

## 2 Biopolitics and Modernity: Revisiting the Eugenics Project

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For a long time, the notion of eugenics was firmly associated with the notions of racism and biological determinism; eugenics was taken to be a reactionary, pseudo-scientific ideology, typically emerging from an authoritarian, fascist or totalitarian state. Hence, eugenics was located on one side of a binary matrix, together with racism, biological determinism, pseudo-science, coercion, control and authoritarianism as opposed to tolerance, sound science, freedom and democracy on the other. In this vein, Garland Allen, one of the first historians of eugenics in the 1970s, lamented that British eugenics

became a reactionary programme for solving social problems through biological technology. A direct heir of the Social Darwinist philosophy of the late nineteenth century, twentieth century eugenics had a strongly racist bias which explained all differences between people in hereditary terms. Eugenicists saw all racial and ethnic groups (what they persisted in calling 'races') in hierarchical terms, with the Anglo-Saxon on top and all other groups ranging below in a scale of decreasing whiteness. (Allen 1976, 111)

With the emergence of the new genetics in the 1980s and 90s, the picture of eugenics as a repressive, reactionary and racist ideology often served as a background against which genetics compared quite favorably. While eugenics, in this picture, put the emphasis on race, the new genetics served the purpose of health; while eugenics was state-sponsored and operated through force, genetic testing was a matter of individual freedom and self-determination. Eugenics was pseudo-science; genetics was sound science. As David Gems of the Galton Library summarizes:

Among the numerous reasons for disapproving of 20<sup>th</sup> Century (*sic*) eugenics programmes are the fact that they were typically not only authoritarian, but

also based on an inadequate understanding of human genetics, particularly before the Second World War. Then there was the special place of eugenics in the deranged ideology of German National Socialism. Arguably, Nazi atrocities justified in terms of eugenics (principally the Holocaust) are more the consequence of the brutal, totalitarian and at times insane character of Nazism, than the desire to promote human well-being through genetics. These failings of eugenics are historically contingent and do not necessarily follow from the idea of promoting human genetic well-being. (Gems 1999, 199)

Today's genetic engineering, it has been argued, is entirely different from the eugenics of former times, given that

[...] population eugenics involves commanding people to produce desired genotypic or phenotypic traits. This sort of eugenics is not the same as allowing an individual or couple voluntarily to choose a heritable trait in their sperm, egg, embryo, or fetus, motivated by their view of what is good or desirable. (Caplan, McGeen et al. 1999, 338)

Others hold that eugenics and the new genetics are not so different after all, but that both should be approved since genetic technologies in combination with reproductive medicine may serve to select against undesired qualities in human offspring and enhance the quality of the nation, population, society or human species (Lynn 2001). In this view, eugenics was not itself a problem; only the Nazis' *abuse* of it constituted one. Even if the new genetics does bring about a return of eugenics, then, this is considered acceptable unless it is coupled with a return of Nazism.

As part of a different endeavor, namely seeking to capture the distinctively novel features of biopolitics in the 21<sup>st</sup> century, Nikolas Rose also contrasts the old eugenics to the new genetics. Contemporary biopolitics, he argues, is characterized by a molecularization of knowledge, a focus on optimizing the healthy body, new somatic identities, an expanding bioeconomy, and new forms of collectivity that he and Paul Rabinow have termed biosociality (Rose 2001; Rabinow and Rose 2006; Rose 2007). We need a new conceptual framework, he argues, to capture the configuration of contemporary biopolitics in its own right; classifying it as a new form of eugenics will not suffice. As true as this may be, the contrast between old eugenics and new genetics is misleading as it draws on a simplified and reduced understanding of historic eugenics.

Eugenics, Rose claims, “was a collective attempt imposed by a state to improve the quality of the population, in a geopolitical context often seen as a struggle between races. What we see today is something different.” (Rose 2006, 13) Politically, Rose argues, eugenics was sponsored and administered by the state, whereas the new biopolitics is taking place in a variety of fields and is promoted by a variety of non-state actors such as self-help groups, ethics committees, professional associations, and not least individuals (Rose 2001). Epistemologically, eugenics relied on the notion of genetic determinism and biology as destiny, whereas contemporary biomedicine and genetics refute the view of biology as destiny and, rather, regard life as something open to modification and enhancement.

This chapter challenges the dichotomy between an old, reactionary, racist, state-sponsored, biologically deterministic eugenics and a new, scientifically sound, unideological, non-racist genetics serving the health and self-determination of the individual. It does so, however, less by questioning the genetics component of the model and more by revisiting the historic eugenics project and demonstrating that it was not necessarily reactionary, racist, deterministic and state-sponsored. At least, these were not its most significant and distinctive features. It is true that eugenics was profoundly anti-egalitarian and incompatible with notions of fundamental human rights and dignity. However, it was not confined to the reactionary, authoritarian or anti-democratic end of the political spectrum. Eugenics was a multi-faceted, international, politically diverse and essentially modern phenomenon of the early 20<sup>th</sup> century (Engs 2005; Wecker 2009; Bashford and Levine 2010).

Although eugenics aligned itself with various political rationalities, its varieties have some ideas and assumptions in common. The eugenics project revolves around two basic claims, one theoretical and one practical: first, that humans can and in fact must be classified on a scale of differential worth. In the words of Harry Laughlin, one of the founding fathers of US eugenics:

Every science which deals with man in any way attempts to make its own classification of mankind. [...] Its [eugenics'] classification must be based upon the ability of particular stocks to function as socially valuable units and to reproduce themselves in proportion with their race values. (Laughlin 1925, 31)

Eugenics thus establishes a system of differential worth among humans based on the presence or absence of certain qualities that are, assumedly, passed down to future generations. Second, eugenics assumes that it is both neces-

sary and possible to reduce the number of individuals of inferior quality to the benefit of those of superior quality and thereby to improve the quality of the larger social collective. To quote Laughlin again: “It is a big job to purge the race, but it is one of the principal practical tasks of eugenics” (Laughlin 1925, 34).

Whether or not eugenics aligned itself with reactionary, authoritarian, racist, biologist rationalities, it maintained these two assumptions. At its core lies the distinction between the fit and the unfit, the useful and the useless, the inferior and the superior, those who are an asset to society and those who are a burden. Combined with the assumption that individuals pass these qualities on to coming generations, this distinction constitutes a eugenic matrix as part of a larger biopolitical rationality demanding to reduce the numbers of the unfit, the dysfunctional and the unproductive in order to improve the fitness, functionality and performance of the social body at large. This biopolitical rationality informed and motivated a wide range of political, academic, social and cultural efforts in the 20<sup>th</sup> century, whether these were termed eugenics, racial hygiene, social reform, or called by another name.

## 2.1 A Modern Project

As is generally known, the term ‘eugenics’ was invented by the British anthropologist and statistician Francis Galton. The new academic discipline that Galton intended to establish was a hybrid creation, a cross between science and social engineering envisioned as useful to policy and planning. Most of all, it was fundamentally oriented towards the future. Galton thus chose the name ‘eugenics’ to denote “the study of the agencies under social control that may improve or impair the racial qualities of future generations either physically or mentally” (Galton 1907).

Thus, from the start, eugenics was a field where science and politics, facts and values, practices of knowing and practices of intervening intersected and co-constituted each other. It self-identified as an applied science rather than as basic research.<sup>1</sup> Hence, there was never such a thing as a purely scientific, value-neutral, apolitical discipline of eugenics that eventually became corrupted, that was politically misused or instrumentalized.

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1 For a detailed study on this aspect in the German context, see Weingart, Kroll et al. 1996.

Furthermore, it was far from being 'reactionary'; its aim was not to uphold the given social order, let alone restore that of the past. It did not draw on tradition, religion, customs or conventions but was decisively oriented towards the future. As Galton saw it, eugenics "extends the function of philanthropy to future generations" (Galton cited in Turda 2010a, 22).

Eugenics' vision for the future, however, was not one of social equality. Galton did not approve of the concept of equality:

I have no patience with the hypothesis occasionally expressed, and often implied, especially in tales written to teach children to be good, that babies are born pretty much alike [...]. It is in the most unqualified manner that I object to pretensions of natural equality. (Galton cited in Reilly 1991, 3)

Galton's opposition to the concept of equality did not, however, entail the belief that biology was destiny. His goal was not to maintain the biological status quo and stabilize existing inequalities. For Galton, eugenics was about human improvement; the purpose of the new discipline was to accelerate the evolution of mankind under conditions controlled by men. This required a new ethics. In this respect, again, eugenics was far from being 'conservative'. Implementing eugenic ideas required overcoming extant ethical norms, conventions and traditions, which in fact formed an impediment to eugenics. In Germany around 1900, prominent eugenicists explicitly promoted a new, evolutionary, so-called generative ethics, an ethics that would further the hereditary qualities of future generations and the evolution of mankind (Weingart, Kroll et al. 1996, 141). In this vein, Wilhelm Schallmayer, a prominent co-founder of eugenics in Germany who saw himself as a democrat and socialist of sorts, explained that a generative ethics would include "moral obligations in support of the race (that is, in support of the hereditary qualities of future generations of our community)" (Schallmayer cited in Weingart, Kroll et al. 1996, 141).

Thus, for eugenics, the past provided no moral orientation or authority whatsoever; at best, it did not stand in the way. The most extreme version of eugenic politics, Nazi eugenics, consequently took the most anti-conservative stance with respect to ethics. As then-Minister for the Interior Wilhelm Frick stated:

The scientific study of heredity (based on the progress of the last decade) has enabled us clearly to recognise the rules of heredity and selection as well as their meaning for the nation and state. It gives us the right and the moral

obligation to eliminate hereditary defectives from procreation. No misinterpreted charity nor religious scruples, based on the dogmas of past centuries, should prevent us from fulfilling this duty [...]. (Frick cited in Turda 2010a, 111)

From its inception in 19<sup>th</sup> century Britain to its eliminatory implementation under the Nazi regime, eugenics took a decidedly modernist stance towards the future. Eugenics can best be understood as a modernist politico-epistemic project encompassing ideas, visions, knowledges and policies promoted by experts, policy-makers, professionals, practitioners, and an exceptionally broad variety of civil society actors. What held the project together was the common mission to improve the socio-biological basis of human life at the collective level. The type of collective chosen for improvement could differ. It could be the race, the Aryan race, society, humankind, or another group. In all cases, though, eugenics sought to strengthen and improve some sort of collective entity. That entity then became the object of deliberate efforts at rational intervention. As such, eugenics can be considered the paradigmatic case of biopolitical modernity (Braun and Gerhards 2019).

The future, however, was a creature of the present. One could not simply wait for it; it required action—action *in time*. To refrain from intervention and social engineering would be to open the gates to degeneration. In that sense, eugenics epitomized modernity as German historian Reinhart Koselleck saw it. For Koselleck, the idea that the future is open and amenable to deliberate intervention, and that it in fact requires intervention, marks the threshold of modernity (Koselleck 1989). Modernity, according to Koselleck, is characterized by the temporalization of history. Well into the 16<sup>th</sup> century, history was a time of eschatological expectation, the time that remained before the second coming of Christ, the Final Judgment and the end of time. Modern time, in contrast, was open-ended and full of possibilities. The future came to be amenable to human intervention, but at the same time it also became uncertain. Planning it became both feasible and imperative. Until then, the present had been a long stretch—nothing much would change in any case. Now, it shrank to the point between past and future where decisions had to be taken. At the same time, anticipating possible futures, establishing the likelihood of future developments, deciding which were desirable and which not, pushing desirable developments and preventing undesirable ones became part of the responsibilities and the remit of the state whose legitimacy no longer originated in a Christian cosmology. From the perspective of eugenics, not

only the economy, human morality, science and technology were amenable to enhancement; human hereditary qualities were as well. It was first and foremost, although not exclusively, the state that was now in charge of action. Importantly, as Koselleck shows, the temporalization of history implies the construction of collectivities such as ‘the nation’, ‘humanity’ or ‘the race’. These imagined entities were assumed to remain the same through historical changes, thus bearing the marks of history and rendering it observable.<sup>2</sup> What Michel Foucault (1980, 2003) called biopolitics is very similar. Biopolitics, for Foucault, is the form of politics that co-emerged with the modern state and is directed at regulating and enhancing the composition and the qualities of the population. Biopolitics is essentially future-oriented in that it strives for future improvement; it is knowledge-based in that it relies on statistics, correlations and prognoses (Braun and Gerhards 2019). On all of these counts, eugenics can be considered the paradigmatic case of biopolitics.

## 2.2 Eugenics and Social Reform

Hence, eugenics was not reactionary or conservative. Nor was it typically a project of the political right. Historians of eugenics have provided ample evidence that it had adherents among a broad range of political groupings, including socialists, social democrats, anarchists, and feminists.

The view that eugenics was promoted by political conservatives, at least originally, has been sustained by Daniel Kevles’ (1985) influential study on the history of eugenic ideas in Britain and the US. Kevles makes a conceptual distinction between mainline eugenics and reform eugenics. Mainline eugenics, he argues, came first and was eventually superseded by reform eugenics. Kevles refers to mainline eugenics as politically conservative, elitist, rife with racist and anti-Semitic attitudes, scientifically reductionist and politically in favor of compulsory measures. Reform eugenics, in contrast, was developed by leading biologists who objected to mainline eugenics’ sexual repressiveness, its class and race prejudices, and above all its false biology. By the mid-1930s, mainline eugenics was in decline due to increasing criticism from reform eugenicists. Thus, in this narrative, sound science overcomes

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2 Koselleck coins the term “collective singular” (*Kollektivsingular*) here.

bad science along with the latter's problematic political attitudes. After 1945, Kevles states, eugenics was discredited completely due to its Nazi legacy.

Several points have been raised against this account. First, while presented as *the* history of eugenics, it is actually a history of US and UK eugenics with some references to Germany. Furthermore, a number of scholars have questioned Kevles' periodization and shown that eugenic assumptions endured among British, US and German biologists and geneticists long after 1945 (Weindling 1993; Weingart, Kroll et al. 1996, 631ff.; Mazumdar 2002; Dowbiggin 2008). Third, Kevles studies eugenics mainly as a set of ideas, not policies and practices. Due to the focus on scientists and their views, he overlooks the continuity of eugenics after 1945. Selective sterilization laws were *not* abolished in the US after the war; many in fact lasted into the 1950s and 60s (Reilly 1991). In the Scandinavian countries, selective sterilization laws endured into the 1970s<sup>3</sup>. Furthermore, feminist scholars have pointed out that improving the quality of the population continued to form a US policy objective after 1945, although the emphasis was more on the voluntary and pronatalist strategies of encouraging the 'fit' to have more children (Kline 2001; Stern 2005; Ziegler 2008).

Numerous studies have by now pointed out that eugenic values and aspirations were by no means confined to the political right but were quite common on the left as well (Paul 1984; Schwartz 1995). Leading socialists and social reformers such as Sidney and Beatrice Webb (Leonard 2003), Margaret Sangers (Franks 2005; Lamp 2006; Klausen and Bashford 2010), John Maynard Keynes (Leonard 2005), Gunnar and Alva Myrdal (Spektorowski and Mizrachi 2004; Rabenschlag 2008; Kulawik 2009), and Karl Kautsky (Weingart et al. 1996, 108ff.) were proponents of the eugenics project. Conversely, many leading eugenicists such as the founder of social hygiene in Germany, Alfred Grotjahn (Weingart et al. 1996, 108ff.; Ferdinand 2009) and Swiss psychiatrist Auguste Forel (Gerodetti 2006b; Mottier 2008; Mottier and Gerodetti 2007) were sympathetic to socialist ideas or ideas of social reform.<sup>4</sup> Even among adherents of the anarchist movement in France and Spain, which was committed to the values of sexual reform and responsible reproductive self-determination,

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3 On Scandinavian eugenics, see Broberg and Roll-Hansen 1996; Weindling 1999; Weingart 1999; and Tydén 2010.

4 In Germany, however, as Weingart, Kroll and Bayertz (1996) note, the leftist faction of the eugenic movement was marginal.

many supported the idea of improving the race by preventing the unfit from breeding (Cleminson 2000; Sonn 2005; Cleminson 2008).

### 2.3 Eugenics and the Question of Race

Another popular notion about eugenics is that it is essentially racist. It is true that race is a pervasive topic in eugenics. Nevertheless, Marius Turda is correct to contend: “Eugenics as such was not necessarily a racist movement: indeed, arguing that eugenics was ‘racist’ tells us very little” (Turda 2010b, 63).

The relationships between eugenics and racism are multifarious and complex; whether eugenics can be characterized as racist depends first upon the respective national, regional, or political variant of eugenics and second on the meaning of the designation ‘racist’. Furthermore, I would inquire whether eugenics is despicable only if and when it ascribes differential worth to people according to the notion of race. Is it less or not at all problematic if worth is ascribed along the lines of health, productivity or fitness?

The term ‘race’ never had a stable meaning. At the time when the eugenics project emerged, it could refer to a broad variety of constructions of social collectives (Geulen 2007). In the course of the 19<sup>th</sup> century, the term had increasingly come under the authority of biology and anthropology and given rise to scientific racism (Barkan 1992; Foucault 2003, 43ff.). Scholars of scientific racism claimed that they could classify humans along certain innate physical, mental, or behavioral characteristics; that they could identify a (varying) number of essentially different natural units among humanity that could be ranked into systems of superiority and inferiority; and that race membership caused complex social, cultural, and behavioral phenomena. Yet this was but one use of the term. Concurrently, the word ‘race’ could, for instance, refer to notions of tribal, family or class lineage (Conze and Sommer 1984). To confuse things further, Galton and later eugenicists often spoke of the human race as the entity that, in their view, was in danger of degeneration or need of improvement. Galton argued that, in contrast to farm animals, the human race had been sadly neglected by breeders:

The breeders of our domestic animals have discovered many rules by experience, and act upon them to a nicety. But we have not advanced, even to this limited extent, in respect to the human race. [...] If a twentieth part of the cost and pains were spent in measures for the improvement of the human

race that is spent on the improvement of the breed of horses and cattle, what a galaxy of genius might we not create! (Galton 1865)

Still in 1926, on occasion of an international eugenics congress in Paris, the British Daily Telegraph titled:

Proposals for legislation which would do for the human race what natural selection does for creatures lower in the scale of life are being discussed in Paris at an international congress of eugenicists. (cited in Gerodetti 2006a, 224)

Both the meaning and the significance of race differed across national, regional, and political strands of the eugenics project. Scientific racism was an influential but not unanimously shared belief here; its influence in different national settings varied. The same holds true for the relationship between racism and eugenics at the political level. In the US, eugenic organizations such as the American Breeders Association and the Galton Society were concerned both about hereditary differences between races and about differential breeding of the fit and the unfit (Selden n.y.). In the early 1890s, concerns about the alleged fecundity of the unfit publicly aligned with racist concerns about dysgenic effects of immigration and interracial marriage and gave rise to an advocacy coalition that successfully lobbied for immigration restrictions and marriage laws on eugenic and racial grounds (Yamin 2008). Between 1875 and 1924, a number of US states had miscegenation laws in place that made it illegal for a white person to marry someone defined as a Negro (Reilly 1991, 25; Lombardo 1996; Dorr 1999). Since the early 1900s, advocates of racist marriage restrictions had received increasing support from protagonists of the eugenics movement such as Charles Davenport and Harry Laughlin, who provided scientific rationales for their demands (Reilly and Shaw 1983; Micklos and Carlson 2000; Lombardo n.y.). Interracial marriage, they argued, would inevitably lead to degeneration and the decline of the superior, namely White race. Eugenicists also supported the demand to further restrict existing miscegenation laws and enact new ones. Eugenic efforts led inter alia to the passing of the Virginia Racial Integrity Act of 1924 (Reilly and Shaw 1983; Micklos and Carlson 2000).

Similarly, eugenicists in the US identified the immigration of certain racialized groups, in particular immigrants from Southern and Eastern Europe, as one of the main causes of degeneration and lobbied for restrictive immigration laws (Micklos and Carlson 2000; Hansen and King 2001). Their

efforts were translated into the 1917 Immigration Restriction Law, which restricted the immigration of undesirables such as

idiots, imbeciles, epileptics, alcoholics, poor, criminals, beggars, any person suffering attacks of insanity, those with tuberculosis, and those who have any form of dangerous contagious disease, aliens who have a physical disability that will restrict them from earning a living in the United States [...] (Lombardo n.y.).

In addition, Laughlin's and other eugenicists' studies fed into the 1924 Johnson-Reed Act based on national quotas (Hansen and King 2001, 253).

US selective sterilization policies were also racialized in several ways. Alexandra Stern has shown that in California (which had by far the most extended and enduring sterilization policy in the US), although the wording of the law was race- and ethnicity-neutral, implementation was not, and that sterilization disproportionately affected foreign-born immigrants, African Americans and Mexicans (Stern 2005, 1131).

Thus, in the US, the eugenic project was closely intertwined with policies that deliberately discriminated against racialized groups. Racism in this sense was supported by eugenic rationales and inscribed into immigration law, marriage restrictions and selective sterilization laws. These policies operated through negative provisions such as exclusion, restriction, violation and prohibition of racialized groups. These laws and their implementation were authored and controlled by those members of the unmarked group, namely White, Anglo-Saxon US nationals, who considered themselves hereditarily superior.

Yet, these policies could also affect White US citizens who were deemed "socially inadequate", as Laughlin put it (Wilson 2002). "Socially inadequate", Lizzie Seal shows (Seal 2013), was a common label in US eugenic, psychiatric and welfare discourses in the 1910s, 20s and 30s for the so-called dependent poor, that is, those considered unable to sustain themselves economically and meet the demands of capitalist society. The socially inadequate, for Laughlin, included "feeble-minded, insane, epileptic, inebriate, criminalistic and other degenerate persons" who were "maintained wholly or in part by public expense" (Laughlin cited in Seal 2013, 147). 'Feeble-minded' and 'socially inadequate' operated as labels that linked 'substandard whiteness' and poverty to notions of moral deficiency, signalling an urgent need for state intervention. They specifically served as markers for 'tainted whiteness' (Stubblefield 2007) or 'substandard whiteness' (Seal 2013, 154). "Whereas black people would have

been regarded as automatically inferior, low quality whites needed to be identified from amongst the white population. ‘Degenerate’ whiteness mapped onto poverty.” (Seal 2013, 154)

In Germany, relations between eugenics and race played out differently and the term ‘race’ was allocated a more prominent role. In 1895, Alfred Ploetz, a major founder of eugenics in Germany, deliberately coined the term racial hygiene (*Rassenhygiene*) (Ploetz 1895) to denote a body of knowledge that elsewhere would have figured under the label of eugenics. Ploetz distinguished between two concepts of race: one that denoted the multiplicity of morphologically distinct groups within the human species (*Systemrasse* or *Varietät*) and one that referred to the biological quality of entire populations (*Vitalrasse*). The programme of racial hygiene, Ploetz maintained, should refer to the latter. For him, the purpose of racial hygiene was to prevent racial degeneration and improve the hereditary quality of the population as a whole (Weingart, Kroll et al. 1996, 91f.). The aim of Ploetz and some like-minded colleagues such as Fritz Lenz was explicitly to improve the Nordic race in order to defend it against a presumed Slavic threat (Weiss 1990). Others, such as the Association for National Regeneration (*Bund für Volksaufartung*) favored the term ‘eugenics’ but interpreted it as a nonracist endeavor to fight national degeneration and improve the hereditary fitness of the working classes (Weiss 1990, 35).<sup>5</sup> Another famous eugenicist in Germany, Wilhelm Schallmayer, who considered himself a socialist and a democrat, preferred the term *Rassehygiene* to that of *Rassenhygiene* in order to dissociate it from older racial theories of Gobineau provenance (Weingart, Kroll et al. 1996, 93f.). The term *Rassehygiene* (without *n*) indicated a single race instead of different races. As shown by Weingart, Kroll and Bayertz (1996) show, however, the majority of German racial hygiene scholars sympathized with the construction of a supposedly superior Nordic race, Aryan race, German culture or other notion.

Yet what does this tell us about the relationship between eugenics and racism in the German case? Studies that interrogate the relationship between eugenics, racial hygiene, racism and Nazism point out connections, interlinkages, and collaborations as well as personal, discursive, and institutional overlaps; tensions between these strands, though, also appear (Schmuhl 1992; Weingart, Kroll et al. 1996; Wecker, Braunschweig et al. 2009). Before 1933, the

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5 Yet, in 1931, the *Bund für Volksaufartung* merged with the *Deutsche Gesellschaft für Rassenhygiene* (German Association for Racial Hygiene) to found the *Deutsche Gesellschaft für Rassenhygiene* (Eugenik).

eugenics project in Germany had not been the most advanced one internationally; racial hygiene was well established in the forms of professional associations, academic positions and research institutions, but unlike its counterparts in the US and Scandinavia, German eugenics had not yet been translated into policies.

However, key concepts of racial hygiene featured in the Nazi programme as early as 1924, when Hitler incorporated entire passages of the so-called Baur-Fischer-Lenz, the racial hygiene classic at the time, into *Mein Kampf* (Weingart, Kroll et al. 1996, 372f.). Already at this point, the idea of eugenic selection formed an integral element of Nazi programmatics, tightly linked to racial purification, imperialist expansion and eliminatory anti-Semitism. While racial hygiene scholars had not necessarily sympathized with Nazism before 1933, they overwhelmingly embraced the Nazi seizure of power because Hitler, as psychiatrist Ernst Rüdin declared in 1934, would now at last allow them to translate their visions into reality (Weingart, Kroll et al. 1996, 390). And indeed, within two years, the Nazi regime enacted a full series of laws and measures directed at hereditary improvement and racial purification<sup>6</sup>.

One of the first of these was the Law for the Prevention of Offspring with Hereditary Diseases of July 1933—which I will refer to as the Hereditary Health Act—which mandated the sterilization of persons deemed to suffer from a hereditary disease, innate feeble-mindedness or alcoholism. In November 1933, the regime also mandated the castration of sexual offenders through enactment of the Law against Dangerous Habitual Criminals. In June 1935, the Hereditary Health Act was revised to allow, among other things, abortions for eugenic reasons and castration of male homosexuals. In September 1935, the Law for the Protection of German Blood and Honor (*Blutschutzgesetz*) followed, which prohibited marriages and sexual relations outside of marriages between Jews and citizens of ‘German or related blood’. In October 1935, it was complemented by the Marital Health Act, which banned marriages between persons deemed hereditarily valuable and those deemed hereditarily unfit and required prospective spouses to produce a marriage certificate confirming that the marriage was hereditarily unproblematic.

In contrast to the Law for the Protection of German Blood and Honor, the Hereditary Health Act was not specifically directed against Jews and did not discriminate between persons ‘of German blood’ and others. The wording was

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6 For an overview, see Schmuhl 1992; Friedlander 1995; Bock 2004.

race-neutral in the sense that it did not specifically target members of racialized groups. Although Jews were among its victims (Bock 1986, 354), they did not form the main target. On the contrary, Hitler's attitude towards sterilization of Jews was, as he told Minister Frick in 1935, that "there is no reason to improve alien races through applying sterilization" (Hitler cited in Bock 1986, 352). The fate that the Nazis planned for the Jews was elimination, not sterilization. After 1945, the question of whether Nazi sterilization policy was inherently racist would play a critical role for sterilization victims' struggle for reparations, since only those who had been persecuted "for racial, religious, or political reasons or because of the victim's world view" were entitled to reparations under the Federal Indemnification Act (BEG §1(1), see Chap. 3).

German historian Gisela Bock (1986), author of the first and still classic study on Nazi sterilization policy, argues that Nazi sterilization policy was indeed inherently racist. Bock offers a conceptual distinction between anthropological and hygienic racism. Both were based on notions of superiority and inferiority, she argues, and were constructed largely in terms of heredity and biology (Bock 1986, 356). They were not mutually exclusive but intersecting and complementary elements of 'racial upgrading' (*Aufartung*). Anthropological racism, Bock holds, was directed against other races, which were per se constructed as inferior, whereas hygienic racism targeted the unfit across racialized groups. Importantly, however, the Nazi concept of 'upgrading' did not consist simply of defending an existing, supposedly superior group against a different, supposedly inferior group, but also of actively *creating* the supposedly superior group (Bock 1986, 327). This argument, stressing the future-oriented, generative nature of Nazi racism is also made by Hannah Arendt in order to delineate Nazi racism from other types of racism (Arendt 1968, 412). The Nazis saw the master race as a project rather than an existing entity, and this project articulated strategies of selective pro-natalism with strategies of selective anti-natalism, racial purification and genocide.

Hence, there can be no doubt that Nazi sterilization policy was directed at 'racial upgrading' and was in this sense essentially racist. Several open questions still remain, though, for instance: is the concept of hygienic racism also applicable to non-Nazi variants of the eugenics project, that is, to eugenic variants *not* directed at 'racial upgrading'? Should hygienic racism be conceptualized as a unique phenomenon that cannot be separated from Nazism? And if so, what is there to gain from framing classifications of fit and unfit, socially adequate or inadequate, as racist beyond the scope of Nazi eugenics?

## 2.4 Welfare Eugenics

Apart from Germany and the United States, the Scandinavian countries were the 20<sup>th</sup> century's most 'eugenically developed' countries, both in terms of academic knowledge and actual policies<sup>7</sup>. When the State Institute for Race Biology in Uppsala opened in 1922, it was the world's first government institute of eugenic research (Rudling 2014, 42), and in the 1930s and 40s, at the same time that they launched the Scandinavian social welfare state, Denmark, Sweden, and Norway all implemented selective sterilization acts that included the possibility of both voluntary and compulsory sterilization. Lene Koch emphasises that

[c]ompulsion was reserved for cases where social responsibility and readiness to subject oneself to reproductive control could not be expected. This was the case with groups of people considered 'asocial' or 'antisocial' such as the mentally retarded, psychopaths, tramps, and prostitutes. (Koch 2004, 320)

Historians of Scandinavian eugenics tend to agree that questions of race were of rather marginal importance in these countries and that Scandinavian eugenics was not racist, although public discourse focused to some extent on ethnic minorities deemed incapable of adjusting to modernization such as Taters, Travelers and Lapps (Broberg and Tydén 1996; Haave 2000). Broberg and Tydén point out that in the 1930s, the Taters were increasingly constructed as a genetically inferior racial group whose behavior called for a more restrictive sterilization act. Somewhat ironically, the more restrictive 1941 Sterilization Act broadened the social indications for sterilization to include mental illness, mental retardation and an "anti-social way of life" (Broberg and Tydén 1996, 124ff.). This opened up the possibility of sterilizing members of the Tater group *without* further need for scientific justification. From the 1940s onward, the heredity frame in Swedish sterilization policy was increasingly superseded by a socio-political one. However, the racialization of the 'Tater issue' had been instrumental in bringing about the latter.

In Norway, racializing the so-called 'Tater issue' also played a role in the formation of the national sterilization policy in the 1920s and 30s (Haave 2000;

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7 Broberg and Roll-Hansen 1996; Runcis 1998; Weindling 1999; Haave 2000; Koch 2000; 2006; 2009; Spektorowski and Mizrachi 2004; Kulawik 2006; Spektorowski and Ireni-Saban 2010.

Braun, Herrmann et al. 2014). In official documents, this group was commonly described as *'omstreifere'* (itinerants) and associated with crime, avoidance of work, violence, sexual offences, drinking, and other socially undesirable behavior. The Itinerant Committee (*løsgjengerkomiteen*), appointed by the government in 1927, divided the *'omstreifere'* into two subgroups, 'the hopeless' and 'the inferior'. While 'the hopeless' were to be detained, 'the inferior' were to be sterilized (Itinerant Committee cited in Bastrup and Sivertsen 1996, 210). Thus, the construction of the 'Tater issue' linked ethnicity, poverty and an alleged inability to be a productive and useful member of society. Sterilization was considered a proper means to solve the problem. The Norwegian Sterilization Act, however, also allowed for sterilizing persons without personal consent if they were deemed mentally ill or mentally handicapped. These cases required a justification on eugenic, criminal or social grounds (Haave 2001, 2). Again, biology was but one among several possible indications for sterilization. The Norwegian Sterilization Act was in force from 1934 to 1977, with an interruption from 1942 to 1945, when the Nazi Hereditary Health Act was installed. The 1934 act allowed for three categories of legal sterilizations: sterilization of persons with full legal rights and upon application of the person concerned (§3 (1)), sterilization of minors or persons deemed insane or mentally impaired upon application of the person with the consent of a guardian (§3(2)); and sterilization of persons deemed mentally ill or mentally handicapped and incapable of providing personal consent upon application of a guardian or corresponding authority (§3(4)). Under the 1934 act, 2,123 sterilizations were reported under §3(2) or §3(4); of these, 922 were performed under §3(4), that is, without personal consent (Haave 2001, 2f.).

In the 1990s, the former sterilization policy became the subject of an intense public debate which, however, focused exclusively on the sterilization of the Taters. Involuntary sterilization was framed in terms of racial and ethnic discrimination only. Those who were involuntarily sterilized on the grounds of their alleged feeble-mindedness or mental illness were not addressed at all, as if involuntary sterilization constituted a problem only if and when performed for reasons of race but not for reasons of a person's abilities (Braun, Herrmann et al. 2014). Public reflection did not extend to injuries and the violation of those who were categorized as unproductive, unfit or incapable of leading a useful life in society. Thus, reducing sterilization policy to racial or ethnic discrimination obliterated the productivist and biopolitical dimensions of selective sterilization.

## 2.5 Eugenics and Feminism

Mainline eugenics, Daniel Kevles holds, was an anti-feminist affair dominated by White male academics who considered it a woman's most glorious duty to marry, stay at home, and give birth to children (Kevles 1985, 88f.). Many prominent American eugenicists opposed women's suffrage and college education on the grounds that it would divert these valuable women from fulfilling their procreative duty, thereby propelling the trend towards degeneration. In Germany, around the turn of the century, this type of anti-feminist selective pronatalism was also widespread and deeply intertwined with the rise of racial hygiene (Allen 2000). To conclude that eugenics was an anti-feminist project, however, would be misleading. Over the past decades, a wealth of research on the relationship between feminism and eugenics has produced a more nuanced picture<sup>8</sup>. It shows that women and women's movements have been actively involved with eugenic activities of different kinds, although the nature, scope and motives of this involvement are a matter of scholarly dispute. Further scholarship also shows the gendered nature of the eugenics projects, that is, its constructions of femininity, masculinity, motherhood, gender dimorphism, heterosexuality, and not least its gendered construction of target groups (Stern 2010).

According to some analysts, the alliance between women's movement actors and eugenics was a more strategic one. Late 19<sup>th</sup> and early 20<sup>th</sup> century feminists, seeking to fend off anti-feminist accusations of eschewing the burdens of motherhood, aligned with eugenic arguments in order to benefit from their scientific reputation (Pedersen 1993; Gordon 2002a). Other scholars object to this view, arguing that certain women's movement actors genuinely believed in the eugenic ideal of improving the race or nation through limiting the procreation of the unfit (Bland 1995; Ordovery 2003). Ann Taylor Allen goes even further and asserts that "eugenic theory was a basic and formative, not an incidental, part of feminist positions on the vitally important themes of motherhood, reproduction, and the state" (Allen 2000, 479). Allen shows that British and German women's movement leaders in the 1900s to 1930s,

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8 For an overview see Klausen and Bashford (2010) and Stern (2010). For specific case studies see Bucur (1994) for Romania, Gerodetti (2006) for Switzerland, Ladd-Taylor (1997), Dorr (1999) and Kline (2001) for the U.S., Allen (2000) for Germany and the UK and Allen (1988), Grossmann (1995), and Zimmermann (1988) for Germany.

including those who employed eugenic arguments, fiercely opposed contemporary pronatalism and its aggressive misogyny. In any case, a number of studies have pointed out that feminist affiliations with eugenics were heavily textured by relations of race and class as well as standards of social adequacy and fitness. Upon close inspection, feminist notions of reproductive rights and self-determination were often tied to notions of reproductive responsibility, which in turn were charged with notions of differential social worth or social adequacy. In the US, birth control movement leader Margaret Sanger, who founded the American Birth Control League in 1921, aligned her case for birth control and free and voluntary motherhood to the eugenics project of racial improvement (Sanger 2007). In Germany, the Association for the Protection of Mothers (*Bund für Mutterschutz*), a radical feminist organization for social and sexual reform founded in 1905, struggled for women's and children's social rights and women's sexual and reproductive self-determination and at the same time endorsed eugenic arguments and values (Grossmann 1995). Leading figures of the *Bund für Mutterschutz*, including Helene Stöcker and Lily Braun, adopted eugenic language to some extent to bolster their claims. Stöcker, in particular, called for women's sexual and reproductive self-determination but added that women must exercise it responsibly (Herlitzius 1995; Allen 2000). Ideally, for Stöcker, enjoying the right to reproductive self-determination would educate and enable women to make responsible reproductive decisions, for instance, to abort a pregnancy if the child could be expected to be mentally or physically weak (Herlitzius 1995, 350).<sup>9</sup> Those not able to do so, such as alcoholics, the mentally retarded or abnormal, should be prevented from procreating, if necessary by means of legal restrictions (Zimmermann 1988). Hence, the meaning of self-determination within feminist eugenics discourse was stratified along norms and standards of health, fitness, and socially adequate behavior.

A similar biopolitical rationality characterizes the thought of Margaret Sanger (Franks 2005; Klausen and Bashford 2010). Sanger advocated women's access to birth control, which she saw as absolutely necessary for racial betterment. Unlike many contemporary eugenicists, she did not adhere to biolog-

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9 Teresa Kulawik (2009) comments: "Her vision therefore appears to have materialized when, at the time when women in many countries of Europe and the Americas in the 1970s achieved the right of self-determination over their bodies, they also were handed the means for eugenic selection in the form of prenatal diagnostics, which was invented at that time."

ical determinism but contended that poverty, mental retardation and racial decay had social causes (McCann 1994, 99ff.)—not least among them overpopulation. Sanger also objected to a widespread tendency at the time to blame White middle-class women for racial degeneration because they refused to have children. These nuances notwithstanding, Sanger articulated voluntariness to responsibility, rights to duties, and some women's individual freedom to other women's denigration:

Birth control itself, often denounced as a violation of natural law, is nothing more or less than the facilitation of the process of weeding out the unfit, of preventing the birth of defectives or of those who will become defectives. So, in compliance with nature's working plan, we must permit womanhood its full development before we can expect of it efficient motherhood. If we are to make racial progress, this development of womanhood must precede motherhood in every individual woman. Then and then only can the mother cease to be an incubator and be a mother indeed. Then only can she transmit to her sons and daughters the qualities which make strong individuals and, collectively, a strong race [...]. (Sanger 1920, 229)

On these presuppositions, Sanger endorsed immigration restrictions and selective and compulsory sterilization for “the undeniably feeble-minded, insane and syphilitic” (McCann 1994, 117). While this may seem a rather short list of indications compared with that of mainstream eugenics at the time, as Lisa McCann (1994) argues, it still makes clear that the value of individual freedom and voluntariness for Sanger was stratified and contingent upon the individual's value in terms of racial improvement.

Concerning the translation of eugenic ideas into actual policies, research has shown that the majority of those sterilized under selective sterilization laws were women and girls—except in Nazi Germany, where the gender ratio was about equal.<sup>10</sup> However, gender norms intersected with norms and standards of health, fitness and social adequacy as well as poverty and class status. In the Swiss canton of Vaud, for instance, which was the first political body in Europe to pass a sterilization law, nine out of ten sterilizations in 1944 were performed on women, most of these on young, unmarried women who lived in poor conditions and were categorized as maladapted, socially deviant or

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10 For Finland see Hietala (1996), for Norway Roll-Hansen (1996), for Denmark Hansen (1996), for Switzerland Mottier and Gerodetti (2007), and for Nazi Germany Bock (1986).

of low intelligence (Mottier and Gerodetti 2007). Maija Runcis (1998) argues that in Sweden, concerns about the number of mentally retarded and persons leading an anti-social way of life focused primarily on women.<sup>11</sup> More specifically, the verdict of an 'anti-social way of life' often meant transgressing sexual norms, which were more rigid for women than for men; as a result, the verdict was more often imposed on women. Implementation, thus, was gendered through gender-specific norms of sexual and social conformity. In addition, the medical indication introduced into Swedish as well as Norwegian sterilization legislation at some point applied to women only. In Sweden, a medical indication for sterilization was mainly advised in cases of so-called 'exhausted mothers', a concept denoting lower-class women living in impoverished living conditions and considered to be in danger of becoming dysfunctional mothers or wives (Etzemüller 2000).

Nazi sterilization policy, in contrast, affected men and women in equal measure; some 50 percent of those forcibly sterilized under the Law for the Prevention of Hereditarily Diseased Offspring were men or boys. Gisela Bock (1986, 372) argues that, on several grounds, the law was nonetheless gendered. First, 90 percent of the estimated 5,000 individuals who died from sterilization were women (Bock 2004, 80). More problematic is Bock's position that involuntary childlessness affected women in a more devastating way than it did men. Bock refers to data indicating that women protested more often against the sterilization verdict than men and that many women purportedly attempted to become pregnant before the intervention was performed (Bock 1986, 12, 371f., 384f.). However, it is difficult to discern what the equivalent signs of suffering would have been for men, since they could not become visibly pregnant. Moreover, it remains unclear that refraining from formal protest would indicate an absence of suffering.

## 2.6 Biologist Determinism and Social Engineering

That eugenics was based on biologism is a truism in both public and academic discourse. Eugenicians, according to the common narrative, were convinced

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11 This was partly due to the fact that only women could be legally sterilized on the basis of a medical indication; the number of sterilisations for medical reasons rose sharply after the war. However, among those sterilized for being 'mentally retarded', women were heavily overrepresented as well (Broberg and Tydén 1996).

that all major pathologies that plagued modern society, such as criminality, alcoholism, prostitution and poverty, were caused by genetically inherited defects and these defects would proliferate because of the dysgenics' increased fecundity. Today, we know better, namely that modern science has largely refuted these biologist explanations as unfounded or wrong.

Again, this is not the full story. Presenting eugenics as a consequence of biologism may account for many of its features, but it omits others. Neither eugenic scholarship nor eugenic policies necessarily referred to biologist assumptions; selective interventions into reproduction could be articulated within rationalities of biologist determinism as well as rationalities of social reform and social engineering. In some cases, abandoning a biologist framework actually allowed for an expansion of eugenic interventions.

A number of studies have drawn attention to the fact that a significant share of scholarship did not subscribe to the Mendelian paradigm but followed a Lamarckian line of thought. According to Lamarckism, living beings could pass acquired characteristics on to their offspring. Thus, Lamarckians did not believe in biological determinism as Mendelians did; for them, biological heredity was amenable to socio-political intervention in a more direct sense. Lamarckism was popular among eugenicists in France (Schneider 1990), Brazil (Stepan 1991), and Russia (Adams 1990) as well as Japan (Otsubo and Bartholomew 1998) and the Czech Republic (Simunek 2007). Both Lamarckians and Mendelians were concerned with heredity. For Lamarckians, however, social policy, health care and education were proper means to improve the biological quality of present and future generations, since socially acquired betterment would be passed down. Moreover, Lamarckians were not necessarily opposed to compulsory measures to fight degeneration (Adams 1990, 218). French Lamarckian eugenicists, for instance, believed that the lower classes were biologically inferior because of poverty, not the reverse. Yet, as Schneider points out, many strongly believed that the numbers of the poor must be reduced, if necessary through more restrictive immigration laws, marriage restrictions, or compulsory sterilization (Schneider 1986, 86). Thus, the scientific case for selective anti-natalism was not always based on biological determinism.

Eugenic policies, in particular sterilization policies, were also not entirely founded on an exclusively biologist framework. The Swedish Sterilization Acts of 1935 and 1941, for instance, included a eugenic *and* a social indication. The social indication in the 1935 Act permitted sterilization without personal consent in case of "mental illness, feeble-mindedness, or other mental defects"

when the person concerned was declared legally incompetent and “incapable of caring for children” (Broberg and Tydén 1996, 102f.). The 1941 Swedish Sterilization Act actually broadened the social indication to include “an anti-social way of life” (Broberg and Tydén 1996, 108). The new clause arose from a recommendation by the Commission on Population, which had proposed to introduce a social indication in order to be able to sterilize persons whose ‘deficiency’ was *not* hereditary (Broberg and Tydén 1996, 106). According to the official statistics, between 1942 and 1975—when the law was repealed—some 20 to 100 sterilizations per year were performed in Sweden on the basis of a social indication. However, the categories of eugenic, medical and social grounds were never clearly defined, neither in theory nor in practice. What did and what did not qualify as ‘hereditary’ was very much at the discretion of those in power to decide. In this vein, a member of the Swedish National Board of Health, which was the committee that made sterilization decisions, explained in 1940 how the Board defined eugenic grounds:

[O]ur basis is the general statistical probability that a disease, abnormality, or defect (epilepsy, feeble-mindedness, etc.) is hereditary or predominantly hereditary, or, from a slightly different viewpoint, the probability that it will appear in children or other relatives (the risk of morbidity). Thus, when a case is to be decided (sterilization, abortion, marital capacity), the statistical probability is decisive. That is to say, when the rate is sufficiently high, the burden of proof rests upon the person whose claim it is that, for him or her, the disease or quality...has an extrinsic cause so that his or her case is not to be judged by the general statistical risk. (Swedish National Board of Health cited in Broberg and Tydén 1996, 110f.)

The Board determined that assuming a ten percent risk of inheritance was sufficient to establish a eugenic indication. In Norway, the 1934 Sterilization Act permitted sterilization if there was a likelihood that a person would pass a hereditary disease on to any children he or she might have *or* if the person was deemed unfit to take care of a child (Roll-Hansen 1996, 172). Similarly, in Finland, the 1935 Sterilization Act stipulated that individuals could be submitted to compulsory sterilization if they were diagnosed as idiots, imbeciles or insane and there was a risk that they could transmit their disease to their children; if it was probable that their children would not be cared for; or if the individual had been proven guilty of a crime demonstrating an ‘unnatural sexual drive’ (Hietala 1996, 232). The 1929 Danish Sterilization Act remained relatively vague, stipulating that sterilization was permissible ‘...where sup-

pression of reproduction must be regarded as being of great importance to society' (Hansen 1996). According to a review of the law in 1935, implementation was based on eugenic, social or individual considerations, with 'social' meaning that sterilization was in the interest of society, whereas 'individual' considerations meant, for instance, that the individual concerned had the option of being released from institutional confinement should they consent to undergo sterilization (Broberg and Roll-Hansen 1996, 38). Similarly, a 1937 amendment to the Alberta (Canada) Sterilization Act sanctioned the sterilization of persons "incapable of intelligent parenthood" (Grekul, Krahn et al. 2004, 363). Hence, sterilization policies referred to biologicistic concerns as well as socio-political concerns about socially dysfunctional behavior or ways of life.

Similarly, the Nazi Sterilization Act of 1933 allowed the coercive sterilization of alcoholics without categorizing alcoholism as hereditary. In addition, the Act used the term 'innate' in lieu of 'hereditary' in connection to feeble-mindedness so that it would encompass, for instance, people who had suffered brain damage during birth.

In practice, the category of 'mentally retarded' or 'feeble-minded'—a core category in almost all sterilization laws—was sufficiently malleable and ambiguous to allow for sterilization of those whose behavior, sexuality, or way of life was deemed socially inadequate, undesirable or dysfunctional. In short, selective sterilization laws, like other instruments of selective politics of reproduction, manifested and executed a biopolitical rationality that sought to reduce the number of people who were perceived as a burden to society, whether for reasons of their bodily or mental abilities or for their behavior or way of life.

## 2.7 Eugenics, Progress and Productivism

Alberto Spektorowski and Elisabet Mizrachi show that, in the case of Sweden, eugenic policies grew out of a political mindset that combined humanist Marxist ideas about social reform with a Fabian concept of industrial democracy and an exclusionist concept of social welfare (Spektorowski and Mizrachi 2004, 334). Sterilization, within this framework, was a mechanism of welfare eugenics. "The basic idea of eugenic socialism", Spektorowski and Mizrachi argue,

was to engineer a welfare community for 'the fittest' or a 'welfare eugenics', built on parameters of 'right-living' destined to exclude those individuals defined as non-productive. In this sense this new scientific socialism was built on concepts such as efficiency, productivism and social margins. (Spektorowski and Mizrachi 2004, 334)

Social rights, within this framework, were universal, but individual rights to physical integrity and personal life were not; they were made contingent upon the individual's conformance to standards of 'right-living' and productivity: "Non-productive elements were denied not social welfare, but their right to procreate" (Spektorowski and Mizrachi 2004, 334).

A similar argument is made by Thomas Leonhard (2005) concerning progressivist economics in the US. Although he does not use the term 'productivism', the political rationality that Leonhard interrogates displays significant similarities to productivist welfarism as analyzed by Spektorowski and Mizrachi. Leonard argues that eugenics was mainstream in the Progressive Era. It was appealing to social conservatives as well as progressivists. The core idea of Progressive Era eugenics, he argues, was "that the labor force should be rid of unfit workers, whom they labelled 'parasites,' 'the unemployable,' 'low-wage races' and the 'industrial residuum.' Removing the unfit, so the argument went, would uplift superior, deserving workers" (Leonard 2005, 207f.)

What attracted progressive eugenicists, according to Leonhard, was a disenchantment and a mounting impatience with the *laissez-faire* approach to politics around the turn of the century. Overcoming the pathologies of modernity, as progressives saw it, required the concerted effort of science, social science expertise, and governance, applying the combined policy instruments of social inquiry, social control, and expert management.

Thus, progressivist eugenics shared with Scandinavian welfare eugenics a belief in biopolitical social engineering committed to values, norms and standards of productivity and social functionality. In fact, I would conclude, the belief in a biopolitical type of social engineering geared at improving productivity, conformity and social functionality in the population constitutes the key characteristic shared by any variant of eugenics, whether feminist or anti-feminist, left- or right-wing, more or less racialized, based on or independent of biological determinism. Denouncing eugenics as sexist, racist, biologist or reactionary merely obscures this distinctively modern productivist biopolitical rationality.

## 2.8 Conclusion

The purpose of this review was not to explain the rise and fall of the eugenics project—that would have required more comprehensive comparisons. To this point, comparative analyses exist only in some cases, such as country comparisons (Adams 1990; Allen 2000; Hansen and King 2001). What should have become clear, however, is that we cannot capture eugenics' complexity by categorizing it as reactionary, sexist, racist, biologicistic. Eugenic ideas and practices were promoted by a broad range of political actors, including social reformers, women's rights activists, socialists and progressives. Gender norms and stereotypes strongly influenced the formation and implementation of eugenic policies, but they did not operate separately from race, class, and norms of social conformity, usefulness and productivity. Eugenic anxieties concerning degeneration did intersect with constructions of inferior races and racialized targeting, and members of racialized groups were disproportionately affected by eugenic policies, but constructions of inferior races did not fully coincide with categorizations of the defective, dysgenic, unfit or socially inadequate. Members of the supposedly superior, unmarked race or ethnic group could be targeted as well if deemed defective according to norms of conformity, fitness, productivity or usefulness. Biological determinism was a prevalent, but not an indispensable, feature of eugenic arguments and strategies.

Framing eugenics as a reactionary, repressive, racist, and biologist affair misses not only the heterogeneity of eugenics projects and their multifold strands and variations, but above all the biopolitical rationality they all shared, namely the distinction between the fit and the unfit, the socially adequate and the socially inadequate, the adapted and the maladapted, the functional and the dysfunctional, the useful and the useless. At the core of eugenics lay the belief that unfit, dysgenic, unproductive, deficient or socially inadequate persons constituted a burden to society and that this burden must be reduced through social engineering. While it is true that this logic was encoded in ableist categories such as feeble-mindedness, mental illness, hereditary disease and the like, it would be misleading to say that eugenic policies targeted 'the disabled'. Firstly, categories of disability and abledness are themselves the product of categorizing, labelling, and marking practices; they are not given entities. Second, categorizing people as disabled, feeble-minded, mentally ill and the like cannot be separated from categorizing them as unfit, useless, dysfunctional and unproductive. Eugenic policies linked notions of race, gender,

class and abledness to notions of adequacy, fitness, usefulness, productivity and normality, and it is this linkage that made them popular and powerful.

Any effort to come to terms with eugenic policies in the past and addressing the injustices, encroachments and suffering they caused must therefore confront this inherently modern biopolitical rationality. Reparation schemes and government apologies may form important elements to confront it. They may grant satisfaction to those whose rights, bodies and souls have been injured, provide moral and legal rehabilitation and, ideally, a promise of non-repetition. If, however, we as a society want to understand how and why these injuries and infringements were possible in the first place, it is mandatory to interrogate the productivist biopolitical rationality that informed and motivated them.