

A New Diplomacy: Indigenous Women and the Fight to End Forced Sterilization

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Between the years 1970 and 1979, twenty-five to forty-two percent of Indigenous women of childbearing age in the United States were forcibly sterilized.¹ The sterilizations, often performed by doctors from the U.S. Indian Health Service (IHS), were part of a federal family-planning policy with a stated goal of combating overpopulation. In practice, however, Indigenous people saw something vastly different. “We are the target for the total final extermination of us as people,” Cheyenne tribal judge Marie Sanchez declared at a United Nations conference in 1977.² During this period, Indigenous people from more than thirty tribes formed a movement to fight against coerced sterilization using many types of activism including lawsuits, education campaigns, petitions, and protests. These tactics can and must be understood as a form of nontraditional diplomacy because Indigenous people, while sovereign, were unable to engage in conventional foreign relations with the U.S. government. The Indigenous activist movement used this “new” diplomacy to create fundamental change: White leaders shifted sides on the sterilization debate, Indigenous healthcare was reformed, and eventually forced sterilization ended.³

Forced sterilization policies in the U.S. began as early as 1907, with state laws passed by White politicians that were based on the eugenics theory that there were “mentally unfit” people who should not be allowed to reproduce. These leaders considered people of color “mentally

¹ Andrea Carmen, “Native American Growing Fight Against Sterilizations of Women,” *Akwesasne Notes* (Late Winter 1979): 1; Brianna Theobald, “A 1970 Law Led to the Mass Sterilization of Native American Women. That History Still Matters,” *Time*, November 28, 2019, <https://time.com/5737080/native-american-sterilization-history/>.

² International Indian Treaty Council, *International NGO Conference on Discrimination Against Indigenous Populations—1977—In the Americas September 20-23* (International Indian Treaty Council, New York: 1977).

³ Carmen, “Fight Against Sterilizations,” 1; Jane Lawrence, “The Indian Health Service and the Sterilization of Native American Women,” *American Indian Quarterly* 24, no. 3 (Summer 2000): 406, <https://www.jstor.org/stable/1185911>; Theobald, “A 1970 Law Led to the Mass Sterilization.”

unfit,” so Black and Latina women were disproportionately sterilized.⁴ In 1927, the Supreme Court lent support to these local efforts in *Buck v. Bell*, which found that the eugenics-based sterilization laws of thirty-three states were constitutional, as “public welfare may call upon... those who are mentally unfit from continuing their kind.”⁵ In the 1942 case *Skinner v. Oklahoma*, however, the Supreme Court reversed course by deeming compulsory state-sanctioned sterilizations unconstitutional. Still, this did not mark the end of forced sterilization. In 1961, nineteen years after *Skinner v. Oklahoma*, Black civil rights leader Fannie Lou Hamer was sterilized against her will by doctors at a South Carolina hospital. Hamer later estimated that sixty percent of Black women who had gone to hospitals in the region were also forcibly sterilized.⁶ By 1970, one-third of Puerto Rican women had been coercively sterilized, which activist organizations called the “implementation of racism, sexism and the oppression of working people within the healthcare system.”⁷ Even though forced sterilization policies were deemed illegal in 1942, these practices continued to harm women of color.⁸

⁴ Alexandra Stern, “Forced Sterilization Policies in the U.S. Targeted Minorities and Those with Disabilities—and Lasted into the 21st Century,” *The Conversation*, August 26, 2020, <https://theconversation.com/forced-sterilization-policies-in-the-us-targeted-minorities-and-those-with-disabilities-and-lived-into-the-21st-century-143144>.

⁵ Oliver Wendell Holmes, and Supreme Court of the United States, *Buck v. Bell*, 274 U.S. 200 (1926).

⁶ “Fannie Lou Hamer,” *PBS*, <https://www.pbs.org/wgbh/americanexperience/features/freedomsummer-hamer/>.

⁷ The Committee to End Sterilization Abuse, “CESA Statement of Purpose,” (1975), <https://www.cwluherstory.org/health/cesa-statement-of-purpose>; Katherine Andrews, “The Dark History of Forced Sterilization of Latina Women,” *Panoramas*, October 30, 2017, <https://www.panoramas.pitt.edu/health-and-society/dark-history-forced-sterilization-latina-women>.

⁸ Andrews, “The Dark History of Forced Sterilization of Latina Women;” The Committee to End Sterilization Abuse, “CESA Statement of Purpose;” Emily Medosch, “Not Just ICE: Forced Sterilization in the United States,” *Immigration and Human Rights Law Review*, May 28, 2021, <https://lawblogs.uc.edu/ihr/r/2021/05/28/not-just-ice-forced-sterilization-in-the-united-states/>; “Fannie Lou Hamer;” Paola Alonso, “Autonomy Revoked: Forced Sterilization of Women of Color in 20th Century America,” *Ibid.* 13 (Spring 2020): 3-6; Sanjana Manjeshwar, “America’s Forgotten History of Forced Sterilization,” *Berkeley Political Review*, November 4, 2020,

Against this backdrop, a 1970 federal law ushered in a new phase in sterilization that had a disproportionate impact on Indigenous women. The Family Planning Services and Population Research Act increased access to contraception methods by paying ninety percent of family-planning expenses for low-income families.⁹ Significantly, sterilization was among the contraception methods included. The legislation passed both houses of Congress with bipartisan support.¹⁰ In signing the law, President Richard Nixon echoed Congressional leaders by saying that increased funds for contraception were necessary because “population growth is among the most important issues we face.”¹¹

Although Congress intended for the legislation’s services to be voluntary, in practice the Family Planning Act triggered a wave of forced sterilizations, especially among Indigenous women. In 1972, the Choctaw and Cherokee physician Connie Pinkerton-Uri found that nationally, at least twenty-five percent of Indigenous women between the ages of fifteen and twenty-four had been sterilized “under duress or without information about the irreversible

<https://bpr.berkeley.edu/2020/11/04/americas-forgotten-history-of-forced-sterilization/>; Stern, “Forced Sterilization Policies.”

⁹ Sally J. Torpy, “Native American Women and Coerced Sterilization: On the Trail of Tears in the 1970s,” *American Indian Culture and Research Journal* 24, no. 2 (2000): 4; Public Law 91-572 (1970).

¹⁰ Richard Nixon, “Statement on Signing the Family Planning Services and Population Research Act of 1970” (speech, Washington, DC, December 26, 1970), *The American Presidency Project*, <https://www.presidency.ucsb.edu/documents/statement-signing-the-family-planning-services-and-population-research-act-1970>.

¹¹ Richard Nixon, “Special Message to the Congress on Problems of Population Growth” (speech, Washington, DC, July 18, 1969), *The American Presidency Project*, <https://www.presidency.ucsb.edu/documents/special-message-the-congress-problems-population-growth>; Alonso, “Autonomy Revoked,” 3-6; Andrews, “The Dark History;” Holmes, and Supreme Court of the United States, *Buck v. Bell*. Medosch, “Not Just ICE;” “Nixon Abortion Stand;” Public Law 91-572 (1970); Nixon, “Statement;” Manjeshwar, “America’s Forgotten History;”; Stern, “Forced Sterilization Policies in the U.S. Targeted Minorities;” Torpy, “Native American Women,” 4.

nature of the operation.”¹² Lee Brightman, the president of activist organization United Native Americans, estimated this statistic was higher, at forty-two percent.¹³ Indigenous women were particularly vulnerable because they received healthcare only from the IHS, a federal agency incentivized by the increased funding from the Family Planning Act to perform sterilizations. Doctors also had socioeconomic prejudices. A study conducted in 1972 found that ninety-four percent of obstetrician-gynecologists preferred sterilization for women on welfare with three or more children; many Indigenous women fell into this category.¹⁴ The question for Indigenous women was how to change this practice.¹⁵

The U.S. Supreme Court recognized Indigenous people as sovereign, but they were unable to have traditional foreign relations with the U.S. government. As a result, they utilized activism as a nontraditional diplomatic tactic. Despite being “distinct independent political communities,” tribes were subject to the U.S. government’s paternalistic policies, such as relocation programs, and did not have the ability to create treaties.¹⁶ Without access to traditional avenues of diplomacy, Indigenous people turned to activism to change the federal policies that affected tribes. According to foreign policy analyst Anne-Marie Slaughter, activism can be a type of diplomacy, as networks of non-state actors use nontraditional methods to influence the largely

¹² Gail Mark Jarvis, “The Theft of Life,” *Akwesasne Notes* (September 1977): 30, <https://babel.hathitrust.org/shcgi/pt?id=mdp.39015011030361&view=1up&seq=33&skin=2021>.

¹³ Carmen, “Fight Against Sterilizations,” 1.

¹⁴ Robin H. Jarrell, “Native American Women and Forced Sterilization, 1973-1976,” *Caduceus: A Museum Journal for the Health Sciences* 8, no. 3 (Winter 1992): 50.

¹⁵ Carmen, “Fight Against Sterilizations,” 1; Jarrell, “Native American Women,” 50; Mark Jarvis, “The Theft of Life;” Lawrence, “The Indian Health Service,” 410; Connie Pinkerton-Uri and Marie Sanchez, “Concerns of American Indian Women,” interview by Sandra Elkin *Woman*, WNED, April 15, 1977, video, 9:26, https://americanarchive.org/catalog/cpb-aacip_81-67wm3fxh.

¹⁶ John Marshall and Supreme Court of the United States, *Worcester v. the State of Georgia*, 31 U.S. 6 Pet. 515 (1832); “The United States Government’s Relationship with Native Americans,” *National Geographic*, December 11, 2019, <https://www.nationalgeographic.org/article/united-states-governments-relationship-native-americans/>.

White, male electorate controlling U.S. policies.¹⁷ In some cases, Indigenous activists also worked like more traditional official diplomats, speaking at U.N. conferences, and creating protest demands in lieu of treaties.¹⁸ The Indigenous movement to end forced sterilization used many forms of activism as nontraditional diplomacy, including lawsuits, education campaigns, petitions, and protests.¹⁹

Lawsuits were a difficult avenue of activism due to all-White juries and judges and the stigma of infertility, but they mobilized Indigenous activists to use nontraditional diplomatic tactics to change the debate. Despite the frequency of forced sterilizations, Indigenous women were reluctant to take legal action. Fertility and family were essential parts of womanhood in Indigenous culture, so sterilized women were often ostracized from their communities.²⁰ When Indigenous activists encouraged these women to sue, few wanted to publicly reveal their infertility. In 1977, three Cheyenne women did sue individual physicians for coerced sterilization, but they settled in part to keep their names withheld, fearing retribution within their tribes. In 1979, the only lawsuit that went to trial resulted in an all-White jury and White judge siding with the doctor instead of the sterilized Indigenous woman.²¹ Yet what may seem like a

¹⁷ Anne-Marie Slaughter, *The Chessboard and the Web: Strategies of Connection in a Networked World* (New Haven, CT: Yale University Press, 2017), 162-164.

¹⁸ Indians of All Tribes, "The Alcatraz Proclamation," (1969); International Indian Treaty Council, *International NGO Conference*.

¹⁹ Anne-Marie Slaughter, *The Chessboard and the Web: Strategies of Connection in a Networked World* (New Haven, CT: Yale University Press, 2017), 162-164; Indians of All Tribes, "The Alcatraz Proclamation," (1969); International Indian Treaty Council, *International NGO Conference*; Marshall and Supreme Court Of The United States, *Worcester v. the State of Georgia*; "The United States Government's Relationship with Native Americans," *National Geographic*, December 11, 2019, <https://www.nationalgeographic.org/article/united-states-governments-relationship-native-americans/>.

²⁰ U.S. Commission on Civil Rights, *National Indian Civil Rights Issues: Hearing Before the United States Commission on Civil Rights* (Commission, 1979), 33.

²¹ "Native Woman Sues Over Illegal Sterilization, Seizure of Children," *Akwesasne Notes* 7, no. 3 (1975): 8, <http://www.aidhp.com/items/show/35#?c=&m=&s=&cv=>.

failure at achieving justice was in fact a success, as Indigenous people were now turning to activism as a nontraditional form of diplomacy.²²

Indigenous activists also amplified their side of the sterilization debate by launching an education campaign about the sterilization abuses in Indigenous media. While many Indigenous people learned about forced sterilization through women in their communities and a handful of lawsuits, many others were still unaware.²³ Activist organizations educated Indigenous communities on IHS family planning regulations and what the agency legally could and could not do. American Indian Health Professionals, an activist organization, created and distributed the booklet *What Every Indian Woman Should Know About Sterilization*. Indigenous newspapers, often citing statistics from Pinkerton-Uri's study, started warning of a "genocidal campaign designed to rid itself of the Native people."²⁴ In newspaper and television interviews, activists explained what sterilization and informed consent was, and shared stories about individual women who had been sterilized against their will. Activists were strategic in their media campaigns, focusing on Indigenous media because, as the editors of the Indigenous newspaper *Akwesasne Notes* said, "in terms of the mass media, we have come to expect that they would not give much coverage."²⁵ Still, accounts in Indigenous media challenged White ideas in the debate that sterilization was simply a tool to combat overpopulation. Indigenous newspapers adopted activists' rhetoric, which directly contrasted White politicians' language: "oppression" instead of

²² Brianna Theobald, *Reproduction on the Reservation: Pregnancy, Childbirth, and Colonialism in the Long Twentieth Century*, (Chapel Hill, NC: The University of North Carolina Press, 2019), 162; Lawrence, "The Indian Health Service," 410; Myla Vicenti Carpio, "The Lost Generation: American Indian Women and Sterilization Abuse," *Social Justice* 31, no. 4 (2004): 46, <https://www.jstor.org/stable/29768273>; "Native Woman Sues Over Illegal Sterilization," U.S. Commission on Civil Rights, *National Indian Civil Rights Issues*, 33.

²³ U.S. Commission on Civil Rights, *National Indian Civil Rights Issues*, 35.

²⁴ Carmen, "Fight Against Sterilizations," 1.

²⁵ "How it is with us," *Akwesasne Notes* 9, no. 5 (December 1977): 2, <http://cendoc.docip.org/collect/cendocdo/index/assoc/HASH014b/77b7b9ea.dir/Akwesasne%20Notes%20Vol.9%20n5%201977.pdf>.

“assistance,” and “forced,” instead of “voluntary.”²⁶ Indigenous journalist Andrea Carmen dismissed justifications for sterilizations by explaining that overpopulation “can not be used as an excuse, since the entire Native population totals only $\frac{2}{5}$ of 1% of the U.S. population.”²⁷ Pinkerton-Uri also challenged the idea that sterilization could alleviate poverty, writing, “Women who are poor don’t get rich by having their tubes tied.”²⁸ Activists used a nontraditional form of diplomacy to educate their community on sterilizations and clearly articulated the oppositional position in the debate.²⁹

Indigenous activists used another diplomatic tactic—petitions—to try to change national politicians’ opinions on the forced sterilization debate. Activists started petition campaigns and called for Congress to investigate the IHS and reform sterilization regulations.³⁰ Indigenous doctors and even some IHS personnel wrote to Senator James Abourezk of South Dakota (D), the chairman of the Senate Interior Subcommittee on Indian Affairs. They alerted him about the coerced sterilizations and insisted that regardless of preexisting conceptions of the good of family planning services for low-income and Indigenous communities, there was serious abuse.³¹ This form of diplomatic advocacy was a recognition that reforms to stop forced sterilization could only come from a federal level since the IHS was a federal agency. Indigenous activists

²⁶ Carmen, “Fight Against Sterilizations,” 1; The Committee to End Sterilization Abuse, “CESA Statement of Purpose;” Nixon, “Special Message;” Nixon, “Statement on Signing.”

²⁷ Carmen, “Fight Against Sterilizations,” 2.

²⁸ “Sterilization of Native Women Charged to IHS,” *Akwesasne Notes* 6, no. 5 (1974): 6, <http://www.aidhp.com/items/show/31#?c=&m=&s=&cv=>.

²⁹ Carmen, “Fight Against Sterilizations,” 1-2; “How it is with us,” 2; Mark Jarvis, “The Theft of Life,” 30; Nixon, “Special Message;” Nixon, “Statement on Signing;” “Sterilization of Native Women Charged to IHS,” 6; “Sterilization of Young Native Women Alleged at Indian Hospital—48 Operations in July, 1974 Alone,” *Akwesasne Notes* 6, no. 3 (1974): 22, <http://www.aidhp.com/items/show/29#?c=&m=&s=&cv=>; Theobald, *Reproduction on the Reservation*, 162; U.S. Commission on Civil Rights, *National Indian Civil Rights Issues*, 35.

³⁰ “Sterilization of Native Women Charged to IHS,” 6; “Sterilization of Young Native Women,” 22.

³¹ Lawrence, “The Indian Health Service,” 406.

needed the support of Congressional leaders to enact federal reforms that would end forced sterilization.³²

To change the opinion of White politicians and audiences, Indigenous activists also used protests as a form of diplomacy. In 1974, twenty-five Indigenous people, including members of the major activist organization American Indian Movement (AIM), protested in front of an IHS hospital in Claremore, Oklahoma where doctors had performed hundreds of coerced sterilizations.³³ Later, AIM organized the Longest Walk of 1978, in which thousands of Indigenous people and allies walked from San Francisco to Washington D.C., to raise awareness among White audiences about Indigenous issues, including sterilization. Over the course of the walk, activists organized teach-ins on coercive sterilization and Tulalip activist Janet McCloud spoke about sterilization at the culminating Washington rally. Protests of this magnitude finally brought the discussion of sterilization outside of the Indigenous community; national media like *The New York Times* covered the events and politicians took note.³⁴ Sterilization, along with other Indigenous issues, garnered national attention. These protests were part of the activist movement's diplomacy to end forced sterilization. Using lawsuits, awareness campaigns, petitions, and protests, Indigenous people changed the forced sterilization debate.³⁵

³² Ibid.; Mark Jarvis, "The Theft of Life," 30; "Sterilization of Native Women Charged to IHS," 6; "Sterilization of Young Native Women," 22.

³³ Thomas Talamini, Dorothy Remmie, and Stella Richards were administrators at the Claremore hospital. Brooke Hadley, "The Sterilization of Native American Women in Oklahoma," (master's thesis, University of Oklahoma, Norman, OK, 2021), 36; "Sterilization of Native Women Charged to IHS," 7.

³⁴ Ben A. Franklin, "The 'Longest Walk' Was Designed to Raise Consciousness, Not Backlash," *The New York Times*, July 16, 1978, <https://www.nytimes.com/1978/07/16/archives/for-indians-the-militancy-is-muted.html>; Morgan Freeman, "Forgotten Women: The Involuntary Sterilization of American Indian Women during the Twentieth Century," (honors thesis, Union College, Schenectady, New York, 2018), 58.

³⁵ Charlotte Muth, "The Longest Walk's Final Destination," *WETA*, October 23, 2020, <https://boundarystones.weta.org/2020/10/23/longest-walks-final-destination>; Franklin, "The 'Longest Walk,'" Freeman, "Forgotten Women," 58; Hadley, "The Sterilization of Native American Women in Oklahoma," 36; "Sterilization of Native Women Charged to IHS," 7.

As a result of Indigenous diplomacy throughout the 1970s, White politicians and organizations began to see the sterilization debate differently: instead of being a tool to combat overpopulation, sterilization policy became understood as harmful to Indigenous people. In 1974, the Senate's Permanent Investigations Subcommittee convened to investigate IHS hospitals and their use of coercive sterilization. Senators grew concerned when they learned from Indigenous and IHS witnesses that nurses would not inform families about sterilization procedures so as to not "develop unnecessary anxiety."³⁶ Senator Henry Jackson of Washington (D) had voted for the Family Planning Act, but after this hearing, he worried that "such improper practices" were violating "ethical codes and state law."³⁷ Now, due to diplomatic activism, senators were understanding the Indigenous position in the sterilization debate and changing their minds.³⁸ Activists also demonstrated the importance of this issue to health groups. In 1975, the influential health journal *Health/PAC Bulletin* worked with activists to distribute a two-page pamphlet covering the history of sterilization, policy reform proposals, and sterilization abuses. The most important part was that it described how forced sterilization was "the implementation of racism, sexism and the oppression of working people within the healthcare system."³⁹ By 1976, a host of White people and organizations opposed forced sterilization and alleged "racist and classist applications of the federal family planning programs."⁴⁰ Indigenous activism led to White

³⁶ "Sterilization of Native Women Charged to IHS," 6.

³⁷ Ibid.

³⁸ S.522 - Indian Health Care Improvement Act (1976).

³⁹ "Sterilization Abuse of Women: The Facts," *Health/PAC Bulletin*, no. 62 (January-February 1975).

⁴⁰ Sonya Borrero, Mitchell D. Creinin, and Nikki Zite, "Federally Funded Sterilization: Time to Rethink Policy?" *Am J Public Health* 102, no. 10 (2012): 1822-1825, <https://doi.org/10.2105/AJPH.2012.300850>.

organizations and politicians acknowledging the flaws in Indigenous sterilization practices for the first time.⁴¹

Due to Indigenous diplomacy, politicians addressed the previously overlooked side of the sterilization debate by making a unanimous decision to reform Indigenous healthcare. After receiving the letters from physicians worried about sterilization abuses, Senator Abourezk conducted an initial investigation, interviewing tribal groups, and Indigenous activists. Concerned with the findings, in April 1975 he commissioned the Government Accounting Office (GAO) to conduct a study. The GAO report, released in 1976, concluded that between 1973 and 1976, 3,406 Indigenous women were sterilized in just four IHS hospitals.⁴² Sixteen of these women were under twenty-one, an age the Department of Health, Welfare, and Education (HEW) specifically barred from being sterilized.⁴³ Although most sterilizations had a consent form on record, the study found that these forms did not demonstrate informed consent.⁴⁴ Abourezk was appalled at these findings, noting that proportionate to population, the number of Indigenous women being sterilized “would be comparable to 452,000 non-Indian women.”⁴⁵ Abourezk may have been more open to Indigenous activists’ arguments than other White politicians because he grew up on a reservation and saw firsthand the oppression Indigenous people experienced, but others modified their stances as well.⁴⁶ Six years earlier and without

⁴¹ Hadley, “The Sterilization of Native American Women in Oklahoma,” 28; S.522 - Indian Health Care Improvement Act (1976); “Sterilization Abuse of Women: The Facts;” “Sterilization of Native Women Charged to IHS,” 6.

⁴² Government Accountability Office, *HRD-77-3 Investigation of Allegations Concerning Indian Health Service* (1976).

⁴³ “Sterilization Case Rejected by Court,” *The New York Times*, September 15, 1977, <https://www.nytimes.com/1977/09/15/archives/sterilization-case-rejected-by-court-challenge-to-hew-rules-termed.html>.

⁴⁴ Government Accountability Office, *HRD-77-3*.

⁴⁵ Torpy, “Native American Women,” 7.

⁴⁶ Myra MacPherson, “Calling It Quits on the Hill,” *The Washington Post*, June 1, 1977, <https://www.washingtonpost.com/archive/politics/1977/06/01/calling-it-quits-on-the-hill/c8aae523-2aac-4a71-a38c-4223d16876df/>.

considering the Indigenous perspective, the U.S. Senate unanimously had passed the Family Planning Act. Indigenous diplomatic activism and the GAO report brought to light the impact of sterilization on Indigenous communities and strengthened the Indigenous side of the family-planning debate. Senators also recognized that the IHS was abusive, and unanimously passed the Indian Health Care Improvement Act, which became law in 1976. This act gave Indigenous communities autonomy over healthcare services, enabling many tribes to take over IHS facilities, which led to a reduction in sterilization abuse.⁴⁷

Activists' success in shifting the way White leaders saw this debate led to a change in regulations about sterilization procedures. The combination of a large Indigenous activist movement and influential politicians turning against forced sterilization put pressure on HEW, the parent agency of IHS, to reform its family-planning regulations. In light of the evidence that its consent forms did not ensure informed consent, HEW updated its regulations in 1976, stipulating that information relating to the sterilization procedure must be given orally to avoid literacy problems and that a woman in labor could not give consent. Indigenous activists had cited the absence of those stipulations previously as primary reasons why the sterilizations were coerced.⁴⁸ HEW also created a standardized consent form, which the GAO report recommended. Finally, as the result of a multi-year diplomatic campaign by Indigenous activists, sterilizations were seen as having an insidious impact on Indigenous people, prompting a major change in regulations.⁴⁹

⁴⁷ Government Accountability Office, *HRD-77-3*; Lawrence, "The Indian Health Service," 406, 414-415; MacPherson, "Calling It Quits on the Hill;" S.522 - Indian Health Care Improvement Act (1976); "Sterilization Case Rejected by Court;" Torpy, "Native American Women," 7.

⁴⁸ Lawrence, "The Indian Health Service," 412.

⁴⁹ Borreo, Creinin, and Zite, "Federally Funded Sterilization: Time to Rethink Policy?" 1822-1825; Lawrence, "The Indian Health Service," 412; U.S. Department of Health, Education, and Welfare, 42 Code of Federal Regulations. 441.257, 1976.

Despite the stated goal of reducing poverty and overpopulation, the Family Planning Act led to the mass forced sterilization of Indigenous women. To end forced sterilization, an Indigenous activist movement formed that used a range of methods to reshape the sterilization debate. Since Indigenous people, while sovereign, were unable to participate in traditional diplomacy, this activism must be considered a form of nontraditional diplomacy. This diplomatic activism led to a paradigm shift: politicians changed their stances on the sterilization debate, new legislation gave Indigenous people autonomy to control their healthcare facilities, and reformed regulations ended coerced sterilizations. The expanded definition of diplomacy outlined in this paper is not exclusive to the Indigenous anti-sterilization movement. Oppressed groups throughout history have been excluded from positions of power, including traditional diplomacy, and when they turn to other methods to create change, they have been dismissed as rebellious, dangerous, or wrong, even when they have the moral high ground. If peaceful activism is excluded from the definition of diplomacy, historians and political scientists risk losing historical accuracy: there will always be an imbalance of power, where the group or people who have access to traditional diplomacy will be highlighted more than oppressed groups. Without an expanded definition, marginalized people will continue to be oppressed by how history is told.