Native American Growing Fight

Against

Sterilizations of Women

by Andrea Carmen

"As the Cheyenne will tell you, the strength of the Indian Nation is in their women. No matter how straight your arrows, no matter how brave your warriors, no nation is defeated until the hearts of the women are on the ground."—Dr. Connie Uri

There is mounting evidence that the U.S. government is currently engaged in a genocidal campaign designed to rid itself of the Native people. The weapons in this campaign are not the guns and epidemics which nearly accomplished this in the 19th century. Instead, the U.S. government, through the Indian Health Services and affiliated programs, has been performing forced and uninformed sterilizations on Native people in ever-increasing numbers over the last few years. Lee Brightman, United Native Americans President, estimates that of the Native population of 800,000, as many as 42% of the women of childbearing age and 10% of the men have already been sterilized.

Recent information supports this estimate. The first official inquiry into the sterilization of Native peoples was made three years ago by Dr. Connie Uri for then-U.S. Senator Abourezk (D.-South Dakota). Dr. Uri reported that 25,000 Indian women had been permanently sterilized within Indian Health Service facilities alone through 1975. All reports indicate that sterilization of Native people is on the increase. In a study done at Claremore, Oklahoma, 132 Native women were sterilized during 1973. At the same hospital, 52 Native women were sterilized in July, 1974 alone. There is some information that full-blood Indian women are being singled out, although a concrete study of this has yet to be done. Native sources report that there is one tribe in Oklahoma in which there are no full-blooded women who have not been sterilized.

In 1974, HEW provided firm guidelines for sterilization, known as the informed consent regulations. However, Dr. Uri reports that sterilizations performed on Native women were in violation of these guidelines, even though most were performed in government-operated and funded hospitals and clinics. The informed consent regulations state that no woman can be sterilized sooner than 72 hours after delivery and that the patient must be given a fair and understandable explanation of the operation, its effects, dangers, and its irreversible nature. HEW further stated that the patient must be told (and this must be written in large letters at the top of the consent consent form) that no welfare or other benefits can be withheld as punishment for refusing sterilization. The consent form must be signed in the presence of a witness chosen by the patient, and the patient can change her mind at any time regardless of whether a consent form has been signed. HEW also initiated a moratorium on sterilizations of women under 21 years of age. Non-compliance with these procedures is a violation of federal regulations. Although numerous violations were discovered by Dr. Uri and other studies, no individuals or clinics have been penalized in any significant way.



The true extent of the violations of informed consent procedures in the sterilization of Native women is only recently coming to light. Few studies have been done, and Native women are reluctant to discuss sterilization publicly. Hospital records are often incomplete or "lost", and many women do not discover until months or years pass what has really been done to them. But growing numbers are relating instances of sterilization violations.

Lee Brightman, whose growing concern over the sterilization abuse of his people may lead to a lawsuit against the Indian Health Services, discussed the findings of his visit to the Rosebud Reservation in South Dakota. In only a week's time, Brightman located seven young Native women who had been sterilized unknowingly, unwillingly, or on the basis of misinformation. He reports that two of these women went in to the Indian Health Services Hospital on the Reservation to have their appendixes came out without ovaries. One sixteen year old girl, emerging from anesthesia after delivering her first baby, was told that she "was fixed so that she wouldn't have more kids until she was eighteen." She is now 21, married, and has not conceived. Although the hospital has no record on her, it appears that she was sterilized.

Another young woman entered the hospital with an ovarian cyst and was convinced that she should have a hysterectomy (a complete removal of the reproductive organs), although common medical practice limits the treatment in such cases to removal of the cyst. Another young woman was sterilized right after childbirth while still drugged because her mother, convinced by the doctor that her daughter (a healthy young woman) would die if she attempted to have more children, sighed a consent form on her daughter's behalf. The mother had recently been persuaded to undergo sterilization herself on a similar pretext.

Rather than being unfortunate "slip-ups", Brightman is convinced that these and other instances of sterilization abuse are a conscious part of the U.S. government's "genocidal campaign against the Indian". Government hospitals use lies, scare tactics and misinformation to coerce Native women to undergo sterilization.

It is clear that Native people, although targets o particularly concerted effort, are not alone as victims of sterilization abuse. Within the U.S. and around the world, U.S. governmental and private interests are waging a battle against people of color, in which sterilization is a major weapon. Since 1966, HEW has been funding sterilizations for poor women, promoting it over other forms of birth control. Although HEW did not keep accurate records before 1973, it estimates between 100,000 and 200,000 that in 1973 alone, poor women were sterilized in the United States. While the money for HEW-financed child care centers, Head Start programs, and community health care centers and programs has been cut in recent years, the budget for "family planning" increased from \$51 million to over \$250 million in the period 1969-1974.

Racism and Sterilization

The racist underpinnings of the population control movement date back to the turn of the century when organizations formed to promote birth control among the "undesirables": the immigrants from Southern Europe and later groups such as Blacks, Asians and Mexicans. In 1945 a bill was in Congress calling for the sterilization of all Japanese-American women. The bill was defeated by only one vote. According to a 1970 fertilization study, 20% of married Black women had been sterilized, almost three times the percentage of white married women. There was a 180% rise in the number of sterilizations performed during 1972-1973 in New York City municipal hospitals which serve prediminately Puerto Rican neighborhoods. It appears that sterilization of minority and poor women is a major, unpublicized weapon in the U.S. Government's domestic "war on poverty". The government doesn't emphasize long-term self-help programs or increasing educational and health care benefits to promote development of the poor. Instead it is perpetuating the old Malthusian doctrine that poverty results from too many people. Those who benefit from the capitalist system of unequal opportunity and distribution further promote the fallacy that too many children are responsible for poverty, rather than the economic system itself. It is interesting to note that much of the research into population matters and birth control is funded by groups such as the Rockefeller Foundation, Planned International Parenthood (Rockefeller-controlled), the Population Council and the Ford Foundation.

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Sterilization Around the World.

The scope of the U.S. Government and corporate interest's sterilization becomes even more ominous when considered on a global scale. Puerto Rico has the highest incidence of sterilization in the world. At least 35% of Puerto Rican women of childbearing age have been sterilized through programs largely funded by the U.S. Government. In Columbia, between 1963-1965, Rockefeller funded programs sterilized 40,000 women who were coaxed by gifts of lipstick, artificial pearls, small payments of money and by false promises of free medical care (Population Target, Monnie Maas, 1976). In many foreign countries, the U.S. Government finances population control projects through the Agency for International Development (AID). This money is being used for the testing of often dangerous sterilization techniques for use at home and for use by repressive governments against "troublesome" ethnic groups. While AID has increased money for training police in counter-insurgency tactics and medical personnel in sterilization techniques, it has reduced money given for education, health and agricultural development.

Economic Motivations

When these facts are added up, the issue of sterilization within and outside the U.S. takes on a new meaning. The issue is more than one of the denial of women's rights or one of mindless racism. The economic motivations behind the push for sterilization are becoming increasingly clear: they are part of an attempt to secure the world's resources for the already priviledged capitalist class. This is one obvious purpose behind the escalation of sterilizations in the Native population. Certainly, overpopulation cannot be used as an excuse, since the entire Native population totals only 2/5 of 1% of the U.S. population. Rather, if the present trend is not reversed, the Native people are in grave danger of extermination. In fact, according to Lee Brightman, the sterilization campaign is nothing but an "insidious scheme to get the Indian's land" once and for all. In the U.S., approximately 55% of the unmined uranium, 30% of the unmined coal, and an undisclosed amount of oil, copper, timber and other resources is on Indian land. Recent attempts to wrest the land from Native people through federal legislation repudiating previous agreements is only one side of the attack, Brightman believes. "By killing off the unborn, the government will have no more need for such legislation," he asserts. "There will be no more Indians to hold the land."

Fearing public outcry, the U.S. Government has kept its Native politics unpublicized. Yet as this information slowly comes to light, the Native people can expect support from wide sectors of the population. Recently, the feminist reproductive rights movement has joined with third world people in the struggle against sterilization abuse. Court cases are being fought and abuses are being uncovered as women gain the confidence to come forward. More speed and public support will be needed, however, if the powerful forces motivated by a desire to accumulate and control are to be stopped and the Native people are to be allowed to survive.