

SISSY FARENTHOLD TRAILBLAZERS FOR JUSTICE

UNDERGRADUATE WRITING PRIZE

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“The Mississippi Appendectomy”: A Horrifying History and Reproductive Laws that Still Lurk in the American Justice System

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About the prize: The Sissy Farenthold Trailblazers for Justice Writing Prize is awarded annually to an undergraduate student at UT Austin for a submission that engages at least one of three themes that guide the Sissy Farenthold Fund for Peace and Social Justice: environmental justice, reproductive justice, and peace. Submissions are anonymously judged by an interdisciplinary group of graduate and faculty affiliates of the Rapoport Center.



In 1927, Carrie Buck, a poor seventeen-year-old orphan, had the misfortune of becoming pregnant after being raped by her foster parent's nephew. The Dobbies, Buck's same foster parents, instead of rendering her any form of aid, petitioned to have her institutionalized and conveniently out of the way. After being diagnosed with "feeble-mindedness" and "sexual promiscuity," she was placed in the State Colony for Epileptics and Feeble-minded. After giving birth, Buck became the test case for a new Virginia law that allowed for the compulsory sterilization of people "afflicted with hereditary forms of insanity that are recurrent, idiocy, imbecility, feeble-mindedness, or epilepsy."¹ Notably, *after* her sterilization, the Supreme Court case that followed debated the question: Did the Virginia statute, which authorized the sterilization, deny Buck the right to due process and the equal protection of law enshrined in the 14th Amendment? In an eight-to-one vote, the Court found that Virginia's law did *not* violate the Constitution. In the Court's majority opinion, Justice Oliver Wendell Holmes Jr. affirmed the value of eugenics-based sterilization laws in order to prevent the nation from "being swamped with incompetence," uttering the infamous quote "Three generations of imbeciles are enough."²

Many citizens of the United States are naive to our country's legacy of eugenics; however, not only has the U.S. been an active participant in these horrendous practices, but precedents such as *Buck*, having yet to be overturned, remain lurking within our justice system, and their aftereffects still ripple. With restraints on reproductive freedom resurfacing, Americans should be acutely aware of the history and present implications of compulsory sterilization in the United States. From coercive plea deals to the 2020 I.C.E hysterectomies, despite the concerted effort to bury this era of history, the remnants of eugenics-based laws and coercive sterilization remain. As

¹ "Buck v. Bell," Britannica, accessed April 5, 2026, <https://www.britannica.com/topic/Buck-v-Bell>.

² *Buck v. Bell*, 274 U.S. 200 (1927).

we walk through the history of forced and coerced sterilization, it is eerily apparent how fragile our reproductive rights are when they stand on shoddy foundation.

The history of forced sterilization in the United States has its roots in the early 1900s eugenics movement. Although now widely understood as inaccurate and prejudiced, at the time, the eugenics movement was highly respected and backed by ‘reliable’ scientific studies and journals. These “scientific” backings led to the first compulsory sterilization law passed by the State of Indiana in 1907. This law legalized the forcible sterilization of “confirmed criminals, idiots, imbeciles, and rapists” in state institutions.³ By the 1930s, over thirty states had similar laws on the books. These laws targeted individuals labeled as “feeble-minded,” “epileptic,” “insane,” or “habitual criminals”—all (certainly by design) vague terms that could be used to target anyone deemed socially undesirable. At the peak of forced sterilization in the United States, California, under the “Asexualization Acts—a series of legislation passed as a part of its broader eugenics program aimed at controlling the reproduction of ‘undesirable’ individuals”—sterilized around 20,000 people, disproportionately targeting people of African American and Hispanic heritage and descent.⁴ Over the course of the twentieth century, more than 60,000 people were forcibly sterilized under eugenics laws across the United States.⁵

After being reinforced—nay, encouraged—by *Buck*, these practices were not even remotely challenged until 1935. In 1935, Oklahoma passed the Criminal Sterilization Act, which allowed the state to sterilize a person who had been convicted three or more times of crimes “amounting to felonies involving moral turpitude.” Skinner brought forth a suit after he was

³ Ind. General Law § 215 (1907).

⁴ Charles A. Loeb et al., “Forced Sterilization in California: A Haunting Past and Persistent Inequity,” *The Journal of Urology* 211, no. 5S (2024): <https://doi.org/10.1097/01.JU.0001008828.35887.de.02>.

⁵ Alexandra Minna Stern, “That Time the United States Sterilized 60,000 of Its Citizens,” *HuffPost*, January 7, 2016, https://www.huffpost.com/entry/sterilization-united-states_n_568f35f2e4b0c8beacf68713.

determined to be a habitual offender with three felonies and thus ordered to be sterilized. In the subsequent landmark Supreme Court case, *Skinner v. Oklahoma*, in a unanimous decision, the Court held that the Act violated the Equal Protection Clause of the 14th Amendment. The Court reasoned that because certain crimes, such as embezzlement, were excluded from the Act's jurisdiction without explanation or reason, the statute was unjustly targeting "blue-collar" crimes, i.e., crimes committed by lower middle-class individuals, typically manual laborers, such as stealing a car or drug possession, compared to "white-collar" crimes committed by higher-class individuals, such as embezzlement or money laundering. Moreover, the Court reasoned that because of the social and biological implications of reproduction and the irreversibility of sterilization operations, compulsory sterilization laws should be subject to strict scrutiny. Notably, in his concurrence, Chief Justice Harlan F. Stone stated that he disagreed with the majority opinion's reliance on the Equal Protection Clause and instead cited the Due Process Clause to prevent Skinner from being sterilized.⁶ *Skinner v. Oklahoma*, though creating some protections against forced sterilization, was restrained by its legal reasoning. As Justice Stone pointed out, its reasoning rested on the unequal distribution of the mandatory procedures rather than a direct violation of the Fifth Amendment's Due Process Clause. Compulsory sterilization laws were not deemed wholly unconstitutional, just the ones that were not equally applicable to all crimes. By the Court's logic, as long as they began sterilizing white collar crimes as well, all forced sterilization would be permissible—in essence arguing that far from sterilizing too many people, the state had failed by sterilizing too few. Though *Skinner* is often argued to herald the end of legalized eugenics, it decidedly failed to overturn the terrifying precedent that *Buck* set and

⁶ *Skinner v. Oklahoma ex rel. Williamson*, 316 U.S. 535 (1942).

conveniently left room for future sterilization to occur under “strict scrutiny” so long as it was broadly applied.

After World War II, the abject horrors of eugenics-based legislation were on full display to the world after the liberation of the Nazi death camps. Despite American liberators witnessing these atrocities first-hand, many U.S. states maintained their sterilization laws. At home, those “great liberators” lived under judicial and legislative schemes still founded in eugenics—and were wholly unfazed.

From the 1930s to the 1970s, nearly one third of the women in Puerto Rico, a U.S. territory, were coerced into sterilization under the claim that Puerto Rico’s economy would benefit from a reduced population.⁷ In other states, Black women were likewise targeted and subjected to reproductive abuse. In the 1960s, nonconsensual sterilizations were performed so frequently on working-class Black women in the South that it was colloquially referred to as a “Mississippi Appendectomy.”⁸

In 1973, the same year that *Roe v. Wade* was decided in hopes of protecting reproductive rights, Mary Alice and Minnie Lee Relf, at ages twelve and thirteen, fell victim to the rampant practice of forced sterilization of poor Southern Black women. When their mother signed a document believing she was giving authorization for the children to receive birth control shots, the girls were instead surgically sterilized without their consent. This horrific abuse sparked the Southern Poverty Law Center to file a lawsuit on their behalf. In *Relf v. Weinberger* (1974), it was revealed that no less than 100,000 to 150,000 Black, Latina, and Indigenous women were sterilized

⁷ Isabella Long, “From Forced Sterilization to Fertility Technology: Addressing Medical Mistrust in Puerto Rico,” *Health and Human Rights*, April 21, 2025, <https://www.hhrjournal.org/2025/04/21/from-forced-sterilization-to-fertility-technology-addressing-medical-mistrust-in-puerto-rico/>.

⁸ Jack Lasky, “Mississippi Appendectomy,” *EBSCO*, 2023, <https://www.ebsco.com/research-starters/women-s-studies-and-feminism/mississippi-appendectomy>.

under government programs in the U.S. over multiple decades.⁹ Though the District Court of the District of Columbia ruled that federal funds could not be used for involuntary sterilization, and the lawsuit's exposure led to requirements for doctors to provide “informed consent” at the state level, it could not be applied nationally. *Relf* not only exposed that the precedents set by *Buck* remained even nearly 50 years later and that *Skinner* had failed to curtail the practice, but then opened the door for how doctors (and legislators) could get around the requirement for “informed consent.”

Historian Jane Lawrence highlighted this nuance when the Indian Health Service was accused of forcibly sterilizing approximately 25 percent of Indigenous women in the 1960s and 70s.¹⁰ Many of these patients would come in for ‘Operation X’ (such as a removal of an ovarian cyst) and, without their knowledge, receive sterilizing surgery as well. Alternatively, doctors would offer to perform operations for free if the patient also consented to the sterilization, leaving poorer populations even more vulnerable to this manipulation merely to stay alive. Some women were even asked to sign a permission form minutes after giving birth, while still emotional and exhausted from labor. This twisted version of “consent” set the precedent for future decades of supposedly voluntary sterilization.

These violations and warped forms of consent are hardly a relic of the past. The regulation of forced sterilization remains up to state legislatures—and while most have outlawed explicit unconsented sterilization by a non-guardian, coerced procedures, particularly in exchange for sentence reductions, occur often within the criminal justice system today.

⁹ *Relf v. Weinberger*, 372 F. Supp. 1196 (D.D.C. 1974).

¹⁰ Jane Lawrence, “The Indian Health Service and the Sterilization of Native American Women,” *American Indian Quarterly* 24, no. 3 (2000): 400-419, <https://doi.org/10.1353/aiq.2000.0008>.

In 2009, in West Virginia, a twenty-one-year-old unmarried mother of three agreed to have her tubes tied as part of her probation after she pleaded guilty to possession with intent to distribute marijuana.¹¹ Between 2005 and 2013, 144 women were coerced into sterilization in California.¹² In 2015, a Tennessee woman was sterilized as a condition of her plea deal after being charged with child neglect.¹³ And as recently as May 2017, Tennessee Judge Sam Benningfield signed an order that offered misdemeanor offenders thirty-day sentence reductions if they underwent either a vasectomy or a birth control implant.¹⁴ Although each person technically signed a consent form for these invasive (and often permanent) surgeries, when faced with incentives such as shorter or suspended sentences, it begs the question: Is this consent or coercion?

In 2020, the history of eugenics and forced sterilization resurfaced in a public outcry when the Irwin County branch of the United States Immigration and Customs Enforcement (ICE) was accused of giving hysterectomies (in which the uterus is completely and irreversibly removed) to women in their custody without their express consent. These surgeries were either completely non-consensual or occurred under the fabrication that the surgery was required for other clinical reasons. One woman claimed she was told she was having surgery to remove an ovarian cyst, and a tablet was handed to her to sign with no explanation.¹⁵ Other detained women stated they were

¹¹ Andrew Clevenger, "Judge Arranges Sterilization as Part of Charleston Woman's Probation," *Digital Point*, June 3, 2009, <https://forums.digitalpoint.com/threads/judge-arranges-sterilization-as-part-of-charleston-womans-probation.1365709/>.

¹² Mary Ellen Cagnassola, "California Coerced 144 Women to be Sterilized Between 2005 and 2013: Audit," *Newsweek*, July 7, 2021, <https://www.newsweek.com/california-coerced-144-women-sterilized-between-2005-2013-audit-1607683>.

¹³ Sheila Burke, "Attorneys: Sterilizations were Part of Plea Deal Talks," *Associated Press*, March 28, 2015, <https://apnews.com/general-news-824ffb7d2ed84849b5d87c41cdf8c0f7>.

¹⁴ Zoë Beery, "America's Long, Shameful History of Sterilizing Prisoners," *The Outline*, July 25, 2017, <https://theoutline.com/post/1963/americas-long-shameful-history-of-sterilizing-prisoners?zd=3&zi=ag52aemp>.

¹⁵ U.S. Congress, Senate, Committee on Homeland Security and Governmental Affairs, Medical Mistreatment of Women in ICE Detention: Hearing Before the Permanent Subcommittee on Investigations of the Committee on Homeland Security and Government Affairs, 2nd sess., 117th Cong., November 15, 2022.

told they would die if they did not receive the surgery. Both instances are clear violations of the requirement for obtaining informed consent and yet were done without hesitation.¹⁶

After a congressional investigation, evidence surfaced that several unnecessary, invasive surgeries, many involving sterilization, were performed on detainees and inmates. The Irwin County Center was shut down; however, no court ruling or conclusive answer was found regarding the alleged mass hysterectomies.¹⁷ These cases sparked mass outcry of comparisons to Nazi Germany and shouts of “This is not my America.”¹⁸ Yet, as with many issues of justice, this is and *has been* ‘our’ America. From the targeting of minorities, women, and vulnerable persons to the infringement of reproductive rights under false pretenses and shoddy science, this is the precedent and practice that the American justice system has set.

The ICE hysterectomies and modern-day plea deal negotiations involving sterilization expose two nuances of legal consent. In the ICE hysterectomies, although signing a waiver allowing the procedure, the women did not give informed consent to their sterilization. Informed consent can only occur when there is agreement to an interaction or action rendered with knowledge of relevant facts, such as the risks involved or any available alternatives; it is almost

¹⁶ Liana Woskie and Mindy Jane Roseman, “Contemporary Human Rights Violations in Female Sterilization Care: Legal and Ethical Considerations when Coerced Patients Do Consent,” *Monash Bioethics Review* 43, no. 2 (2025): 268-288, <https://doi.org/10.1007/s40592-025-00240-7>.

¹⁷ Dale Chappell, “Whistleblower Claims Female Detainees at Privately Run Georgia ICE Facility Had Forced Hysterectomies,” *Prison Legal News*, December 1, 2020, <https://www.prisonlegalnews.org/news/2020/dec/1/whistleblower-claims-female-detainees-privately-run-georgia-ice-facility-had-forced-hysterectomies/>; Camilo Montoya-Galvez, “Investigation Finds Women Detained by ICE Underwent ‘Unnecessary Gynecological Procedures’ at Georgia Facility,” *CBS News*, November 15, 2022, <https://www.cbsnews.com/news/women-detained-ice-unnecessary-gynecological-procedures-georgia-facility-investigation/>.

¹⁸ “Forced Hysterectomies Underscore Horrors of Immigrant Detention,” Immigrant Legal Defense, October 13, 2025, <https://www.ild.org/immigrant-legal-defense-blog/forced-hysterectomies-underscore-horrors-of-immigrant-detention>.

always required in medical procedures.¹⁹ Arguably, informed consent can also only occur when a party has equal autonomy as the party promoting the procedure.

When examining the ethics and legality of inserting sterilization as a condition in plea deals, it becomes similarly dicey. We must ask ourselves: Does the accused have the true power to consent? The laws governing the limitations for what a prosecutor can and cannot put in a plea deal are vague, but generally, “the adjudicative element inherent in accepting a plea of guilty must be attended by safeguards to ensure the defendant what is reasonably due in the circumstances.”²⁰ What is “reasonably due” in any particular case is clearly subjective; however, broadly, for a stipulation to be “reasonable,” it should 1) be rationally connected to the crime and its correction and 2) not be “cruel and unusual.” Mandating sterilization for unrelated crimes violates both of these prongs and thus seems to be a far cry from what is “reasonably due.” Moreover, using minimized sentences as an incentive for agreeing to sterilization has been deemed unconstitutional by numerous district attorneys who have banned their use in many states due to its coercive nature.²¹ Many proponents of sterilizing the incarcerated point to a lack of personal responsibility in individuals as justification. In reality, however, many of these people simply lack resources and support, like Carrie Buck.

We, as a society, have come to understand that not everyone *can* consent. The sexual assault and rape laws of many jurisdictions (however deficient their enforcement may be) acknowledge that power imbalances (statutory rape, teacher/student relationships, prisoner/guard

¹⁹ “Informed Consent,” Legal Information Institute, accessed April 8, 2026, https://www.law.cornell.edu/wex/informed_consent.

²⁰ “Plea Bargaining,” Legal Information Institute, accessed April 8, 2026, <https://www.law.cornell.edu/constitution-conan/amendment-5/plea-bargaining>.

²¹ Montoya-Galvez, “Investigation.”

relationships) can result in consent being illusory at best and non-existent at worst. Yet this analysis has not made its way into the consent surrounding sterilization.

To this day, forced sterilization is still legal in thirty-one states and Washington, D.C.²² The history of forced and coerced sterilization in the United States shows a continuity of state abuse of reproductive autonomy. Beginning as openly eugenic policies, then legitimized by landmark decisions like *Buck v. Bell*, legalized unconsented sterilization has not wholly disappeared as many would assume it has, and has instead adapted to modern legal frameworks. From the euphemistic “Mississippi appendectomies” of the mid-twentieth century to ICE hysterectomies, there is a clear pattern of marginalized groups—specifically women of color, the impoverished, and incarcerated individuals—being disproportionately targeted. These practices expose the fragility of legal protections like informed consent within systems marked by power imbalances and misinformation. In these contexts, the distinction between choice and compulsion is blurred. The bodily autonomy of women and the marginalized—never historically secured—rests on shaky foundations and generalized public ignorance of the less palatable side of U.S. history.

As, state by state, the United States rolls back the reproductive and bodily autonomy protections of *Roe v. Wade*, it is clear that the “zombie” spectre of *Buck v. Bell* lies in wait like a sleeping Leviathan anxious for one more opportunity to allow the government to abandon its principles of freedom when that freedom involves the *how, when, and who* is allowed to reproduce.

²² “Forced Sterilization Laws in Each State or Territory,” National Women’s Law Center, 2022, https://nwlc.org/wp-content/uploads/2022/01/%C6%92.NWLC_SterilizationReport_2022_Appendix.pdf.

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