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Enduring Legacies –
Intersecting Discourses in the
Context of Eugenics

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Enduring Legacies – Intersecting Discourses in the Context of Eugenics

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Résumé

L'eugénisme et ses pratiques dans l'arène sociale et politique ont été abordés selon des perspectives différentes, mais ce qui a été moins considéré pour l'instant, c'est comment les pratiques eugéniques peuvent fournir une plate-forme pour considérer des intersectionalités par rapport à la politique identitaire. Les systèmes de classification et les typologies conçues et utilisées par des eugénistes conduisaient souvent la présentation d'histoires particulières, comme l'impact de l'eugénisme sur les gens infirmes ou l'exclusion sur la base de la race, plutôt qu'une theorisation des intersections possibles. Ce texte est une telle tentative et juxtapose des discours sur la sexualité, le genre, la classe et « la déficience mentale » pour examiner des similarités et des différences ainsi que les manières dont ces catégories se croisent pour contribuer aux constructions de normalité et « de valorisation ». En adoptant une telle perspective, il est possible d'examiner des voies complexes dont la politique publique, l'Etat et les débats identitaires ont été entrelacés et d'exposer la manière de renforcer la « normalité ». A partir de l'exemple des demandes suisses de compensation pour les stérilisations non-volontaires, je développe une analyse intersectionelle qui transcende sa connexion initiale à l'identité et tient compte des complexités de temps et d'espace.

Mots-clefs : Eugénisme, intersections, stérilisations, compensation, Suisse

Abstract

The science of eugenics and its concomitant practices in the social and political arena have been approached from various perspectives but what has less been considered so far, is how eugenic practices can provide a platform to consider intersectionalities in relation to policies and identity politics. The systems of classification and typologies devised and used by eugenicists have often led to the presentation of particular histories, such as eugenics' impact on disabled people or its connotation with race-based exclusion, than to a theorisation of intersections. This text undertakes such an endeavour and juxtapose discourses on sexuality, gender, class and "mental deficiency" to examine commonalties and differences and the ways in which these categories intersect to contribute to constructions of normality and "worthiness". Taking this perspective, I argue, allows an examination of the complex ways in which the state, state policy and identity politics were interweaved and exposes the ways in which "normalcy" was enforced. Using the example of the Swiss compensation claims for non-voluntary sterilisations I aim to offer an intersectional analysis which transcends its initial connection to identity and takes into account the complexities of time and space.

Keywords : Eugenics, intersections, sterilisation, compensation, Switzerland

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Introduction

Discourses and practices of eugenics provide an exemplary platform to consider intersectionalities as they were axiomatically reliant on intersecting categories of social divisions and, at the same time, were constitutive of their construction[2]. Taking stock of feminist and critical race theorising of intersecting modalities of power as they are constituted in and through social dimensions this paper relies on an intersectional analysis of a historical constellation in order to further question the possibilities and means of theorising intersectionality. The paper aims to make the case that unless intersecting modalities are taken into account in the construction of subject positions through eugenic thinking and practices much about eugenics may remain misunderstood, relegated to the extreme practices of particular political constellations and thus removed from the fact that eugenics was intrinsically linked to modern ideology (Bauman 1989), the building of nation states and hence part of all Western nations' histories. Alongside other authors (Bauman 1989; Mottier 2000; Thomson 1998), this paper is based on the premise that to understand eugenic thinking and policies in their complexity eugenics needs to be understood as part of a mainstream discourse which was not associated a priori with any one particular political position. Instead, against the background of the twin reigns of Reason and Science, eugenics provided mechanisms to shape, control, and eventually eliminate social problems through regulating the reproductive sexuality of the population. As such it was seen as one viable social technology, contributing to what Foucault (1978) termed "bio-politics", and part of an effort of social engineering which was deeply rooted in modernity and indebted to a belief in science as progress.

Rather than merely being part of disconcerting collective pasts eugenics and the practices linked to it reappear in a modified form in present politico-legal arenas which are faced with compensation claims around coerced or non-voluntary sterilisation in numerous jurisdictions. This reappearance, I suggest, confronts states and social collectives with a continuous thread, or perhaps an aftershock, of eugenic practices thus bridging the temporal dimension between a distinct past and the present, and possibly also the future. In interrogating the temporal axis or collapsing notions of clearly bounded time I am not pursuing the argument here that ethical questions connected to eugenics reappear in contemporary bioethics around new human genetics rather I want to examine how eugenics bears on what Janna Thompson (2002) has called "Taking Responsibility for the Past". In what follows I shall present the ways in which eugenic practices can be understood through an intersectional analysis of subject positions before going over to make the claim another axis of intersectionality, namely notions of time, impacts on eugenics and its social-political implications.

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[2] In line with the scope of the research project on which this paper is based on and which looks at the social and political implications of eugenics in Switzerland in a comparative perspective, our definition of eugenics is broad enough to encompass both "negative" and "positive" eugenics, that is, both the thinking and the practices which aimed to prevent "unworthy" offspring as well as the thinking and measures underpinning the proliferation of reproduction amongst those deemed "meritorious". Whilst eugenics was not necessarily the only or paramount body of thinking giving rise to certain practices eugenics was a popular body of thinking across the political spectrum.

Histories of Eugenics

Eugenics perceived itself as the science concerned with the improvement of the human stock on the basis of the scientific study of all influences which would give "the more suitable races or strain of blood a better chance of prevailing speedily over the less suitable" (Galton 1883). Albeit formulated within the realm of science, eugenics was always deeply intertwined with social and political aims and it emerged both as a science and as a social movement (Mottier 2004; Weingart, Kroll and Bayertz 1988). Some have been inclined to call it pseudo-science or a 'bad idea' (Carlson 2001) others insist that rather than being a historical aberration, eugenics was a constitutive part of modernity (Bauman 1989) and its encoding of racism (Stepan 1982). The mechanisms of inclusion and exclusion on the basis of eugenic typologies have had enduring effects on individuals but also communities which have come to be well documented[3].

Promoting a large scope of measures eugenicists were by no means a homogeneous group, defending or promoting the same interventions and not all endorsed sterilisation as a measure. Nevertheless, the salience of coerced sterilisation in discussions of eugenics and its almost ubiquitous practices in modernising nations has done much to firmly establish the eugenic movement as a transatlantic movement (Hasian 1996; Mitchell and Snyder 2003), yet at the same time it sidelines if not erases the less invasive but equally constitutive positive eugenic measures (Habermas 2001; Jonas 1985).

Eugenic postulates and practices thrived from the late nineteenth century in modern nations in response to the fear of physical and mental decline of the population embedded in the notion of "degeneration" as well as the idea that regulatory mechanisms and ideas about selective breeding inspired by Darwin (1883) can be applied to the human race. Although different periods and regions or countries produced varying practices and programs related to eugenic ideas eugenic thinking was also mapped against the "discovery" of the hereditary character of "mental deficiencies", "physical deformities", but also "unruly sexualities" or alcoholism (Missa 1999). The systems of classification and typologies devised, used and promoted by eugenicists to manage and shape the population were directly affected by and, in turn, affected notions and perceptions of gender, sexuality, disability, race, and ethnicity. The help of new tools such as statistics with its measurability of averages gave rise to an imperative of the "normal" and notions of normalcy and worthiness, thereby casting all others as "subhuman", "defective" and thus dangerous to society as individuals and, crucially for eugenicists, as a collective. Importantly, these groups were seen in need of managing thereby implicating social reformers and welfare providers as well as state regulatory mechanisms, such as immigration restriction, marriage prohibition or sterilisation laws. As a coalition between science and social movement, eugenics

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[3] For example the effects on Jewish people (Friedlander 1995, 1997; Mosse 2000), racial and ethnic communities (Gilroy 1995; Leimgruber, Meier and Sablonier 1998), lesbians and gays (Kühl 1997), as well as people with physical or cognitive disabilities (Mitchell and Snyder 2003; Thomson 1998). A significant body of work has looked at the gendering of certain eugenic practices in various national contexts (see Bock 1986; Runcis 1998; Wecker 1998) whilst other have focused on professions' growth and socio-political acceptance through eugenics such as psychiatry (Aeschbacher 1998; Dowbiggin 2003; Germann 2004), anthropology (Keller 1995), education (Wolfisberg 2002), social work and welfare providers (Huonker 2003; Lehnert 2003) but also the compliance of the birth control movement and early feminists (Gerodetti 2006a; Hall 1998; Herlitzius 1995).

provided an analysis of what was wrong with modern society, how this occurred and by what means it could be remedied. Eugenicists formulated a comprehensive and rationalized program of social engineering which, nevertheless, was translated into practice in different ways in different national, regional and local contexts and was embedded in some places, but not everywhere, in legislation.

Whilst increasingly national histories of eugenics are being produced[4] they do not necessarily examine the spectrum or the intersections of social divisions, or how eugenic practices were partly constitutive of the subject positions and identity politics associated. Some of the effects of eugenic practices on collectives have become well documented, such as those on ethnic, sexual and disabled minority groups (Kerr and Shakespeare 2002), yet their intersectionalities and its implication for the building of nation states remains somewhat less explored.

Intersectionality

The concept of intersectionality has come to provide a concise shorthand for a concept popular in political struggles and feminist thinking long before Kimberelé Crenshaw coined the term in 1989 (Crenshaw 1989). It denotes the simultaneous positioning of subjects as, for instance, both women, and black, working class, lesbians or colonial subjects (see Brah and Phoenix 2004). Intersectional approaches thus try to adopt an ontology that is richer and more complex than approaches that reduce subject positions to one category at a time and points of the need of multiplex epistemologies. In doing so, intersectionality provides a useful tool to dissect the multiple positionings that constitute everyday life and the power relations that are central to it without consolidating these into stable hierarchies, as has been the case with the notion of multiple oppression. Leaning on Foucault, modalities of power are are understood here in their relational capacities as a diffuse network. Power relations pervade all areas of social life and include, but cannot be reduced to the state, and involve discursive practices which are both related to broader historical systems of meaning as well as transformative of relations of power (Mottier 2005). In the configuration of subject positions, many people use a variety of categories of social divisions to indicate the ways in which multiple positionings come together in people's everyday lives. Thus, while intersectionality acknowledges the complexity of subject positions and the interaction of these with power relations intersectional approaches do not seek to solidify or essentialise the presence of multiple subject positions, such as the concept "multiple oppressions" has done in contrast. Nevertheless, people use the term in different ways, sometimes inconsistently and with ambiguity.

Conceptually, intersectionality thus seeks to analyse micro-analytic readings of everyday practices and on macro-analytic social processes. Nira Yuval-Davis (2006) argues that it is crucially important to separate the different analytical levels in which social divisions need to be examined and the ways in which different social divisions are constructed by, and intermeshed in, each other in specific historical conditions. Judith Butler (1990), on the other hand, has proposed a sceptical discussion of the usage of "etc." which often appears at the end of lists of identity categories. To Butler, this signals both exhaustion and an illimitable process of signification. Yuval-Davis (2006), by contrast, suggests that there can be some

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[4] See for instance Kline (2001) for the U.S., McLaren (1990) for Canada, Cleminson (2000) for Spain, the edited collection of Broberg and Roll-Hansen (1996) for Scandinavian countries, Carol (1995) for France, or Bucur (2002) for Rumania.

social divisions which are more important than others in constructing specific positionings in specific historical situations and in relation to specific people while some social divisions are relevant to most people in most locations. At the same time, she argues, categories of signification have to be viewed as part of a creative, constructive process in which the relationships between positionings, identities and political values are all central and not reducible to the same ontological level.

Whilst I am sympathetic to Butler's claim that lists of identities and social divisions can signal exhaustion and/or a willingness to engage with different subject positionings or a lack of tools or methods to translate such a willingness into practice, in relation to the undertaking here I am inclined to favour Yuval-Davis' suggestion that specific historical situations construct specific positionings and in relation to specific people.

In what follows I will concentrate on a "national history"[5] of eugenics which has had pioneering eugenicists amongst its psychiatrists (such as Auguste Forel and Ernst Rüdin[6]), contained the first European jurisdiction to install a eugenically motivated cantonal law (Vaud) regulating sterilisation (1928) and abortion (1932) whilst on national level it was also the first state to prohibit marriage for those deemed "mentally deficient" in 1907 through the Civil Code (law since 1912). The country in question is, of course, Switzerland whose political institutions of semi-direct democracy and federalism shaped the eugenic experiment significantly in relation to local, regional and federal practices (Mottier 2000).

Intersecting Eugenic Practices

A central tenet of eugenics was the proposition that population and birth rate needed to be planned and managed. Opinion in Switzerland as elsewhere, however, was divided whether state policy was the most effective means or not. The idea of regulating and managing reproduction made women an easier and more efficient target for intervention because of their different social, economic and political status. Women were crucial to the construction and reproduction of nationalist ideologies and perceived in terms of their role as "guardians of the race" (Bland 1982). Thus, their (reproductive) sexuality was constructed as an obligation towards the collective resulting in a discourse of responsible motherhood which was prevalent across Europe and North America (Kline 2001; Stuart 2002). Although not exclusively embedded in eugenics this discourse, rather than refuting individual rights, constructed the individual with a responsibility, both biological and moral, towards the nation whilst not excluding individual rights. The moral dimension was always crucial in underpinning and legitimising eugenic measures and practices[7] because it overlapped with socio-political concerns raised elsewhere. However, there were only certain women which were seen to be "worthy" of being invested

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[5] The various practices and bodies of thought that related to eugenics across Switzerland have not yet been exhaustively researched and collated. Furthermore, there were important local and regional differences rendering the concept of *a* national history problematic.

[6] Forel was the first to carry out a eugenically motivated sterilisation in the German speaking area in 1886 (Wecker 1998). Whilst Rüdin, one of Forel's disciples, was involved with articulating the 1933 law about the prevention of hereditary offspring after his move to Munich, Germany.

[7] This has been variably conceptualized as "reproductive morality" (Kline 2001), or the maintenance of the moral boundaries of the nation (Gerodetti 2005) complementing the controlling of biological boundaries of the nation (Mottier 2000).

with the future of the nation thus resulting not only in the gendering of the nation's future but also differentiating according to cognitive and physical abilities, ethnic groups, class and sexuality.

Amongst the catalogue of eugenic practices prevalent in Switzerland affecting these intersecting subject positions were sterilisation, castration, institutionalisation, immigration, marriage prohibition, child removal, or guardianship measures. This catalogue of eugenic measures was often applied in conjunction with other measures or following one another. Sterilisation practices, apart from the one canton where there was a legal basis which effectively curtailed numbers of sterilisation, were widespread in the bigger Swiss cities in the inter-war years (Wecker 1998; Ziegler 1999). Based officially on the principle of "voluntariness", women were sometimes presented with the option of sterilisation instead of continued institutionalisation, as a condition for the granting of a marriage licence or in relation to obtaining an abortion. Sterilisation practices were an inter-institutional matter initiated by various instances such as the guardianship office, in connection with an abortion or within a psychiatric hospital itself (Huonker 2003; Ramsauer 2002; Wecker 1998). Thus regulated mostly only by medical professional guidelines or cantonal welfare directives, sterilisation practices were most widespread where various institutions or individuals such as psychiatrists and welfare providers were pursuing the same or a similar aim, resulting in a complex alliance between these agencies and depending on socio-economic as well as socio-political factors at any one time.

Regional differences were and are important in Switzerland and it would beyond the scope of this paper to provide a differentiated account of different regions and local authorities. Suffice to say that religious beliefs about the state's role in intervening in reproductive matters were important to local or regional practices of eugenics but also economic considerations of local authorities as they carried the financial burden of supporting 'indigent' members of society. The appeal of the argument of cost-reduction and financial responsibility for resident citizens also shaped differences in welfare practices between communes. The eugenic experiments in social engineering were thus shaped by specific Swiss political institutions, in particular by federalism and the attendant central importance of local agencies and authorities. Many of the eugenic practices, such as forced sterilisation of (mainly) women's bodies, were not carried out by the central state, but through local legislation and administrative measures implemented by cantonal and local authorities as well as para-state actors such as psychiatric clinics. The latter, especially the university clinics in Zürich, Basel and Lausanne, offered practical opportunities for applying eugenicist ideas and technologies to a population which was most often already under tutelage or guardianship orders. Practices of direct intervention by the federal state were comparatively less important in scope, but included central eugenic policies such as elimination of vagrancy operated by *Pro Juventute*, federal legislation prohibiting marriage for mentally ill persons or Jews and regulations in the Criminal Law aimed at curtailing sexual relations with 'mentally deficient' people (Mottier and Gerodetti 2007). It follows that it is equally hard to point to peak practices of eugenics though it would seem that the efforts to translate the eugenic rhetoric and eugenic thinking into practice expanded after WWI but did not succumb to a clear break upon the end of WWII, as it did in other countries (Wecker 1998; Ziegler 1999).

The catalogue of interventions was frequently initiated once people had come to the attention of welfare authorities, be it on the basis of a criminal history or "administrative justice", contact with guardianship authorities, institutionalisation or denunciations from neighbours. Sterilisations were rarely the first step of intervention rather it was used as a final means to regulate female sexuality, that

is, if continuous institutionalisation was no longer viable or if no other means of dissuasion in sexual activities could be ensured. An alternative to continuous institutionalisation, sterilisations were on occasion motivated on economic grounds as sterilisation was cheaper than years of maintenance, particularly during the 1920s when an increasing number of "non-mentally ill" people whose conduct or the nature of their crime led to suspicions of "mental deficiency" were referred into psychiatric care and the population of institutions increased dramatically (Grossenreiter 1994). "Feeblemindedness" had come to be a rather popular diagnosis yet often the boundary between socially undesirable behaviour and cognitive impairment was fluid. Squandermania (*Verschwendungssucht*), economic mismanagement, alcoholism, dissolute conduct (*lasterhafter Lebenswandel*), physical and moral and physical neglect (*Verwahrlosung)* were all subject to interventions by state and para-state apparatuses (Ramsauer 2000; Wecker 1998). They were often seen as cause and effect of "mental deficiency" and once labelled as such the result could easily be a medicalised life trajectory and provide the grounds for being put under guardianship, institutionalised and/or subject to other interventions.

Furthermore, "mental deficiencies" such as "feeblemindedness" had increasingly not only come to be seen as part of the wide spectrum of social problems but were perceived as the root of problems such as crime, vagrancy, poverty, unemployment, alcoholism, prostitution and so on across Europe after the turn of the century (Jackson 2000; Jones 1986). Perceived to be outside of rehabilitation due to their hereditary character "feebleminded" people and people with other "mental deficiencies" were subsumed under the state's interest in reproductive control. Furthermore, those deemed "mentally deficient" were not only added to the sexual regulation agenda but came to be salient targets of regulation and intervention (Gerodetti 2005).

The number of people who were put under guardianship more than doubled in the 1920s. The wards of Zurich's guardianship authorities were predominantly female and in peak times public guardians would have 800 cases on their books (Huonker 2003). People under guardianship were particularly vulnerable to eugenic interventions as their consent was not necessary and their social and civic rights already withdrawn. Sterilisation needed a written consent but for those under guardianship the consent of the guardian as well as a medical professional was sufficient and various institutional practices have shown that the notion of consent operating at the time was far removed from notions of informed consent operating in today's medical practices. Most sterilisations were carried out on women as it was much easier, according to psychiatrists, to persuade women to be "voluntarily" sterilised than men as, so they deemed, as 'men see in sterilisation a proper castration in the psychological sense and it is hard to combat against this prejudice' (Grossenreiter 1995: 237). Similarly medical and social work professionals in other national contexts such as in Alberta, Canada, were also more effective at convincing women into accepting sterilisation (Grekul et al. 2004). Many women who were sterilised came to the attention of welfare authorities and psychiatrists in connection with illegitimate pregnancies or unlawful conduct. Again, although the principle of voluntariness was maintained with regard to sterilisation, records and testimonies from medics show that women were often presented with a choice between sterilisation, the referral to a workhouse, the threat that their poor relief would be withdrawn or under pressure that an abortion would only be carried out if women agreed to a "voluntary" sterilisation (Wecker 1998).

Women were also more likely to get into the machinery of welfare authorities and psychiatric care on the basis of sexual comportment, and prostitutes could legally

be referred to psychiatric care when arrested[8]. Consolidated by a preconception that "feeblemindedness" was more easily inherited in women than in men, there was a widespread belief beyond the realm of psychiatry that many prostitutes were inclined to pathologies. Uncontrollable sexuality and illegitimate pregnancies could thus be quite enough for severe intervention. The most often cited cause of "deviance" in women was "sexual unsteadiness", a characteristic that was contrary to the economic and social purpose of women's reproductive capacities, their housekeeping duties and their child rearing duties, both within the family and towards the state. In a society dominated by stringent moral norms and conceptions of female sexuality as passive it was easy to depart from the norm, particularly for working class women and sterilisation was, in this socially normative context, seen as an effective means of preventing hereditary diseased offspring.

The assessment of "normalcy" and "deficiency" that ultimately underpinned eugenic interventions was thus inherently governed by intersecting discourses on and practices related to sexuality, gender, class, and disability. At the same time, these categories of differentiation were continuously imbued with social and political meaning in and through these processes. It has been argued that eugenics has been seen as Swiss exceptionalism because the perception prevailed that eugenic ideas were applied through the medical route rather than through the political route which has resulted in broader acceptance (Ziegler 1999). Eugenics was not part of a wider public political discussion, rather an exclusively bureaucratic and elite affair with the medical profession as gatekeepers. The relegation of eugenics out of the political sphere into the lap of the medical profession is also implicitly made responsible for the fact that psychiatric treatment and research continued without profound ruptures after World War II in Switzerland (Rufer 1991; Ziegler 1999). Nevertheless, the medical profession acted neither in a vacuum nor entirely without wider socio-political support and eugenic practices remained in the hands of a complex alliance between state, state policy, private welfare providers and medical institutions.

Intersectionality Beyond Social Dimensions

Eugenic practices can be seen as mechanisms of enforcing normalcy which despite the discursive frame of the collective always impacted on individuals and their bodies. In the absence of encompassing state programs this has also had the effect that eugenic histories remain individualised and fragmented and the effects of this fragmentation is still pertinent to contemporary socio-political thinking. With this in mind I move on to explore a theorisation of intersectionality by beginning to suggest a further dimension of intersectionality, that of time and temporal dimensions. In thinking through time as an axis of differentiation one could lean on Avtar Brah's (1996) conceptualisation of intersecting space through her notion of "diaspora space", Barbara Adam's (2003) notion of "timescape" which holds the idea that time is not a static entity or Edward Soja's (1996) explorations the dialectics of time and space. I want to suggest that we would benefit from

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[8] This is not to say that men were subject of serious interventions and sterilisations or castrations, merely that the reasons underpinning it were rather different. Work is ongoing looking into the gendering of reasons of sterilisation practices but it would appear that the decisive reason for male sterilisations/castrations were exhibiting sexual behaviour or same-sex sexual practices. Heterosexual men were sterilised not so much in connection with sexual offences against (younger) women but often at the point where exhibiting behaviour was deemed problematic.

rethinking categorisations of time, its management and maintenance. Specifically, I am concerned here with collapsing notions of chronological time to suggest a more complex relationship between seemingly distinct, contained and bounded notions of time.

In brief, Adam conceives time to be "invented" or socially constructed albeit largely taken and used as a naturalised category. Social research often makes use of differentiated time (and space for that matter) by referring to the ways in which aspects of the social world are historically and culturally or spatially specific or contingent. Yet this differentiation between past, present and future somehow falls short because the categories are presented as internally coherent. Individual and collective experiences of social identities often show that they are constituted differentially in and through time in more complex ways (Hall 1990). Certainly narratives of individual identities often make references to varying configurations of social identities but also to situatedness in spatial as well as temporal configurations.

Adam (2003) conceptualises these complexities of time as "timescape", a concept which posits the temporal equivalent of landscape and which is capable of recognizing all temporal features of socio-political events and processes whilst also charting temporal profiles in their political and economic (and, one might add, juridical) contexts. Adam thereby aims to present us with a conception of time that transcends clock and calendar time, or chronological time, and sees timescape analysis as concerned with what we do with it and how time enters our system of values rather than with establishing what time is or using it as the contextual background to our investigations. Leaning on this I want to propose that timescape analysis should become part of intersectionality similar to the ways in which others have argued that space is part of the figuration of power in its multiple modalities. Space is seen as crucial to analysing the intersections of social divisions and axes of differentiation, particularly in relation to racialised contexts and Brah, for instance, has proposed that '"diaspora space" is the intersectionality of diaspora, border, and dis/location […] where multiple subject positions are juxtaposed, contested, proclaimed or disavowed' (Brah 1996: 208). The figuration of power in its multiple modalities and the intersections across these modalities are thus not only expressed in and through a spatial dimension but equally, one would think, through a temporal dimension.

The temporal aspect goes beyond the obvious time frame of bridging the contemporary with the past. Eugenics itself was deeply linked to ideas about prevention, itself a concept that is extremely directional in terms of time, namely the future. Thus, eugenic thinking and practices were imbued with notions of time, of better times as it were, of a utopian society. This is evidently also the case for genetics today but also, more generally, linked to science and research[9]. After all, a substantial amount of scientific research is directed at improving life – human and nature-, and social, political and/or economic conditions (although not always in transparent ways). In this quest "new" technologies are constantly emerging whilst old technologies become overhauled, obsolete, or disrespected, such as eugenic technologies.

The particular interest here in time as an axis of differentiation in relation to the subject at hand – eugenic practices - has been the Swiss government's refusal to acknowledge the need of and install a system of compensation for those who have undergone coerced sterilisations[10] in Switzerland during the twentieth century in

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[9] See also Latour (2004) and his discussions on political ecologies.
[10] The notion of "forced" is contested and I use "forced" interchangeably here with "coerced". It is notoriously difficult to establish the nature of "forced" and many of the discussions focus

the broader context of eugenics. Compensation has come to be a form of recognition of historical injustice though clearly it is not, nor should be, the only form of reparation. Nevertheless, it raises complex question of moral responsibility. Law and politics frequently collide over these claims whilst having the potential of producing a powerful alliance here. In relation to Switzerland, the legal-political alliance with its refusal ultimately worked against the recognition that injustice was done. While the 1997 media scandal in Sweden which exposed that some 63,000 sterilisations were carried out between 1934 and 1975, many of which under coercion, led to a government apology and a system of compensation for people who had been forcibly sterilised (SOU 2000), in Switzerland the proposal to confront its national past on forced sterilisations and to work out a system of compensation analogous to other countries received a blunt rejection in December 2004. The arguments against compensation, in short, centred around a refusal that the state is responsible due to the absence of national legislation, the fear of setting a precedent for other demands for compensation and the lack of feasibility to establish in retrospect whether someone was forcibly sterilised or not.

In October 1999 a parliamentary initiative[11] was submitted to the Swiss government seeking to install a system of compensation for victims of forced sterilization as well as demanding regulatory legislation of future sterilization practices on a national level. In December 2004 Swiss Parliament passed legislation which would safeguard future sterilisation practices but had rejected the demand to compensate people who had been sterilised against their will. Despite an initial welcoming of the initiative, it was the position paper of the Federal Council in 2003 which, although it welcomed the "important work of the legal commission" of rendering visible the coercive measure taken against disabled or marginalised people, which steered the decision making process towards the final rejection.

An initial position paper acknowledged that there was a need to critically question as well as recognise the perhaps "darker sides of recent social history", as the nation did with regard to the "Children of the Country Road" program, which was the government funded program to remove Jenisch children from their families and place them in foster or residential care between 1928 and 1976 (Leimgruber et al 1998). While the position paper acknowledged that sterilisation had been based partly on eugenic reasons the report also perceived it to be a delicate undertaking to discuss compensation in a contemporary context as moral values and ethics had changed in the past hundred years. Not only had conceptions of psychiatry changed significantly but sexuality as a component of individual identity has been claimed by disabled people, unimaginable only a few decades before, the report argued (Bundesblatt 2003).

Leaving aside the Swiss fear of setting precedents I want to briefly examine the relations and effects of the argumentation deployed in the rejection of a compensation scheme. Unlike Sweden, which did have national legislation

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on the differences between voluntary and forced sterilisation and the legal basis for either or both (Missa 1999; Porter 1999; Weindling 1999), yet relatively little is said about the fact that these did not constitute two ends of a continuum. Rather, as can be shown with the Swiss or Swedish practices, "voluntariness" was upheld as a principle in many places even though actual practices point clearly to pressures and/or threats under which consent was given (either by the person or by two authorised people). In addition, a closer look at coerced sterilisations reveals that they were often embedded in a complex catalogue of interventions and built upon existing social and political inequalities (Gerodetti 2006b), thereby rendering it a highly gendered practice in most national contexts.

[11] *Parlamentarische Initiative Margrith von Felten. Zwangssterilisationen. Entschädigung für Opfer*, *99.451.* http://www.parlament.ch.

governing sterilisation practices, Switzerland did not and this has fostered the interpretation that none of these sterilisations were illegal as no criminal code had been violated and consent forms had been signed. Yet others have argued that the medical profession was well aware that sterilisations could constitute grievous bodily harm and the signing of consent forms was precisely a safeguard against prosecution. The fact that nobody has been prosecuted on the basis of grievous bodily harm in relation to coerced sterilisations was not indicative of the fact that sterilisations were not forced, merely that the people concerned did not attempt to, or were discouraged from, bringing the issue to court. The Swiss Federal Council admitted the complexity of legality: 'It can be concluded from the commission report that sterilisations which took place without informed consent were based on different situations and practices according to each canton, physician and institution. The boundary between interventions which were evidently based on illegal coercion and whose legitimacy remains controversial today is fluid' (Bundesblatt 2003: 6357).

Central to my argument here is that concerns were raised about judging past events by present ethical standards and about the injustice of condemning now those individuals who acted in the interest of society and according to prevalent social understandings. This is somewhat of a departure of argumentation even for the Swiss who, in recent years, were not *a priori* against admitting to past injustices. Although the Federal Council only issued an apology and installed a compensation scheme for the people affected by the "Children of the Road" scheme after sustained public pressure, equally a collective responsibility was acknowledged in relation to haemophiliacs and blood contamination by HIV and, finally, the historical commission on the role of Switzerland during WWII which was prompted by the Nazi-Gold scandal also concluded that there was such a thing as "collective responsibility by the state" even, or particularly, where it was not caused by actions but by lack of action (UEK 2002).

The concerns raised by the Federal Council in 2003 resulted in the reduction of the compensation package suggested. Instead of "compensation", a "symbolic reparation" of 5,000 SFr (€3,250/£2,100) was now suggested which was, however, still rejected by centre and right parties as a symbolic gesture. In their view it would be wrong "to judge the past according to today's measures and knowledge [and] to map our conception of law onto incidents which occurred in different time and under different conditions" (Steno. Bull. NR 2004: Mathys SVP: 247). In contrast, social democrats and greens argued for a need to acknowledge past injustices and saw it neither as shame nor misjudgement to retrospectively deem certain practices to be illegal and victimising.

Opposed and finally rejected by the majority of centre and right parties, the political left considered the decision to demonstrate "a lacking sense of history" to be "constitutionally insensitive and insufficient" and to constitute a formal-legal side manoeuvre. In addition, they argued that the reparation package of 5000 SFr would "merely be the bunch of flowers that comes with an apology" (Steno Bull. NR 2004: Marty Kälin SP: 254). They also stipulated that the rejection of the proposal for compensation would "make the victims from then to victims again and legitimise the actions of the perpetrators in retrospect" (ibid). Indeed, the whole discussion had largely left out an analysis of the subject positions of the people affected by forced sterilisations and they way in which intersecting axes of social divisions made them particularly vulnerable to eugenic interventions. The peripheral reference that sexuality as a component of individual identity of disabled people was unimaginable only a few decades before minimises and evades not only the history of disabled people but also forecloses the ways in which intersections of social divisions were actively "disabling" people. That is, at the intersections of

class, sexuality and cognitive and physical abilities women in particular were rendered "disabled" through these labelling and interventionist practices (Gerodetti 2005). The rejection to face and acknowledge that uncomfortable part of Swiss history thus means no real break and the temporal dimension of eugenics, in that sense, spans from the past to the present and into the future. Thus, whilst there may have been no "national history of eugenics" recent discussions have created a collective experience of reparation in the present, indicating that the past has a complex relation to the present. The Swiss dealings with claims about social justice can be seen as the temporal dimensions of a socio-political analysis of eugenics and which also impact, and indeed are constitutive of, an intersectional analysis.

Conclusion

Thinking about intersectionality means thinking about complexity and messiness. The way in which different categories or dimensions collide, interact, and create particular modalities implies that the ontological premises of inquiries are challenged. Intersectional analysis is different from multi-variate analysis in that it does not presume the stability or internal coherence of its categories applied, rather it seeks to destabilise the categories and any primacy linked to either of them in order to centralise the dialectic in any given context and time. Although recently sociologists such as John Law and John Urry (2004) have postulated complexity theory and analysis to form a central constitutive part of social inquiry which would be able to be non-reductionist, some of their postulates seem rather familiar. Feminist theory and critical race theory, for example, have long made the claim that we need to move away from conventional linear analyses and attempts to simply add together individual components. Indeed, gender studies, critical race studies or disability studies have acknowledged that the simple adding of oppressions derived from different marginalised subject positions does not result in multiple oppressions and produce smaller and smaller collectives of those who can claim a political position as "the same". Or, at least, many theorists from these quarters have come to acknowledge that "multiple oppressions" as a concept has serious shortcomings in terms of political claims. Although intersectionality and multiple oppressions are, at a first glance, not mutually exclusive they do present different premises for political action. This then, perhaps, is also where intersectionality encounters its challenge, for while intersectional analyses as a tool and method of inquiry can easily be applied when translating it into strategies of politics the potential turns into more of a challenge.

I have been trying to consider how eugenic practices can provide a platform to consider intersectionalities in relation to the state, state policies and identity politics. In analysing the juxtaposing discourses on sexuality, gender, class and "mental deficiency", I propose that the ways in which these categories intersect contributed to constructions of normality and "worthiness" which are enduring in the current socio-political arena, thereby beginning to apply intersectionality not only to social dimensions but, importantly, also to temporal and spatial dimensions.

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