

UNFIT: EUGENICS ON THE NORTHERN GREAT PLAINS

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ABSTRACT

The early twenty-first century saw the emergence of the eugenics movement in the United States, which culminated in the sterilization of people with mental or physical disabilities. State institutions across the country were weaponized against these citizens due to the perception that they were “unfit” to be parents. Recent scholarship on the topic has sought to uncover this history. This study seeks to uncover this past in both North and South Dakota as well as offer an alternative avenue for examining the topic with Canton Hiawatha Asylum for Insane Indians. Both states provide instances that confirm the current scholarship on the topic as well as push against it. The Canton Asylum offers a new avenue for historians to examine how eugenics influence medicine and minority communities. Ultimately, the eugenic past of both states continues to be reflected in both the physical landscape and minds of their citizens to this day.

DEDICATION

This thesis is dedicated to my family, friends, and the teachers that encouraged me to pursue
history.

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INTRODUCTION

At the dawn of the 20th century, western society began to understand genetics, reproduction, and development in a fundamentally new way. Where once existed a degree of mystery, now stood seemingly solid pillars of scientific facts related to how our bodies and personalities developed. Many at the time now saw a chance to create a new humanity where sickness, uncertainty, and danger no longer existed. Out of this newfound understanding of our bodies came the eugenics movement, which sought to improve humanity using state intervention to determine who could or could not have children. Between 1910 and 1940, several states would institute eugenics policies such as marriage restrictions, health requirements for marriage licenses, and most infamously processes to sterilize those they deemed unfit to reproduce. Thousands of Americans would be subjected to sterilizations at state hospitals, mental institutions, and other facilities without their consent for not fitting the definitions of ‘normal’.

The horrors of the Holocaust coupled with advancements made in understanding human genetics and psychology in the decades after the Second World War led to a gradual abandonment of these practices and policies by the 1970s. Scholarship on eugenics is a recent phenomenon, and with much of it being focused on states such as California, Indiana, North Carolina, and Virginia. These states served as hubs for the eugenic legislation and implementation, as well as modern efforts to reconcile with this past.¹ However, this emphasis on these four states neglects the ways eugenic thinking was adapted and implemented in the rest of the United States. This is especially true for the Great Plains, with limited to no research existing

¹ Alexandra Minna Stern, *Eugenic Nation: Faults and Frontiers of Better Breeding in Modern America*, Second edition (Oakland, California: University of California Press, 2015), 1-2.

on this subject in the region. As a result, this work seeks to uncover the eugenic legacy of both states, including the similarities and differences that the border between the two created.

The second industrial revolution had fundamentally changed American society. Rapid industrialization had reshaped how Americans lived and worked. As historian Wendy Kline points out, this created new anxieties for the white middle class as more women entered the work force and African Americans slowly gained more wealth.² However, both Kline and fellow eugenic historian Alexandra Stern point out this anxiety was coupled with increasing optimism in American society regarding medicine and science. Medical schools created physicians and psychologists who could now rationally diagnose and cure the ailments of patients. This new medicine, supposedly devoid of the mysticism and irrationality of previous generations, seemed to offer the ability to solve the problems of the world. Emerging in tandem with this new perception of science and medicine came eugenics, which offered many a way to answer the questions and anxieties they faced.³

Eugenics, which would come to influence American immigration policy, was ironically a foreign import. The British statistician Sir Francis Galton first coined the term “eugenics” in 1883, coming from the Greek for “good in birth.”⁴ Despite this simple break down of the term, classifying what is or is not eugenics has proven to be a tough task for both eugenicists and current scholars on the subject. For his part, Galton settled on “the science which deals with all influences that improve the inborn qualities of a race; also, with those that develop them to the utmost advantage.”⁵ Charles Davenport, perhaps one of the most infamous American eugenicists,

² Wendy Kline, *Building a Better Race: Gender, Sexuality, and Eugenics from the Turn of the Century to the Baby Boom* (University of California Press, 2005), 9.

³ Stern, *Eugenic Nation*, 13.

⁴ Kline, *Building a Better Race*, 13.

⁵ Stern, *Eugenic Nation*, 11.

would simplify this definition too “the science of the improvement of the human race by better breeding.”⁶ Notably neither of these definitions mention the limitation of certain people’s ability to reproduce, instead simply arguing for ‘better’ breeding.

Fitness often had little to do with the physical health of an individual, but instead the mental or social capacity of a person. Eugenicists targeted people described as feebleminded, defective, or insane; however, these terms often had vague or nebulous meanings. Harry H. Laughlin, one prominent eugenicist, admits to this confusion and says, “When a specific social, legal, biological, or medical class is meant, it is and should be given its specific type designation. If requests had been made for data on institutions for the defective, no one, even an expert psychiatrist, or institution superintendent, would have known exactly what was meant; ‘defective’ in the literature has come to mean nothing by itself, but in the phrase ‘mentally defective’ means feeble-minded.”⁷ Some, like Henry Goddard, would provide some standard definitions for physicians to use. Goddard created terms such as “moron” and contributed to the general trend of the early twentieth century of seeing mental illness as a threat to society.⁸ Resulting from this was a push towards policies of segregating those deemed unfit from society. While eugenicists certainly endorsed and encouraged racial segregation, eugenic segregation focused on promoting the separation of the unfit from society. By removing these individuals from society, they argued, the number of people with unfit characteristics would decline.⁹

⁶ Charles Benedict Davenport, *Heredity in Relation to Eugenics* (New York, NY: Henry Holt and Company, 1911), 1.

⁷ Harry H. Laughlin, “The Socially Inadequate: How Shall We Designate and Sort Them?,” *American Journal of Sociology* 27, no. 1 (July 1921), 56.

⁸ Kline, *Building a Better Race*, 23-25.

⁹ Kline, *Building a Better Race*, 29-30.

Further complicating eugenics are the two approaches, which addressed the role of the state. Positive eugenics argued for policies that encouraged those people deemed as fit to have more children and often lacked a compulsory element to it. Negative eugenics, however, pushed for the limiting of reproduction of those deemed unfit. Policies such as sterilization, marriage restrictions, and the curtailing of immigration fall into this category. Although seemingly contradictory, Stern points out that these two camps often supported each other's efforts or borrowed rhetorical frameworks.¹⁰ As a result of this intertwining of stances, eugenics received broad public support. Everyone from the progressive jurist Louise Brandeis to the conservative Madison Grant, and even socialists, saw a chance to improve humanity through scientific means to the country.¹¹

Despite these issues over boundaries and implementation, supporters of eugenics would not have to wait long before winning legislative victories. Indiana became the first state to enact a sterilization law in 1907.¹² Following Indiana, several more states adopted similar policies, and by 1913 almost a third of all Americans lived in states with sterilization laws.¹³ In total, 32 states would pass sterilization legislation with Georgia being the last in 1937.¹⁴ Almost sixty thousand Americans would be sterilized because of these laws, with California performing the most sterilizations at around twenty thousand.¹⁵

Eugenics would penetrate broader society as well. Universities taught courses on the subject, and some even produced family pedigree charts for undergraduate students.¹⁶ Among the

¹⁰ Stern, *Eugenic Nation*, 9,177.

¹¹ Kline, *Building a Better Race*, 13-14.

¹² Largent, *Breeding Contempt*, 71.

¹³ Largent, *Breeding Contempt*, 31.

¹⁴ Stern, *Eugenic Nation*, 100.

¹⁵ Stern, *Eugenic Nation*, 115.

¹⁶ Stern, *Eugenic Nation*, 90.

colleges and universities that taught courses on eugenics was Concordia College of Moorhead, Minnesota. Concordia offered this advanced biology course called “Genetics and Eugenics” from 1920 to 1925.¹⁷ In fact, one would be hard pressed to find a twentieth century biologist who was not influenced by eugenics or an outright supporter of it.¹⁸ Outside of universities, public events would be used to promote the science of eugenics. Better baby competitions would be established with goal of identifying the healthiest babies in a community and awarding parents for their work while often using eugenics language in addition to advocating for methods to improve infant health.¹⁹ Lecturers would travel across the country to speak about the importance of eugenic based policies for protecting the health and future of the country, with several stopping in both North and South Dakota.

Eugenics and sterilization, however, leave a complicated legacy for those who advocated for them and were affected by them. Davenport himself encapsulates the internal dilemmas of the movement better than anyone else, pulling his approach from both positive and negative eugenics. He believed in the idea of smart decision-making concerning marriage, or “to fall in love intelligently.” State control was needed to stop the “propagation of the mentally incompetent” but did not argue for the destruction of the those deemed unfit before or after birth.²⁰ Davenport also argued against sterilization, taking issue with legislation being created, and instead arguing for segregation.²¹ Outside of this, patients and those faced with the prospect of being sterilized found ways to resist this as well. Mexican Americans in California, with help

¹⁷ *Concordia College Catalog, 1924-1925*. Moorhead.

¹⁸ Largent, *Breeding Contempt*, 2-3.

¹⁹ Gerais, Reem, *Better Babies Contests in the United States (1908–1916)*. Embryo Project Encyclopedia (2017-07-19). <http://embryo.asu.edu/handle/10776/12566>.

²⁰ Davenport, *Heredity in Relation to Eugenics*, 4.

²¹ Davenport, *Heredity in Relation to Eugenics*, 256-259.

from the Mexican government and the Catholic Church, managed to get some sterilizations stopped or at least paused for further review.²² Further complicating matters, though, some individuals saw sterilization as a chance to improve their health or avoid further institutionalization. This was especially the case for women with limited birth control access; some felt that voluntary sterilization was their only chance to avoid further pregnancies.²³ Still, these efforts to resist remained limited, with most being forcefully sterilized and often struggling to adjust to the world after the operation was done.²⁴

Historical scholarship on the eugenics movement and sterilization has seen a rapid rise in popularity within the last twenty years but has struggled to grapple with several elements of it. The conflicting definitions and vast legacy have made it a cumbersome topic to write on. The first serious historical studies of the eugenics movement did not occur until the late 1960s and early 1970s.²⁵ Some of these early works dismissed eugenics as unscientific and relegated it to the turn of the century quackery having negligible impact on the modern field of genetics. As the scholar Diane B. Paul points out, eugenics had become a “wandering subject” having lost its original classification under genetics in the of the Dewey Decimal Classification system, and few historians of science were willing to approach the subject.²⁶ Other scholars focused on the effect this had on public policy and focused on the attitudes of a few specific eugenicists.²⁷ Within more recent literature on the topic, there has been a focus on where eugenics intersects with race

²² Stern, *Eugenic Nation*, 121-126.

²³ Stern, *Eugenic Nation*, 115.

²⁴ Stern, *Eugenic Nation*, 209.

²⁵ Paul, Diane B. “Reflections on the Historiography of American Eugenics: Trends, Fractures, Tensions.” *Journal of the History of Biology* 49, no. 4 (2016), 646.

²⁶ Paul, “Reflections on the Historiography of American Eugenics.”, 642-643.

²⁷ Paul, “Reflections on the Historiography of American Eugenics.”, 646.

and gender as well as its international impact. This is both a result of trends within the history profession, but also because more scholars from other fields are writing about it.²⁸

Periodization has also been a struggle for scholars of eugenics. The early scholarship from the 1960s and 1970s tended to place the height of the movement during the 1910s and 1920s, with the following two decades seen as the conclusion of the movement. Historian Diane Paul writes that early eugenic scholarship of this period “typically equated eugenics with state policy and hence the U.S. sterilization and restrictive immigration laws, and they focused almost exclusively on the attitudes and actions of elites, often just a small handful of geneticists. Temporally, eugenics was seen as a movement that flourished in the 1910s and 1920s, with its foundational assumptions eroded and finally destroyed by scientific, economic, and political developments of the of the 1930s.” These initial scholars argued that eugenics slowly fizzled out after advances in genetics, limited funding, and the horrors of the Second World War undermined the idea of creating the perfect human.²⁹

However, starting with Daniel Kevles’s *In the Name of Eugenics*, published in 1985, scholars have reconsidered this end date. Rather than ending in the 1940s, the advocates of eugenics adapted their beliefs to fit trends postwar trends promoting healthy babies, reproductive health, and even marriage counseling.³⁰ More recent works, such as *Eugenic Nation* by Alexandra Minna Stern and *Building a Better Race* by Wendy Kline, extend the impact of eugenics well into the 1960s and 1970s. Stern does this well by highlighting how sterilizations occurred legally within states like California until well into the 1970s. She writes, “By the time that anthropologists and geneticists had begun to refute many aspects of ‘negative’ eugenics, its

²⁸ Paul, “Reflections on the Historiography of American Eugenics.”, 647-648.

²⁹ Paul, “Reflections on the Historiography of American Eugenics.”, 646.

³⁰ Paul, “Reflections on the Historiography of American Eugenics.”, 646-648.

attendant measures had been naturalized into federal, state, and even municipal institutions and were underpinning postwar norms of conformity. Furthermore, sterilization operations peaked nationwide from the late 1930s to the early 1940s and in some states, such as North Carolina and Virginia, escalated into the 1950s and 1960s.”³¹ Like Stern, historian Brianna Theobald in *Reproduction on the Reservation* digs deeper into the subject of eugenics and its impact on Native American women. She specifically examines how settler colonialism and eugenics shaped white perspectives, abandoning the general framework used by many scholars of eugenics and instead focusing on Native American birthing practices, reproductive health, and how those interacted with white conceptions of these ideas. Theobald work seeks to recast the story of eugenics to focus on “exposing additional layers to the history of coercive sterilization in Native America, it nonetheless frames the discussion so as not to overshadow the full range of complexity of women’s reproductive lives.”³²

These two issues combine to create a challenge for any scholar wanting to write a history of eugenics. The state of California and others have issued apologies over their sterilization policies, which some scholars have taken issue with. Stern argues that apologies, while certainly admirable steps toward correcting historical mistakes, may hinder modern scholarly and public perceptions of eugenics.³³ Other scholars, such as Chloe S. Burke and Christopher J. Castaneda note, “Even though eugenics is frequently delineated in popular discourse in terms of the Nazis’ orchestrated mass murder of Jews, homosexuals, Communists, gypsies, and the disabled, equating eugenics with the horrific dimensions of the Holocaust obstructs recognition of the

³¹ Stern, *Eugenic Nation*, 177.

³² Brianna Theobald, *Reproduction on the Reservation: Pregnancy, Childbirth, and Colonialism in the Long Twentieth Century*, Illustrated edition (Chapel Hill: The University of North Carolina Press, 2019), 10.

³³ Stern, *Eugenic Nation*, 2.

diversity of eugenic goals and the widespread acceptance of eugenicists not just by an uneducated public, but by leading scientific, medical, and academic communities well into the mid-twentieth century.”³⁴ As a result of this, recent scholarship has also shifted to illustrate how mainstream eugenics was in the United States and how accepted it was within the medical field. Exhibits such as *Deadly Medicine: Creating the Master Race* and *Human Plants, Human Harvest: California's Hidden History of Eugenics* both set out to demonstrate this change in perception.³⁵ All of this scholarship, dubbed a “Eugenics Industry” by Philip Pauly, has led to more Americans exploring its origins and effects on their regions.

With this said, the focus of this study will be examining the eugenics movement and the ways it was manifested in the states of North and South Dakota. Chapter two, North Dakota, and three, South Dakota, explore the legislation eugenicists created in the two states, the way it was implemented, and how each state was affected. In North Dakota, eugenicists argued that sterilization and marriage control would protect both the health of future generations and its financial stability. Eugenicists were concerned with the idea that too many feeble-minded or unfit individuals would overwhelm the system and create future hardship in the state. Thus, the state passed an extensive series of sterilizations measures and marriage regulations to stave off this perceived problem. In South Dakota, a more conservative approach was taken. Although the legislature was receptive to similar financial arguments made by eugenicists, it limited the scope of sterilization legislation and reluctantly passed a marriage control measure. South Dakota also provides scholars with an interesting window into the demographics of sterilization and how

³⁴ Burke, Chloe S., and Christopher J. Castaneda. “The Public and Private History of Eugenics: An Introduction.” *The Public Historian* 29, no. 3 (2007): 5–17. <https://doi.org/10.1525/tp.h.2007.29.3.5>, 8.

³⁵ Burke and Castaneda, “The Public and Private History of Eugenics.”, 8-9.

medical science viewed its effectiveness. Chapter four, however, examines the ways in which eugenics merged with other forms of turn-of-the-century medicine to create the Canton Hiawatha Asylum for Insane Indians. Although primarily conceived of as a congressional pork-barrel project, the asylum was influenced by notions of race and mental health based on eugenic thinking. Although no sterilizations occurred in Canton, it functioned much in the same way as those operations by keeping “problem” people from their homes and potentially having more children.

There are several factors both professional and personal that have led me to write this study. As mentioned above, much of the historical scholarship on the eugenics movement focuses attention on the national implications of the movement or where eugenic regimes were the most felt. States on the Great Plains, like North and South Dakota, rarely get mentioned or are entirely left out. One goal of this study is to counter this neglect of the Great Plains and highlight that eugenics managed to make their way into the heartland and impact the lives of so many. This goal also lends itself well to another one, that being to write about the history of my home region. Growing up on the plains, one can easily fall into the trap of thinking that anything important to history happened elsewhere and that little or nothing occurred to them. As I have gotten older, though admittedly not that old, and been able to study the plains, I have realized that this is foolish to say the least. The Great Plains have a rich history, one that needs to be discussed as we become a much more urban-oriented society. It also has a dark history, with eugenics and its influences being just a portion of it.

Outside of these two goals, I also find the topic of eugenics to be interesting as it poses several moral and societal questions. Eugenics and eugenicists used the science that was emerging at the turn of the century to try and answer fundamental questions of life and human

existence. They saw their actions as aiding in the creation of a better society, one where there were fewer sick people. Here in the twenty-first century, we still struggle with issues surrounding genetic power, the role of the state in public health, and the impact of new health breakthroughs constantly being made. These debates often bear resemblance, if not outright borrow language from eugenicists to attitudes held over a century ago, showing that American society is still much influenced by the supposedly long-gone movement. Recognizing this history, and the ways it has affected those in the past and using it in the future, can help us become a more compassionate and humane society for future generations.

NORTH DAKOTA

In the fourth episode of the fifth season of the tv series *Fargo*, Stark County Sheriff Roy Tillman, played by Jon Hamm, has breakfast with a couple in the county on a cold November evening.³⁶ In a previous episode, Tillman had visited with the couple after he had heard reports of the husband, Joshua, abusing his wife.³⁷ At this follow up visit he asks the husband, ‘Are you one of the good ones, Joshua?’ After figuring out that the abuse had continued, potentially even getting worse, Sheriff Tillman discusses his family background with his Indian killer great grandfather who fought in the battles of Big Mound and the Badlands being an example of a good one. He looks to Joshua and says, “You not so much, I think. You’re what we call a waste of skin. Defective. Eating our food, breathing our air, wasting precious resources.” What happens next is best left unsaid here, but it does not end well for Joshua.³⁸

While *Fargo* was filmed in Alberta and written by people with limited experience on the Great Plains, this scene relevant to this study for two reasons.³⁹ One, it highlights the callousness and cruel nature of Tillman, a self-professed constitutional sheriff and believer in the supremacy of biblical law over human law. Tillman believes that removing Joshua will both protect his position in Stark County and unburden him from having to keep dealing with the domestic violence Joshua continues to inflict on his wife. Put simply, Tillman sees him as unfit and that he must be dealt with accordingly.

³⁶ *Fargo*, season 5, episode four, “Insolubilia”, written by Noah Hawley, directed by Donald Murphy, aired December 3, 2023, on FX.

³⁷ *Fargo*, season 5, episode two, “Trials and Tribulations,” written by Noah Hawley, directed by Noah Hawley, aired November 21, 2023, on FX.

³⁸ “Insolubilia”, at 39 min., 47 sec.

³⁹ Moon, “Where Is Fargo Filmed? The Series Filming Locations Guide,” Atlas of Wonders, January 4, 2024, <https://www.atlasofwonders.com/2017/04/fargo-filming-locations.html>.

Secondly, and relating more directly to the topic of this chapter, Tillman's thinking, and language echoes that of a supposedly bygone era in North Dakota. The idea that Joshua or anyone deemed unfit is overburdening society and should not be allowed to live freely in the state almost exactly matches the rhetoric used by eugenicists. Eugenicists argued that both marriage restrictions and sterilization were ways to protect the future of North Dakota. These measures would prevent a growth in the population of the "unfit" in the state that could overburden existing institutions and lessen the threat they posed to future generations of North Dakotans. While it is unlikely that the *Fargo* writers knew of this history, the fact remains that North Dakota had a eugenics movement that was able to articulate its beliefs into government policy that affects residents of the state to this day.

The eugenics movement in North Dakota was a loose grouping of people with no central leadership. Pinning down the exact nature of the movement has proven difficult, but it seems likely that at least some physicians in the state actively pushed for the state to give them the powers to determine who should or should not be a parent. Dr. E. P. Quain of Bismarck, and likely others, believed that it was their duty to protect both the public's health and its pocketbook. However, a strange dichotomy developed in the state. While emphasizing the urgent need for eugenic and sterilization legislation, state institutions were apprehensive to implement the laws. Thus, it was not until the 1930s that the state saw a massive uptick in sterilization. During this decade and after the state never left the top ten in sterilizations performed on a per capita basis,

placing second behind California.⁴⁰ Though the state finally repealed its sterilization law in 1965, the ghosts of eugenics still linger today.

The earliest known newspaper article from North Dakota that explicitly mentions eugenics was published in the *Grand Forks Herald*. Titled “Romance and Fact: The Future of Love-Making in the Light of Science,” its unnamed author discusses the new role science should play in selecting a spouse. Much more in line with the positive eugenics camp, the writer claims that “Sexual selection, even when left to random influences, is still not to chance.” The article describes the creation of a system of voluntary eugenic certificates.⁴¹ Certificates like the ones proposed in the article were a rather old concept within eugenic circles, with Sir Francis Galton having first proposed them.⁴² The proposed certificates would be issued by a eugenics authority, and although not required, would endow many benefits to the holder. The author further claimed that holders of eugenics certificates would be assured, “that its possession meant a patent of natural nobility. The man or the woman who held it would be one of nature’s aristocrats, to whom the future of the race might be left safely without further question.”⁴³ The article also mentions sterilization but argues that they would only be a piece in a larger effort to purify society. This would be the only positive eugenics message published in North Dakota, with future articles focusing mostly on sterilizations.

⁴⁰ Julius Paul, “‘Three Generations of Imbeciles Are Enough’: State Eugenic Sterilization in American Thought and Practice” (PhD Dissertation, Washington, D.C., Walter Reed Army Institute of Research, 1965), <https://readingroom.law.gsu.edu/buckvbell/95/>, 639-640.

⁴¹ “Romance and Fact. The Future of Love-Making in the Light of Science.” *Grand Forks Herald*, November 14, 1906.

⁴² David J. Galton and Clare J. Galton, “Francis Galton: And Eugenics Today,” *Journal of Medical Ethics* 24, no. 2 (April 1998): 101.

⁴³ “Romance and Fact. The Future of Love-Making in the Light of Science.”

In 1909 North Dakota passed what could be considered its first eugenics law in the form of an anti-miscegenation bill. Little press attention seems to have been given to this bill, but what does exist points more to a eugenic motivation than a purely racist one. Senate Bill 60, the official name of the bill, passed the senate with an overwhelming margin only one member of the chamber dissenting. The lone dissenter, Senator L. A. Simpson, only voted against the bill because he viewed it as unconstitutional. Senator Maynard Crane, the presenter of the bill, pushed back against Simpson's criticisms and presented a eugenic reasoning for the bill. Crane argued that the bill was necessary because of an instance where the daughter of a minister nearly married a Black man, which so enraged the father that he attempted to kill the groom. He went on to argue that along with this "the legislation was in line with intelligent sentiment and with the scientific fact that the offspring of such a marriage were likely to be weak, degenerate, and productive of tuberculosis and other diseases."⁴⁴

The law barred marriage between white and African American residents of the state unless the marriage had been conducted before the enactment of the new provisions. It also defined an African American as, "Every person who shall have one-eighth or more of negro blood shall be deemed and held to be a colored person or negro." Also among its provisions were the various prison terms and monetary fines for those who married, officiated a wedding, or committed interracial adultery, and for those couples, "not lawfully married to each other who shall live in and occupy the same room."⁴⁵ As one article cheerfully put it after the law's

⁴⁴ "Anti-Miscegenation Bill," Bismarck Daily Tribune, February 5, 1909.

⁴⁵ "Chapter 164," in *Laws Passed at the Eleventh Session of the Legislative Assembly of the State of North Dakota*, n.d., <https://www.ndlegis.gov/assembly/sessionlaws/1909/pdf/marriages.pdf>, 202-203.

enactment, “Tan, sunburn, and freckles don’t count.”⁴⁶ The evidence lends itself to consider this the first piece of eugenic legislation in the state, especially when considering Senator Crane’s comment. It is likely the first instance in the state of North Dakota where it defined when two consenting adults could or could not marry. Less than five years later eugenicists scored more direct victories for their cause.

Between 1909 and 1913, several articles were published advocating for more drastic measures. There seemed to be a general panic among North Dakotan newspaper writers over the threat posed by the unfit and the children they may have. In April 1910, secretary of the state board of health Dr. James Grassick spoke about the issue of “control of epileptics and feeble minded”. Dr. Grassick was a significant figure in the early years of modern medicine in North Dakota. Born in 1850, he immigrated from Scotland to Canada with his mother after his father had died. Eventually he moved to United States and received formal medical training in Ann Arbor and Chicago, before settling permanently in the Mayville area in the late 1890s.⁴⁷ From there, Grassick became a well-established figure in the state serving as the president of the North Dakota Tuberculosis Association between 1909 and 1928, state superintendent of health, and President of the North Dakota Medical Association. In fact, Grassick’s name is still seen on the sign to Camp Grassick, which was founded by the tuberculosis association, and operates as a camp for children with disabilities.⁴⁸

⁴⁶ “Don’t Try to Lick the Country Judge,” *The Bismarck Tribune*, July 3, 1909.

⁴⁷ Compendium of History and Biography of North Dakota (Chicago, IL: Geo. A. Ogle & Co., 1900), <https://digitalhorizonsonline.org/digital/collection/ndsl-books/id/52554/rec/27>, 501-502.

⁴⁸ Erling Rolfsrud, “Dinna Forget Your Peat!,” *North Dakota Horizons*, 1977, 27. “Elks Camp Grassick,” Elks Camp Grassick, accessed March 14, 2024, <https://elkscampgrassick.com/>.

Dr. Grassick alleged that North Dakota was facing a crisis regarding the control of the feeble-minded and insane. He claimed that “There is another problem in our social pathology worthy of attention. We have an estimated population in our state of epileptics and feeble minded of about 1,200. Of these about 150 are cared for at our state institution at Grafton, leaving 1,050 without care or supervision.”⁴⁹ The Grafton State School had been established by the state in 1901 and opened four years later under the name of the North Dakota School for the Feeble Minded. It was conceived of as a place to care for and teach people with mental disabilities, as well as alleviate pressure on the main state hospital in Jamestown.⁵⁰ Grassick went on to argue that nothing was being done to curb this ever-increasing population and as a result, “unless the state exercises its right to curtail in some way the production of the unfit there will ultimately result such a burden on charity and on society that they will be overtaxed.” Grassick then outlines three measures to address this problem. The first is to restrict marriages, which is a state right and has been done before. Additionally, he explained that the state should take more “custodial care” of its patients. Finally, he argued that the state should accept the burden of sterilizing certain individuals.⁵¹

By 1913 eugenicists in North Dakota achieved two major legislative victories with the passage of both sterilization and marriage control bills. These legislative victories resulted from the earlier advocacy of Grassick and another major figure in the North Dakota medical scene, Dr. Eric P. Quain.⁵² Quain was an interesting figure to advocate for eugenics, having immigrated

⁴⁹ “Urges State Supervision of Physical Condition of Applicants for Marriage Licenses,” *Jamestown Weekly Alert*, August 18, 1910.

⁵⁰ Brent A. Askvig, *One Hundred Years: The History and Chronology of the North Dakota Developmental Center* (Minot, ND, 2004), 6-8.

⁵¹ “Urges State Supervision Of Physical Condition of Applicants for Marriage Licenses.”

⁵² “To Sterilize State Insane,” *Devils Lake Weekly World*, September 5, 1913.

from Sweden to Minnesota in his teens, attended medical school in the state, and moved to Bismarck in 1899 following his graduation.⁵³ He was a bit of a modernizer in Bismarck, with one biographer claiming that he brought the concepts of germ theory and the sterilizing medical equipment to the area. Quain, after having ruffled a few feathers in his early years in the capital, became an established figure in the state, being named president of the state medical association in 1922 as well as continuing to research and maintain a practice.⁵⁴

A *Bismarck Tribune* article, which was the transcribed version of speech given by Quain, appeared in January 1913 and is quite extensive. Quain discusses specific examples of degeneracy and the statistics on the insane, epileptic, criminal, and other people he termed kindred defectives that were being taken care of at public expense. He dismisses the idea of segregation, writing “While segregation undoubtedly would be very effective, it meets with the prohibitive expense of maintenance in any state or nation. Besides, it would seem cruel and inhumane to retain all [the] mentally deficient.” While Quain sees a need for restrictive marriage legislation and so-called scientific mating, he argues that both are inefficient unless coordinated on massive scale. He also takes issue with the ideas of polygamy and euthanasia believing that both are of “eugenic importance but are contrary to the moral sense of all civilized people.” Instead, he has high praise for the policies of sexual sterilization occurring in other states. He goes on to outline who is subject to the legislation in various states, how a commission or panel of physicians determines if someone should be sterilized, and the methods of sterilizing. Quain admits that there are some issues with these laws, saying “The constitutionality of these laws has

⁵³ Paul W. Freise, *The Story of Quain & Ramstad Clinic: Bismarck, North Dakota, 1900-1972* (Bismarck, North Dakota: Bismarck Tribune, 1972), 9.

⁵⁴ Freise, *The Story of Quain & Ramstad Clinic: Bismarck, North Dakota, 1900-1972*, 9-12.

not yet been fully established, and this seems to be greatest difficulty at present.” Overall, Quain believed that for eugenics laws had to be carefully implemented and there could be no room left for chance. He closes the speech by calling on the audience to pity those with mental illnesses locked away because of what they are and concludes, “Let us stop and consider if, after all, we are not as guilty as they. Their crimes of commission are made possible by our crimes of omission: for it is in our power to minimize the agony and disgrace, and to hand down to posterity a more perfect Man.”⁵⁵ Given the timing of the speech, its contents, and where it was published, Quain must have moved his audience and been instrumental in the passing of the sterilization laws that followed.

Although sterilization was the focus of Quain’s speech, it still is important to focus on marriage regulation in the state given that it would theoretically impact all North Dakotans. The marriage law banned the practice of marriage between women under forty-five and men of any age found to be any of the following characteristics: “a common drunkard, habitual criminal, epileptic, imbecile, feeble minded person, idiot, or insane person, or person who has theretofore been afflicted with hereditary insanity.”⁵⁶ An exception was made to this section if the bride was over the age of forty-five. In addition to this, those seeking a marriage license would be ordered by a county judge to provide signed affidavits by a licensed physician showing no physical or mental health issues. An additional third-party witness was also required to provide an affidavit swearing to the clean physical and mental health history of each person seeking marriage along

⁵⁵ “‘Eugenics’ Was Title of Paper Read By Dr. Quain to Friendless Society,” *Bismarck Tribune*, January 26, 1913.

⁵⁶ “Chapter 207,” in *Laws Passed at the Thirteenth Session of the Legislative Assembly of the State of North Dakota*, n.d., <https://www.ndlegis.gov/assembly/sessionlaws/1913/pdf/marriages.pdf>, 325-326.

with their lack of criminal records. Marriage regulation was just one part of controlling who could have children in North Dakota, with sterilization serving in a much more targeted fashion.

North Dakota's sterilization law was a much more complicated piece of legislation. It granted the power to determine if a patient should be sterilized to the head of any state prison or institution for the insane or feebleminded. This official would need to submit a letter that sterilizing the person would either improve the health of that person or if that person were to have a child that said child would be "defective or feeble-minded." This letter was to be filed with the Board of Control, established at the same time as this law, which would make the final decision if sterilization would occur. The board was given the power to investigate the medical history of the patient as well as call witnesses. If the board agreed to the sterilization, it was to be performed by the chief medical officer of the institution, or any surgeon deemed fit by the board. If a patient requested to be sterilized, then this process could be bypassed with a separate report being filed after the operation was performed. Sterilizations could be performed on anyone "who shall be convicted of felony" or had two previous felonies in either North Dakota or other states if the county state's attorney deemed it necessary and follows a similar process as outlined above. In the final subsection of the bill, two major points are declared. The first is that heredity plays a role in "...the transmission of crime, insanity, idiocy, and imbecility, and our institutions for degenerates are overcrowded on account of the lack of adequate means" the second point is that the bill takes effect immediately upon its approval, which occurred on March 13, 1913.⁵⁷

⁵⁷ "Chapter 56," in *Laws Passed at the Thirteenth Session of the Legislative Assembly of the State of North Dakota*, n.d., <https://www.ndlegis.gov/assembly/sessionlaws/1913/pdf/control-board.pdf>, 63-66.

Although this bill is more extensive than the marriage one, it is important to highlight what is left out of the bill, too. It does not mention who could not be sterilized making no exceptions, even for age. It makes no provision for patient consent unless the patient asks to be sterilized, and there is no appeals process for the patient. Most chilling is the fact it declares that North Dakota is running out of room for mentally ill patients and that this is how to solve the problem they pose. Put simply, the legislature had identified these people as “problems” and it was taking the steps to prevent further issues.

Unsurprisingly, the sterilization bill was met with fanfare in the press. One Jamestown article praises the new legislation given the financial stress of maintaining institutions and claims that anthropologists agree that sterilizations need to occur. A Dr. Johnson of Girard College, a eugenicist speaking in Valley City, praises this step and that “they [those with mental health issues] cannot bring others as helpless as they into the world to be a burden to themselves and to society.”⁵⁸ North Dakota’s sterilization law received attention overseas, with one article claiming that Governor Hanna had received a copy of *The Daily Telegraph* in Sydney, Australia, that applauded the state’s efforts.⁵⁹ Even though sterilization was heralded as a way to save money for state and protect future generations, the application is a different story.

The initial enthusiasm and push for sterilization did not translate into a rapid implementation of it. There is conflicting data on how many sterilizations were performed within the state up to 1930, but only thirty-nine occurred within the state by that point. Broken down by gender, there were 22 men and 17 women that had been sterilized.⁶⁰ This apprehension to

⁵⁸ “To Prevent Increase of The Insane,” *Jamestown Weekly Alert*, July 17, 1913.

⁵⁹ “New N.D. Law Widely Noted,” *The Fargo Forum and Daily Republican*, July 24, 1913.

⁶⁰ Paul, “‘Three Generations of Imbeciles Are Enough’: State Eugenic Sterilization in American Thought and Practice,” 639.

sterilization was likely a result of institutions seeking the consent of patients, according to Laughlin.⁶¹ This seems to be the case with Grafton at least, with its superintendent a supporter of legislation but only allowing eleven sterilizations to occur there by 1932.⁶² Other institutions, such as the state hospital at Jamestown, reported similar figures at this time.⁶³

One woman, who had been committed to an institution that was legally able to perform sterilizations, seems to have been able to avoid sterilization because of the lack of institutional support. Clenora “Amanda” Clayton (née Halverson) was born in Regent, North Dakota, in 1900 and was the oldest of nine children. At the age of seven she was sent by her parents to the North Dakota School for the Deaf in Devil’s Lake. Amanda, recounting her childhood in the 1970s, said that she did not know her name or age until after attending the school and learning to communicate with her parents.⁶⁴ According to a biennial report from the school, the cause of Amanda’s deafness was congenital.⁶⁵ Under the standards of the 1913 sterilization law she was a prime target to be sterilized, given she could potentially pass down the deafness to any future children she may have.

However, two articles published in the school newsletter, *The Banner*, seem to indicate at least some uneasiness with both sterilization and eugenics as whole. The first, published in April

⁶¹ Paul, “‘Three Generations of Imbeciles Are Enough’: State Eugenic Sterilization in American Thought and Practice,” 640.

⁶² Brent A. Askvig, *One Hundred Years: The History and Chronology of the North Dakota Developmental Center* (Minot, ND, 2004),93.

⁶³ North Dakota Hospital for the Insane, *Eight Biennial Report of the State Hospital For the Insane to the Board of Administration of State Institutions*, 1926, 31. North Dakota Hospital for the Insane, *Twenty-Third Biennial Report of the State Hospital For the Insane to the Board of Administration of State Institutions*, 1930, 24.

⁶⁴ Dix Hollobaugh, “1919 Grad Featured in Des Moines Sunday Supplement,” *The Banner*, October 1978, 12.

⁶⁵ *North Dakota School for the Deaf Biennial Report, 1916-1918* (Board of Control of State Institutions, 1918).

1914 in the editorial section, has no author but appears to be written by someone from within the school. The author takes issue with the claims made by Charles Davenport over the number of marriages between deaf people that result in children with deafness. Davenport claimed that of 1500 marriages between deaf people, "...that the offspring of these marriages were in most cases born deaf." However, the author of the article goes on to say, "There are over 110 deaf children in our own school and we know of none who are children of deaf parents, and we think nothing of it, but if deaf parents happen to have a deaf child, a 'distinguished authority on eugenics' comes along and tells us that deafness is inherited and that something must be done to protect society by prohibiting marriage of the deaf unto the deaf." The article concludes, further attacking believers in eugenics by claiming they would ban the marriage of those who lost a limb out of fear that without one a "legless or armless or brainless variety of the human race" would take over.⁶⁶

The other article, published in 1917 in the "For the Young Folks" section of the newsletter, is stylistically like the first and is lifted from a Minneapolis publication. It is a rebuttal to the claims of one Dr. W. Grant Hague of Columbia University, who argued that deaf individuals should be, "kept from intimate association and should be taught they cannot marry." Rebutting these claims is Dr. W. A. Evans of Minneapolis, who might be the author of original article. While he advises against deaf couples with a family history of deafness marrying, he does make two major caveats. One is that he advises against marriage laws, since they will inflict unhappiness on many and will do nothing to change the rate of deafness given how so few are born with it. The second is that schools and other institutions should give instruction on eugenics

⁶⁶ Untitled Article, *The Banner*, April 15, 1914, 4.

and try to influence some to refrain from marriage, but that enforcing marriage bans would be a great injustice to many.⁶⁷

Judging by these two articles, it seems that the North Dakota School of the Deaf did not fully back the idea of sterilizing people for being deaf. Further research is needed to see when this changed and if sterilizations were ever performed with its permission. What this meant for Amanda, who graduated from the school in 1919, was that she never faced the surgeon's scalpel. She managed to live a full life, despite the times not being suited well for a person without hearing. She met Helen Keller while studying at Gallaudet College, though she had to abandon her studies to help the family on the farm after her father passed away. Amanda later moved to South Dakota and worked for the state deaf school there. On a train ride, she met her husband Ralph Clayton, who was also deaf, and the two married in 1928. The couple moved to Des Moines and had two children, Patricia, and Darlene. Both had hearing issues but were able to attend public school and had several children of their own.⁶⁸ Amanda died in 1984 and was survived by her husband, two children, four grandchildren, and three great grandchildren.⁶⁹ Amanda managed to have a family life in a way that many others were denied.

By the close of the 1920s and beginning of the Great Depression there was a dramatic reversal in the apprehension over sterilization. This can be partially explained by the enactment of a new sterilization law in 1927. State Attorney General George Schafer ruled in 1925 that the previous law failed to recognize the rights of those affected.⁷⁰ Governor Arthur G. Sorlie advised the legislature to enact a new sterilization law in his message to the legislature in 1927. Sorlie

⁶⁷ "Intermarriage of the Deaf," *The Banner*, April 16, 1917, 8.

⁶⁸ Hollobaugh, "1919 Grad Featured in Des Moines Sunday Supplement." 16.

⁶⁹ "Clenora Halverson Clayton, 1919 NDSD Grad Dies," *The Banner*, October 1984, 10.

⁷⁰ Hoffbeck, "Eugenics and Sterilization in North Dakota, 1913."

urged that the state adopt a constitutional sterilization law and observed “If every state passed such laws and enforced them there would be fewer criminal, insane and feeble-minded people to deal with.”⁷¹ The new law kept many aspects of the initial sterilization measure, but added an appeals and hearings process for who that would be affected.⁷² Following the passage of this new sterilization law, coupled with the strains of the Depression years, saw sterilizations skyrocket. Between 1934 and 1936, Grafton sterilized nine male and forty female patients. About half of the patients were released from the facility after sterilization, most to their families or to other state institutions that had space for them.⁷³ By the early 1940s the overall number of sterilizations had ballooned to over 536.⁷⁴ Following the war Grafton continued to sterilize patients, with nineteen males and twenty-two females being operated on between 1948 and 1950.⁷⁵ By the time that sterilization laws were repealed in the state, 1,049 had been conducted, with 652 women sterilized along with 397 men.⁷⁶ Of the total number sterilized, 634 would be carried out at the

⁷¹ Arthur G. Sorlie, “Message of Arthur G. Sorlie, Governor of North Dakota : Twentieth Legislative Assembly, Convened January 4, 1927” (Bismarck, North Dakota, January 4, 1927), <https://digitalhorizonsonline.org/digital/collection/ppf/id/3161/rec/9>, 10.

⁷² “Chapter 263,” in *Laws Passed at the Twentieth Session of the Legislative Assembly of the State of North Dakota*, 1927, <https://ndlegis.gov/assembly/sessionlaws/1927/pdf/sterilization.pdf>, 433-336

⁷³ “Seventeenth Biennial Report of the Grafton State School to the Board of Administration of State Institutions” (Grafton State School, June 30, 1936), <https://hdl.handle.net/2027/mdp.39015074684880?urlappend=%3Bseq=1>, 32-33.

⁷⁴ Paul, “‘Three Generations of Imbeciles Are Enough’: State Eugenic Sterilization in American Thought and Practice,” 636.

⁷⁵ “Twenty-Fourth Biennial Report of the Grafton State School to the Board of Administration of State Institutions,” in *Thirty-First and Thirty-Second Annual Reports of the Board of Administration to the Governor*, 1950. <https://hdl.handle.net/2027/uc1.a0008773756?urlappend=%3Bseq=5>, 107.

⁷⁶ Paul, “‘Three Generations of Imbeciles Are Enough’: State Eugenic Sterilization in American Thought and Practice,” 639.

Grafton State School.⁷⁷ In total, North Dakota placed twelfth in the nation for the total number of sterilizations.⁷⁸ On a yearly per capita basis, North Dakota never left the top ten and at one point placed second in the nation.⁷⁹

Repealing eugenics laws would be a slow and potentially incomplete process in North Dakota. The anti-miscegenation law would be repealed first, in 1955.⁸⁰ The repeal of the state's sterilization and marriage laws, however, took a much longer path that started in the 1960s. Changes in the national environment thanks to the efforts of disabled activists, memories of the holocaust, new understandings in psychology, and advancements in genetic science, made sterilization laws and other overtly eugenic measures much less palatable to the public. In the case of North Dakota, it seems the efforts of local mental health activists combined with the general shift away from sterilization laws resulted in the formal repeal of the law in 1965.⁸¹ North Dakota's last piece of eugenics legislation, the 1913 marriage law was not repealed until 1993.⁸² Thus, North Dakota's eugenics story seemingly ended just before the dawn of the new millennium.

⁷⁷ Paul, "Three Generations of Imbeciles Are Enough': State Eugenic Sterilization in American Thought and Practice," 636.

⁷⁸ Largent, *Breeding Contempt*, 77.

⁷⁹ Paul, "Three Generations of Imbeciles Are Enough': State Eugenic Sterilization in American Thought and Practice," 639-640.

⁸⁰ "Chapter 126," in *Laws Passed at the Thirty-Fourth Session of the Legislative Assembly of the State of North Dakota*, 1955,

<https://www.ndlegis.gov/assembly/sessionlaws/1955/pdf/domrp.pdf>.

⁸¹ Paul, " . . . Three Generations of Imbeciles Are Enough . . .': State Eugenic Sterilization in American Thought and Practice.", 637-638.

⁸² "Chapter 141," in *Laws Passed at the Fifty-Third Session of the Legislative Assembly of the State of North Dakota*, 1993,

<https://www.ndlegis.gov/assembly/sessionlaws/1993/pdf/DOMRP.pdf>, 599.

Although the public imagines that eugenics and efforts to sterilize people shameful things from our past, the ideas still manage to make their way into the public sphere in discussions on topics like public health and welfare policy. During the 1990s, states like North Dakota and others paid for Norplant to be given to Medicaid recipients. Norplant, a hormonal contraceptive injected into the user, was to be given to low-income women on the federal program.⁸³ While Norplant had gained FDA approval, groups like the ACLU argued that because the drug “works automatically, is easily monitored, and cannot be removed without medical assistance,” that this was an attempt to control women’s reproduction by government officials.⁸⁴ Cynthia Pearson with the National Women’s Health Network saw Norplant as an attempt to bribe women on welfare, with one Kansas legislator proposing to pay women on Medicaid to be on the drug.⁸⁵ North Dakota Medicaid does cover the costs of injectable contraceptives like Norplant, and even elective sterilization, though it does not force women on the program to receive it.⁸⁶

North Dakota is still haunted by the legacy of eugenics. Places like Grafton State School and Camp Grassick remain on the prairie, although Grafton has since been renamed, and both now focus on helping people with disabilities.⁸⁷ Yet the fact remains that the state created and

⁸³ Sandy Rovner, “Norplant Medicaid Payments Approved in 12 States,” *Washington Post*, March 18, 1991, <https://www.washingtonpost.com/archive/lifestyle/wellness/1991/03/19/norplant-medicaid-payments-approved-in-12-states/de3729f3-4fd5-4dcd-9c13-f2f51b76c16d/>.

⁸⁴ “Norplant: A New Contraceptive with the Potential for Abuse,” American Civil Liberties Union, January 31, 1994, <https://www.aclu.org/other/norplant-new-contraceptive-potential-abuse>.

⁸⁵ Rovner, “Norplant Medicaid Payments Approved in 12 States.”

⁸⁶ “Contraceptives,” Health and Human Services North Dakota, accessed March 16, 2024, <https://www.hhs.nd.gov/cfs/family-planning/contraceptives>.

⁸⁷ “Life Skills and Transition Center,” Health and Human Services North Dakota, accessed March 16, 2024, <https://www.hhs.nd.gov/individuals-disabilities/LSTC>. “Elks Camp Grassick,” Elks Camp Grassick, accessed March 16, 2024, <https://elkscampgrassick.com/therapies>.

maintained a system that sterilized over a thousand of its most vulnerable people. North Dakotans were motivated to do this not directly because of malicious feelings towards this group, but callously because they felt it would save the state money and create a healthier society for future generations. Even with the removal of the final pieces of eugenic legislation in the state, Norplant was considered as a tool to have fewer people on the welfare rolls. For scholars and Americans interested in the story of eugenics, North Dakota provides an example of the rationale behind its implementation. As we deal with neoliberal policies that view healthcare less as a public service and more as a commodity, we will continue to see the ghosts of eugenics here on the plains and in the rest of the country.

SOUTH DAKOTA

Aberdeen, South Dakota, is a sleepy university town in the Northwestern half of the state. This location, far from most major routes of transportation and population centers, has allowed the city to preserve much of its Great Plains charm and character. However, this sleepy nature is a recent development in Aberdeen. At the turn of the twentieth century the community was once nicknamed “Hub City” for the many railroads that met at the city’s train stations connecting it with the rest of the country.⁸⁸ While this name is still seen reflected in local businesses of the area today, Aberdeen served as another kind of hub that few in the community know about or likely would want memorialized. Aberdeen was the hub of the eugenics movement in South Dakota, where a local organization took up the crusade for legislation to create a supposedly better and healthier state.

Eugenicists ultimately won the legislative battle; it was a hard-won fight that took much longer than in North Dakota or other states in the region. Likely because of this hard-fought legislative battle, South Dakota took a more conservative approach to implementing eugenic policies. While still adopting eugenic measures, such as a sterilization law and marriage restriction, both were constrained in comparison to others in the region. Partially stemming from this, the state sterilized fewer of its citizens when compared to North Dakota. Ultimately these measures would be repealed in the 1970s, but not without touching the lives of many. Even with a more conservative approach to eugenics, the state would sterilize nearly 800 of its citizens and restrict marriage for an untold number of others. Much like other states, South Dakota is still haunted by the eugenics movement and the effects it had on people.

⁸⁸ Troy McQuillen, “Aberdeen: The Hub City | Aberdeen Magazine,” May 1, 2019, <https://aberdeenmag.com/2019/05/aberdeen-the-hub-city/>.

Unlike North Dakota, which had a less organized and a limited ground campaign, South Dakota had an organization that pushed for the adoption of eugenic legislation. This organization, the Aberdeen Social Science Club, came to dominate the initial discussion around the state regarding eugenics. Founded in 1902, the club's creation reflects the broader progressive developments occurring at the turn of the twentieth century as described in one article "The club is not socialist: it is for the study of social questions." Among the topics that could be discussed were taxation, the municipalization of public utilities, immigration, suffrage, and "the relationship of the white to inferior races."⁸⁹ Evidence for the club's early activities and membership remains limited, but it is likely the club stuck to hosting public lectures in the Aberdeen and Brown County area.⁹⁰

1914 marks the start of the club's more political and eugenic activities. That year it hosted a lecture by Rev. J. W. Hyslop, a rector at St. Mark's Church, where he presented on a paper titled *The Right of a Child to be Well Born*. This lecture likely borrowed heavily from a book of the same name by George E. Dawson, a psychologist from Harvard. In the book he discusses the relationship between eugenics and Christianity and how both can be used to improve humanity. While the exact character of the lecture and meeting have been lost to time, it was provocative enough that the members of the Aberdeen Social Science Club formed a committee within the group to advocate for eugenic legislation in the state. On this committee were Dr. R. L. Murdy, Professor C. D. Poore, and former South Dakota Governor C. N. Herried.⁹¹

⁸⁹ "Social Science Club Under Way at Aberdeen," *Argus-Leader*, November 29, 1902.

⁹⁰ "Program of the Aberdeen Social Science Club for 1906," *Aberdeen Democrat*, January 12, 1906.

⁹¹ "Episcopal Rector Gives His Views on Eugenics," *Argus-Leader*, April 2, 1914.

These figures perhaps best exemplify the type of people that advocated for eugenics. All were well educated men that held considerable power in the community and state. Robert Lincoln Murdy was a physician in Aberdeen who helped expand a local clinic in the city following the 1918 influenza outbreak and would eventually serve as president of the South Dakota Medical Association.⁹² Professor Charles D. Poore worked at the Northern Normal School, which eventually became Northern State University. Poore was from Minnesota and had studied chemistry there before moving to South Dakota. At the time club's eugenics committee was formed he had been recently elevated to the position of vice president of Northern Normal school.⁹³ Finally there was former Governor Charles N. Herried, who had been born in Wisconsin and educated as a lawyer at the University of Wisconsin-Madison. In 1883 he moved to Dakota Territory to practice law, eventually finding his way into politics and serving as the fourth Governor of the state from 1901 to 1905. Herried eventually retired and settled back in Aberdeen, though he served under Herbert Hoover as Food Administrator of the state during World War One.⁹⁴ Much like the Aberdeen Social Science Club itself, these men reflected the progressive mindset of turn of the century America. It is likely that their schooling had planted the idea of eugenics in their minds, which later developed into their advocacy for policies based around it.

⁹² Troy McQuillen, "Between Pandemics," March 1, 2021, <https://aberdeenmag.com/2021/03/between-pandemics/>. "State Doctors Elect Officers," *Argus-Leader*, May 22, 1924.

⁹³ "New Vice President for Northern Normal," *The Mitchell Capital*, November 20, 1913.

⁹⁴ "Former Governor C. N. Herreid Dies Suddenly," *Argus-Leader*, July 7, 1928. Tony Venhuizen, "Governor Charles Nelson Herreid," *Trail of Governors Foundation* (blog), accessed April 1, 2024, <https://www.trailofgovernors.com/governor-charles-nelson-herreid/>.

Almost a year after the committee was formed, the Aberdeen Social Science Club would introduce a eugenics bill to the state legislature with the help of Representative Walter G. Jacobs of Brown County.⁹⁵ Details of this bill remain unknown; though given the activities of North Dakota and other states around the same time, it is likely that it contained provisions for sterilization and marriage restriction. Despite the efforts of the club and Brown County representatives, the eugenics bill failed a house vote twenty-eight to sixty-five.⁹⁶ The massive defeat of the bill indicates that there was some opposition to eugenics in the state, an issue that the club and eugenicists continued to run into in South Dakota. One article from a Brookings newspaper from 1915 hints at the motives behind this opposition. The unnamed author indicates that while the scientific basis for and goals of eugenics may be correct, its advocates have become overly enthusiastic and offer no practical way to implement eugenic policies. The author insists that eugenicists, “would send Cupid into Siberian exile, if they would not execute him altogether, and would base marriage upon purely scientific principles.”⁹⁷ Despite the legislative setbacks and lack of public interest, the efforts of the Aberdeen Social Science Club and eugenicists in the state did not slow down.

1917 began a series of legislative victories for eugenicists with legislation being adopted and implemented in the next decade. Two eugenics bills were introduced at the beginning of the legislative session, one seeking to restrict access to marriage licenses and the other allowing for the sterilization of feeble-minded people. The marriage bill would require physical health examinations to be performed on both parties before a marriage license could be issued. Credit

⁹⁵ “Aberdeen Social Science Club Fathers Another Measure to Come Before Lawmakers,” *Argus-Leader*, February 1, 1915.

⁹⁶ “Eugenics Defeated,” *Citizen-Republican*, February 11, 1915.

⁹⁷ “Heredity and Eugenics,” *Brookings Register*, July 29, 1915.

for the authorship of the marriage bill was given to the Aberdeen Social Science Club, who likely also authored the sterilization bill though this is not directly stated. Unlike the earlier attempt, this new marriage bill passed the South Dakota House of Representatives by a massive margin, seventy-nine to twenty-one. While an exact reason for the change in support cannot be determined, one newspaper claimed that, “The general support was that the state had for years been passing laws for the breeding up of live stock [sic], and it was about time to begin some action looking to the betterment of the population of the state.”⁹⁸ Although this measure cleared the house, the South Dakota Senate killed the bill again with a close vote.⁹⁹

While this was likely a disappointment for eugenicists, they achieved a victory with the passage of the sterilization bill. South Dakota’s initial sterilization law was a rather meager measure when compared to North Dakota’s. First, the only institution given the power to sterilize an individual was the State School and Home for the Feebleminded.¹⁰⁰ Located in Redfield, South Dakota, this institution had opened in 1902. The facility, initially set up as the Northern Hospital for the Insane, was renamed in 1913 and reworked to house men, women, and children with mental disabilities.¹⁰¹ The superintendent of the school was tasked with looking into the medical history of patients in the school and determining, “whether it is improper or inadvisable to allow any such inmates to procreate.” After this had occurred, the superintendent would then write and submit a report to the State Board of Charities and Corrections. This board would

⁹⁸ “Eugenics Bill Passed,” *The Kadoka Press*, February 16, 1917.

⁹⁹ “Eugenics Bill Loom Up Stronger Than Ever,” *Rapid City Journal*, January 17, 1919.

¹⁰⁰ “Chapter 236,” in *The Laws Passed at the Special Session of 1916 and The Laws Passed at the Fifteenth Session of the Legislature of the State of South Dakota* (Pierre, S.D: Hipple Printing Co., 1917), 378–79.

¹⁰¹ *Leaving Redfield* (South Dakota Public Broadcasting, 2019), <https://www.youtube.com/watch?v=D7D1VclHwng>.

review the report with the superintendent and determine if it was, “improper or inadvisable” for these patients to be allowed to have children. If it was found that a patient was likely to have children that would become a burden to the state or if the individual’s condition may get better after sterilization, then a sterilization would be approved and performed on the patient.¹⁰²

This bill raises an interesting point when compared to the North Dakota sterilization law passed in 1913. A feature that both laws have in common is the lack of either a patient’s consent in the operation or an appeals process. Both states would revise their sterilization laws to include an appeals section, though patient consent was never fully reckoned with. However, this is where the similarities end between the two. North Dakota’s sterilization law allowed any health or carceral facility to carry out sterilization, while South Dakota limited itself to just the facility in Redfield. Another striking difference between the two is the level of urgency. While the North Dakota law closed by discussing the dangers that could befall the state if no action was taken to curtail the reproduction of the feeble minded, South Dakota’s contains none of this language. One wonders, especially given the attitude found in later newspapers, if the state legislature passed this sterilization bill to please the Aberdeen Social Science Club and other eugenics advocates.

Whatever the case may be, eugenicists continued lobbying for marriage legislation in the state. In 1919 the Social Science Club reintroduce a marriage bill that would require physical examinations. The attitude the legislature had towards the bill, according to an article in the *Rapid City Journal*, was rather jovial. In a rather sarcastic tone, its reporter writes about the reintroduction of a marriage bill as a semi-annual tradition for the Aberdeen club, and with few

¹⁰² “Chapter 187.”

taking the measure seriously. While the legislatures found this bill amusing and killed it in the house again, some felt that the topic should be revisited in the future but with different legislation.¹⁰³ Two years later, in 1921, eugenicists tried again with the marriage bill, but this time the lighthearted feelings turned to anger.

February 1921 saw another marriage bill introduced to the state legislature.¹⁰⁴ As in the previous versions, it would require men and women be physically examined for health issues before a marriage license could be obtained.¹⁰⁵ Referred to the Ways and Means Committee in the house instead of the more appropriate Public Health one, the bill almost immediately soured the attitude of the chamber. Representative Ole Swanson of Brown County, the chairman of the Ways and Means Committee, had the bill brought to his committee out of fear the Health Committee would have killed it. Even though Swanson controlled this committee, members indicated some apprehension towards the bill and wanted amendments to be added.¹⁰⁶ Only one amendment was added, changing the requirement a board of health selected physician to perform the exam to any physician.¹⁰⁷ With this modification to the bill, committee members reported back and recommended passage.

On February 11 debate began on the bill in the house chamber and soon became heated. Representative Swanson and two others led the defense of the bill. Swanson argued the measure was necessary and was bound to pass eventually. Representative George Otte, a veteran, felt the measure would help prevent the spread of venereal diseases, while another member supported it

¹⁰³ "Eugenics Bill Looms Up Stronger Than Ever."

¹⁰⁴ *The Mellette County Pioneer*, February 11, 1921.

¹⁰⁵ "Eugenics Bill Disapproved In South Dakota House," *Grand Forks Herald*, February 12, 1921.

¹⁰⁶ "Many Are Opposing the Eugenics Bill," *Daily Deadwood Pioneer-Times*, February 8, 1921.

¹⁰⁷ "Heated Battle Before Defeat Eugenics Bill," *Argus-Leader*, February 11, 1921.

because it barred marriage for feeble minded people. Members of the house from the Black Hills opposed the measure, which drew an attack from Swanson. He claimed their apprehension to the measure was because they “sold liquor and kept the red light [sic] districts open after the rest of the state had cleaned house.” The members from that region became enraged, especially Representative Francis Parker of Lawrence County.¹⁰⁸

Parker argued that the law would not stop the spread of venereal disease and instead increase common-law marriages.¹⁰⁹ In addition to this, he argued that the bill was “an insult to intelligent people of South Dakota and a rebuke to the men who established the union.”¹¹⁰ Swanson and Parker soon began to argue, with Swanson claiming that Parker had allowed an illegal bar to operate in the Deadwood Commercial Club and that he was a “flowery windbag.”¹¹¹ Parker snapped back and shouted that was a lie and demanded a retraction from Swanson.¹¹² Rules for speaking were suspended, and the house entered into a chaotic three-hour debate over the bill, with many women and girls filling the gallery.¹¹³ These hours of debate and personal insults ultimately came to nothing for eugenicists, with the marriage bill being defeated twenty-five to sixty-nine.¹¹⁴

While this was a setback for their agenda, eugenicists scored at least one victory from the legislature that year. HB 202 created groups responsible for overseeing the process of institutionalizing people with mental illness. The law set up the Commission for the Control of

¹⁰⁸ “Heated Battle Before Defeat Eugenics Bill.”

¹⁰⁹ “Eugenics Bill Fails to Pass,” *Madison Daily Leader*, February 12, 1921.

¹¹⁰ “Eugenics Act Turned Down,” *Queen City Mail*, February 16, 1921.

¹¹¹ “Eugenics Bill Fails to Pass.”

¹¹² “Eugenics Act Turned Down.”

¹¹³ “Heated Battle Before Defeat Eugenics Bill.”

¹¹⁴ “Eugenics Bill Disapproved In South Dakota House.”

the Feeble Minded, a statewide organization tasked with creating regulations for the care of people within state facilities. County boards of insanity were also created to carry out state regulations and facilitate institutionalization for individuals who were deemed unfit. Finally, and perhaps grimly, the stated purpose of the law was, “to provide that all feeble minded [sic] persons resident with this state shall become wards of the state and shall be kept segregated to the end that they shall not reproduce their kind.”¹¹⁵ The commission and county boards would prove important for eugenicists in a few years.

HB 202 and the debate around the marriage bill indicate that South Dakotans still seemed to be hesitant on eugenics. While the state felt the need for a sterilization law, between its passage in 1917 and 1921 no person had been sterilized at the State Home.¹¹⁶ While an exact explanation for this apprehension is hard to determine, many seemed to have felt the measures were unfair and could harm those without mental illness. Along with this, legislators took issue with the 1921 marriage bill because women would have to be examined.¹¹⁷

Outside of Pierre, a general uneasiness can be seen in local newspaper publications. One editorial from the *Brookings Register* calls for caution with regards to the marriage bill. Not wishing to stop progress, the author writes “There are, of course, people who ought not to marry; persons suffering of incurable and transmissible diseases, lunatics, and idiots, the feeble-minded of a certain degree of feeble-mindedness, but that prohibition should not be too sweeping, for there is much more feeble-mindedness in the world than most of us suspect. We would not want

¹¹⁵ “Chapter 235,” in *The Laws Passed at the Seventeenth Session of the Legislature of the State of South Dakota* (Pierre, S.D: State Publishing Company, n.d.), 344–45.

¹¹⁶ Julius Paul, “‘ . . . Three Generations of Imbeciles Are Enough . . .’: State Eugenic Sterilization in American Thought and Practice,” n.d., 474.

¹¹⁷ “Heated Battle Before Defeat Eugenics Bill.”

to bar marriage entirely.”¹¹⁸ Although it is hard to discern if widespread opposition existed from this limited evidence, there seems to have been at least a small portion of South Dakotans did not buy into the ideas of eugenics.

Eugenics legislation would continue to be passed in the state, though the degree to which the Aberdeen Social Science Club was involved seems to have diminished. Newspaper information on the club tapers off in the 1920s, with the last reference being in 1924.¹¹⁹ 1925 would see revisions made to the state commission and county board system. Among these revisions includes reducing the size of the state board and granting more powers to the county boards. These local boards could now determine if an individual should be sterilized. This would be done via an open hearing and with written notice provided to all parties in the situation. County boards could allow an individual to remain outside of the State Home if they were determined not to be a danger to the community and were sterilized.¹²⁰

Further revisions to the eugenics laws would come in 1931 and 1943. The 1931 law would bring about substantial changes in South Dakota eugenics laws. It created a definition for feeble-mindedness which deemed those “who by reason of mental deficiency and other associated defects are incapable of making the proper adjustment to life for one of their chronological age.” Also included in this definition were children who could not complete schoolwork in a “reasonable ratio” to their age and grade, while also excluding the insane. It went on to outline in further detail the roles of the state commission and county boards, which now included a census to be taken of all feeble-minded individuals. Once the census was

¹¹⁸“Hygienic Mating,” *The Brookings Register*, February 17, 1921.

¹¹⁹ “Advocated the Unicameral System,” *Queen City Mail*, December 31, 1924.

¹²⁰ “Chapter 164,” in *The Laws Passed at the Nineteenth Session of the Legislature of the State of South Dakota* (Pierre, S.D: Hipple Printing Co., 1925), 188–90.

complete all counties would be given a list of individuals identified within their jurisdiction. It is here where eugenicists scored a major, though compromised, victory with this section. If your name was on this list, you would be denied a marriage license. An appeals process was created for this in the case of mistaken identity, or if either individual could prove they had been sterilized or could not have children.¹²¹ Twelve years later, the state would revise things further and give the Yankton State Hospital the power to preform sterilizations on its patients when it was deemed necessary.¹²² Eugenicists had scored their last major victory with the 1931 law, and marriage restrictions were now in place, though certainly a far cry from North Dakota's law which was universally applied and required medical testing.

With these final pieces of legislation in place, South Dakota began to implement the policies advocated by the Aberdeen Social Science Club and other national eugenicists. In total, the state would sterilize 796 people between 1917 and 1964. Along gender lines, there were 286 males and 510 females sterilized.¹²³ The terms male and female are used and significant because while both the eugenics movement and later scholars writing on the subject have focused on adults, the age of people sterilized varied heavily.

A report created by the State Commission, which highlights the sterilizations that occurred between 1929 and 1935, shows that the mean age of those sterilized in that period was slightly above twenty-three years old. However, a fourteen-year-old boy and a twelve-year-old

¹²¹ "Chapter 152," in *The Laws Passed at the Twenty-Second Session of the Legislature of the State of South Dakota* (Pierre, S.D: Hipple Printing Co., 1931), 197–99.

¹²² "Chapter 112," in *The Laws Passed at the Twenty-Eighth Session of the Legislature of the State of South Dakota* (Pierre, S.D: Hipple Printing Co., 1943), 119.

¹²³ Howard J. Chinn, "Twentieth Biennial Report of the State Commission for the Mentally Retarded for the Period Ending June 30, 1964" (Redfield, S.D: State Commission for the Mentally Retarded, 1964), 14.

girl were reported as the youngest ever sterilized by the state to that point. In fact, the period of the report shows that thirty adolescents, eight boys and twenty-two girls, had undergone surgery to remove their reproductive capabilities. Older adolescents, patients between the ages of sixteen and nineteen, fared worse with twenty-nine boys and fifty-four girls being sterilized. In total the state would sterilize 113 patients under the age of twenty. For comparison, the same report shows that 118 people were sterilized between the ages of twenty and thirty-nine. Overall all, 253 people were sterilized in this period with nearly forty-five percent being under 20.¹²⁴ In the next biennial report from 1938, which included the running total of sterilization in the state since 1917, shows that the mean age was slightly over twenty-one. For patients who were single at time of sterilization, the mean was just under eighteen.¹²⁵

Numbers, however, do not show us the effects sterilization had on the people they were performed on. Unfortunately, the voices of South Dakotans who were sterilized may never be fully revealed to us. Any people who were sterilized, even if they were rather young, have more than likely passed away and likely left no descendants or any surviving relatives alive today. Still, a glimpse of what life may have been like for those sterilized can be surmised by looking at an article published in the *Journal of Heredity* from 1936.

This article details the effects of sterilizations on 269 patients who had been sterilized prior to January 1, 1936. Most of these people were sterilized at the State Home, though twenty-

¹²⁴ Dr. F. V. Willhite, "Sixth Biennial Report of the State Commission for the Control of the Feeble-Minded for the Period Ending June 30, 1936" (Redfield, S.D: Commission for the Control of the Feeble-Minded, 1936), 31-33.

¹²⁵ Dr. F. V. Willhite, "Seventh Biennial Report of the State Commission for the Control of the Feeble-Minded for the Period Ending June 30, 1938" (Redfield, S.D: Commission for the Control of the Feeble-Minded, 1938)., 25-26.

one had been operated on in private hospitals.¹²⁶ The author of the study, J. H. Craft, asked patients and their parents how they felt about being sterilized. Although he did not receive feedback from every patient and parent, he managed to find that of the fifty-nine men who replied, about seventy percent were satisfied with the operation and only twenty two percent were not satisfied. Of the women who gave information, totaling 127, Craft reported a seventy-seven percent satisfied rate and only seventeen percent were unsatisfied.¹²⁷ When asked a question about their sex lives, seventy men reported no change in their sex lives. When Craft asked fifty-five married patients about their libido, none reported any issue.¹²⁸

Craft also examined the outcome of patients who had committed “sexual offences” before and after sterilization. He found a hundred patients who had been previously committed a sex crime, though he does not give detail on the exact nature of their crimes, with their being eighteen males and eighty-two females. After sterilization, Craft found that only one male and ten females committed sexual offences again. The report also highlights that most patients stayed under the supervision of the State Home, State Commission, a combination of the two, or another institution. Only twenty-seven were released to the parents or appointed guardians, with the rest either being dead or unaccounted for.¹²⁹

The truth about life after sterilization can only be told by those who faced it first hand. Scientific studies can hide reality or be conducted in a manner that produces the results the author of the study wants. After all, Craft was likely employed by the State Commission to

¹²⁶ J. H. Craft, “The Effects of Sterilization As Shown by a Follow Up Study in South Dakota,” *Journal of Heredity* 27, no. 10 (October 1936): 379.

¹²⁷ Craft, “The Effects of Sterilization As Shown by a Follow Up Study in South Dakota.”, 382.

¹²⁸ Craft, “The Effects of Sterilization As Shown by a Follow Up Study in South Dakota.”, 383.

¹²⁹ Craft, “The Effects of Sterilization As Shown by a Follow Up Study in South Dakota.”, 383-384.

undertake the study.¹³⁰ Perhaps any seriously negative findings from these patients such as major dissatisfaction with life after the operation, confusion on their ability to have children, or a worsening of mental or physical health conditions were quietly left out of the final report. That being said, a patient having positive feelings about this type of operation should not be discounted. Some likely believed that the operation would improve their condition or lives. Though hard to imagine, today eugenics was considered a legitimate field of science and treated as such by the medical community. Doctors who recommended sterilizations thought they were doing their due diligence to treat their patients. And as Alexandra Stern observes in *Eugenic Nation*, birth control both was legally impossible to obtain and had limited effectiveness. For some women sterilization ensure no more future children to worry about.¹³¹ This is not to say that the actions on the parts of doctors were right, or that every person sterilized did or could agree to it, but it certainly complicates our understanding of their actions.

As in many other states, the repeal of eugenics legislation in South Dakota occurred in the 1970s. While her sister state to the North fully repealed its sterilization law in 1965, South Dakota would wait until 1974.¹³² This, unfortunately, did not mean the end of sterilizations within the state. Many Native American women would be coerced and illegally sterilized by federal agencies during the 1970s. Their stories, and the other ways eugenics negatively affected the lives of Native Americans in the state, will be discussed at length in the next chapter. Two years following the repeal of the sterilization law, South Dakota would repeal the marriage

¹³⁰ Craft, “The Effects of Sterilization As Shown by a Follow Up Study in South Dakota.”, 379.

¹³¹ Stern, *Eugenic Nation*, 115.

¹³² “Chapter 187,” in *The Laws Passed at the 49th Legislature of the State of South Dakota* (Mitchell, SD: Mitchell Printing Co., 1974), 325.

restriction.¹³³ Thus came the end of legislative eugenics in South Dakota, not with a bang but with a whimper.

In closing, the way the eugenics movement operated and was implemented in South Dakota serves to contrast that of her northern neighbor. First, the state had a much more formalized network of advocates of eugenics. The Aberdeen Social Science Club would routinely go to the state legislature and advocate for eugenic legislation, something that did not occur in North Dakota. Both states would eventually pass eugenic legislation, but the scope and impact of them varied wildly. While North Dakota embraced eugenics with few reservations, South Dakota was less keen on adopting sweeping measures. Sterilization was palatable to the legislature and to average South Dakotans, but the idea of interfering in the matters of marriage was not. While the Aberdeen club and eugenicists in the state ultimately won the legislative battle, it came at the expense of a law that applied to everyone. Although sterilization was adopted and implemented, the state limited where it was done to only two institutions and performed 250 fewer than North Dakota despite its remaining legal longer. While the exact reason for this apprehension to sterilization is likely lost to time, it serves as a reminder that legislation motivated by ideological and moral beliefs can still be implemented in a rational society with dramatic effects on the personal lives of many.

¹³³ “Chapter 168,” in *The Laws Passed at the Fifty-First Session of the Legislature of the State of South Dakota* (Pierre, S.D, 1976), 300.

THE CANTON HIAWATHA ASYLUM

Canton, South Dakota, upon first glance is a rather unassuming northern Great Plains community. Located in the southeastern corner of the state and some thirty minutes from Sioux Falls, it is a place few go to unless you live there or have a good reason to. Outside the county courthouse stands a state historical marker that outlines the early history of the community. Like many towns in the region, Canton's history dates to the Dakota Boom of the 1870s and 1880s with a settler population made up initially by a mixture of Scandinavians, Germans, and Americans. The plaque also mentions the notable figures that once called it home, such as the author Ole Edvart Rolvaag, the nuclear scientist Ernest Lawrence, and geophysicist Merle Tuve.¹³⁴

Heading east, on US Highway 18, passes sites commonly found in small communities in this region. A few local banks, restaurants, bars, a grocery store, and a grain elevator all stand as reminders of the city's rural and agricultural heritage. Leaving the boundaries of the community, the elevation of the ground changes with a slight slope to the left of the highway and farther off emerges the steep hills of the Big Sioux River. On the slope stands the two major institutions: the Sanford Canton-Inwood Medical Center, and the Hiawatha Golf Club. Just past these two landmarks, you are greeted by three more historical markers on the right of the road. The first marker is dedicated to a long-gone ski slope, and the third to the former Augustana Academy, which eventually moved to Sioux Falls and became Augustana University. The middle marker, however, stands to remind passersby of a memory that many in the town would like to forget. It

¹³⁴ "Canton Historical Marker," accessed February 17, 2024, <https://www.hmdb.org/m.asp?m=177394>.

commemorates the Hiawatha Asylum for Insane Indians which stood north of the marker.¹³⁵

Heading northwest of the marker, between fairways four and five, is one of the few remaining remnants of asylum: the cemetery for the 121 who died there.

The story of the Hiawatha Asylum for the Insane Indian is dark spot in history, not just for the community but for the United States as a whole. Political maneuvering in both South Dakota and in Washington, DC. brought the facility to the city at the turn of the twenty century. Its creation was influenced by the ideas of the eugenics movement and the boom in asylum building during the nineteenth century, making it the only ethnically based mental institution in the United States. Although little remains physically of the institution outside of archival material and the cemetery, the wounds its existence created remain to this day in Native American communities throughout the United States.¹³⁶

The creation of the asylum in Canton should be understood within the context of both federal oversight of Native Americans, specifically regarding healthcare. Federal Native American healthcare has been a meandering journey with mixed motivations at its center. Going back as far as the early days of the republic, the American federal government provided some medical aid to tribes. Often this came as a part of treaty obligations, and as such initially fell under the responsibility of the War Department.¹³⁷ As the United States expanded westward and

¹³⁵ “Hiawatha Asylum for Insane Indians Historical Marker,” accessed February 17, 2024, <https://www.hmdb.org/m.asp?m=183486>.

¹³⁶ This chapter relies heavily on work of previous scholars, both White and Native American. I owe a great debt to authors such Carla Joinson, Susan Burch, and Pemina Yellow Bird for providing much of the background knowledge on the creation of the institution and for gathering Native American perspectives on what took place in there.

¹³⁷ Carla Joinson, *Vanished in Hiawatha: The Story of the Canton Asylum for Insane Indians* (University of Nebraska Press, 2016), <https://doi.org/10.2307/j.ctt1d4v02q>, 11-13.

more treaties were signed, federal responsibility grew more. Much of this early health-related work came in the form of providing vaccines and other basic medical services.¹³⁸

By the early 1830s the Bureau of Indian Affairs (BIA), though not official called this until 1947, was created to handle health and other treaty obligations.¹³⁹ Federal policy would further evolve with the BIA being transferred to the Department of the Interior in 1849.¹⁴⁰ This transfer of responsibilities, however, did not result in an improvement of health services. Medical obligations remained unfulfilled due to underfunding, with less than eighty doctors tasked with providing medical services for over 300,000 people by 1880.¹⁴¹ The few existing institutions and individuals in charge of them focused on providing treatment of communicable diseases like tuberculosis with almost no attention given to mental health.¹⁴²

Concepts of mental illness and health were and remain different in White and Native American communities. As Pemina Yellow Bird, an enrolled member in the Mandan, Hidatsa, and Arikara Nations, notes, the notion of mental illness does not exist in many native cultures and languages. She writes, “The closest we can come is a word that is more closely aligned with “crazy,” and that means that the person is either a very funny person, someone who makes you laugh all the time, or is someone who cannot be reasoned with because he or she is too angry and

¹³⁸ Jane Lawrence, “The Indian Health Service and the Sterilization of Native American Women,” *American Indian Quarterly* 24, no. 3 (2000),401.

¹³⁹ Joinson, *Vanished in Hiawatha*, 13.

¹⁴⁰ Lawrence, “The Indian Health Service and the Sterilization of Native American Women”, 401.

¹⁴¹ Joinson, *Vanished in Hiawatha*, 15.

¹⁴² Lawrence, “The Indian Health Service and the Sterilization of Native American Women”,401. Joinson, *Vanished in Hiawatha*, 15.

cannot think.”¹⁴³ Native Americans share a deep personal bond between immediate family members, but also among those in their communities and especially with elders. Nature also plays an important role in Native understandings of life and happiness, with their communities being set up in a way to maintain a balance with their surroundings. However, settler colonialism and the forced removal that almost every tribe faced severed these familial and geographic connections for many.¹⁴⁴ This likely contributed to an increase in cases of depression and other associated mental health issues in Native peoples during this period, and still affects their communities to this day.

Pembina Yellow Bird and other scholars have further highlighted that a language barrier often existed between White physicians and Native people that would make proper diagnosis nearly impossible.¹⁴⁵ Western concepts of family, child rearing, and hygiene contributed to either White misunderstanding or dismissal of Native ways and that outside force was needed to “correct” them.¹⁴⁶ These differences, and White unwillingness to recognize them, helped contribute to the creation of the Hiawatha Asylum.

Paralleling this growth in federal involvement in Native American health was the creation of state supported asylums. Asylums and the theories of medicine associated with them began development in the late eighteenth century and expanded throughout the nineteenth century.

¹⁴³ Pembina Yellow Bird, “Wild Indians: Native Perspectives on the Hiawatha Asylum for Insane Indians,” *National Empowerment Center*, n.d., <https://power2u.org/wild-indians-native-perspectives-on-the-hiawatha-asylum-for-insane-indians-by-pemima-yellow-bird/>, 2,4.

¹⁴⁴ “Indigenous,” National Alliance on Mental Illness, accessed March 21, 2024, <https://donate.nami.org/give/509521/#!/donation/checkout?eg=true&egp=do&egfa=true>.

¹⁴⁵ Yellow Bird, “Wild Indians: Native Perspectives on the Hiawatha Asylum for Insane Indians.”, 4. Joinson, *Vanished in Hiawatha*, 130-132.

¹⁴⁶ Susan Burch, *Committed: Remembering Native Kinship in and beyond Institutions* (University of North Carolina Press, 2021), https://www.jstor.org/stable/10.5149/9781469663364_burch, 9, 39-40.

During this period doctors and physicians changed their approach towards those diagnosed with insanity or other mental conditions. The perception was that no longer were people with mental health issues “beasts” to be feared, but patients who needed treatment.¹⁴⁷ Many physicians, anywhere between 70 to 90 percent depending on the decade, believed that mental illnesses could be cured.¹⁴⁸ While doctors struggled to understand the causes of insanity and other mental health conditions, there was generally an agreement that society and civilization played a role. It was argued that for some individuals the pressures of modern civilization were too much.¹⁴⁹ “Moral treatment” as it was termed served as the core of early asylum medicine and argued insanity could be cured by separating patients from corrupting influences of the outside world.¹⁵⁰ This separation, coupled with new therapies and medicine, would allow patients to heal and get over their insanity. This is where the lines between eugenics and asylum medicine begin to blur, for they often served similar purposes. Some eugenicists, like Charles Davenport, argued for the segregation of the unfit from society to protect the public from the perceived dangers of them. Asylums, although not conceived of for eugenic reasons, could play a role in indirectly advancing eugenic goals.

Following the Civil War, the capacity and number of asylums in the United States exploded. In Dakota Territorial, the local legislature founded two mental facilities serving the territory. Southern Dakota Territory was given a hospital in Yankton in 1879, while the northern

¹⁴⁷ Carla Yanni, *The Architecture of Madness: Insane Asylums in the United States*, First Edition (Minneapolis: Univ Of Minnesota Press, 2007), 3.

¹⁴⁸ Yanni, *The Architecture of Madness*, 1.

¹⁴⁹ Yanni, *The Architecture of Madness*, 5.

¹⁵⁰ Joseph P. Morrissey and Howard H. Goldman, “Care and Treatment of the Mentally Ill in the United States: Historical Developments and Reforms,” *The Annals of the American Academy of Political and Social Science* 484 (1986), 15.

half of the territory received its facility located outside of Jamestown in 1883. Both institutions would become the main mental health facilities for each state after statehood in 1889 and remain in operation to this day.¹⁵¹ Although disagreements exist in the scholarship around the reason for this rise, most agree upon these common themes. A rise in the American population and industrialization meant that there were now more people born with mental disabilities or health issues, which placed a strain on working families who had to take care of them. Thus many, unable to take care of their loved ones, turned to asylums for care. Along with this there were expansions in the definition of insanity, and the further professionalization of medicine created a system whereby more people turned to asylums, fueled their need.¹⁵²

By the turn of the 19th century, federal responsibility for Native American health and asylum-based medicine began to converge. Starting in the late 1880s, hospitals for Native Americans began to be built in what is now Oklahoma.¹⁵³ Issues regarding the care for Native Americans with mental health issues, however, continued to exist. In 1897 Indian Agent Peter Coachman of the Cheyenne River Agency in South Dakota wrote to the BIA about the issues that he faced trying to find places to care for mentally ill Natives. Coachman gave several reasons for these issues, but emphasized the point that many state level institutions thought care for Native Americans was a federal matter and not theirs.¹⁵⁴ While there was an expansion in the number of

¹⁵¹“HSC | History,” accessed March 20, 2024, <https://dss.sd.gov/behavioralhealth/hsc/history.aspx>. “State Hospital - State Agencies - Archives State Historical Society of North Dakota -,” accessed March 20, 2024, <https://www.history.nd.gov/archives/stateagencies/statehospital.html>.

¹⁵² Yanni, *The Architecture of Madness*, 106, 124.

¹⁵³ Lawrence, “The Indian Health Service and the Sterilization of Native American Women.”, 401.

¹⁵⁴ John M. Spaulding, “The Canton Asylum for Insane Indians: An Example of Institutional Neglect,” *Hospital and Community Psychiatry* Volume 37, no. No. 10 (October 1986), 1007. Joinson, *Vanished in Hiawatha*, 15.

state level facilities, the same cannot be said for federal ones. Only one federally funded asylum existed in the United States, this being St. Elizabeths in Washington, DC. St. Elizabeths had been created before the Civil War and expanded several times afterwards but faced issues with overcrowding.¹⁵⁵ Coachman's letter eventually made its way to the US Senate Committee on Indian Affairs, which was chaired by Richard F. Pettigrew of South Dakota.¹⁵⁶ It was here that the idea of an asylum specifically for Native Americans began to pick up traction, though for ulterior reasons not related to healthcare.

Senator Pettigrew, dubbed "Frank" Pettigrew by one newspaper, was emblematic of the populist politics common in Great Plains states at the time.¹⁵⁷ Born in Vermont in 1848 to abolitionist parents, he had been educated at the University of Wisconsin-Madison and eventually moved to Sioux Falls in 1870. He had achieved some wealth as a land surveyor, eventually stepping into territorial and state politics. After being appointed to serve as one of the state's first federal senators, he lost much of his fortune which caused his politics to take a more populist character.¹⁵⁸ In 1900, Pettigrew caused controversy when he argued that the US should withdraw its forces from the Philippines believing it went against the ideals of representative government.¹⁵⁹

Pettigrew, ever the pragmatic politician, saw opportunity for South Dakota with the idea for an Indian asylum. A. E. Linn of *Dakota Farmers' Leaders* wrote that Pettigrew, "has realized for several years that the government ought to provide a suitable home for the insane Indians, as

¹⁵⁵ Joinson, *Vanished in Hiawatha*, 22-23.

¹⁵⁶ Joinson, *Vanished in Hiawatha*, 15.

¹⁵⁷ "'The Farmers Leader,'" *Dakota Farmers' Leader*, April 14, 1899.

¹⁵⁸ "Encyclopedia of the Great Plains | PETTIGREW, RICHARD (1848-1926)," accessed March 21, 2024, <http://plainshumanities.unl.edu/encyclopedia/doc/egp.pg.062>.

¹⁵⁹ Joinson, *Vanished in Hiawatha*, 16.

this unfortunate class were regarded as outcasts by their tribes and had no standing to secure state protection.”¹⁶⁰ Although apparently arguing from an altruistic position, Pettigrew’s motives for supporting the idea had much more to do with financial gain. A project and permanent institution like an asylum meant federal dollars and jobs flowing into the young state.¹⁶¹ Other communities waged similar battles for state asylums, such as in upstate New York, because of the economic benefit they could bring.¹⁶² Residents of Canton recognized these benefits and would become some of the most vocal supporters of the project. The same *Dakota Farmers’ Leader* article boasting about the benevolent needs for the institution also highlights the boom to the local economy such a facility would bring to the area.

While financial motivations drove much creation of the asylum in Canton, eugenic theories around race also played a factor. For eugenicists, race mixing posed a threat not just to the entirety of humanity but also to the individual. Although written in 1933, around the time the Canton Asylum closed, Dr. K. B. Aikman warned against these dangers in the *Eugenics Review*. He posited, “When such constitutions are mixed by inter-breeding, a new constitution is produced, which is not adapted to the mode of life of either parent and too often is not fitted for any actual environment whatever.”¹⁶³ Newspaper articles from across the United States pushed the idea that race mixing had led to the “insane Indian” problem.

One Alabama newspaper story claims that occupants of the future asylum, “will be all half-breed Indians” and that “there was never a case of insanity known in any tribe until after the mixture of the white and Indian races.” Along with this, the article goes on to use the example of

¹⁶⁰ “The Farmers Leader.”

¹⁶¹ Joinson, *Vanished in Hiawatha*, 20-24.

¹⁶² Yanni, *The Architecture of Madness*, 111.

¹⁶³ K. B. Aikman, “Race Mixture,” *The Eugenics Review* 25, no. 3 (October 1933), 161.

the Osage tribes in Oklahoma to illustrate how race mixing and federal payments to the tribe have negatively impacted their health. They write, “The Osages, it is said, live in luxury while young, but the men grow fat, contract consumption, and die early in life.” To contrast this, the column author contrasts this with the Sioux (Dakota) who “have no money upon which to live in laziness; the members work for their living and seems to agree with them”; too tribes “thrive” when they engage in manual labor.¹⁶⁴

Another article from North Carolina echoes this sentiment, but also highlights the contradictions present in eugenics and so-called race science. The author quotes United States Indian Commissioner William A. Jones, who was likely the source for the Alabama article given their similarities. Jones claimed that the asylum will house “mixed breeds” and that “there was never a case of insanity in any tribe until the malady was introduced by mixing with whites.” He also uses the examples of the Osage and Sioux (Dakota) tribes to argue similar points about race mixing and work ethic. Towards the end of the article, however, he goes into the value of education and its effect on the Sioux (Dakota). The commissioner cheerfully spoke those of full native ancestry are dying off because they lack education, he saw hope in the “mixed breeds” that were being saved through education.¹⁶⁵

While the financial and racial motivations for the creation of the asylum existed, there was also opposition. Dr. W. W. Godding, Superintendent of St. Elizabeths, testified against the need for the asylum at a Senate hearing. Godding argued that extra funding given to his facility in 1897 would help alleviate the overcrowding issue and that if any group needed specific facilities, it was African Americans. He also testified that St. Elizabeths already housed five of

¹⁶⁴ “Lunatic Indian,” *The Sumter County Sun*, June 29, 1899.

¹⁶⁵ “Insane Asylum for Indians,” *The Salisbury Truth*, May 31, 1899.

the seven Native Americans in asylums.¹⁶⁶ A government investigation and newspaper reports also concurred with Godding that the need for such a facility did not exist. A survey conducted by the BIA on twenty-one reservations found that only sixty-four Native Americans could be classified as insane or idiotic.¹⁶⁷

Commissioner Jones could not provide any figure, despite the fact he described the Native population as small.¹⁶⁸ One Deadwood paper wrote that the number of potential patients to agent was around one and, “This proportion is so small as to be almost comical, when it is considered in the light of a project to found an exclusive asylum for Indians.” They go on to argue that creating a facility in such a remote location, something asylum advocates claimed was a benefit given its location to the west, and in a place with such harsh winters, would be detrimental to the health of patients.¹⁶⁹ Even the Secretary of the Interior was unwilling to put his full support behind an asylum.¹⁷⁰

Despite these questions on its necessity and other misgivings, Pettigrew managed to secure funding for the facility in 1899 and construction began the next year.¹⁷¹ The first superintendent of the asylum would be attorney Oscar C. Grifford, an ex-congressional representative for South Dakota and prominent figure in Canton, who had supported the asylum

¹⁶⁶ Joinson, *Vanished in Hiawatha*, 22-23.

¹⁶⁷ Diane T. Putney, “The Canton Asylum for Insane Indians, 1902-1934,” *South Dakota History*, 1984, 2.

¹⁶⁸ “Insane Asylum for Indians.”

¹⁶⁹ Joinson, *Vanished in Hiawatha*, 23. “The Canton Indian Asylum,” *The Daily Deadwood Pioneer-Times*, August 15, 1899.

¹⁷⁰ Spaulding, “The Canton Asylum for Insane Indians: An Example of Institutional Neglect.”, 1007.

¹⁷¹ Putney, “The Canton Asylum for Insane Indians, 1902-1934.”, 3.

and secured property for it.¹⁷² After construction was completed, the Canton Hiawatha Asylum for Insane Indians would open its doors to patients in December 1902.¹⁷³

As one can expect when a medical facility is created for financial rather than health reasons, and headed by a non-medical expert, problems soon arose. Superintendent Gifford would be ousted in 1908 because of a patient dying due in part to Gifford's refusing to have a surgery take place. Dr. Harry Hummer, who was a trained psychiatrist from St. Elizabeths, would be appointed to replace Gifford that same year.¹⁷⁴ Despite this change in leadership and now being headed by a medical professional, little improved in the asylum. Dr. Hummer's tenure as head of the asylum was a confusing mixture of ambition and incompetency. On one hand, he managed to keep the facility at or near capacity and advocated for expansion.¹⁷⁵ On the other, he showed little to no interest in treating patients, created such a toxic work environment for staff leading to high turnover, and grossly mismanaged internal record keeping of the facility.¹⁷⁶ All of this would ultimately lead to the closure of Canton in the 1930s, but not without destroying the lives of many.

Outwardly, Canton was presented as a place to treat Native Americans who were perceived to have chronic mental health conditions. However, in practice it accepted anyone, and the facility never had an established commitment process.¹⁷⁷ In 1928, the US Department of the Interior published *The Problem of Indian Administration* (Meriam Report). Although the report

¹⁷² Joinson, *Vanished in Hiawatha*, 23.

¹⁷³ Putney, "The Canton Asylum for Insane Indians, 1902-1934.", 4.

¹⁷⁴ Putney, "The Canton Asylum for Insane Indians, 1902-1934.", 9-10.

¹⁷⁵ Spaulding, "The Canton Asylum for Insane Indians: An Example of Institutional Neglect.", 1008. "Only Indian Insane Asylum in World, Located at Canton S. Dak., Nears 18th Birthday," *Argus-Leader*, December 11, 1920.

¹⁷⁶ Joinson, *Vanished in Hiawatha*, 122-130, 230.

¹⁷⁷ Putney, "The Canton Asylum for Insane Indians, 1902-1934.", 7-8.

was focused more on the broad array of issues Native Americans faced, it did briefly look into the conditions in Canton. It found that although the prevalence of mental illness in Native communities was low, Canton was almost always near or at capacity.¹⁷⁸ The Meriam Report also found that because Canton housed several different types of patients only separated into male and female wards, with no separation based on condition.¹⁷⁹ Among its recommendations calling for proper maintenance of the facility, finding better qualified staff, and better hygiene with regards to tuberculosis, the report asked if there was such a need for an asylum like Canton. While it did not recommend the closure of Canton, it urged for more cooperation between the federal government and Native communities with regards to new health facilities being placed closer to reservations.¹⁸⁰

Also mentioned in the Meriam Report was the negatable record keeping, with patient files containing little to no helpful information about their health. In fact, it found that in one case a boy from Arizona had been sent to the facility likely “the agency superintendent was determined to be rid of this boy. This conclusion was strengthened after comparing notes with a member of the survey staff who had studied the facts of the case on the reservation from which the boy came. He was subsequently sent home.”¹⁸¹

In fact, there were others that were sent to Canton due to being a “problem” for those in charge of reservations. A patient by the name of Peter Thompson Good Boy was committed to the asylum in May 1916 because his lawyers claimed he was “deranged” when he had stolen

¹⁷⁸ Lewis Meriam, “The Problem of Indian Administration” (Baltimore, MD, February 21, 1928), National Indian Law Library, <https://narl.org/nill/resources/meriam.html>, 305.

¹⁷⁹ Meriam, “Meriam Report,” 305-306.

¹⁸⁰ Meriam, “Meriam Report,” 308-311.

¹⁸¹ Meriam, “Meriam Report,” 307-308.

horses on the Rosebud Reservation. Good Boy claimed this was false and that his lawyers were conspiring with people on the reservation to have him sent away because he had information about a murder that had occurred there. His health records, including personal letters, seem to indicate a person in good physical and fine mental health. Monthly checkup reports describe Good Boy as being sociable with the other patients and having a good memory. Despite this, Dr. Hummer would diagnose him with “Constitutional Inferiority”, which is equivalent to Anti-social Personality Disorder, in November 1916.¹⁸² Subsequent investigations found that these were not isolated incidents, and that a disturbing pattern had taken hold in Canton.

Due to the shocking revelations of the Meriam Report, a more serious investigation was launched in 1929 and headed by Dr. Samuel A. Silk of St. Elizabeths.¹⁸³ He travelled to Canton and found the facility had become unsanitary and patients being treated worse than animals. Outside of these more physical issues, Silk was horrified by operation and conduct of Dr. Hummer. He found that patient files contained practically no useful information on the physical or mental condition of the patients being held in Canton. Silk found “No neurological examinations are performed. The psychiatric progress notes as to the patients’ condition and filed in the clinical record, are not based upon physician's examinations but are typewritten by Dr. Hummer from the notations made once in two months by the ward attendants in accordance with a certain questionnaire which Dr. Hummer has given them. Most of the information in the

¹⁸² “Record Group 75: Records of the Bureau of Indian Affairs. Canton Asylum for Insane Indians.,” National Archives, August 15, 2016, <https://www.archives.gov/kansas-city/finding-aids/html/rg75-canton-asylum-series-title-list.html>. “APA Dictionary of Psychology,” accessed February 29, 2024, <https://dictionary.apa.org/>.

¹⁸³ Joinson, *Vanished in Hiawatha*, 241.

records is of a stereotyped and valueless nature. No psychiatrist could get an adequate idea as to the mental condition of a patient from reading such a history.”¹⁸⁴

Because of this lack of proper record keeping and time restraints, Dr. Silk struggled to determine the exact nature of the conditions the patients at Canton had. He was able to determine that Dr. Hummer used a very loose definition of epilepsy. He found that of all fifteen patients with epilepsy in the asylum, only seven had the condition. The rest had either cerebral palsy, other neurological conditions, or that one had not suffered a convulsion in two years. Even among those who had epilepsy, their prognoses varied heavily from needing little care to intense care.¹⁸⁵ This poor ability to diagnose, let alone provide care, and the earlier findings that Canton accept any person reinforce the idea that the facility had become a place to send people deemed unfit or troublesome. While this report was shocking to many within the Department of the Interior and Indian Bureau, Dr. Silk was not done investigating Canton.

Although the initial Silk Report shocked many, the findings did not result in much immediate action against Dr. Hummer or the Canton Asylum. By 1933, however, things began to change with the new head of the Indian Bureau with John Collier taking over as Commissioner. Collier was moved to act on Canton after having met with one woman whose husband was sent to the asylum and reading the Silk Report.¹⁸⁶ Dr. Silk was again sent to Canton to gather further information on the condition of the patients and if any changes had occurred. Instead, he found

¹⁸⁴ Samuel Silk, “Report of Survey from Dr. Silk to Commissioner of Indian Service,” April 13, 1929, Honoring the Dead: A Digital Archive of the Insane Indian Asylum, <https://honoringthedead.omeka.net/items/show/23>, 30-31.

¹⁸⁵ Silk, “Silk Report,” 44-47.

¹⁸⁶ Putney, “The Canton Asylum for Insane Indians, 1902-1934,” 23.

out the conditions in Canton had not changed and in fact uncovered more sinister information about the facility.

Dr. Silk found that Canton was functioning less like hospital are more like a holding pen or death warehouse. Now that he had the time, Dr. Silk found that of the around one-hundred people in Canton, nearly half of them showed either no symptoms of mental illness or showed illnesses that could be managed at home if properly supervised. Of the remaining patients, about half of those should have been in the care of state homes for the feebleminded with the rest needing to be sent to proper mental hospitals.¹⁸⁷ One patient that Silk found in Canton was Emma Amyotte, who had lived in the facility since 1923. She had suffered from a stroke while living in Canada but had been sent back to the United States and eventually ended up in Canton. Dr. Hummer kept Ms. Amyotte in Canton, over the pleas of the Canadian hospital that she had recovered, because he deemed her to be a moron.¹⁸⁸ Another woman kept in Canton due to Dr. Hummer's intervention was Elizabeth Faribault, a Sisseton-Wahpeton Dakota woman from South Dakota, who had been taken from her family in the middle of the day by reservation officials, sent to Canton, and was diagnosed with several conditions including "Eugenically unfit".¹⁸⁹ Dr. Hummer even admitted to Dr. Silk that many patients in canton "did not show any evidence of active mental disease and could take care of themselves in any community, especially on an Indian reservation."¹⁹⁰ Dr. Silk also found that Canton had released no patient

¹⁸⁷ Samuel Silk, "Letter from Samuel A. Silk to the Commissioner of Indian Affairs," October 3, 1933, Honoring the Dead: A Digital Archive of the Insane Indian Asylum, <https://honoringthedead.omeka.net/items/show/1>, 15.

¹⁸⁸ Silk, "Silk Report (1933)," 10.

¹⁸⁹ Susan Burch, *Committed: Remembering Native Kinship in and beyond Institutions* (University of North Carolina Press, 2021), https://www.jstor.org/stable/10.5149/9781469663364_burch, 1-3.

¹⁹⁰ Silk, "Silk Report (1933)," 9.

for trial stays at home with their families, over their pleads, and that vacancies in the asylum were only created when a person died in the facility.¹⁹¹ This was despite the fact that Canton had been presented to the public as a facility which provided care for Natives abandoned by their families.¹⁹² “They should only be discharged after they were sterilized,” Dr. Hummer told Silk but since he had no means to conduct such operations he kept patients in Canton instead.¹⁹³

Eugenics clearly shaped the way that Dr. Hummer viewed his patients. However, unlike other eugenicists and perhaps unintentionally, Hummer used death as a tool to control the population. Dr. Silk found in both visits that people with communicable diseases were not separated from the general patient population. In his 1929 report, Dr. Silk found that upwards of fifty percent of the deaths in Canton were attributed to tuberculosis. Dr. Hummer revealed that while he “thought” that he had eight tubercular patients he was not sure about their symptoms or if that number was correct.¹⁹⁴ When examining death records, Dr. Silk found that one patient died of tuberculosis just fifteen days after being admitted to Canton.¹⁹⁵

Another patient died of the disease in December 1928, but because of the poor record keeping it could not be determined when she had contracted it. What stands out about this patient is that she had been working in the kitchen as late as October of that year.¹⁹⁶ Given that active symptoms of the disease take weeks or months to begin, it is likely that she either caught the disease somewhere in Canton or potentially spread it through the cooking she was doing. This relaxed attitude towards disease, coupled with the other sanitary issues and the no release

¹⁹¹ Silk, “Silk Report (1933),” 13-14.

¹⁹² “Asylum for Insane Indians,” *Rising City Independent*, February 27, 1902.

¹⁹³ Silk, “Silk Report (1933),”

¹⁹⁴ Silk, “Silk Report,” 48.

¹⁹⁵ Silk, “Silk Report,” 58.

¹⁹⁶ Silk, “Silk Report,” 59.

policy, made Canton a place of death. As a result of this, Canton had a high mortality rate with at least 120 of the around 374 patients sent.¹⁹⁷ While Canton could not sterilize its patients, it still operated on a eugenic understanding of medicine. By keeping his patients in Canton, and allowing the facility to deteriorate, he ensured that the “unfit” would not go back home and have more children.

By the 1930s, time and politics had caught up to the asylum in Canton. The damage caused by the Meriam Report and both Silk Reports spelt the end for the facility. The residents of Canton attempted to block the closure of the asylum, arguing that the nearby community would suffer if the facility closed. They succeeded in temporarily postponing its closure with a court order, but by October 1933 the order expired, and the game was over for the facility. Dr. Hummer was dismissed from his position as superintendent, he faced a series of charges related to his handling of the asylum, and at the end of October the courts sided with the federal government, allowing the asylum to close.¹⁹⁸ By December of that year, the remaining patients were sent to DC to be cared for in St. Elizabeths and the charges against Hummer were dropped.¹⁹⁹ Thus ended the Canton Hiawatha Asylum for Insane Indians, the only ethnically based asylum in the United States.

The closure of Canton, however, does not mark the end of eugenics and the toll it has had on Native Americans. Early eugenics scholar argued that sterilization, such a fundamental part of the eugenics movement, rarely affected Natives during the height of its popularity in part because

¹⁹⁷ Putney, “The Canton Asylum for Insane Indians, 1902-1934,” 30. Due to the issues with record keeping, the exact number of patients admitted to Canton and those that died there had been hard to determine. Though most agree it was around 121.

¹⁹⁸ Putney, “The Canton Asylum for Insane Indians, 1902-1934.”, 28.

¹⁹⁹ Joinson, *Vanished in Hiawatha*, 266-267.

of the racial make-up of state institutions tasked with them.²⁰⁰ Some scholars like Brianna Theobald have pushed back against this earlier scholarship. Theobald has found that sterilization and eugenics did affect Native American women during the 1930s, just that much of it occurred outside of the traditional institutions associated with it.²⁰¹ Native American women continued to be affected by eugenics long after eugenics had supposedly fall out of fashion. During the late 1960s and 1970s, anywhere between twenty-five and fifty percent of women being treated by Indian Health Services (IHS). Physicians, usually white men, gave a slew of reasons but many stemming from the idea that such surgeries helped society save money and women who already had large families.²⁰² Many Native women claimed that the paperwork for such operations was signed without being properly informed about it or while in labor. A deep mistrust of the IHS and other institutions like it that lasts to this day.²⁰³

While the asylum in Canton never sterilized a person in its walls, it still served a eugenic end. Asylum medicine, developed with the idea of treating people by removing them from society, was used and adapted to serve the purpose of eugenics. Removing ‘unfit’ or ‘problem’ people from their homes meant that reservation agents no longer had to deal with them. People like Dr. Hummer and others talked about treating people who needed it the most, but instead forced so many to live in a nightmare that only ended with their death far from home or their

²⁰⁰ Angela Gonzales, Judy Kertész, and Gabrielle Tayac, “Eugenics as Indian Removal: Sociohistorical Processes and the De(Con)Struction of American Indians in the Southeast,” *The Public Historian* 29, no. 3 (2007): 53–67, <https://doi.org/10.1525/tph.2007.29.3.53>, 59.

²⁰¹ Brianna Theobald, *Reproduction on the Reservation: Pregnancy, Childbirth, and Colonialism in the Long Twentieth Century* (Chapel Hill: The University of North Carolina Press, 2019), 91-92.

²⁰² Lawrence, “The Indian Health Service and the Sterilization of Native American Women.”, 410.

²⁰³ Lawrence, “The Indian Health Service and the Sterilization of Native American Women.”, 413-414.

family. For the descendants of those held in Canton, such as Faith O'Neil and Anne Gregory, the past still stings to this day. Yet for both women they use this pain to keep the memory alive of Canton, honor those who were sent to die there, and find some closure from this awful chapter in Native American history.²⁰⁴ What happened at Canton was done, it is now our duty to ensure that it is remember and never happens again.

²⁰⁴ Burch, *Committed*, 105-111.

CONCLUSION

In November 2014, voters in North Dakota headed to the polls to cast their ballots for a variety of local, state, and federal offices. Along with these votes for congressional and legislative representatives were eight statewide ballot measures.²⁰⁵ Measure one had garnered significant interest within and outside the state because of how it would change the state constitution. The measure would have added a new section to the constitution saying, “The inalienable right to life of every human being at any stage of development must be recognized and protected.”²⁰⁶ If approved the measure would have effectively ended abortion access in the state of North Dakota, in addition to threatening in vitro fertilization treatment and even end-of-life care.²⁰⁷

A decade before this measure was brought to the ballot in North Dakota, in 2006 citizens in South Dakota were faced with a similar question. Then-Governor Mike Rounds had signed a law that outlawed abortion in the state except in cases where the mother’s life was endangered. After signing the law, Governor Rounds claimed, “In the history of the world, the true test of a civilization is how well people treat the most vulnerable and most helpless in their society. The sponsors and supporters of this bill believe that abortion is wrong because unborn children are

²⁰⁵ “North Dakota Secretary of State,” November 13, 2014,

<https://results.sos.nd.gov/ResultsSW.aspx?text=BQ&type=SW&map=CTY&eid=126>.

²⁰⁶ “Your Guide to North Dakota Measures - The Dickinson Press | News, Weather, Sports from Dickinson North Dakota,” accessed March 27, 2024,

<https://www.thedickinsonpress.com/news/your-guide-to-north-dakota-measures>.

²⁰⁷ Jennifer Haberkorn, “‘Personhood’ Faces N.D. Test,” POLITICO, November 3, 2014, <https://www.politico.com/story/2014/11/abortion-north-dakota-112419>.

the most vulnerable and most helpless persons in our society. I agree with them.”²⁰⁸ While the law was set to be implemented in July of that year, activists in the state gather enough signatures to have a referendum on it that November.²⁰⁹

I mention these two public votes around abortion access due to some of the parallels between them and the eugenics movement focused on in this study. Advocates in both groups argued that they were protecting life and those not yet born, and that they cared deeply about the future of the people affected by their advocacy. For eugenicists, protecting future lives meant sterilizing those deemed unfit from having future and potentially “burdensome” children. Eugenicists believe that by sterilizing patients at mental facilities their quality of life would improve after the operation, and that future generations would not be saddled with caring for future unfit people. Anti-abortion advocates argue that they care about all life but place special emphasis on caring for the future lives of the unborn since they are unable to advocate for themselves. Care for the anti-abortion movement means making sure that all lives, though they sometimes make exceptions for cases that threaten the life of the mother and others, can be lived to their fullest extent. But this ideology motivated by caring for future lives, and sometimes moralized with religion, leads to a clouding of judgement on the actual effects it has on living people. The legislation created by eugenicists or anti-abortionists with this clouded judgement can and has ended with many lives harmed because the complexities of life are not considered.

²⁰⁸ Monica Davey, “South Dakota Bans Abortion, Setting Up a Battle,” *The New York Times*, March 7, 2006, sec. U.S., <https://www.nytimes.com/2006/03/07/us/south-dakota-bans-abortion-setting-up-a-battle.html>.

²⁰⁹ Eric Mayer, “From the Archive: Votes on Abortion in 2006 and 2008,” *KELOLAND.Com* (blog), May 4, 2022, <https://www.keloland.com/keloland-com-original/from-the-archive-votes-on-abortion-in-2006-and-2008/>.

Put more simply blindly following an ideology predicated on caring for people, often actually results in adverse effects being felt by many.

Another reason I mention these two votes, outside this parallel of the eugenics and anti-abortion movements, is the fact that eugenicists type rhetoric is still used today. While the eugenicists and anti-abortionists use the state in different means to different ends, they still see the state as playing a fundamental role in ensuring that care for future generations is provided for. Even outside of this debate on the role of the state with regards to care, more direct instances of eugenics thinking being used pop up in the daily lives of those living on the Great Plains. I can remember instances in my hometown where people discussed whether someone was the “right” type of parent or that someone “shouldn’t have kids” because of some mental or physical quality. While this is admittedly anecdotal evidence and should not be construed to mean that people there are eugenicists, it certainly reflects the fact that thinking influenced by eugenics remains alive today and can be found here on the Great Plains.

Part of the reason that eugenics influenced thinking remains to this day is because of the initial exposure to this type of thinking during the 20th century. North Dakota eugenicists like Grassick and Quain argued that the state needed to sterilize citizens in state institutions to protect others. They believed that by ending the reproductive capacity of people like Clenora “Amanda” Halverson that future generations would not be burdened by people with developmental issues and save the taxpayers of the state money. As a result, North Dakota created a sweeping sterilization law that allowed the state to sterilize over a thousand of its citizens. This logic of cost saving did not disappear after the state repealed its sterilization and other eugenics legislation, instead changing its form to fit the needs of neoliberal policies with the approval of Medicaid coverage of Norplant.

In neighboring South Dakota, eugenicists struggled to achieve the more sweeping legislation despite a more concerted effort. The Aberdeen Social Science Club, made up of city father figures like former Governor Charles Herreid and Dr. Robert Murdy, advocated for eugenics in the state legislature. However, despite this organizational advantage that they had compared to North Dakota's eugenic organizing, the legislature passed a far less comprehensive sterilization bill that initially limited the operations to only the Redfield State Home. As a result of this, South Dakota sterilized only around eight hundred people in the state. Along with this limiting of sterilizations, the legislature of the state nearly developed into fighting over marriage control and only reluctantly passed a marriage law in the 1930s. While South Dakota may not have sterilized as many people as its neighbors, it provides scholars with an interesting look into how eugenics operated and the effects it had on the populations it targeted.

Finally, the Canton Hiawatha Asylum for Insane Indians offers an alternate look into the eugenics movement. Although conceived as a pork-barrel project for a newly found state, the facility highlights the convergence of asylum-based medicine and eugenics at the turn of the century. It was thought that race mixing had caused insanity in Native Americans, and that few in their communities were willing to take care of those who had it. Thus, Canton would treat patients who were not getting the care these so desperately needed. Instead, the facility became a place to offload those causing trouble for white reservation officials. Superintendent Dr. Hummer kept patients in the institution as long as possible, letting disease fester and kill many because he could not sterilize them. As a result, Canton served to keep "problem" people off the reservation and the potential "danger" they could pose by having children.

Like many other states in the Union, North and South Dakota both have repealed their eugenic legislation. However, this history has been neglected by most historians of eugenics for

various reasons. On one hand it is somewhat understanding that people overlook this region when studying eugenics because of the scale of it. States like California or North Carolina were much more directly influenced by eugenics and conducted more sterilizations than other states. Scholar Alexandra Stern even points out that eugenicists reshaped the landscape of California, saying, “Their approaches to the environment encompassed the entire spectrum, from preservationists fiercely intent on forever insulating the wonders of nature from intrusion, to parks and recreation enthusiasts who wanted to build roads, lookouts, and concessions to make the outdoors more accessible if not commercially profitable.”²¹⁰ The scale and impact eugenics in California and other larger states is much more accessible since more evidence was left behind.

While evidence may be more accessible in those states, the focus on the larger and coastal states can skew the understanding of eugenics. A less attentive reader might finish Stern’s work *Eugenic Nation* or others with the impression that eugenics was an urban coastal or industrial Midwest matter, with little influence in the agricultural Great Plains. However, this study and others like *Reproduction on the Reservation* both show that eugenics did penetrate the heartland. And as any recent scholar on the topic will say, the eugenics movement had a profound impact and grip on American society in the first half of the twentieth century with few opposing it.

Both states also show that advocates for eugenics could not apply a one sizes fits all approach to accomplish their goals. As mentioned previously, North Dakota had no specific group that advocated for eugenics but managed to secure broad legislation and sterilize a high

²¹⁰ Stern, “Eugenic Nation.” 142-143.

number of people. Contrasted with South Dakota where the Aberdeen Social Science Club functioned as a eugenics advocacy organization but gained considerably less sweeping legislation. This in some ways goes against the general trend that scholars like Stern and to a lesser extent Kline have advanced, in which some form of organization power was needed to get legislation enacted or people thinking about eugenics. Perhaps future scholars looking to uncover eugenic history should reconsider to what extent organizations played a role in getting legislation enacted and potentially look for other reasons states would create such laws.

Future scholars should also look to the example of the Hiawatha Asylum for Insane Indians as example of where eugenics intersected with other forms medicine and reconsider the definition of eugenics itself. While not overtly conceived as a place to implement eugenics, asylum medicine and eugenic thinking came together to serve as part of its foundation and justification for existence. In addition to this, despite no sterilizations being conducted at Canton Dr. Hummer operated the institution in a manner which tried to emulate the results of sterilizations. Patients not leaving Canton, and potentially dying there, meant that they were no longer an issue for reservation officials or having more children these officials would have to deal with. To try and full grasp how influential eugenics was, both on the Great Plains and in the United States, places like Canton should be considered alongside the legislation that eugenicists created.

Finally, outside of showing that eugenics occurred here on the Plains and how it contrasts with elsewhere, my hope is that readers will remember the names of those who advocated for eugenics and those affected by this way of thinking. This serves as a final point of advice for future scholars of eugenics, look both for those who advocated for eugenics and those who were sterilized or otherwise affected by it. This latter group is perhaps the most important given that

they were the ones impacted by legislation and we still know so few of their names. Knowing the names of the sterilized and their stories will be far more impactful than legislative debates or statistical reports.

The legacy of eugenics on the Great Plains, and in the United States as a whole, cannot be overstated and continues to affect us to this day. Americans are still wrestling with the questions of genetic power, the role the state has in managing it, and what providing care for the most vulnerable means in relation to this power. Regarding abortion. Both North and South Dakotans have at best given conflicting answers to these questions. Both states passed trigger laws which would effectively ban abortions if *Roe vs. Wade* was overturned, which did occur in 2022.²¹¹ However, North Dakota's ban has faced some legal push-back with activists within the state trying to temporarily halt this ban.²¹² Meanwhile in South Dakota, activists within the state are fighting to get an initiative placed on this year's November ballot.²¹³ Even before the overturning of *Roe v. Wade*, both states gave conflicting answers. North Dakotans rejected measure one in 2014 by an overwhelming majority of sixty-four percent to thirty-five percent, with just under half of all voters turning out.²¹⁴ Similarly South Dakotans rejected both the 2006 ban, and another attempt at one in 2008. Both were rejected by a similar margin of fifty-five

²¹¹ Elizabeth Nash and Isabel Guarnieri, "13 States Have Abortion Trigger Bans—Here's What Happens When Roe Is Overturned | Guttmacher Institute," June 6, 2022, <https://www.guttmacher.org/article/2022/06/13-states-have-abortion-trigger-bans-heres-what-happens-when-roe-overturned>.

²¹² Nadine El-Bawab and Mary Kekatos, "North Dakota Court Keeps Strict Abortion Ban in Place Even in Cases of Medical Emergencies," ABC News, accessed March 31, 2024, <https://abcnews.go.com/US/north-dakota-court-strict-abortion-ban-place-cases/story?id=106609366>.

²¹³ Rachel M. Cohen, "This Ballot Measure Would Restore Roe. Abortion Rights Groups Are Attacking It," Vox, February 26, 2024, <https://www.vox.com/24078960/south-dakota-abortion-ballot-measure-dobbs>.

²¹⁴ "North Dakota Secretary of State."

percent to forty-four percent.²¹⁵ It is likely that both states will be continuing to try and reckon with being anti-abortion, while at the same time unwilling to buy into the extremes advocated for by some within that movement.

I think most people, regardless of their country or economic status, want to ensure they live in a healthy society where care is provided to all. However, as genetic scientists continue to uncover more knowledge about how our genes work, the question of what to do with this knowledge will haunt humanity in relation to what it means to have a healthy society. No eugenicists should be viewed as completely evil. Most, whether they be major figures like Harry Laughlin or regional figures like James Grassick, were trying to reconcile the questions of maintaining a healthy society in line with the science of genetics. As stated in the introduction, my hope with this study is that we can learn from this terrible past and create a kinder society from it. Ultimately these questions around genetic power and who gets to answer them will likely never go away completely. If we do not acknowledge this eugenic past, we may find our society walking a parallel path to it.

²¹⁵ Mayer, "From the Archive."

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