely unanticipated), through an

intersectional investigation of the data, is social construction and stigmatization of the entire social welfare system, requiring a macro level of analysis to capture more fully the subtle dynamics of oppression operating in the structural and disciplinary domains of power. It is not the welfare recipient that is stigmatized but the bureaucratic nature and institutional processes of the social welfare system, that induce welfare dependency in the recipient, which must be terminated.

The intersection of race, ethnicity, class, and gender inequality seem to make even subtle racist political discourse somewhat obsolete. Dominant group elites can simply frame their argument in terms of cultural and moral failure to explain socioeconomic inequality. In some respect, this approach is not only a re-articulation of eugenic ideology but also a re-articulation of the meaning of *race*. The modified notion of race attempts to conceptualize dissimilarities in sociohistorical biographies, traditions, social norms, and culture as ethnic difference. In my estimation, race is re-articulated as ethnicity, and socioeconomic inequality is presumed to be a failure of minority groups to become fully assimilated into the majority population. This important finding leads to a re-specification of the parameters of my model to include additional levels of inquiry. In chapter 8, I present a revision of my theoretical perspective based on the research presented in this dissertation and suggest implications for future research.

Chapter 8: Towards A Theory of Welfare Eugenics: Findings and Revisions

Goals and Major Findings

I turn now to a discussion of how well the theory and methods guiding this study generated findings that answered my key research questions. I proposed two initial questions this research is designed to answer. I use findings from the qualitative coding of the data to address the first question raised in this study. The qualitative stage of my analysis allowed for a wider range of analysis of the data, since I did not restrict my coding to evidence of eugenic ideology appearing only in the form of coded racism (i.e. stereotypes, cultural symbols, labeling, and stigma). Results from the textual coding of the data generated strong evidence of discourse containing eugenic ideology in the eugenics period. This finding was expected as the data was intentionally selected for its eugenic content. To introduce this chapter I restate my original question separately and present my determination of how well each was answered by my analysis of data sampled from the eugenics, population crisis, and welfare reform periods respectively.

1. How has eugenic ideology appeared in elite discourse stigmatizing the fertility of the undeserving poor from the eugenics period of the 1920s to the period of welfare reform in the 1990s?

Eugenics Period (1920 – 1932)

The data analyzed from the eugenics period (1920 –1932) do not indicate much of an interest in addressing poverty or the needs of the poor. The following discussion represents a summation of the eugenic discourse appearing in the text analyzed. Poverty is deemed to be largely the result of moral, intellectual,

and cultural (for immigrants) inferiority attributable to defective germ plasm that must be “culled” from the general population through racial and custodial segregation, deportation (non-citizen immigrants), and sterilization. In the eugenics period, the idea of the undeserving poor is embodied in the broader concept of the *socially inadequate*. According to eugenic theory, social inadequacy refers to an overarching term for categorizing populations according to malformations, diseases, genetic defects, and social and psychological problems, all considered to be biological in nature and transmissible through the laws of inheritance (see table 5.2). The socially inadequate are not efficient members of the social system in that they do not contribute as much as the average person to a healthy and productive civil society. The undeserving poor form a dependent class of social inadequacy comprised of paupers, professional beggars, tramps, and vagrants who are believed to be addicted to dependence on public charity caused by inferior or defective germ plasm. Added to this list are the “feeble-minded” (developmentally challenged), habitual criminals, prostitutes, promiscuous women (including White women who have sex with Black men), and substance abusers. The dependent class of social inadequates are constructed by elites as representing an unwarranted social and economic cost to society. This group is broadly stigmatized as *degenerate* who are unworthy of public charity, and who should be kept from degenerating the healthy general population through control or termination of their reproductive capacity.

One of the aims of eugenic ideology is to guard against the adoption of inferior cultures and low intelligence. Both of these problems are discussed in

terms of the inability to self-regulate one's fertility. The implication is that a culture of sexual promiscuity and high fertility exists among the lower classes due to lower intelligence. Because of a presumed low intelligence, subordinate populations need social control of their fertility. Mental deficiency is explained as the reason why people cannot rise above poverty. Because the mentally deficient are unfit, they reproduce children who also are unable to rise out of poverty, and ultimately they pass their unfitness to the general population. Unfitness is characterized by a lack of intelligence to control one's own fertility. The 'mentally defective' cannot or will not limit their reproduction. The suggestion is that it takes higher intelligence to control one's fertility. Illegitimacy is an indication of mental deficiency and can be corrected through fertility control, including sterilization. Mental defectives who do not contain the hereditary traits for feeble-mindedness should nevertheless be sterilized as well, because they tend to maintain "homes in inferior environments...rear their children in an inferior manner" and produce children who fill the greater proportion of "criminals, prostitutes, paupers, and social misfits..." (Robie, 1932 p. 202).

Population Crisis Period (1965 – 1966)

In the population crisis period (1965 – 1966), the main focus of the congressional hearings concerns overpopulation and the exacerbation of poverty through lack of effective family planning techniques. From this study, I found that several powerful elites active in the eugenics movement of the 1900s to the 1920s became convinced that eugenic ideology needed to be reformed in light of the discrediting of the Mendelian single-gene theory and advances in genetic

research. Eugenic ideology was revised to focus its analysis of human variation from a biological emphasis to that of a social and cultural explanation. This shift in theoretical orientation retained the belief that intelligence and reproductive behavior were still somehow related to differential fecundity between different population groups (i.e. socioeconomic, race, or ethnic) but the transference of intelligence was thought to be socially and culturally mediated, as opposed to genetic.

The new approach dominated population studies under the perspective of demographic transition theory. For population experts and policy makers concerned about overpopulation, the solution to controlling population growth (and less directly, poverty) centered on changing the reproductive behavior of the poor and low income classes who are slow in adopting dominant group views about family size and socioeconomic status. As a result, the undeserving poor are socially constructed as *failing to limit their fertility* whether from ignorance, lack of access, or lack of discipline with respect to modern family planning. The children of the undeserving poor are characterized as an economic cost the poor could ill afford and one that elites are unwilling to bear. I find very little evidence that poor minorities are specifically stigmatized with stereotypes about their fertility. The discourse indicated more of a class-based concern with the fertility of the poor in general, and the potential for attitudes towards family creation to worsen socioeconomic inequality and poverty.

Policies that require a collaboration between public health and social welfare bureaucracies to deliver fertility control services to subordinate populations would

imply that their high fertility requires medicalization of a social problem.

Medicalization of family planning facilitates fertility control through existing distribution channels that already direct services towards the poor and minority populations. Public health departments serve a social control function when high fertility in subordinate groups is constructed as a health problem, instead of framing the problem as an issue of social justice or ethics. Socioeconomic inequality did not evolve without injustice or unethical treatment of poor minority populations. Instead, high fertility of the poor is constructed as deviant, presenting a health problem that necessitates combining fertility control with social welfare programs.

First, we must assume that dominant group elites are accurately representing the poor's knowledge of family planning methods. Second, family planning need not be medicalized; such a call reinforces the medicalization of fertility control for the poor. Combining both welfare service and benefits with indigent health care and family planning makes it easier for the state to monitor the contraceptive behavior of subordinate populations and opens the door to the imposition of administrative sanctions or intimidation for repeated births to welfare beneficiaries. Revisions to eugenic ideology (under transition theory) lead to an emphasis on the social control of fertility through influencing subordinate population's socio-cultural attitudes about reproduction, the economic value of children, and family creation. A reformed eugenics emerges in the post-war reconstruction period that retains social control of fertility as an essential tenet of eugenic ideology. Policy makers recommend that the government adopt policies

encouraging the poor to limit the size of their families as a component of federal antipoverty programs. A state-sponsored program for disseminating birth control propaganda primarily designed to induce changes in reproductive practices of subordinate populations is a re-articulation of eugenic ideology in the formation of family planning policy.

Welfare Reform Period (1995 –1996)

In the welfare reform period (1995 –1996), eugenic ideology had been embedded in population studies and family planning under transition theory for approximately 50 years. I find very little evidence in the transcripts of elite discourse stigmatizing the fertility of individual welfare beneficiaries. This was unexpected. I thought I would find references to “welfare queens” and other stereotypical characterizations of poor women’s reproductive practices. Interpersonal attacks denigrating the fertility of poor minority women are conspicuously absent in the qualitative coding of congressional testimony. Elites focus more on a critique of the welfare system as incentivizing promiscuity and immorality while undermining self-reliance and a positive work-ethic. The entire welfare state is stigmatized as producing a condition referred to as *welfare dependency*. Welfare beneficiaries are portrayed as victims of a system that traps them within cycles of poverty and economic stagnation transferred intergenerationally through a culture of poverty and dependency. My theory of welfare eugenics fails to account for both macro-level stigmatization of the social welfare system and stigmatization of subordinate group culture at the meso level

as being inferior due to welfare dependency. I make revisions to my theory based in part on these outcomes.

The “culture of poverty” and “culture of welfare dependency” rhetoric continues the emphasis elites place on changing the cultural attitudes towards the reproductive behavior of subordinate groups. Welfare dependency is touted as an unintended bi-product of the welfare state and is described as contributing to the social dysfunction of welfare beneficiaries. Two primary social problems are attributed to the failures of the welfare state: chronic poverty and illegitimacy. Poverty and welfare dependency are described as a health problem when referring to low-birth weight or out-of-wedlock births and are focused on children. The argument suggests that fertility control is related to poverty and welfare dependency and contributes to poor health outcomes in low income groups. The framing of the argument as a public health issue relating to family planning suggests that poverty and welfare dependency are health problems requiring fertility control of subordinate populations. The welfare system is described as contributing to out-of-wedlock births (i.e. sexual promiscuity and illegitimacy) or the “single parent life” that has produced two communities (I am assuming low-wealth and higher-wealth) both implied as a function of wealth and family structure. Elites suggest that at-risk groups require social control of their deviant lifestyles and advocate for the termination of the current welfare system, as it induces or supports social dysfunction in the welfare population.

Review of Theoretical Perspective

One of my main theoretical suppositions guiding this dissertation is that White racial superiority is a social fact embedded in every facet of U.S. society. As a result, racial inequities in socioeconomic status and reproductive rights will persist without a decentering and deconstruction of whiteness as normative (Myser, 2003). I believe that linking eugenic ideology with coded racism is a first step. I use results from the discourse analysis to answer the second of two questions as it specifically refers to the use of coded racism and stigmatization.

2. How has eugenic ideology, observed in elite discourse on issues pertaining to fertility, contributed to cultural symbols, stereotypes, and prejudice about the meaning of race difference in the United States?

In its original formulation, eugenic ideology is comprised of multiple theoretical perspectives adapted to form a belief-system that explains social inequality (i.e. race difference, human value, and social dysfunction) as expressions of human degeneration. I identify four primary frames pertaining to eugenic ideology as a belief system. The primary eugenic frames are White racial superiority, White purity, feeble-mindedness, and race-hygiene. Unlike the frames of color-blind racism, within the eugenics framework there is no attempt to hide the undergirding belief in White Supremacy as a primary tenet. Each of the central frames are grounded in the view that races are inherently unequal according to biological and genetic differences. The racialized system is based on White racial superiority, which is attributed to biological, intellectual, and

cultural superiority. The dominance of the White race is ensured through a belief in the frame of White purity and the avoidance of feeble-mindedness as an impurity that would taint whiteness and undermine racial superiority. The entire racialized system is to be maintained through social and cultural practices that protect the purity of whiteness under the frame of race hygiene. I believe that it is within these four basic concepts that eugenic ideology has made the most contribution to the language and symbols of racism in the United States.

The meaning of race difference is reproduced through the production of knowledge about Whites as the dominant group and non-whites (i.e. American Indians, Blacks, and Latinos) as subordinate groups. Powerful elites use their advantaged position to construct knowledge that becomes the traditions, norms, values, and belief-systems forming the dominant culture in society. Mental maps are constructed with language containing explicit and implicit meanings about others. Dominant group elites use language (i.e. cultural symbols and stereotypes) to activate attitudes and prejudices about others that are cognitively stored in mental maps designed to influence social behavior in ways that reproduce inequality. In this way, eugenic ideology contributes to the production of knowledge about the fertility of racial and ethnic minorities. Elites link the culture, intelligence, poverty, and reproductive practices of subordinate groups to social norms and values constructed by dominant group members. The “culture of poverty” and “culture of dependence” rhetoric, once deconstructed, exposes the contribution of eugenic ideology to the reproduction of racism in discourse

about the fertility of subordinate groups, whereby differential fecundity is re-articulated in an elite discourse of *assimilation failure*.

I compare the results from analysis of the data to determine how well a theory of welfare eugenics explains coded racism in elite discourse stigmatizing racial and ethnic minority welfare beneficiaries for fertility control initiatives. To accomplish this aim, I examine each of the main theoretical assumptions for welfare eugenics and assess how well my theory explained my findings. I then consider whether or not my findings answered each research question proposed.

The first two postulates describe a socio-cognitive process for structuring the rules guiding dominant and subordinate group relations. In accordance with the research design, I use a review of eugenic literature and results from a discourse analysis of transcripts and documents from the eugenics period (1920s to 1930s) to establish a reference for eugenic ideology. The identity, biography, hierarchy, and characteristics of dominant and subordinate groups are set forth within a eugenic ideological framework. An idealized American Race is socially constructed from the descendants of the European colonial founders and established as the legal, political, economic, racial, and social dominant group in the United States. Racial and ethnic minorities, especially American Indians, Asians, Blacks, and Latinos comprise the subordinate group.

The construction of an idealized American serves two primary functions. First, it establishes the cultural map providing all of the necessary traditions, historical interpretations, stereotypes, and cultural symbols furnishing the tools for the

socialization necessary to be recognized as an American. Second, it solidifies the position of the dominant group by furnishing the cultural map for Americanization through social institutions that support the dominant group's status. The creation of cognitive maps are founded on essentialist notions of race in the height of scientific racism, when it was believed that non-whites were culturally, biologically, and intellectually inferior to Whites. The presumed scientifically supported dominance of Whites and the ensuing experiences and social relations governing interactions with non-whites helped to authenticate an identity of White racial superiority. Whites occupy a dominant and privileged position rigorously defended and maintained, with an identity constructed through a history of structural racism. Once race is structured and institutionalized on a past legacy of essentialism it can be replicated without a conscious reliance on essentialist beliefs about race difference or overt mentioning of race. The institutionalization of racism allows for race to be re-articulated in non-racist terminology (i.e. class, culture, morality, and values) that reflects the reality of racial inequality without references to race or ethnicity. In order to truly eliminate racism, it is not sufficient to end individual race prejudice alone but in addition the systems and structures that have essentialist notions of race embedded in them (Frankenberg, 1993). An examination of subtle forms of racism accomplished through the use of coded language is required to uncover implied but hidden racist discourse that facilitates the reproduction of inequality and structural racism (Bonilla-Silva, 2006; Coates, 2011; Omi & Winant, 1994).

The dominant group uses its power to construct knowledge about groups who challenge traditional norms and interpretations of history that could undermine its superior position in society. Competing knowledge produced by subordinate groups about the causes of poverty, gender inequality, or racial discrimination could serve to deconstruct the traditional view that inequality is a function of meritocracy, work ethic, or ingenuity. The traditional view of inequality allows for the fertility of the poor, combined with lower intelligence and a poor work ethic, to be promoted as the cause of poverty requiring the social control of poor women's reproduction as a benefit to society. The loss of American cultural identity is thought to originate from the failure of new immigrants to discard political beliefs and cultural traditions that are incompatible with American values and democratic principles inherited from the founding colonists. Eugenic ideology attributes superior culture and civilization to superior races, therefore inferior immigrants (and racial and ethnic minorities) are seen as corrupting American culture when failing to assimilate, or when they continue to adhere to foreign ideals that threaten to undermine American democracy. I find strong support from my analysis of documents sampled from the eugenics period for the existence of socio-cognitive maps held by elites about dominant and subordinate groups that can be used to rationalize oppression.

My use of coded racism forms the main tenets of my theoretical framework and is similar to Omi and Winant's (1994) race codes, except I explain with more specificity how race meaning is intended in communication through activation of mental conceptual maps, shared by dominant group members, that are grounded

in essentialist notions of race created over time. The use of both concepts is similar, to effectively disenfranchise non-whites from access to resources or efforts to promote race targeted outcomes of equality. Omi and Winant (1994) discuss “code words” in terms of a political agenda of the “new right” to reverse the gains of the social movements of the 60s and 70s that increased minority claims against resources controlled by whites (Omi and Winant, 1994 p. 123) and born out of the same nativist movements reflected in the concerns over the threat immigration posed to the dominant White culture at the beginning of the 20th century. The new right relies upon a re-articulation of essentialist arguments of racial inferiority transformed into a more politically correct discourse about class and traditional values that contain implied racial meaning but avoid overt reference to race.

However, I see *nativism* itself as a re-articulation of essentialist beliefs about race popular during a time when overt racist discourse was widely acceptable. Both concepts address the same issues: racial and ethnic minorities do not deserve the equal recognition of rights and privileges accruing to Whites unless they have fully met the requirements established for them by elites and popular White sentiment: the adoption of dominant group values, culture, and beliefs. Their use of code words describes a macro-level analysis for the re-articulation of racial ideology primarily focusing on the involvement of the state, where my attention is largely situated, at the micro level where individual stigmatization occurs.

There is some difference between our approaches; Omi & Winant focus more on the rearticulation of racial meanings in political ideology (the new right) to explain how code words communicate implied racial meaning in political discourse. However, there is no adequate treatment of the socio-cognitive process that occurs when elites communicate implied racial meaning in language that avoids any mentioning of race, ethnicity, or gender. My use of coded racism attempts to capture a description of how implied meaning is communicated through the existence of cognitively held maps. These maps contain knowledge about subordinate groups constructed from essentialist notions of race activated through a re-articulation of racist ideology with the use of stereotypes, labeling, and stigma.

I specified a theory of welfare eugenics to largely focus on group prejudice against racial and ethnic minorities. The adoption of transition theory as a guiding principle in the development of global and domestic fertility control policy occurred after World War II, while essentialist conceptions of race difference were being challenged and discredited. The formulation of a reformed eugenics as a component of transition theory places more emphasis on class differentials in fertility. Therefore, my analysis of witness testimony finds more evidence of discourse advocating for a *class-based* fertility control policy (i.e. the poor and low-income) than discourse containing coded references to race targeted policies.

My interpretation of the data that contains elements of coded racism is that there also exists similar rhetoric about traditional values, morals, and culture in

relationship to family creation and poverty. One of my theoretical assumptions attempts to capture revisions to eugenic ideology that makes it adaptable to systems of domination not based on racial or ethnic prejudice. I find strong support for my claim that elites discuss the causes of poverty in terms of the failure of subordinate groups to assimilate mainstream views of work, morality, and traditional values in discourse that also contains evidence of coded racism. The model (in its simplistic design) attempts to capture stigmatization and social construction on micro levels of analysis.

However, my theory fails to account for discourse critical of the welfare state, which is more evident during the welfare reform hearings of 1995 to 1996. I address findings from this study with a revised theory that attempts to clarify how domination operates at the macro level during policy formulation; the meso level through enforcement of dominant group hegemony; and at the micro level on the social-cognition of welfare beneficiaries. I suggest that elites propose reforms to the social welfare system with the aim of eliminating welfare dependency by coercing poor racial and ethnic minorities to assimilate dominant group beliefs about work, sexuality, and the family. I view this forced assimilation of dominant group cultural values and social norms to be a form of internalized oppression. I present revisions to my original theory of welfare eugenics that incorporate the insights acquired from this research. The revisions are made according to my analysis of data sampled from the eugenic, population crisis, and welfare reform periods.

Modification of Original Theory

Mixed findings from this study prove somewhat difficult when attempting to separate out the effects of race and class in the discourse analyzed from 1965 to 1966 and 1995 to 1996, with a theory of welfare eugenics as originally specified. I do not find any support in the data for the proposition that elites use stereotypes or cultural symbols to stigmatize minorities for fertility control initiatives. In neither of the two later periods (i.e. population crisis or welfare reform) was there any use of racial or ethnic stereotypes to specifically denigrate minorities as being unworthy to receive social welfare benefits, nor any discourse indicating that they should be targeted for fertility control initiatives. I made an assumption about elite communication that may explain my non-finding of coded racism in the data analyzed. I believed that the context surrounding public congressional hearings would have little effect on elite discourse. It may be that elites expressed no interest in publicly targeting minorities for fertility control because public hearings are not the site where controversial policies are formulated. Elites may reserve discussions that could be seen as racist for *private* conversations with other elites. As a result, the data I chose to analyze may not contain a sufficient variation of elite communication types.

I do not find enough evidence in the data analyzed to suggest that elites use coded racism to stigmatize the reproductive behavior of subordinate groups to constrain their fertility choices. My assumptions that elites use coded racism in the congressional hearings analyzed to target minorities for fertility control initiatives are unsubstantiated. I cannot answer this question with the data and

methods used in this study. I believe that the absence of support for evidence of coded racism comes from a lack of fully understanding how elites use language in ways that can be interpreted as racist. It may be that controversial (racist) speech is reserved for different settings requiring a greater range of communicative events analyzed (i.e. private correspondence, personal communication, or speeches to like-minded constituents). However, I feel confident that I am able to discuss evidence of a re-articulation of eugenic ideology expressed in two general formats: 1) a reformed eugenics (as a component of transition theory) occurs in elite discourse that proposes changing subordinate group attitudes, values, practices, and culture about family creation, structure, and size where it differs from that of the majority White population; and 2) the induction of an internalized form of oppression in non-white welfare beneficiaries, stigmatized as suffering from welfare dependency through a failure to voluntarily assimilate traditional middle and upper class cultural values that serve as proxies for White racial superiority. Given these findings, I present a reformulated framework that explicates the concept of welfare dependency as a re-articulation of eugenic ideology and apply those insights in revising my original theory under the new designation of assimilation eugenics.

Welfare Dependency: A Re-articulation of Eugenic Ideology

I observe the following stated or implied objectives in my analysis of the discourse on welfare reform and family planning: the transformation of the poor and low income earners into a tax-paying working class; the improvement of sexual and reproductive health; strengthening of the institution of marriage; the

encouragement of two parent male-headed families; and the socialization of law-abiding members of society. I interpret the latent policy intent of discourse about the delivery of federally subsidized family planning services within the public welfare system as having three fundamental policy goals.

The first aims to reduce the number of children born to the poor who potentially may become future welfare beneficiaries. The optimum family size recommended for the poor reflects standards acceptable to traditional norms established by Whites as a racialized dominant group according to a reformed eugenics appearing under the tenets of transition theory.

I consider the second goal to be a racial project (Omi and Winant, 1994). As a racial project, state support (through funding and policymaking) of dominant social class values that promote norms concerning human reproduction, family size and structure, gender roles, work ethic, and cultural values serve to impose the ideals of White racial superiority upon poor racial and ethnic minorities through stigmatization of social problems and related causes associated with welfare dependency. White racial superiority is communicated through a coded discourse about traditional values. Traditional White middle- and upper-class values are incorporated within a re-articulation of eugenic ideology that substitutes discourse about morality, culture, and social class for open expressions of White racial superiority (Omi and Winant, 1994). Under a state sponsored hegemony, family planning (delivered through the welfare system) is formulated by elites at the macro level with a policy objective of compelling poor

racial and ethnic minorities to adopt values that support a racialized social system advantaging Whites.

Omi & Winant refer to this type of racial project as a rearticulation of racist ideology by the “new right” who use code words that contain implied racial content while avoiding overt references to race. The authors state that a racial project is deemed racist when it directly connects essentialist conceptions of race to social structures that legitimate domination based on racial inferiority.

However, I disagree with this view somewhat. I assert that when a structure is erected on the basis of the inherent biological inequality of races, racial projects do not need to contain overt references to race to reproduce structural racism. For example, a racist racial project would suggest that socioeconomic inequality is due to the intellectual and cultural differences between races according to a transference of inferior genetic traits in the impoverished racial group. Cultural deficit and class-based explanations simply remove race from the equation (through re-articulation), implying that racial and ethnic minorities can assimilate dominant group traditional values that will increase the opportunity for upward socioeconomic mobility. The discourse of the new right relies upon language about class, culture, and traditional values which I contend are inherently racist in a socially stratified society that supports privileged status of Whites as the dominant group. To take this point one step further, I believe that any project that fails to address the normativity of White privilege within a racialized social system that advantages Whites is inherently racist, whether overt references to race are expressed or not.

The third goal concerns population demographics. Family planning education targets the poor, who represent a large proportion of racial and ethnic minorities. State-funded efforts to limit the fertility rate of non-whites would (intuitively) skew a population growth rate that advantages Whites. However, I did not investigate this premise in my research. Enforcing fertility control policies on poor and racial and ethnic minorities that encourage them to limit their family size according to norms about the socially constructed idealized American family would contribute to the continued socioeconomic dominance of Whites as a racialized group.

In the eugenics period, eugenic ideology identifies defective or inferior germ plasm as the presumed cause of human degeneration. Welfare dependency (or simply, “welfare”) is reified under a re-articulation of eugenic ideology as the newly recognized defective *germ plasm* that explains a range of social dysfunctions: low literacy, poverty, high fertility rates, social, moral, and cultural deviance, crime, and family instability. Welfare dependency is transmitted through a “culture of poverty” defined as an intergenerational attitude undermining traditional values of self-reliance, a strong work-ethic, and assimilation into mainstream culture, moral values, and norms (Nisakanen, 1996; Seccombe, 1999). Dependence on social welfare programs explains chronic poverty, crime, illegitimacy, family instability, violence, and substance abuse. “Welfare” is also described as the cause of the breakdown of the traditional two-parent, male-headed family; resulting in the imposition of an unwarranted social and economic cost to the state in caring for the welfare dependent. These conditions raised similar concerns to those of eugenicists in the 1920s and 1930s

about degenerates, defectives, unfit, socially inadequate, and the feeble-minded. In my estimation, elites produce knowledge about the welfare system as the site for reproducing social inadequacy in subordinate populations who prefer welfare to employment and intentionally (or carelessly) produce children to qualify for a range of social welfare benefits.

Advocates of welfare reform promote termination of welfare dependency through family planning, time limits, work requirements, child-support enforcement, sanctions, and family caps in the process of eventually ending the welfare system presumed to be the cause for the cultural replication of welfare dependency (Schram, 2002; Seccombe, 1999; Smith, 2007). Under re-articulation, welfare reform serves to protect the 'American family' from degeneration and to re-establish 'American values' that are considered to be under assault from welfare dependency. In this dissertation, I treat White racial superiority as normative and a social fact, meaning that (unless specifically clarified) references to traditional *American values* or the *American family* implies middle- and upper-class Whites in the minds of powerful elites.

The two primary factors described in the text as contributing to welfare dependency are poverty and illegitimacy, reproduced through subordinate group cultural values about work and sexuality. Family planning facilitates the social control of reproduction as a primary policy for addressing these two social problems. Accordingly, the welfare system subsidizes illegitimacy and must be terminated to force assimilation of traditional values that indirectly support dominant group status. From my interpretation of the data, eugenic ideology is

not only embedded in the social institutions responsible for delivery of social services to the poor, but it is also reproduced at the interpersonal level as beneficiaries interact with the public welfare bureaucracy funded through a political system controlled by powerful elites.

Revised Theoretical Model for Assimilation Eugenics

Assimilation eugenics is the coerced assimilation of dominant group norms, culture, and traditional values imposed upon subordinate group members to reduce their dependence on public welfare programs. A re-articulation of eugenic ideology substitutes a discourse about defective germ plasm and social inadequacy with a rhetoric of welfare dependency as the fundamental factor explaining systemic poverty and social dysfunction. Welfare dependency is presumed to be a failure of subordinate group members to fully assimilate dominant group traditional values about work ethic, meritocracy, morality, and family creation. A theory of assimilation eugenics explains discourse about the termination of the social welfare state as primarily an institutional stigmatization of the entire social welfare system to end the social and cultural reproduction of welfare dependency at the interpersonal level.

A process by which the internalization of dominant group ideology (i.e. culture, traditional values, norms, and belief-systems), assimilation eugenics is imposed on relatively powerless subordinate groups through institutionalized disciplinary measures. The ultimate objective for assimilation eugenics is to hide oppression and explain poverty in terms that fault subordinated groups for their inability to end dependence on public welfare. At the macro- and meso-levels,

elites blame the entire social welfare state as the site for reproducing socioeconomic inequality by creating a system of dependency on public charity that is counter to traditional values of meritocracy and work ethic. In turn, inequality is explained at the micro level as failure of subordinate group members to adopt the cultural attitudes and social values that will facilitate socioeconomic mobility into mainstream society. Eugenic ideology is re-articulated into non-racist terminology using frames containing discourse about “traditional values,” “morality,” “work ethic,” “personal responsibility,” “job creators,” “tax payers,” “law-abiding citizens.” and “the American family” as code words representing White privilege and dominant group status (Bonilla-Silva, 2001; Coates, 2011; Feagin and Elias, 2013; Omi and Winant, 1994). These themes avoid any reference to social justice, structural inequality, colonization, or chattel slavery, all of which contribute to a racialized social system that situates Whites as the dominant group (Bonilla-Silva, 2001).

Oppression is hidden when subordinate groups are compelled to internalize a discourse that effectively constructs their beliefs, traditions, values, and culture as being inferior to that of the dominant group as an explanation for structural inequality. Subordinate group members who choose to assimilate into mainstream society based on the assumption of their inherent cultural and social inferiority will be less likely to challenge a discourse that excludes the historicity of how structural inequality developed in the United States (i.e. colonization, slavery, racialization, and patriarchy). A failure to challenge the normativity of belief-systems, traditions, and values constructed by Whites as the dominant

group effectively leaves unequal power relations intact. *Through coerced assimilation, subordinate groups become “more fit” to reproduce the social and cultural values that support and maintain White racial superiority.*

According to the modifications of my earlier framework, I make a preliminary prediction about how assimilation eugenics might be used by powerful elites. In societies with multi-racial and multi-ethnic populations, socioeconomic disparities will lead to the formation of dominant and subordinate groups (vis à vis power inequality). When this differential falls along racial or ethnic lines, there is a greater potential for the implementation of fertility control policies that serve to maintain class, racial, or ethnic inequality. In patriarchal societies, fertility control policies will impact women more negatively than men. The multiplicative effect of structural inequality on fertility control policies in racially and ethnically mixed, socioeconomically unequal, male-dominated societies will negatively impact poor minority women more often than any other groups. Under these conditions, female subordinated group members are more likely to have their reproductive behavior stigmatized as deviant and experience disciplinary measures designed to force assimilation of patriarchal dominant group norms, culture, and belief-systems.

Importance of Dissertation in Advancing Sociological Theory and Knowledge

I maintain the view that sociologists have under-theorized the influence of eugenic ideology in maintaining race prejudice and its influence on social welfare policy in the post-Civil Rights era. Patricia Hill Collins' (1999) “controlling images”

is closer to my idea of coded racism as a means of activating socio-cognitive representations (through stereotypes, symbols, etc.) about minorities to evoke a dominant group response in maintaining unequal relations. Controlling images are discursive products for communicating knowledge about subordinate groups that maintain systems of oppression and domination. Their purpose is to make structural forms of inequality such as poverty, sexism, and racism appear normative, thereby blaming the victims of oppression and injustice for their subordination and oppression while hiding the agency of the dominant group in maintaining systems of oppression (Collins, 1999). Collins goes further than I in demonstrating how controlling images do the boundary work that delineates dominant and subordinate group relations. These boundaries are maintained by “othering” subordinate groups. By framing the socioeconomic inequality of racial and ethnic minorities as a function of inferior cultural practices, values, morality, and work-ethic, Whites are also able to legitimize their dominant position as attributable to a superior belief-system, morality, traditional values, and a system of meritocracy. Welfare recipients are othered through their failure to assimilate dominant group culture and values, and therefore they become subject to the justifications that they be disciplined and controlled. Controlling images do the intellectual work of maintaining structures of oppression.

However, I see my theoretical contribution as demonstrating the significance of the legacy of eugenic ideology as an applied policy for institutionalizing structural inequality in the systems of intersecting oppression so aptly described by Collins (1999). I believe that sociologists have under-theorized the impact of

eugenic ideology in structuring and maintaining the socio-cognitive maps that dominant groups members rely upon for knowledge about racial and ethnic minorities. The fundamental idea for “othering” racial and ethnic minorities is (according to eugenics) to prevent the tainting of the White purity believed to be a critical component of White racial superiority. The symbolic boundaries created by the use of controlling images that construct a hierarchy of social identities inhabited by subordinate and dominant group members represents a re-articulation of eugenic beliefs justifying segregation and fertility control to prevent threats to White racial superiority from overpopulation of the poor and racial and ethnic minorities.

I believe that I have found some support for new perspectives about the relative significance of factors such as social structure and culture in perpetuating systems of racial and ethnic inequality normally attributed to classic race prejudice alone. Wilson (2009) suggests an alternate framework for analyzing racial inequality, one that incorporates a study of the independent factors of culture and structure, along with their interactive effects, on the reproduction of racial inequality. According to his new thesis, Wilson suggests that sociologists investigate the structural forces that have explicit racial outcomes (i.e. Jim Crow segregation, voting rights violations) and those that indirectly produce race effects leading to racial inequality. Social structure is defined as “the way social positions, social roles, and networks of social relationships are arranged in our institutions, such as the economy, polity, education, and organization of the family” (Wilson, 2009 p.4).

The two types of structural factors considered to produce direct effects on outcomes for different racial and ethnic groups are social acts and social processes. In a socially stratified society, social acts describe individual behaviors of members (such as stereotyping or stigmatization) when the actions are performed by powerful individuals or groups over subordinated others (i.e. racial and ethnic minorities). Social processes are the institutional practices that facilitate social relations among all members of society. These processes can be explicitly racist (i.e. Jim Crow segregation and mortgage racial covenants) or reflect “more subtle institutional processes” such as federal and state transportation policies that reinforce segregated neighborhoods, cuts in federal aid to cities with large minority populations, or mortgage practices that “redline” minority neighborhoods in promoting fiscal responsibility. For Wilson (2009), those concerned about the persistence of racism should place special attention on the indirect political and economic forces that reproduce racial inequality. Indirect forces can consist of policies that are not “explicitly designed or publicly discussed as matters involving race” but have the effect of producing outcomes that reinforce structural racism because they are “mediated by the racial groups’ position in the system of social stratification” (Wilson, 2009 p. 5-6).

Cultural forces are instrumental in contributing to racial inequality. The two forms of cultural forces discussed are (1) the widely held macro-level beliefs and views on race (2) and the “cultural traits - shared outlooks, modes of behavior, traditions, belief systems, worldviews, values skills, preferences, styles of self-presentation, etiquette, and linguistic patterns” produced within social

environments through intra-group social relations and responses to discrimination and prejudice by racial and ethnic minorities who largely occupy those social environments. According to Wilson (2009), an ideology of “racial domination” has been “one of the most prominent American cultural frames” that has exerted a consistently strong influence on shaping social relations between Whites and Blacks. I would extend this logic to include all nonwhite racial and ethnic minorities such as American Indians, Asians, and Latinos. Racial domination contains two core postulates: (1) races are inherently unequal, either biologically or culturally, and (2) the ascribed inferiority of the subordinate race is used to explain treatment, “social position,” and “collective accomplishment” (Wilson, 2009 p. 15).

My interpretation of the data indicates that an ideology of White racial superiority is inextricably embedded (through dominant culture) within both the social acts and social processes forming the structures of racial domination and subordination in society. What Wilson (2009) asserts as the “most prominent American cultural frame” I contend is White racial superiority re-articulated in a framework of traditional values, work ethic, and morality that provides the ideological support for a system of social stratification privileging Whites with power and status as a racialized group. Like Wilson (2009), I theorize on the use of stereotyping and stigmatization in the process of oppressing subordinated groups. However, where Wilson treats the same indirect effects as being somewhat less intentional or even unconscious in producing racial outcomes, I include an explanation for how coded language is employed to accomplish the

indirect effects that reproduce racial inequality. Although he clearly accounts for how both direct and indirect racial outcomes are mediated through class inequality. Powerless groups (i.e. low or unskilled laborers, the unemployed, and welfare recipients) are generally unable to protect themselves from policies that have greater impact on the poor because they are generally less able to supplement reductions in income (i.e. off-shoring of low-skilled employment, regressive tax policies, and drastic cuts in transfer payments). Past racism may have helped to concentrate poor racial and ethnic groups into socioeconomic groups, making them more susceptible to the class effects of policies unintentionally leading to direct racial outcomes. I modify my original theory based on this perspective to explain how elites rationalize policies having a greater impact on poor racial and ethnic minorities with a rhetoric of assimilation failure as justification for reducing expenditures on public welfare programs.

Eugenic ideology provides the *common sense* for the ideology of racial domination that Wilson refers to as the “American cultural frame.” In other words, I see both a structure and culture of racial domination proceeding from eugenic ideology whose central frames (i.e. White racial superiority, White purity, feeble-mindedness, and race hygiene) are re-articulated within an assimilationist discourse that uses the cultural and social failures of racial and ethnic minorities as an explanation for poverty and welfare dependency. The cultural and traditional values argument describing the socioeconomic inequality of subordinate minority groups is an argument for race difference by another name. A discourse that characterizes the socioeconomic position of minorities who

become dependent on public welfare as assimilation failure effectively relies upon a re-articulation of eugenic ideology, grounded in terms that expressly avoid the mentioning of race or ethnicity.

Implications for Health Policy and Future Research

If subordinate groups are to some measure coerced into adopting dominant group norms and beliefs to gain access to scarce resources, are there any deleterious effects that extend outside of social welfare policy? Interpersonal interactions with institutional bureaucracies embedded with the normativity of White racial superiority replicate the inferior social position of non-whites. The normalness of whiteness allows for the institutionalization of social processes that reproduce White racial superiority to be re-articulated in non-racial terminology.

Institutionalized racism has been cited as a significant contributor to health inequity for subordinated minority populations. Institutions often reflect the norms, values, and belief systems that structure social relations endemic to society. Institutions can function in ways that perpetuate oppression and discrimination through a variety of mechanisms. Racism becomes institutionalized when it is embedded in the policies, procedures, and organizational culture of an institution, as well as in the personal attitudes of administration and staff (Griffith et al., 2007). Institutional racism extends beyond the organizational structure, impacting the community it serves, other institutions, and public policy. As a result, “[i]nstitutional racism describes how organizations are affected by larger institutions (i.e., regulatory, economic, political, professional) and are shaped by

the sociopolitical and economic contexts that frame an organization's policies, procedures, and functioning" (Griffith et al., 2007 p. 289). At the interpersonal level, the concept of administrative evil describes how administrators and staff can adhere to high professional standards and canons of public service, while functioning in ways that are harmful or morally unethical, without being aware of their own complicity. With respect to health care, providers often have an unequal power relationship with patients, who rely on the unbiased attitudes and opinions of medical professionals when seeking care. However, administrative evil can "influence the quality of healthcare patients receive and whether that care is different because of their race, ethnicity or other demographic factors" (Griffith et al., 2007 p. 291).

Research indicates that health inequity for marginalized groups is linked to the prevalence of stereotypes held by health care providers. Racism, "initiate[s] a series of acute and enduring changes in cognition, affect, behavior, and psycho physiological responses" (Brondolo et al., 2009 p. 3). The impact of racism on perception and behavior impacts both the target of racist attitudes as well as the perpetrators. Racial stereotypes were found to negatively influence the decision-making ability of healthcare professionals in four ways:

1. Curtailing treatment options offered to minority patients.
2. Strengthening existing stereotypes of minority patients.
3. Conveying "lowered expectations" in treatment outcomes.
4. Communicating higher levels of pessimism for minority patient's outlook for the future (Griffith et al., 2007).

The Institute of Medicine has found that healthcare disparities are subject to historical injustices and social inequalities that are influenced by racial discrimination “Including stereotyping and prejudice on the part of healthcare providers” (Griffith et al., 2007 p. 291).

In what way would health effects linked to institutionalized racism also arise from coerced assimilation? Dominant group institutions embedded with White racism replicate knowledge about the superiority of Whites that may become internalized by minorities who routinely interact with such institutions. As minority group members are constantly reminded of their inferiority with respect to Whites, they may come to believe their presumed inferiority, leading to “self-stereotyping” or internalized racism. Internalized racism can lower one’s self-esteem, increase anxieties, produce negative views of one’s abilities, cause reactions that can have unfavorable consequences for social and psychological well-being, as well as influencing health behavior and creating multiple health outcomes (Kwate and Meyer, 2011; Neighbors and Williams, 2001; Slavin et al., 1991; Williams and Mohammed, 2013). The effort to influence poor racial and ethnic minorities to assimilate dominant group culture to gain access to public resources based on a cultural defect argument is racism by another name. Jones and Carter (1996) define *cultural racism* “as the belief that the characteristics and values of one’s racial group are superior to that of other racial groups.” A re-articulation of eugenic ideology, appearing as the rhetoric of a “culture of poverty” and a “culture of dependency,” can increase the internal stigmatization of racial and

ethnic minorities who are also socioeconomically insecure from the experience of chronic poverty, thereby increasing stressors for health-related illness.

The goal for future research should focus on developing better means of capturing the health effects of psycho-social stressors related to policies that effectively coerce vulnerable minority populations into adopting dominant group norms, belief-systems, and culture.

Institutionalized Racism is Embedded Cultural Racism

The acknowledgement the mental frames that are relied upon by members of the dominant group helps to explain the persistence of racist effects (biases resulting in discriminatory practices) on subordinate populations. Racism embedded in institutional processes is difficult to detect and therefore difficult to eradicate. However there exists little consensus on theories or methods for detecting non-overt expressions of racism. New research needs to develop better methods of detecting these subtle forms of racism operating within institutions and organizations. One way of identifying the dominant group ideologies leading to discriminatory practices might be approached through an analysis of “cultural racism.” Cultural and other forms of covert racism implies a system of knowledge that is routinely drawn upon to inform practices that lead to unequal outcomes or maintain unequal relations. Research into culturally embedded institutionalized racism may shed light on stressors that generate health effects in subordinate populations. Stress-related health is impacted through multiple pathways that can generate negative emotional states producing psychological distress, create unhealthy behaviors (substance abuse and tobacco use), lead to poor sleep and

exercise habits, cause an inconsistent adherence to medical regimens, and can lead to changes in multiple physiological systems (i.e. neuroendocrine, autonomic, and immune systems) (Williams and Mohammed, 2009).

One such direction for future study should focus on the impact of stereotypes on health for stigmatized groups. There has been little systematic attention to the direct effects of stereotype threat on health. Stereotype threat comprises the “expectations, anxieties, and reactions that can adversely affect social and psychological functioning. (Williams and Mohammed, 2013 p.1161) However, existing research suggests the plausibility of at least one pathway. Psychological stress stemming from stereotype threat has been found to produce physiological responses (i.e. elevated blood pressure) from being stigmatized as inferior in subject populations (Blascovitch, Spencer, Quinn, and Steele, 2001; Williams and Mohammed, 2013).

I believe that a study of institutionalized racism will help direct needed research into stress-related illness to deepen our understanding of how multiple pathways of stressors operate across minority populations intersecting class, race and ethnicity, and gender. What needs clarification for stress-related health research is: how racism effects the emotional, psychological, and physical well-being of those subjected to its influence? No clear link exists between specific types of racism and the aforementioned conditions. The difficulty in measuring and conceptualizing stress-related illness caused by race-based discrimination may be difficult to determine when racism is less overt, as when it becomes institutionalized. The difficulty in capturing the health effects of institutionalized

racism may occur due to it being deeply ingrained in American culture, appearing as traditional values and social norms and producing the most significant effects on the individual level.

The Potential Health Effects of Internalized Racism

Future studies also need to provide a critical assessment of social welfare and health policies for coercive regulations or guidelines that induce psychosocial stress on vulnerable populations failing to assimilate dominant group norms and culture. A natural extension of my research would be to study the impact of institutionalized or cultural racism on individuals subject to the functioning of dominant group bureaucracies that impose disciplinary measures (i.e. welfare sanctions) for failing to conform to traditional values and social norms about work ethic or family creation. One such under-studied pathway is internalized racism. According to Williams and Mohammed (2013), prior studies suggest that internalized racism “indirectly affects health by decreasing motivation for socioeconomic attainment” (Kwate & Meyer, 2011). How then, from the preceding statement, do we consider policies and regulations that imply one has a cultural deficit, or culture of poverty negatively affect one’s health? In other words, does coerced assimilation indirectly affect health by increasing the stressor for internalized racism? Dominant group views of the failure of racial and ethnic minorities lack of conformation to traditional values may in part be a response to efforts to force assimilation or compliance to middle-class social norms. As a result, racial and ethnic minorities may react in ways that include adopting oppositional stances that lead victims of internalized racism to avoid

seeking health care, induce self-medication (i.e. substance abuse), and an increase in aggression, violence, and antisocial behavior that leads to criminality and incarceration (Williams and Mohammed, 2013). Findings from this study can contribute to our understanding of the health outcomes from coerced assimilation of subordinate populations.

Conclusion

I undertook this study with a few biased assumptions about the seemingly *obvious* correlations between the history of federally funded family planning and eugenics. Initially, I held the view that the legacy of sterilization abuses suffered by American Indian, Black, and Latino women were primarily due to race prejudice, and that eugenic ideology supplied the rationale for their involuntary sterilization. Also, I perceived the delivery of family planning services through a system of indigent care as primarily a cost savings device to reduce the number of poor minorities receiving social welfare benefits. I theorized that political elites targeted racial and ethnic minorities in public discourse using stereotypes to stigmatize the majority of poor minorities as being unworthy of public charity. My findings suggest that the conflation of race and class may ultimately make the use of racial and ethnic stereotypes to accomplish such aims *obsolete* when elites intend to communicate a discourse of prejudice and discrimination publicly. However, I firmly believe that poor women of color will continue to bear unequally the impact of fertility control policies, as long as a system that privileges male sexuality and the status of the dominant group directs family planning and social welfare policy.

In this dissertation, I hoped to lay the groundwork for future research that would lead to the development of new treatments for existing analytical techniques in policy analysis that could aid our understanding of how embedded racism continues to function in society. After revelations of Nazi atrocities became public, eugenics was discredited as a social policy because it was considered unethical (Leonard, 2005b; Ramsden, 2003; Szreter, 1993). Coerced and involuntary sterilization in the 1960s and 1970s was criticized and reforms were implemented on the basis that violation of female reproductive rights was unethical (Lawrence, 2000; Nelson, 2003; Ralstin-Lewis; Roberts, 1997; Silliman et al., 2004; Torpy, 2000; Volscho, 2010). It may be that a retrospective analysis of welfare reform and the effort of powerful elites to force subordinate groups to assimilate majority group values and social norms as a condition for socioeconomic security will also be considered unethical. A second insight gained from this study concerns the inter-subjectivity of White racial superiority. Depending on one's racial and ethnic identity, status, or positionality, White racial superiority may be unseen. What helps to make White racial superiority manifest is by challenging it. As long as it is an *unnamed* oppression it will be an invisible norm in U.S. culture and society. A third insight raises a question about my findings for assimilation eugenics and the concept of *cultural essentialism*.

The coerced assimilation of dominant group culture contains elements of cultural essentialism that may originate from a lingering nativist reaction to the influx of Eastern and Southern European immigrants at the beginning of the 20th

century⁵. The ensuing competition for cultural ascendancy at the turn of the century may have contributed to the view that the then prevailing American traditions and social norms are required for gaining citizenship and socioeconomic success in the U.S. and all groups seeking to advance must choose a path of assimilation in some significant degree.

If the idea of cultural essentialism means that there are “inherent cultural differences” between the dominant group and minorities then, these differences can be used to stigmatize and marginalize minorities as having somewhat inferior cultures used to explain inequality and their subordinate position. The concept of assimilation eugenics adopts a similar viewpoint. Both perspectives imply that the presumed differences are substantial enough (incompatible with the dominant group) to serve as barriers to assimilation and are therefore inferior to dominant culture and values. The “culture of poverty” and “culture of dependency” rhetoric suggests that those individuals who experience chronic poverty and are unable to free themselves from reliance on welfare have a deficient culture. In the context of welfare reform, chronic poverty, and immigration of “unassimilable races” it seems that the idea of cultural essentialism suggests a paradox. First, it says that minorities have incompatible ethnically or socioeconomically derived *cultures* and that these cultures are not immutable, in that they can learn to assimilate dominant group culture. What gives cultural essentialism its inherent

⁵ See Grillo, R.D. 2003. Cultural Essentialism and Cultural Anxiety. *Anthropological Theory* 3(2): 157–173; Verkuyten, Maykel. 2003. Discourses About Ethnic Group (De-)essentialism: Oppressive and Progressive Aspects. *British Journal of Social Psychology* 42: 371–391.

immutable connotation is the social context of welfare dependency. Welfare dependency and chronic poverty cannot change (i.e. are immutable) without a change in culture (i.e. traditions, values, and norms) assumed to explain the inability to escape systemic poverty and reliance on welfare. The use of cultural essentialism in this context implies that the welfare dependent are determined by their culture and does not acknowledge in-group differences between welfare recipients or individual agency.

In my view, members of the dominant group who believe that assimilation failure is attributed to the lack of success in adopting dominant group culture suggest several possibilities: 1) That socioeconomic upward mobility is defined in terms that are somehow *racialized* as being unique or essential to the White middle and upper classes and 2) are not general principles for social success that can be more directly linked to methods of social mobility generalizable across most or even all similar western style, multiracial, multicultural democracies. The first possibility suggests that a certain essentialism exists implying that the dominant group's culture is normative and that other cultures are incompatible for socioeconomic success and assimilation into the mainstream. The second suggests a certain non-essentialist take on dominant group culture with the assumption that non-whites can assimilate the cultural values, norms and traditions of the dominant group. A third possibility is that liberals and anti-racist Whites may perceive a direct relationship to the rise of a subculture of dependence and poverty in response to structural discrimination and understand welfare dependency as a *pathology* stemming from racism,

classism, sexism and oppression. They are diligently committed to countering the effects of all forms of structural inequality leading to chronic poverty and marginalization of subordinate populations by promoting a social justice oriented policy agenda.

The stigmatization of welfare dependency as assimilation failure provides the context for comparing cultural essentialism and assimilation eugenics. The treatment of dominant group values and social norms as being somewhat unique to Whites as the dominant racialized group in the U.S. links the meaning of cultural essentialism more closely with the concept of “cultural racism.” Cultural racism is defined as the belief that the traditions, beliefs, and values belonging to one racial group is superior to that of others (Carter, 2007). In this respect, cultural essentialism, cultural racism, and assimilation eugenics are closely associated when essential between-group cultural differences are relied upon to justify the imposition of disciplinary measures (i.e. welfare sanctions, family-caps, or eligibility work requirements) against welfare dependent racial and ethnic minorities who fail to adopt dominant group values, social norms, morals, and culture. Results from this study point towards a need to critically reassess how sociologists conceptualize, measure and understand the significance of *ethnicity* in studies of discrimination as *race* increasingly becomes re-articulated in terms of culture, and as the U.S. undergoes a major transformation population demographics.

The End

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U.S. House of Representatives, 104th Congress, 1st session, Hearings Before the Subcommittee on Oversight of the Committee on Ways and Means, "Child Care and Child Welfare", 1995.

U.S. House of Representatives, 104th Congress, 1st session, Hearings Before the Subcommittee on Oversight of the Committee on Ways and Means, "Contract with America: Welfare Reform, Part 2", 1995.

U.S. House of Representatives, 104th Congress, 1st session, Hearings Before the Subcommittee on Oversight of the Committee on Ways and Means, "Child Support Enforcement Provisions of PRWORA as Part of the CWA", 1995.

U.S. House of Representatives, 104th Congress, 1st session, Hearings Before the Subcommittee on Oversight of the Committee on Ways and Means, "Federal Adoption Policy", 1995.

U.S. House of Representatives, 104th Congress, 1st session, Hearings Before the Subcommittee on Oversight of the Committee on Ways and Means, "Welfare Reform Success Stories", 1995.

U.S. House of Representatives, 104th Congress, 2nd session, Hearings Before the Subcommittee on Oversight of the Committee on Ways and Means, "National Governors' Association Welfare Reform Proposal", 1996.

U.S. House of Representatives, 104th Congress, 2nd session, Hearings Before the Subcommittee on Oversight of the Committee on Ways and Means, "Causes of Poverty, with a Focus on Out-of-Wedlock Births", 1996.

U.S. House of Representatives, 104th Congress, 2nd session, Hearings Before the Subcommittee on Oversight of the Committee on Ways and Means, "Barriers To Adoption", 1996.

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U.S. Senate, 89th Congress, 1st session, Hearings Before the Subcommittee on Foreign Aid Expenditures of the Committee on Government Operations, "Population Crisis Part 2-B", 1965.

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Appendix

Table 4.1 Eugenic Ideology and Policy Applications (Supercode) Qualitative Code List

Table 4.1 Eugenic Ideology and Policy Applications (Supercode) Qualitative Code List Code Families			
Eugenic Principles	Eugenic Policy Areas	Eugenic Policy Applications	Eugenic Population Classifications (Social Inadequacy)
Dysgenic/Cacogenic: Race Degeneration Environment: Living Conditions	Criminals/Crime Immigrant	Custodial Institutionalization: Cost/Expenditure Deportation	Blind/Blindness Deaf
Eugenics	Immigration	Marriage Restrictions	Deformed/Physically- Handicapped
Fit/Superior Stock	Mental Health	Segregation: Custodial Institutionalization	Dependent/ Dependency
Genetic Defect	Physical Health	Segregation: Racial	Disease/Diseased
Germ Plasm	Poverty	Social Control	Epileptic/Epilepsy
Heredity	Prostitution/Prostitute Sexually Transmitted Disease	Social/Cultural /Moral Values	Feeble-Minded/ Moron/Idiot
Intelligence/Literacy Natural Selection/Darwinism	Social or Moral Deviance	Sterilization	Inebriate
Race	Socially Inadequate: Financial/Economic Cost		Insanity/Insane
Race Hygiene: Human Race - Maintenance	Socially Inadequate: Social Cost		
Race Hygiene: Racial Purity			
Race Hygiene: White Racial Impurity			
Race Hygiene: White Racial Purity			
Race Mixing: Miscegenation			
Racial Inferiority			
Racism/Racial Discrimination			
Sexuality			
Social Selection/Social Darwinism			
Socially Inadequate/Degenerate/ Unfit			

Table 4.2 Document List: Eugenics Period 1920 – 1932

Table 4.2 Document List: Eugenics Period 1920 - 1932		
Title	Date	Witness Category
Biological Aspects of Immigration. Dr. Harry H. Laughlin, Eugenics Record Office, Cold Spring Harbor, New York	4.16.1920	Foundation/Institute/Center
Analysis of America's Melting Pot. Dr. Harry H. Laughlin, Eugenics Record Office, Cold Spring Harbor, New York	11.21.1922	Foundation/Institute/Center
Europe as an Emigrant-Exporting Continent and the U.S. as an Immigrant-Receiving Nation. Dr. Harry H. Laughlin, Eugenics Record Office, Cold Spring Harbor, New York	3.8.1924	Foundation/Institute/Center
The Eugenic Aspects of Deportation. Dr. Harry H. Laughlin, Eugenics Record Office, Cold Spring Harbor, New York	4.28.1926 & 2.21.1928	Foundation/Institute/Center
Special Capacities of American Indians. W. Carson Ryan, Jr., Director of Education, U. S. Indian Service	4.21.1932 - 4.23.1932	Federal/State/Local Agency
Report of the Committee for the Study of the Eugenic and Dysgenic Effects of War. Professor Corrado Gini, Rome, Italy	4.21.1932 - 4.23.1932	Academic
Birth Rates of Coeducational Graduates. Mrs. Caroline H. Robinson, Swarthmore, Pennsylvania	4.21.1932 - 4.23.1932	Academic
Control of Immigration. Dr. D. F. Ramos, Havana, Cuba	4.21.1932 - 4.23.1932	Medical Professional
Selective Sterilization for Race Culture. Dr. Theodore R. Robie, Essex County Mental Hygiene Clinic, Cedar Grove, N. J.	4.21.1932 - 4.23.1932	Medical Professional
A Discussion of Sir Bernard Mallet's Paper on "The Reduction of the Fecundity of the Socially Inadequate." E. S. Gosney, President, Human Betterment Foundation, Pasadena, California	4.21.1932 - 4.23.1932	Foundation/Institute/Center

Table 4.3 Document List: Population Crisis Period 1965 – 1966

Table 4.3 Document List: Population Crisis Period 1965 - 1966		
Witness	Date	Witness Category
George J. Hecht, New York City, publisher of Parents' magazine and chairman of the American Parents Committee	7.21.1965	Private Agency/ Council/Association
Dr. Ernest M. Solomon, Chicago, Ill., gynecologist and obstetrician, representing the Commission on Social Action of Reform Judaism	8.10.1965	Private Agency/ Council/Association
Harold O. Swank, Springfield, Ill., director, Illinois Public Aid Commission	9.15.1965	Social Welfare/ Public Health Agency
Dr. Polykarp Kusch, physicist, 1955 Nobel Prize winner for physics	1.19.1966	Academic
Dr. Kermit E. Krantz, Kansas City, Kans., professor and chairman of obstetrics and gynecology and professor of anatomy, University of Kansas Medical Center	3.31.1966	Medical Professional
Representative D. R. Matthews, Democrat, of Florida (Gainesville), a U.S. Representative from the Eighth Congressional District of the State of Florida	6.22.1965	Member of U.S. Congress
Dr. Alberto Lleras Camargo, former president of Colombia and president of the editorial board of the Latin American magazines Vision and Progreso	7.9.1965	Business/Labor Union
Dr. Andre Hellegers, Baltimore, Md., associate professor of obstetrics and gynecology, Johns Hopkins University Hospital	8.17.1965	Medical Professional
Irene Taeuber, Ph. D., Washington, D.C., senior research demographer, Office of Population Research, Princeton University	9.22.1965	Academic
Wallace Kuralt, Charlotte, N.C., director, Mecklenburg County Department of Public Welfare	9.15.1965	Social Welfare/ Public Health Agency
Dr. Philip M. Hauser, Chicago, 111., professor of sociology, and director, Population Research and Training Center and Chicago Community Inventory, University of Chicago	1.26.1966	Foundation/Institute/ Center
Mary Anne Rennolds, of the Virginia League for Planned Parenthood	6.15.1966	Private Agency/ Council/Association
Mrs. James Robinson, mother and churchworker	6.15.1966	Private Citizen
Ben H. Bagdikian, Washington, D.C., author of "In the Midst of Plenty: The Poor in America"	7.9.1965	Private Citizen
Dr. Mary S. Calderone, New York City, executive director. Sex Information and Education Council of the United States (SIECUS)	8.31.1965	Private Agency/ Council/Association

Table 4.4 Document List: Welfare Reform Period 1995 – 1996

Table 4.4 Document List: Welfare Reform Period 1995 - 1996		
Witness	Date	Witness Category
AUSTIN, Ed, Mayor, Jacksonville, Fla.; representing National League of Cities and Florida League of Cities	2.2.1995	Private Agency/ Council/Association
SHONKOFF, Jack P., (Dr.), Dean, Florence Heller Graduate School for Advanced Studies in Social Welfare, Brandeis University; representing American Academy of Pediatrics	2.2.1995	Medical Professional
HONKALA, Cheri, welfare recipient	2.2.1995	Private Citizen
GOLDSTEIN, James, Benefits Coordinator, AIDS Project of the East Bay	2.2.1995	Private Agency/ Council/Association
MYERS, Walt, welfare recipient	2.2.1995	Private Citizen
GANSKE, Greg (REPRESENTATIVE, REPUBLICAN-IA)	2.2.1995	Member of U.S. Congress
SHEPARD, Deborah, Director, Working Parents Assistance Program, Montgomery County, Md., Department of Family Resources	2.3.1995	Social Welfare/Public Health Agency
MORELLA, Constance A. (REPRESENTATIVE, REPUBLICAN-MD)	2.6.1995	Member of U.S. Congress
EBB, Nancy, Senior Staff Attorney, Children's Defense Fund	2.6.1995	Private Agency/ Council/Association
ZILL, Nicholas, Vice President and Director, Child and Family Studies, Westat, Inc.	5.10.1995	Business/Labor Union
GETER, Pier, administrative assistant	12.6.1995	Private Citizen
DALY, Sharon M., Deputy to the President, Social Policy, Catholic Charities, U.S.A.	2.20.1996	Religious
MILHANEY, Joe S., (Dr.), Jr., President, Medical Institute for Sexual Health	3.12.1996	Medical Professional
MILLER, George (REPRESENTATIVE, DEMOCRAT-CA)	6.27.1996	Member of U.S. Congress
LEVY, D. Bruce, Administrative Judge, Juvenile Division, Miami, Fla.	6.27.1996	Federal/State/Local Agency

Table 4.4 (continued)		
Document List: Welfare Reform Period 1995 - 1996		
Witness	Date	Witness Category
DOSS, Wayne D., Director, Bureau of Family Support Operations, Los Angeles County, Calif., District Attorney's Office	9.19.1996	Federal/State/Local Agency
RECTOR, Robert E., Senior Policy Analyst, Heritage Foundation	1.13.1995	Foundation/Institute/Center
SIRICO, Robert A., (Rev.), President, Acton Institute for the Study of Religion and Liberty	1.20.1995	Foundation/Institute/Center
BANE, Mary Jo, Assistant Secretary, Children and Families, HHS	1.23.1995	Social Welfare/Public Health Agency
DRIVER, Corrine, Executive Director, National Association of Foster Care Reviewers	1.23.1995	Private Agency/Council/Association
MOORE, Stephen, Director, Fiscal Policy Studies, Cato Institute	1.27.1995	Foundation/Institute/Center
TANNER, John S. (REPRESENTATIVE, DEMOCRAT-TN)	1.30.1995	Member of U.S. Congress
VELAZQUEZ, Nydia M. (REPRESENTATIVE, DEMOCRAT-NY)	1.30.1995	Member of U.S. Congress
JONES, Larry, (Rev.), President and Founder, Feed the Children	1.30.1995	Private Agency/Council/Association
ROUKEMA, Marge (REPRESENTATIVE, REPUBLICAN-NJ)	1.30.1995	Member of U.S. Congress
GRUBBS, Darryll W., President, Child Support Council	2.2.1995	Private Agency/Council/Association

Table 5.1 Eugenic Ideology (Supercode) Frequencies By Witness Category: Eugenics Period 1920 – 1932

Table 5.1 Eugenic Ideology (Supercode) Frequencies By Witness Category Eugenics Period 1920-1932					
Witness Categories					
Eugenic Code Families and Codes					
Eugenic Principles	Academic	Federal/ State/Local Agency	Foundation/ Institute/ Center	Medical Professional	Social Welfare/ Public Health Agency
Dysgenic/Cacogenic: Race Degeneration	11		2	8	
Environment: Living Conditions				2	
Eugenics	15		23	11	8
Fit/Superior Stock					1
Genetic Defect				1	
Germ Plasm			2	2	1
Heredity	2		13	7	3
Intelligence/Literacy	1	2	9	4	
Natural Selection/Darwinism			3	4	
Race				1	12
Race Hygiene: Human Race - Maintenance	3		15	5	2
Race Hygiene: Racial Purity (All)					2
Race Hygiene: White Racial Impurity			2		
Race Hygiene: White Racial Purity	1		19		4
Race Mixing: Miscegenation	1		7	3	16
Racial Inferiority		1			
Racism/Racial Discrimination	1		1		1
Sexuality					
Social Selection/Social Darwinism	5			2	
Socially Inadequate/Degenerate/Unfit			36	3	1

Table 5.1 (continued) Eugenic Ideology (Supercode) Frequencies By Witness Category Eugenics Period 1920-1932					
Witness Categories					
Eugenic Code Families and Codes					
Eugenic Policy Areas	Academic	Federal/ State/Local Agency	Foundation/ Institute/ Center	Medical Professional	Social Welfare/ Public Health Agency
Criminals/Crime	2		10		1
Immigrant	1		17	1	1
Immigration	1		63	7	
Mental Health			3		6
Physical Health	1		1		1
Poverty			3		
Prostitution/Prostitute					
Sexually Transmitted Disease	4		1	2	1
Social or Moral Deviance	1		5	1	
Socially Inadequate: Financial/Economic Cost			8		
Socially Inadequate: Social Cost			8		

Table 5.2 Eugenic Classification Scheme

Table 5.2 Eugenic Classification Scheme for Social Inadequacy H.H. Laughlin, 1922 The Social Inadequate Classes
Feeble-minded
Insane (including the psychopathic)
Criminalistic (including the delinquent and wayward)
Epileptic
Inebriate (including drug habitues)
Diseased (including the tuberculous, the syphilitic, the leprous and other chronic infectious and legally segregable diseases)
Blind (including those with seriously impaired vision)
Deaf (including those with seriously impaired hearing)
Deformed (including the crippled and the ruptured)
Dependent (including orphans, ne'er-do-wells, the homeless, tramps, and paupers)
<small>Source: Analysis of America's Modern Melting Pot, Hearings The Committee on Immigration and Naturalization, House of Representatives, 67th Congress, Third Session, November 21, 1922</small>

Table 6.1 Eugenic Ideology (Supercode) Frequencies By Witness Category: Population Crisis Period 1965 – 1966

Table 6.1 Eugenic Ideology (Supercode) Frequencies By Witness Category Population Crisis Period 1995-1996							
Witness Categories							
Eugenic Code Families and Codes							
Eugenic Principles	Academic	Business/ Labor Union	Foundation/ Institute/ Center	Medical Professional	Member of Congress	Private Agency/ Council	Social Welfare/ Public Health Agency
Environment: Living Conditions			1			2	
Intelligence/ Literacy			2		1		1
Race		1					
Racism/ Racial Discrimination			1				
Sexuality						1	1

Table 6.1 (continued) Eugenic Ideology (Supercode) Frequencies By Witness Category Population Crisis Period 1995-1996							
Witness Categories							
Eugenic Code Families and Codes							
Eugenic Policy Areas	Academic	Business/ Labor Union	Foundation/ Institute/ Center	Medical Professional	Member of Congress	Private Agency/ Council	Social Welfare/ Public Health Agency
Criminals/Crime		1	1	1			2
Immigrant							
Immigration			1				
Poverty		3	2		3	4	
Social or Moral Deviance							2

Table 6.1 (continued) Eugenic Ideology (Supercode) Frequencies By Witness Category Population Crisis Period 1995-1996							
Witness Categories							
Eugenic Code Families and Codes							
Eugenic Policy Applications	Academic	Business/ Labor Union	Foundation/ Institute/ Center	Medical Professional	Member of Congress	Private Agency/ Council	Social Welfare/ Public Health Agency
Social Control			1				1
Social/ Cultural /Moral Values	1		1	11		7	7
Sterilization						1	1

Table 6.1 (continued) Eugenic Ideology (Supercode) Frequencies By Witness Category Population Crisis Period 1995-1996							
Witness Categories							
Eugenic Code Families and Codes							
Eugenic Population Class.	Academic	Business/ Labor Union	Foundation/ Institute/ Center	Medical Professional	Member of Congress	Private Agency/ Council	Social Welfare/ Public Health Agency
Epileptic/ Epilepsy							1
Feeble- Minded/ Moron/ Idiot							1
Insanity/ Insane							1
Combined Totals	1	5	10	12	4	15	18

Table 6.1 Eugenic Ideology (Supercode) Frequencies By Witness Category: Population Crisis Period 1965 – 1966

Table 6.2

Eugenic Discourse By Witness Category
Population Crisis Period: 1965-1966

Results From Qualitative Coding: Witness		Passages containing manifest or latent content about race, class or sex
Category	Witness	Text
Private Citizen	Ben H. Bagdikian, Washington, D.C., author of "In the Midst of Plenty: The Poor in America"	If I may, I should like to urge this committee not to overestimate the amount of birth control information known to the public at large, certainly to the poor. There is a great deal of concealment of ignorance and a great deal of hypocrisy on the subject. Even among educated Americans with sophisticated social contacts giving them access to modern medical advice there are lingering taboos and fears which restrain rational thought on the subject. And this is aggravated among the poor who are even more isolated from competent medical advice. May I add that while most of the poor know little or nothing of sound medical family planning, many are aware that birth control is considered by some as a weapon against the poor to prevent creation of what they consider "the wrong kind of people." This suspicion and the danger that it could be justified increases the argument, it seems to me, for the adoption of this program as a matter of public policy for the country as a whole and not as a special instrument directed at the poor or any minority.
Private Citizen	Ben H. Bagdikian, Washington, D.C., author of "In the Midst of Plenty: The Poor in America"	Today the doctrinaire opposition to any form of birth control has all but disappeared in the United States. A recent survey undertaken under support by the Scripps Foundation shows that 93 percent of women asked approve of some form of family planning. Religious leaders of all major faiths have expressed a desire for a healthy civilized answer to this problem. But this confronts us with a social differentiation. Millions of affluent, highly educated Americans with competent, sophisticated private medical advice can plan their families with the soundest and most satisfactory method. But there are millions who are isolated from this knowledge who need it desperately and who have little idea of what is available. Among these are the poor whose only significant medical advice comes from public agencies. The bearing of unwanted children is directly related to poverty and low educational attainment, two factors that are almost synonymous. The same survey I quoted showed that 32 percent of wives with only a grade school education said their last child was unwanted, but among high school graduates this is true of only 14 percent, and college graduates, only 11 percent. I think we can assume that as educational attainment rises in this country, there will be increased demand for sound information. I have had some personal experience with the recent changes in community attitudes.
Private Agency/ Council/ Association	Dr. Mary S. Calderone, New York City, executive director. Sex Information and Education Council of the United States (SIECUS)	In other words, man's sexuality is a most vital part of his total health and well-being—provided that it is looked upon as a great creative force to be applied to constructive purposes, rather than as something to be used by people in exploitation of each other, for commercial gain or in personal relationships, or as a problem to be controlled.

Table 6.2
Eugenic Discourse By Witness Category
Population Crisis Period: 1965-1966

Results From Qualitative Coding:		Passages containing manifest or latent content
Witness		about race, class or sex
Category	Witness	Text
Private Agency/ Council/ Association	Dr. Mary S. Calderone, New York City, executive director. Sex Information and Education Council of the United States (SIECUS)	This fatalistic attitude, that "what I do can't matter," will not be changed as long as we continue to think of population control merely in terms of numbers, and of family planning merely as family limitation. We shall not get very far until we conceive of and place family planning where it belongs, as an essential, but still only one, integral part of total planning for the family. For in dealing with the family as a whole, you are quite literally dealing with a society's raw materials, on whose quality rather than quantity directly depends the success of all future conquests by man—whether of disease, hatreds, wars, poverty or outer space. And we are being forced to recognize by the evidence all too easily observable on every hand, that the family, that precious basic institution that has been quite literally the foundation of our American society, is presently being subjected to most powerful, disintegrative forces. I shall highlight a very few.
Private Agency/ Council/ Association	Dr. Mary S. Calderone, New York City, executive director. Sex Information and Education Council of the United States (SIECUS)	[T]o have Conditions in overcrowded families on overcrowded streets in over-crowded cities are such that human beings are being pushed, in striving to adapt to these conditions, dangerously close to breaking. It is impossible to go back to the plenty that used to be—of space, quiet, air, water, recreational resources, food, person-to-person warmth—we have to go forward to develop the new ways that will make it possible for our people to bear the conditions under which they are forced to live. Only in this way can we safeguard the rights and privileges of those who are already born, and insure to the as yet unborn that they will have a good place to come to. Our young people will not grow up to be individuals able to make responsible decisions about reproduction and sex, until society carries out its responsibilities to them. One such responsibility—and this is what SIECUS is going to try to help with—is to acquire and transmit to them knowledge as to how these two great gifts, reproduction and sexuality, can best be used in the service of man, woman, and their family. We have the scientists, the social scientists, the money, the know-how to accomplish this, but the machinery is yet to be set in motion.

Table 6.2
Eugenic Discourse By Witness Category
Population Crisis Period: 1965-1966

Results From Qualitative Coding:		Passages containing manifest or latent content
Witness		about race, class or sex
Category	Witness	Text
Private Agency/ Council/ Association	Dr. Mary S. Calderone, New York City, executive director. Sex Information and Education Council of the United States (SIECUS)	The only way that has ever been found to reach people is to care about them. Government, by its very impersonality, has a particular obligation to express, in clear and concrete terms, that it does care about them. An orderly governmental framework that will take the findings of research in human reproduction, sexual behavior and mental health from such scientific institutions as our great National Institutes of Health, and put these findings to work in soundly conceived and carefully planned action programs, will reach, through all of our educational, health and social institutions, right straight into the heart of every American family. How we care for our own families, how we help them make responsible decisions in their sexual and reproductive lives—this will be noted throughout the world, which up to now has seen only sexual irresponsibility and reproductive profligacy as examples emanating from our shores. The approach embodied in S. 1676 is so needed at this critical moment in our social development that I deeply hope the signal will be "go," for no private agencies like SIECUS and Planned Parenthood can or should hope to do the job alone. I thank you very much.
Private Agency/ Council/ Association	Dr. Mary S. Calderone, New York City, executive director. Sex Information and Education Council of the United States (SIECUS)	This is why we are faced with learning how to bring up every young person to understand that "what I do does matter," whether about sex or procreation. To underline this, in the creation of new governmental agencies designed specifically to be concerned with the manifold problems that relate to population growth, it will therefore be well to protect our spirit of passionate commitment (essential if any job is to be well done) toward people themselves rather than to their numbers. In the planning for the American family that it must have if it is not to disintegrate completely, we must have as our ultimate goal the development of individuals capable of carrying their own weight in society. This means that, in our planning for families, we must support and reinforce those trends and influences in American life today which will develop children into people who can make decisions that involve reason and self-restraint, in order to counteract those trends and influences that lead people to base their decisions on emotionalism, false values or self-indulgence. For instance, we know that young people are marrying now far too young, and for the wrong reasons for status, independence, or sex. The records show the high proportion of these marriages ending in disaster whose impact is mainly on the children, thus extending the disaster into the next generation.

Table 6.2
Eugenic Discourse By Witness Category
Population Crisis Period: 1965-1966

Results From Qualitative Coding: Witness		Passages containing manifest or latent content about race, class or sex
Category	Witness	Text
Private Agency/ Council/ Association	Dr. Mary S. Calderone, New York City, executive director. Sex Information and Education Council of the United States (SIECUS)	The term "population explosion" to me does not mean only numbers, but perhaps even more significantly, behavior, the explosive behavior of people living under intolerable conditions of being crowded together. This is particularly true in the case of our own American people, who do not share with some other peoples of the earth the kind of apathetic resignation that results from centuries of oppression and deprivation. Our law enforcement people tell us that violence is increasing—and indeed, we experience it in daily life in New York: shoving, jostling, arrogance, violent interchange between casual passersby on very minimal provocation. Humans as they are constituted, have not had the time to develop the adaptive mechanisms that would allow them to live under present urban conditions. Our basic needs for space, quiet, privacy, work that is meaningful rather than just a way to pass the time for earning money, a sense of worth to the community—these needs are being denied to an enormous majority of us. Furthermore, the human is adapted to do best under conditions that assure him warm and rewarding relationships in his everyday contacts with fellow human beings and that allow him to preserve his sense of himself and of them as individuals. Due to the fact of sheer numbers, there is a loss of the sense of one's own identity that is permeating our adolescents and young people, in the face of the growing crowding and competitiveness that frustrate the development of meaningful human relations. The term being used for this is "alienation." Indeed, finding a life mate is today often a matter of happenstance because of proximity to one or two possibilities, rather than of free choice based on the development of a real relationship between two people.
Foundation/ Institute/Center	Dr. Philip M. Hauser, Chicago, Ill., professor of sociology, and director, Population Research and Training Center and Chicago Community Inventory, University of Chicago	Moreover, in the United States as in the world as a whole, the highest birth rates are associated with illiteracy or little education and poverty. By the official definition adopted by the Federal Government over one-fifth of all children in the United States under 18 (21.6 percent) are being reared in poverty. But almost half of the children in families with five or more children (49.3 percent) are being reared in poverty. Among whites, about one-sixth of all children, (15.4 percent) and one-third of children in families with five or more children (32.8 percent) are being reared in poverty. Among nonwhites, over three-fifths of all children (62.1 percent) and over four-fifths of children in families with five or more children (81.3 percent) are being reared in poverty. We are undertaking a war against poverty in this Nation. But it is absurd to think that we can mop up the floor before we have turned off the faucet. We shall continue to pay a fearfully high price in human as well as monetary terms, not only among our poor but in the Nation as a whole if our population growth is not further reduced.

Table 6.2
Eugenic Discourse By Witness Category
Population Crisis Period: 1965-1966

Results From Qualitative Coding:		Passages containing manifest or latent content
Witness		about race, class or sex
Category	Witness	Text
Foundation/ Institute/Center	Dr. Philip M. Hauser, Chicago, Ill., professor of sociology, and director, Population Research and Training Center and Chicago Community Inventory, University of Chicago	The provisions of S. 1676 constitute minimum provisions for facing up to the world and our own domestic population problems. They should certainly become law and be implemented. Moreover, the activities which will be initiated under the provisions of S. 1676 will undoubtedly point to further steps to be taken. We have reached a most encouraging stage in population history in the sense that the United States has in the Kennedy and Johnson administrations, for the first time, begun to face up to the population problem at home as well as abroad. In facing our problems at home we are strengthening the moral force with which we can help to solve the problem abroad. The recent revision of our immigration policy as well as our increasing provisions for transmitting know-how and methods for regulating family size to our own disadvantaged population is placing us in a stronger position to counsel and assist other nations.
Foundation/ Institute/Center	Dr. Philip M. Hauser, Chicago, Ill., professor of sociology, and director, Population Research and Training Center and Chicago Community Inventory, University of Chicago	But among the developing nations, Mr. Chairman, the prospect is not nearly so bright. There has never been an example in history of a people who, having achieved literacy education and a high level of living, did not reduce their birth rate. But, unfortunately the converse of this proposition is also true. We have yet to have the first example of a people steeped in illiteracy and poverty who have managed to reduce their birth rate. This fact constitutes perhaps the world's present gravest challenge. To date efforts to reduce the birth rate in developing regions have not been crowned with great success. India, for example, has had a national policy to lower population growth rates since 1951, but her national family planning program has as yet produced no measurable decrease in her birth rate. The fact is that the social sciences are still so ignorant that they have not yet achieved the knowledge requisite for motivating and providing incentive to the mass populations in the developing regions to control the number of their children. The fact is that the biomedical sciences are still so ignorant of what causes babies that they have not yet developed methods of birth control that are acceptable enough, cheap enough, practical enough, and efficacious enough to meet the needs of the mass of the world's population.

Table 6.2
Eugenic Discourse By Witness Category
Population Crisis Period: 1965-1966

Results From Qualitative Coding:		Passages containing manifest or latent content
Witness		about race, class or sex
Category	Witness	Text
Foundation/ Institute/Center	Dr. Philip M. Hauser, Chicago, Ill., professor of sociology, and director, Population Research and Training Center and Chicago Community Inventory, University of Chicago	In consequence, the quality of education in elementary schools during the fifties, and in secondary schools and colleges during the sixties has been adversely affected; juvenile delinquency and crime have enormously increased in magnitude; unemployment, and especially unemployment of the young, have remained at high levels for many years, until the recent drop as a result of special programs and the Vietnam war; race tensions have been gravely exacerbated, I might say, by increasing rates of population growth which have increased the flow of internal migration from the South and rural areas of the Nation to the North, West, and urban areas ; traffic accidents and fatalities have worsened ; air and water pollution have reached dangerous levels; urban congestion has increased and the quality of urban living diminished; and governmental interventionism—local, State, and National—has necessarily increased.
Private Agency/ Council/ Association	George J. Hecht, New York City, publisher of Parents' magazine and chairman of the American Parents Committee	Unfortunately the large family is today a status symbol in many well-to-do communities in the United States and perhaps in other countries, just as owning a high-priced automobile used to be. Whether or not by design, many publications and advertisements have been glamorizing the big family. Parents need to be convinced that if they have two or three children they can provide for them more adequately and can do a better job in rearing and training them than they can if they have four or five or more children. Certainly no one wishes to see families have unwanted children. I think that it might not be inappropriate to state here that in my opinion a major activity of the Federal Government's antipoverty program should be, but isn't, the motivation of families, especially those of limited means, to the idea that they should have no more than two or three children, certainly not four or five or more children, as too many families still have. Also the greatest possible publicity should be given to the fact that safe and inexpensive means are widely available which enable families to space or limit the number of their children as they desire.

Table 6.2
Eugenic Discourse By Witness Category
Population Crisis Period: 1965-1966

Results From Qualitative Coding:		Passages containing manifest or latent content
Witness		about race, class or sex
Category	Witness	Text
Medical Professional	Dr. Andre Hellegers, Baltimore, Md., associate professor of obstetrics and gynecology, Johns Hopkins University Hospital"	Senator, it seems to me that if physicians are only taught the main technical aspects of the methodology of family planning, they will never be more than technicians in this subject. I think they ought to know something of what motivates people to use family planning, what failure rates are over various methods used, depending on what kind of populations are using them; in short, all the kinds of things that are contained in such books as "The Third Child," by Professor Westoff and his group, the "Growth of American Families" studies, which give one some indication of how people seem to react to family planning, why they use it, why they do not use it, and so forth. To me, it has always seemed that one historical tragedy in many ways in university education is that doctors have withdrawn themselves from campus to hospitals, theologians have withdrawn themselves from campuses to seminaries, and they have left the social sciences and the humanities on the main campuses. As a consequence, I do not think that all of these aspects are ever interwoven into one body of teaching in a university. Specifically, I think they should be taught in departments of obstetrics and gynecology. The content matter would be things like how does one assess the statistical validity of surveys in the area of family planning? What have been the results of some of these surveys? How have they varied from country to country if one talks of a world population explosion? These are the kinds of data which I think the average, well-educated person, regardless of religion, ought to know today and, certainly, I think physicians who have to deal with patients should.
Medical Professional	Dr. Andre Hellegers, Baltimore, Md., associate professor of obstetrics and gynecology, Johns Hopkins University Hospital"	May I begin by saying that I have no desire to add statistics to the records of this subcommittee. I have little sympathy either for the prophecy that at present rates of growth humanity will soon outweigh the earth or for the equally hypothetical projection that at such time there will be no Americans left because of presently occurring decreases in the birth rate. To me the question is not whether population trends will change but how this will happen, and what social values will be gained or lost in the process. It is because of the great importance of these social values that I considered it not just a privilege but a duty to accept the honor of your invitation.

Table 6.2
Eugenic Discourse By Witness Category
Population Crisis Period: 1965-1966

Results From Qualitative Coding:		Passages containing manifest or latent content
Witness		about race, class or sex
Category	Witness	Text
Social Welfare/ Public Health Agency	Wallace Kuralt, Charlotte, N.C., director, Mecklenburg County Department of Public Welfare	A great many of these women—in fact, most women, are willing to talk quite freely about their reasons for wanting to participate in a family planning activity. They have seen tensions grow as the number of children grew beyond the ability of the family to support these children. Tensions have grown in the family as unwanted children were born and unfortunately, many of these unwanted children were children who were rejected outright. There is no question about it: from where we sit in public welfare, these unwanted and rejected children constitute a very serious social menace in our society today. These are the children who are often found in juvenile courts. These are the children who all too often prove to be difficult children in the classroom. These are the children who, as they become adults, show serious evidence of emotional instability.
Social Welfare/ Public Health Agency	Wallace Kuralt, Charlotte, N.C., director, Mecklenburg County Department of Public Welfare	About 6 years later, the success of this project was so pronounced that the State board of health set up throughout the State maternal clinics which over the years have offered services of a birth control nature. The department of public welfare has been concerned about population, not so much because of problems of worldwide population explosion, but because problems associated with the need for family planning represented merely one of the problems in a spectrum of problems in which public welfare was interested. But in 1932, the State did pass some legislation permitting sterilization for the feeble-minded, epileptic, and insane. Over the years, there have been quite a number of sterilizations under this program. In Mecklenburg County, for instance, for quite some years, there have been about 50 sterilizations a year. The program had a great many difficulties associated with it. But nevertheless, the State was sufficiently interested in the subject of sterilization that 2 years ago, there was a voluntary sterilization act passed which permitted a patient freely to plan for sterilization if a doctor, with the concurrence of a second doctor, agreed that this met a real need of the family.

Table 6.2
Eugenic Discourse By Witness Category
Population Crisis Period: 1965-1966

Results From Qualitative Coding: Witness		Passages containing manifest or latent content about race, class or sex
Category	Witness	Text
Member of U.S. Congress	Representative D. R. Matthews, Democrat, of Florida (Gainesville), a U.S. Representative from the Eighth Congressional District of the State of Florida	May I add here, I am not against babies, but I am just pointing out the problem as pointed out by Mr. Hauser. Mr. Chairman, I submit that such developments are in direct contrast to the Great Society which we envision and to the goals of the war on poverty which we are now spending millions of dollars to achieve. Families with too little income and too many offspring found in the slums of every large city are directly and indirectly a mounting drain on public funds. Public health and welfare authorities contend that lack of access to knowledge of modern, effective child-spacing methods is an important reason why more than half of the 7,800,000 persons on relief in this country are mothers and their dependent children. For this reason I welcome the proposal to promote in this country programs which will provide help and information to those seeking to improve their economic position by a more fortunate spacing of their children. Several States have already begun action in this field in recent years—in my own State of Florida a recent survey conducted by the State health department indicates that 49 of 67 counties offer family planning services through the health departments. Encouragement is given to local units through the State maternal and child health division. In 1964, Florida spent \$25,000 to supply necessary materials to county projects. Mr, Chairman, I recommend that the Federal Government now make an effort to extend and coordinate the various State programs now in operation.
Member of U.S. Congress	Representative D. R. Matthews, Democrat, of Florida (Gainesville), a U.S. Representative from the Eighth Congressional District of the State of Florida	Furthermore, the population rate is increasing fastest in countries where the per capita agricultural production is in some cases actually decreasing. What are the consequences of the growing inequality? It means that a shrinking proportion of the earth's people are enjoying the benefits of our technological achievements and that a growing majority of mankind faces poverty and hunger. As far back as 1957, the then Senator Kennedy noted with irony that today there should be more prosperity and at the same time more poverty on this globe than at any previous time in man's history. Mr. Kennedy cited the explosive growth in population as the basic cause for this situation, and predicted that "this growing fatness of the fat and leanness of the lean can only end in tragedy for us all." Indeed, hungry people are fertile ground for the seeds of social and political unrest, the precursors of riots, revolutions, and even wars. We remember that the cry for bread helped spark two of the most profound political upheavals in modern history, the French and Russian revolutions. Today, the United States, with 6 percent of the world's population consumes 50 percent of her nonrenewable resources and the economic gap, as we have seen, is growing wider. According to former Secretary of State Christian Herter, there is not sufficient capital to provide facilities to keep up with unchecked population growth in the underdeveloped countries, and he states that "as long as there is great disparity in living standards between industrial nations and emerging nations, the world will not be a peaceful place in which to live." Mr. John Fisher, the editor of Harpers magazine describes the consequences of failure to face this problem even more bluntly—he states that as long as population continues to spread at its current rate, no amount of disarmament can avert eventual armed conflict.

Table 6.2
Eugenic Discourse By Witness Category
Population Crisis Period: 1965-1966

Results From Qualitative Coding: Witness		Passages containing manifest or latent content about race, class or sex
Category	Witness	Text
Private Agency/Council/ Association	Mary Anne Rennolds, of the Virginia League for Planned Parenthood	<p>Senator Gruening. Mrs. Reynolds, how do you disseminate the information that the planned parenthood organization exists, and that mothers, like Mrs. Robinson, who have had seven children and feel they cannot afford any more, can get it ? How do you get that information about?</p> <p>Mrs. Reynolds. Well, this has always been the problem—reaching the people who didn't know we were there. Even though the Public Health Department knew we were there, until recently they were afraid to go too far ahead of the public. It is intriguing the way it is all enmeshed, as you know. Two days ago I talked to the head of the Social Service Bureau of the Welfare Department. She said just about a year and a half ago, only then, they began really going into high gear, pushing planned parenthood, sending people to the Public Health Department. It just takes time. And I think now with what you have done in Washington, and Senator Tydings, and all the others, it will give people the nerve and the courage to do what they should have done all along.</p> <p>Senator Gruening. In other words, you feel there has been a sufficient change in public sentiment so that you need no longer be timid?</p> <p>Mrs. Reynolds. Yes; that is correct.</p>
Private Citizen	Mrs. James Robinson, mother and churchworker	<p>I am glad to tell something about my family in case it will help end the hardship of other families with too many children. My husband and I are the parents of nine children from the ages of 17 down to 7. When I had my seventh child in 1958 I begged the nurse and doctors at the medical college to help me. My husband and I could not take care of any more babies and needed information badly. No one would tell us anything. I had my eighth child and again, no help. When my last baby was born in the same year, I was too weak they told me at the medical college hospital, to have the operation—tubal ligation. I told them that if I left for home to build up my strength to return later for the operation I would surely come back again pregnant and that I was not going to leave the hospital until somebody there gave me the operation.</p>
Academic	Irene Taeuber, Ph. D., Washington, D.C., senior research demographer, Office of Population Research, Princeton University	<p>Senator Gruening. In other words, you see a definite correlation between intelligence and education and family limitation ?</p> <p>Dr. Taeuber. All the data that I know for major countries in the world at any period of time corroborate that general relationship in modernization. In rather atypical ancient empires, in peripheral minority groups, and in highly developed groups in advanced countries, those who are most educated and most advanced may have the larger families. But the other pattern is prevalent.</p>

Table 6.2 (continued)
Eugenic Discourse By Witness Category
Population Crisis Period: 1965-1966

Results From Qualitative

Coding:

Witness

Interpretive Rule for Discourse Analysis

Category	Witness	Manifest	Latent	Projective
Private Citizen	Ben H. Bagdikian		The speaker is describing views of the poor about publically funded birth control programs. The poor see birth control as a weapon against them as "the wrong kind of people". This attitude is comparable to eugenic ideology. The intent contained in this discourse is to allay the fears of the poor and minority populations that they are not targeted for population control by hiding it as a national policy for all. The reference to the "wrong kind of people" is a social construction and clearly eugenic in nature.	
Private Citizen	Ben H. Bagdikian		Under eugenics the less intelligent are socially inadequate (paupers) and unable to control their fertility. The poor are stigmatized as being too unintelligent to limit their family size which is believed to be the cause of poverty according to eugenic ideology and transition theory.	I interpret this quote to suggest a program of eugenics for the poor. Since the poor need contraceptive medical advice and they access most of their medical advise through public agencies, the medicalized social control of their fertility can be delivered through public agencies providing publicly funded medical services to the poor.
Private Agency/ Council/ Assoc.	Dr. Mary S. Calderone			I interpret this quote as a veiled reference to germ plasm and race hygiene.
Private Agency/ Council/ Assoc.	Dr. Mary S. Calderone		This quote draws upon a core idea of eugenics and race hygiene. Eugenics is concerned with improving population quality through refinement of the germ plasm. The "raw material" is code for germ plasm. Race hygiene is a eugenic principle that focuses on countering the degenerative forces in the human population - defective or inferior germ plasm.	
Private Agency/ Council/ Assoc.	Dr. Mary S. Calderone			The speaker is describing conditions under which the more affluent classes live and a historical period of uncontested White racial superiority prior to massive urban migration. The phrase "our people" associated with safeguarding "rights and privileges" is interpreted as an appeal for defending the status of the dominant group, which is a eugenic argument. The final appeal establishes one method to be used in defending the status of the dominant group - a "machinery" to socially control sexuality and reproduction.

Table 6.2 (continued)
Eugenic Discourse By Witness Category
Population Crisis Period: 1965-1966

Results From Qualitative

Coding:

Witness

Interpretive Rule for Discourse Analysis

Category	Witness	Manifest	Latent	Projective
Private Agency/Council/Assoc.	Dr. Mary S. Calderone	This quote is a clear description of eugenics as a national program for social control of human reproduction transmitted through social institutions to the American family.		
Private Agency/Council/Assoc.	Dr. Mary S. Calderone		This witness calls for education and government agencies informed by eugenic ideology. Key concepts pertaining to eugenics discussed in this brief quote cover: social inadequacy, race hygiene, protection of the traditional values of the American race, and marriage restrictions. Eugenicians advocate for the establishment of government agencies that specialized in transmitting eugenic ideology into public policies designed to improve the quality of the human population.	The implied meaning contained within this discourse suggests that the principles of race hygiene, along with a eugenic oriented teaching is needed to avert a threat to the status of the dominant American family from the differential fertility rate and cultural values of the socially inadequate. I interpret the phrase, "development of individuals capable of carrying their own weight in society" as coded racism implying that the poor (Blacks, Latinos, and American Indians) lack the character development to be productive citizens. I understand the final section of this quote to imply that the "children" of the dominant group are being influenced by new cultural and social norms that undermine traditional American values, which support the status of the dominant group.
Private Agency/Council/Assoc.	Dr. Mary S. Calderone		The interpretation for coded racism appearing in the pattern form of latent content follows a deductive approach applying the concepts of color-blind racism in. I see this as a two-stage process. First, coded language is used in a pattern that implies race. The speaker uses coded language that requires elites to make subjective interpretations about the racial and ethnic identity of the individuals described by Dr. Calderone. The objective race codes become symbols for race or ethnicity subjectively held by elites. The race meaning is socio-cognitively held in mental maps that dominant groups have constructed about minorities overtime. In this passage Calderone uses several labels to convey to other elites who she is speaking about. The three code words I interpret as containing an implied racial content are: "disadvantaged families", "worst and most crowded" living conditions, "deprived environments" and "Operation Head Start".	The interpretation of the projective form of racial content in this passage is derived inductively beginning with the argument about the problem of dysfunctional fathers. The argument is logically arranged to lead the listener to infer that "fertility control" in some respect will reduce the negative impact of "absentee or dysfunctional fathers" along with the need for "substitute fathers".

Table 6.2 (continued)
Eugenic Discourse By Witness Category
Population Crisis Period: 1965-1966

Results From Qualitative

Coding:

Witness

Interpretive Rule for Discourse Analysis

Category	Witness	Manifest	Latent	Projective
Private Agency/ Council/ Assoc.	Dr. Mary S. Calderone		This quote is essentially a eugenic argument about the mental health of the socially inadequate and how it threatens the quality of life for the dominant group living in urban areas. A call for greater levels of social control is inserted in the discourse as well. The social problems identified are quite similar to the same problems identified under eugenics. The difference here is that no inherent biological basis is made.	
Private Agency/ Council/ Assoc.	Dr. Mary S. Calderone			This argument is strikingly similar to the fears eugenicists expressed in the early 20th century of the threat posed to the dominant American race by the uncontrolled immigration of unassimilable races. The socially inadequate especially, the feeble-minded were considered to possess mental and behavioral health problems that lead to a deterioration in the quality of life in the large urban cities. Eugenecists also believed that immigrants from southern European countries lived under political and social conditions that were incompatible with traditional American values. I interpret this quote as suggesting that the urban migration of minority populations with incompatible values and social dysfunctions are destroying the standard of living and quality of life enjoyed by the dominant group.

Table 6.2 (continued)
 Eugenic Discourse By Witness Category
 Population Crisis Period: 1965-1966

Results From Qualitative

Coding:

Witness

Interpretive Rule for Discourse Analysis

Category	Witness	Manifest	Latent	Projective
Foundation/ Institute/ Center	Dr. Philip M. Hauser	The witness is presenting an argument based on eugenics. Eugenics is concerned with the human price of illiterate, poor people with high birth rates as representing a racial, human, and social cost to the nation.	According to eugenic classifications of social inadequacy, the feeble-minded or unfit are often described as being too unintelligent to control their fertility and are in need of some form of regulation of their reproduction. The speaker uses descriptions of the feeble-minded under a eugenic framework without mentioning the specific eugenic terminology. Social anthropology and transition theory focus on the relationships between intelligence (illiteracy/education) and poverty (standard of living/civilization). The dynamics of White vs. the other (non-white) is coded racism and a social construction of Whites as the dominant group. Eugenicists believe that the human or social cost of degeneracy is attributable to defective or inferior germ plasm that must be culled from the general population under race hygiene. I interpret the use of the phrase "turn off the faucet" as coded language for a more permanent form of fertility control such as eugenic sterilization.	
Foundation/ Institute/ Center	Dr. Philip M. Hauser		In this discussion the U.S. domestic birth control program is framed as a demonstration project to influence foreign nations to control their population growth through dissemination of family planning propaganda and contraceptives. I consider transition theory as reform eugenics when used as to justify fertility control measures advocated by western industrialized economies for underdeveloped nations.	
Foundation/ Institute/ Center	Dr. Philip M. Hauser		In this quote the witness expresses a principle of social anthropology linking standard of living/civilization to inherent biological qualities expressed through intelligence. Eugenics supports a similar view associating level of intelligence with poverty.	I interpret "developing nations" as coded language for non-white populations. This quote implies the need for propaganda to influence a change in cultural attitudes about fertility and family size to reduce the population growth rates of non-white nations many that were former colonies of European powers. The speaker is advocating for the reduction of a specified population group (developing nation) applying basic a tenet of transition theory under reform eugenics.

Table 6.2 (continued)
 Eugenic Discourse By Witness Category
 Population Crisis Period: 1965-1966

Results From Qualitative

Coding:

Witness

Interpretive Rule for Discourse Analysis

Category	Witness	Manifest	Latent	Projective
Foundation/ Institute/ Center	Dr. Philip M. Hauser		In my analysis, the speaker constructs knowledge about the problems identified as a function of Black urban migration. Transition theory predicts that during modernization populations will migrate from rural agricultural regions to urban centers seeking employment and opportunities to improve their standard of living. Coded language is used to hold Blacks responsible for lowering the quality of education in public schools possibly as a result of school desegregation, urban crime, and high unemployment.	The Vietnam War is touted as having a positive effect on lowering the unemployment rate. It is generally understood that the draft for the Vietnam war resulted in disproportionately high numbers of poor Black and Latino. Eugenics considered war as a method of culling the socially inadequate from the population which reasonably would improve the unemployment rate.
Private Agency/ Council/ Assoc.	George J. Hecht			The witness is presenting a curiously crafted argument. According to eugenic ideology wealthier individuals are encouraged to have large families since a correlation between wealth, intelligence and race improvement is believed. Here, the speaker appears to be critical of the more affluent classes having large families when it has been the overarching principle of family planning in the western societies. I understand the speaker to be socially constructing an argument that equates children and expensive cars with status seeking. The witness uses the technique of "associative - priming", drawing upon existing stereotypes of Blacks purchasing cars they cannot afford (Domke, 2001). The witness is suggesting that the poor in general and Blacks especially, have large families that they cannot afford to create the perception of a higher social status.
Medical Professional	Dr. Andre Hellegers			This quote is about the need for eugenic education to influence social and cultural attitudes about fertility, and women as reproducers. A eugenic education would combine medicine, theology, social sciences and the humanities into a single body of teaching. Eugenic ideology is comprised of theories of human degeneration and race difference informed by scientific racism, bio-determinism, human biology, Mendelian genetics, statistics, social anthropology, and transition theory. The witness also states that this single body of teaching should be delivered in departments of "obstetrics" and "gynecology", specialties that provide medical and reproductive care to women.

Table 6.2 (continued)
Eugenic Discourse By Witness Category
Population Crisis Period: 1965-1966

Results From Qualitative

Coding:

Witness

Interpretive Rule for Discourse Analysis

Category	Witness	Manifest	Latent	Projective
Medical Professional	Dr. Andre Hellegers		This is essentially a eugenic argument applied as a negative characterization of the assimilation of races with cultural values different from the founding stocks. My analysis of eugenic ideology views references to American traditions, norms, or values as meaning those beliefs held by the dominant group. Eugenacists are concerned with how assimilation will threaten Whites as the dominant American race.	
Social Welfare/ Public Health Agency	Wallace Kuralt		In this quote unplanned children are stigmatized as being unwanted and are socially constructed as a menace to society. The speaker implies with his argument that "unwanted children" should not be born and therefore, a need to control the fertility of this population is required.	
Social Welfare/ Public Health Agency	Wallace Kuralt	This witness is describing a history of eugenic sterilization in North Carolina.		
Member of U.S. Congress	Rep. D. R. Mathews	The witness presents a eugenic argument about the socially inadequate and the economic cost of caring for them. Eugenacists believe that fertility control of the socially inadequate provides a valuable tool in reducing public expenditures for populations unable to control their own fertility.	Coded racism appears in this selection as a latent pattern form of racial content. The label "slum" is a socially constructed space that carries the connotation of a racially segregated, urban ghetto primarily populated by Blacks and Latinos in a large metropolitan cities of the east coast and Midwest . Without using race or ethnicity the speaker uses a label to infer a latent (pattern form) racial meaning that activates dominant group preconceptions about the identity of who lives in a community stigmatized as a "slum". The use of slum is a color-blind code for race or ethnicity. In this passage the speaker also draws upon transition theory to imply that the reason why people are confined to slums is because they fail to limit their family size according to their income. The argument is a re-articulation of eugenic ideology about the socially inadequate, who are believed to be unable or unwilling to provide for their children and must be supported by the state.	Group prejudice explains another code appearing in a projected form of race meaning. The fertility of poor minorities is characterized as a "drain on public funds", funds that are largely under the control and authority of the dominant group elites. In a projected form of latent racial meaning, Rep. Mathews uses language to influence the listener to make a subjective interpretation about minorities. The fertility of poor minorities is characterized as a threat to the socioeconomic resources of Whites as the unnamed dominant racial group.

Table 6.2 (continued)
 Eugenic Discourse By Witness Category
 Population Crisis Period: 1965-1966

Results From Qualitative

Coding:

Witness

Interpretive Rule for Discourse Analysis

Category	Witness	Manifest	Latent	Projective
Member of U.S. Congress	Rep. D. R. Matthews		The speaker is suggesting that overpopulation in non-white nations will lead to world war over resources between the western industrialized and developing nations. The implied threat is a potential loss of the dominance of the wealthier more developed nations. This quote carries a similar pattern to concerns eugenicists have about the threat to the dominant American race from uncontrolled immigration. Developing nations must have their populations controlled to avoid loss of the dominance of the West (White) nations. "Unchecked" population growth is a threat to the status of the dominant group within a eugenic framework.	
Private Agency/ Council/ Assoc.	Mary Anne Renolds			This policy of "high gear, pushing" contraceptive services through welfare and public health departments to an outside private agency provides an opportunity for poor women to believe that welfare benefits are threatened if they refuse counseling from planned parenthood. The discourse in this quote suggests that policies to influence the reproductive behavior of poor women were being created and implemented ad hoc for a specific population as a public cost savings. This is an example of promoting the social control of reproduction of the socially inadequate (pauperism) as a cost savings to the state.
Private Citizen	Mrs. James Robinson			The witness is openly expressing her ignorance of human reproduction. The witness accompanied the representative of Planned Parenthood who also provided testimony. I interpret the appearance and testimony of this witness as providing an example of the need for birth control to be included with antipoverty measures. A photo of Mrs. Robinson (who is Black) appears in the official transcript of her testimony. I see the appearance and testimony of this witness as a visual form of coded racism to suggest to the committee that Blacks are too ignorant to control their own fertility and require government intervention.

Table 6.2 (continued)
 Eugenic Discourse By Witness Category
 Population Crisis Period: 1965-1966

Results From Qualitative

Coding:

Witness

Interpretive Rule for Discourse Analysis

Category	Witness	Manifest	Latent	Projective
Academic	Irene Tæuber	The question presented to the witness is based upon eugenic beliefs about the inheritability of the genetic trait for human intelligence through sexual reproduction. Eugenecists believe that the affluent classes are more intelligent due to superior germ plasm.		In general, the upper classes are better educated than the laboring and poorer socioeconomic classes. According to transition theory, during modernization the upper classes limit family size to improve their standard of living when societies are transitioning from rural agricultural to urban industrialized economies. Social anthropology posits a positive relationship between wealth and level of intelligence. I interpret the intent of this question to imply that the poor are less intelligent, unable to control their fertility and this is the reason for their impoverishment.

**Table 7.1 Eugenic Ideology (Supercode) Frequencies By Witness Category:
Welfare Reform Period 1995 – 1996**

Table 7.1 Eugenic Ideology (Supercode) Frequencies By Witness Category Welfare Reform Period 1995-1996							
Eugenic Code Families and Codes							
Eugenic Principles	Business/ Labor Union	Foundation/ Institute/ Center	Medical Professional	Member of Congress	Private Agency/ Council	Private Citizen	Religious
Environment: Living Conditions			1				
Sexuality			2				1
Eugenic Policy Areas							
Criminals/Crime		1		2	2		1
Immigrant							1
Immigration		4					
Mental Health	1	1					
Physical Health	1	1					
Poverty		2	2	1	3	1	1
Sexually Transmitted Disease			3				
Socially Inadequate: Financial/Economic Cost			1				
Socially Inadequate: Social Cost			1				
Eugenic Policy Applications							
Custodial Institutionalization: Cost/Expenditure			1				
Social Control							2
Social/Cultural /Moral Values			1		2		7
Eugenic Population Classifications							
Disease/Diseased				1	3		
Combined Totals	2	9	12	4	10	1	13

Table 7.2 Eugenic Discourse By Witness Category: Welfare Reform Period 1995 – 1996

Table 7.2

Eugenic Discourse By Witness Category Welfare Reform Period: 1995-1996

Results From Qualitative Coding:

Pasages containing manifest or latent content about race, class or sex

Witness Category	Witness	Text
Private Agency/ Council/ Association	Ed Austin, mayor, Jacksonville, Fla.; representing National League of Cities and Florida League of Cities	Mr. Chairman and Members of the Committee, my name is Ed Austin and I am mayor of the city of Jacksonville, Florida, and I am testifying today on behalf of the Florida League of Cities and the National League of Cities on the important issue of welfare reform. Mr. Chairman, I have submitted the league's written statement for the record and, if I may, I will summarize briefly the contents of that statement. I have been mayor of the city of Jacksonville for only 3 years, but before that I served for over 25 years as the chief prosecutor and earlier as a public defender in northeast Florida. Over the course of my career in the courtroom, I watched the explosion of crime and the weakening of the American family. Both juvenile and adult offenders typically came from single-parent or no-parent homes, dropped out of school, often grew up in public housing and did not receive the nurturing, care and parental love necessary for normal development in a competitive society. Mr. Chairman, in my judgment, all of this is largely the result of the current welfare system. Are there other causes? Of course there are. But this is a cause that we can address and eliminate now.
Private Agency/ Council/ Association	Ed Austin, mayor, Jacksonville, Fla.; representing National League of Cities and Florida League of Cities	Members of the Florida League of Cities and the National League of Cities agree that, first and foremost, the current welfare system is a failure and must be fundamentally transformed. We believe the system perpetuates the cycle of poverty and the breakdown of the American family. The direct and indirect cost to society make welfare reform an imperative for this Nation and its cities, and we applaud the efforts of this Congress and the administration to undertake this difficult task.
Religious	Sharon M. Daly, deputy to the president, social policy, Catholic Charities, U.S.A.	Let's look at that proposal in light of the moral obligation of government. In our view, the NGA plan has four fatal flaws. First, it would repeal the Federal guarantee of protection for poor children and allow the States to turn their backs on poor families. The Governors' plan, like the congressional plan, repeals the individual entitlement for children's assistance when their parents are destitute, and it did not replace that right with a right to a job, training, or any other means for the parents to support their children. By repealing the rights of children to Federal assistance, the Federal Government would begin to treat children after they are born as Federal law now treats children before they are born, as nonpersons, undeserving of Federal protection of their lives and dignity, just as we believe that the Federal Government should protect children from abortion, we also believe that the Federal Government should protect them from suffering and deprivation. We are consistent.

Table 7.2
Eugenic Discourse By Witness Category
Welfare Reform Period: 1995-1996

Results From Qualitative Coding:

Passages containing manifest or latent content about race, class or sex

Witness Category	Witness	Text
Religious	Sharon M. Daly, deputy to the president, social policy, Catholic Charities, U.S.A.	<p>We think that the fourth fatal flaw in the Governors' plan is in keeping an option for the States to implement a family cap and denial of welfare to children of teenage mothers. Mr. Chairman, as you know very well, the very small reduction in births to mothers on welfare in New Jersey, the only State where there is data, was accomplished in part, almost in half, by increasing abortions among women on welfare. We think that is unacceptable, and we believe you understand that argument. In our Catholic moral tradition, the end does not justify the means. Mr. Chairman, just let me also say very briefly that we feel that immigrants who are going to be denied many, many Federal benefits under these programs should not be turned away when they are destitute. Under these programs not only would government agencies be turning away people, but private nonprofits would have to screen out immigrants, even legal immigrants and that would mean our churches and charities would be turning away Americans who could not prove their citizenship at the very time they show up homeless, hungry, and in desperate need of assistance. Thank you very much for this chance to testify, Mr. Chairman.</p>
Foundation/ Institute/ Center	Stephen Moore, director, fiscal policy studies, Cato Institute	<p>Third, immigrants are not especially welfare abusers. If you look at the 1990 census data it is very clear that immigrants and natives have roughly the same rates of welfare use. For example, in 1990, immigrant; had about a 4.9-percent rate of welfare use. It was about 4.2 percent for native-born citizens. Here is the interesting thing about the statistic. Again I would refer you back to my testimony. If you break this statistic down 464 and you take out the refugees because we have two types of major immigrants who come into this country, refugees and immigrants, and our welfare policies are different with respect to refugees and immigrants. We are much more generous with respect to-refugees. If you take them out of the picture, you will find this: Immigrants are only half as likely to use welfare as are U.S. born citizens. It is interesting. I would say, by the way, that the Republican Contract says nothing about refugees where the real welfare problem exists. The welfare problem does not exist primarily with immigrants...</p> <p>Dan Stein is correct that our traditional policy has been one where we have essentially tried to exclude those who would become a public charge. I think it has become a breakdown in our immigration policy that that is not enforced. At one time in our history it was enforced. In the twenties, for example, we would deport people if they became a public charge. And I think we have to get much stricter in terms of basically saying we want people to come to this country who want to work and because they want to reunify with their family and we want people who will become productive citizens. We don't want America to be a welfare magnet. I don't think that is existing, but to the extent that we can prohibit it, I think that is a good thing.</p>

Table 7.2
Eugenic Discourse By Witness Category
Welfare Reform Period: 1995-1996

Results From Qualitative Coding:
Witness

Passages containing manifest or latent content about race, class or sex

Category	Witness	Text
Medical Professional	Dr. Joe S. Milhaney Jr., president, Medical Institute for Sexual Health	This epidemic of teen pregnancy and of STD is being driven by two common problems among teens-the early age of initiation of sexual intercourse, and the number of sexual partners they have. Both of these have a profound influence on teens. The Center for Disease Control, for instance, showed that if a teenager initiates sex before the age of 18 they have a 45-percent chance of having four or more sexual partners when they are interviewed later on. If they start sex after they are 19, they have a 1-percent chance of having had four or more sexual partners when they are interviewed later. A very significant question in this discussion is why do teens have sex? It is not usually happening to two beautiful young people who maturely decide, after they fall in love, to have sexual intercourse. It is most often because they are victims. They are victims of loneliness, of peer pressure, of alcohol, of drugs. Remember, one-fourth of teen girls have been sexually abused and a common result of this is that they become sexually promiscuous. The abuse, itself, is one of the destructive aspects of the sexually charged milieu that our teens are living in today. Remember also that recent studies, more than one, have shown that most teen-agers, in high school and lower, have had sex with people older than high school age. The younger they are the more likely the men that they had sex with are to be outside of high school age or even in their twenties.
Medical Professional	Dr. Joe S. Milhaney Jr., president, Medical Institute for Sexual Health	First, the community of two people who love each other, live together for life, have children, and offer those children greater opportunities. The second community is of single parents, often forced to live in poverty with diminished hopes for their children and with all the diseases we have been talking about. The financial costs of all of these problems, by the way, ranges into the multiplied billions of dollars. I am not pessimistic. I believe that the situation now is so bad, and the old approaches so discredited, that men and women of wisdom will realize the necessity of new approaches and will do the hard work required to bring an end to this problem that is literally tearing apart the fabric of our society. Thank you, Committee and Chairman Shaw.
Medical Professional	Dr. Joe S. Milhaney Jr., president, Medical Institute for Sexual Health	Our failure to break this cycle of teenage sexual activity will only allow further victimization of these young people. Clients of the present welfare system represent a large group of people whose lifestyle includes activity that increases risk of out-of-wedlock pregnancy and sexually transmitted disease. These activities not only hurt the individual but they also hurt society. You have heard some examples of that, another example is that 82 percent of incarcerated individuals, by one study, are high school dropouts, most of whom are from low-wealth communities. Therefore, as much as we might like to separate all of these things there is no way of separating this potpourri of welfare, medical, and societal problems. For those in the welfare system, I think we need to provide a safety net for the extreme problems but we do not want to make it so comfortable that it induces people into the single parent family life that has helped produce two communities in our society.

Table 7.2
Eugenic Discourse By Witness Category
Welfare Reform Period: 1995-1996

Results From Qualitative Coding:
Witness

Passages containing manifest or latent content about race, class or sex

Category	Witness	Text
Religious	Rev. Robert A. Sirico, president, Acton Institute for the Study of Religion and Liberty	Thank you very much. Ladies and gentlemen of the Committee, I thank you for inviting me to testify today. I come as a nonpartisan. I am not a Republican. The problem of illegitimacy is shredding the fabric of our society. We all agree on that. It is critical that radical measures be taken to restore the family unit as the organic extension of the natural order of private life absent excessive government involvement. Let me say at the outset that I view a two-parent family as a moral norm. Indeed, I believe the family is the fundamental unit of society. While there are certainly heroic stories of single mothers, most of these women would admit their condition is not ideal. There is no reason to celebrate it as such as many on the left seem to do. Other members of this panel are experts who can quote statistics on the dimensions of the illegitimacy problem. I am not. Please allow me to simply point out the links are quite clear between a missing parent in a child's life and poverty, illegal drug use, failure in school, violent crimes, gang activities and suicide. Illegitimacy is not merely a technical problem but a moral one. To the extent that the Federal Government encourages out-of-wedlock births, it is morally culpable. While I hold the Federal Government partly responsible for the soaring illegitimacy rates since the beginning of the Great Society programs, I am not asking Federal officials to solve the problem by themselves. In my view, the Federal Government should not now try to tinker with its welfare programs to punish women who give birth to children outside of marriage. As I said, illegitimacy is a moral problem and the Federal Government is not and indeed cannot be an effective moral teacher.
Religious	Rev. Robert A. Sirico, president, Acton Institute for the Study of Religion and Liberty	We need to make charitable giving more financially rewarding. For example, we could allow individuals to deduct 110 percent of their charitable contributions, thereby increasing the incentive to give. Or tax deductions could be replaced with a tax credit which could allow people to choose to use their money to support public or private systems of welfare provision, thereby having an incentive to monitor those charities. These are decisions for you to decide. Whatever policy routes are taken, the ultimate goal should be to return responsibility to individuals, churches, neighborhoods, towns, and cities. Every case of family tragedy is different and the individuals involved have different resources, abilities, and weaknesses. A faceless bureaucracy cannot take all of these things into account, nor can it encourage moral renewal. What people need is not layers of public agencies but other human beings who have knowledge of their real needs and a commitment to help them become responsible and independent citizens. Thank you for your attention.
Religious	Rev. Robert A. Sirico, president, Acton Institute for the Study of Religion and Liberty	If another baby means no hardship and a bigger check, it is easy to see why this is not a wholly undesirable situation from one point of view. Yet, if the individual circumstance is being closely monitored by a secular charity or religious ministry, the individual becomes acutely aware that sexual responsibility has a price. The religious group very likely views sex outside of marriage as sinful and will not provide services without admonition or some form of work in return. As an organic part of a church ministry, the individual becomes accountable to those who are providing aid. The close contact with providers discourages irresponsible behavior. This model relies on the classical view of moral tutoring which is two dimensional: We abstain from immoral behavior because we fear its effects and we abstain because we love the good. Church-run charities hope to instill a love of good in the people they help. Yet clients may also fear a reprimand or loss of services. Fear and love are both motivators. While the latter is a preferable motive, the former is also effective. Effective charities will thrive on their own yet steps must be taken to allow them to flourish.

Table 7.2
Eugenic Discourse By Witness Category
Welfare Reform Period: 1995-1996

Results From Qualitative Coding:
Witness

Passages containing manifest or latent content about race, class or sex

Category	Witness	Text
Religious	Rev. Robert A. Sirico, president, Acton Institute for the Study of Religion and Liberty	The alternative to the current welfare system is to organize the care of at-risk people in a manner that allows for the influence of religious values. The government need only allow this to happen, it need not promote it. By gradually eliminating Federal benefits which impose no concrete responsibilities on the recipient, poor women who are pregnant out of wedlock will have to turn to more local organizations which include churches, synagogues and mosque-run charities. Think of the change in incentives that would result. If another baby means no hardship and a bigger check, it is easy to see why this is not a wholly undesirable situation from one point of view. Yet, if the individual circumstance is being closely monitored by a secular charity or religious ministry, the individual becomes acutely aware that sexual responsibility has a price. The religious group very likely views sex outside of marriage as sinful and will not provide services without admonition or some form of work in return. As an organic part of a church ministry, the individual becomes accountable to those who are providing aid. The close contact with providers discourages irresponsible behavior. This model relies on the classical view of moral tutoring which is two dimensional: We abstain from immoral behavior because we fear its effects and we abstain because we love the good. Church run charities hope to instill a love of good in the people they help. Yet clients may also fear a reprimand or loss of services. Fear and love are both motivators. While the latter is a preferable motive, the former is also effective. Effective charities will thrive on their own yet steps must be taken to allow them to flourish.
Religious	Rev. Robert A. Sirico, president, Acton Institute for the Study of Religion and Liberty	Church-state separation requires the welfare bureaucracy to remain morally neutral and it cannot effectively promote sexual responsibility from a morally neutral pulpit. Rather than Federal solutions, I believe there is a principle that should guide any and all efforts toward welfare reform. That is the principle of subsidiarity. The concept is this: Those social functions that can be accomplished by a lower order of society should not be usurped by a higher order. When it comes to caring for women who are pregnant out of wedlock, the resources of first resort, of first resort, should be individuals, churches, neighborhoods, then towns and cities. The Federal Government has tried to solve the American family problem and it has failed. It must now allow these mediating institutions to take over. The idea of devolving social responsibility to the States is in keeping with the principle of subsidiarity. It is a step in the right direction. By itself, however, it is not enough. We do not want Washington bureaucracy to merely be replaced by equally intrusive government bureaucracy in State capitals. When dealing with the illegitimacy problem, the very nature of the bureaucratic state, with its one-size-fits-all policies, precludes from helping individuals become responsible parents and citizens. Indeed, it takes a much deeper understanding of human needs to encourage this. Also, these bureaucracies marginalize religious institutions and their moral influence which are more intimately acquainted with the needs of people on the local level. The very existence of the welfare state lessens.

Table 7.2
Eugenic Discourse By Witness Category
Welfare Reform Period: 1995-1996

Results From Qualitative Coding:
Witness

Passages containing manifest or latent content about race, class or sex

Category	Witness	Text
Medical Professional	Dr. Jack P. Shonkoff, dean, Florence Heller Graduate School for Advanced Studies in Social Welfare, Brandeis University; representing American Academy of Pediatrics	To understand the problems, let's look at the faces and the environment of the children in need of the welfare system. Since the early 1970s, the poverty rate among children has steadily increased. Between 1987 and 1992, a staggering one million more young children became poor. As you know, two-thirds of the nation's AFDC recipients are children. Even with the current welfare safety net, however, 25 percent of all children under age six, or six million children, now live in poverty. Most are the children of working parents. Low-income children are more likely to live in dangerous neighborhoods and have a higher incidence of low-birth weight, asthma, infectious diseases, out-of-wedlock births, and exposure to lead than other children. They have lower immunization rates, poorer nutrition, and are more likely to attend below-average schools than non-poor children. As teens, low-income children have higher rates of suicide, drug abuse, and violent injuries and deaths, including homicide, than their more well-off counterparts. We cannot abandon these children. For their sake, and the sake of our nation's future, we all want to break this cycle of poverty and dependence on welfare. How can this be done?
Foundation/ Institute/ Center	Robert E. Rector, senior policy analyst, Heritage Foundation	Let's look at the consequences of this \$5.3 trillion investment we have made in programs for the poor. The most striking consequences are shown on the chart in the black line. The black line represents the percentage of the American population that was poor. What we see on the chart is that starting at the high point in 1950, about a third of the population was poor. The red line charts constant dollar welfare spending. During the fifties the spending is at the bottom of the chart. You can barely see it. But during the fifties and early sixties, the poverty rates plummeted, falling about 1 percentage point a year. Poverty fell from 30 to 15 percent of the population while welfare spending remained at a tiny level. Then something happens. In 1965 the spending takes off and begins to explode. But the poverty rate stops falling. It kinks over and basically remains unchanged for the next 30 years, bumping up and down a little bit. It is higher today than it was in the mid-sixties when the war on poverty began. So despite \$5.3 trillion, we not only didn't reduce poverty, we brought to a standstill the natural progress against poverty that was occurring before the war on poverty began. Similarly in the same period, the illegitimate birth rate rose from around 5 percent to close to 33 percent, the crime rate quadrupled, and on and on. In almost every social indicator, our society became worse as a result of this spending.

Table 7.2 (continued)
Eugenic Discourse By Witness Category
Welfare Reform Period: 1995-1996
Results From Qualitative

Coding:		Interpretive Rule for Discourse Analysis	
Witness Category	Witness	Latent	Projective
Private Agency/ Council/ Assoc.	Ed Austin	First, the speaker arranges his argument in such manner that leads the listener to form the conclusion that welfare induces family formation where one or both of the parents have no commitment to their children. Elites are then left to draw upon cognitively held stereotypes about how this process occurs making the subjective interpretation that the children are probably born out of wedlock. I also focus on how coded language is used to induce the listener to form a subjective interpretation about the racial or ethnic identity of the dysfunctional welfare families being discussed.	
Private Agency/ Council/ Assoc.	Ed Austin		In this excerpt the welfare system leads to welfare dependency and is a primary cause of social inadequacy in the forms of family degeneration, pauperism (chronic poverty), and direct/indirect costs. The belief that welfare dependency causes social inadequacy is an important pattern emerging from the data.

Table 7.2 (continued)
Eugenic Discourse By Witness Category
Welfare Reform Period: 1995-1996
Results From Qualitative

Coding:		Interpretive Rule for Discourse Analysis	
Witness Category	Witness	Latent	Projective
Religious	Sharon M. Daly		This speaker is challenging welfare reforms that would encourage the denial of human rights to unborn children due to the socioeconomic status of the mother. The witness is describing a policy similar to that of eugenic sterilization of the socially inadequate in an effort to reduce the social and economic cost of care provided by the state. I interpret policies that may increase the rate of abortions for poor women as eugenic.
Religious	Sharon M. Daly		The speaker is suggesting that the family cap influences poor women to abort children not covered by AFDC. I consider welfare reforms that inadvertently lead to a rise in the abortion rate for poor women to be a form of eugenics.
Foundation/ Institute/ Center	Stephen Moore	This quote is essentially a eugenic argument about excluding immigrants who may become socially inadequate. Immigrants who may legitimately need temporary public assistance are stigmatized as not desiring to be productive citizens. The implied meaning contained within this discourse is that immigrants come to the U.S. not to earn a living through meaningful employment but to receive public charity.	The speaker uses associative-priming to draw upon popular opinions that Latino immigrants come to the U.S. to receive Medicaid and other welfare benefits.

Table 7.2 (continued)
Eugenic Discourse By Witness Category
Welfare Reform Period: 1995-1996
Results From Qualitative
Coding:

		Interpretive Rule for Discourse Analysis	
Witness Category	Witness	Latent	Projective
Medical	Dr. Joe S.		This argument contains a similar pattern used under eugenic ideology about the feeble-minded "alms-house" type of woman or girl who is sexually promiscuous and needs to be segregated to protect society.
Professional	Milhaney Jr.		
Medical	Dr. Joe S.		The speaker has socially constructed two idealized communities structured according to morality, marital, health, and socioeconomic status. The "men and women of wisdom" references the intelligentsia comprised of the more affluent classes. The old approaches have produced the second community of loveless, poor single parents - welfare dependency. The implied solution is to terminate the existing welfare system. In this veiled eugenic argument welfare dependency is the cause of social inadequacy instead of defective or inferior germ plasm.
Professional	Milhaney Jr.		

Table 7.2 (continued)
Eugenic Discourse By Witness Category
Welfare Reform Period: 1995-1996
Results From Qualitative
Coding:

		Interpretive Rule for Discourse Analysis	
Witness Category	Witness	Latent	Projective
Medical Professional	Dr. Joe S. Milhaney Jr.		The primary focus of this argument is to persuade the listener to make a subjective interpretation that welfare contributes to the social problem of sexual promiscuity and illegitimacy. Race codes are employed as cues to induce elites to draw on socio-cognitive preconceptions about the sexuality of poor minorities who receive welfare benefits. I interpret this passage as containing racial meaning in a projective form calling for an inductive analysis of the text. The topic of the preceding passage is about the deviant "lifestyle" of a subgroup of the welfare population that increases the risk of out-of-wedlock pregnancy and sexually transmitted disease. The witness implies that the welfare system contributes to irresponsible sexual behavior, which is part of a broad array of societal problems.
Religious	Rev. Robert A. Sirico	The speaker constructs and idealized type of moral family structure suggesting that single-parent types are immoral. Next, he suggests that a correlation between single-parent families and social problems infers a causal relationship. This is essentially a eugenic argument about social inadequacy and illegitimacy induced by federally funded welfare dependency.	

Table 7.2 (continued)
Eugenic Discourse By Witness Category
Welfare Reform Period: 1995-1996
Results From Qualitative

Coding:		Interpretive Rule for Discourse Analysis	
Witness Category	Witness	Latent	Projective
Religious	Rev. Robert A. Sirico	The speaker constructs knowledge about welfare recipients as needing "moral renewal" and to become "responsible" and in need of having their citizenship status changed from dependent to "independent". The entire welfare system is stigmatized as a "faceless bureaucracy" that somehow functions without the agency of "human beings". This is the oft-repeated eugenic argument that the welfare system causes dependency and social inadequacy.	
Religious	Rev. Robert A. Sirico	This quote contains the familiar stereotype for the "alms-house type" of woman who needs to have her sexuality and fertility surveilled under the threat of loss of charitable services. The speaker suggests that poor women who become pregnant are immoral and require "classical...moral tutoring" for violating traditional views of sexuality and marriage.	
Religious	Rev. Robert A. Sirico	This quote contains a eugenic argument about the "alms-house" type of socially inadequate women who need to have their sexuality and reproduction socially controlled through monitoring and institutionalization.	According to the speaker in this quote, the welfare system incentivizes immorality, irresponsibility, and sexual promiscuity and requires stronger social controls imposed on recipients including moral teachings and fear of loss of services. I consider most of the discourse targeting female sexuality and reproduction and patriarchal in nature.

Table 7.2 (continued)
Eugenic Discourse By Witness Category
Welfare Reform Period: 1995-1996
Results From Qualitative

Coding:		Interpretive Rule for Discourse Analysis	
Witness Category	Witness	Latent	Projective
Religious	Rev. Robert A. Sirico	In the accompanying quote, women who become pregnant out of wedlock are stigmatized as immoral. This discourse is an appeal to the "alms-house" type of socially inadequate woman who needs to have her sexual behavior monitored or needs to be placed under local custodial care. This is a eugenic argument.	
Medical Professional	Dr. Jack P. Shonkoff	I identify a series of code words that may have no latent meaning alone, but when used in a pattern are intended to convey race or ethnicity in the minds of elites. The label "low-income children" in and of itself, may not be sufficient to induce elites to subjectively interpret this reference as meaning racial or ethnic minorities. When "low-income" is contextualized with labels such as, "dangerous neighborhoods", "below-average schools", "out-of-wedlock births", "violent...deaths, including homicide" and "dependence on welfare" racial or ethnic identity can be inferred from social and community context without any overt mentioning of race or ethnicity.	

Table 7.2 (continued)
Eugenic Discourse By Witness Category
Welfare Reform Period: 1995-1996
Results From Qualitative

Coding:		Interpretive Rule for Discourse Analysis	
Witness Category	Witness	Latent	Projective
Foundation/ Institute/ Center	Robert E. Rector		Since a large majority of poor Blacks were the beneficiaries of expanded access to welfare benefits (for the first time) during the period referenced they are the population group implied in this argument. The speaker is suggesting that welfare caused an increase in crime and illegitimacy primarily among poor Blacks. "Our society" is coded language for the middle-class and more affluent dominant group members who are experiencing the effects of social problems resulting from urban migration and desegregation. This is a similar argument made about the socially inadequate under eugenics.