Cognitive Ableism and Disability Studies: Feminist Reflections on the History of Mental Retardation

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This paper examines five groups of women that were instrumental in the emergence of the category of "feeblemindedness" in the United States. It analyzes the dynamics of oppression and power relations in the following five groups of women: "feeble-minded" women, institutional caregivers, mothers, researchers, and reformists. Ultimately, I argue that a feminist analysis of the history of mental retardation is necessary to serve as a guide for future feminist work on cognitive disability.

From the time idiocy became a focal point in the mid-nineteenth century through the eugenic fervor surrounding the "feebleminded" in the period leading up to World War I, both men and women were placed in the new schools and asylums for "idiots," both were given IQ tests and placed in special educational programs, and the various categories of feeblemindedness (idiots, imbeciles, morons, moral imbeciles) were applied to both. At first glance, it seems that the discourses and practices regarding the "mentally retarded" affected men and women equally. Upon closer examination, however, the role of women in the history of mental retardation emerges as a complex and important one.

There are many histories of mental retardation from a variety of perspectives: general histories (Kanner 1964; Scheerenberger 1983), institutional histories (Tyor and Bell 1984; Trent 1994), a history of the "severely retarded" (Ferguson 1994), and a history of institutions for the "feeble-minded" in the Deep South (Noll 1995). However, a comprehensive history of mental retardation written specifically about women has yet to be composed. In light of historical evidence

that women were classified and treated differently, that gender stereotypes influenced definitions and institutional practices, and that non-disabled women figured significantly into this history, a feminist analysis of mental retardation is necessary for a number of reasons. First, it is an attempt to theorize explicitly the various positions that women have occupied in this history. Second, it is important to understand the ways in which mental retardation functioned as a gendered classification.[1] Finally, by examining the different roles women played in the history of mental retardation, multiple forms of oppression and power relations between groups of women emerge.

Iris Marion Young identifies five faces of oppression: exploitation, marginalization, and powerlessness (which all deal with the social division of labor); cultural imperialism; and violence. She explains that they should be understood as applying to "social groups," not to atomistic, autonomous individuals. She defines a social group as "a collective of persons differentiated from at least one other group by cultural norms, practices, or way of life. Members of a group have a specific affinity with another because of their similar experience or way of life" (Young 1990, 43). In what follows, I will use Young's concepts of marginalization, exploitation, powerlessness, and cultural imperialism to examine five groups of women that were central to the development of mental retardation as a category: "feebleminded women," institutional caregivers, mothers, researchers, and reformists.[2]

Insofar as the history of mental retardation is one dominated by institutional discourse and practices, it is also important to discuss the complex power relations that existed between individuals, groups, and institutions. Michel Foucault's "histories" (1979; 1988; 1990; 1994) and his explicit discussions of power (1983) provide a lens through which to understand the complex dynamics between these groups of women, dominant discourses regarding both gender and feeblemindedness, and social practices. For Foucault, power is relational. While he does not deny that individual agents are involved in power relations (Foucault 1983, 217), he argues that an analysis of power relations *cannot be reduced to* the acts and motives of a particular individual (1990, 95). Power relations are inevitable and "rooted deep in the social nexus" (1983, 222–23), but they are not necessarily oppressive. Domination is one form, for instance, but there are many ways in which "certain actions may structure the field of other possible actions," some of which give rise to forms of resistance (Foucault 1983, 220; 1990, 96–97). While this analysis will draw primarily upon dominant discourses in the history of mental retardation, an examination of the history of mental retardation "from below," bringing to light the many modes and instances of resistance, is equally important (Johnson 1998).

Though Young acknowledges her debt to Foucault (Young 1990, 31–33), it would be a gross oversimplification to conflate her theory of oppression and Foucault's concept of power. However, insofar as they explicitly reject an

approach that reduces complex relations to a unidirectional, dyadic structure of ruler and subject, their theories work well in tandem to untangle the web of power relations that emerge through a feminist re-reading of the history of mental retardation.

"Feebleminded Women": A Prototype Effect

Mental retardation never became a "female malady" in the way that hysteria and other mental illnesses have become associated with women and feminine characteristics (Chesler 1983; Showalter 1986). However, in the first decades of this century, the "feebleminded woman" became representative of the nature and dangers of the category of feeblemindedness as a whole. This was largely due to the intersection between conceptions of feeblemindedness and stereotypes of femininity. By virtue of her membership in two socially defined groups— women and the "feebleminded"—the "feebleminded woman" was singled out as a perversion of the former group and a symbol of the latter.

Beginning in the late nineteenth century, there emerged a distinctly gendered class of "mental defectives" who received the attention of doctors, superintendents, legislators, and philanthropists: the "feebleminded woman." Evidence of the preoccupation with this new group can be found in numerous places: in written documents concerning the nature of feeblemindedness (Rosen, Clark, and Kivitz 1975); in the meetings of the American Association for the Study of Feeblemindedness, now the American Association on Mental Retardation (Sloan and Stevens 1976); in the legislation which passed and provided funds to research and build institutions for these women; and in the number of custodial facilities built explicitly for women (Trent 1994, 69–77). What accounted for this new concern with "feebleminded" women? Why were discussions of gender virtually absent from discourse about mental deficiency until the late nineteenth century?

The emergence of this female class would not have been possible without the new category of "moral imbecility" which, in its early forms, was usually male. As Trent explains, "A decade after the war the discovery of female moral imbeciles, whose moral imbecility included the ability to bear illegitimate children, added a new urgency to the type" (1994, 23). This category quickly became prominent because it was closely linked with crime, pauperism, and degeneracy; hence, "moral imbeciles" were considered a menace to society (Rosen, Clark, and Kivitz 1975, 308). Furthermore, there was the added danger that, because of their higher mental functioning, "moral imbeciles" could pass for normal and thus go undetected. Thus, the "high-grade" forms of feeblemindedness, particularly those associated with *moral* deficiency in its female incarnation, became representative of the dangers of feeblemindedness generally.

The belief that feeblemindedness was hereditary contributed greatly to the new focus on the "feebleminded woman." If mental deficiency was transmissible from one generation to the next, then it was of utmost importance that the "feebleminded" not be allowed to procreate. Women, as the symbols of procreative power, were particularly dangerous. Walter Fernald (the superintendent for the Massachusetts School for the Feebleminded from 1887 to 1924) stated in 1893, "There is hardly a poorhouse in this land where there are not two or more feebleminded women with from one to four illegitimate children" (Sloan and Stevens 1976, 26). By 1912, he had made the link between feeblemindedness and immorality in women definitive: "Feebleminded women are almost invariably immoral and if at large usually become carriers of venereal disease or give birth to children who are defective as themselves. The feebleminded woman who marries is twice as prolific as the normal woman" (Sloan and Stevens 1976, 76).

What is striking about the concern with the dangers of *female* feeblemindedness is the way that Victorian feminine stereotypes influenced the classification and treatment of these women. In his article "Denied the Power to Choose the Good: Sexuality and Mental Defect in American Medical Practice, 1850–1920," Peter Tyor argues that "nineteenth century sexual norms and gender roles encouraged physicians to treat deviant female sexual behavior as evidence of mental retardation which warranted stringent measures of social control" (Tyor 1977, 473). Stereotypical views of female vulnerability only added to the need to protect this class. In Fernald's words, "a feebleminded girl is exposed as no other girl in the world is exposed. She has not the sense enough to protect herself from the perils to which women are subjected" (Tyor 1977, 482). The problem was not simply the moral deficit in the female "moral imbecile"; by virtue of her womanhood, she was even more vulnerable and in need of protection.

Though this group needed protection, society also needed protection *from* them; thus, a steady campaign began to segregate these women in all-female institutions, and to separate women from men in already existing asylums. The first custodial facility for women was built in New York in 1878, and many followed. In 1905, four state governors recommended increasing the facilities for "feebleminded" girls or women of childbearing age (Sloan and Stevens 1976, 65).

A number of factors played a role in the construction of the "feebleminded woman" as a prototype[3]: the emergence of moral imbecility as a representative sub-category that allowed for the focus upon the immorality of women in particular; the emphasis on heredity and procreation which made the segregation and retention of women paramount to avoid the spread of feeblemindedness; and the prevailing sexual stereotypes of women as passive, vulnerable procreators. In the creation of the "feebleminded woman" as prototypical, we

see the consequences of being identified in two overlapping social groups that are oppressed.

The "feebleminded" would qualify as a social group according to Young's definition. She distinguishes a social group from an "aggregate—any classifica-tion of persons according to some attribute," and argues that while the aggregate model views the individual as ontologically prior to the collective, social groups "constitute individuals" insofar as one's identity is derivative from them (1990, 43). It would be difficult to reduce the "mentally retarded" to one common attribute; the many definitions and explanations for "idiocy" and "feeblemindedness" reflect a complex social process by which this group was picked out (Carlson 1998). Furthermore, their segregation within institutions, the direct effect their classification has had on the education and treatment they received, and the lack of agency and control they have had over their lives, are all evidence that in a very real sense, their identities have been shaped by their membership in the group labeled the "feebleminded." Young also states that each oppressed group does not necessarily have a corresponding oppressing social group (1990, 41). However, she does say that every oppressed group has a corresponding *privileged* group, which will become equally clear in the examination of the remaining four groups of women. Given that the "feebleminded" represent a social group according to Young's definition, in what ways were "feebleminded" women oppressed?

Young states that, "To experience cultural imperialism means to experience how the dominant meanings of society render the particular perspective of one's own group invisible at the same time as they stereotype one's group and mark it out as the Other" (1990, 58–59). Women labeled "feebleminded" suffered cultural imperialism at a number of levels. The dominant patriarchal stereotypes of (white, middle-class) women as passive, vulnerable, procreative vessels were applied to "feebleminded" women as well, and in fact justified their incarceration. At the same time, the great importance placed on mental ability and "proper" sexual conduct rendered them invisible, not just insofar as it did not allow them to express their particular perspective, but in the physical sense. The institutionalization of "feebleminded" women marginalized them, making them completely socially invisible.

In addition to her prototypical status and her oppression as a member of two social groups, we also see in the "feebleminded woman" the instability of this classification. As Tyor rightly suggests, it was sexual misconduct (that is, birth of an illegitimate child) that became the new "sign" of feeblemindedness; the "feebleminded woman" as a new recognizable type emerged simultaneously with a new diagnostic method (1977, 473). The boundaries which defined the very nature of feeblemindedness were highly permeable: in its female form, the definition and detection of "feeblemindedness" was inseparable from dominant moral codes and expectations.

INSTITUTIONAL CAREGIVERS: THE PARADOX OF INMATE LABOR

From their birth in the 1840s, the earliest American educational institutions for "idiots" relied upon female labor. Edouard Seguin, the French educator and psychologist whose work at Bicêtre and the Salpétriere in France inspired the first educational facilities for "idiots" in the United States (Trent 1994; Talbot 1964), was explicit about the importance of women working in the institution as attendants, teachers and matrons. The female employee must be a gentle, caring woman, and given that her nature cannot go beyond that, must defer to the male scientific authority when she runs into trouble (Seguin 1910, 190). Seguin suggests that science is beyond a woman's reach, but her propensity to care, nurture, and provide charity made her a perfect candidate for attending to those in need.

The fact that these institutions, from their inception, exemplified the gender roles of the times is hardly surprising. Yet there is another feature of the institution that makes this fact far more interesting: the use of inmate labor also conformed to these norms. The caregiving, nurturing attendants (mostly female) were not the only women playing that role in the institution; the female inmates themselves were responsible for caring for other, more severely "feebleminded" patients. While the men worked on the farm (many institutions were on large pieces of farmland) and did manual labor, "feebleminded" women learned basket weaving, sewing, and nursing, and most importantly, they cared for the low-grade idiots and imbeciles. As Fernald stated, "Many of these adult females, naturally kind and gentle, have the instinctive feminine love for children, and are of great assistance in caring for the feeble and crippled children in the custodial department" (Rosen, Clark, and Kivitz 1975, 325). What is remarkable about the employing of *feebleminded* women to care for other inmates, as Fernald's statement illustrates, is that the very women who embodied these quintessential female traits were the same women who had given birth to illegitimate children, were considered the "paupers of paupers," and were thought to have perverted the sexual behavioral norms expected of women. Though in need of segregation and protection by virtue of her deficient intellect and moral faculty, the "feebleminded" woman's caregiving nature remained intact.

It was not simply that within the protective facility, "feebleminded" women could lead worthwhile lives. There were two competing definitions of her very nature: on the one hand, she was inherently morally defective and the birth of an illegitimate child proved her feeblemindedness; on the other hand, she was seen as able to properly care for children—presumably in a morally acceptable fashion—which is why she was employed within the institution. Paradoxically, the same women who had perverted the virtues of feminine purity and mother-hood in the outside world were called upon to use them within the walls of the

institution. The mothering role played by these women was in part justified by the infantilization of the "feebleminded" which has been a constant feature of this classification. If all of the adults and children housed within the institution are thought of as children, then it is only natural that they need a mother to care for them. The following statement by the superintendent of the Indiana School captures this double vision of the childlike and feminine qualities of the feebleminded: "Most appealing of all the touching sights in an institution, is to see the tenderness and patience exercised by a big overgrown man-baby or woman-baby, towards a tiny child-baby when put in their care. The maternal instinct is almost always present, and is often as strong in the males as in the females; fortunately for them and for us it is much stronger than the sex instinct (Trent 1994, 104–5). Here we find a complex blend of definitions and stereotypes: the high-grade feebleminded woman (men, too, have this potential) is at once maternal, childlike, and asexual. The pathological sexual instincts which defined these women as "moral imbeciles" and sanctioned their admittance into the institution have disappeared, and we are left with the touching sight of a woman-baby caring for her child-baby.

The use of feebleminded labor within the institution served a far more insidious purpose than teaching and training these women for rehabilitative purposes. The rhetoric of educability and reform simultaneously created and fulfilled the need for institutional labor, and ensured that the institution could remain a self-perpetuating mechanism.[4] Thus, the female "moral imbecile" came to the forefront precisely at that time when the custodial institutions needed her most. Caught in a complex web of stereotypes, rhetoric, and institutional needs, female inmates were viewed simultaneously as caregivers fulfilling their "natural maternal instincts," and as intellectually and morally deficient children. The rhetoric of heredity and menace ensured that they would play the role of "woman-baby" in the institution for the rest of their lives. As the ineducable and dangerous "moron" became prototypical, greater numbers of men and women were being trained to become a permanent labor force in the institution (Trent 1994).

In addition to interpreting the use of inmate labor from the perspective of institutional exigency, we can also analyze it in terms of its oppressive nature. The first three faces of oppression Young defines all deal with the social division of labor, and all are at work within the institution: "feebleminded" women as a group were exploited, marginalized, and powerless.

Drawing upon the Marxist notion of exploitation, Young states: "The central insight expressed in the concept of exploitation . . . is that this oppression occurs through a steady process of the transfer of the results of the labor of one social group to benefit another" (1990, 49). The "feebleminded woman" was exploited insofar as the benefits of her institutional labor were transferred to others. The "low-grade" inmates clearly relied upon her care, but it was the

institution that presided over her like a great paternal figure that ultimately benefited. Her labor served the needs of the very structure that limited her freedom. Thus, in addition to exploiting the "feebleminded" woman, the institution contributed to her marginalization.

The "feebleminded" as a class (men and women) were clearly marginalized: their segregation within institutions was a sign of their lack of productivity and inability to contribute to or enhance society. As a result, they were subjected to material deprivation, which "blocks the opportunity to exercise capacities in socially defined and recognized ways" (Young 1990, 54). However, *within* the institution, *because of their marginalization*, they were able to be exploited. The institution provided for basic needs precisely so that the "feebleminded" *could be trained and expected to* "exercise capacities in socially defined and recognized ways." There are multiple layers of oppression at work here, and we can see the interrelation between marginalization and exploitation in the dynamics of institutional and extra-institutional definitions of feeblemindedness.

Young defines the "powerless" as "those over whom power is exercised without their exercising it; the powerless are situated so they must take orders and rarely have the right to give them" (1990, 50). Perhaps because Young discusses powerlessness primarily in terms of the power relations between professionals/non-professionals, her notion of powerlessness does not accurately describe the power relations within the institution. Furthermore, the hierarchical nature of this model (that is, rulers/ruled) is at odds with a Foucauldian notion of power as coming from multiple points and with the possibility of resistances (Foucault 1990, 94–96). To avoid confusion, I will discuss Young's concept of powerlessness in terms of authority (the ability to give orders, make rules and decisions, occupy a respected professional role), and what I call "practical power": performing labor which does not grant one authority (in the above sense), but allows one to affect the lives of others directly. I find this distinction helpful in analyzing the power relations at work in the institution which are not captured by Young's definition of "powerlessness."

Both "feebleminded" and "non-feebleminded" female caregivers lacked authority with respect to the dominant male superintendents, and both were exploited for their "feminine labor." Nevertheless, there was an important difference in the oppression of "feebleminded" women as opposed to that of their non-disabled counterparts: the paid female attendant did have authority over the "feebleminded woman-baby" who cared for the more severely disabled. "Feebleminded" attendants were in a position of practical power, however. They were able to directly affect the lives of the "low-grades" that they took care of. As Trent says, "the attendant, not the educator or the physician, was, in fact if not in rhetoric, the most crucial actor in the lives of inmates after 1890" (1994, 129). Though the many "feebleminded" women who occupied this role may not have had the authority granted to non-disabled attendants

and superintendents, it would be an oversimplification to say that they were completely powerless.

The use of inmate labor puts into relief the multiple forms of oppression at work in the institution: exploitation, marginalization, cultural imperialism, and various degrees of "powerlessness" with respect to authority and practical power. And depending on her place within and without the institution, the very *nature* and *status* of the "feebleminded woman" changed.

Women as Mothers: The Role of Etiology

Women have played a role as both inmates and employees of the institutions for the "feebleminded"; they have been painted as both dangers and saviors because of their femininity. I will now turn to the ways that women *as mothers* were portrayed as responsible for feeblemindedness. The history of mental retardation reveals a preoccupation with mothers in particular, and the image of the "bad mother" played an important part in explaining feeblemindedness.[5]

The concept of a "good feebleminded mother" did not exist in the early decades of the twentieth century. According to the hereditarian view of feeble-mindedness, "feebleminded" women were likely to spread their tainted germ-plasm on to their offspring. In the words of Walter Fernald: "[High-grade female imbeciles] are certain to become sexual offenders and to spread venereal disease or to give birth to degenerate children. Their numerous progeny usually become public charges or diseased or neglected children, imbeciles, epileptics, juvenile delinquents, or later as adult paupers or criminals" (Sloan and Stevens 1976, 76–77). Insofar as "feebleminded" women were seen as directly responsible for producing "degenerate" children, any woman who was "feebleminded" and chose to procreate represented a "bad mother." "Feebleminded mothers" were also symbols of promiscuity and careless procreation. This can be seen clearly in the fact that giving birth to an illegitimate child was considered *proof* of feeblemindedness. As discussed earlier, this justified the incarceration of many of these women who, ironically, were then put to work as surrogate mothers caring for "low-grade" inmates within the institutions.

Thus, the "feebleminded woman" was the quintessential "bad mother" in two respects: she symbolized careless and immoral procreation, and represented the danger of spreading tainted germplasm to one's offspring. Yet this image of the bad mother, embodied by the "feebleminded" woman, could be applied to non-disabled women as well.

The image of the "feebleminded" mother as an immoral, careless procreator was countered by the myth of the good, non-disabled mother whose vigilance would prevent her from having a "feebleminded" child. Though there was concern about feebleminded men reproducing, the fact that women were the carriers of children and gave birth to them was not an unimportant fact. Many

doctors argued that the state of the mother during intercourse "has much power in the formation of the foetus, both in modifying its physical constitution and in determining the character and temperament of its mind" (Gordon 1976, 122). Thus, non-disabled women, *as mothers*, were considered crucial to the prevention of feeblemindedness.

Linda Gordon describes the double standard which was operant at the time: "the very attitudes that were attacked in women—social ambition, desire for wealth—were applauded in men. . . . In order to preserve the 'race' nature had ordained not only a division of labor but an ultimate division of values as well, that required of women *absolute selflessness*" (1976, 140). Thus, a cult of proper motherhood developed. Mothers were expected to be vigilant at every stage in order to prevent feeblemindedness in their offspring; in proper procreative habits, low stress and appropriate care during pregnancy, and attentiveness to signs of idiocy postnatally. However, though *all* women, from cities or villages, upper or lower class, were at risk, be it from their tainted ancestry, the poor choice of an afflicted mate, or the unfortunate consequences of their drive for emancipation, the "feebleminded" woman still symbolized the prototypical threat.

The female potential to mother played a significant role in the etiologic arguments surrounding feeblemindedness. Both "feebleminded" and non-disabled women could be the cause of feeblemindedness. For the latter, being a "good mother" (that is, preventing feeblemindedness) meant constant vigilance. Pregnant women were responsible for ensuring a healthy environment, physically and mentally, for the baby in the womb. Mothers of newborns were taught to watch for signs of idiocy, and were urged to give the proper love and attention to avoid adverse consequences. The backlash against the women's movement advocated the selfless duty of women to bear and raise children, and so-called "liberated" women were warned that they could bring about the birth of a feebleminded baby. Finally, the utmost care was required in selecting one's mate and in investigating one's ancestry, given the hereditary nature of feeblemindedness. At the level of etiology, then, the entire social group of women— "feebleminded" or not—was indispensable to an understanding of feeblemindedness, and was implicated in its perpetuation.

FEMALE RESEARCHERS: PEDIGREE STUDIES AS "WOMAN'S WORK"

As with many conditions past and present, different techniques of detection produced new "types" of feeblemindedness.[6] One technique, which became popular along with IQ tests in the first decades of this century, was the pedigree study. Family histories would be traced in order to confirm the feeblemindedness of a particular individual, and for the general purpose of studying its hereditarian nature.

Numerous pedigree studies were done on "defective families" from the late nineteenth century into the 1920s, and thousands of women were employed in this new means of gathering knowledge about feeblemindedness (Hasain 1996, 82). By virtue of their social status and their position as field workers, many women were able to make tangible contributions to both conceptual and institutional developments. However, the fact that women occupied the role of the researcher is not incidental. As with the institutions, the division of labor in this new method of generating knowledge about feeblemindedness ran along gender lines.

As Nicole Hahn Rafter points out in her collection and analysis of pedigree studies entitled *White Trash: The Eugenic Family Studies, 1877–1919* (1988), field work was an opportunity for women to partake in the science of eugenics, but in ways suited to their femininity: "Eugenic field investigation was women's work in several senses. First, it involved intuition and an eye for detail, abilities with which women were thought to be particularly well endowed. . . . Second, women (perhaps because less intimidating) were better able to elicit personal information from strangers. . . . Third, in serving as assistants to men such as Goddard and Davenport, field workers elaborated the traditional division of labor" (Rafter 1988, 21). There are a number of levels at which this "women's work" can be analyzed. First, it is clear that the definition of this role relied upon dominant stereotypes of women as intuitive, personable, and subservient. Second, these women lacked the authority possessed by their male superiors (usually doctors and superintendents). However, both of these facts also served to empower female researchers. Though their position was defined according to stereotypes of femininity, they were also considered to possess abilities that men lacked: "Because of their supposed emotional and intuitive powers, eugenicists believed that women were more adept than men at quantifying the numbers of the feebleminded. After a few weeks' training, field workers were thought to be able to tell at a glance whether someone had pure or tainted germplasm" (Hasain 1996, 82). Here is a case where gender stereotypes directly influenced *how* feeblemindedness was diagnosed. In a sense, women provided a solution to the problem of etiologic invisibility: they supposedly had the ability to trace lines of "defective stock" and identify the quality of a person's germplasm.

These women occupied an epistemic position similar to the "vigilant mothers" who watched closely for signs of feeblemindedness in their children. For both groups, their alleged ability to "see" these signs was attributed to their feminine intuitiveness, whether it was put to use in the nursery or the interview. However, this authority was mediated by the guidance of a male "expert." Both field work and motherhood, as forms of "woman's work," were defined in contrast to the more authoritative positions occupied by men.

Though they did not have the socially recognized authority of the male superintendents, female researchers had significant epistemological authority

insofar as they were given the task of identifying cases of feeblemindedness and tracing histories. They also had significant practical power with respect to the persons they picked out; these studies often had a direct effect on which "feebleminded" persons would be placed in institutions. In this sense, women researchers perpetuated the marginalization of the "feebleminded" by identifying them as such, and in doing so, justifying their incarceration. "Feebleminded" women were objects of study, often for fellow women whose feminine qualities and "able minds" offered these researchers the opportunity to have a direct effect on their "feebleminded" counterparts.

FEMALE REFORMISTS:
LADY BOUNTIFUL AND THE "DAWN OF WOMANHOOD"

The final group of women, the reformists, also had a hand in the development and perpetuation of the category of feeblemindedness. I will discuss two kinds of reformists: female philanthropists who had a direct effect on the lives of "feebleminded" women; and feminists who exploited the image of the "feebleminded woman" for the purposes of their own political reforms (though these two groups are not mutually exclusive). I place these two types of women in the same category of "reformists" because they share three things with respect to the history of mental retardation. First, unlike field workers and the non-disabled women working in the institutions, these women did not work under male supervision; therefore, the power dynamics were different. Second, reformists were responsible (in different ways) for promoting negative portraits of "feebleminded" *women* specifically. This leads to the third point: while at the level of etiology, *all* women were defined by male authorities as capable of spreading feeblemindedness, the reformists separated *themselves* from "feebleminded women." They divided the categories of womanhood and motherhood into "us" and "them." As we shall see, the "feebleminded" as a class provided a social cause for philanthropists, and fodder for the arguments of the newly emergent feminist movement. To illustrate these two roles of the reformist, I will focus on a representative of each: the philanthropist Josephine Shaw Lowell, and the feminist Margaret Sanger.

Josephine Shaw Lowell was born in 1843 to a good family, married Colonel Charles Russell Lowell at the age of twenty, and was widowed in less than a year. After the death of her husband, she began to develop what would be a forty-year career of public service (Bremner 1960, 101). In 1876 she was the first woman to be appointed as a commissioner to the New York State Board of Charities, and her thirteen-year membership was a fruitful one. She campaigned for the construction of a Reformatory for Women (patterned on the reformatory which opened in Elmira, Mass., in 1887), arguing that women were the cause of many of society's present ills: "One of the most important

and most dangerous causes of the increase of crime, pauperism and insanity is unrestrained liberty allowed to vagrant and degraded women. . . . In order to grapple with this gigantic evil and to stop the increase of pauperism, crime and insanity in this community, a reformatory for women, under the management of women . . . is required" (Stewart 1911, 91–92). She explained that there were two separate objectives to be attained: reforming these women, and if that was impossible, cutting off all hereditary lines which would transmit pauperism, crime, and insanity (Stewart 1911, 91–92). She lived to see three state reformatories for women open in Hudson, Albion, and Bedford, N.Y.

Clearly, Lowell subscribed to the views of her time concerning the hereditary nature of degeneracy. What sets her apart was her particular concern for women, a distinction that makes her a complicated figure (Waugh 1997, 139–42). She maintained that women who were "feebleminded" (identified by having already given birth to one illegitimate child) required special attention, that they needed to be "taught to be women," and that this was only possible in an environment isolated from the vices and temptations of men. Thanks to her efforts, The State Custodial Asylum for Feeble-Minded Women at Newark first opened as an experimental facility in September of 1878. In response to Lowell's call for "the establishment of further and definite provision for the custodial care and sequestration of idiotic and feeble-minded girls and women, for their protection and the protection of the State," the institution became a permanent custodial facility in 1885 (Trent 1995, 75). By October 1910 the asylum had 792 inmates, classified according to their degree of intelligence (Stewart 1911, 119).

Lowell's accomplishments in singling out the "weaker" members of her sex and campaigning for their segregation is indicative of the authority and practical power some women had in the sphere of social reform. Anne Firor Scott writes, "American women were as much a part of the larger culture as men were, and while their outsider status may have made them sensitive to some human needs, they shared the unexamined assumptions of their own time about race, class, ethnicity . . . " (Scott 1990, 48). To this list we must add mental ability and morality, for Lowell's concern for feebleminded and criminal women certainly echoed the dominant male discourse about feeblemindedness: that it was heritable, dangerous, and in desperate need of containment. Insofar as female philanthropists like Lowell subscribed to the dominant assumptions about the nature and dangers of feeblemindedness, "feebleminded" women suffered cultural imperialism at the hands of both "able-minded" men and women.

Lowell also contributed to the social marginalization of "feebleminded" women, in that she was directly responsible for the construction of new institutions to house them. Furthermore, her statement that "women have proven themselves entirely adequate to the control and management of women,"

reflects the benefit these institutions could have for "able-minded" women: like field work, it provided women with a new form of labor and authority (they would not only work as attendants and teachers, but as superintendents and physicians) (Trent 1994, 74). This statement also suggests that Lowell made a sharp division within the general category *woman;* she is referring to two separate groups of women, non-disabled and "feebleminded." In fact, she stressed that the latter, aberrant breed of women, though in need of assistance and care now, must ultimately be eradicated: "For self-protection, the state should care for these human beings who, having been born, must be supported to the end; but every motive of humanity, justice and self-interest should lead to the extinction of the line as soon as possible" (Stewart 1911, 101). Here we see the brand of philanthropy Lowell practiced; her concern for her fellow women (and there is little evidence that she would have thought of them in this way) only extended to the current generation. Underlying Lowell's demands for the construction of institutions for "feebleminded" and "delinquent" women was the assumption that their segregation would prevent the propagation of their "defective" lines. The boundaries demarcating the "feebleminded" as a social group served to exclude "feebleminded" women from membership in the group of "women" of which Lowell took part; these "defective" members of her sex were in a class separate from her own.

This division between "feebleminded" and non-"feebleminded" women was present in the feminist movement as well. Many feminists around the turn of the century used the rhetoric of eugenics to bolster their causes (Hasain 1996, 81). However, with respect to non-disabled women perpetuating feeblemindedness, their arguments departed from the "good/bad mother" myth advanced by male "experts." Rather than focusing on responsible and vigilant procreation/ pregnancy/infant care as a means to avoid a "feebleminded" child, these female reformists argued that *"voluntary* motherhood" was essential to preventing feeblemindedness. The call for women to control their sexuality and reproduc- tion (particularly through contraception) relied upon arguments concerning the deleterious effects of non-disabled women having unwanted children. Many feminists played upon the fears of feeblemindedness, and "raised traditional eugenic bogies: that unwanted children would be likely to be inferior; that children also had a right not to be born if they would be weak or deprived or defective" (Gordon 1976, 144). In fact, Gordon says that it would be near impossible to find discussions of voluntary motherhood between 1890 and 1910 which didn't claim that unwanted children were likely to be morally and/or physically defective (1976, 121).

With respect to "feebleminded" women, however, many feminists perpetu- ated and actually exploited the "bad mother" myth. Reformists like Margaret Sanger believed in the hereditary nature of feeblemindedness, and argued that "feebleminded" women should not be allowed to reproduce. More generally,

feminists equated women's liberation with an overall eugenic effect. Margaret Sanger, in her book *Women and the New Race*, repeatedly invokes the dangers of feeblemindedness in her call for the emancipation of motherhood. She refers to the number of feebleminded who are not in institutions, "being free to propagate their kind," and claims that the feebleminded "are notoriously prolific in reproduction" (Sanger 1920, 40–41). The solution, she believes, lies in the freedom of motherhood: "We must set motherhood free. . . . Motherhood works in wondrous ways. It refuses to bring forth weaklings, refuses to bring forth slaves. . . . It withholds the unfit, brings forth the fit" (1920, 45).

As we can gather from her statements above, however, the mothers that should be included in the category of "motherhood" are not those who are "feebleminded" or "defective" in any sense. Thus we find a dichotomy in motherhood as well as in womanhood, between the good, free woman working to improve the race, and the "feebleminded," "deficient" woman for whom motherhood must be controlled and avoided. Whereas in the male discourse about etiology women *as a group* were targeted, here we see non-disabled women separating themselves from "feebleminded" women once again (recall Lowell). When Sanger claims that "We must set motherhood free," it is a call for those other women who continue to burden society to relinquish their motherhood. That the emancipation of "motherhood" and "womanhood" could only occur with the bondage of feeblemindedness and inferiority, is obvious in the concluding words of her book: "This is the dawn. Womanhood shakes off its bondage. It asserts its right to be free. Like begets like. We gather perfect fruit from perfect trees. The race is but an amplification of its mother body, the multiplication of flesh habitations—beautiful and perfected for souls akin to the mother soul . . . " (Sanger 1920, 233–34). This utopian vision is predicated upon the belief that imperfect trees, unperfected ugly souls would not bring forth fruit; thus, "defective" women could only hope to witness the dawn of "womanhood" and the emancipation of "motherhood"—neither of which included them—from behind the bars of the institution.

The power relations with respect to female reformists are complex. The relationship between this group of privileged women and "feebleminded women" illuminates the multiple layers at which oppression operated. By calling attention to their "feebleminded" counterparts, female philanthropists had a direct hand in the marginalization of "feebleminded" women. Josephine Shaw Lowell was responsible for the first custodial facility for "feebleminded women" specifically, and the increasing segregation of institutions according to sex. Though feminists such as Margaret Sanger may not have directly affected the lives of "feebleminded" women, they exploited this group for the advancement of their political agenda, and for the benefit of non-disabled women. Finally, insofar as cultural imperialism involves marking out a particular group as "Other," reformists set "feebleminded women" apart from themselves with respect to both womanhood and motherhood.

Cognitive Ableism and Contemporary Feminist Disability Theory

There is no doubt that the contemporary landscape with respect to cognitive disability has changed since the times of Lowell and Sanger. Changes in terminology and debates about the very definition of mental retardation, the increasingly prominent disability rights movement, the Americans With Disabilities Act, and the burgeoning field of disability studies have all contributed to the historical, conceptual, and political problematization of disability.[7] Despite these important advances, however, there are many features of this complex history that persist. What implications, then, does this analysis have for contemporary feminist disability studies?

Numerous parallels can be drawn between the historical and contemporary positions women occupy with respect to cognitive disability, and many feminist scholars have addressed women's roles as caregivers, mothers, reformists, and researchers both generally and from a disability perspective in particular. However, insofar as this paper has examined the *inter*relation between social groups of women in the specific context of mental retardation as a gendered classification, I would like to highlight a few parallels that are particularly relevant to a feminist theory of cognitive disability.

There is a significant body of feminist literature regarding women as caregivers and recent considerations of an ethics of care from a disability perspective (Wendell 1996; Silvers 1995; Silvers, Wasserman, Mahowald 1998; Kittay 1999). However, as Kittay highlights in her discussion of the complexities of caregiving with her daughter Sesha, there are distinct issues that arise for persons with severe cognitive disabilities. Her work points to the importance of addressing the roles of the caregiver and recipient, not only through a feminist lens, but with an acknowledgment of the heterogeneous nature of specific disabilities like mental retardation. As the historical example of institutional caregivers illustrates, there are multiple positions an individual can occupy from within a particular classification. Thus there are compelling practical and philosophical reasons not to oversimplify the nature of a particular group (for example, the "cognitively disabled") and to attend to ways in which our current social institutions and structures perpetuate forms of gendered labor (Johnson 1998, 60–78).

Parallels can also be found between the historical importance accorded to women as mothers in the definition and detection of "feeblemindedness" and contemporary discourses and practices. There is an extensive history of sterilization and mental retardation (Reilly 1991; Trent 1994), and one still finds debates around the ethicality of voluntary, involuntary, and non-voluntary sterilization (Macklin and Gaylin 1981). The "bad mother" myth lurks behind arguments regarding the possible harms of pregnancy and birth to a woman with mental retardation, her fitness as a mother (regarding possible harms to the child), and the moral culpability of women labeled mentally retarded

giving birth to children with similar or worse conditions (Steinbock 1994). More generally, the possibility afforded by prenatal testing to decide whether or not to keep a "disabled" fetus continues to perpetuate "good/bad mother" myths, and women are once again in a position of being "responsible" for the kinds of children to whom they give birth (Rothman 1986; Hubbard 1990; Rapp 1999; Parens and Asch 2000).

Furthermore, with respect to the detection of genetic and chromosomal conditions which cause mental retardation (for example, Down syndrome) and new etiologic explanations on the horizon due to the Human Genome Project, many women are playing an intermediary role analogous to the field workers discussed earlier. Rayna Rapp writes, "Once amniocentesis became commonly available, there was a need for someone to . . . translate scientific possibilities into personal terms. As it turned out, women seemed drawn to the role of 'gatekeeper' between science and social work, between epidemiology and empathy" (Rapp 1988, 26). In light of the power women researchers doing pedigree studies had, and the ways that their work influenced the detection, classifications, and practices surrounding feeblemindedness, the contemporary roles women play in genetic counseling and other areas that may be considered "woman's work" signal another continuity between the past and present (Rapp 1999, 53–62).

The problematic role of the gatekeeper is one that remains for feminist disability theorists who maintain academic and social privilege, and who are committed to scholarship and activism in the field of disability. The problems of marginalization, exploitation, and powerlessness for persons labeled mentally retarded persist, and it is arguable that the dynamics of oppression have become increasingly complex. Insofar as women *without* cognitive disabilities have been implicated in issues of classification, caregiving, parenthood, philanthropy, institutionalization, and research, those of us who reside in the world of the "mentally accelerated" (to use Trent's term) must acknowledge our privileged place in the nexus of power relations (Trent 1994, 7). This requires that the problem of cognitive ableism be given further philosophical attention.

I define cognitive ableism as a prejudice or attitude of bias in favor of the interests of individuals who possess certain cognitive abilities (or the *potential* for them) against those who are believed not to actually or potentially possess them. I will conclude by considering two factors that contribute to the perpetuation of cognitive ableism: the tendency to essentialize cognitive disability, and the failure to address adequately the nature of cognitive privilege.

While the problem of essentialism regarding the disabled/non-disabled binary has been addressed (Wendell 1996; Silvers, Wasserman, Mahowald 1998; Colligan 1999), there is less work on the dangers of perpetuating a form of essentialism that draws a sharp division between the *cognitively* able/disabled. There are many examples in philosophical discourse where the "cognitively

disabled" are treated as a homogeneous group. By ignoring the internal het-
erogeneity (for example, distinctions between degrees of ability, vastly different
etiologies), external heterogeneity (cognitive disability is defined externally by
many different professions, including genetics, medicine, psychiatry, psychol-
ogy, and education), and instability (its definition is inextricably bound up
with etiology, treatment, and social, cultural, and biological norms), there is a
danger of reifying this category (Carlson 1998, 125). This form of essential-
ism has resulted not only in the concrete forms of oppression found in the history
of mental retardation, but in various forms of conceptual oppression. These
include the marginalization of persons with cognitive disabilities from main-
stream scholarship in philosophy and disability studies; the exploitation of
persons with cognitive disabilities to bolster a particular theoretical position
(for example, pro-choice arguments that rely on perpetuating stereotypes of
persons with disabilities, or animal rights positions that use the "severely
mentally retarded" to argue for the moral status of non-human animals); and
the perpetuation of powerlessness by not including the perspectives and experi-
ences of persons with cognitive disabilities in feminist disability scholarship
(Carlson 1998).

   Without attending to the specific nature and history of a particular clas-
sification, there is the risk of reducing the individuals therein to prototypes. A
prototype can be constructed according to a prevailing stereotype, where the
"cognitively disabled" are defined by a simple, unproblematic set of character-
istics that are assumed to be fixed and inherent. The result can also take the
form of what Lakoff calls a "prototype effect," where one *type* of "cognitively
disabled" individual (for example, mildly disabled, profoundly disabled) will
become the representative of the whole category.[8]

   The boundaries of womanhood and motherhood drawn by Sanger and
Lowell are indicative of the belief that persons (and specifically *women*) with
cognitive disabilities are profoundly "other," which leads to the creation of a
sharp "us/them" dichotomy between the cognitively able/disabled.[9] Feminist
disability theory risks a loss of philosophical and political rigor if it does not
give equal attention to the concerns and positions of persons with cognitive
disabilities. Rather than relying upon deeply rooted preconceptions, prejudices,
fears, and stereotypes, "The perspectives and experiences of people labeled
mentally retarded must provide a starting point for all research and inquiries
in the study of mental retardation" (Taylor 1996, 4).

   The problem of cognitive ableism also calls for an investigation of non-
disabled identity. I deliberately use the term "non-disabled" for the strategic
reasons that Linton discusses: "Disabled is centered, and non-disabled is placed
in the peripheral position in order to look at the world from the inside out.
. . . Centering the disabled position and labeling its opposite non-disabled
focuses attention on both the structure of knowledge and the structure of

society" (1998, 14). Linton's argument makes clear why the claim that "we are all disabled somehow" is a problematic formulation of non-disabled identity. This statement ignores the realities of one's place in existing structures and power relations *as non-disabled*, erases important differences, and denies the lived realities of persons with disabilities.

There is another understanding of non-disabled identity that is certainly more accurate and can serve as an important universalizing strategy, but can be equally problematic.[10] The boundaries of disability as a category are permeable, and though we may not be members now, we are all *"temporarily* able." The existential awareness of one's *being-towards-disability* (to modify Heidegger's turn of phrase) may provide the impetus to critically examine one's personal relationship to the possibility of disability and the meaning of disability in a broader social context. However, if the motivation to examine existing forms of oppression is rooted simply in fear or the acknowledgment that "that may someday be me," there is the danger that persons with disabilities will serve as what Uma Narayan calls the "mirror role" for the non-disabled. Though she is describing the way that Third World subjects have functioned as mirrors for the West, her definition of this role is instructive in the context of disability: "To be a Mirror is different from being a Face that looks back . . . with a range of expression and responsiveness that . . . are responses of a Subject-in-Its-Own-Right. To be positioned as a Mirror is to be Put Out of Countenance, to Lose Face" (Narayan 1997, 141). Ultimately, the realities of oppression, power, and agency for persons with disabilities may be obscured by the fears and assumptions that the non-disabled person sees in her own reflection, thereby positioning the person with a disability as a mirror that simply reflects human limitation and finitude for the non-disabled.

While the differences between the categories of race, ethnicity, and disability demand scrutiny and preclude an easy appropriation of postcolonial feminist work, certain strategies in theorizing privileged identities may prove helpful in addressing non-disabled identity. In her article "What Should White People Do?" (2000), Linda Alcoff asks a number of important questions regarding whiteness and identity that can be posed in terms of cognitive disability: What is it to acknowledge one's cognitive ability/privilege? How can the "mentally accelerated" be disloyal to their cognitive privilege while acknowledging the significance of their own identity? (Alcoff 2000, 264). The question of what it might mean as philosophers to examine our own cognitively able and privileged identities presents perhaps the deepest challenge to the philosophical tradition and its assumptions regarding reason, cognitive ability, and personhood.[11] However, the challenge of cognitive ableism is an opportunity that the burgeoning field of feminist disability scholarship cannot afford to miss.

NOTES

1. I use the term "gendered" in the same way that Sandra Bem discusses the way persons and practices become "gendered." She outlines three "lenses," or "assumptions that reproduce male power": androcentrism, or male-centeredness; gender polarization, where the perceived differences between men and women function as an organizing principle of social life; and biological essentialism, the justification of inequality by appealing to biological accounts of male-female difference (Bem 1993, 2).

2. There are three qualifications I must make. First, membership in these groups was not mutually exclusive; the overlapping of women's roles is one of the most interesting features of this history. Second, the groups of women I discuss were primarily white women who were subject to Victorian stereotypes of femininity that didn't necessarily apply to other racial and ethnic groups. Finally, there is no question that violence played an enormous role in this history. The corporeal punishment and abhorrent conditions in institutions, forced sterilization, and sexual abuse of inmates are only a few examples. However, my discussion here will not address this fifth form of oppression.

3. George Lakoff argues that the way we formulate categories depends upon features of our human cognition and experience, and that our categories are often asymmetrical. This last quality can be explained in terms of "prototype effects," where a particular member is more representative of a category than others (Lakoff 1987, xiv).

4. This is similar to the dynamics of the modern prison that Foucault outlines, where the very system that is meant to punish produces the "delinquent" to create a self-perpetuating system of normalizing power (1979).

5. For a discussion of "mother-blaming" as it manifests itself in a series of "perfect mother" and "bad mother" myths, see Caplan (1989).

6. We are reminded here of Foucault's work on the emergence of certain "species" of individuals (the madman, the delinquent, the pervert) that emerge alongside various practices (1979; 1988; 1990).

7. Though this list is by no means exhaustive, see Luckasson et al. (1992), Fine and Asch (1988), Oliver (1990), Williams and Shoultz (1982), Dybwad and Bersani (1996), Morris (1991), Shapiro (1994), Snyder and Mitchell (1997), Linton (1998), Davis (1997), Francis and Silvers (2000).

8. There are many examples of shifting prototypes in the history of mental retardation. In the mid-nineteenth century, as new institutions were being constructed, the "idiot," or most severely disabled individual, was the prototypical case of feeblemindedness. After the turn of the century, as the eugenic fervor took hold, the "moron," the highest functioning member of the category, became the focal point and the prototypical case according to which policies and practices were constructed (Carlson 1998; Trent 1994).

9. This form of distancing discourse is starkly apparent in philosophical work that asks whether a distinction can even be made between the severely cognitively disabled and non-human animals (McMahan 1996; Murphy 1984; Singer 1995).

10. I am grateful to an anonymous reviewer for helping me clarify this point.

11. Works such as Alasdair Macintyre's book *Dependent Rational Animals* (1999) are an important step in this direction.

REFERENCES

Alcoff, Linda Martín. 2000. What should white people do? In *Decentering the center: Philosophy for a multicultural, postcolonial, and feminist world*, ed. Uma Narayan and Sandra Harding. Bloomington: Indiana University Press.

Bem, Sandra. 1993. *Lenses of gender: Transforming the debate on sexual inequality.* New Haven: Yale University Press.

Bremner, Robert H. 1960. *American philanthropy.* Chicago: University of Chicago Press.

Caplan, Paula. 1989. *Don't blame mother: Mending the mother-daughter relationship.* New York: Harper and Row.

Carlson, Licia. 1998. Mindful subjects: Classification and cognitive disability. Ph.D. diss., University of Toronto.

Chesler, Phyllis. 1983. *Women and madness.* New York: Avon.

Colligan, Sumi. 1999. Wherein lie the "secrets of life?": An argument against biological essentialism. *Journal of Gay, Lesbian, and Bisexual Identity* 4 (1) 73–85.

Davis, Lennard. 1997. *The disability studies reader.* New York: Routledge.

Dybwad, Gunnar, and Hank Bersani Jr., eds. 1996. *New voices: Self-advocacy by people with disabilities.* Cambridge: Brookline.

Ferguson, Philip M. 1994. *Abandoned to their fate: Social policy and practice toward severely retarded people in America, 1820–1920.* Philadelphia: Temple University Press.

Fine, Michelle, and Adrienne Asch, eds. 1988. *Women with disabilities.* Philadelphia: Temple University Press.

Foucault, Michel. 1979. *Discipline and punish: The birth of the prison.* Trans. A. Sheridan Smith. New York: Vintage Books.

———. 1983. The subject and power. In *Michel Foucault: Beyond structuralism and hermeneutics*, by Hubert L. Dreyfus and Paul Rabinow. Chicago: University of Chicago Press.

———. 1988. *Madness and civilization: A history of insanity in the age of reason.* Trans. Richard Howard. New York: Vintage Books.

———. 1990. *The history of sexuality, volume I: An introduction.* Trans. Robert Hurley. New York: Vintage Books.

———. 1994. *The birth of the clinic: An archaeology of medical perception.* Trans. A. Sheridan Smith. New York: Vintage Books.

Francis, Leslie Pickering, and Anita Silvers, eds. 2000. *Americans with disabilities: Exploring implications of the law for individuals and institutions.* New York: Routledge.

Gordon, Linda. 1976. *Woman's body, woman's right: A social history of birth control in America.* New York: Grossman.

Hasain, Marouf Arif. 1996. *The rhetoric of eugenics in Anglo-American thought.* Athens: The University of Georgia Press.

Hubbard, Ruth. 1990. *The politics of women's biology.* New Brunswick, N.J.: Rutgers University Press.

Johnson, Kelley. 1998. *Deinstitutionalising women: An ethnographic study of institutional closure.* Cambridge: Cambridge University Press.

Kanner, Leo. 1964. *A history of the care and the study of the mentally retarded*. Springfield, Ill.: Charles C. Thomas.

Kittay, Eva Feder. 1999. *Love's labor: Essays on equality, dependence and care*. New York: Routledge.

Lakoff, George. 1987. *Women, fire and dangerous things: What categories reveal about the mind*. Chicago: University of Chicago Press.

Linton, Simi. 1998. *Claiming disability: Knowledge and identity*. New York: New York University Press.

Luckasson et al. 1992. *Mental retardation: Definition, classification, and systems of supports*. 9th ed. Washington, D.C.: American Association on Mental Retardation.

Macklin, Ruth, and Willard Gaylin. 1981. *Mental retardation and sterilization: A problem of competency and paternalism*. New York: Plenum Press.

Macintyre, Alasdair. 1999. *Dependent rational animals*. Chicago: Open Court.

McMahan, Jeff. 1996. Cognitive disability, misfortune, and justice. *Philosophy and Public Affairs* 25 (1): 3–35.

Morris, Jenny. 1991. *Pride and prejudice: Transforming attitudes to disability*. Philadelphia: New Society Publishers.

Murphy, Jeffrie. 1984. Do the retarded have a right not to be eaten? In *Ethics and mental retardation*, ed. Loretta Kopelman and John Moskop. Dordrecht: D. Reidel Publishing Company.

Narayan, Uma. 1997. *Dislocating cultures: Identities, traditions and Third World feminism*. New York: Routledge.

Noll, Steven. 1995. *Feeble-minded in our midst: Institutions for the mentally retarded in the South, 1900–1940*. Chapel Hill: University of North Carolina Press.

Oliver, Michael. 1990. *The politics of disablement*. London: Macmillan.

Parens, Erik, and Adrienne Asch, eds. 2000. *Prenatal testing and disability rights*. Washington, D.C.: Georgetown University Press.

Rafter, Nicole Hahn. 1988. *White trash: The eugenic family studies, 1877–1919*. Boston: Northeastern University Press.

Rapp, Rayna. 1988. Chromosomes and communication: The discourse of genetic counseling. *Medical Anthropology Quarterly* 2: 121–42.

———. 1999. *Testing women, testing the fetus: The social impact of amniocentesis in America*. New York: Routledge.

Reilly, Phillip R. 1991. *The surgical solution: A history of involuntary sterilization in the United States*. Baltimore: Johns Hopkins University Press.

Rosen, Marvin, Gerald Clark, and Marvin Kivitz, eds. 1975. *The history of mental retardation: Collected papers, volume I*. Baltimore: University Park Press.

Rothman, Barbara Katz. 1986. *The tentative pregnancy: Prenatal diagnosis and the future of motherhood*. New York: Viking.

Sanger, Margaret. 1920. *Woman and the new race*. New York: Brentano's.

Scheerenberger, R. C. 1983. *A history of mental retardation*. Baltimore: P. H. Brookes Publishing Co.

Scott, Anne Firor. 1990. Women's voluntary associations: From charity to reform. In *Lady bountiful revisited: Women, philanthropy and power*, ed. Kathleen McCarthy. New Brunswick: Rutgers University Press.

Seguin, Edouard. 1910. *Idiocy and its treatment by the physiological method*. Albany: Press of Brandow Printing Company.

Shapiro, Joseph. 1994. *No pity: People with disabilities forging a new civil rights movement*. New York: Times Books.

Showalter, Elaine. 1986. *The female malady: Women, madness and English culture, 1830–1980*. New York: Pantheon Books.

Silvers, Anita. 1995. Reconciling equality to difference: Caring (f)or justice for people with disabilities. *Hypatia* 10 (11): 30–55.

Silvers, Anita, David Wasserman, and Mary Mahowald. 1998. *Disability, difference, discrimination: Perspectives on justice in bioethics and public policy*. Lanham, Md.: Rowman and Littlefield.

Singer, Peter. 1995. *Animal liberation*. London: Pimlico.

Sloan, William, and Harvey A. Stevens. 1976. *A century of concern: A history of the American Association on Mental Deficiency, 1876–1976*. Washington, D.C.: The American Association on Mental Deficiency, Inc.

Snyder, Sharon, and David Mitchell, eds. 1997. *The body and physical difference: Discourses of disability*. Ann Arbor: University of Michigan Press.

Steinbock, Bonnie. 1994. Reproductive rights and responsibilities. *Hastings Center Report* 24 (3): 15–16.

Stewart, William Rhinelander. 1911. *The philanthropic work of Josephine Shaw Lowell*. New York: The Macmillan Company.

Talbot, Mabel. 1964. *Edouard Seguin: A study of an educational approach to the treatment of mentally defective children*. New York: Columbia University Press.

Taylor, Steve. 1996. Disability studies and mental retardation. *Disability Studies Quarterly* 16 (3): 4–13.

Trent, James W. 1994. *Inventing the feeble mind: A history of mental retardation in the United States*. Berkeley: University of California Press.

Tyor, Peter. 1977. Denied the power to choose the good: Sexuality and mental defect in American medical practice, 1850–1920. *Journal of Social History* 10: 472–89.

Tyor, Peter, and Leland Bell. 1984. *Caring for the retarded in America*. Westport, Conn.: Greenwood Press.

Waugh, Joan. 1997. *Unsentimental reformer: The life of Josephine Shaw Lowell*. Cambridge, Mass.: Harvard University Press.

Wendell, Susan. 1996. *The rejected body: Feminist philosophical reflections on disability*. New York: Routledge.

Williams, Paul, and Bonnie Shoultz. 1982. *We can speak for ourselves: Self advocacy by mentally handicapped people*. London: Souvenir Press.

Young, Iris Marion. 1990. *Justice and the politics of difference*. Princeton: Princeton University Press.