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*Sex Ed, Segregated: The Quest for Sexual Knowledge in
Progressive-Era America* by Courtney Q. Shah (review)

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sweeping and broad story glosses over quite a bit of the more recent scholarship and trends that might have made his account more nuanced. For instance, while pointing out that racial segregation (and the resulting dislocation of resources that results in vast public health inequalities) also occurs outside of the South, he makes a mostly macroeconomic-based argument about region and inequality. The narrative of suburbs as being a place of resources and middle-class wealth and the inner city as a place of perpetual decline has recently been displaced. As Kunitz writes, “As the central city tax base shrinks, financial support for public schools declines even as the population served requires additional academic support, accelerating the departure of middle class families (both White and non-White) with school-age children. Indeed, the migration of middle class African Americans to the suburbs is one of the reasons segregation has generally declined over the past several decades” (pp. 82–95). African Americans have increasingly moved to the suburbs in the past few decades, particularly after the 1970s, but segregation and lack of health resources still exist in the suburbs. As Valerie Johnson, Kevin Kruse, Tom Romero, and others have all recently argued, in various regions of the country like Atlanta, Compton, California, and Prince George’s County, Maryland, the arrival of large numbers of African Americans to the suburbs by the 1970s was marked by the continued residential movement and resegregation of whites to other suburban rings and outer-edge communities that reinforced white ethnic homogeneity. Questions of regional mortality are more difficult to see when complicated by such important narratives.

Stephen Kunitz has presented a thought-provoking book that engages history, public health, and economics, though some might find the heavy-handed reliance upon statistical analysis distracting from important arguments regarding regional variation. Brief appendices in the back also discuss questions of taxation, homicide, and diabetes among Native Americans. Scholars will certainly continue to think about the ways in which regional variation informs how people die, and therefore with an eye for helping people live.

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Courtney Q. Shah. *Sex Ed, Segregated: The Quest for Sexual Knowledge in Progressive-Era America*. Rochester, N.Y.: University of Rochester Press, 2015. xvi + 212 pp. \$95.00 (978-1-58046-535-9).

This book’s title is misleading if quickly skimmed, because what follows is not a history of sex education in segregated schools. Rather, in this concise history of Progressive Era sex education movements, Courtney Q. Shah posits a modern sort of question: How was the radical potential of sex education and sexual talk limited, distorted, and deflected? Shah explicitly ponders why sex education’s

capacity for challenging stereotypes about racial difference, providing an avenue for nonwhite respectability, limiting men's sexual exploitation of women, creating opportunities for female leadership, and democratizing the benefits of good health was unable to gain widespread social and political traction.

Shah's investigation dives deeply into several bodies of sources, including American Social Hygiene Association (ASHA) records, a variety of reform and medical periodicals, and publications by movement luminaries such as Prince Marrow and Maurice Bigelow. In chronologically ordered chapters, she argues that the reasons for sex education's conservative execution lie with the reformers themselves, who were attempting to advance their cause without undermining the widespread assumptions that an individual's capacity and contributions to society were bound by his or her race and gender. Over and over again, reformers staked their authority upon their ability to distinguish between "the salvageable and the hopeless" (p. xvii), a task they completed with the language of science and expertise.

On the rare occasions when reformers' strategies and programs whispered of slightly radical intent, the response from parents, the white public, and government threatened to quash the whole field; racial and gender conservatism proved to be a precondition for any discussion of a previously taboo topic, holding the "normalization" of sex education (p. 142) and the expert standing of reformers hostage. For example, chapter 2 illuminates the infamous 1913 fiasco wherein Chicago Public Schools' moderate and modest sex education program fell to the protests of parents and public figures; sex education lost standing when it posed greater social costs to white Americans than the health benefits promised. Cowed reformers moved out of schools and into the business of getting social clubs, civic groups, and parents to deliver information about sexuality and sexual health.

What opportunities emerged to imagine a sex education that circumvented or even challenged the racial and gender status quo? In chapters 3 and 4, Shah traces the complicated and compelling efforts of African American physicians in the National Medical Association and individual women's rights reformers who attempted to harness sex education to other aspirations—of holding men responsible for all of their sexual actions, of supporting women's sexual agency, of claiming that black and white bodies and ailments are more similar than different. It did not go particularly well. Even the relatively modest ambitions of granting to black middle-class women the same courtesies and protections extended to white middle-class women or extending to married women opportunities to regulate reproduction were ignored, censored, or a combination of both.

It was only during World War I, when venereal-disease-laden soldiers became a national security issue, that sex education gained a tenacious hold and a legitimate place in the educational landscape, albeit generally in training camps, clubs, and forums rather than schools, and unequally distributed among the population. Regrettably, young women were still systematically undereducated and then detained if they committed sexual transgressions, and black soldiers found themselves subject to dire restraints, including forced medical treatments. A case study of how negotiations between stakeholders unfolded among San Antonio's

wartime population represents Shah's research at its strongest. The relationship between (white) women's clubs that leveraged their feminine expertise to create policewomen positions, local businesses that sought to profit from proximity to a military base, soldiers looking for all kinds of recreation, and federal policy makers who wanted soldiers to maintain VD-free status is elegantly told through the primary source trail of city periodicals, women's club minutes, and court records. These are previously underexplored sources in comparison to those driving the rest of the book.

For historians of education and sexuality, the periodization and turning points Shah identifies—beginning with the ASHA, considering the 1913 Chicago experiment, and culminating with World War I—are already familiar, as is the assessment that progressives were not all that progressive. Yet Shah's telling of their story is ultimately well written and interesting, making this book a useful introduction for those familiarizing themselves with America's contentious sex education debates.

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James E. Strick. *Wilhelm Reich, Biologist*. Cambridge, Mass.: Harvard University Press, 2015. 467 pp. Ill. \$39.95 (978-0-674-73609-2).

In *Wilhelm Reich, Biologist*, James Strick takes on the considerable task of rehabilitating Reich's scientific reputation. This is no easy feat. As Strick notes early in the introduction, "few take his research program seriously. His laboratory science has largely been ignored by scholars. A huge, popular literature demonizes scientist-Reich as a charlatan, a pseudoscientist, at best a victim of mental illness deluded into thinking he was observing important things" (p. 2). The view of Reich as dangerously deluded and deceptive has been propagated by powerful actors including the American Medical Association, the American Psychiatric Association, the Menninger Clinic, and the U.S. Food and Drug Administration, whose legal case severely damaged Reich's reputation (and ultimately landed him in prison) (p. 2).

From the outset, Strick bluntly asserts that such representations of Reich are "not correct, and that a much more complex and interesting story is involved" (p. 3). The strength of this claim rests heavily on newly available source material: namely, Reich's unpublished laboratory notebooks, which document the experiments he conducted while in exile in Oslo between 1934 and 1939, and which were unavailable before November 2007. The laboratory notebooks are crucial to Strick's recuperative endeavor: according to him, they reveal that Reich was "doing careful, state-of-the-art research in laboratory biology" (p. 3). Ultimately, they help underwrite Strick's compelling case for viewing Reich as an innovative, boundary-breaking researcher whose laboratory experiments have much to offer present-day scientists.