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# Eugenics and bodily discipline in the Scandinavian welfare state

A genealogy of gendered othering

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# Abstract

This thesis is a genealogy of the gendered othering practices that emerged through and within the implementation of eugenic policies in the Scandinavian welfare states, namely Denmark, Norway, and Sweden. Between the early 1930s and 1970s, tens of thousands of people were sterilized and institutionalized in Scandinavia for various purposes, and a vast majority of these people were “feeble-minded,” “immoral,” “vagrant,” “antisocial” or “weak” women whose fertility constituted a threat to the quality of the “national stock.” In addition to looking back at the Scandinavian history to trace down how eugenicists rationalized targeting women for sterilization and institutionalization practices, this thesis is also questioning the implications of these gendered practices, or rather the absence of the atrocities committed in the early welfare state from the collective memory, on the contemporary images and imaginaries of Scandinavian societies.

*Key words: Scandinavian history, eugenics, gendered othering, eugenic sterilization, welfare state.*

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# 1 Introduction

In 1935, a 22-year-old Danish laundress who had previously been diagnosed with “imbecility” was institutionalized for the reason that she lived a vagabond-like, “immoral” life. It was stated by her teacher that she had never been good at school, and her matron thought she was feeble-minded, though capable of working as a laundress. She liked going out to dance, as well as socializing with the “wrong” type of women. Over the years, she had engaged in sexual relations with numerous men, but luckily, she had never been pregnant. Her parents could not manage her defiant and disobedient behavior and wished her to be placed in an institution for the feeble-minded. In the end, their wish came true: she was sent to an institution where she was promptly sterilized “just to be on the safe side” even though she was not going to be released any time soon (Kemp, 1939, pp.72-75).

In the mid-1930s, a 17-year-old Roma girl was examined by a Norwegian psychiatrist who described her as “gentle and trusting, but flirtatious and childish,” and recommended her to get sterilized. She asked for some time to think about it, and sometime later, signed the application form. Meanwhile, the relevant authorities also decided that sterilization was recommended in her case, which could likely be their verdict regardless of the girl’s decision. Shortly thereafter, she was admitted to a hospital to get an appendectomy, and she was sterilized, as well. However, the significance of her consent is questionable as there were many others like her who were hospitalized under the pretense of other surgical procedures that turned out to be sterilization (Haave, 2000, p.189-190).

In 1943, a sixteen-year-old girl from Sweden was reported to the authorities by her family members, pastor, and teacher who believed that she was “feebleminded.” The reasoning behind their application was that it was hard to keep an eye on her and that she had a tendency to seek male companionship. Afterward,

a doctor who examined her came to the conclusion that her sterilization was of immediate interest as she lived near a military station. Thus, her mental deficiency and proximity to the military men were worrisome for the people around her who feared that she could get pregnant. In order to eliminate that risk, she was sterilized at such a young age (Runcis, 1998, p.188).

While it is unquestionable that all of these cases implicate certain discourses and practices that would be utterly unacceptable in the present day, these three young women were among the tens of thousands of people who got sterilized under eugenicist sterilization laws passed in the Scandinavian countries from the early 1930s to the mid-1970s. In Sweden, 93 percent of the total number of sterilizations were performed on women (Broberg and Tydén, 2005, p.110), while this number was around 70-75 percent in Denmark and Norway (Hansen, 2005; Roll-Hansen, 2005b). Moreover, many others were institutionalized against their will and segregated from the society. Marriage laws were enacted to make sure that the wrong type of people did not have “defective” children who would undoubtedly be a burden on the rest of the society. These measures were all taken in order to keep certain categories of people who did not fit the norm from procreating, namely from decreasing the quality of the “national stock.” Moreover, the construction of the “unfit” through and within all of these discourses and practices had been a gendered process: a great majority of these “undesirable” individuals happened to be “feebleminded,” “dissolute,” racialized and/or lower-class women—or the “gendered others” of the society.

The self-image of the Scandinavian societies is constructed upon the pillar of gender equality among others, which is strongly emphasized in the formulation of their national cultural image (de los Reyes et al., 2002 cited in Mulinari, 2010, p.161). In contrast with the present conceptions of this (gender) egalitarian welfare state model, these three countries have faced many challenges when it comes to handling difference, namely, the people who deviate from the norm. For instance, the concept of “whiteness” has been taken for granted for a long time because of the insistence on “the myth of homogeneity” in the Scandinavian countries, and that norm has been based on the unquestioned assumptions stemming from whiteness



as an unacknowledged category (Blaagaard, 2009, pp.53-54). Furthermore, while the implementation of eugenic policies based on social and racial hygiene implicate ableist, racist and classist nature of the discrimination against the “unfit,” the category of women and the process of gendered othering implicated in those practices remain unaddressed to a large extent. While there has been a plethora of studies that focused on the history of eugenics or that analyzed the various other aspects of the eugenic discourses and practices, the gender aspect of the issue has often been “explained away” as a result of men’s domination over the field of racial hygiene and over the creation of eugenicist policies and measures. The fact that women constituted the majority of the individuals who were institutionalized and sterilized as a result of eugenic policies indicates that it is and should be studied as a women’s issue (Roll-Hansen, 2005a, p.264). This would be a significant step to make sure that the category of women is not subsumed into a generic category of human, and neither the specificity nor the diversity of women's experiences would be lost. Failing to do that would mean, in Scott’s words, going back to “the days when ‘Man’s’ story was supposed to be everyone’s story, when women were ‘hidden from history,’ when the feminine served as the negative counterpoint, the ‘Other,’ for the construction of positive masculine identity” (1988, p.45).

With regard to the purpose behind exploring certain aspects of the history of gendered othering in Scandinavia using a genealogical approach, it can be described first and foremost as an attempt to “induce skepticism about the present” (Donnelly, 1986, p.16). At the end of the first chapter of *Discipline and Punish*, Foucault explains the reasoning behind his choice to write about the history of prison: “Why? Simply because I am interested in the past? No, if one means by that writing a history of the past in terms of the present. Yes, if one means writing the history of the present” (1975, p.31). Similarly, my motivation behind doing a genealogy of gendered othering in the region is not merely an effort to reveal what happened in the past, but it is to touch upon the incongruity between the discourses of gender equality in the Scandinavian welfare state and the long history of failures to handle “difference,” which was epitomized in the gendered implementations of eugenic practices in the region during the twentieth century. Keeping this in mind, by

studying the gendered implementation of the eugenic discourse and practices, I intend to locate “the acute manifestations of a particular ‘meticulous ritual of power’ or ‘political technology of the body’ to see where it arose, took shape, gained importance, and so on” (Dreyfus and Rabinow, 1983, p.119). Thus, what I plan to do with this thesis is to inspire a more critical approach towards the idealized present-day images of the Scandinavian countries through a genealogical analysis of gendered othering in the region as a “ritual of power” in which I look for the discourses on eugenics and women, in addition to the gendered implementation of eugenicist policies, such as segregation, institutionalization, marriage laws, and most notably the sterilization laws that stayed in force between the early 1930s and the mid-1970s.

Aside from the purpose, another question that should be addressed about this thesis is the following: Why is it important to explore this topic? After the Second World War, Germany was forced to confront its recent past and the atrocities committed during the Nazi regime. In the United States, forced sterilizations in the became a public issue in the early 1970s, but “it was not until the media decided that the casual sterilization of two Black girls in Montgomery, Alabama, was a scandal worth reporting that the Pandora’s box of sterilization abuse was finally flung open” (Davis, 1982, p.361). Both the self-identities and the international images of these countries were defined by such confrontations on a societal level. Similarly, until it was problematized by Maciej Zaremba in a series of articles published in *Dagens Nyheter* in 1997 that appeared soon after in international media, Scandinavian eugenics seems to have been virtually non-existent in terms of a critical debate and confrontation on a societal level, which is a compelling explanation for why at the time the news broke roughly twenty years ago about the compulsory sterilization practices in Sweden and the neighboring countries, it was as shocking as it was for the Scandinavian societies, as well as the rest of the world. According to historian Tydén, “[n]ot only did this topic put important questions on the agenda about morality and history, guilt and rehabilitation, but it also challenged the conventional conception of Scandinavian contemporary history” (2010, p.363).

Nevertheless, some scholars commented on the mediatization of Scandinavian that eugenic practices and sterilizations by saying that they were neither an unknown nor a hidden part of history. For instance, historian Lena Lennerhed published an article about the sudden popularity of the Swedish and Scandinavian eugenics in the media and asked: “I cannot help but wonder: why a debate now? These sterilisations took place in the open; the facts have never been hidden. Historians as well as journalists have known and written about them for many years. So what makes them ‘news’?” (1997, p.156). Similarly, professor of philosophy Torbjörn Tanssjö wrote a response to Zaremba’s article on Guardian in which he said: ““I find it hard to understand why the debate on enforced sterilisation is so shrill. The issues at stake are well-known and have been frequently debated” (1997). In a sense, the importance of talking about this issue stems from these statements because my counter questions would be: If that is the case, why not talk about this in the news? Is it sufficient that historians and journalists had been writing about the issue? As for the gender aspect of the issue that I am analyzing in this thesis, the fact that it is a rarely addressed problem makes it more important to talk about the history of some the most “democratic” nations.

Hence, in this thesis, I will delve into the past to get an understanding of today, meaning that there will be two layers of analysis. Firstly, I will try to seek answers for the following question that will, in turn, function as a guide for me in the analytical process: *How was the gendered implementation of the Scandinavian eugenic discourses and practices rationalized?* Then, I will have a supplementary research question that will help me think critically about how to track my genealogy until today: *What is the place of the historical phenomena of gendered othering and eugenic practices in the construction of the contemporary images and imaginaries of the Scandinavian welfare state?*

Accordingly, this thesis is structured as follows: In the next section, I will summarize the theoretical concepts that will inform my analysis. The third section will be a discussion of the methodological choices that I made to explore the topic at hand, as well as a description the nature of the methods/materials that I used for data collection and analysis. Then, in the fourth section, I will discuss the processes

of gendered othering that occurred through the implementation of eugenic policies. The fifth and the final section will be a short inquiry about the implications of this recent history of gendered othering for the contemporary images and imaginaries of the Scandinavian countries.

## 2 Theoretical framework

In this thesis, I draw upon the following interrelated theoretical approaches in order to explore eugenic practices as a component of biopolitics directed against different groups of women, as well as why these practices have been ableist, classist and racist: intersectionality; theories of nation, nation-state, nationalism, citizenship, and gender; Foucauldian concepts of biopower and state-sponsored racism; contingency of the vulnerability discourse; and finally, concepts of “abject” and “abjection” in Kristeva.

### 2.1 Intersectional approach to the category of women

While this thesis is focused on the gendered implementation of the Scandinavian eugenics practices, it is of utmost importance to note the specificity and the diversity of the experiences of different groups of women, and to have an intersectional approach when it comes to an issue like this as these different categories are not subjected to ableism, racism or sexism as separate discriminatory practices, but they exist at the intersections of the categories of gender, race, class, ability and so on (Bock, 1983; McCall, 2005). Hence, an essential theoretical concept that will inform my analysis is “intersectionality,” which is a term coined by Kimberlé Crenshaw (1991) who sought to critique the inadequacy of the category of women when it comes to addressing the differences between the members of this category. Correspondingly, in the context of my thesis, adopting an intersectional approach is necessary to tackle with the specific issues associated with different categories of women labeled as “feeble-minded,” “immoral,” vagrant or antisocial who were victims of eugenic practices.

Furthermore, according to Hill-Collins and Bilge (2016), the intersectional approach can also be a tool for understanding the complexities of human experience on top of recognizing the connotations of various combinations of identities. In this regard, experiences of different categories of women also differ from each other, as well as the types and the levels of subordination that they are subjected to. For instance, in the next subsection on theories of gender and nationalism, it is described how certain women were expected to reproduce and others were expected not to for the interests of the nation-state, proving that the mere category of women is not sufficient because there are intra-categorical disparities. Accordingly, I will consider the intersections of the different categories within the category of women and their experiences in my analysis, such as the binary of “fit” and “unfit” women and the differences among the “unfit” women, which were constructed through and within the Scandinavian eugenic discourse and practices.

## 2.2 Theories on nationalism, citizenship, and gender

Studying the gendered workings of nationalism and the nation-state is very useful in explaining why women constitute the majority of the victims of the implementation of eugenicist policies in Scandinavia. Firstly, Nagel underlines that men have historically dominated political institutions, decision-making processes, as well as nationalist movements, from which women have been excluded systematically (1998, p.243). Furthermore, according to Enloe, “nationalism typically has sprung from masculinized memory, masculinized humiliation and masculinized hope” (1989, p.44), while women have historically been considered symbols in nationalist struggles. In a similar fashion, McClintock argues that nations are “historical and institutional practices through which social difference is invented and performed. Nationalism becomes, as a result, radically constitutive of people's identities, through social contests that are frequently violent and always gendered,” which is why “nations have historically amounted to the sanctioned institutionalization of gender difference. No nation in the world gives women and men the same access to the rights and resources of the nation-state” (1993, p.61).

In this regard, the theory of Yuval-Davis and Anthias on gender and nationalism is very pertinent to this thesis, as the scholars argue that nationalist projects make a claim on women's bodies as they aim to administer the reproduction of the "nation" (Yuval-Davis and Anthias, 1989; Yuval-Davis, 1997). According to Yuval-Davis and Anthias (1989), women have been given an essential role in nationalist projects as the ones who are responsible for the biological reproduction of their nation and/or ethnic community. Consequently, in a sense, their bodies have become vessels for the nationalist causes that they are (or are made) part of. However, it is not only the responsibility of biological reproduction that is assigned to women; Yuval-Davis and Anthias (1989) claim that women have additionally been in charge of raising the future generations while making sure that they are well-versed in nationalist doctrine. Women have thusly been constructed as the "cultural carriers" of the nations and ethnic communities of which they are members (Yuval-Davis and Anthias, 1989, p.9; Yuval-Davis, 1997). As nationalist movements became more interested in the family and defined nation itself as a family, bearing and raising the next generations became a national duty on top of a moral one (Davin, 1978, p.13).

Nevertheless, the duty to reproduce has been valid for only some women in the nation-state, while some women's reproduction and their methods of raising children were seen as a threat to the nation itself. Luibhéid maintains that nations consider "women of the dominant racial/ethnic and class group as reproducers and rearers of children for the national future, while stigmatizing, policing, and punishing other sexual and intimate formations" (2015, pp.129-130). There is a clearly established hierarchy between women who are urged to bear children and whose fertility is key to protecting and growing the "national stock" (Yuval-Davis, 1997), while the ones who are deterred and even obstructed from that with measures like forced sterilizations, as the latter were "often marked as a threat by the state, and controlled, prevented, or demonized" (Luibhéid, 2006, p.62). The idea of nationalist duty to bear children is a repeated theme in the Scandinavian eugenics, but only for the "right" type of women, and the hierarchy between women was very distinctly defined in the Scandinavian eugenic discourse and practices.

Moreover, nationalism has generated symbolic values such as purity, as much as it has signified political self-determination over the years (Hirschi, 2011, p.28). Hence, it has been a common belief in nationalisms that women represented national honor and homogeneity. This has been an effective tool for nationalist movements to discipline women's behavior and bodies through the construction of feminine respectability as a nationalist characteristic (Enloe, 1989, p.48; McClintock, 1995, p.365), that "immoral," racialized or lower-class women could not have, which led to defining these women's "deviant" sexuality as a threat that needs to be controlled.

As for how the high percentage of the forced sterilizations of these "unfit" and "undesirable" women has been justified while the states denied being racist, it can be explained by the transformation of the concept of state-sanctioned racism. According to Balibar (1991 cited in Sharma, 2015, p.108), the post-Second World War era marked the replacement of the conceptualization of race-as-biology with race-as-culture, taking the innate cultural differences as the basis of the racist exclusion in the nation-states, which the scholar calls "neo-racism." That is to say, 'culture' and 'tradition' have become "essentialized and biologized into notions of genealogical 'difference'" (Yuval-Davis, 1997), which made it possible for nation-states to implement eugenic welfare policies without having to acknowledge that they targeted certain ethnicities, but certain traits that happened to pertain to the cultures of indigenous and ethnic minority groups. Targeting racialized/classed women using characteristics attributed to them instead of admitting to targeting them for who they are was a very common practice in the Scandinavian eugenics.

Furthermore, like in case of the indigenous people like Sami or parallel cultures of Roma, they have always been the others that still remain "foreign" despite having lived side by side with the sovereign nation and in most cases, having existed in the same territory for much longer. Thus, this long-lasting practice of exclusion begs the question of how nation-states have conceptualized citizenship since these groups have continuously been excluded from the rights that are "implicitly assumed to be part of citizen status" (El-Tayeb, 2011, p.53) despite holding citizenship on paper. Nation-states tried to justify this with the claim that



indigenous and ethnic minority communities have been viewed as “failed citizens” because they neither have had values nor have shared the values of the sovereign nation (Anderson and Hughes, 2015, p.4). The fact that indigenous and ethnic minority people hold citizenship on paper has never signified that they were granted the same rights as the citizens of desirable ethnic background, since they have been branded as superfluous, “undeserving” citizens (Jones et al., 2016, p.122), which means that holding citizenship and being included are not necessarily akin to each other. Contrarily, this shows that citizenship is often established in the nation-states as an exclusionary practice instead of an inclusive one. Diverging from the contractualist understandings of being a citizen, citizenship can be defined as “contract of breach,” “in the sense that the very foundation of contract is the breach of universalism and respect for all, so that oppression is normative” (Mills, 2007 cited in Brace, 2015, p.15).

## 2.3 Biopolitics and state-sanctioned racism

Another theoretical approach that I use in this thesis is Foucault’s conceptualization of biopower and biopolitics as they are very relevant to the state-sponsored ableist, racist and classist practices such as forced sterilization (1976; 1997). According to Foucault, sovereignty has historically manifested as the power or right to kill, which has been used by the sovereign to justify the violent measures that they impose upon certain groups (1976, p.135). Eliminating the members of these other groups for one’s own survival was the principle behind battle tactics as exposing entire populations to death became the justification of guaranteeing the continued existence of the sovereign (p.137). Moreover, Foucault argues that this “old power of death” was eventually replaced by mechanisms that sought to administer human bodies and to manage life, marking the beginning of the era of “biopower” (pp.139-140). The people who were perceived to be mentally deficient, racialized and immoral have often been excluded from the rest of the society, on top of which their existence and reproduction have been considered to be a threat to the “quality” of the national population, which brings to mind the concept of “biopower” that is

useful in explaining why the states targeted those groups by measures like forced sterilizations. Maintaining the “quality” of the population has become a justification of the elimination of that threat with the help of eugenicist discourses, which were a part of the power/knowledge regime that sustained it and, in turn, was sustained by it.

According to Foucault, a measure such as the implementation of eugenics practices could only be achievable in state-sanctioned racism or state racism that is directed against the state’s own elements in order to purify the population (Foucault, 1997, p.62). Foucault’s definition of state racism as “a way of introducing a break into the domain of life that is under power’s control: the break between what must live and what must die” (1997, p.254) explains how the state-sponsored economy of biopower excuses the killings and the other disciplinary measures taken by the state, such as exposing certain groups to death or increasing the risk of death, expulsion, and rejection for these groups (p.256). Forced sterilizations fall under this category of disciplinary acts of the state, as they threaten the existence of a group without a direct elimination of its members.

## 2.4 Discursive and non-discursive vulnerabilities

In addition to the biopolitics and state racism, Butler’s approach to bodily vulnerabilities are also pertinent to this thesis for the reason that I plan to analyze the situation of the victims who have been forcibly sterilized on the axes of vulnerability and agency, by discussing corporeal vulnerability as a human condition (Butler, 2004; 2009), and how forced sterilizations have robbed these women of their agency, which is a way that nation-states determine which “subjects” and “lives” are recognized and which are not (Butler, 2009, p.4). As argued by Butler, vulnerability should be considered a shared condition of life that must be recognized (2009, p.13) as the body is by definition vulnerable to the exteriority of the world (pp.33-34) in its relation to power.

The discourse of vulnerability, however, is not a one-dimensional one as it can be mobilized by a variety of actors. For instance, it is not uncommon for the ones in a position of power to build an emblematic discourse of vulnerability against the “others” that are considered to be a threat to their interests or even their existence, in other words, “hypervulnerability” (Butler et al., 2016). The notion of vulnerability can easily be exploited through this discourse, establishing that sometimes “those least in danger are the most afraid” (Ditton and Farrall, 2000 cited in Ahmed, 2014, p.68). Moreover, Ahmed uses the phrase “the language of fear,” to describe the use of vulnerability discourses by the states that seek to construct a distinction between those who are under threat and those who constitute a threat (2014, p.72). This distinction particularly helps justify why states want to eliminate “the source of fear and transform the world into a place where [...] some bodies become the sign of freedom and civilization” (2014, p.73).

## 2.5 Kristeva’s conceptualization of “abject” and “abjection”

One of the purposes of this thesis is to make sense of the question of what it was that made “feeble-minded,” “sexually loose” and racialized/classed women and their bodies such a “degenerative threat” (Albert and Szilvasi, 2017, p.25) that extreme measures like forced sterilizations and institutionalization were used against them; as well as the reasons why these practices been gendered and why have these women been particularly targeted by governments. In order to explore these phenomena, the concepts of “abject” and “abjection” coined by Kristeva are very useful: the reason why the “gendered others” were the victims of this practice is that they have been the “abject” of the society (Kristeva, 1980)—they were considered to be the “foreigners” (Kristeva, 1988) and their reproductive power was an outside threat to the “national stock,” and also an element that needed to be eliminated.

In *Powers of Horror*, Kristeva defines the abject as what is outside the subject, the other that causes feelings of revulsion; however, the abject is also constitutive of the subject as they form “the border of [one’s] condition as a living being” (1980, p.3). Kristeva maintains that when the subject tries to “identify with something on the outside, finds the impossible within; when it finds that the impossible constitutes its very being, that it is none other than abject” (1980, p.5). Moreover, Kristeva’s definition of “foreigner” is very similar to that: the foreigner is the other that raises the sense of fascination and repulsion with its otherness. According to Kristeva, in modern nation-states, the foreigners are the ones who do not belong in the state and who do not have the same nationality as the sovereign nation, and “[d]ifferences involving sex, age, profession, or religion may converge on the state of foreignness, support or add to it” (1988, pp.95-96). As to why the majority of the forcibly sterilized are women, the control over bodies are not only based on race and ethnicity, but also the sexed bodies; the manifestation of the differences of women’s bodies is described by Kristeva as a “danger issuing from within the identity (social or sexual); it threatens the relationship between the sexes within a social aggregate and, through internalization, the identity of each sex in the face of sexual difference.” (1980, p.71)

On the other hand, Tyler (2013) claims that Kristeva’s concepts of abject and abjection are not particularly clear when it comes to applying them to certain social and political situations and building on these concepts, the scholar coins the term “social abjection” which denotes the material aspects and consequences of being the abject of the society (2013, p.4), which are exemplified by segregation, institutionalization and sterilization in the scope of this thesis. Tyler describes the notion of “social abjection” as a “theoretical resource that enables us to consider states of exclusion from multiple perspectives, including the perspective of those who are ‘obliged to inhabit the impossible edges of modernity’, those border zones within the state” (McClintock, 1995, p.72 cited in Tyler, 2013, p.4).

In Kristeva’s theory, one’s existence depends on constructing the abject subjects, and Tyler builds on this by arguing that states need the abject to not exist entirely outside, despite the fact that it is the claim of the states that have been trying

very hard to exclude the abject. In accordance with the concepts of abject and social abjection, nations consider themselves to be threatened communities that are always vulnerable to different “foreign” influences (Balibar, 1991 cited in Sharma, 2015, p.102), and in this equation, foreign is always defined as negative (Kristeva, 1988, p.95). Consequently, the fear of the other/abject generates the need for defending oneself against it, which leads the state to yield its bio-power (Foucault, 1976), for example, by using eugenic practices as in this case.

## 3 Methodological considerations and research design

### 3.1 Foucauldian genealogy and “eventalization”

In this thesis, the Foucauldian conceptualizations of genealogy and “eventalization” are adopted as the methodological approach in order to explore the discursive constructions of the “undesirable” and “unfit” women through the supposedly scientific arguments of Scandinavian eugenicists, as well as the non-discursive “correction” of these women’s bodies through the implementation of eugenic policies in the welfare state between the early 1930s and the mid-1970s.

Despite my initial attempts to design this project as a traditional comparative historical analysis of the compulsory sterilization of women in the Scandinavian countries during that period, a survey of numerous historical accounts on this topic altered my research questions, as well as my epistemological and methodological approach to the topic at hand. Unlike genealogies, comparative-historical analyses aim to investigate “‘big questions’—substantively important and large-scale outcomes,” and they “are centrally concerned with causal analysis, the examination of processes over time, and use of systematic and contextualized comparison” (Mahoney and Rueschemeyer, 2003 in Mahoney and Terrie, 2008, p.739). Moreover, the research objective in such studies is usually to formulate a complete explanation to the phenomenon, while genealogies neither claim a monopoly on the historical “truth” nor aim to give the “whole picture” (Dreyfus and Rabinow, 1983, p.120). Accordingly, after perusing various historians’ accounts on the Scandinavian eugenics, I came to the conclusion that it would be an impossible task to try to create a comprehensive view of history by retracing the past as continuous

development and searching for the historical “truth.” Instead, I decided to focus on how power is “exercised and sustained through the use of disciplinary discourses and through associated administrative routines” (Kearins and Hooper, 2002, p.736), in this specific context. This required seeking out “discontinuities where others found continuous development” (Dreyfus and Rabinow, 1983, p.106) and making an attempt at building, in Foucauldian terms (1984, p.88), an “effective” history of eugenic discourses and practices that were without a doubt one of the one of the “most acute manifestations” of gendered othering in Scandinavia.

This methodological and epistemological change in my approach was a byproduct of reading traditional histories and questioning how countries such as Denmark, Sweden, and Norway, which have long been perceived as beacons of equality and human rights, could have had a history of eugenicist policies and practices that many have compared to Nazi doctrines (Zaremba, 1997; Broberg and Roll-Hansen, 2005). Therefore, the reformulated research questions that inspired my approach and analysis stemmed from these profound contradictions in the history of the Nordic model of welfare state that sterilized thousands of their citizens—of which a great majority was women—and the current self-images of these countries based on gender equality (or simply, equality) as an integral component of each of their national identities—a component that is widely taken for granted (Borchorst, 2008, p.38). Thus, making a Foucauldian-inspired genealogy proved to be a more suitable methodological approach to seek answers to my questions, as genealogies undermine “the unquestioned legitimacy of the present by offering a re-creation of a different past. The rupture between the past and the present generates the space for critique” (Poster, 1986, p.209). Recreating a different past through genealogy corresponds to putting national historical discourses into question, which is one of the main goals of this thesis. In other words, genealogical analyses do not use history as a means to prove how “used not to make ourselves comfortable, but rather to disturb the taken-for-granted” (Kendall and Wickham, 1999, p.4). That is another aspect of this approach that sets it apart from traditional history writing, and that makes it a suitable methodological approach for my analysis because I do not intend to convey the notion of linear

progression, that is to say sticking to the chronological order to look for causal relations and the conviction that today is a consequence of the past and it is all “better” today because the practices of gendered othering that I will be delving into do not exist anymore. Instead, I aim to demonstrate that the present can and should be viewed critically by adopting a Foucauldian approach to history, which “serves a double function: it is a social critique aimed at dislodging the usual story, as well as a counter-history aimed at dislodging the usual method of telling the usual story” (Park, 2008, p.394)

In order to dissect the regimes of practices linked to gendered othering and the history of eugenics in Scandinavia, I will examine certain discursive formations that had “both prescriptive effects regarding what is to be done (effects of ‘jurisdiction’) and codifying effects regarding what is to be known (effects of ‘veridiction’)” (Foucault, 1978, p.225). This entails deciphering the mutually-generative operation of power and knowledge by studying the workings of certain regimes of truth, which denotes “the way in which knowledge circulates and functions, its relations to power” (Foucault, 1982, p.212). Continuing on this line, in this thesis, I will analyze the power/knowledge relations implicated in the normalization of eugenicist practices and the rationalization for eugenics to become a widely-accepted component of the Scandinavian welfare state model in the relatively recent past, by “eventalizing” these processes. “Eventalization,” a concept used by Foucault to describe his undertaking in his historical-genealogical work (Mahon, 1992, p.108), is defined as “a breach of self-evidence, [which] means making visible a singularity at places where there is a temptation to invoke a historical constant, an immediate anthropological trait, or an obviousness that imposes itself uniformly on all” (Foucault, 1978, p.226).

Hence, the singularity that I will be exploring in this thesis is the gendered othering that occurred through and within the aforementioned processes. Moreover, eventalization entails refusing the perception of certain historical processes as self-evident, which means in the context of this thesis that sterilization, institutionalization and segregation of women were not the obvious solutions to make sure that they do not decrease the quality of the “national stock.” Instead,



these were historically contingent practices that emerged and applied through a series of “connections, encounters, supports, blockages, plays of forces, strategies, and so on,” even though they were established by the power/knowledge relations as self-evident measures (Foucault, 1978, pp.226-227). In the introduction, it was mentioned that these practices are widely abhorred and condemned in the present day; however, this reaction is not a result of assessing eugenic practices through an absolute and timeless form of rationality. In the Foucauldian sense, these practices are not inherently less “rational” than the ones they replaced them because “‘practices’ don’t exist without a certain regime of rationality” (Foucault, 1980, pp.229-230).

### 3.2 Archival research and *dispositif*

Establishing which kind of materials to focus on in this research, as well as how to analyze the data obtained from these materials, has been a tricky journey because of the changes in my methodology; however, after adopting a genealogical approach, it became clear to me that the main purpose of my analysis was “not to concentrate on a repertoire, conversation analysis, or the operation of discourse in grammar, but to critically interrogate social relationships and social practices” (Fawcett, 2008, p.668). Nonetheless, this did not mean that the data could be randomly collected or arbitrarily analyzed.

In the introduction of his essay “Nietzsche, Genealogy, History,” Foucault states that genealogy “is gray, meticulous, and patiently documentary. It operates on a field of entangled and confused parchments, on documents that have been scratched over and recopied many times” (1984, p.76). Accordingly, I assumed the ambitious task of examining a plethora of historical texts, legislations, statistical data, and secondary sources, keeping in mind the scope and the limitations of this thesis. While collecting data for my analysis, I attempted to build a *dispositif*, a methodological concept that Foucault defines as “a thoroughly heterogeneous ensemble consisting of discourses, institutions, architectural forms, regulatory

decisions, laws, administrative measures, scientific statements, philosophical, moral and philanthropic propositions—in short, the said as much as the unsaid” (1980, p.194). This endeavor made it possible for me to isolate the power relations implicated in the historical singularity of gendered othering that was rationalized by the discursive and non-discursive elements of the *dispositif*.

First of these elements and one of the primary foci of my analysis is without a doubt the writings and utterings of certain scholars, psychiatrists, physicians and politicians who played a role in establishing and implementing eugenicist policies in the Scandinavian countries. Their attitudes towards hereditarianism and particularly towards women’s role in the society are central to my analysis because they played a major role in convincing different political actors that the racial hygiene was based on scientific findings in the early twentieth century. In order to establish whose discursive constructions of women’s role in racial-hygienist ambitions should be examined, I did a detailed inspection of the secondary literature; Broberg and Roll-Hansen’s (2005) collection of articles on the history of eugenics and the welfare state in Scandinavia was particularly helpful for this task. In order to limit the archival work, I tried to isolate the writings of these notable people about women and mental deficiencies, race or morality and looked for writings published between the early to mid-twentieth century, to get a glimpse of the eugenic discourses that shaped the laws and the practices. I also tried to locate documents written in or translated to English, though I had to read some texts in Swedish, Norwegian and Danish, and translate parts of those texts myself. Moreover, it should be noted that aside from being eugenicists, these names that I listed below represented completely different perspectives and approaches to the issues of heredity:

Among the influential Danish eugenicists who participated in the race hygiene debate and who are of interest to me, there are Søren Hansen (physician), Tage Kemp (genetics researcher), Wilhelm Johannsen (professor of genetics), Christian Keller (physician) and Hans Otto Wildenskov (physician), as well as Karl Kristian Steincke (politician). The Swedish eugenicists whose approaches that I examined are Herman Lundborg (physician), Gunnar Dahlberg (physician and

psychiatrist), Nils von Hofsten (zoologist), in addition to Alva Myrdal (sociologist and politician) and Gunnar Myrdal (economist). Lastly, the Norwegian eugenicists that I focused on were Jon Alfred Mjøen (pharmacist), Ragnar Vogt (psychiatrist), Johan Scharffenberg (psychiatrist) and Otto Lous Mohr (physician). Regrettably, I did not have enough space to include every single one these eugenicists' arguments in their entirety, though I tried to convey ones that are the most relevant to the context.

Another type of textual content that I used to in my research was legislative documents including, but not limited to the sterilization laws enacted in Denmark in 1929 and 1935, Norway in 1934, and Sweden in 1934 and 1941. These laws revealed a lot in terms of the impacts of what is left unsaid and how it is an element of the discourse and the practices that constitute the *dispositif*. For instance, the word eugenic is not used in any of the legislation mentioned above. In fact, the laws were relatively vague and open to interpretation in terms of the conditions under which people could be sterilized. This presumably resulted in physicians and psychiatrists labeling certain individuals as “feeble-minded” or “defective” for the reasons that they thought those people should not be allowed to have children for reasons such as immoral mode of living, vagrancy, criminal tendencies or dependency on welfare money, which implies a myriad of prejudices, as well as an arbitrary application of sterilization.

Moreover, the gendered implementation of eugenic policies is easily discernable from the statistical data on the sterilizations, which was evidently one of the points of departure for this thesis. Thus, my analysis is certainly informed by the statistics on Scandinavian sterilization practices to a certain degree, with a number of reservations. First of all, as Bryman argues, the statistical data obtained from state institutions, used in a multitude of previous studies on the topic of eugenic sterilizations, should be approached with caution as there is always the risk that numerous cases might have gone unrecorded (2012, pp.320-322). Moreover, even though I am referring to quantitative data, it is important to note that the collection and the construction of statistics do not happen outside the discourse. For instance, it is possible to observe that the definitions of categories of sterilization,

eugenic, social and medical, vary significantly because they were never defined very clearly in the legislation. On the other hand, a sterilization operation that was performed for social indications, meaning for the benefit of the societal order, could have had “additional eugenic benefits” (Hansen, 2005, pp.14-15) not directly mentioned in the records, which puts the reliability of the statistical data in question, which fortunately had a small impact on my analysis of how Nordic eugenicist practices were gendered as it was an entirely qualitative inquiry.

The last but not least, one other type of source that helped me build the *dispositif* was the secondary literature on the practices of eugenics writing by contemporary historians and scholars. While there were many things to be criticized in their traditional historical research after adopting a Foucauldian approach to history, contextualization of the genealogy was necessary both for the planning and the writing processes of this thesis. While genealogical method is closely connected to archival research, “on practical grounds, relevant external information should be consulted where it sheds additional light on the subject at hand” (Kearins and Hooper, 2002, p.741), particularly while trying to locate certain articles or books about Denmark and Norway that were not yet digitized, and that I did not have access to. Moreover, the use of secondary literature was an essential stage of data collection that helped me determine the focus of this thesis, as well as the gaps in that very literature about the eugenicist discourses and practices in Scandinavia. The historical overviews written by Koch (2000; 2006) and Hansen (2005) about Denmark, Broberg, and Tydén (2005) about Sweden, Roll-Hansen (2005b) about Norway helped me identify general themes about the phenomenon. Additionally, Runcis’ (1998) study on the gendered aspects of the Swedish sterilization practices, Haave’s (2000) research about the sterilization of Roma people in Norway, and Kirkebæk’s (2005a; 2005b) work on the institutionalization of “feeble-minded” and “dissolute” women in Denmark provided me with observations and examples that are very important to the analysis. One final note about using an extensive selection of types of second literature is that I will also be analyzing the meta-discourse. While it complicates the analysis, doing a genealogy, and looking at traditional history-writing critically made it an inevitable part of the analysis.

### 3.3 Reflexivity: remarks and limitations

In order to locate myself in this research, I first need to address the question of why I chose to look at Scandinavia as a non-Scandinavian person. I believe that even though it has its disadvantages like not having the “inside information” on some cultural aspects of the issue, I was in a position where I could look at the issue from a different perspective—that is to say the perspective of an outsider living in Scandinavia. Before I came here to study, I had no prior knowledge of the history of eugenics, the sterilization or the segregation discourses in Scandinavia. However, in the last two years, the more I learned about the gender aspects of the Scandinavian welfare state model, the more I questioned the inconsistencies between the present discourses of equality and the erasure of the history of eugenics. Moreover, I decided to focus on the Scandinavian countries, instead of the Nordic region as a whole because of the homogeneity discourses in these three countries, which did not exist in Finland due to the very visible Swedish minority.

There was also an important practical reason to choose to do research concerning Scandinavia, one of which is without a doubt that the sources were very easily accessible through the library. Although, there was only one issue, which was the language barrier. As I have been studying Swedish, my knowledge of Swedish is best compared to the other Scandinavian languages of which I have a global understanding—leaving Finland out of the scope of this thesis was also related to my inability to read Finnish. It should also be noted here that unless otherwise stated, the translations are mine. Therefore, in the end, I believe that my language skills proved to be sufficient when I needed to consult important literature written in the Scandinavian languages, which was pivotal for the next part—the analysis.

## 4 Gendered othering in eugenicist discourses and practices

In this section, I will discuss the gendered implementation of the Scandinavian eugenic policies and the preponderant discourses that were used to legitimize them from the early to mid-twentieth century. As mentioned above, different categories of women were affected by these practices in different ways. While the reasoning behind these varied, there were some fundamental arguments that were brought forward to justify the segregation, the institutionalization and/or the sterilization of the “undesirable” and “unfit” elements of the society. In order to avoid repetition, the first part of this section will be a discussion of the more generic arguments and the general workings of the eugenicist discourses and practices, which will help contextualize how it was justified to implement eugenicist policies on specific categories of women that I will focus on in the second part.

### 4.1 An overview of the recurring issues in Scandinavian eugenics

Even though there is a common conception that racial hygienic practices were associated with the Nazi ideology—which might be true only in terms of the magnitude and the extent of their implementation—racial hygiene and eugenic policies pre-date the atrocities committed by that regime by almost half a century. Through myriad studies on the history of racial hygiene, it has been established that “eugenics attained the status of a global ideology across political lines of demarcation in the first decades of the twentieth century and that sterilization [...] was practiced in many countries prior to Hitler's assumption” (Haave, 2007, p.46).

The Scandinavian countries constituted but one region where this ideology gained popularity. This subsection aims to contextualize the general conditions in which the gendered construction of the “undesirable” elements took place, and how the subsequent discriminatory implementation of eugenic policies was rationalized through problematic arguments in Scandinavia.

Hence, in the first part of this subsection, I will focus on the more “scientific” arguments behind the discourses (and later the practices) of social and racial hygiene, which were predominantly based on the ideas of moral and physical degeneration of the population. Next, I will examine how eugenic discourses and practices were deeply connected to the emergence and the rise of the welfare state in Scandinavia, and question which aspects of that welfare state model rationalized the gendered implementation of eugenic policies. Then, I will explore the seemingly obvious relationship between racial hygiene and racism in Scandinavia, after the Second World War. Lastly, I will discuss a problematic aspect of the implementation of eugenic policies, which is the question of consent and coercion.

#### 4.1.1 Discourses of physical-moral degeneration and claims to scientificity

One of the most prevalent discourses that were used to justify racial hygienic approaches to the population policies and the eugenic laws that were enacted as a result of those was certainly the idea that society was under the imminent threat of physical and moral degeneration. This was a concept that resonated with people from almost every class and category, and it was a compelling argument that the antidote to it was “hygiene” (Broberg and Tydén, 2005, p.79)—both in the physical sense and in the social and racial hygienic senses. Therefore, with the impact of the discourse of degeneration, ideals of racial hygiene started to become very attractive in the region. During the pre-First World War days of Scandinavian eugenics, the appeal of the degeneration discourse was also connected to the fact that the Lamarckian understanding of heredity, which denotes the idea that the characteristics acquired during one’s lifetime could be passed on to one’s offspring,

was very commonly used by early eugenicists in connection to the moral judgments in their writing about problems like alcoholism and “loose sexuality” (Broberg and Tydén, 2005, pp.78-79). Furthermore, from early on, a distinction was made between different eugenic practices: positive and negative eugenics. The purpose of positive eugenics was to improve the genetic quality of the nation by promoting the reproduction of the people who supposedly had “superior” genes. Negative eugenics, on the other hand, indicated that the transmission of the genetic material of “low quality” by limiting the procreation of the individuals who carried such genes. The disadvantageous genetic traits that were the target of negative eugenics included severe hereditary illnesses, as well as physical and mental disabilities (Roll-Hansen, 1999, p.200).

Along with such ideas on the causes and solutions, the degeneration discourse was thusly followed by a surge in the popularity of eugenics in Scandinavia. While that popularity lasted much longer than the academic interest in the former, the fear of degeneration played a very important role in the increasing academic interest genetics research during the the early-twentieth century (Roll-Hansen, 1989). Among many Scandinavian eugenicists, the discourse of degeneration was echoed in the ideas of Swedish physician and eugenicist Herman Lundborg who was a race biologist and one of the earlier representatives of Swedish and Scandinavian eugenics. His stance on degeneration was very pessimistic, which led him to warn people of the dangers that await nations such as Sweden that had a declining birthrate: “A nation, which does not increase in numbers, must degenerate. Within my knowledge no historical example is to be found of a people, showing a larger percentage of deaths than births yearly, which has been able to recover. It is going to meet its doom” (1922, pp.537-538). Another influential eugenicist from the same generation, the Norwegian pharmacist Jon Alfred Mjøen harbored similar opinions about degeneration to Lundborg’s: in the second edition of his book about racial hygiene, which was published in the late 1930s when eugenicists were using this term much less often, degeneration is defined as a misunderstood term that can denote either individual or genetic degeneration, although individual degeneration could often be an indicator of poor genetic material (1938, p.296).



This is not to say that every eugenicist shared the same ideas on the issue as there were many eugenicists who criticized such an understanding of genetics. One of these critics was Danish professor of genetics Wilhelm Johannsen who made important contributions to the field of genetics such as the concepts of phenotype and genotype. Unlike a majority of his contemporaries, Johannsen stressed that eugenic ideas that were being circulated started to develop without enough scientific proof about heredity, thusly spreading subjective concepts like degeneration (Johannsen, 1917 cited in Hansen, 2005, p.23). The younger generation of eugenicists, such as Norwegian physician Otto Lous Mohr (Roll-Hansen, 2005b) and Swedish geneticist Gunnar Dahlberg (Broberg and Tydén, 2005), were also very critical of the baseless claims of degeneration and the unscientific approaches in the tradition of race biology.

With regards to how the positions of these two groups of eugenicists differed from each other's, Kevles' (1985) categorization of eugenic approaches is used often by historians such as Broberg and Roll-Hansen (2005) who wrote about Scandinavian eugenics: "mainline" and "reform" eugenics. While mainline eugenics corresponded to the early generation of eugenicists who put a strong emphasis on the hereditarianism, racial biology and the hierarchy of races, reform eugenics that emerged in the 1930s denoted a comparatively modern understanding of eugenics based on a more "scientific" theory of genetics.

During the inter-war period, "reform" eugenicists continued their research in genetics, and the interest in eugenics gradually grew both with the popular support among politicians and with the financial aid offered by organizations like Carnegie Institute of Washington and Rockefeller Foundation. Carnegie Institute funded an important portion of Swedish economist and eugenicist Gunnar Myrdal's research (Levine, 2017, p.17); meanwhile, the Danish Institute for Genetics and Eugenics was established with the monetary aid of the Rockefeller Foundation (Koch, 2002, p.169), which also supported the Institute of Genetics founded in Norway (Roll-Hansen, 2005b, pp.179-180). By the time the sterilization laws were enacted, eugenics had become an established field in Scandinavia. Despite the fact that some of the most prominent eugenicists in the region had completely different ideas as to

how to approach eugenics itself, they all supported the legislation of eugenic policies in their own countries and believed that they would be effective in terms of improving the overall quality of the population.

As for the public perception of eugenics, with the transition from the supremacy of Lutheran Christian values to the dominance of more secular and modernized culture, physicians and scientists had replaced ministers as the central figures of the community and the expert on social questions (Broberg and Tydén, 2005, p.79). This shift from religious values to “scientific” ones meant that scientists had superseded clergymen in the former power relations between the church and the people; in other words, “references to science [became] an important factor in the transformation of society and as an agent for moral improvement” (Broberg and Tydén, 2005, p.87). Thus, the gradual but widespread acceptance of eugenic policies and practices among diverse social and political groups, as well as scientists, was connected to the “scientific” arguments that justified them.

In the nexus of power/knowledge, the allegedly scientific discourses were now in a privileged position of power, which gave them the authority to create the “truth” with regard to morality, therefore taking the first steps into rationalizing the systematic sterilization, institutionalization and segregation practices in the near future. Furthermore, the discourses of degeneration and eugenics constitute a very remarkable example of the mobilization of the discourse of hypervulnerability (Butler, 2016); that is to say, the rationalization of the need to further victimize people who were already in vulnerable positions in the society such as the mentally disabled, while claiming to be the one threatened by their existence and the prospect of their reproduction.

#### 4.1.2 Simultaneous rise of the welfare state and eugenics in Scandinavia

In Scandinavia, the early 1930s mark the convergence of the eugenic discourses and the welfare state that was emerging. Eugenic discourses and practices had

existed in various regions in the world at least since the beginning of the twentieth century; for instance, certain U.S. states had already passed laws for sterilization of the “feeble-minded” or racialized individuals as early as 1907 (Kühl, 1997). By 1930s, the race-hygienic ideals that gained popularity in the Scandinavian countries at the turn of the century were becoming a part of the official ideology of the budding welfare states. In other words, the development of eugenics in Scandinavia was “deeply linked to the process of modernization and the growth of efficient welfare states” (Leon, 2013, p.189). With the “scientific” justifications of the eugenic discourses that were discussed in the previous section, the Danish, Norwegian and Swedish eugenicists had started to look for solutions to particular problems among the population that reduced the efficiency of the welfare state, such as alcoholism and vagrancy. (Leon, 2013, p.190).

In addition to the degeneration and racial hygiene, the idea of individual’s usefulness to the society and contribution to the national economy (or lack thereof) was used to rally support around the transformation of eugenic discourses into practices. Gisela Bock who studied the increase in the appeal of eugenics in the pre-Nazi Germany, as well as the rest of Europe and North America, states that the reasons behind that appeal were urgent social problems including “shiftlessness, ignorance, and laziness in the work force; deviant sexual behavior involving prostitution and illegitimate births; the increasing number of ill and insane; poverty; and the rising costs of social services” (1983, p.404). Therefore, aside from being backed by “scientific” arguments, what made eugenic “tampering” a plausible solution to the lingering problem of moral and physical degeneration was the “national-productivist” approach (Spektorowski and Ireni-Saban, 2013), which was based “on a polarity between ‘progress’ and ‘degeneration,’ its criteria of inferiority had at their center concepts of ‘value’ and ‘valuelessness’ [...] that were related to the social or racial ‘body’ and its productivity” (Bock, 1983, p.405).

While there were numerous important scientific personages such as the ones discussed in the previous section that played a vital role in convincing the people that eugenics could be a very helpful tool to improve the quality of the “national stock,” the establishment of eugenic discourses in politics happened with the

support of political figures such as Danish politician K.K. Steincke and Swedish scholar and politicians Alva and Gunnar Myrdal who helped shape the eugenic practices in connection with the welfare state. For instance, Steincke did not think of eugenics as an alternative for social policy, but part of social policy. Concerning the state's treatment of the "ill-adapted," the disabled, the "degenerate," he believed that "they had to be fed, clothed and cared for as well as possible on condition that they did not reproduce" (Drouard, 1999, p.264).

Alva and Gunnar Myrdal, on the other hand, were the quintessential social engineer and social reformers who amalgamated the ideals of social care and welfare state with the implementation of eugenic policies. In their book *Kris i befolkningsfrågan* (The Crisis in the Population Question), the Myrdals (1935) focus on the issues related to the demographic change and family, arguing that there was an urgent need for social and economic reforms. They are admittedly suspicious of some eugenicist arguments, including classist and racial-hygienic ones (Wessel, 2018, p.215); however, they argue for the sterilization of the mentally deficient who, unlike what most eugenicists claimed, could come from any class or race, which means that they believed in the functionality of eugenics in addressing individual cases of genetic/social deficiencies (Broberg and Tydén, 2005, p.136). The Myrdals also talk about the necessity of improving the situation of women in their book while focusing on the importance of family, which Alva Myrdal who identified as a feminist tried to balance in her later work (1938). Despite stressing that they were not racist, the Myrdals were opposed to immigration as a solution to the population problem because welcoming an influx of immigrants, according to them, would lower social standards (1935, pp.106-111).

Analyzing the way eugenic discourses was mobilized by the Scandinavian welfare state, Spektorowski and Ireni-Sabah (2013) describe what happened in the 1930s as the time of transition from "race hygiene" to "national-productivist (social) hygiene," which they claim to be a "policy convergence" (2013, p.50). Moreover, the scholars argue that instead of racism, the idea of welfarist productivism started to define the margins of the society (p.51). Nevertheless, as can be observed in the attitude of Myrdals towards immigration, the ideal of nation-

state persisted. Albeit under the guise of productivism, eugenic policies still functioned by using the same practices, sterilization, and segregation, in the nationalist-productivist system: “Welfare nationalism drives penal nationalism, in which perceived outsiders, non-members, and especially noncitizens are subject to increased controls in the name of national interests, including the preservation of national identity and social security” (Barker, 2017, p.134)

There are a few remarks that can be made about the changes in eugenicist discourses and practices with the emergence of the welfare state model. First of all, in terms of the exercise of biopower, the fact that eugenic practices were picked up and openly supported by social democrats in the Scandinavian welfare states reveals their approach to human body and the limits of the state intervention because they openly put what they perceived to be the interests of the social body above that of individual bodies. Additionally, by making judgments on who is useful and who is not, they deny the people who are not productive by their standards, and thus valuable to the welfare state, the agency and the control over their body (Butler, 2009).

### 4.1.3 Relationship between racial hygiene, eugenics, and racism

Before discussing the intersection of gender and race or its significance for eugenic discourse and practices in the following sections of this thesis, there is an important question that must be addressed: Is it possible for eugenics thinking not to be racist? The claim of the majority of the reform eugenicists in Scandinavia after even before the end of the Second World War was that their conceptualization of eugenics was not racist (Broberg and Roll-Hansen, 2005).

In addition to that, numerous contemporary historians who wrote about the issue also state that “reform” eugenicists and social reformers such as Steincke or the Myrdals were not racist, like the “mainline” eugenicists. One of their arguments behind that is that after the war, and the following transnational condemnation of

the Nazi regime for their horrible atrocities ranging from compulsory sterilization to genocide, “some of the sharpest and clearest criticisms of Nazi population policies were formulated by people that were also responsible for sterilization programmes and played a key role in Scandinavian social democracy” (Roll-Hansen, 1999, p.200). However, by all accounts, it could be argued that this was the natural strategy for the Scandinavian eugenicists to distance themselves, as well as their national legislation and practices, as much as possible from the Nazis, particularly because eugenicist practices continued to be implemented in their own countries.

With regard to the question of whether the implementation of racial hygienic principles in Scandinavia was racist or not, it should firstly be noted that the composition of the population of Denmark differed vastly from Norway and Sweden. While all of these three countries were relatively homogenous in terms of the racial and ethnic composition of their societies, there was a considerable number of Roma and Sami people both in Norway and Sweden, whereas Denmark had a small Roma population. According to Danish historian Lene Koch, the politicians had fairly liberal attitudes toward the Roma, which proves that the use of eugenics in Denmark was not racist (Koch, 2000, pp.22-23).

However, Koch also writes that the Danish Institute of Hereditary Biology and Eugenics created a register of Roma people in Denmark; then, in 1943, they published a study about Roma that requested by the municipality of Copenhagen, in which they “speculated whether the special problems of the gypsies were hereditary” (Koch, 2002, p.170). Furthermore, in this book, it is recommended that instead of “drastic interference,” namely sterilization or segregation, the authorities should attempt to integrate them into the Danish society, and eventually, in a few generations “the last gypsy (...) will have disappeared from the highways of Denmark” (Koch, 2002, p.171). Therefore, it is possible to argue that Koch’s first argument about liberal attitudes is not supported by these discourses and practices that involved Roma people because both the register and the book exemplify the historically discriminatory treatment of minorities, sanctioned by state racism (Foucault, 1997). The reluctance to call eugenicists or eugenics politics “racist,” as

in this case begs the question of what counts as racism and if the criterion for being a racist is being a staunch supporter of the Nazi regime.

#### 4.1.4 Question of coercion: voluntary persuasion or forced consent?

Danish, Norwegian and Swedish eugenicists widely criticized The Nazi laws that passed in 1933 for their compulsory application; correspondingly, the Scandinavian laws stated that the sterilization operation should be performed on a voluntary basis as a principle (Broberg and Roll-Hansen, 2005, xii). Considering the emphasis on this principle and the denunciation of the Nazi sterilization practices, it is hardly surprising that one of the most common themes in the historical accounts on the sterilization of the “unfit” in Scandinavia is whether the people who were sterilized gave their consent before the operation or they were coerced into it. Nonetheless, most of these accounts have conflicting information on the nature of the sterilizations with regards to consent for multiple reasons.

First of all, it should be noted that the only legal exception to the general principle of obtaining consent was the legally incompetent individuals who could not give their consent; they could, therefore, have a guardian to consent to their sterilization (or their institutionalization) or the operation would be performed on them without their consent for the good of the society (Hansen, 2005; Broberg and Tydén, 2005; Roll-Hansen, 2005b). However, for the people who were not deemed to be feeble-minded, it is argued that the individual gave their consent in many cases despite the fact that the conditions under which the consent was given are not always defined very clearly. Officially, a great majority of the sterilized consented to the operation and signed the sterilization forms; however, this, in itself, does not prove that they did it voluntarily. For instance, consenting to be sterilized was often a condition for a person to be released from the institute that they were placed for whatever reason, in all three of the Scandinavian countries (Hansen, 2005, p.38; Runcis, 1998, p.368; Haave, 2007, p.53). Furthermore, there are factors indicating

that these institutes might have pressured people into getting sterilized because it would be cheaper than housing them (Roll-Hansen; 2005b, p.154).

Another common situation in which patients officially consented to sterilization was the case of women who wanted to get an abortion and had to agree to be sterilized as a condition for that. The idea of liberalization and making abortion accessible induced the fear that it would reduce the declining birth rates even more. Therefore, women who were thought to have desirable genetic makeup and expected to have children did not have access to abortion. Meanwhile economically dependent, lower-class women had access to it, as long as they consented to sterilization, as well (Giæver, 2006, p.24). As in such cases, consent was often obtained on paper; however, it does not mean that the operation was not coerced or compulsory in practice because of the nuanced situations that these women were in. This is the reason why the historical studies on this issue tend to have completely different accounts on the question of consent.

Nevertheless, another facet of the complex issue of consent is that the locus of power should not be located merely in policies, laws or other official documents (Sokolova, 2012, p.58). It is striking that, by extension, that very power manifested in the agency of social workers, teachers, pastors or family members who reported the cases of “feble-mindedness” or “immorality,” and in the agency of physicians and psychiatrists who were in a unique position of power when deciding if a certain individual was supposed to be sterilized or institutionalized. Runcis argues that most doctors were free to handle the sterilization applications however they liked (1998, p.360), which means that they could easily manipulate patients according to their own prejudices. However, this does not mean that the exercise of that power only had to do with these agents—instead, agential injustice should be considered as an extension of structural injustice as agents are, explicitly or implicitly, authorized (Page, 2019, p.76).



## 4.2 Constructing the “inferior” and the “unfit” women

In this subsection, I will delve into the construction of the “unfit” woman through eugenic discourses and practices. The impact of the race hygiene discourse that was dominant from the end of the nineteenth century to almost mid-twentieth century has had a substantial influence on women’s position in the society “since women have been hailed as ‘mothers of the race,’ or, in stark contrast, vilified, as the ones guilty of ‘racial degeneration’” (Bock, 1983, p.401). Accordingly, I will first lay out the foundation for discussing the construction of the “unfit” by examining the other side of the coin, which means the idealized duty of motherhood and what it meant to be “fit” to reproduce as per the eugenicist doctrines. The reasoning for this is that the definitions of the “fit” and the “unfit” are constructed through binary opposition, but they are also “interdependent—that is, they derive their meaning from a particularly established contrast rather than from some inherent or pure antithesis” (Scott, 1988, p.37). Accordingly, in the rest of the section, I will try to deconstruct the different categories of “gendered others” of the society and the justification of the eugenicist measures taken against their reproduction.

### 4.2.1 Sacredness of motherhood and “fitness” to raise children

For nation-states, motherhood has constituted a very useful instrument used in the attempts to subordinate women since their role “as mothers served as a smokescreen to reinforce comfortable, ages-old ideas of who and what a woman is and what she can and cannot do” (Hassenstab, 2014, 149). Motherhood has thus been discursively constructed as a sacred duty and the principal way in which women were allowed to serve to their nation (Yuval-Davis, 1997), which can be observed in the prevailing discourses on family and women in the early Scandinavian eugenicists’ arguments. For the “right” type of women, it was a responsibility of paramount importance to procreate and strengthen the national stock. Moreover,

when it came to scientific experts, researchers and prominent political figures' opinions and beliefs in this matter, it was often revealed that they did not or could not reconcile their ideals of progress, modernization and the allegedly scientific discourses of eugenics with certain aspects and objectives of the contemporaneous women's rights movements.

The first Norwegian professor of psychiatry, Ragnar Vogt, who was among the most prominent eugenicists in Norway that influenced the enactment of the sterilization legislation in his country, had a relatively vigilant approach to eugenic practices as he acknowledged the lack of scientific data proving the hereditary nature of most physical and mental ailments (Haave, 2000; Roll-Hansen, 2005b). Nevertheless, his approach to women's role in society reflects a much less progressive vision. In his book *Arvelighetslære og racehygiene* (Heredity and Racial Hygiene), Vogt argues that married women had a task of utmost importance, which was to submit to men and focus on rearing children for the sake of the institution of family, but not that of men (1914, pp.123-124). Moreover, Vogt maintains that "with all her erotic nature, a woman desires to be dependent on a man. The man she loves must support her, then she would gladly follow him," yet continues by expressing that "she—rightly—does not want to experience any other type of 'submissiveness' than that required for family life. In all other fields, men's and women's right can and should be equal" (1914, p.124). While this is admittedly from the earlier writings of Vogt, his anti-feminist opinions seem to have persisted throughout the years, as he remained critical towards women's emancipation (Roll-Hansen, 2005b, p.162).

Similar ideas to Vogt's were present in the writings of another Norwegian eugenicist, Jon Alfred Mjøen. Nevertheless, unlike Vogt, Mjøen was repeatedly criticized by other Norwegian eugenicists for not basing his arguments on sufficient scientific data, even though he was internationally recognized as a representative of Northern European eugenics (Roll-Hansen, 2007, 68). In his book *Racehygiene*, which was published in 1914, Mjøen criticizes women who did not want to have children for selling their morals and being seduced by upper-class snobbery (pp.144-145). Taking inspiration from Herbert Spencer, the social Darwinist who

coined the term “survival of the fittest,” Mjøen goes on to argue that reproduction was a moral duty and that motherhood represented the ultimate altruism, adding that women who deny that would face the biblical punishment: every tree that does not bear good fruit is cut down and thrown into the fire (1914, p.212). In the extensively revised version of this book, released in 1938, Mjøen counts women’s emancipation among the threats that the social hygienic progress faced (1938, p.16). Furthermore, Mjøen stresses the need to educate women to make them fit for their true calling, the protector of her home, and children (1938, p.264).

Comparably, among the earlier generation of eugenicists, there was a tendency to idealize motherhood and family, which was expressed alongside the fear of declining birthrates. For instance, prominent Danish physician and eugenicist Søren Hansen consistently wrote about this issue; his argument was that it was the most educated and intelligent individuals of the society who had fewer and fewer children and that “even a small decrease in the population might constitute a large decrease in its quality,” which is why he was opposed to the use of any kind of contraception and thought that their use should be legally restricted (1915, cited in Hansen, 2005, p.21).

Moreover, Swedish physician Herman Lundborg was also among the early eugenicists who had similar opinions about motherhood. He argued that it was dangerous for Swedish mothers and grandmothers to do what the French did and only have one or two children because then “the larger number of the bearers of civilisation in this country would never have seen the light of day. They would have been smothered already in their mothers’ wombs” (1922, p.538). Lundborg maintained that not choosing to have many children was making a virtue of comfort and egoism in the same article. Years later, in another article on race-biological perspectives, Lundborg blamed women for shunning motherhood and choosing the “empty cradle” policy (1931, p.400).

In the light of these eugenicists’ approach to women’s role and responsibilities in the race-hygienic context, it could be claimed that, for them, motherhood was a type of “forced labor” that would produce the next generations

of the “national stock” in the case of the “superior” women. With the emphasis on this important purpose that they were expected serve, women’s behavior was being disciplined through the notions of feminine duty and respectability, which were branded as a nationalist characteristic for women who were thought to represent national honor and homogeneity (Enloe, 1989, p.48; McClintock, 1995). Therefore, the seemingly contradictory decisions of the welfare state such as prohibiting abortion and legalizing sterilization became complementary to each other (Bock, 1983, pp.409-410). Such policies simply targeted different groups of women and aimed at controlling their bodies in different ways: “Interlinked with narratives of origin is always already the question of reproduction and of controlling reproduction – and thereby the question of female representation and the control of female bodies” (Blaagaard, 2009, p.52).

The concept of “forced labor” also point at the investment and the intervention of the welfare state in women’s bodies which implies that “that motherhood, the capacity of women to bring forth children, is changed from a creative process, in which woman cooperated with her body as an active human being, to an industrial production process” (Mies, 1987, p.332). Therefore, in addition to the racial hygienic implications of “right kind” of women having more children, the welfare state started to benefit from the eugenics discourses and practices, that is to say, positive eugenics in this context, and there was more supportive approach toward these women. In other words, with “this new formulation of the problem, women certainly came to the centre of the political stage: as producers of children (who were in short supply in the nation) [and] as foster mothers of new human beings in line with a modern, socially developed and technically adjusted society” (Hirdman, 1998, p.39). Consequently, eugenic discourses and practices sought to keep the so-called “superior” women at home, doing unwaged housework, which was the way they were supposed to be productive for the nation.

However, it should also be noted that women were also implicated in the popularity of these discourses and practices as early Scandinavian feminists contributed to eugenics (Wessel, 2018). For instance, Alva Myrdal was also one of

the representatives of eugenicist feminism in the Scandinavian countries where “women's organizations played an active and vocal role in the public support of sterilization laws” (Dikötter, 1998, p.470). The Scandinavian case was in its essence akin to the well-known case of the problematic relationship between eugenic ideals and women’s movements, which is the Margaret Sanger-led birth control movement in the United States, where the birth control movement contributed to the racist rhetoric of the eugenic debates from which racialized women suffered, as the movement started to advocate the “more children from the fit, less from the unfit” approach (Davis, 1983, pp.213-214). North American abortion rights movement “had been known to advocate involuntary sterilization—a racist form of mass ‘birth control’” (Davis, 1983), which meant that Sanger was in favor of taking the possibility of getting pregnant from racialized women for eugenic purposes, which was not in line with the principles of the movement that was initially about voluntary motherhood.

Moreover, Scandinavian feminist/eugenicists also played a part in the construction of the “other” whose fertility was a threat through the eugenic ideals of hygiene and purity (Wessel, 2018, p.258), even though women did not have access to the same rights as men as McClintock argued (1993). The paradox here was that their position on eugenics did not only strengthen the idea of the urgency to control the reproductivity of the “other”—it also helped justify the “forced labor” of the “fit” women who were expected to stay in the private sphere and rear children:

“The rise of this policy—sexist in its demand for state control of procreation, and racist in its differential treatment of ‘superior’ and ‘inferior’ procreation—can therefore be seen as a dual attack against the ‘birth-strike’ of the desirable element in the population and against the social maladjustment of those who had not enjoyed the modern training in orderliness and the work ethic, the ‘natural’ task of ‘valuable’ mothers” (Bock, 1983, p.406).

Taking all these into consideration, in the next sections, I will dissect the constructions of the “unfit” and “undesirable” women who was considered to be on the other end of the binary, the first of which was discussed above.

## 4.2.2 Mentally defective and the “feeble-minded”

While the fear of physical and moral degeneration became widespread in the Scandinavian societies during the first decades of the twentieth century, this fear was epitomized particularly in the attitudes towards the people with mental illnesses or disabilities, raising questions about what to do about them. The individuals diagnosed as mentally defective and “feeble-minded” were viewed as a threat to the morality and the integrity of the society, which had to be protected against that risk using eugenic measures, since the prospect of these people reproducing would further lower the quality of the “national stock” and be an economic burden on the rest of the society. Moreover, the labels “mentally deficient” or “feeble-minded” were used almost as an umbrella category for people whose behavior violated the norm in some fashion, meaning that “sexually loose” behavior, vagrancy and anti-social behavior were often associated with mental deficiency.

While the statistics on sterilization on the grounds of “feeble-mindedness” from Denmark, Norway, and Sweden vary in terms of the classification of the reason for the operation, as well as the definition of these categories (Roll-Hansen, 2005a, p.263), they reveal nonetheless that the great majority of these sterilizations were performed on people who were categorized as mentally deficient; and among these people, a great majority were women. Considering that Dahlberg even claims in an article that feeble-mindedness is a little more common among men than among women (1951, p.23), it was even more curious that a much higher number of women were sterilized for being feeble-minded. However, it should not be surprising that more women would be categorized as mentally ill or deficient because of how women and womanhood were perceived at the time: “In debates over women’s proper place and role, the concept of disability was pervasive. One of the central rhetorical tactics of opponents of women’s equality, for example, was to point to the physical, intellectual, and psychological flaws of women, their frailty, irrationality, and emotional excesses” (Baynton, 2016, p.82).

It should be noted that, in a sense, forced sterilization or institutionalization of the mentally deficient was the least controversial side of the eugenic discourses

and practices because virtually every single party involved in the policy-making and legislation processes believed in the need to relieve the society of its burden of *non compos mentis*. Even the religious figures who participated in the debates thought that it would be merciful to spare those poor souls the suffering (Roll-Hansen, 2005b). Additionally, institutionalization or sterilization of these people were for the most part based on the claims that their condition was hereditary, which was supported by the arguments of numerous eugenicist scientists and physicians despite the fact that some of them admitted that there was not sufficient data that showed if that was truly the case (Roll-Hansen, 2007). Even though they were very skeptical of the hereditarian claims of eugenicists, policy makers Alva and Gunnar Myrdal defended the significance of the society over that of the individual, by promoting the “fairly merciless sterilization” of the feeble-minded for social and economic reasons (1935, p.223).

In this line of thought, sterilization of the mentally deficient had both eugenic and social implications, but there was also a not-so-hidden case of paternalism in Scandinavian countries’ rationalization to sue that practice against the “feeble-minded,” which was the argument that it would not only be better for the nation, but also for the sterilized individual who could not raise a child, thusly rationalizing the treatment of the “feeble-minded” by saying that eugenic practices were used for their own good, as well. This paternalism, however, was not exclusive to the Scandinavians. For instance, in the United States, when a certain woman was identified as mentally deficient and a case was made for her sterilization, it was not unusual for it to argue “that sterilization is in the best interest of the affected person. Menstrual periods and pregnancy represent unnecessary burdens on sexually active retarded women: By sterilizing them, society frees them from these emotional and physical burdens” (Blank, 1984, p.13).

### 4.2.3 Moral threat of “dissolute” women

Biologization of moral degeneration was epitomized in a specific group of women who were targeted by eugenic policies and were often categorized as mentally

deficient, mentally ill or feeble-minded: the women whose sexual behavior did not fit the norm and threatened the moral integrity of the society as a consequence. The roles and the space designated for women within the society were already very limited, as was the range of “acceptable” behavior expected from women compared to men. Also, unlike men, women’s sexuality could easily become visible as they had the risk of becoming pregnant out of wedlock. Therefore, the moral degeneration discourse related to the eugenic ideals applied to women in a substantially different way because being sexually active was without a doubt an unacceptable transgression for women, but not for men at the time.

In this context, one of the most prominent examples of the biologization of certain traits and characteristics associated with certain groups, in addition to the manifestation of the moralist approaches in “scientific” studies in Scandinavia, is Danish professor of genetics and eugenicist Tage Kemp’s monograph entitled *Prostitution. An investigation of its causes, especially with regard to hereditary factors*, published in 1936. The study comprises of medico-psychiatric examination of over five hundred women who lived an “immoral” life and were prostitutes, and it aims to determine the causes of prostitution through an investigation of the women’s inherited traits. In the preface, Kemp (1936) maintains that “prostitution is regarded from a purely objective standpoint and is considered as a biological phenomenon, neither moral nor political prejudice being harboured” in the book.

There are many instances in Kemp’s work that he claims to have a “purely objective standpoint” questionable. For instance, fifty out of five hundred thirty cases are included in the book, and under each of those cases there is a section named “objective examination” that Kemp describes as a general impression of the woman’s “appearance, manner, clothing and general frame of mind” in the methodology section (1936, p.43). Some of the examples to these objective examinations are simple like “appearance and manner nice and respectable” (p.162); although, there are also numerous examples like the following: “[...] greatly dressed up and her whole appearance is indicative of her dissolute life. She looks pale and worn out” (p.212). By the end of this study, Kemp eventually found that a number of these women who were examined were “mentally abnormal,” that



is to say “23.2% were slightly retarded, 19.1% retarded (dullards), 6.8% slightly feeble-minded (debile, morons) and 0.8% imbecile. 22.5% were pronounced psychopaths and 7.9% had other mental diseases.” According to Kemp, only slightly less than 30% of the women could be categorized as mentally normal (1936, p.243). The “limited abilities” and “defective characters” of these women were associated clearly with the “immoral” life that they had been living.

Albeit not nearly as detailed as Kemp’s study, Gunnar Dalhberg’s article entitled “Venereal Disease and Prostitution” starts with the statement that there are a few categories of women with regards to their sexual behavior and makes the following categorization: “Roughly speaking, women may be divided into three groups: 1. married and largely monogamous women, 2. slightly polygamous women and amateur prostitutes who have sexual intercourse with several men but who do not play their trade professionally, and 3. professional prostitutes” (1950, p.329). In the rest of the article, Dahlberg discusses if (and which) venereal diseases were spread by prostitutes; in case of syphilis, which was relatively infrequent in Sweden, Dalhberg claims that “it possible that the prostitutes are sufficiently numerous to be responsible for the cases of syphilis among men,” but they played were considerably less role before (1950, p.337; p.314). Therefore, the assumption is that the responsibility of the propagation of venereal diseases belonged to prostitutes, but not the men who had sex with them, meaning that the people who chose to have sex with prostitutes in this context had no responsibility in the matter.

At the time, it was even argued by some specialists that “moral” mental deficiency constituted a much greater risk than intellectual deficiency (Kirkebæk, 2005b, p.139). Furthermore, some people opposed the sterilization of “dissolute women” for there was a bigger moral problem that it could bring: if they were to be sterilized, they could easily “become even more ‘depraved’ as after sterilization they would be able to engage in sex even more promiscuously, this time without the risk of unwanted pregnancies.” (Runcis, 1998, p.368). Furthermore, in the case of “sexually loose” women, institutionalization was a commonly used method of segregating from the rest of society. As immorality was associated with mental deficiency, these women were often labeled as “feeble-minded” and sent to

institutes where they would be segregated and could not continue engaging in sexual activities.

Disability historian Birgit Kirkebæk's study on the institutionalization of women in Denmark reveals how it was seen as such an important component of eugenicist practices. Christian Keller, a Danish physician whose father ran institutions for the mentally deficient, continued the family trade and became a very important figure who also advocated for the institutionalization of "dissolute" or rather "morally mentally deficient" women (Kirkebæk, 2005a; 2005b). In 1923, he founded an institution for mentally deficient, "dissolute and loose" women on Sprogø island as part of Keller Institutions where women were sent for reasons varying from having "a raw sexuality" or being "erotically suggestive" to being "generous to the entire gang of railway workers" or "very addicted to intercourse" (2005a, p.198). Keller was a hereditarian for whom these women's complete segregation from the society meant alleviating "the fear of spreading hereditary degeneration, the fear of spreading venereal disease, the fear of growing expenses for the poor-law administration, and the fear that stupid women should be sexually exploited by men or that they should seduce men," (Kirkebæk, 2005a, p.197) which was considered to be a great service to the society and a great sacrifice on Keller's and the institution employee's part (Kirkebæk, 2005b, p.143). Moreover, physician Hans Otto Wildenskov who worked at Keller Institutions published several articles about Danish eugenics and sterilization practices in which he also talked about the function of institutions such as the one on Sprogø island, where he worked. In 1937, Wildenskov wrote an article entitled "Denmark's Care of Mental Defectives" in which he shared his own experiences about the sterilization practices, and maintained that they used it to be able to discharge patients who could then be "able to work" that is to say useful for the society because "it is a surprisingly small amount of intelligence (as low as I.Q.45) that is required in women to make them useful for housework" (1937, pp.42-43).

These exceedingly moralist approaches and arguments regarding women's sexuality and its visibility shows, in Kristeva's terms, that they were seen as the object of the society among which they created feelings of disgust and also fear

because they constituted a threat to the identity of the society and to the established relations between genders. Accordingly, their identity was constructed as this made their presence a peril that should be eliminated, which was possible through the segregational practice of institutionalization, and that is how that practice was justified.

#### 4.2.4 Homogeneity of the Scandinavian nations put into question: Vagrants, criminals and the anti-social

The most challenging part of this thesis was without a doubt the following attempt to isolate the rationalization behind the sterilizations of women on the grounds of vagrancy, criminal tendencies, alcoholism because they often pointed at the sterilization of racialized and classed women under other pretexts. The difficulty of this was due to the fact that the eugenics practices were not carried out as explicitly as in the cases of the “feebleminded” women. Instead, it was done by targeting certain traits associated with certain groups that deviated from the norm—such as the discriminatory arguments and attitudes of the eugenicists toward lower classes who represented “inferior” genetic makeup, justifying that they needed to be prevented from reproducing. As Yuval-Davis argues, “eugenistic constructions of national reproduction concern much more than the physical ‘health’ of the next generation: they concern notions of ‘national stock’ and the biologization of cultural traits” (1997, p.32). Thus, through the biologization of vagrancy, criminality, anti-socialness and so on, Scandinavian societies constructed the “foreigner” within (Kristeva, 1988).

Hence, sterilization of racialized and classed women was hidden behind the rationalization of eliminating abnormal and deviant behavior. It was true that the racist nature of the Scandinavian eugenic discourses had to change (at least on a discursive level) in the post-Second World War era because of the risk of being affiliated with the Nazi Germany. Meanwhile there were no obstacles in front of treating certain personality traits like anti-sociality almost like they were hereditary diseases and make judgments about certain groups’ ability to raise children.

Moreover, the biologization of such traits and characteristics attributed to certain communities or groups, was as a gendered process, as much as it was classed and racialized. For instance, in a study about crime statistics, Swedish geneticist Dahlberg (1948) argues that “women are much less criminal than men” (p.330) on whom they might even be expected to “have a ‘refining’ influence” (p.339). A similar example was the perceptions of sexually active women that are mentioned in the previous subsection.

In the preface to *Eugenics and the welfare state*, Broberg and Roll-Hansen discuss the motives behind the compulsory eugenic practices and argue that “[e]ugenic concerns about the risk of transmitting hereditary disease were important in the interwar period, but even during this period they were neither sufficient nor dominant. Lacking ability to take care of children was a central motive” (2005, xv). Nevertheless, that “central motive” has historically been part of discriminatory attitudes directed towards racialized and classed people who were thought to corrupt their children (Roberts, 1997). Thus, it can be argued that this attitude could easily have been a part of racist and classist attitudes implicated in eugenic practices. Moreover, many other historians like Broberg and Roll-Hansen (2005) present the argument that after the fall of the Nazi regime, Scandinavian eugenicists were color-blind, and they focused solely on the inability to rear children in a manner that is supported by the state. Such an approach serves to make excuses for the dominant discourse of that period of time and makes it more challenging to analyze those discourses because such a way of framing the states’ issue with “wrong” childrearing, “falls into the trap of erasing the critical importance of race in the struggle for welfare rights by privileging an apparently racially ‘neutral’ gender identity, which implicitly privileges White women” (Ernst, 2010, p.67). The discourse of homogeneity that has been prevalent in Scandinavia is, therefore, one of the primary culprits of this secretly discriminatory, color-blind discourse that is reproduced by historians who seem to “wish away the racist specter of the ‘welfare queen’ through the language of color-blindness” (Ernst, 2010, p.2).

After all, sufficient parenting and lacking the ability to take care of children have both been defined in the state’s terms, and the racialized/classed others have

been discriminated against for having multiple children and neglecting them, being alcoholics, vagrancy, and numerous other transgressions. Therefore, separating bad parenting from the motives behind eugenic practices, and particularly how they were justified for years is critical to challenging the false perceptions of homogeneity in Scandinavia. Additionally, the ones who have historically been blamed for “bad parenting” are rarely both of the parents, as parenting has historically been equal to mothering (Rich, 1995). Hence, it is almost always women who are judged for not being a good parent, as well as many other traits that were associated closely with being a woman because “[...] most of the scientific and pseudoscientific superstructure of eugenic racism, especially its mythology of hereditary character traits, is concerned with the supposedly ‘natural’ or ‘biological’ domains in which women are prominent – body, sexuality, procreation, education – the heretofore ‘private’ sphere” (Bock, 1983, p.402).

Compared to Denmark, both in Norway and Sweden, there were relatively bigger Roma populations called *Tattare* or *Tatere* (This group is called “travelers,” in order to avoid confusion, I will refer to them as Roma). The segregation and the sterilization of these groups became an issue for which both states would eventually have to take responsibility, as can be seen in the government reports published by the Swedish Ministry of Culture (2003/2015) and the Norwegian Ministry of Local Government and Regional Development (2003). As a matter of fact, Roma people in Norway had been officially targeted by eugenics policies for years, while one of the prominent Norwegian eugenicists, Johan Scharffenberg, advocated for the necessity to take a precaution against them, claiming that they had criminal tendencies and they should be sterilized (Haave, 2000, p.32). Considering the gendered application of the policy (Haave, 2000), in practice, this essentially meant that the nomadic Roma (racialized/classed) women were considered to be part of “degenerate” or “undesirable” groups outside the Norwegian social and cultural life (Hassenstab, 2015, 122), and the prospect of the reproduction of these “vagrants” would be a threat to the sovereign Norwegian nation and to “the superior Nordic Race.” Nevertheless, ideas like Scharffenberg’s turned out to be not uncommon; as mentioned in the introduction, there were even multiple instances in which Roma

people were misled by the medical professionals, and they agreed to get an appendectomy or a similar surgery, just to find out they were sterilized after the operation (Haave, 2000, p.190). Therefore, in a sense, the racialized/classed women such as Roma were the Scandinavian equivalents of the North American “Welfare Queen” stereotype that “emerged in the 1960s as African American women gained access to public assistance. This racist image suggests that African American women have babies simply to enrich themselves with ‘welfare money’” (Volscho, 2010, p.20). This was exactly how Scharffenberg and likeminded people viewed the Roma people in Norway—as “parasites” (Haave, 2000, p.19).

Meanwhile, in Sweden, when it came to the perceptions of the Roma, the tendency to racialize certain traits associated with this group and to label vagrancy and what was perceived as anti-social behavior as a sign of genetic inferiority lasted all the way into the 1940s. For instance, Swedish eugenicist Nils von Hofsten even described Roma as “genetically inferior individuals [who sank] into it due to their inferior qualities” (1933, cited in Broberg and Tydén, 2005, p.125). Their existence in the periphery of the society constituted an anomaly in the Swedish welfare state, which demanded participation and productivity from all of its members. Swedish eugenicists and politicians debated about what to do with regards to their existence, only to come to the conclusion that they should be targeted by the sterilization laws. Broberg and Tydén share examples from the cases of Roma women on whose behalf sterilization applications were made: in one of these cases from 1940, a fifteen-year-old Roma girl gets sterilized “as an act of mercy, for herself, for society, and perhaps most of all for the offspring she will surely bring into the world;” and in another one from 1943, a seventeen-year-old girl suffers the same fate for having “Dark, typical *Tattare* in looks... Typical *Tattare* mentality: evasive, untruthful, and coward” (2005, p.129). However, after giving these examples, Broberg and Tydén (2005, p.138) conclude that their article on the case of eugenics in Sweden with the remark that the groups and the individuals who were sterilized or institutionalized as a result of eugenic policies were targeted because they were different, which seems to be either a very simplistic and

reductive way of looking and the issue, or a way to avoid saying racist, sexist, ableist or classist.

In view of this, it is also important to address the importance of intersectional thinking under this category. Discriminatory practices and the “social abjection” (Tyler, 2013) experienced by the people at the intersections of disability, race, class and gender, is not only about the sum of these social phenomena, but it requires the conceptualization of “the connection between racism and sexism not as the mere addition of two forms of exploitation – as a double oppression – but as a manifold and complex relationship” (Bock, 1983, p.404). Accordingly, what is disguised behind eliminating unacceptable behaviors through eugenics cannot only be related to racial bias; similarly, the group same group targeted for sterilization in this category is not only lower-class, probably welfare-dependent women. Instead, these categories should be considered inherently related to avoid the mistake of limiting the analysis to only one aspect of identity because in the “ranking of particular identities or forms of marginalization based on gender or class over race, race becomes a merely incidental, unimportant, and invisible category, much in the way that race is ‘erased’ by the color-blindness frames” (Ernst, 2010, p.66).

#### 4.2.5 “Weak” and “worn-out” women

While racialized or mentally disabled women were never officially targeted for the sterilization because of their gender, this last category is the women who were sterilized for the reason that they were “weak,” or that they were “worn-out” mothers who had already given birth to “enough” children. While “weakness” was considered to be a completely medical indication, it was a quality that was associated with only women.

The most evident example of women being targeted for being “weak” was the application of the Swedish sterilization law of 1941, as the third section of §1 of the law stated that women who had serious illnesses, bodily defects or were weak would be urged to get sterilized as these problems could be a life-threatening issue

in case of future pregnancies. It was also added that their consent was necessary for the operation to be performed. In the case of “worn-out” mothers, it was not legal for their husbands to be sterilized even though vasectomy was a much more practical and less risky operation (Runcis, 1998, p.359), which begs the question that why they would perform invasive surgery on women if there was such a big concern about their life and health even though there is another easier option. Moreover, there was a dismissive attitude toward the risk of sterilizing women.

For instance, in an article describing the Swedish practices of eugenics, zoologist and geneticist Nils von Hofsten, a prominent eugenicist in Sweden, states that sterilization of worn-out mothers became more and more common, which could be explained with “the new means of relief it offers to exhausted and often desperate mothers [...] gradually becoming more widely known” (1949, p.245). Then von Hofsten compares the sterilization of women and men and acknowledges that the risk of death that vasectomy involves is extremely small. According to the statistics von Hofsten shares, only one man died out of over 3000 since the first sterilization law passed in 1934 until 1949, but the eugenicist emphasizes that in “adverse circumstances, however, the slightest wound may be disastrous” (1949, p.246). Whereas, about women’s sterilization, von Hofsten states merely that it “involves the same general risk as other slight abdominal operations” (1949, p.247).

Furthermore, Sweden was the only country among the three Scandinavian countries where medical sterilization of women had a legal basis—in Norway and Denmark, however, it was not regulated by the law and did not require the same procedures. While it was legally sanctioned in Sweden, there was a similar practice in Denmark of sterilizing “weak” and “worn-out” women outside the scope of the laws, as medical sterilization was not legislated the same way in the Danish laws (Koch, 2004, p.326). However, sterilizations performed on medical grounds were not included in the official statistics, which makes it harder to determine how common this practice was in Denmark.

It is clear that in these type of sterilization practices, paternalistic discourses on women’s bodies are implicated; while the justification of its application is to



protect women, there is a chance that the sterilization operation might be riskier in the case of women whose health this practice is supposed to protect. There is also the question that was mentioned earlier, which is about consent. While the Scandinavian sterilization laws are very clear on the principle of obtaining consent, the 1941 law gave the doctors the complete authority to decide which cases were fit for sterilization on medical grounds (Runcis, 1998, p.360). In the power relations established between women and doctors, which is valid for all the situations discussed in this thesis, it is not exactly possible to come to a conclusion about the free will or the informed consent of the patients.

## 5 Dealing with guilt and difference: “History of the present”

In the previous section, I discussed certain eugenic discourses and practices that played a role in creating the “gendered others” through the implementation of eugenic policies, and in rationalizing those practices through discourse. As I stated both in the introduction and in the methods section, one of the primary questions that I had while working on this thesis was what kind of implications gendered implementation of eugenic policies in Scandinavia would have on how Scandinavians perceive their own identity today. While it might not seem like there should be any substantial reasons for practices from half a century ago to have a great impact over how the contemporary Danish, Norwegian and Swedish identities are constructed, I argue that there are two factors to consider before answering that question: First, gendered othering that happened through and within eugenic practices represent a particular type of event in the Scandinavian history that has been intentionally erased from the collective memory in order to make the egalitarian, democratic and benevolent imaginaries of identity possible. Second, the gendered implementation of eugenic practices was symptomatic of an issue that still haunts the Scandinavian societies, which is the limited capacity of these societies when it comes to handling the challenges to their self-perception of homogenous entities, that is to say, different people. I will discuss these arguments below by borrowing examples from different scholars’ research, in addition to using my own genealogical analysis.

While it is not difficult to find multiple instances of “erasure” of specific events in the construction of national histories in the Scandinavian context, the epitome of this phenomenon is the transformation of the category of “race” to an absolute taboo following the Second World War and the fall of the Nazi regime. It

is possible to associate the subsequent irrelevance of the concepts of “race” and “racism” in the region with the “national self-conceptions of the Nordic countries as not having the ‘burden of guilt’ often associated with ‘whiteness’ in other contexts” (Marselis, 2008, p.463). This erasure of the historical category of “race” manifests, for instance, in the lack of acknowledgement among the Danish society of their own colonial complicity (Vuorela, 2009) in slavery and slave trade, even though Denmark used to be the seventh-largest slave-trading nation (Blaagaard, 2011, pp.61-62; Blaagaard and Andreassen, 2012); as well as the anti-racist self-image of Swedes, which has an element of national pride despite the not-so-long-gone history of state-sponsored involvement in racial biology (Sawyer, 2002). Meanwhile, another instance of erasure from the national histories of Scandinavian countries that is related, but not limited to the taboo of “race” is the eugenicist practices in the twentieth century. The erasure and the exclusion of these dark and incriminating elements of the past from the official national histories is what makes it possible to build such compelling, guilt-free national image and imaginaries in the case of Denmark, Norway and Sweden.

On the other hand, the challenges to the homogenous reconceptualization of Scandinavian societies are also connected to this: silencing and erasing colonial involvements and “colonial complicities” (Vuorela, 2009), as well as the “investment in eugenic social projects far beyond WWII, has been central to the naturalization of a historical, imaginary Nordic region as an area of notable racial homogeneity” (Danbolt and Myong, 2019, p.43). Ironically, a byproduct of the imaginaries of homogeneity is the “enduring claims of post-racial, color-blind ideology that somehow transcend the history of colonialism, eugenics, and xenophobic expressions” (Hervik, 2019, p.10) that paradoxically make the discrimination against members of different ethnic groups even more invisible. Hence, this homogenous self-perception of Scandinavian countries has as an exclusionary function; for instance, while an essential pillar of national self-images of these countries is gender equality, Scandinavians conceptualize “equality as sameness” (Gullestad, 2006 cited in Hervik, 2019, p.10), which means that their concept of equality sometimes does not function the same way when it comes to

handling differences. Along the same line, it is possible to claim that the present-day gender-egalitarian and democratic images of the Scandinavian countries paradoxically hinder addressing women's issues as distinct phenomena. These perceptions function as a veil that conceals the fact that there is a history of eugenics in the welfare state and its problematic ways of handling women and their bodies, along with other inconsistencies and atrocities buried in the past. The continuous celebration and idealization of those very images of the Scandinavian countries do not simply obscure the past, but they also make it less and less likely critique both the past and the present because the constant "reference to higher morality effectively mutes critical debate" (Tvedt, 2007 cited in Palmberg, 2009, p.35).

Correspondingly, as Mulinari argues, gender equality is not conceived as an inclusive political vision in the region, but as an exclusive cultural value of the countries of the region where "discourse that links gender equality to other values, such as democracy and human rights, which underpin a wider European/Christian culture" (Mulinari, 2010, p.161). Even the most anti-establishment, anti-feminist, populist political groups such as the Sweden Democrats who spread the belief that gender equality went too far and that women should return to their natural homemaker role can claim gender egalitarianism as a cultural value when it suits them: an argument that they present is that Sweden is not a great place for immigrants from the Middle East to settle down because their cultural values and Swedish values like gender equality would clash (Mulinari and Neergaard, 2014).

This phenomenon also reveals that gender equality discourse can be (and is) used to create the dichotomy between the Scandinavian self and the racialized other, through the biologization of culture: "[...] images of achieved gender equality can be used to construct dichotomous divisions between the 'nation' and its 'others'" (Keskinen et al., 2009, pp.12-13). Accordingly, directly or indirectly, racialized women—for instance, women from the Middle East—can be constructed as the others who are being oppressed in their patriarchal culture and are without agency.

## 6 Conclusion

### 6.1 Gendered othering as failure to handle difference

In the introduction of this thesis, I stressed that doing a genealogy of gendered othering was significant because it would help locate the eugenic discourses and practices that manifested in the nexus of power/knowledge that, in turn, rationalized the gendered implementation of methods like sterilization and institutionalization. Another important objective was to discuss the issue of how contemporary images and imaginaries of national identities in Scandinavia that are based on gender equality and democracy were constructed through a selective memory of the recent past.

With regards to my research question, while it was obvious that women were the majority among the victims of eugenic practices, it was not entirely self-evident at the beginning why the implementation of eugenics policies would manifestly target women for sterilization and institutionalization, which made it harder than expected to find how it the gendered implementation of eugenics was rationalized. However, it became quickly clear that reproduction or lack thereof was closely associated with women's bodies instead of men's, making women an obvious target for every single category that I listed in my analysis. From "immoral" living to being antisocial, anything that was out of the norm was enough reason for women to be sterilized. Moreover, deviant women were not the only ones affected by this. Eugenicists targeted one group of women who had "desirable" genetic makeup and the rest whose fertility threatened the purity of the "national stock." This system was based on the compulsory reproduction of the former and the prohibited procreation of the latter.

As for the secondary question of departure that I had, it is clear that the history of eugenics that is hidden in the past is also constitutive of the national identities in Scandinavia; through the omission of the atrocities committed in the past, the national histories and identities of these three countries are constructed in a way that supports the imageries of innocence and equality without the burden of guilt that would come with the knowledge of past deeds like the involvement in colonialism or eugenics. Scandinavians, therefore, construct their own self-image as free from the necessity to confront their history, as they moved their focus away from the negative aspects of their past. Nevertheless, genealogically speaking, not much has changed in terms of Scandinavians' willingness and capacity to deal with different identities or groups because of the homogeneity discourses that have been very dominant for years. It is questionable if these identities are sustainable; however, confronting the past on societal level would only help resolve the false perceptions of homogeneity, and the very Scandinavian problem of associating equality with sameness.

## 6.2 Possibilities for future research

Due to the limitations of this project in terms of length and time allocated for its completion, there are unfortunately a lot of things that remain unaddressed, which can hopefully be explored in future studies. For instance, even though I would very much like to address the question of agency in the case of forcibly sterilized in an extensive way, and do a genealogy that focuses on the micro-level that is the realm of individual experiences, it was not possible to do that within the scope of this thesis. While it would require a much longer and more detailed process of archival research, looking at the same topic from a completely different angle, namely, through the eyes of the people who were subjected to eugenic practices, would add an extremely valuable dimension to this research.

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