In *Facing Eugenics*:* Reproduction, Sterilization, and the Politics of Choice*, Erika Dyck constructs a social history of the Alberta sterilization program. Each chapter revolves around a case study that illustrates the deeper political undercurrents to reproductive choice in Canada. The author intends the work to locate “the Canadian experience within these broader trends while focusing on how these issues played out for individual Albertans” (20).

The first substantive chapter explores Nora Powers’s narrative, which predates Alberta’s sterilization legislation. Powers was arrested in southern Alberta after leaving her family and engaging in what was deemed immoral behaviour for going home with a man with intent to engage in sexual intercourse, and she consequently served a six-month sentence for vagrancy and prostitution. Dyck notes that Powers was diagnosed as a mental defective and Louise McKinney, a member of the Famous Five and proponent of the Canadian first wave feminist movement, encouraged the attorney general to reframe the case as medical rather than criminal. This chapter considers the foundations of what would become the provincial eugenics program—the mental hygiene movement furthered by a number of disparate political factions, including and especially early feminist reformers who “linked poverty and reproduction…explicitly with feeble-mindedness” (51).

In the chapter that follows, Dyck recounts the case of George Pierre, an Aboriginal man who was diagnosed with catatonic schizophrenia and mental defectiveness, and was approved for sterilization while the Alberta Sexual Sterilization Act was in effect. Broadly, the program did
not target First Nations and Metis communities given reserves geographically and politically fell outside the bounds of medical surveillance and public perception regarded Aboriginal populations to be already in a state of natural decline; nevertheless, “colonial elements of degeneration, inferiority, and assimilation remained deeply embedded in [the eugenics program’s] practices” (83). Colonial attitudes were especially reflected in the Eugenics Board’s insistence that family history and confirmation of nationality be diligently recorded and factor into determinations of mental capacity and recommendations for sterilization.

The author spends chapter three considering the impact of the eugenics program on white middle class women, including Famous Five member Irene Parlby who wrote about her hysterectomy procedure. Concerns were raised within the medical community when women sought to be sterilized during Caesarean sections and cyst and tumour removals, thereby expanding the options available to them to control their reproductive systems. Says Dyck on the backlash to this trend, these women were condemned for running “the risk of developing a psychiatric disorder due to the stress of the procedure, its permanence, and its implications for degrading natural womanhood” (93).

The proceeding chapter addresses where men fit into Alberta’s eugenics era, ranging from those who were involuntarily castrated to those who took advantage of the law in order to have vasectomies for contraceptive purposes. Sterilized while the Act was in effect, Ken Nelson was a key advocate who sought compensation from the provincial government. Despite his efforts, Dyck notes that Canadian scholarship has not focused a great deal on the eugenics program’s impact on men, or its influence on changing attitudes about masculinity. The author argues that while on the one hand sterilization “was seen literally and metaphorically to emasculate men”, on the other the procedure afforded sexual freedom, espousing the modern conceptualization of
masculinity that “tapped into the changing nature of control, discipline, and perhaps even a new version of courageous manhood” (140).

Dyck next tells the story of Doreen Befus, a twin daughter who was orphaned when her immigrant parents could no longer afford her care. While institutionalized for over 40 years Befus was diagnosed a moron and sterilized, but the chapter focuses on the years she spent reintegrating into her community and engaging in activism. Studying Befus’s donated diaries, Dyck considers how they were not used as “a secret repository for her innermost thoughts or intimate feelings”, indicating that medical surveillance may have carried over from the institution into the community: “perhaps Doreen had grown so accustomed to life under surveillance that she had not developed a habit of expressing such intimate thoughts and feelings. Her every move and utterance had been subject to scrutiny” (155).

In chapter six, the author concentrates on a key figure in the history of the program: Leilani Muir, who first successfully called public attention to eugenics law by suing the Government of Alberta for her wrongful sterilization. Dyck characterizes Muir’s upbringing, including a physician’s persistent efforts to see Muir committed to an institution as well as his disregard for the ways in which poverty affected her intelligence scores and psychological diagnoses: “Questions about family income were limited to determining its ability to pay, rather than considered in relation to the descriptions of abnormal behaviour” (178). The author considers LEAF’s (or the Women’s Legal Education and Action Fund) involvement in the case and the organization’s struggles with how to frame the case: “an argument for systemic discrimination and a rallying cry for collective feminism dissolved” (195). It would seem that a common theme running through Dyck’s work is the claim that even feminisms have failed to find overarching narratives to frame the eugenics program and those affected by it.
In her closing substantive chapter, Dyck links the eugenics movement to early abortion law, grounding her analysis in 15-year-old pregnant Jane Doe’s experience when facing the Therapeutic Abortions and Sterilization Committee. The author compares the decision-making of this committee with that of the previously established Eugenics Board: “rather than usher in a new discourse on reproductive rights and choices, the medical profession returned to an older set of attitudes that blamed women and combined elements of sexuality with accusations of immoral” (207). These old standards still associated women seeking abortions with psychiatric diagnoses.

In sum, Dyck claims this history differs from others on the subject to the extent that she investigates conditions that extended beyond the legislative divide other histories have drawn: the time the Alberta Sexual Sterilisation Act was in effect, and the post-eugenics era following its repeal. She argues: “As I have attempted to illustrate by the cases in this book, the politics of reproduction often spill outside the confines of legislation” (229). Not taking any legislative benchmark for granted, the author is careful to build a social history of Alberta’s eugenics program, one situated in a nuanced and fluctuating political context, one which renders a range of social groups complicit.

Hers is a careful social history that contributes to work being done to construct overlooked or absent historical accounts of disabled persons. Projects like these are of vital importance because, as Baynton claims, “Disability is everywhere in history, once you begin looking for it, but conspicuously absent in the histories we write” (2013, p. 30). Baynton goes on to argue that even in the field of social history, in efforts to write gender or race into history books, these endeavours have been accomplished to the detriment and at the expense of disabled persons, whether through the erasure of disability or its dismissal as metaphor.
So disability historians have turned to archival evidence to tell stories about individuals in response to studies on madness and psychiatry where medical rhetoric and perspectives have glossed over the persons affected. When writing a social history about people who lived out their lives in a Toronto mental institution, Reaume claims his motivation was to present his historical subjects “as individual human beings who deserve to be understood on their own terms as people rather than labels, free from the clutter of medical terminology and diagnostic categories that has too often served to obscure” (2000, p. 5). And in an early exploration of the Eugenics Board’s archival records, Park and Radford explain: “Historical examination of the sterilisation issue has rarely extended beyond the general level to focus on individual cases. …Yet it is only through close analysis of [individual] records that we can really understand the fundamental rationales governing policy and praxis” (1998, p. 321). Reconstructed personal stories can function as a prism for understanding the implications to and affects of larger political and social conditions. They can also reflect a political choice, where the persons whose stories are told become acting historical subjects, not merely objects of study; and history does work, has purpose, to unearth the forgotten.

*Facing Eugenics* is a history grounded in intimate portrayals of impacts. With each chapter’s focus on a particular person, the issue of eugenics is framed as decidedly human. Dyck moves from scant to copious extant source material throughout the course of the book, her depictions becoming increasingly more detailed, all the while doing her best to find the victim’s perspective. She is clear when she can be about when they resisted and how they took up the violence they experienced. Perhaps especially troubling, though, is how difficult resistance becomes when a social context produces, shapes, and hems in not just choices but entire subjectivities, as was the case in the development of a concept of masculinity, and the surveillance of Befus ex-
tending beyond institutional walls. Further, it is most disheartening to read that throughout the history of the eugenics era, and even creeping into more recent times, the response to resistance has been to assign diagnoses of mental defect: to call into question Nora Powers’s mental hygiene when she left behind a family, to assume women like Irene Parlby who sought out hysterectomies were risking disorder. I would suggest that this complicated history, one that is both sweepingly macro and intimately micro, is not only well worth reading but also our responsibility to remember.

References

