



Voluntary and therapeutic castration of sex offenders in The Netherlands (1938–1968)

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ABSTRACT

Between 1938 and 1968 some 400 sex offenders in the Netherlands who by court orders had been put at 'the discretion of the government' and were incarcerated in asylums for the criminally insane, 'voluntarily' submitted themselves to 'therapeutic' castration, the surgical removal of their testes. Prior to 1938, inspired by a Danish castration act from 1929, and urged by asylums that were overcrowded by sex offenders, the ethics of the surgery had been discussed for nearly a decade amongst theologians, (forensic) psychiatrists, jurists and politicians, mostly in the context of eugenic sterilization. Discussions of conflicting Catholic, Protestant and non-denominational points of view vis-à-vis eugenics resulted in consensus about 'therapeutic' and 'voluntary' castration. Sexual deviancy, according to some, was like a tumor located in the testes, which could therefore be removed without moral objections and the person was thus cured of his disease. Although obviously related to forensic psychiatry and concerned with issues like protection of society and treatment of offenders, discussions were never held in a strictly forensic context. Unlike in other countries in which castration policies were enforced, in The Netherlands the surgery was never embodied in law but subject to an informal protocol that covered political accountability. To satisfy Catholic objections references to eugenic aims were omitted from the documents, as were references to castration as a penalty.

Based on international and Dutch literature (from both before and after 1938) as well as case histories, this article will show that the compromise about the therapeutic value of castration had no basis in medical knowledge, while 'voluntariness' (as elsewhere) was an acknowledged fallacy once surgeries had started. It was also acknowledged that castration did not really cure deviancy, but curbed libido and helped the castrate to suppress his urges. Nonetheless, because of the eugenic origins of discussions, associated with persistent confusion about the difference between castration and sterilization, it never became fully clear whether the surgery was meant to curb libido or to prevent the offenders from begetting inferior progeny.

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1. Introduction

After a decade of debates amongst psychiatrists, theologians, legal experts and politicians about the ethics, desirability or acclaimed necessity of castration of sex offenders, in 1938 the Dutch minister of Justice for the first time gave permission for the surgery of a repeat offender. Under court orders the man had been hospitalized in a state asylum for the criminally insane. He himself had made a study of some of the theological literature (Van Rooy, 1938) espoused by the debates and had made several successive pleas to be castrated to the minister (Van der Meer, 2009). With this first approved surgery on a sex offender, castration practices on this category of hospitalized delinquents took off, and – with several moratoria in the early years – then lasted until 1968. In these thirty years over 400 men and at least one woman who also had been hospitalized because of their criminal insanity 'voluntarily' submitted themselves to 'therapeutic' castration: the surgical removal of

their testes or their ovaries (De Boer, 1969; Van der Meer, 2008, 2009).¹ Castration of sex offenders in The Netherlands was based on an informal protocol, unrelated to the civil or penal code, which dealt with political accountability rather than with medical procedures. 'Voluntary' meant castration could not be imposed by criminal courts, nor by any other authority, and that this surgery was only permitted at the request of an offender. 'Therapeutic' referred to the idea that these people were to be cured of a diseased sexuality. From 1938 to 1968, unknown numbers of men and women were castrated in asylums for the insane, outside the

¹ De Boer, 1969 is an internal report from the Department of Justice, based on documents that could not be retraced. De Boer mentions a total of 384 castrations between 1938 and 1968, yet his figures per annum are smaller than those mentioned in annual reports of the asylum Veldzicht. Although Veldzicht accounted for 75% of all castrations according to De Boer, there were at least five other asylums where castration were conducted – most after World War II – on the criminally insane. Out of those 384, De Boer was able to gather data on 303 cases. De Boer's figure first became public in Buitelaar, 1978, and has since been quoted persistently (Koenders, 1996; Koolhaas & Maris, 1992; Oosterhuis, 1992; Oosterhuis and Gijswijt-Hofstra, 2008). Koolhaas and Maris – without substantiation – say that the figure of 384 is just the tip of the iceberg. My figure of 'over 400' is an educated guess, based on De Boer's and my research.

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judicial sphere. Unknown numbers of men and women who were not hospitalized also underwent the surgery at the advice of, or under pressure from, psychiatrists and pastors.² For these castrations, no protocol existed.³

In Europe, since the early twentieth century, castrations on sex offenders were performed in some Swiss cantons and from the late 1920s onwards in Scandinavian countries, some Baltic states and in Nazi Germany (Russell, 1977). The first surgery for psychiatric reasons was performed by the Swiss August Forel in 1892 on an imbecile hypersexual man. Castrations in the judicial sphere in Switzerland began in 1906. The first castration in The Netherlands without any involvement of legal authorities can be dated to 1921. The case concerned a man who had been taken into custody several times in different countries on suspicion of sexual contact with minors (Sanders, Van der Horst, & Westerterp, 1935). In the United States, castrations of boys (as young as 14 years old in Kansas and Massachusetts) who were kept in institutes for feeble-minded and epileptics to stop their 'excessive' masturbation go as far back as the 1890s (Kaelber, 2012).⁴ Since the late nineteenth century in some states that ran eugenic sterilization programs, criminals could be castrated at court orders, but the surgery was apparently rendered unconstitutional (Stojanovski, n.d.).⁵ As the Catholic Church did not permit interventions in reproductive organs, except for medical reasons like testicular or prostate cancer and tuberculosis, the surgery remained largely limited to predominantly Protestant countries. Nonetheless, as this article will show, in the debates in The Netherlands Catholics played a decisive role in formulating the ethical conditions for castration.

This article will describe the history of castration of criminally insane sex offenders in The Netherlands in the twentieth century: the debates, medical practices, the castrates themselves, and the acclaimed successes. Publications from the last couple of decades which call such successes into question will be included. As I will explain, although castration was obviously related to forensic psychiatry and implied forensic issues and practices vis-à-vis accountability, the need to protect society, penalty, treatment, and healing, the debates on castration in The Netherlands originated in discussions – from the late 1920s onwards – about eugenics and the ethics of sterilization programs. Castration seems never to have been debated in The Netherlands in a purely forensic context. Despite the fact that eugenics had little support in The Netherlands (Noordman,

² No research has been done on these categories, although sometimes there are references to many more than the number of castrations on criminally insane (Koolhaas & Maris, 1992). Some claims are based on questionable statements, for instance a claim by Dr. A. Wijffels, psychiatrist in the Catholic asylum St. Willibrord and author of a dissertation on castration (Wijffels, 1954). He later took pride in being called 'the great castrator'. In the late 1970s he claimed that many more men were castrated than registered, and that in St. Willibrord's own hospital sometimes two surgeries took place next to one another (Renders, 1941), even though there cannot have been space. Besides, it is unlikely that castrations were not registered in patients' files. Unfortunately, in a study on the history of St. Willibrord, neither the word 'castration' nor the psychiatrist Wijffels are mentioned (Bakker & De Goei, 2002). A former forensic psychologist claimed that during the Occupation many castrations on criminally insane took place without leaving a single trail of paper in the State Psychiatric Institution (Rijks Psychiatrisch Instituut – RPI) in Eindhoven (Derkx, 1981). Aside from the fact that is near impossible that no reference was left in any files or records, the RPI was only temporarily used as an asylum for the criminally insane between 1928 and 1933 (and reopened as such in 1950). In 2012, in the aftermath of an official report about sexual abuse in the Catholic Church in The Netherlands, some newspapers published articles from the 1950s about castrations in Catholic psychiatric asylums of young men, even minors, who had suffered abuse. According to one of these articles, a psychiatrist had claimed in 1950 that his institute had performed at least twenty castrations (Binnen RK Kerk jongens gecastreerd, 2012; Dohmen, 2012).

³ In 1941 the director of an asylum for the insane wrote the director of Veldzicht, the largest – state run – facility for criminally insane, asking about rules for castration even though in his own institute castration was already practiced. The Veldzicht director referred him to the Department of Justice (HCO 645-850).

⁴ Kinsey et al., 1953 mentions these castrations as well, but does not provide details on the period.

⁵ Stojanovski, V. (n.d.) refers to Berry vs Davis 242 U.S. 468, (1917), and Russell (1977) to Skinner vs Oklahoma, 316 U.S. 536 (1942), yet both cases involved forced vasectomy or tubectomy on habitual offenders who had not committed sex crimes per se but felonies like theft. The authors seem to suggest that this applied to castration as well.

1989), and despite the fact that in the outcome of debates on castration eugenic reasons for castration were rejected, the origins of the debates caused widespread confusion about medical practices and the purposes of sterilization and castration.

Some authors seemed to have believed that sterilization (vasectomy or tubectomy) could cure people of their sexual perversions, an assertion that caused amazement in others (Feber, 1934). Yet, up to the 1950s several people were subjected to vasectomies to treat them, for instance, for 'exhibitionism' (Van der Meer, 2008, Wijffels, 1954). Publications and case histories also show that throughout the thirty years of castration practices in The Netherlands, it was never fully clear whether the surgeries were meant to take away or to curb the libido or potency, or to prevent the persons involved from begetting 'inferior' progeny. One author said that to prevent sex offenders from procreating, it was more humane to castrate them than to incarcerate them for the rest of their lives (Pippel, 1933). This implied the idea that sexual deviancy was considered to be hereditary. In the 1930s, while castration was still being debated, an offender who was hospitalized for being criminally insane, explicitly requested the minister to be castrated so that he would not get children 'burdened with an inherited propensity to criminality' (HCO 645-393). Because of ideas about hereditary conditions, Protestant and Catholic opponents of eugenics welcomed infertility as a byproduct of castration (Van Bemmelen, 1933,⁶ Kors, 1936), although others insisted that very little was known about the heredity of sexual disorders (Carp, 1930, 1936, 1938).

During the 1930s debates, castration was often described as a means for sterilization. In a mix-up of method and medical intervention it was said that there were three forms of sterilization: vasectomy, castration, and radiation – although radiation as a method was soon abandoned. The emphasis on sterilization was the reason why some politicians who opposed eugenics also opposed castration. For many people, especially the subjects themselves and including medical doctors, even the difference between castration and sterilization was not always obvious. In a 1960 presentation by a psychiatrist about dealing with nymphomaniac women, tubectomy (sterilization), ovariectomy (castration), healing of a disease, the prevention of reproduction, or the question whether 'infertilization' would worsen these women's nymphomaniac behavior, were presented in a way which can only be described as an indissoluble knot (Van der Burg, 1960).

This article is based on research into contemporary literature, and on case histories of people who were committed to asylums for the criminally insane. Case histories include criminal court records, medical files from the largest state run asylum for the criminally insane, Veldzicht, and so-called psychopath files kept at the Department of Justice on each individual committed to an asylum for the criminally insane (Van der Meer, 2008).⁷ The latter files hold, among many other documents: medical and other appraisals, such as reports of parole officers;

⁶ "Protestant" comment on Van Bemmelen by Dr. A. Hutter.

⁷ The records mentioned here are not complete. In court records only complete files have been kept when at least one year of incarceration was demanded by the prosecutor. In combination with a demand to hospitalize the defendant, the prosecutor usually asked for a prison sentence of a couple of months. In such cases only a verdict and an affidavit of the court sessions have been kept. Medical records of Veldzicht up to 1947 are kept at the regional archive Historisch Centrum Overijssel (HCO), subject to permission of the Justice Department. Despite such permission, Veldzicht obstructed access to medical files from the later period still kept at the facility. When I began my research in 2004, the Department of Justice had just started the destruction of the psychopath files, which was consequently halted. Some of the files I was looking for had already been destroyed. The ones that were still available are now in the process of being transferred to the National Archive in The Hague. They include files from convicts who were hospitalized in several asylums, but mostly from Veldzicht and the Saint Paul's psychopath clinic of the Catholic asylum for the insane, Saint Willibrord. Next to Veldzicht this was the asylum with most castrations (De Boer, 1969). (Convicts were also often moved back and forth between different asylums. Veldzicht had the reputation of having the harshest regime and convicts hospitalized there often requested to be moved to the Catholic St. Paul's or the Protestant Oldenkotte asylum. The Department of Justice in the 1950s changed its archival system; only psychopath files of cases that required special policy decisions have been kept from then on.

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