

## Forced Sterilizations in ICE: How the Legacy of Eugenics Still Continues Today



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*WRITER'S COMMENT: I chose to write about forced sterilizations at an ICE detention center in Irwin County, Georgia, due to my interest in women's rights and in immigration policies—both of which were relevant to the UWP 104J: Writing for Social Justice class I took in Fall Quarter 2020. I became interested in how the medical malpractice at the center fit into larger patterns of state control over reproductive rights and the legacy of eugenics in the United States, a legacy which features prominently—though not exclusively—in the American South. The dichotomy between state opposition to birth control and the implicit acceptance of sterilizations performed on immigrant women at the detention center in Georgia proved to be a rewarding, if disturbing, framework for the paper. The use of immigrant women's bodies for monetary gain spoke of an almost casually malicious view of detainees as less than human and undeserving of exercising personal choice. My findings revealed that obstacles to reproductive care kept pace with the reprehensible actions undertaken by the doctors and nurses at the detention center. Why should this be so? Is there one rule for U.S. citizens and another for detained immigrants? What does institutional opposition to reproductive care for citizens have to do with forced reproductive measures for immigrants? It is my hope that my paper illuminates this hypocrisy and urges readers to action.*

*INSTRUCTOR'S COMMENT: Throughout our time working together on writing, Rebecca demonstrated a keen understanding of the context in which she was writing and how to navigate external constraints. I recall a conversation we had over Zoom about how sources were scarce*

*and how she thought through the challenge posed by that lack and created a piece that contextualizes the forced sterilization of women not only historically but also in current events. The final piece is confident and thoughtful, but what is less apparent to readers is how Rebecca challenged herself by putting herself in the text. She reckons with her own positionality instead of remaining safely behind the objectivity that reports are taught to seek. I see Rebecca combining the strengths of traditional reporting and new journalism in this text, which allows her to advocate for social justice while demonstrating her excellent skills in research and synthesis.*

—Erika Strandjord, University Writing Program

## Part I: What Really Happened

In January 2019, an undocumented immigrant named Wendy Dowe was awakened by guards at an immigration detention center in Irwin County, Georgia. She was told she would be having surgery due to concerns she raised earlier about menstrual cramping and potential ovarian cysts. Dr. Mahendra Amin, an outside medical provider, compelled a shackled and handcuffed Dowe to have the cysts surgically removed at her appointment.<sup>1</sup> But upon her deportation to Jamaica, her country of origin, Dowe consulted with doctors and learned that the cysts were naturally occurring and hadn't required any invasive surgery. Moreover, Dowe wasn't the only detained woman who received an unnecessary gynecological operation at the hands of Amin. What follows is a harrowing account of medical malpractice and forced sterilization enabled by employees at the immigration detention center in Irwin County and conducted by Amin, whose lawyer has vigorously denied all of the allegations. These events speak not only to the depravity of the United States' handling of the current immigration crisis—exacerbated by the draconian policies of former President Donald Trump—but to an insidious legacy of sterilization as social control that still has repercussions today. Interestingly, sterilization tactics, often promoted as being for the “greater good” of society, run parallel to state opposition of reproductive

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<sup>1</sup> Caitlin Dickerson, et al., “Immigrants Say They Were Pressured Into Unneeded Surgeries.” *The New York Times*, 29 Sept. 2020, [www.nytimes.com/2020/09/29/us/ice-hysterectomies-surgeries-georgia.html](https://www.nytimes.com/2020/09/29/us/ice-hysterectomies-surgeries-georgia.html)

rights. While never publicly linked, each issue demonstrates lawmakers' attempts to use the body as a means of social control.

Sterilization once operated under the guise of positive social change and, though outlawed in Georgia fifty years ago,<sup>2</sup> is now conducted amid reassurances of patient consent by doctors like Amin. The link between these sterilizations and the current bitter fight against female reproductive rights may at first seem counterintuitive: the ICE sterilizations argued for the elimination of sexual apparatus on flimsy medical grounds, while those who are against reproductive care expansion for legal residents advocate for limited access to birth control. But these are actually two sides of the same coin: each behavior endorses the concept of the female body—particularly the Black or Brown female body—as a receptacle for prevailing ideas that implicitly violate human rights, and each weaponizes that same body to further social and political aims. The danger in this way of thinking is that it codifies reproductive measures as practically mandatory for one group of people (undocumented immigrants) and negligible for another (legal residents).

It also implies that an immigrant woman's potential offspring are less desirable and that doctors have the right to surgically intervene based on her lack of residential status while the state looks the other way. While women in ICE detention centers have struggled to access abortions, they have simultaneously been pressured into sterilizations. The contradictory nature of these policies demonstrates institutional anxieties about immigrant women's ability to reproduce. Instead of wading into the moral quagmire of abortion, the Irwin County detention center removed some women's ability to have children altogether. By contrast, women who are legal residents have faced statewide attempts to limit birth control<sup>3</sup>, demonstrating a cultural imperative for them to produce children—sometimes against their will. In both cases, a woman's choice is imposed by external forces rather than adhering to its true definition: choice as an expression of private and personal agency.

In 2018, a lawyer had raised concerns about the outside referrals to Amin's office, but the detained women continued to be sent there. And they continued to express concern about the proliferation of invasive surgeries, including hysterectomies, in Amin's care. In a whistleblower

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<sup>2</sup> Elizabeth Hargrett, "Eugenics in Georgia." *New Georgia Encyclopedia*, 16 Aug. 2019, [www.georgiaencyclopedia.org/articles/government-politics/eugenics-georgia](http://www.georgiaencyclopedia.org/articles/government-politics/eugenics-georgia)

<sup>3</sup> "Birth Control." *NARAL Pro-Choice Georgia*, 16 Feb. 2018, [prochoicageorgia.org/issue/birth-control/](http://prochoicageorgia.org/issue/birth-control/)

report filed by ICE nurse Dawn Wooten in September 2020 with the nonprofit Project South, Wooten said that the nurses at the detention center were often unable to adequately express themselves in Spanish—the language spoken by many of the residents detained there—which prevented the residents from sharing concerns or asking questions about their upcoming procedures. Due to this language barrier, many were unsure about why they needed surgeries. According to Wooten, Amin was referred to as the “uterus collector” and was known for “taking [everybody’s] stuff out.”<sup>4</sup> Women individually interviewed at the detention center painted a similar picture. One said she knew five other detainees who were sent to Amin for hysterectomies between October and December 2019 alone.<sup>5</sup> Another woman allegedly had the wrong ovary removed. Still another was informed by doctors that she had ovarian cysts and needed to have her womb taken out. A doctor promised her a twenty-minute procedure to drain the cysts, while a nurse informed her that she had “heavy bleeding” and a “thick womb”—incongruent with the patient’s medical history—necessitating a hysterectomy. The nurse became angry when the patient objected. At least fifty-seven detainees recalled being pressured into surgeries they neither wanted nor needed.<sup>6</sup> Officials used conflicting explanations to obfuscate their reasons for the surgeries.

Five gynecologists reviewing the sixteen cases examined in the *New York Times*’ bombshell article about the report noted that, based on the medical records handled by the *Times*, some of which were incomplete and unclear, it was unusual for a doctor to consistently recommend hysterectomies.<sup>7</sup> Moreover, the *Times* brought Amin’s potential motives to light: outside doctors providing care to detained immigrants are generously compensated by the Department of Homeland Security, particularly when it comes to surgeries. The Justice Department had previously investigated Amin regarding these kinds of payouts in 2013.<sup>8</sup>

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4 Project South, “Lack of Medical Care, Unsafe Work Practices, and Absence of Adequate Protection Against COVID-19 for Detained Immigrants and Employees Alike at the Irwin County Detention Center.” *Project South*, 14 Sept. 2020, 19, [projectsouth.org/wp-content/uploads/2020/09/OIG-ICDC-Complaint-1.pdf](https://projectsouth.org/wp-content/uploads/2020/09/OIG-ICDC-Complaint-1.pdf)

5 *Ibid.*, 18.

6 Dakota Hall, “ICE Sterilizations in Georgia Evoke Tragic Chapters in South’s History.” *Facing South*, Institute for Southern Studies, 19 Nov. 2020, [www.facingsouth.org/2020/11/ice-sterilizations-georgia-evoke-tragic-chapters-souths-history](https://www.facingsouth.org/2020/11/ice-sterilizations-georgia-evoke-tragic-chapters-souths-history)

7 Dickerson, et al., “Immigrants Say They Were Pressured Into Unneeded Surgeries.”

8 “Hospital Authority of Irwin County Resolves False Claims Act Investigation for

Amin and other defendants in the civil suit agreed to pay a hefty fine in order to “resolve allegations” about false claims to Medicare and Medicaid. None were deemed liable for their actions.

## **Part II: A Legacy of State-Sanctioned Sterilizations**

Later, a 2020 whistleblower report, which prompted House Speaker Nancy Pelosi and others to call for a federal investigation of the center’s medical practices, indicated that Amin had continued to engage in similar behavior.<sup>9</sup> Pelosi’s comment that the situation recalled “the darkest moments of our nation’s history” referred to a legacy of medical malpractice toward and sterilization of the country’s most vulnerable citizens—among them the poor, the mentally or physically disabled, women, and people of color.<sup>10</sup> The events at the Irwin County detention center were an ugly continuation of this troubled history, which dates back to before the Civil War, when gynecologists freely experimented on enslaved women.<sup>11</sup> J. Marion Sims, a South Carolinian surgeon dubbed the “father of modern gynecology,” operated on slave women in the South and Irish immigrant women in the North in the middle of the nineteenth century. In those years, race, ethnicity, gender, and disability became acceptable grounds for medical experimentation. Characteristics veering from the purportedly healthy, intelligent, White norm were viewed as defects that rendered patients less than human.

This convoluted rationalization of ethics violations was informed by post-Darwinian racial theories favoring “selective breeding”—the propagation of certain heritable traits over others. “Criminality, disease, poverty, and mental illness” became increasingly associated with “poor heredity,” or bad genes. Scientists, doctors, and activists across the

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\$520,000.” *The United States Department of Justice*, U.S. Attorney’s Office, Middle District of Georgia, 29 Apr. 2015, [www.justice.gov/usao-mdga/pr/hospital-authority-irwin-county-resolves-false-claims-act-investigation-520000](http://www.justice.gov/usao-mdga/pr/hospital-authority-irwin-county-resolves-false-claims-act-investigation-520000)

9 Rachel Treisman, “Whistleblower Alleges ‘Medical Neglect,’ Questionable Hysterectomies Of ICE Detainees.” *NPR*, 16 Sept. 2020, [www.npr.org/2020/09/16/913398383/whistleblower-alleges-medical-neglect-questionable-hysterectomies-of-ice-detaine](http://www.npr.org/2020/09/16/913398383/whistleblower-alleges-medical-neglect-questionable-hysterectomies-of-ice-detaine)

10 *Ibid.*

11 Maia A. Hill, “The Stain of Slavery on the Black Woman’s Body and the Development of Gynecology: Historical Trauma of a Black Woman’s Body.” *The Macksey Journal* 1, Article 86 (13 May 2020), [mackseyjournal.scholasticahq.com/article/21782-the-stain-of-slavery-on-the-black-women-s-body-and-the-development-gynecology-historical-trauma-of-a-black-women-s-body](http://mackseyjournal.scholasticahq.com/article/21782-the-stain-of-slavery-on-the-black-women-s-body-and-the-development-gynecology-historical-trauma-of-a-black-women-s-body)

political spectrum endorsed these ideas.<sup>12</sup> The nineteenth-century categorization of people into social, racial, ethnic, and mental categories soon evolved into an insidious race-based science that held sway well into the latter half of the twentieth century. Thus, the gynecological malpractice enabled by the Irwin County detention center in Georgia is inseparable from the American legacy of the Black or Brown female body as a receptacle for prevailing prejudices. The surgeries became the literal embodiment of this phenomenon. In the Irwin County case, the Black or Brown immigrant body's ability to produce life was treated as expendable, something revocable but for an accident of birth: the women were immigrants rather than legal residents. That evidently necessitated their powerlessness in the eyes of medical professionals and informed the elimination of their reproductive capacities. And historically, sterilization has been used to remove the possibility of producing members of society with undesirable characteristics—according to eugenics logic, that meant the poor and the disabled as well as Black people, Brown people, and immigrants.

The nation's burgeoning eugenics movement at the start of the twentieth century went hand in hand with the increased popularity of sterilization as a force for the greater good—an idea which was particularly, though not exclusively, potent in the Jim Crow South. The Virginia Sterilization Act of 1924 set in motion state initiatives to legalize sterilization. Sterilizations of Black women in the South became so common they were apparently referred to as “Mississippi appendectomies.”<sup>13</sup> In 1937, Georgia legalized eugenics-based sterilization, aiming to prevent diseases and mental and physical disabilities from being passed on to future generations.<sup>14</sup> Along with the less insidious elements of the state's Depression-era “Little Deal”—which included increased access to healthcare, education, and housing—sterilization became institutionalized in Georgia under the guise of positive social reform. The strangeness of historically liberal social policies being enacted alongside state-sanctioned sterilizations is remarkable, but unsurprising: the federal New Deal left many people of color by the wayside, and state governments, establishing social protections of

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12 Hargrett, “Eugenics in Georgia.”

13 Hall, “ICE Sterilizations in Georgia Evoke Tragic Chapters in South's History.”

14 Hargrett, “Eugenics in Georgia.”

their own, evidently followed suit.<sup>15</sup> Throughout the 1940s and 50s, sterilization rates in Georgia soared. An unflattering exposé in an Atlanta newspaper brought the practices to a gradual halt in the early 1960s, but the law wasn't actually outlawed until 1970.<sup>16</sup>

The damage was done, though: the body—in particular the Black or Brown female body—became an ideal setting for contentious moral debates, a place where politicians and doctors could tinker for their political and monetary gain. The outlawing of sterilizations, as well as advances in female reproductive rights legislation, created a corresponding panic among lawmakers who had lost their primary means of social control. Though these conflicts seem like uneasy opposites, they represent an identical goal: the use of the body as the most primitive weapon with which to maintain outdated social standards. In both, the question of a woman's choice was bitterly contested. A woman's ability or decision to carry a child was mutable, something she could manage at her own behest, which necessarily meant that the state lacked reproductive control of its citizens. It's no mistake, then, that reproductive rights soon became deeply contentious. With the implementation of *Roe v. Wade*, the landmark Supreme Court case that legalized abortion nationwide in 1973, access to safe and legal abortions increased and a correspondingly vocal anti-abortion movement blossomed.<sup>17</sup>

### **Part III: Where We Are Now**

With this in mind, it's unsurprising that the most recent efforts to limit access to abortion have occurred in the South. In July 2019, Georgia Gov. Brian Kemp signed a bill making it a crime for a woman to have an abortion past six weeks of pregnancy. Kemp's bill made access to the procedure virtually impossible, since Georgia women are already required to have at least two doctor's appointments before having an abortion. State health insurance only covers abortion if the mother's life is in danger or if her health is severely compromised, and minors cannot undergo abortions without parental consent, implementing both financial and age barriers to the procedures. Kemp's bill added insult to injury, heaping

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<sup>15</sup> Ta-Nehisi Coates, "The Case for Reparations." *The Atlantic*, June 2014, [www.theatlantic.com/magazine/archive/2014/06/the-case-for-reparations/361631](http://www.theatlantic.com/magazine/archive/2014/06/the-case-for-reparations/361631)

<sup>16</sup> Hargrett, "Eugenics in Georgia."

<sup>17</sup> "Roe v. Wade: The Constitutional Right to Access Safe, Legal Abortion." *Planned Parenthood Action Fund*, Planned Parenthood, [www.plannedparenthoodaction.org/issues/abortion/roe-v-wade](http://www.plannedparenthoodaction.org/issues/abortion/roe-v-wade)

severe time constraints onto the logistical obstacles to the procedure already in place.<sup>18</sup> As in earlier justifications of sterilizations during the twentieth century, these measures were purportedly undertaken in the interest of the greater good even though they were unconstitutional, an obstacle preventing the *life, liberty, and pursuit of happiness* outlined in the United States Constitution. In August 2020, Kemp's bill was struck down.<sup>19</sup> And though similar bans have been struck down in North Carolina, Mississippi, Arkansas, Arizona, Iowa, and North Dakota, Gov. Kemp's actions indicated the state's extreme aversion to the question of bodily agency: the choice to keep or terminate a pregnancy. That these regional efforts have unfolded alongside revelations about the Irwin County detention facility in Georgia reflects the contradictory nature of access to reproductive care.

While legal residents have faced barriers to this kind of care, immigrant women have had it forced upon them, as have incarcerated individuals. Between 2010 and 2015, at least four plea deals made in Nashville, Tennessee involved sterilization.<sup>20</sup> In 2017, a Tennessee judge in White County signed an order eliminating thirty days of jail time for any inmate who agreed to a vasectomy or a birth control implant.<sup>21</sup> The judge candidly portrayed this measure as beneficial to all, justifying it by saying that fewer children would be born to parents with chronic drug use issues and legal troubles. Such thinking isn't particularly far from the logic that informed frequent sterilizations in the South during the last century. Once again, the argument of sterilization or government-mandated birth control as a force for the greater good was employed, implicitly furthering eugenics-based thinking and maintaining that criminality was as good a reason as any to prevent someone from reproducing. It also incorrectly implied that criminal behavior was somehow congenital. Though the judge's decision was later abolished in 2019, people's right to choose when and why they reproduce is still viewed as a danger to

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18 Ibid.

19 "Georgia Appeals Ruling That Blocked Restrictive Abortion Law." *90.1 FM WABE*, Associated Press, 12 Aug. 2020, [www.wabe.org/georgia-appeals-ruling-that-blocked-restrictive-abortion-law](http://www.wabe.org/georgia-appeals-ruling-that-blocked-restrictive-abortion-law)

20 Sheila Burke, "Attorneys: Sterilizations Were Part of Plea Deal Talks." *AP NEWS*, Associated Press, 28 Mar. 2015, [apnews.com/article/824ffb7d2ed84849b5d87c41cdf8c0f7](http://apnews.com/article/824ffb7d2ed84849b5d87c41cdf8c0f7)

21 "A Vasectomy Means Reduced Jail Time For Inmates." *News Channel 5*, 21 July 2017. [www.newschannel5.com/news/inmates-given-reduced-jail-time-if-they-get-a-vasectomy](http://www.newschannel5.com/news/inmates-given-reduced-jail-time-if-they-get-a-vasectomy)



the oft-mythologized public good. Personal agency and freedom from governmental interference are touted so long as they maintain a racial and sex-based status quo. When people's needs or wishes conflict with that delicate maintenance of power, atrocious human rights violations have occurred under the guise of medical necessity, particularly under the purview of state governments.

Ultimately, the events at the Irwin County detention center are perhaps the ugliest culmination of immigrant and reproductive rights battles occurring in the United States right now. The detention center's actions were bolstered by a legacy of eugenics-based lawmaking in the state of Georgia and beyond. These historical precedents rendered such behavior permissible because the immigrant women were implicitly viewed as "less than." Doctors and nurses seemed to think they were eliminating a problem, performing a task by the books. Masquerading as a legitimate health and safety measure, the events in Irwin County are a haunting reflection of long-held institutionalized racism and cruelty toward immigrant women and women of color. Disappointingly, dwindling news coverage of this phenomenon has caused it to fade from the public eye. While it's perhaps due to a lack of substantive state or federal action regarding the conditions outlined in the whistleblower report, minimal press coverage may pose the greatest threat to public awareness about the detention center. Though the issue may feel entirely out of our hands, sustained action is needed to enact change: those who can vote also can pressure the federal government into investigating the issue further. Lacking public attention, the problem will all too conveniently disappear in the eyes of state lawmakers. Consider, for a moment, the story of Yuridia, an undocumented immigrant who was subjected to dilation, curettage, and laparoscopic surgery that she did not ask for. "I woke up and I was alone, and I was in pain and everyone spoke English so I could not ask any questions," Yuridia said.<sup>22</sup> Nevertheless, she was deported to Mexico three days later.

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22 Dickerson, et al., "Immigrants Say They Were Pressured Into Unneeded Surgeries."

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