Book Reviews

The Campaign for Contraception

Birth Control in America. The Career of Margaret Sanger. DAVID M. KENNEDY. Yale University Press, New Haven, Conn., 1970. xvi, 322 pp. $8.75. Yale Publications in American Studies, No. 18.

This study aims to explore "the relation between Margaret Sanger's character and the nature of the movement she led in America between 1912 and the Second World War." Such an exploration is long overdue, because earlier biographies have relied uncritically upon Mrs. Sanger's own estimation of her role in the birth control movement. Indeed, Emily Taft Douglas's *Margaret Sanger, Pioneer of the Future* (Holt, Rinehart and Winston) published this year continues a long tradition of eulogistic biography. Mrs. Sanger saw her career as one of single-minded and judicious campaigning for legal and medical changes that would make available to women of all social backgrounds the contraceptive devices necessary to free them from unwanted pregnancies and permit the separation of feminine sexuality from procreation. Like Progressive Americans of her generation Mrs. Sanger expected that a simple alteration in law and medical practice would achieve this goal. In her mind contraception, once readily available to all who sought it, would solve social problems like poverty and prostitution and contribute to the eugenic improvement of society. Besides these general social benefits, Mrs. Sanger expected the universal acceptance of birth control to bring about an unprecedented liberation of women by rescuing them from the deterministic forces of biological function.

David M. Kennedy, writing from the perspective of the 1960's, attempts to examine Mrs. Sanger's expectations about the impact of her reform in the light of research on the family and on feminism which has opened up much new territory in recent years. Whereas Margaret Sanger's contemporaries perceived divorce and birth control as social changes that would undermine the family and increase individual liberty, it is now clear that both strengthened the family and permitted its adaptation to a modern urban environment. Similarly, it is now apparent that the feminist ideology of which Mrs. Sanger was such a powerful exponent did not have a significant impact on the social patterns which decreed that domesticity was the appropriate role for middle-class women and menial work the proper employment for women of the working class. The reasons for this failure are clearly set out by Kennedy in his chapter on Mrs. Sanger's views on sexuality and feminism. Like Freud she accepted sexuality as the central determinant of personality. It followed logically from such a view that her ideas on feminine liberation concerned increased sexual pleasure for women and new powers of self-expression within the separate feminine sphere of life. This sphere was defined by the maternal function, no matter how sophisticated the techniques for controlling that function might become. The rehabilitation of feminine sexual pleasure thus seems less revolutionary when tied to an accepted patterning of social roles. Birth control came to be not the concern of the urban poor but the practice of the upwardly mobile middle class, anxious to ensure a family unit compatible with maximum social ambition.

The attraction of family limitation for the middle class was the fundamental social fact with which Mrs. Sanger's campaign to change public attitudes to birth control had to reckon. Thus the flaming radical of the *Woman Rebel* days became a Progressive reformer concerned with changes in the law and the education of the public on sexual hygiene. Kennedy suggests that this change might not have been as difficult to make as Mrs. Sanger suggested in her *Autobiography*. The radical tone of her *Woman Rebel* days was more a matter of temperament than intellectual commitment, in the author's opinion, because Mrs. Sanger's claims to innovation in the birth control movement are much inflated. In her *Autobiography* she describes a conversion experience which left her dedicated to the leadership of a popular birth control movement in 1912. However, a year's search of American libraries yielded no accurate information on birth control techniques. Consequently Mrs. Sanger set out on her much-publicized journey to France to secure accurate advice not available to her in the United States. Kennedy has established that from 1898 on there was no lack of material in print on contraception; no less than two full pages of books and articles on the subject were listed in the *Index Catalogue of the Library of the Surgeon General's Office*. In radical circles Emma Goldman had already delivered lectures on contraceptive techniques before Margaret Sanger set out for France. For the medical profession articles on the prevention of conception were in circulation, but there was no public discussion of the subject and no agreement on the indications warranting contraceptive advice. Kennedy suggests that Mrs. Sanger took this silence for ignorance and monopolized the role of pioneer in the birth control movement, though she in fact worked in competition with other lay reformers and interested members of the medical profession such as the gynecologist Robert Latou Dickinson. Her desire to lead the movement, he feels, was an obstacle to large-scale involvement of the medical profession in the '20's and early '30's because a conservative profession feared association with Mrs. Sanger's propagandist activities. Kennedy establishes this point with considerable success, yet he is in turn obliged to agree that it was Mrs. Sanger's great talents as a propagandist for her chosen cause which educated both the public and the legal profession to the acceptance of the right of individual women to make informed choices about the conception of children. The success of her educational effort can be seen by the changing judicial interpretation of the notorious federal Comstock law, which prohibited the mailing and importation of contraceptive materials and information. By 1933 a series of legal decisions had made it clear that members of the medical profession were free to prescribe contraceptives on general grounds of health, and by 1936 the

courts had construed the Comstock law in a manner which permitted the free importation of contraceptive devices. Since Kennedy feels that the weight of Catholic opinion in the United States was so powerful that no repeal of the Comstock law was possible, Mrs. Sanger's educational role in changing the climate of opinion in which these legal decisions were reached remains the crucial one for the triumph of the birth control movement. Kennedy concedes, though he does not stress adequately, Mrs. Sanger's influence in another important area of attitude. Her educational efforts were the most significant factor in changing medical opinion on the indications for prescribing contraceptives. Mrs. Sanger's insistence that social, as well as strictly medical, factors should be considered as indicators eventually triumphed over medical conservatism. Thus, though the major thrust of this work is directed toward a revision and reassessment of Mrs. Sanger's role in the birth control movement, Kennedy reaches the conclusion that her work was of central importance, though not always for the reasons which she gave and not always leading to the social changes which she expected.

JILL K. CONWAY
Department of History, University of Toronto, Toronto, Canada

An Epidemic in Retrospect

International Conference on Hong Kong Influenza. Atlanta, Ga., Oct. 1969. World Health Organization, Geneva, 1969 (U.S. distributor, American Public Health Association, New York). Paper, $9. WHO Bulletin, Vol. 41, Nos. 3–5, pp. 355–748, + plates.

This volume consists of papers and discussions dealing with epidemiology, virus properties, immunization, chemotherapy, and chemoprophylaxis of Hong Kong influenza. In publishing this report within 15 weeks after the conference was held and well before the time the 1970–1971 influenza season in the Northern Hemisphere is expected to occur, the World Health Organization has performed a service of real worth to workers in the influenza virus field as well as to potential recipients of influenza virus vaccine.

In those papers concerned with virus properties, little that is new is presented, and although the reports dealing with chemotherapy and chemoprophylaxis hold promise as the basis for future developments, they are essentially preliminary. However, the papers and discussions concerned with immunization are fascinating if for no other reason than for the diversity of the reported results, which led one of the participants to remark, "Some . . . at this Conference may have been bewildered by reports of vaccine trials in which protective effect against Hong Kong influenza was reported to vary from nil to 98%" (p. 607). There are good reasons for bewilderment. One group of workers, from results obtained in a vaccine trial in a prison population, concludes that "optimally constituted influenza vaccines at standard dosage levels have little, if any, effectiveness" (p. 531) in preventing clinical influenza. Another group of investigators, in a retrospective study of United States troops, presents the interesting statement: "Analysis of complete influenza immunization histories of 77 [out of 285] men showed no correlation between the number of prior immunizations and the severity of illness. The apparent lack of effect of prior vaccination is illustrated by the observation that 18 of the 77 men had received 7 or more doses of vaccine during the preceding 10 years; these 18 men lost an average of 3.4 duty days because of illness, compared with an average loss of 2.6 days for the entire study group" (pp. 390–91). In striking contrast are the findings of another group of workers who carried out a vaccine trial in school children, the result of which was "a marked lowering of the illness rates in an entire community" (p. 537). The diversity in the conclusions resulting from work reported in this volume might be accounted for, at least in part, by inherent deficiencies in some of the experimental procedures. All too frequent are statements such as the following: "Because of the remarkably small numbers of men who reported to the dispensary with febrile respiratory disease during the epidemic period, these results must be interpreted with caution. The data do suggest, however, that the mineral-oil adjuvant vaccines containing 100 CCA units of A2/Ann Arbor/67 antigen conferred definite, albeit modest, protection against illness caused by the Hong Kong variant" (p. 563). "In the absence of adequate controls, it was not possible to determine the effect of influenza vaccine in school children or on disease in their families and communities. However, we do believe that this study showed that . . . B vaccine . . . was less effective . . . than the . . . Hong Kong-strain vaccine" (p. 566). "These studies are open to objections because of the well-known variability of influenza morbidity in different groups of people. However, where vaccinations were performed at favorable times with an effective series of preparations that was specific for the epidemics which followed, with properly selected groups of internal controls and sufficiently high morbidity in the control groups, decreased morbidity was observed regularly among those vaccinated . . ." (p. 587).

Nevertheless, adequately controlled vaccine trials are described in this volume. One of these was conducted in a prison population, and it is difficult not to agree with the author that the results of the study indicate that optimally constituted influenza vaccines at standard dosage levels are not effective in preventing clinical influenza and that "even very large doses of vaccine do not approach the high degrees of effectiveness that have been achieved with other virus vaccines" (p. 531). The preceding and similar statements in this volume lead one to wonder why another author stresses that "priority must be given to research into the problem of making sufficient vaccine available" (p. 495) and still another author emphasizes that there is no satisfactory method available to measure the immunogenic potency of that amount of vaccine that now can be produced. It would seem that priority should be given to the task of improving influenza vaccine rather than to making more of the kind that is at best of doubtful value. After all, it is mentioned in this volume that almost 22 million doses of Hong Kong vaccine were produced in 1968–1969 and that "it is questionable whether the use of the vaccine, necessarily in smaller quantities than the total released, had any detectable effect on the course of the 1968–1969 epidemic" (p. 495).

All of this makes for interesting reading and leads one to agree with the statement of one of the authors that "influenza has been known to mankind since antiquity, but the problem of controlling the disease has so far not been solved" (p. 381). The recognition of this fact makes the appearance of this volume for the influenza virus worker an encouraging beginning: he can initiate work to solve the problem of the control of influenza now that it is