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PUBLIC POWER, PRIVATE MATTERS: THE AMERICAN SOCIAL HYGIENE
ASSOCIATION AND THE POLICING OF SEXUAL HEALTH IN THE
PROGRESSIVE ERA

By

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Thesis

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Public Power, Private Matters: The American Social Hygiene Association
and the Policing of Sexual Health in the Progressive Era

Kayla Blackman

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Introduction

In 1914, the American Social Hygiene Association (ASHA) detailed in its quarterly publication the two segregated vice districts in the nation recognized by municipal ordinance: the infamous New Orleans' Storyville with its nineteen square blocks of brothels and saloons, and a much less renowned red light district in El Paso, Texas.¹ Nestled against the Rio Grande as close to the Mexico border as possible, the El Paso saloons and brothels flourished under the beneficent eye of municipal authorities.² By 1918, however, the climate had changed. In March, a group of concerned citizens thronged the chamber of commerce. "Determined to rid the city of prostitutes," the *El Paso Herald* reported, "Several of those who attended the meeting advocated strenuously the establishment of vigilance committees to purge the city."³ Three hundred volunteers, including representatives from El Paso women's clubs, promised to help. The sheriff offered to deputize any male volunteer, adding, "You may work either under my orders or on your own responsibility."⁴ Reformers from various organizations agreed to champion the fight. In addition to War Department observers, staff from the Red Cross helped establish a free venereal disease clinic in an unfinished wing of the county jail.⁵ Health officers approved legislation requiring wait staff at restaurants to be examined for communicable diseases including syphilis and gonorrhea.⁶ Though one medical professional promised, "there would be no persecution of women with [venereal] disease," the local police chief argued that "such

¹ "Mistake Corrected," *American Social Hygiene Association Bulletin* 1, No. 6 (September 1914), 4; Emily Epstein Landau, *Spectacular Wickedness: Sex Race, and Memory in Storyville, New Orleans* (Baton Rouge: Louisiana State University Press, 2013), 1.

² "What Some Communities Have Done," *Journal of Social Hygiene* 3, No. 4 (October 1917), 492.

³ "Business Men Call Halt on Vice: Plan Vigilantes Body," *El Paso Herald* (March 04, 1918, New Mexico Mail Edition), 3.

⁴ "300 Citizens Pledge Help To Officials in 'Cleaning' City," *El Paso Herald* (March 06, 1918, Home Edition), 12.

⁵ "City and County Keep Up Health," *El Paso Herald* (January 26, 1918, Home Edition), 2; "First Class Public Hospital Planned in East Wing of Jail," *El Paso Herald* (March 19, 1918, Home Edition), 9.

⁶ "Rules Imposed on Restaurants Here Are Harsh: San Antonio Does Not Require the Examination of Girls in Restaurants," *El Paso Herald* (November 15, 1918), 12.

women should be interned in a detention camp... secured against possibilities of escape.”⁷

Another suggested building a “city stockade” to confine disease carriers, or “ridding the city of undesirable women entirely.”⁸ By June, transmitting a venereal disease was a felony punishable by up to two years imprisonment.⁹

What caused the major moral shift in El Paso? To be certain, much of the flurry of activity in 1917 and 1918 came at the behest of the War Department, tasked with raising and maintaining a healthy fighting force for the battlefields of World War I. But El Paso was not a major cantonment or training camp for the United States military, especially when compared to its regional neighbors of San Antonio, Texas and Douglas, Arizona.¹⁰ An unparalleled partnership between citizens, policing agencies, and the federal government showcased El Paso’s commitment to eradicating vice by whatever means necessary. Having lost the support of El Paso’s city government and citizens, the red lights of the vice district burned out. By July of 1918 military officials reported the vice district closed for good.¹¹ The ASHA observed: “The world in those parts has grown safe for the army of democracy.”¹² El Paso, and other cities across the nation, expressed a vision of sexual health and articulated certain duties of citizenship which—though heightened during wartime—preceded the onslaught of battle in 1917. Partnerships forged by non-governmental organizations such as the ASHA created a wide net of influence and a strong network of cooperation which would allow the success of anti-venereal disease and anti-prostitution campaigns. Those same campaigns would provide a model for the

⁷ “No Persecution of Women,” *El Paso Herald* (January 30, 1918, Home Edition), 3; “Pollock and Weyland Favor Detention Home for Girls,” *El Paso Herald* (March 22, 1918, Home Edition), 6.

⁸ “House Owners Face U.S. Court,” *El Paso Herald* (January 26, 1918, Home Edition), 5.

⁹ “Points of New Law Explained,” *El Paso Herald* (May 27, 1918, Home Edition), 4.

¹⁰ “What Some Communities Have Done,” *The American Social Hygiene Association* 3, No. 4 (October 1917), 493.

¹¹ Raymond Fosdick, “The Program of the Commission on Training Camp Activities with Relation to the Problem of Venereal Disease,” *Journal of Social Hygiene* 4, No. 1 (January 1918), 75.

¹² “Aided By Local Authorities,” *American Social Hygiene Association Bulletin* 4, No. 7 (July 1917), 1.

federal government, whose wartime agenda institutionalized new expectations of sexual health for American citizens.

This thesis explores the fundamental role the ASHA played in creating a national sexual health agenda, one which would reach from the banks of the Rio Grande to New York City, from Seattle to Richmond. It also explores the expansion of police power required to enforce a new system of sexual health, focusing on the partnerships between non-governmental organizations such as the ASHA and federal agencies such as the military. Finally, this thesis seeks to understand why such partnerships created punitive policies which targeted women rather than men, establishing a sexual health agenda in which where the rights of men would supersede the rights of women.

A group of social reformers gathered together in 1914 to charter the ASHA. Dominated by members of the new professional classes, its organizational agenda underscored a sense of unease with widespread vice and prostitution.¹³ Their academic journal promised to wield the “light of scientific inquiry,” whose “white beams made the red lights look redder than before—an angry, bloody, unhealthy red.”¹⁴ The metaphorical light of science revealed the real danger of venereal disease. Syphilis and gonorrhea flourished alongside the red lights of commercialized vice districts, according to ASHA reformers, and so they committed themselves to developing and supporting anti-vice campaigns across the nation. They sponsored lecturers, provided community education, and called for legal reforms to advance their goals. The ASHA spent much of its early years forging ties with other reform organizations, allowing it to develop an

¹³ For more on the rise of a professional class of social workers, see Regina Kunzel, *Fallen Women, Problem Girls: Unmarried Mothers and the Professionalization of Social Work, 1890-1945* (Boston: Yale University Press, 1995); Karen Tice, *Tales of Wayward Girls and Immoral Women: Case Records and the Professionalization of Social Work* (Urbana: University of Illinois Press, 1998). For more on the rise of a professional class of medical science, see Paul Starr, *The Social Transformation of American Medicine* (New York: Basic Books, 1982).

¹⁴ “A History and A Forecast: The Story,” *American Journal of Social Hygiene* 5, No. 4 (October 1919), 553.

extensive network of communication and cooperation across the nation. Charles W. Eliot--one of the organization's early presidents--described the ASHA mission as one of "promoting public health and morality."¹⁵ By 1917, hygiene reformers' efforts to educate and police sexual behavior captured the attention of the federal government.

With the onset of war, the ASHA "found opportunity to render increased assistance to the state and federal authorities, at the same time urging Congress to initiate a nation-wide official campaign" against venereal disease.¹⁶ By lending its extensive organizational apparatus to the federal government, the ASHA was able to provide a model of education and legal reform based on their own experiences in the pre-war years. The federal government received a set of tools to advance military aims. In return, the ASHA gained a national audience for its message and the enforcing power of the United States military. Military officials recognized that venereal disease had "kept more [Allied] soldiers in the hospitals during one year of the war than did honorable wounds of battle," and were eager to avoid a similar fate for American forces.¹⁷ The ASHA drew together years of anti-vice expertise, including campaigns which targeted prostitution and red-light districts, in an effort to stamp out venereal disease.¹⁸ World War I represented a unique opportunity for ASHA reformers to infiltrate state offices while the state benefited from the expertise of a non-governmental agency. Together, state officials and ASHA reformers created

¹⁵ Charles Eliot, "The American Social Hygiene Association," *The Journal of Social Hygiene* 1, No. 1 (January 1914), 2.

¹⁶ "The American Plan for Concerted Action on the Part of the National & Allied Agencies to Stamp Out VD" (Box 171, Folder 09), 6. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

¹⁷ "Relations with Other Organizations. United States Military. Women's Program. World War I Pamphlets" (Box 132, Folder 07). American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

¹⁸ For more on prostitution in the Progressive Era, see Mark Thomas Connelly, *The Response to Prostitution in the Progressive Era* (Chapel Hill; North Carolina Press, 1980); Ruth Rosen, *The Lost Sisterhood: Prostitution in America, 1900-1918* (Baltimore: Johns Hopkins Press, 1983); and David J. Pivar, *Purity and Hygiene: Women, Prostitution, and the "American Plan," 1900-1930* (Westport and London: Greenwood Press, 2002).

several new federal agencies including the Commission on Training Camp Activities (CTCA) and the Interdisciplinary Social Hygiene Board (ISHB).

Despite a massive educational campaign (because reformers believed “ignorance has always been the ally of venereal disease”) that set standards of behaviors for both genders, the legal reforms endorsed by the ASHA often targeted women.¹⁹ The ASHA responded to changing modes of courtship and new public roles for women by asserting their own vision of femininity.²⁰ Though many policies affected men, women suffered the most punitive aspects of policing sexual health (including the wartime incarceration of over fifteen thousand women as a direct result of federal efforts to quarantine venereal disease carriers).²¹ The incarceration of women set a precedent for other medical policies which targeted women’s sexuality; between 1910 and 1970, the United States sterilized at least 60,000 individuals. State institutions also sterilized men, but as historian Johanna Schoen observes, the “peculiarly sexist, classist, racist, and coercive character” of sterilization primarily affected women.²² The policing of sexual health often meant the policing of women’s health particularly, a standard set by the ASHA and its partners during the second decade of the twentieth century.

This history of the ASHA and its developing relationship to the federal state contributes to several areas of historical scholarship. The ASHA has not received due attention from scholars. Though it is certainly not alone among the bevy of Progressive Era reform

¹⁹ “Relations with Other Organizations,” Women’s Program. World War I Pamphlets, ASHA Records (SW 45), 1.

²⁰ For more on changing sexual mores at the turn of the twentieth-century, see Kathy Peiss, *Cheap Amusements: Working Women and Leisure in Turn-of-the-Century New York* (Philadelphia: Temple University Press, 1986); Elizabeth Alice Clement, *Love for Sale: Courting, Treating, and Prostitution in New York City, 1900-1945* (Chapel Hill: The University of North Carolina Press, 2006).

²¹ A number approximated by social reformer Mary Macey Dietzler in *Detention Houses and Reformatories as Protective Social Agencies in the Campaign of the United States Government Against Venereal Diseases* (Washington D.C: Government Printing Office, 1922), 112.

²² Johanna Schoen, *Choice & Coercion: Birth Control, Sterilization, and Abortion in Public Health and Welfare* (Chapel Hill: University of North Carolina Press, 2005), 76.

organizations, the ASHA represents a unique opportunity to explore policies of social hygiene and sexual health. The organization published prolifically. In addition to their two official publications—the *American Social Hygiene Association Bulletin* and *The Journal of Social Hygiene*—the ASHA preserved a vast archive including editorial, financial, and employment records as well as posters, broadsheets, pamphlets, and vice reports.²³ Among its ranks were previous presidents of Harvard and future leaders of federal agencies. Jane Addams, Surgeon General William Gorgas, Secretary of the Navy Newton D. Baker, and sexologist Havelock Ellis contributed to ASHA publications which enjoyed national circulation. The ASHA also commanded a significant amount of money and support from across the nation. When America entered the war, the ASHA collected half a million dollars to partner with the one million dollars appropriated by the federal government.²⁴ Though not the only organization devoted to anti-vice reform, the ASHA may be considered representative among its fellow organizations. It provides a case study of Progressive reform and uniquely embodies the cooperation between federal agencies, non-governmental organizations, and the wider American populace. In order to understand the federal sexual health policies of the World War I era, it is necessary to understand the foundational role the ASHA played in designing those policies.

The ASHA's extensive publications also provide an opportunity to explore the organization's distinctive rhetorical style which early members designed to cement their legitimacy and encourage widespread support for anti-venereal policies. This thesis will not necessarily focus on speeches or lectures, though certainly those types of rhetoric played a role in creating the ASHA identity. As scholar Kenneth Burke once noted: "Often we must think of

²³ American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

²⁴ "A History and a Forecast," 553; *Manual for Field Agents of the United States Interdepartmental Social Hygiene Board* (Washington D.C; Government Printing Office, 1920), 57.

rhetoric not in terms of some one particular address, but as a general *body of identifications* that owe their convincingness much more to trivial repetition and dull daily reenforcement [sic] than to exceptional rhetorical skill.” In that vein, the ASHA’s success in articulating their identity relied on the ability of their publications and officers to reiterate the same message time and again. Through repetition—catered as it may have been to meet different immediate needs—the ASHA gained its most powerful alliances and reached the widest audiences.²⁵

The partnership between the ASHA and the federal government casts new light on how the Progressive Era state expanded its police power to include the sexual health of the citizens. Scholars have studied the educational reforms of the Progressive Era, including the burgeoning sex education movement.²⁶ Historians have also grappled with the widespread anti-prostitution movement of the early twentieth century, though many have ignored or underplayed the anti-venereal sexual health campaigns.²⁷ Scholars of legal history analyzed reformers’ efforts to implement legal reforms including reforming the justice system to protect young women and eliminate prostitution.²⁸ The ASHA, however, did not view education and legal efforts as separate campaigns; their programs advanced a holistic approach which embraced numerous strategies across numerous professions. ASHA policies envisioned new modes of behavior for both men and women in both their private and public lives. This paper analyzes reform as the reformers envisioned it: a combined effort of education and punitive measures.

²⁵ Kenneth Burke, *A Rhetoric of Motives* (New York: Prentice-Hall, Inc., 1950), 26.

²⁶ For more on sex education, see Robin Jensen, *Dirty Words: The Rhetoric of Public Sex Education, 1970-1924* (Urbana: The University of Illinois Press, 2010).

²⁷ The exception would be Allan M. Brandt’s *No Magic Bullet: A Social History of Venereal Disease in the United States Since 1880* (New York and Oxford: Oxford University Press, 1985), which reverses the trend and places venereal disease at the forefront while underplaying the importance of prostitution.

²⁸ For more on legal reform and exploitation of young women, see Stephen Robertson, “Age of Consent Law and the Making of Modern Childhood in New York City, 1886-1921,” in the *Journal of Social History*, Vol. 35, No. 4 (Summer 2002), 781-798; Mary Odem, *Delinquent Daughters: Protest and Policing Adolescent Female Sexuality in the United States, 1885-1920* (Chapel Hill: The University of North Carolina, 1995).

The ASHA showcases a complicated relationship between non-governmental agencies and federal power, one which required continual renegotiation between both parties. The ASHA enjoyed a complicated relationship with the federal government; though it gained a national audience and new police power, the ASHA also expressed “considerable skepticism in regard to the serious intentions of the Federal government.”²⁹ Historians have described the Progressive Era as a wide scale attempt at “establishing and maintaining order” via an expansion of state power, but the ASHA did not view the state as the only available tool.³⁰ Progressive reformers and observers described the legal system as “primarily a restraint, a limit, a check on Progressive statebuilding efforts.”³¹ Historian Christopher Capozzola has stressed World War I as a watershed moment wherein “Americans unwittingly handed over to the state an array of coercive powers,” but in the case of venereal disease the ASHA purposely engineered such transferences of power.³² Many ASHA officials took charge of federal agencies during the war and used ASHA organizational agendas and methodologies to affect change. Military necessity, however, hampered the radicalism of some ASHA policies, stressing practicality and immediacy. The ASHA efforts to expand government efficiency represented a vast expansion of state power, one in which the government would be expected to play a new role in assuring the right to sexual health for all its citizenry.

The ASHA embodied a deliberate attempt to manipulate and control ideas of positive and negative sexuality, creating in the process a new sexual morality which they hoped would apply equally to all Americans. Historians have recently begun to explore the constructed nature of

²⁹ Raymond Fosdick, *Chronicle of a Generation: An Autobiography* (New York: Harper Publishing Company, 1958), 146.

³⁰ Robert Wiebe, *The Search for Order: 1877-1920* (New York: Hill and Wang, 1967), 187.

³¹ William Novak, “The Legal Origins of the Modern American State,” in *Looking Back at Law’s Century*, ed. Austin Sarat et al (Ithaca: Cornell University Press, 2002): 254, 273.

³² Christopher Capozzola. *Uncle Sam Wants You: World War I and the Making of the Modern American Citizen* (New York, NY: Oxford University Press, 2008), 16.

sexuality as a product of specific social and political factors. This project follows a model described by Margot Canaday as a “‘social history of the state’ approach” wherein “historians take state institutions seriously, but [incorporate] rather than jettisons the ‘society’ or ‘culture’ side of the binary, blending social and cultural with legal and political history.”³³ The ASHA’s social vision cannot be divorced from its component parts; though their partnership with the federal government resulted in legal change, many of their efforts existed seemingly outside of the state structure in the social centers of American experience. Moreover, their interests necessitated the public discussion of what had been private matters; in attempting to remove the stigma from venereal diseases, the ASHA altered dialogues surrounding sexuality by emphasizing sexual health as a matter of public concern. Unfortunately, as other historians have rightfully observed, the methods by which the government enforced their vision of sexual health targeted women particularly.³⁴

The principal limitation of this project—and its basis in primarily ASHA sources—is the absence of women’s own voices, particularly those who suffered the most punitive aspects of the ASHA and governmental efforts to police sexual health. While women’s experiences with social hygiene reform merit further study, this thesis focuses on the ASHA’s rhetorical construction of prostitutes and the laws they invented to address the perceived threat of venereal disease. The success of the ASHA during World War I merited an even larger campaign against venereal disease during World War II. The ASHA would eventually turn its public health agenda towards

³³ Margot Canaday, *The Straight State: Sexuality and Citizenship in Twentieth-Century America* (Princeton: Princeton University Press, 2009), 5.

³⁴ For more on the persecution of women see Jessica Pliley, *Any Other Immoral Purpose: The Mann Act, Policing Women, and the American State, 1900-1941*. PhD Dissertation, Ohio State University, 2010; Adam Hodges, “‘Enemy Aliens’ and ‘Silk Stocking Girls’: The Class Politics of Internment in the Drive for Urban Order During World War I,” *The Journal of the Gilded Age & Progressive Era* 6, No. 4 (October 2007): 431-458.

the AIDS crisis of the late twentieth century, using many of the educational and legal tools they perfected during their earliest campaigns.

The thesis is split into three chapters. The first chapter places the ASHA in its international and domestic contexts in an effort to understand the formation of its organizational identity. It includes a study of the ASHA predecessor organizations (such as the American Federation for Sex Hygiene and the American Vigilance Association) as well as contemporary organizations such as Chicago's Committee of Fifteen and New York's Bureau of Social Hygiene. It underscores the role of a private organization attempting to legitimize its presence in the public sphere in the pre-war years.

The second chapter focuses on the ASHA's intertwining programs of educational and legal reform during the pre-war years, including their massive propaganda campaign which advocated eugenic ideals, sexual education, and the creation of new codes of behavior for both men and women. It discusses several of the legal innovations championed by the ASHA, including the policing of public spaces, the establishment of municipal vice boards, red light abatement laws, and mandatory blood tests before marriage.

The third chapter focuses on the ASHA partnership with the federal government once America entered World War One as a belligerent in April of 1917. It explores the changes in educational outreach necessitated by the rapid enlistment of over one million men, as well as the new policing tactics which targeted military camps particularly. The law which allowed for the incarceration of venereal disease carriers represents a contested victory for the ASHA and its like-minded reformers: though eradicating venereal disease remained their aim, criminalization of disease carriers represented a departure from policies of the pre-war years, which stressed education for all rather than incarceration of women.

By the time the armistice brought a formal end to World War I in 1918, the ASHA and its fellow social hygiene reformers had printed over 25,000,000 pamphlets urging Americans to fight against venereal disease. Officials arrested and interned as many as 30,000 venereal disease carriers across fifty states.³⁵ 100,000 enlisted servicemen suffered from either syphilis or gonorrhea, and all members of the armed services were subject to one of the largest social engineering projects of the social hygiene movement in an effort to prevent further exposure to disease.³⁶ Post-war ASHA publications could exhort American citizens to maintain the “*essentials of social hygiene deemed necessary by the Government*,” because the federal government required citizens to maintain certain standards of health.³⁷ The ASHA’s legal innovations and massive educational campaign proved instrumental in empowering the federal government to police sexual health, redefining the relationship between the legislative body and the bodies of American citizens.

³⁵ Brandt, *No Magic Bullet*, 7, 234.

³⁶ Maj. Gen. M. W. Ireland, *The Medical Department of the United States Army in the World War: Volume IX Communicable and Other Diseases* (Washington, D.C: US Government Printing Office, 1928), 271.

³⁷ Emphasis original. Public Relations. Press Coverage. ASHA Advertising Series. (Box 209, Folder 05). American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

Chapter One:

The Formation of the American Social Hygiene Association at Home and Abroad, 1914-1916

In 1915, the American Social Hygiene Association (ASHA) unveiled its educational exhibit at the Panama-Pacific International Exposition in San Francisco, California. At an event meant to celebrate the opening of the Panama Canal, the ASHA celebrated its advanced program for sexual hygiene. The exhibit boasted over fifty wall charts on subjects ranging from the dangers of quack physicians, the joys of parenthood and athletics to marriage, industry, and religion.¹ The booth stood in good company, tucked between the exhibits of the International Health Commission, the Women's Christian Temperance Union, and the American Medical Association. Exhibit officials praised the ASHA installation as "an attractive exhibit, free from sensational features, [and] emphasizing the educational aspects of social hygiene." As an additional ward against lewdness, "attractive pictures, as well as live pets" stressed the ability to teach the principles of sex without causing "undue stress" for Exposition visitors.²

The ASHA's booth was not only a celebration of advances in sexual hygiene, but also a proud statement of overall progress in American social hygiene. A towering column of marble provided the centerpiece of the Panama-Pacific International Exposition. Titled *The Column of Progress*, the art installation set a tone of eager anticipation for a city newly recovered from a cataclysmic earthquake. Exhibits in Palaces of Transportation, Horticulture, Machinery, and Agriculture all lauded the virtues of American progress.³ By the close of the Exposition, over

¹ Thomas D. Eliot, "Social Hygiene at the Panama-Pacific International Exposition," *Journal of Social Hygiene* 1, No. 3 (June 1915), 402.

² W. Carson Ryan, Jr. *Education Exhibits at the Panama-Pacific International Exposition*. Washington, D.C.: Department of the Interior, Department of Education, 1916), 88-89.

³ Panama Pacific International Exposition, *Popular Information* (San Francisco: Panama Pacific International Exposition, 1915), 1.

eighteen million people would visit the Exposition.⁴ In the Palace of Education, the ASHA expressed its own vision of progress: the continued success of civilization depended on the elimination of venereal disease and prostitution. San Francisco provided a testing ground in which the ASHA could articulate its goals, but as a city with a flourishing underworld of vice, it also showcased the challenges they faced.

Exposition staff and social reformers imagined the celebration space to be “the safest place in the United States.” Planners maintained that all exhibitors, entertainers, and amusements would “be of the highest character; clean, wholesome and free from objectionable features.” Outside the glittering majesty of the Exposition, however, San Francisco showed troubling signs of moral disorder. ASHA reformers observed the failure of law enforcement to police dance-halls and saloons. Efforts to prohibit “the sale of intoxicants” at the Panama-Pacific Exposition also failed, as did efforts to close red-light districts. Employment opportunities were so rare in San Francisco that the General Federation of Women’s Clubs cautioned: “Every girl should be warned against advertisements of positions in San Francisco, for every place that is worthwhile will be taken, and the door that will be open for the strange girl will be the door that leads to perdition.”⁵ Though Exposition officials imagined a paradise without evils, the reality of San Francisco proved far less wholesome.

The sharp contrast between immorality and progress illustrated by the Panama-Pacific Exposition weighed heavily on the ASHA. Less than two years old at the opening of the Exposition, the ASHA struggled to distinguish itself from similar organizations both in America and in Europe. The ASHA advocated “promoting public health and morality” but recognized that

⁴ William Lipsky, *San Francisco’s Panama-Pacific International Exposition* (New York: Arcadia Publishing, 2005), 18.

⁵ Eliot, “Social Hygiene at the Panama-Pacific International Exposition,” 406-408.

“active work in this field is apt to excite apprehension or even strong antagonism in the minds of excellent people.”⁶ Reformers faced a strong cultural taboo of discussing sex in public. Just as prostitution flourished in segregated districts, discussions of sex seemed something best left to the privacy of individuals. An organization that violated this taboo risked censorship and widespread disapproval. The ASHA’s legitimacy depended on its ability to sculpt new understandings of morality without grossly offending existing sensibilities.

This chapter explores the formation of the ASHA and its efforts to construct an organizational identity in the years before U.S. entry into World War I. The ASHA carefully selected its partners from existing American reform groups, and those relationships contributed both to the reach of the organization and its overall message. The debates raging overseas regarding the policing of prostitution also influenced the ASHA’s identity; because social reformers in Europe addressed the same social crises, the ASHA’s observations could prevent similar failures while appropriating successful reform measures. The suppression of venereal disease and prostitution necessitated innovation. The fight against social evil predated the ASHA by several generations of reformers; in order to ensure progress, the ASHA needed to determine its own identity. They based their legitimacy on their professionalism and on a widespread network of cooperation with other reform agencies. Their adoption of educational and legal reform strategies also came to define their reign as a leading voice in social hygiene campaigns across the country. Their attention to international issues ensured they remained alert to changing trends, and their efforts retained an extraordinary flexibility because they maintained such wide-reaching webs of influence.

⁶ Charles W. Eliot, “The American Social Hygiene Association,” *Journal of Social Hygiene* 1, No. 1 (December 1914), 1, 4.

The main function of the ASHA, and thus a critical element of its identity, was a commitment to improving the “white race,” a group of individuals who could trace their origins to Northern and Western Europe, primarily countries with Anglo-European heritage. The ASHA’s construction of race relied heavily on eugenics. Eugenics, a movement which gained popularity in the early twentieth century and whose term was first coined by Frances Goddard in 1883, believed that the human race could benefit from the same selective breeding techniques employed by animal breeders. Often employing the metaphor of a tree, eugenicists believed in improving racial stock so that the fittest would be the ones to survive and propagate. Eugenicists believed the “white race” was the pinnacle of civilization, and thus worth protecting.⁷ The ASHA’s idea of progress relied heavily on ideas of racial purity, believing that the family—and by extension, sexual health—formed the bedrock of society. The organization explicitly linked the “white race” to the height of civilization, and it endeavored to protect members of that race from ills such as “insanity, feeble-mindedness, degeneracy, and criminality.”⁸ Its anti-venereal disease campaign aimed to protect child-bearers and children of the “white race,” many of whom already suffered from gonorrhea or syphilis infections.

In addition to legitimizing its anti-vice efforts with calls for increased social morality, the ASHA staffed its offices with professionally trained doctors and social workers. The ASHA’s publications, the *Journal of Social Hygiene* and *American Social Hygiene Association Bulletin*, explored the advances in social and medical science. While the two publications—as well as books and pamphlets—fed into the ultimate goal of championing social morality, they also

⁷ For more on the American eugenics movement, see Randall Hansen and Desmond King, *Sterilized by the State: Eugenics, Race, and the Population Scare in Twentieth-Century North America* (New York: Cambridge University Press, 2013); Johanna Schoen, *Choice & Coercion: Birth Control, Sterilization, and Abortion in Public Health and Welfare* (Chapel Hill: University of North Carolina Press, 2005); Ian Robert Dowbiggin, *Keeping America Sane: Psychiatry and Eugenics in the United States and Canada, 1880-1940* (Ithaca, NY: Cornell University Press, 1997).

⁸ Eliot, “The American Social Hygiene Association,” 2; Winfield Scott Hall, “The Relation of Education in Sex to Race Betterment,” in *The Journal of Social Hygiene* 1, No. 1 (December 1914), 79.

served as open forums in which plans of action could take shape. The ASHA initiated an extensive campaign of legal reform and educational propaganda to advance its message. It created a vast network of municipal organizations to distribute pamphlets, display exhibits, and host lecturers. It absorbed several of the leading social hygiene groups and partnered with others.

The ASHA looked to Europe as both an example of success and as a warning against desperate failures of previous social hygiene campaigns. The highly dynamic nature of the organization, constantly in dialogue with others, left the ASHA flexible and wide-ranging. It was able to address concerns across a variety of vice-related subjects and yet remain focused on its overall goal of eliminating venereal disease. The decisions the ASHA made in its early years ensured a national profile. Its legitimacy assured, the ASHA could offer its expertise to the federal government beginning with the war mobilization in 1917. The new opportunity gave the ASHA a principal role in forming a national sexual morality.

It was little wonder that the ASHA became interested in sex and sexual health. America at the dawn of the twentieth-century seemed obsessed with sex. A flourishing group of anarchists and bohemians in New York City advocated a culture of “free love” in which both males and females could have multiple partners and talk publicly about those relationships in frank sexual terms. Women flocked into the workforce; their resultant income and relative independence created a youth culture increasingly infatuated with social pleasures, many of which brought men and women together without the system of chaperoning that had characterized previous courtship.⁹ Commercialized prostitution flourished openly in red-light districts with such

⁹ For more on bohemian sexual culture, see Christine Stansell, *American Moderns: Bohemian New York and the Creation of a New Century* (New York: Henry Hold and Company, 2000), 284. For more on changing styles of American courtship, see Beth Bailey, *From Front Porch to Back Seat: Courtship in Twentieth-Century America* (Baltimore: Johns Hopkins University Press, 1989); for more on young women, their working conditions, and their

recognizable names as San Francisco's Barbary Coast; Butte, Montana's Venus Alley; New York City's Tenderloin; and New Orleans' Storyville. In the Ozarks, favorite fiddling tunes included "Grease My Pecker Sally Ann" and "Take Your Finger Out of My Pants."¹⁰ Films with titles such as *Men Who Have Made Love to Me* titillated some Americans and horrified others.¹¹ The growing presence of women in public spaces—a trend which seemed to escalate rapidly in the first decades of the century—challenged the "separate sphere" ideology that had governed sexual mores in the nineteenth-century.¹²

The collapse of an old system of mores necessitated a new method of understanding and control. In their attempt to renegotiate and reaffirm sex roles, the ASHA joined the ranks of other Progressive reformers, all clamoring to assert their own system of order. Historian Robert Wiebe observed "the health of the nineteenth-century community depended upon two closely related conditions: its ability to manage the lives of its members, and the belief among its members that the community had such powers."¹³ His use of the word *health* proved telling; one of the fundamental driving forces of the ASHA and its fellow progressives was the pursuit of both bodily and moral health. According to reformers, America's moral health was threatened by "intemperance among the women of society, the women who wear fine dresses, who give and

pursuit of leisure, see Kathy Peiss, *Cheap Amusements: Working Women and Leisure in Turn-of-the-Century New York* (Philadelphia: Temple University Press, 1986).

¹⁰ John D'Emilio and Estelle Freedman, *Intimate Matters: A History of Sexuality in America* (New York, NY: Harper and Row, 1988), 189.

¹¹ Mary MacLane, "Movies and Me." *Photoplay* 13 No. 2 (January 1917), 24.

¹² D'Emilio and Freedman, *Intimate Matters*, 172. For more on prostitution in the Progressive Era, see Barbara Meil Hobson, *Uneasy Virtue: The Politics of Prostitution and the American Reform Tradition* (New York, NY: Basic Books Inc. Publishers, 1987); Mark Thomas Connelly, *The Response to Prostitution in the Progressive Era* (Chapel Hill; North Carolina Press, 1980); and David J. Pivar, *Purity and Hygiene: Women, Prostitution, and the "American Plan," 1900-1930* (Westport and London: Greenwood Press, 2002); For more on the construction of the "separate sphere" ideology, see Christina Simmons, "Modern Sexuality and the Myth of Victorian Repression," in *Passion and Power: Sexuality in History*, ed. Kathy Peiss and Christina Simmons (Philadelphia: Temple University Press, 1989): 157-77.

¹³ Robert Wiebe, *The Search for Order: 1877-1920* (New York: Hill and Wang, 1967), xiii.

attend ‘swell social functions.’”¹⁴ Men who visited vice districts also threatened the moral health of America. Cities in general—with their perceived lack of traditional community structures, high crime rates, and sexual promiscuity—also caused reformers to worry. One newspaper reported: “for its ethics, or lack of them, New York’s type is mercilessly flayed.”¹⁵ While moral health never acquired a single unified definition, a general impression of Americans’ moral failings drove reformers to action.

ASHA interests overlapped with other reform organizations such as temperance reformers, suffragists, and public health officials in addressing these issues. Part of establishing a unique identity involved an organization’s ability to determine a causal agent for the social and bodily ills wracking society. For the ASHA the new social order depended on sexual health. Therefore, the ASHA’s first and foremost enemy was venereal disease.

Wielding the “light of scientific inquiry,” the professionals who comprised the ASHA ranks used medical authority to issue a call for transparency in eliminating venereal disease. In an effort to legitimize the professionalization of social work and scientific advances such as germ theory, professionals required organizations such as the ASHA to give them a preaching platform. If science’s “white beams made the red lights look redder than before—an angry, bloody, unhealthy red,” then the ASHA poised itself to address the problem.¹⁶ Professionals imagined themselves “as watchdogs for [the] broader society,” and they resolved to air their concerns as loudly and articulately as possible.¹⁷ They deliberately chose the phrase “social hygiene” to encompass their message, and in doing so discarded phrases such as “social purity”

¹⁴ “Moral Health of Nations in Jeopardy.” *The Brownsville Daily Herald*, April 26, 1901.

¹⁵ “Ridicule for New York’s View from Tarkington,” *Arizona Republican*, August 04, 1909.

¹⁶ “A History and A Forecast: The Story,” in the *American Journal of Social Hygiene*, Vol. 5, No. 4 (October 1919), 553.

¹⁷ John C. Coffee Jr., *Gatekeepers: The Professions and Corporate Governance* (Oxford: Oxford University Press, 2006), 106.

or “white slave.” Moreover, the ASHA believed that “the organization should have an impersonal name, and one which does not carry too much tradition of ancient ‘reform.’”¹⁸ The deliberate attempt to maintain a professional air of legitimacy played a large role in distinguishing the ASHA from other like-minded reform organizations and previous efforts to eliminate prostitution.

Though the first social hygiene group was founded by a Chicago urologist named William Belfield, the term “social hygiene” was coined by a Chicago newspaper to describe Prince Morrow’s work. When contemplating the decision to adopt the term as a title for the national organization, William Snow reflected, “in America we experiment with words as we do with the forces of nature, and we are constantly replacing old vehicles of expression with new inventions or applications.” In the mind of the public, social hygiene had become inextricably linked with campaigns against venereal disease and prostitution. Snow, however, underscored that the two types of highly publicized campaigns actually contributed to wider efforts of reform. “Social hygiene,” he asserted, “is essentially a constructive movement for the promotion of all those conditions of living, environment, and personal conduct which will best protect the family as an institution and secure a rational sex life for the individuals of each generation.”¹⁹ The ASHA legitimized and solidified their identity based on the preservation of the family through scientific education and reform.

One of the major impetuses for destroying prostitution and organized vice was reformers’ discovery that venereal disease posed a very real danger to the home and family. A distraught

¹⁸ For more on the transition between social purity and social hygiene, see David J. Pivar, *Purity Crusade: Sexual Morality and Social Control, 1868-1900* (Westport and London: Greenwood Press, 1973). “The Community, Prostitution, and Venereal Diseases,” Pamphlets 1912-1999 (Box 170, Folder 09). American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

¹⁹ Snow, “Progress, 1900-1915”, 39

mother wrote to Dr. W.A. Evans' advice column in the *Chicago Daily Tribune*. Her doctor had told her that venereal disease infection was responsible for 95 percent of his operations on women. "If this or a tenth part be true," the mother asked, "What shall we do to protect our daughters?" W.A. Evans confirmed her fears and added that 25 percent of infantile blindness came from gonorrhea.²⁰ The discovery of syphilis and gonorrhea as "venereal insontium— infections of the innocent" led to a renewed interest in scientific understanding and solutions.²¹ German scientists Paul Ehrlich and Fritz Schaudinn discovered the syphilis microorganism in 1905, nearly three decades after Albert Neisser first discovered the gonorrhea germ.²² By 1907 August Wasserman developed a blood test to check for presence of the disease, and in 1910 Paul Ehrlich debuted Salvarsan, the first treatment for syphilis after the discovery of its causative germ.²³ Scientists then linked gonorrhea, long viewed as relatively harmless, to high rates of sterility amongst women and blindness amongst infants.²⁴ Reform organizations—especially those such as the ASHA who viewed the family as key to the success of the race—now added medical necessity to their arsenal of anti-vice weaponry. The infection of child-bearing women and children presented a threat to the continuance of the white race, according to observers.

By positioning itself as an advocate of healthy family life, the ASHA rhetorically constructed its adversaries as opponents of healthy homes and healthy families. Rhetorician Kenneth Burke describes the rhetorical tactic as the process of constructing "A passage built about a set of oppositions (‘we do *this*, but *they* on the other hand do *that*...’) Once you grasp the

²⁰ "How to Keep Well: Cause of Infant Blindness," *Chicago Tribune*, Jan. 6, 1912.

²¹ Allan M. Brandt, *No Magic Bullet: A Social History of Venereal Disease in the United States Since 1880* (New York and Oxford: Oxford University Press, 1985), 9.

²² Donald R. Hooker, "Social Hygiene—Another Great Social Movement," *Journal of Social Hygiene* 2, No. 1 (January 1916), 6.

²³ William F. Snow, "Progress, 1900-1915," *Journal of Social Hygiene* 2, No. 1 (January 1916), 39.

²⁴ Frederick J. Taussig, "The Contagion of Gonorrhea Among Little Girls," *Journal of Social Hygiene* 1, No. 3 (June 1915): 415-422. The United States Public Health Service, *Venereal Disease Handbook for Community Leaders* (Washington, D.C; Government Printing Office, 1924).

trend of the form, it invites participation regardless of the subject matter.” In this way, the ASHA could produce images that tugged at the emotional heartstrings of the audience. One such publication featured a pastoral scene with children playing above the caption: “What About Their Tomorrow?” (see Figure 1). The pamphlet went on to describe the necessity of sex education in the home, “a duty no parent may rightfully shirk!” According to the ASHA



Figure 1: Pamphlet featuring children in a pastoral scene, c. 1920. “What About Their Tomorrow?” Public Relations. Press Coverage. ASHA Advertising Series. (Box 209, Folder 05). American Social Health Association Records, 1905-1990 (SW 45). University of Minnesota Libraries, Social Welfare History Archives.

rhetoric, anyone who advocated against anti-prostitution or anti-venereal disease laws was anti-progress and anti-family. Continued belief in social taboos, the ASHA intimated, would destroy the future prospects of children. This rhetorical tactic deliberately played on emotion and expectations of familial obligation in an effort to advance ASHA goals.²⁵

Reformers based a new call for male chastity around patriarchal obligations, underscoring the infections of innocent family members as a moral failing of men. ASHA educational materials often asked men to adopt the same ideals of chastity they would expect of their future wives. “The continent life for the young man is the only standard that is fair to woman,” one pamphlet observed. “Every self-respecting young man expects his bride to bring purity to the

²⁵ Kenneth Burke, *A Rhetoric of Motives* (New York: Prentice-Hall, Inc., 1950), 58; “What About Their Tomorrow?” Public Relations. Press Coverage. ASHA Advertising Series. (Box 209, Folder 05). American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

marriage bed...But has she not the absolute right to demand the same purity of him?"²⁶ In constructing a new demand for male continence, the ASHA cast extramarital affairs in a negative light. A man could bring venereal diseases from those affairs into the home, infecting his wife and children; their innocence became his responsibility to safeguard in the ASHA's vision.

Unfortunately, characterizing vice as a failure of men to protect their families turned an ingrained American belief on its head. Social reformers had to discredit the nineteenth-century belief that men were sexual creatures who became impotent if they did not have regular intercourse. Victorian society believed that men's vitality stemmed from their sexual prowess, and segregated vice districts allowed men to exercise their needs without taxing their wives.²⁷ Those in the sexual hygiene movement scoffed at such conceptions. Their investigations revealed that only corrupt politicians, advertisers, and "white slave" traders profited from segregated vice.²⁸ Therefore, the reformers asserted, "the whole theory of a 'necessary evil' was false...its legend was a superstition of a primitive society."²⁹ Despite reformers' ardent belief that prostitution was not a necessity, the thriving presence of vice districts suggested that many Americans believed differently.

Facing a problem so systemic and severe, the ASHA reformers cast a wide net when forming their initial plan of action. From the first, the ASHA viewed itself in transnational

²⁶ Exner, Max J., "Friend or Enemy? to the Men of the Army and Navy." (Box 170, Folder 03), 13.

²⁷ For more on the role of prostitution in the 19th century, see Anne Butler, *Daughters of Joy, Sisters of Misery* (Urbana, IL: University of Illinois Press, 1985).

²⁸ "White slave" was a term social reformers applied to prostitutes. In the pulp narratives and in reformers sermons, "white slaves" criminals often smuggled women into America specifically for the purpose of prostitution or kidnapped women from the American countryside. Much of the early anti-prostitution legislation targeted this phenomena, including the 1910 Mann Act which prohibited taking women across state lines for immoral purposes. Saving the "white slave" was often more a matter of morals than of science and therefore did not overly concern the ASHA, though they often commented on legislation and other agencies efforts. For more on the "white slave" reforms, see David J. Pivar, *Purity Crusade: Sexual Morality and Social Control, 1868-1900* (Westport and London: Greenwood Press, 1973); Brian Donovan, *White Slave Crusades: Race, Gender, and Anti-vice Activism, 1887-1917* (Urbana: University of Illinois Press, 2005).

²⁹ "A History and a Forecast: The Story," in *The Journal of Social Hygiene* 5, No. 4 (October 1919), 554.

context. Reformers' goal of eradicating venereal disease meant addressing behaviors they believed were immoral, and that perceived immorality crossed international borders. While America of the pre-twentieth century has often been described as isolationist, the ASHA joined many other social reform movements in looking across the oceans for guidance, often borrowing legislation which seemed promising or attending international conferences such as the International Conference on Syphilis and Venereal Diseases at Brussels in 1899. The system of borrowing flowed along lines of a shared Atlantic economy and created what historian Daniel Rodgers described as "international patterns of admiration, appropriation, rivalry, publicity, and exchange."³⁰ It also reflected an "informal empire" in which American reformers could articulate a national identity and exert influence over other countries.³¹ As at the international exposition in San Francisco, U.S. reformers framed their ideologies in comparison to the advancements or failings of other nations. American reformers especially pointed to Europe's inability to establish effective systems of regulated prostitution. Britain's Contagious Diseases Acts--which required regular medical examination and licensure of prostitutes--spread more disease than it prevented, according to the ASHA. At the same time, they praised British social reformer Josephine Butler, whose dedicated lobbying effort encouraged the repeal of the Contagious Diseases Act in 1886.³² Often, reformers such as Butler visited America to discuss the issues Americans faced and how the European examples, both good and bad, might relate.

Even as dedicated partnerships formed between reform organizations, concerns over venereal disease earned considerable commentary from social critics outside the movement. Ruth

³⁰ Daniel Rodgers, *Atlantic Crossings: Social Politics in a Progressive Age* (Cambridge: The Belknap Press of Harvard University Press, 1998), 62.

³¹ Ian Tyrell, *Reforming the World: The Creation of America's Moral Empire* (Princeton: Princeton University Press, 2010), 2.

³² Charles Walter Clark, *Taboo: The Story of the Pioneers of Social Hygiene* (Washington, D.C.: Public Affairs Press, 1961), 22. For more on Josephine Butler and the Contagious Diseases Acts, see Josephine Butler, *Personal Reminiscence of a Great Crusade* (London: Horace, Marshall & Son, 1896).

Maxwell, a woman with no discernible reform organization affiliation, penned a letter to the editor of the *Chicago Tribune* and bemoaned the state's inaction: "When the *Titanic* sinks with 1,000 helpless souls, we are stirred to the very depths with horror and pity; but while our 'red mills,' saloons, dance halls, lake steamers, assignation hotels are wrecking the lives of thousands of young boys and girls, blasting the lives of unborn generations with deformity and blindness, those very captains of the ship of state do not raise even a murmur of protest." Her reference to the sinking of the *Titanic* was no doubt meant to criticize public officials who refused to police vice districts. Maxwell claimed the 22nd Street Vice District attracted men by the thousands, tempting them to participate in "orgies which are a disgrace to a nation born in purity and once guarded in public office by such men as Washington and Lincoln."³³ If the national patriarchs would be appalled by such conditions, Maxwell asked, wasn't it the duty of Americans to respond to the crisis?

In raising such a question, Maxwell spoke to one of the major challenges facing the ASHA and other reform organizations. Though they discussed venereal disease as a problem with international scope, their solutions targeted Americans. To create an organizational identity the ASHA needed to imagine an idealized America where venereal disease and segregated vice districts no longer existed. In shaping education and legal reforms, reformers placed new demands on citizens. Upholding



Figure 2: This ASHA educational poster (c. 1922) shows a young girl "blinded by gonorrhoea." The ASHA used such images to stir pity in its audiences and to inspire anti-venereal sentiment. The United States Public Health Service, Venereal Disease Handbook for Community Leaders (Washington, D.C; Government Printing Office, 1924). Printed in partnership with the American Social Hygiene Association.

³³ Ruth Maxwell, "The Social Evil , a Letter to the Editor," *Chicago Tribune*, June 19, 1912.

certain standards became a matter of patriotism. It was not only organizations such as the ASHA that discussed the duties of citizens in relation to sexual health. In his sixth annual address to Congress on December 3, 1906, Theodore Roosevelt berated white mothers for their alleged refusal to bear children and thus their role in committing “race suicide”: “Willful sterility is, from the standpoint of the Nation, from the standpoint of the human race, the one sin for which the penalty is National death, race death; a sin for which there is no atonement.”³⁴ The ideal American citizen needed to pledge himself or herself to health and good morals, reformers claimed, and those behaviors demanded an end to the plague of venereal disease wracking the nation.

Social reformers were perhaps right to be concerned with the entrenched nature of prostitution. Graham Taylor, noted eugenicist and a keynote speaker at the National Conference on Race Betterment in 1914, reported:

Under the conspiracy of silence and secrecy there has come to prevail a system of commercialized, segregated, police-protected vice, the results of which so deteriorate and demoralize the very stock of the race that there is little use of thinking of race betterment without at least reckoning with these sinister and everywhere present evils, ...the magnitude of this system is little imagined.³⁵

Despite his grim observation, Taylor went on to praise the numerous cities undertaking statistical analysis of vice and venereal disease across the countries. Their efforts contributed to the eradication of venereal disease and the sexual health of the “white race,” which the National Conference on Race Betterment was committed to protecting. Municipally appointed groups such as Chicago’s Committee of Fifteen, New York City’s Committee of Fourteen, the Syracuse

³⁴ Theodore Roosevelt, as quoted in Paul M. Rego, *American Ideal: Theodore Roosevelt’s Search for American Individualism* (Lanham, MA: Lexington Books, 2008), 143.

³⁵ The Race Betterment Foundation, *National Conference on Race Betterment: Proceedings of the First National Conference on Race Betterment, January 8, 9, 10, 11, 12, 1914* (Battle Creek: the Race Betterment Foundation, 1914), 283.

Moral Survey Committee, and the California Law Enforcement organization all reported vice conditions and made use of new statistical reporting methods developed by social workers and other emerging professionals.³⁶

The number of venereal disease infections seemed staggering; some accounts suggested as many as one in seven individuals had either syphilis or gonorrhea.³⁷ Among prostitutes, some reformers reported infection rates as high as ninety percent, with up to fifty percent displaying signs of both diseases.³⁸ One reformer noted the vast variation of statistics and said “those guesses vary all the way from the extravagant opinion that 80 per cent of the adult male population has been infected to the more modest suggestion that 20 per cent would cover it.”³⁹ His tongue-in-cheek commentary hinted at the tendency of reformers to perhaps overstate their claims. The claims, even if overstated, created a flurry of dismay amongst Americans who demanded action to address the issue. By addressing (and perhaps exacerbating) the public fear of venereal disease, the ASHA created a crisis which they could answer, reaffirming their legitimacy as a reform organization.

The venereal disease problem became so terrifying to the public that some began to refer to it as “the red plague,” perhaps alluding to the red lights which had so long marked the doors of bordellos and brothels in segregated vice districts across the nation.⁴⁰ Women’s clubs and

³⁶ For more on the rise of professionalization amongst social reformers, see Regina Kunzel, *Fallen Women, Problem Girls: Unmarried Mothers and the Professionalization of Social Work, 1890-1945* (New Haven: Yale University Press, 1995). For more on the professionalization of medicine, see Paul Starr, *The Social Transformation of American Medicine* (New York: Basic Books, 1982).

³⁷ Upton Sinclair and Eugene Brioux, *Damaged Goods* (Philadelphia: The John C. Winston Co., 1913), 45.

³⁸ The American Social Hygiene Association, *Keeping Fit to Fight*, pamphlet authorized and distributed by the War Department and Commission on Training Camp Activities (New York, NY: 1918), 4-5.

³⁹ Charles W. Banks, “Venereal Disease: Its Probable Prevalence: An Attempt to Reach a Definitive Basis of Statistical Value,” *Journal of Social Hygiene* 1, No. 2 (March 1915), 216.

⁴⁰ Robert H. Gault, “The Illinois Social Hygiene League, Formerly the Red League,” *Journal of Social Hygiene* 5, No. 2 (April 1919) JSH Vol. 5

medical organizations met to discuss the problem from San Francisco to Washington, D.C.⁴¹ The Vice Commission of Portland, Oregon painted commercial vice as a monstrous “hydra-headed, deep-rooted problem.”⁴²

Revealing the conditions of immorality proved to be only the first step for reformers. Addressing the problem called for new organizational infrastructure and devoted attention. On December 30, 1913, the American Social Hygiene Association filed for incorporation with the New York State Supreme Court.⁴³ The document appealed for a name change, formally disbanding the American Federation for Sex Hygiene and legally creating the ASHA. The new title represented the coalition of two major branches of anti-vice organizations: the American Vigilance Association, whose focus had long been to eradicate prostitution via legal reform, and the American Society of Sanitary and Moral Prophylaxis (ASSMP), whose goals included an end to “sex ignorance,” venereal disease, and the sexual double standard. The merger created a “greater and stronger society...taking over the fields of work, the problems and the obligations of both the parent organizations.”⁴⁴ The ASHA continued to absorb other reform groups, but its two major underpinnings were born of the 1913 merger. The two organizations united amicably in their desire to eradicate prostitution and venereal disease; because their goals aligned so closely, there was surprisingly little tension between the groups. The creation of a new board of directors eased any conflict between old leaders while remaining true to the overall mission of the fledgling ASHA.

⁴¹ “Commonwealth Club to Discuss ‘Red Plague,’” *The San Francisco Call* (June 11, 1913), 2; “Institute on the Red Plague is to Be Held,” *The Public Ledger*, Maysville KY (November 2, 1920), 4.

⁴² *Report of the Portland Vice Commission to the Mayor and City Council of the City of Portland, Oregon* (Portland: Henry Russell Talbot, 1913), ii.

⁴³ “Name Change to American Social Hygiene Association 1916” Corporate Records. Corporate Documents. American Federation for Sex Hygiene (Box 205, Folder 11), 3. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

⁴⁴ “A History and a Forecast: The Story,” 555.

The founder of the ASSMP, Prince Albert Morrow, was born in Kentucky but educated extensively at medical centers in Paris, London, Vienna and Berlin. After attending the International Conference on Syphilis and Venereal Diseases at Brussels in 1902, Morrow founded the ASSMP in 1905. Though medical communities readily discussed syphilis and gonorrhea, the public remained relatively unaware of them. In 1906 the *Ladies Home Journal* purportedly lost 75,000 subscribers when the editor ran a series of articles on venereal disease, illustrating the strong social taboo surrounding the subject. Horrified by what he perceived to be deliberate efforts to leave the public in dangerous ignorance, Morrow committed himself to the eradication of venereal disease via education and public health campaigns. Though his background in medicine originally attracted mostly other medical professionals, Morrow maintained, “To correct these evil conditions there should be a union of all the social forces which work for good in the community...The evil is composite in its causes...and to be successfully combated the cooperative efforts of different social groups is required.”⁴⁵ By 1910 the organization changed its unwieldy name to the American Federation for Sex Hygiene. Organizers witnessed the rise of several municipal organizations under the umbrella of Morrow’s work. Ultimately they recognized “there was a vital community of interest” between the American Federation for Sex Hygiene and another young reform organization called the National Vigilance Association. Though Morrow would not live to see the merger, officials from both groups gathered in Buffalo in October of 1913 to discuss their mutual interests.

The American Vigilance Association (AVA) did not boast a decade of experience like the ASSMP. It was a relatively new organization, chartered in 1910 and reorganized in early 1913 so that its national branch headquarters sat in New York City under the direction of James Bronson

⁴⁵ Brandt, *No Magic Bullet*, 24-25.

Reynolds. Reynolds followed in the reform tradition of individuals such as William Stead and Josephine Butler, whose advances focused on the eradication of prostitution via moral suasion campaigns and legal reforms. Reynolds sought the help of Grace Dodge, a financial supporter of the ASSMP. Together they advocated for the rights of individual prostitutes, viewing them “‘as more sinned against than sinning,’ victim[s] of the atrocious avarice of exploiters and of the indifference and ignorance of Christian communities.”⁴⁶ Their sympathy for prostitutes reflected the ASSMP’s intellectual roots in nineteenth-century “social purity” movement, which had attempted to challenge the sexual double standard as early as the 1830s and often included religious leaders among its most ardent supporters.⁴⁷ Dodge engineered the meeting at Buffalo where John D. Rockefeller, founder of his own Bureau of Social Hygiene localized in New York state, provided for the financial future of the ASHA. Once the AVA and ASSMP united, the two main branches of anti-venereal and anti-prostitution campaigns came together in one powerful organization.

On April 1, 1914, the Supreme Court of New York recognized the merger of the American Federation for Sex Hygiene and the National Vigilance Association. The leadership of the new organization swelled from fifteen to twenty-one individuals overseeing a total business worth of \$38,651. By October of 1914, the ASHA marshaled an additional \$39,382 from contributors, membership dues, book sales, lectures, subscriptions, and investigations. An additional 84 members joined, swelling their ranks to 169. John D. Rockefeller was listed as a

⁴⁶ Clarke, *Taboo*, 69.

⁴⁷ One example of a social purity campaign was William Thomas Stead’s *If Christ Came to Chicago: A Plea for the Union of All who Love in the Service of All Who Suffer* (Chicago: Laird & Lee, 1894). For more on social purity, see Carroll Smith-Rosenberg, “Beauty, the Beast, and the Militant Woman: A Case Study in Sex Roles and Social Stress in Jacksonian America,” in *Disorderly Conduct: Visions of Gender in Victorian America*, ed. Carroll Smith Rosenberg (New York: Oxford University Press, 1985); David J. Pivar’s *Purity Crusade: Sexual Morality and Social Control, 1868-1900* (Westport: Greenwood Press, 1973).

founder.⁴⁸ All members received the *American Social Hygiene Association Bulletin* and later the *Journal of Social Hygiene*, but a ranking system established member-type by amount of yearly contribution. Founders paid \$1,000 a year or more, Patrons offered \$500, Benefactors paid \$250, Life Members donated \$100, Sustaining Members and Members offered \$10 and \$5 respectively, and any organization or society paid \$10.⁴⁹ Its membership base established and a system for growth in place, the ASHA looked forward to expanding its mission.⁵⁰

The ASHA also partnered with several other large organizations during its early years. In 1913, John D. Rockefeller offered a significant financial endowment to a fledgling national social hygiene association. He founded the Bureau of Social Hygiene (BSH) in New York, an organization which spent several years focusing on conditions in New York City while simultaneously funding national programming to battle venereal disease and prostitution. Rockefeller maintained an active role as an international philanthropist, contributing financial support to medical education programming in Canada as well.⁵¹ Between 1913 and 1916, Rockefeller contributed at least \$5,000 each year to the ASHA.⁵² Though Rockefeller declined a position on various philanthropic boards, the ASHA nonetheless prepared yearly progress reports at the request of one of their largest contributors.⁵³ The “great importance of this request and the bearing it will have on future gifts” made the Rockefeller reports “imperative” to the continued

⁴⁸ “Report of the American Social Hygiene Association: Incorporated Under the Membership Corporation Laws of the State of New York, for the Fiscal Year Ending October 9, 1914” Corporate Records. Annual Reports. Membership Corporation Reports. (Box 020, Folder 06), 1-6. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

⁴⁹ “Membership,” *American Social Hygiene Association Bulletin* 1, No. 3 (May 1914), 1.

⁵⁰ Adjusted for inflation, the ASHA’s 1914 funds of \$78,033 would equal \$1,818,707 in 2013. A founder’s \$1,000 contribution in 1914 would equal \$23,306 dollars in 2013. Calculated using the United States Department of Labor, United States Bureau of Labor Statistics.

⁵¹ Marianne Fedunki, *Rockefeller Foundation Funding and Medical Education in Toronto, Montreal, and Halifax* (McGill-Queen's Press, 2005).

⁵² Brandt, *No Magic Bullet*, 38.

⁵³ Theresa R. Richardson, *The Development of the Social Sciences in the United States and Canada: The Role of Philanthropy* (Westport, CT: Greenwood Publishing Group, 1999), 105.

success of the ASHA.⁵⁴ The President of the Rockefeller Foundation, Raymond Fosdick, also served as the chairman of the ASHA finance committee during the 1920s at Rockefeller's request. The total amount of funding from the Bureau of Social Hygiene (BSH) totaled over two million dollars.⁵⁵

While Rockefeller seemed to have a controlling interest in the ASHA, his contributions and expectations fell in line with ASHA's overall agenda, potentially mitigating any conflicts over agenda. The allegiance formed between the two organizations proved a worthwhile model of partnership. The BSH benefitted by having a national platform to air its research; for instance, in 1914 the BSH commissioned reformer Abraham Flexner to survey conditions of prostitution in Europe.⁵⁶ The next year, the ASHA reprinted Flexner's work, reviewed it favorably in the *Journal of Social Hygiene*, welcomed Flexner as a guest columnist, and gave his work national exposure.⁵⁷ As the audiences grew larger so did the reach of all participating organizations.

During the fiscal year of 1915, the ASHA continued to grow. It amassed another \$39,449. Total disbursements for the year—including salaries, rent, office expenses, library purchases, traveling expenses, regional offices, the annual conference, the Panama-Pacific Exhibit, and contributions to a Morrow memorial fund—totaled \$56,413. The skyrocketing expenditures may have contributed to their nearly doubled membership in 1915: four new organizations joined, including the New Jersey and Massachusetts Social Hygiene Associations. Overall membership listed 470 individuals and organizations, an increase of over one hundred and seventy-five

⁵⁴ "American Social Hygiene Association Office Memorandum from Dr. Snow, General Director to Miss Pinney, Dr. Clarke, Mr. Edison (Executives)," Finances and Fundraising. Bureau of Social Hygiene. ASHA Presentation to Bureau. (Box 026, Folder 08), 1. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

⁵⁵ Richardson, *The Development of the Social Sciences*, 105.

⁵⁶ Abraham Flexner, *Prostitution in Europe* (New York: Bureau of Social Hygiene, 1913).

⁵⁷ "A New Reprint," *The American Social Hygiene Association Bulletin* 1, No. 10 (January 1915), 1.

percent.⁵⁸ By 1916 membership jumped an additional 124 members from thirty different states (see Figures 6-9).⁵⁹

These numbers may be misleading, because although fewer than 500 individuals and organizations became members, the ASHA nonetheless boasted a wide network of communication via its personal publications and through local newspapers across the nation. In 1914 the *American Social Hygiene Association Bulletin* reported on advances in social hygiene education or legislation in thirty-five states. By 1916 it was reporting on action in every state and several foreign nations (see Figures 6-8). Moreover, those states were communicating amongst themselves. The *Honolulu Star Bulletin* ran a series of articles announcing “Investigation of Abatement Law in Iowa and Nebraska Shows that It Would Work in Honolulu.” The newspaper reprinted the ASHA’s study of regulations outlawing segregated vice districts in the Midwest.⁶⁰ The communication network allowed municipalities to see the successes and failings of legislation, and the successes often encouraged towns such as Honolulu to attempt their own reforms.

The formation of the ASHA required uniting two major organizations and engaging multiple others. Their identity revolved around their commitment to eradicating venereal disease, but their methods for doing so left plenty of room for cooperation and innovation with

⁵⁸ “Report of the American Social Hygiene Association: Incorporated Under the Membership Corporation Laws of the State of New York, for the Fiscal Year Ending October 1, 1915,” 6-8. Corporate Records. Annual Reports. Membership Corporation Reports. Membership Corporation Reports. (Box 020, Folder 06), 3. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

⁵⁹ “Report of the American Social Hygiene Association: Incorporated Under the Membership Corporation Laws of the State of New York, for the Fiscal Year Ending October 1, 1916” Corporate Records. Annual Reports. Membership Corporation Reports. Membership Corporation Reports. (Box 020, Folder 06), 5. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

⁶⁰ “Investigation of Abatement Law in Iowa and Nebraska Shows That it Would Work in Honolulu,” *Honolulu Star Bulletin*, March 24, 1917.

other organizations. The first annual meeting in 1914 was attended by “audiences of upwards of five hundred people.” Special film screenings and lectures played to attendees, many of whom came from social work, educational, and medical professions.⁶¹ As ASHA General Secretary William Snow observed: “The real strength of the social hygiene movement of today lies in the cooperative activities of the great religious, social, and educational organizations.”⁶² By the end of 1916, the ASHA boasted two publications and a wide base of interest.

The ASHA cultivated relationships with local and state organizations, but they only did so when the goals of said groups matched the overall ASHA agenda; by carefully selecting their partnerships, the ASHA was able to maintain control over their message and maintain a focused campaign. Dr. Donald Russell Hooker of Johns Hopkins University and secretary of the ASHA wrote that although the membership in Maryland remained strong, propaganda and educational efforts remained virtually nonexistent. In a 1916 letter to the executive officers, Hooker proposed offering an additional two thousand dollars to fund a study of vice conditions in Maryland and surrounding areas. “It seems to me,” he wrote, “that we would be assured local activity; that the National would be enabled to open another section of the country and that a better organizer could be placed in charge [because] in the employ of the National his position and prospects would be more secure.”⁶³ Hooker’s suggestion of mutual beneficence between a local organization and the ASHA seemed promising. In its first *Bulletin* of 1917, the ASHA eagerly reported a plan to “reorganize and enlarge” the Maryland Social Hygiene Association, offering not only Hooker’s requested survey but also including “the presentation of social hygiene facts and problems for discussion at meetings of civic clubs, fraternal organizations, medical societies,

⁶¹ “The Annual Meeting,” *The American Social Hygiene Association Bulletin* 1, No. 7 (October 1914), 2.

⁶² Snow, “Progress 1900-1915”, 40.

⁶³ Letter of Dr. Donald Russell Hooker to Dr. Snow, July 22, 1916. Corporate Records. Policy-making Bodies. Minute Books. (Box 005, Folder 05), 1.

women's clubs, parent-teacher conferences, and similar bodies."⁶⁴ Alliances with local organizations could have proved disastrous, but the ASHA only selected groups whose messages aligned with their own.

Part of the trouble in articulating a unified identity came about because many ASHA members maintained connections to other organizations, moving fluidly across the American reform landscape and bringing with them their own motivations and expectations for progress. One such figure was Maude Miner, the first female probation officer in New York City and Secretary of the New York Protective and Probation Association. Miner championed legal reform to end prostitution, but her simultaneous focus on education brought her interests in line with the ASHA. She submitted her report from the National Conference of Charities and Correction for publication in the *Journal of Social Hygiene* in 1914. She underscored the "social causes of prostitution...the crowded and broken homes, the lack of understanding and sympathy... the dangerous association in amusement park, café, and dance hall...the irregular work, low wage, and above all, lack of training" which encouraged women to turn to prostitution.⁶⁵ Miner believed in protecting women by changing laws and instituting educational programming, but other members of the ASHA disagreed with her characterization of prostitutes. Miner illustrated the ability of reformers to move between municipal and national reform, but she also embodied another debate raging within reformers' ranks; while Miner believed some prostitutes could be reformed and reintroduced to society, some reformers did not agree.

The question of culpability proved difficult to answer amongst ASHA reformers. Were women the major causes of vice or were they victims? Because the ASHA wanted to eradicate

⁶⁴ "Maryland Social Hygiene Society," *American Social Hygiene Association Bulletin* 4, No. 1 (January 1917), 4.

⁶⁵ Maude Miner, "Report of Committee on Social Hygiene," in *The Journal of Social Hygiene* 1, No. 1 (December 1914), 81.

venereal diseases-- those “fearfully poisonous and corrupting [illnesses] caused and spread by vices and animal gratifications in which both men and women have part”—the characterization of women at first seemed unimportant. Rather than creating images of villains and rogues, early articles and documents of the ASHA focused on creating a masculine and feminine ideal. Their reliance on education and legal reform carefully outlined a new expectation of social morality, one that would ultimately defeat “the very worst foes of sound family life, and thence of civilization.”⁶⁶ Though the characterizations of women occasionally varied from reformer to reformer, the ASHA members agreed that the eradication of venereal disease was their end goal. Those who came from a background in the “social purity” movements often shared a religious motivation and included many women. Social purists demanded morality from both men and women, attacking the sexual double standard and encouraging continence outside of the marriage. Social hygienists based their appeals on advances in medicine, jettisoning religiosity and emphasizing reason. Female social workers often walked a fine line between the two; their sympathy tended to rest with the victimized women, though their profession praised empirical data and reason. The flexibility of individual members and their variety of opinions showcased the ability of the ASHA to absorb multiple voices in pursuit of a shared goal.⁶⁷

The ASHA was also able to unite reformers across national borders. When Charles W. Clarke penned *Taboo: the Story of the Pioneers of Social Hygiene* in 1961—the only book length history of the ASHA—he focused his praise on the men and women whose contributions provided cornerstones of social hygiene and revealed the transatlantic foundations of the organization. Of the ten biographical figures he selected, only four were American. Josephine

⁶⁶ Eliot, “The American Social Hygiene Association,” 2.

⁶⁷ Kunzel, *Fallen Women, Problem Girls*. Starr, *The Social Transformation of American Medicine*.

Butler, William Stead, and Havelock Ellis hailed from Britain; Paul Ehrlich and Elie Metchnikoff lived in Germany; and Alfred Fournier was born in France. Clarke included Jane Addams, James Bronson Reynolds, Prince Morrow and William Snow from America. *Taboo* revealed a group of lecturers who regularly traveled across oceans to pursue social progress. The ten individuals shared no organizational membership. Butler and Stead were religious leaders. Ellis was a trained social scientist. Jane Addams became a leader of the American settlement house movement when she established Hull House in Chicago; her writings proved foundational for many of the first social scientists. Morrow, Snow, Ehrlich, Fournier, and Metchnikoff all practiced medical science. Reynolds was a lawyer. Despite their diverse occupations and nationalities, all contributed to social hygiene's goal of eradicating prostitution and venereal disease. *Taboo* also showcased the ability of individuals to move between reform organizations. Of the ten leaders featured in the ASHA history book, only two were direct members of the organization.⁶⁸

A vibrant international debate characterized the efforts of ASHA reformers to define their own actions and to support the action of international agencies doing work which aligned with the ASHA goals. Because the members of the ASHA came from international backgrounds, the publications of the organization regularly followed international events. The *Journal of Social Hygiene* and *American Social Hygiene Association Bulletin* frequently reported reform movements abroad. In the first three years of publication they published articles such as "Recent Progress in Social Hygiene in Europe" and "International Agreements in Relation to the Suppression of Vice."⁶⁹ They reviewed publications such as *The Anti-Alcohol Movement in*

⁶⁸ Clark, *Taboo*, 22.

⁶⁹ James Bronson Reynolds, "Recent Progress in Social Hygiene in Europe," *Journal of Social Hygiene* 2, No. 1 (March 1915); James Bronson Reynolds, "International Agreements in Relation to the Suppression of Vice," *Journal of Social Hygiene* 2, No. 2 (April 1916).

*Europe, Vigilance Work in Buenos Aires, and Brothels in Bienne.*⁷⁰ Reformers commented favorably on the efforts of the Vigilance Society of Rangoon to issue a series of pamphlets decrying the segregated vice districts of Burma.⁷¹ They added titles such as “Memoria Correspondiente al Ejercicio” to their pamphlet collection, revealing an intellectual trade network between Chile and ASHA reformers.⁷² Another pamphlet arrived detailing a “Report on Venereal Diseases of the Committee Concerning Causes of Death and Invalidity in the Commonwealth,” showcasing similarities between the municipal surveys the ASHA advocated and efforts in Melbourne, Australia.⁷³

Reformers focused on the economic costs of venereal disease infection both domestically and internationally as a way to encourage reform; it also widened its audience by linking the economic success of the nation to the eradication of venereal disease. In 1914, Abraham Flexner reported that the “annual cost of prostitution to the German Empire fixes from 300 to 500 million marks (approximately from \$75,000,000 to \$125,000,000).”⁷⁴ The United States Public Health Service reported 2,000,000 cases of venereal disease with 9,132,235 related deaths, claiming the “present value of lives lost, \$18,081,500.” Additional estimates of health care and lost wages meant an overall national cost of \$185,404,474.⁷⁵ Though neither Flexner nor the Public Health Service explained their calculations, they offered the statistics as a damning indictment of venereal disease overall. The impression of shared economies—or at least comparable economies—allowed reformers to base their arguments in rhetoric of saved money; ASHA

⁷⁰ “Book Reviews,” *Journal of Social Hygiene* 1, No. 1 (April 1914), 134; “Book Reviews,” *Journal of Social Hygiene* 1, No. 2 (March 1915), 308.

⁷¹ “Vigilance Society of Rangoon, Burma,” *American Social Hygiene Association Bulletin* 1, No. 10 (January 1915), 13.

⁷² “Publications Received,” *American Social Hygiene Association Bulletin* 4, No. 1 (January 1917), 6.

⁷³ “In the Periodicals,” *American Social Hygiene Association Bulletin* 3, No. 7 (October 1916), 4.

⁷⁴ “Scientific Data and Other Information of General Interest,” *American Social Hygiene Association Bulletin* 1, No. 4 (April 1914), 3.

⁷⁵ Eliot, “Social Hygiene at the Panama-Pacific International Exposition,” 403.

reformers followed rates of venereal disease infection in the French and British armies. They argued that “serious war and the preparedness for serious war” meant understanding rates of infection disease and the potential costs, made predictable by observing the armies of other nations.⁷⁶ The ASHA accomplished similar ends when they published materials such as “Saving Millions for American Industry” (see Figure 3). The poster proclaimed: “68% of the workers on the non-effective list each day were listed because of the venereal diseases.”⁷⁷ Stressing economics allowed the ASHA to cultivate a



Figure 3: A pamphlet image featuring industrial workers, c. 1919. “Saving Millions for Industry,” Public Relations. Press Coverage. ASHA Advertising Series. (Box 209, Folder 05). American Social Health Association Records, 1905-1990 (SW 45). University of Minnesota Libraries, Social Welfare History Archives.

wide audience of interested individuals who might otherwise be uninterested in social reform.

As the nation struggled to understand the sexual revolution occurring all around them, it was little wonder that ASHA reformers worried: “It must not be overlooked that exactly the same factors which make it an educational agency of far reaching influence in spreading useful information upon every conceivable phase of human progress, may make it an equally far-reaching agency for disseminating vice and immorality...”⁷⁸ Their stress on education and legal reform would hopefully keep the organization from becoming an agent of immorality by keeping ASHA efforts transparent and public. The Panama-Pacific Exposition had boasted similar goals,

⁷⁶ Vernon L. Kellogg, “The Bionomics of War,” *Journal of Social Hygiene* 1, no. 1 (December 1914), 52.

⁷⁷ “Saving Millions for Industry,” Public Relations. Press Coverage. ASHA Advertising Series. (Box 209, Folder 05). American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

⁷⁸ Eliot, “Social Hygiene at the Panama Pacific International Exposition,” 406.

however, and its failure to maintain a wholesome message worried ASHA observers. Months after the Exposition debuted, several new exhibits opened. Dancers purportedly performed the arts of Hawaii and Egypt to educate Exposition goers, but instead “appeal[ed] to the sex impulses and morbid sex curiosity” with their provocative acts. Despite the dedicated efforts of local reform organizations, vice conditions in the city of San Francisco grew worse by the day. ASHA officer Bascom Johnson reported: “San Francisco has become the Mecca for the underworld.”⁷⁹ The Panama-Pacific Exposition, meant to be a beacon of progress and education, had been co-opted by the forces of commercial vice. ASHA reformers were left wondering how their own educational efforts could avoid such a fate.

Even while aware of the potentially corrupting nature of teaching sex, ASHA reformers became increasingly frustrated by social taboos that prevented open and frank discussions of the subject.⁸⁰ The reports of municipal organizations also sought to strip away some of the secrecy surrounding immorality; after all, Portland’s vice committee reported, “the disgrace and humiliation lies in the conditions and not in the statement of them.”⁸¹ Hugh A. Moran acknowledged he could not find the origin of the taboo, but he speculated:

Is this feeling of reserve inherent and instinctive, and hence eternally veritable? Is it a mere hold-over from primitive superstition, incompatible with the modern scientific method and to be wholly discredited and rejected? Or finally is it, like so many other of our legacies from the past, a mixture of sense and nonsense, founded on a solid rock of truth, but overlaid with falsity and encrusted by tradition?⁸²

⁷⁹ Bascom Johnson, “Moral Conditions in San Francisco and at the Panama-Pacific Exposition,” *Journal of Social Hygiene* 1, No. 4 (September 1915), 597. 609.

⁸⁰ Many early proponents of sex education faced the same frustration. See Robin E. Jensen, *Dirty Words: The Rhetoric of Public Sex Education, 1870-1924* (Urbana: University of Illinois Press, 2010).

⁸¹ *Report of the Portland Vice Commission*, 2.

⁸² Hugh A. Moran, “The Sex Taboo,” *Journal of Social Hygiene* 2, No. 2 (April 1916), 179.

Moran was not the only ASHA member to relate the taboo to primitive behavior. An article recounting the history of the ASHA compared the social distaste for talking about sex to Australian aboriginal superstitions, as a “bogey” monster incompatible with the advances made by science. He urged Americans to “brush away the cobwebs of superstition and to consider the subject in the light of reason.”⁸³ The ASHA directed much of its early efforts to dispelling what its leaders viewed as outdated superstitions, often relying on comparisons to “primitive” societies to underscore that the white race should expect more of itself. One of its posters (see Figure 4) asked the audience: “Why stigmatize any of them—why speak of gonorrhea and syphilis as ‘shameful diseases?’ Not disease, but immorality is shameful.”⁸⁴ The ASHA attempted to imply that good citizens could address disease outright without celebrating sexual promiscuity.

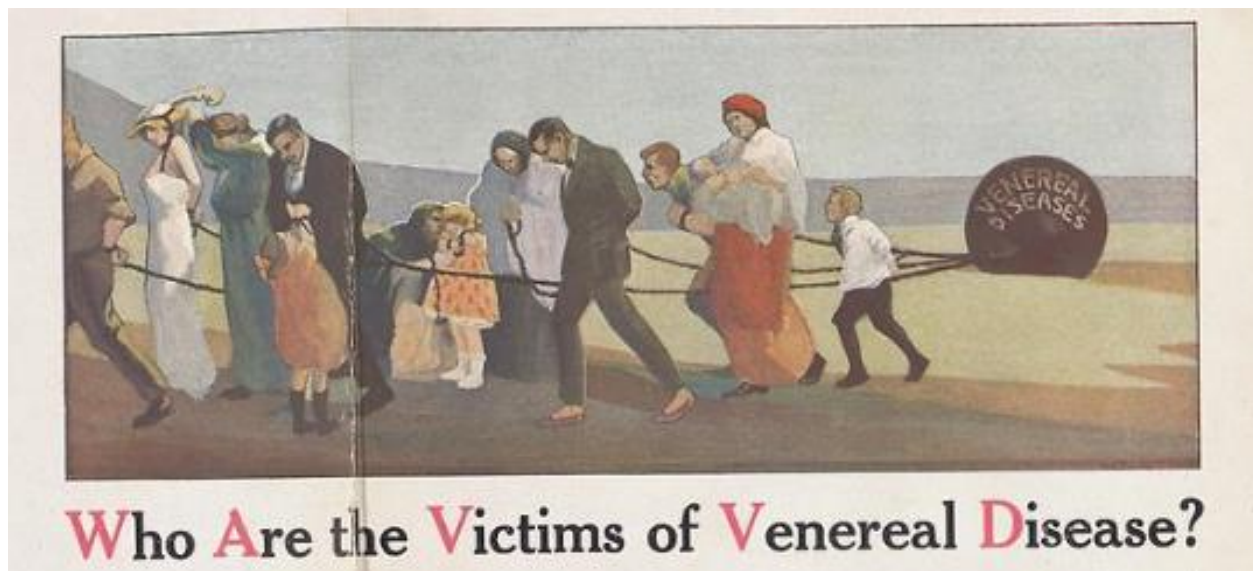


Figure 4: This pamphlet asked viewers "Could you tell by looking at the picture which of these persons are 'guilty' and which 'innocent?'" The ASHA demanded Americans start taking responsibility for health rather than placing the blame on disease carriers. All society suffered from venereal disease, according to the ASHA, and not just overtly immoral individuals. "Who Are the Victims of Venereal Disease?" Poster and Publications (Box 170, Folder 07), 3. American Social Health Association Records, 1905-1990 (SW 45). University of Minnesota Libraries, Social Welfare History Archives.

⁸³ "A History and a Forecast: The Story," 554.

⁸⁴ "Who Are the Victims of Venereal Disease?" Poster and Publications (Box 170, Folder 07), 3. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

The American public sphere, however, did not necessarily embrace frank discussions of sexual subjects. In addition to social taboos, the ASHA faced government censorship of overtly erotic materials. In 1873 Congress passed “An Act for the Suppression of Trade in, and Circulation of Obscene Literature and Articles of Immoral Use.” Colloquially the Act was known as the Comstock Law, named for Anthony Comstock, the man who lobbied tirelessly to censor erotic literature, literature advocating abortion, and literature advising contraception. The Comstock Laws reigned over published materials, especially those sent via the United States Postal Service.⁸⁵ Not only did censors seize pornographic materials such as nude postcards, they also seized educational materials such as Margaret Sanger’s 1913 “What Every Girl Should Know.”⁸⁶ Sanger’s attempt to offer sex education to young girls (including information about syphilis and gonorrhea) earned the ire of censors who prevented Sanger’s work from traveling through the mail. Officials eventually arrested her.

Some materials, however, avoided prosecution under the Comstock Laws. Upton Sinclair, the muckraking author most famous for *The Jungle* (his novelized exposé of Chicago meatpacking practices) also devoted his attention to venereal disease. In 1913, he published *Damaged Goods*. Based on a play by French social critic Eugène Brieux, the story followed relatively wealthy George DuPont. DuPont contracted syphilis from a prostitute and, over the course of the novel, lost his family and his health despite the intervention of a kind physician. Censored in France, the play went through a rigorous screening in the United States. Before being performed for the general public, “it was arranged that the highest officials in the United

⁸⁵ D’Emilio, *Intimate Matters*, 159. For more on Comstock Laws and censorship, see Bell, *Imperiled Innocents*.

⁸⁶ Margaret Sanger, *What Every Girl Should Know* (Girard: Haldeman-Julius Company, 1922, reprinted). Sanger’s work was originally published (and censored) in a newspaper column. Only after the military appropriated the pamphlet in 1917 did reprints become widely available.

States should pass judgment upon the manner in which the play teaches its vital lesson.” The “most distinguished audience ever assembled in America” included members of the presidential cabinet, both houses of Congress, the Supreme Court, and religious officials. They viewed the play on a Sunday afternoon and provided a “tremendous indorsement [sic]” at the final curtain.⁸⁷ Sinclair’s success in addressing the subject of venereal disease lay in his frank language and in the hero of his tale. *Hearst’s Magazine’s* praise-filled review lauded the play:

Best of all, it is the physician who dominates the action. There is no sentimentalizing. There is no weak and morbid handling of the theme. The doctor appears in his ideal function, as the modern high-priest of truth. Around him writhe the victims of ignorance and the criminals of conventional cruelty. Kind, stern, high-minded, clear-headed, yet human-hearted, he towers over all, as the master.⁸⁸

The praising of medical doctors and scientists extended to the ASHA’s visual rhetoric as well. One of their pamphlets portrayed a white, bearded scientist leaning over a microscope viewing syphilis and gonorrhea germs (see Figure 5). The text read: “The



Figure 5: Pamphlet featuring doctor and germs, c. 1919. “At Last The Face of the Enemy,” Public Relations. Press Coverage. ASHA Advertising Series. (Box 209, Folder 05). American Social Health Association Records, 1905-1990 (SW 45). University of Minnesota Libraries, Social Welfare History Archives.

microscope has revealed ‘the face of the enemy’ to the scientist. He knows the facts—but do you?” To discuss sex and venereal disease without raising eyebrows, reformers needed to

⁸⁷ Sinclair, *Damaged Goods*, 6-7.

⁸⁸ *Ibid.*, 10.

address the issue straightforwardly and from a position of medical authority which recent advances in germ theory might allow.⁸⁹

Perhaps because so many of its early members were medical professionals, the ASHA firmly believed that science could be used to endorse their message and encourage citizens to answer the call to arms. Noting the success of recent social health campaigns regarding prevention of tuberculosis, the ASHA newsletter noted: “The people proved themselves eager to do battle...when given knowledge and trusted leaders. They will just as eagerly take up the fight against venereal disease.”⁹⁰ The decision to use medical explanations and educational approaches kept the ASHA from descending into sensationalism, but reformers nonetheless struggled to articulate their message in accessible ways.

Local disdain of medical progress, epitomized by editorials in community newspapers, showcased the prejudice the ASHA faced in legitimizing medical authority. In Butte, Montana, a self-declared “sanitarist” wrote into the *Butte Daily Bulletin*. The anonymous author lambasted the cooperation between local physicians and county boards of health, agencies who forced vaccinations onto communities. The column described “the arch political doctor of Silver Bow county [who] get[s] a little free advertising in the guise of showing off the wonderful work in preserving the people’s health.” Dissatisfied with the seeming overt political agendas of health officials, the author went on to say: “It’s the same old story with these organizations, for which the people pay dearly, always peddling the fear of disease and its suggestion. In other words, always commercializing and drumming up disease, in order that the dollars may roll their

⁸⁹ “At Last The Face of the Enemy,” Public Relations. Press Coverage. ASHA Advertising Series. (Box 209, Folder 05). American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

⁹⁰ “Gaining the Confidence of the Public,” *American Social Hygiene Association Bulletin* 1, No. 2 (May 1914), 15.

way.”⁹¹ The editorial concluded that the process of vaccination introduced disease as often as prevented it, and that the rise of syphilis proved that observation. Despite the massive advances of science, many Americans remained skeptical or outright hostile to the medical professions.

Medical professionals not only faced the challenge of gaining public support, but also faced professional infighting as well. Abraham Flexner, noted physician and frequent ASHA contributor, questioned the professional status of social workers. Social workers comprised an important part of the ASHA educational programming—they moved throughout settlement houses and the court systems, attempting to mitigate the dangers of venereal disease and vice. Flexner suggested that rather than consider social work its own profession, it should be considered a “supplement” to medical professionals. In doing so, he underscored the importance of his own profession at the cost of social workers struggling for legitimacy in their own right. Though the pages of the *JSH* remained mum on the subject of Flexner’s inflammatory article, no doubt the relation between professionals remained strained as they attempted to determine whose authority mattered more when it came to crafting the legitimacy of the ASHA.⁹²

Social reformers’ criticisms of legislation such as the Comstock Laws did not prevent them from advocating their own types of censorship. Part of the success of the Comstock Laws was its rhetorical decision to focus on how vice endangered children. In doing so, censors capitalized on “parents’ most profound hopes and joys.”⁹³ The educational agenda advanced by the ASHA thus targeted parents first. Though teachers and other educators also received training, the ASHA believed responsible sex education began in the home. Educators stressed “how to

⁹¹ “Open Forum,” *The Butte Daily Bulletin*, September 18, 1919, 2.

⁹² Abraham Flexner, “Is Social Work a Profession?” (New York: The New York School of Philanthropy, 1915), 18.

⁹³ Nicola Bell, *Imperiled Innocents: Anthony Comstock and Family Reproduction in Victorian America* (Princeton: Princeton University Press, 1997), 5.

safeguard the rising generation against sex dangers without any allusion to sex.”⁹⁴ Though such a goal seemed difficult to achieve, ASHA reformers accomplished their ends by stressing sex as part of a biology curriculum, often using animals as examples. They also employed techniques of moral suasion such as encouraging in boys “their respect and love for their ideal in the realm of womanhood—their mothers.”⁹⁵ Reformers’ techniques attempted to avoid erotic or sensational materials. To that end, they often advocated censorship of those materials in places where educators and parents could not reach. The ASHA eagerly reported the adoption of new regulations by the National Board of Censorship of Motion Pictures. “Humorous films which emphasize loose marriage relations will be condemned,” the National Board reported. “Immoral advances between the sexes bound by close blood relationships will be condemned. In all cases that there be also a minimum of intimate and sensual detail.”⁹⁶ The ASHA almost universally supported such censors, although many believed they did not do enough to stamp out immorality in film.⁹⁷ The ASHA pursued any improvement in moral conditions that would hopefully help in the anti-venereal disease campaigns, including advocating censorship despite their commitment to encouraging open discussions of sex. Frank language regarding sex and eugenics were acceptable only when professionals such as the ASHA were there to interpret the message for the public.

⁹⁴ G. Stanley Hall, “Education and the Social Hygiene Movement,” *Journal of Social Hygiene* 1, No. 1 (December 1914).

⁹⁵ Grace Ellis, “Sex Instruction in a High School,” *Journal of Social Hygiene* 1, No. 2 (March 1915).

⁹⁶ “National Board of Censorship of Motion Pictures,” *American Social Hygiene Association Bulletin* 2, No. 4 (July 1915), 3.

⁹⁷ The *Bulletin* printed the following reply to the censorship report: “To complete the farce the censors should have added: ‘And when burning houses are shown care should be taken to eliminate all color from the flames and blackness from the smoke. These are the men in whose keeping is put the entertainment of our children—censors who approve of infidelity and sex problems and immoral advances with a ‘minimum of intimate and sensual detail....’ Happy America to possess censors whose morality and grammar are so perfect.” From “Censorship Sharply Criticized,” *American Social Hygiene Association Bulletin* 2, 5 (August 1915), 1.

A major challenge to ASHA's program of education and legal reform came from localized resistance which continued to question the ASHA's legitimacy and authority. The fight to educate Americans would not always be easy, however, nor their messages always taken on good faith. A satirist in Maysville, Kentucky wrote to the *Public Ledger* and commented: "The Secretary of the [ASHA, William Snow] warns girls that they should never kiss until they have placed over the mouth a piece of tissue paper that has been subjected to a bath in a sanitary solution. This, he says, will make kissing safe. But why all the trouble? If a girl will eat a large, healthy onion before the fellow calls she will not have any use for the sanitary tissue paper."⁹⁸ A Michigan newspaper reprinted the ASHA's "new recipe for kissing" and jokingly added: "Throwing kisses might be safer."⁹⁹ A Virginia newspaper thought the recipe was "just such cold comfort as might be expected from a man of that name."¹⁰⁰ The high-circulation national magazine *Collier's* seemed less inclined to see the humor, remarking "the doctor has failed humanity utterly" by providing such advice.¹⁰¹ Though the ASHA message reached a wide audience, that audience did not always agree with the ASHA's agenda.

As ASHA reformers solidified their platform at home and abroad, their commitment to eradicating venereal disease would draw attention from the federal government, newly tasked with raising a fighting force and worried about high rates of venereal infection. The shadow of war would give the ASHA a chance to shine the brilliant "light of scientific inquiry" across the world, dispelling taboos by grounding their observations in reason and the best science available.¹⁰² The highly adaptable nature of the organization would allow it to survive the

⁹⁸ "Luke McLuke Says," *The Public Ledger* (Maysville, KY), October 03, 1914.

⁹⁹ "New Recipe for Kissing," *The Owosso Times* (Owosso, MI), November 20, 1914, 6.

¹⁰⁰ "Chats with Virginia Editors," *The Times Dispatch* (Richmond, VA) (October 08, 1914), 6.

¹⁰¹ "Getting Real Civilized," *Collier's: The National Weekly*, October 24, 1914, 13.

¹⁰² "A History and A Forecast: The Story," 553.

changes wrought during its partnership with the federal government. When America entered the war in 1917, the American Social Hygiene Association brought years of international observations to their educational and legal efforts. The time spent crafting their identity in the pre-war years would allow the ASHA to take a formative role in crafting a new sexual health identity for all American citizens.

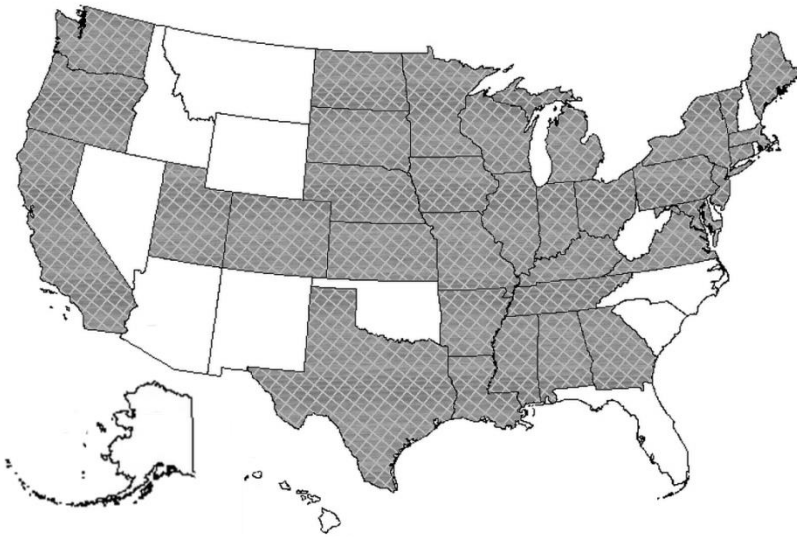


Figure 6: States in which ASHA reported social hygiene progress in the *American Social Hygiene Association Bulletin*, 1914.

Not included on map: Britain, Burma, & Germany.

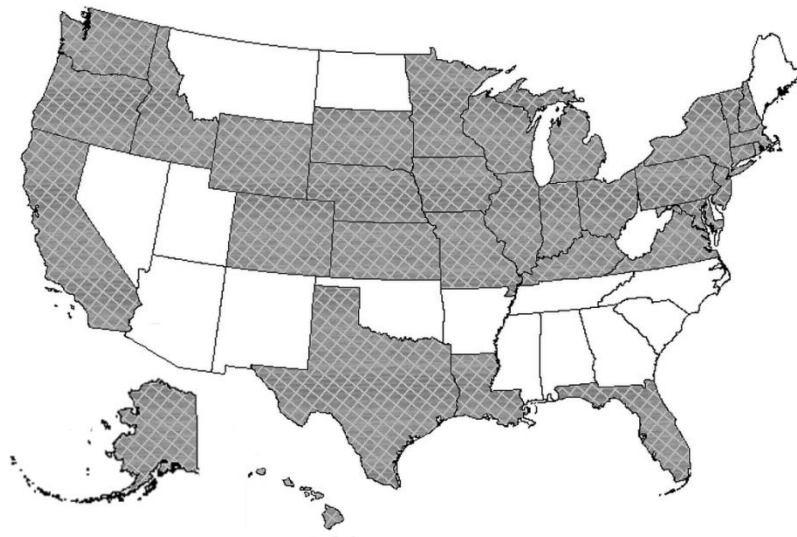


Figure 7: States in which the ASHA reported social hygiene progress in the *American Social Hygiene Association Bulletin*, 1915.

Not included on map: Australia, Austria, Britain, Burma, Canada, Chile, Germany, India, Netherlands, New Zealand, Peru, Puerto Rico, & Switzerland.

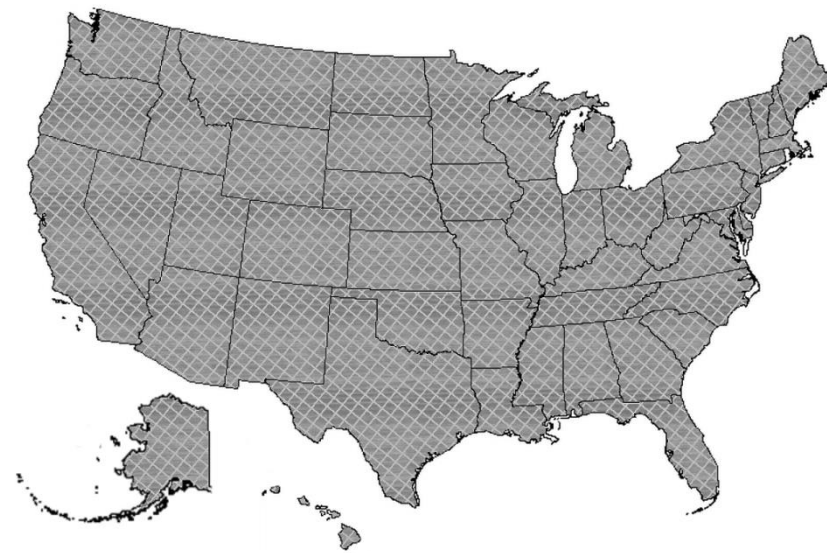


Figure 8: States in which the ASHA reported social hygiene progress in the *American Social Hygiene Association Bulletin*, 1916.

Not included on the map: Britain, Canada, France, Germany, & Japan

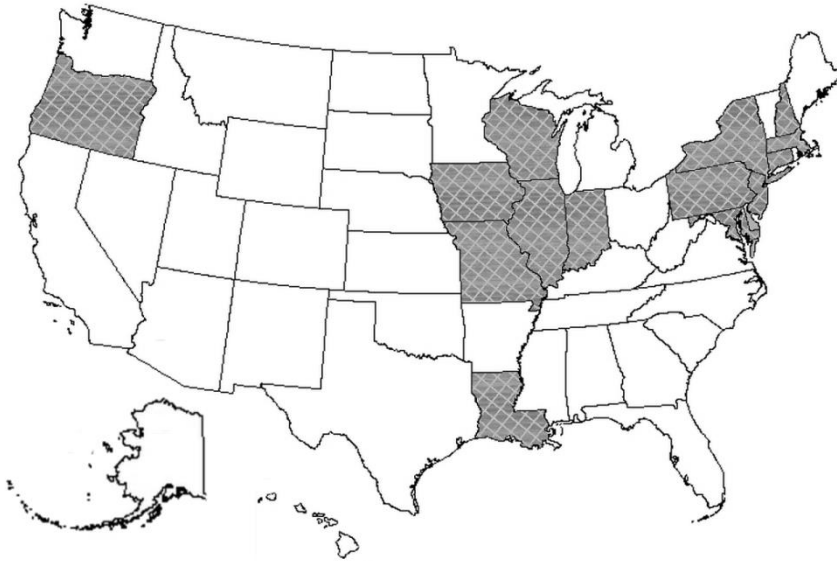


Figure 9: States producing new members for the ASHA, 1914.

International inductees not shown: Canada.

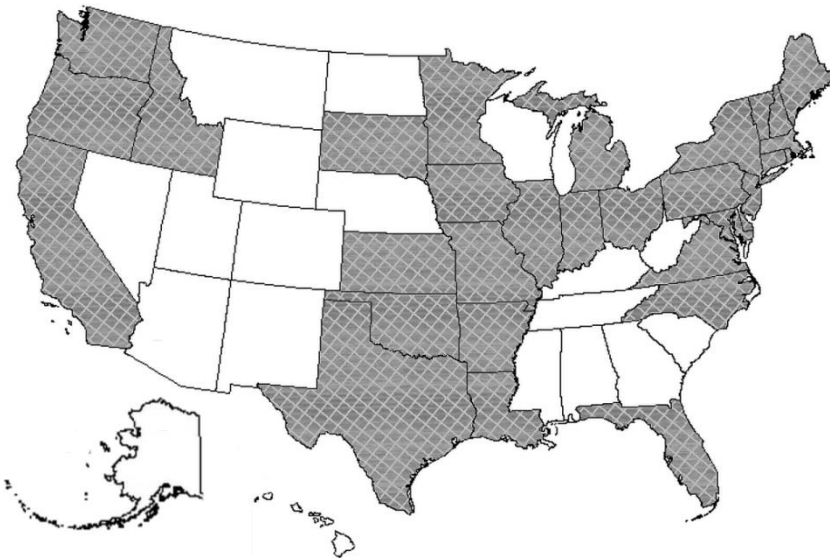


Figure 10: States producing new members for the ASHA, 1915.

International inductees not shown: Brazil, Canada, France, & the Philippines.

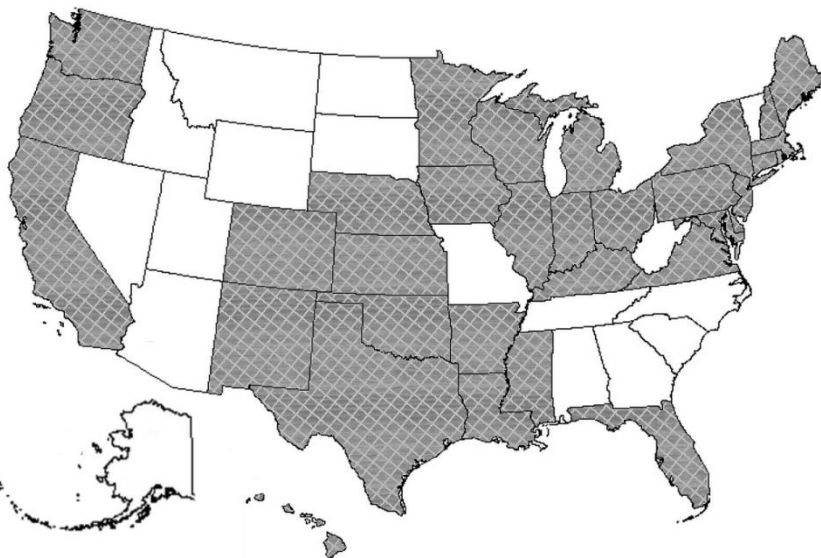


Figure 11: States producing new members for the ASHA, 1916.

International inductees now shown: New Zealand

“Keep Well So You Will Not Have To Get Well.”

Education, Enforcement, and the Sexual Health Ideology of the ASHA

In 1915, an educator attempted to teach a group of New York City settlement house boys the facts of life. She found them unruly, disinclined to listen, and prone to striking matches on the undersides of their chairs because they seemed to like the noise. Resolved to capture their attention, the educator came to the next lesson with “two-guinea pigs that seemed to have the loudest squeals and best variety of noises I had yet found.”¹ The young boys had never seen a guinea-pig before. Their attention snared, educator Laura Garrett used animals to teach principles of biology. Her eager pupils brought a cat to the next lesson and, when given the opportunity, plied their teacher with questions. Garrett proudly reported: “Plain questions were asked and each question was answered scientifically and with the fullest social significance.”² The effort to educate the young New Yorkers had, in this instance, succeeded.

In the same year, the County Medical Society and the State Department of Labor partnered to eradicate the influence of quack doctors, a class of medical officer who peddled fake venereal disease cures to unwary and uneducated citizens. In 1914, a Committee of the New York Board of Alderman approved an ordinance “designed to eliminate dishonest advertising from newspapers, billboards, signs, and other advertising devices.”³ Their efforts at a state-wide ban had not yet succeeded, but in April of 1915 officials arrested fifty-four quacks and “over a dozen medical institutes, museums of anatomy, and the like were closed.”⁴ Additionally, tin signs were placed in the restrooms of saloons and other public places. They read: “VENEREAL

¹ Laura B. Garrett, “How Shall We Teach?” *Journal of Social Hygiene* 1, No. 2 (March 1915), 265

² Garrett, “How Shall We Teach?” 265.

³ “What Medicine and Religion are doing for Social Hygiene,” *American Social Hygiene Association Bulletin* 1, No. 1 (April 1914), 3.

⁴ “Bulletin Notes,” *American Social Hygiene Association Bulletin* 2, No. 3 (June 1916), 3.

DISEASES. Confidential advice regarding gonorrhoea, syphilis and sex diseases, can be obtained free...Sundays and holidays excepted. AVOID advertising specialists and patent medicines.”⁵ Efforts to remove false advertisements and replace them with accurate information continued throughout the year.

From its headquarters at 105 W. 40th Street, the ASHA oversaw both the education efforts of Laura Garrett and the anti-quack efforts of partnered agencies.⁶ Though centered in New York City, the ASHA noted that similar reform concerns crossed the length and breadth of the country. To address those concerns, the ASHA developed two major strains of reform tactics; they advocated extensive education efforts and legal reforms. Oftentimes the two types of reform blended together. Men and women of all professions moved between the two campaigns, though individuals expressed a preference for one tactic over the other. The ASHA understood that to be successful they would need to fight a multi-front war, and their quasi-military efficiency led to reform agendas easily adopted by partner organizations and—in 1917—by the American military.

The ASHA educational reforms included pamphlets and exhibits. In their effort to reach ever larger audiences, they developed foreign language efforts directed at non-English speaking populations in America and abroad. Armed with a carefully crafted image of medical professionalism, they continued efforts to dispel the taboo surrounding sex education and venereal disease. The ASHA often developed their educational materials to gender specific audiences in an effort to encourage gender specific behaviors. Ideals of continence before marriage, familial loyalty, and sexual health pervaded materials for both genders. All of the

⁵ Archibald McNeil, M.D. and B.S. Barringer, M.D., “Diagnosis and Advice in Venereal Diseases As Furnished By the Department of Health, New York City,” *Journal of Social Hygiene* 1, Vol. 1 (April 1914), 56.

⁶ “Posted by Order of the Health Department” (Box 170, Folder 03), American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

efforts ultimately contributed to a massive sexual health campaign. “Publicity, propaganda, call it what you will—we must have it today; selling soap or social hygiene, it matters little,” one ASHA contributor commented.⁷ The links between education and reform could not remain tentative in the public imagination, and the ASHA searched eagerly for ways to create a unified image for their anti-venereal campaign.

Eugenics, with its focus on specific gender roles for the propagation of the fit, often provided the intellectual link between legal and educational efforts. ASHA reformers considered eugenics from two perspectives. The first, which they considered “positive” eugenics, hoped to promote the fittest in society to have children in the most efficient and healthy manner. The second, which might be called “negative” eugenics, sought to eliminate reproduction amongst the unfit. The ASHA agreed the state could and should implement policies such as medical quarantine and health certificates before marriage. “To such an extent the interference of the state will be generally welcomed,” one reformer commented. “But we must recognize at the start that the influence of that interference at the very best can accomplish but little.” It would be better, the ASHA believed, to focus on “positive” eugenics via educational campaigns which “should lead the youth to adopt a regime of hygiene that would develop in him the highest possible degree of physical and mental efficiency.”⁸ That efficiency, according to the ASHA, would benefit both society and the race.

The ASHA approach to sex education often included many eugenic strains of thought; their use of animals and direct comparisons to animal husbandry suggested a similar model could be followed to effect change in human populations. “The animal and plant breeders...direct

⁷ Publications. Pamphlets. Zinsser, William H., "Social Hygiene and the War, Fighting Venereal Diseases a Public Trust." (Box 170, Folder 08), 516.

⁸ Winfield Scott Hall, “The Relation of Education in Sex to Race Betterment,” *Journal of Social Hygiene* 1, No. 1 (April 1914), 68.

heredity here and there as they please... They do their selecting artificially and consciously, and by doing it drastically as well, they speed up evolution to a rate quite extraordinary.”⁹ The ASHA believed the same principles could be applied to human populations, and thus they focused on using animals and the story of animal husbandry to advance their message. Images of plants and trees—familiar eugenic symbols—also appeared frequently in ASHA lessons on sexual health, and educators used them in the same way they used images of animals. They encouraged children to make “a careful study of inheritance so that...they will be quite ready to study the awful consequences of the racial poisons.”¹⁰ The most prevalent and dangerous poisons, according to the ASHA, were venereal diseases.

A significant portion of the ASHA agenda included teaching children how to avoid venereal diseases, but it also included teaching them how to pick a partner whose family tree was free of hereditary dangers. The ASHA encouraged women to ask their partners if there was any insanity, “feeble-mindedness,” or criminality in three generations of their family on either the father or the mother’s side. Some critics asked if such practices would “destroy sentimentality and old-time love.” The ASHA educators agreed and suggested, “It is to be hoped that instruction in eugenics will destroy that sentimentalism which leads a woman deliberately to marry a man who is absolutely unworthy of her and can only bring disease, degradation, and death.”¹¹ The ASHA’s eugenic ideal required teaching children to find good partners, and if the necessary sacrifice included the sentimentalism of a bygone era, it should be abandoned alongside the taboos surrounding sex.

⁹ Vernon L. Kellog, “The Bionomics of War,” *Journal of Social Hygiene* 1, No. 1 (April 1914), 44.

¹⁰ “How Shall We Teach?” *Journal of Social Hygiene* 1, No. 2 (March 1915), 258, 260.

¹¹ Hall, “The Relations of Education in Sex to Race Betterment,” 79.

As they advocated the abandonment of foolhardy romance, the ASHA simultaneously encouraged young men to adopt a code of behavior which called upon a mythic tradition of chivalry. The ASHA attempted to instill an ideal of continence amongst men similar to the one expected of young women. To do so, they suggested that men “instinctively...acquire a code of honor inherited from days of chivalry: the honor of woman and a square deal among men.”¹² To encourage continence, the ASHA drew parallels between gladiators and the clergy, suggesting that both of those eminently respectable professions required continence.¹³ “The sexual power is never lost through abstinence from sexual intercourse, any more than the ability to weep is lost through abstinence from weeping,” the ASHA affirmed.¹⁴ This code of chivalry required the abandonment of nineteenth-century sexual mores, which suggested men needed to exercise their sexual appetite or risk impotency.¹⁵

While the ASHA encouraged young men to adopt ideas of chivalry and continence, it exhorted young women to act as a moral compass for society by refusing to participate in immoral behaviors. Most agreed that chivalry from men was women’s social due. The ASHA literature encouraged women to form partnerships based on respect and love, since “life offers no substitute for the devotion and understanding of husband and wife.”¹⁶ Love, however, necessitated knowing a good match and selecting a suitable husband based on hereditary rather than “maudlin so-called love” which encouraged women to marry unfit mates.¹⁷ Though much of

¹² *Ibid.*, 76.

¹³ “The Honor Legion” (Box 170, Folder 12), American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

¹⁴ “Keep in Fighting Trim,” 2 (Box 170, Folder 06), American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

¹⁵ For more on sexual mores of the nineteenth-century, see Anne Butler, *Daughters of Joy, Sisters of Misery* (Urbana, IL: University of Illinois Press, 1985).

¹⁶ “Social Hygiene Home and Community” (Box 170, Folder 02), 12. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

¹⁷ Hall, “The Relations of Education in Sex to Race Betterment,” 79.

the literature stressed women's fundamental role in sex hygiene and racial purity, one female reformer resentfully criticized "the assumption of inferiority to man...so that whatever comes to her comes as the result of his generosity and gallantry rather than because of her personal right."¹⁸ Female reformers challenged not only the double standard of sexuality, but also other assumptions regarding the roles of women. The tension between the rights of women and men remained a point of contention for many reformers struggling to grapple with sexual health and morality.

Even though much of the educational programming of the ASHA was gender specific, reformers affirmed that there should be no double standard of morality. One educator observed, "The greater part of the characters of men and women are not male and female, but simply human. The principles of hygiene are fundamentally the same for both."¹⁹ ASHA educators in the Young Women's Christian Association (YWCA) and Young Men's Christian Association (YMCA) both stressed the biological health imperatives to remaining sexually healthy. The YWCA literature, however, pointed out "small assurance of safety could be assumed from instruction given to girls so long as boys and men were at liberty to regard them as legitimate spoils."²⁰ In pointing out the sexual double standard, ASHA educators did not hope to inspire sexual freedom amongst women; rather, they hoped continence outside of marriage would become a shared code of behavior for both men and women.

Though the ASHA encouraged frank discussions of sex, they did not encourage sexual exploration or experimentation. In fact, they discouraged sex outside of marriage relations

¹⁸ Florence M. Fitch, "What Are Our Social Standards?" *Journal of Social Hygiene* 1, No. 4 (September 1915), 550.

¹⁹ "Review of *Health, Strength, and Happiness*" *Journal of Social Hygiene* 1, No. 2 (March 1915), 297.

²⁰ George J. Fisher, "Sex Education in the Young Men's Christian Association," *Journal of Social Hygiene* 1, No. 2 (March 1915), 229; Anna Brown, "Sex Education in the Young Women's Christian Association," *Journal of Social Hygiene* 1, No. 4 (September 1915), 583.

and—if their eugenic principles are to be believed—encouraged sex for procreative purposes only, because “the beginning of new life...is the most glorious service which the love of man and woman performs for the world.”²¹ ASHA reformers consistently damned practices of “self-abuse” amongst young women and men alike.²² Masturbation led to immorality just as surely as engaging in illicit sex with prostitutes or disease carriers. Though the ASHA did not explicitly detail what a healthy sexual relationship looked like, they clearly and coherently outlined behaviors that would contribute to poor sexual health, such as masturbation and sex outside of marriage.

The ASHA approach to education prided itself on accessibility and on effectiveness. Reformers recognized “if the school is uninteresting, monotonous, its methods mechanical, its atmosphere, dull and lifeless, then its influence can be probably on the whole more pernicious than any other.”²³ Yet in their efforts to find a way to entertain and engage their audiences, the ASHA struggled to determine whether their role should supplant the role of the family in educating children about sex. Robert Michels opined in *Sexual Ethics; a Study of Borderland Questions*: “The greatest difficulty of all in connection with the work of sexual enlightenment concerns not the children but the adults, the teachers not the taught.”²⁴ The ASHA believed parents should teach their children the principles of sex, but unfortunately it seemed many parents needed to learn the lessons before they could effectively pass along the information to their children.

²¹ Donald B. and Eunice B. Armstrong, “Sex in Life,” *Journal of Social Hygiene* 2, No. 3 (July 1916), 340.

²² Ulrich, Mabel S. “Mothers of America” (Box 170, Folder 9); American Social Health Association Records, 1905-1990 (SW 45). University of Minnesota Libraries, Social Welfare History Archives; Bellfield, William, “Sexual Hygiene for Young Men.” (Box 170, Folder 02). American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

²³ Stanley Hall, “Education and the Social Hygiene Movement,” *Journal of Social Hygiene* 1, No. 1 (April 1914), 35.

²⁴ “What Shall We Read?” *Journal of Social Hygiene* 1, No 1 (April 1914), 138.

To provide parents and community members with the necessary tools for teaching sex, the ASHA spent a considerable amount of time and effort creating lists of approved reading materials.²⁵ In doing so, they also determined which materials were inappropriate, contributing to the same debates over censorship they had experienced when earning their legitimacy. They devoted an entire section of the *Journal of Social Hygiene (JSH)* to book reviews and lists of materials recently added to the ASHA library. They also hoped the lists would prove useful to libraries across the country, and so they invented a system of classification which would help determine the appropriateness of materials. Some books they approved for open shelves, some required the supervision of librarians, and reformers recommended others be read by parents. Others still “should be disapproved as not desirable for use in a library.”²⁶ The need to prohibit some reading materials underscored that, while the ASHA approved of sex education, they did so only under specific circumstances, often favoring the presence or oversight of a professional to avoid spreading any immoral ideas.

Much as the ASHA had discouraged all superstitions and taboos surrounding sex, they struggled to eliminate metaphor from sex education. Parents should be able to teach sex hygiene “without introducing absurd stories of ‘the stork’ or ‘the doctor’s satchel,’” observed a high school biology teacher from New York City.²⁷ One illustration criticized parents for rewarding the curiosity of a child with lies. “He asks about and learns the laws of Fire and of

²⁵ Such as the “List of Reliable Pamphlets” (Box 170, Folder 01). American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

²⁶ “What Shall We Read?” *Journal of Social Hygiene* 1, No. 1 (April 1914), 111.

²⁷ James E. Peabody, “Sex Education in the Home and High School,” *Journal of Social Hygiene* 2, No. 3 (July 1916), 363.

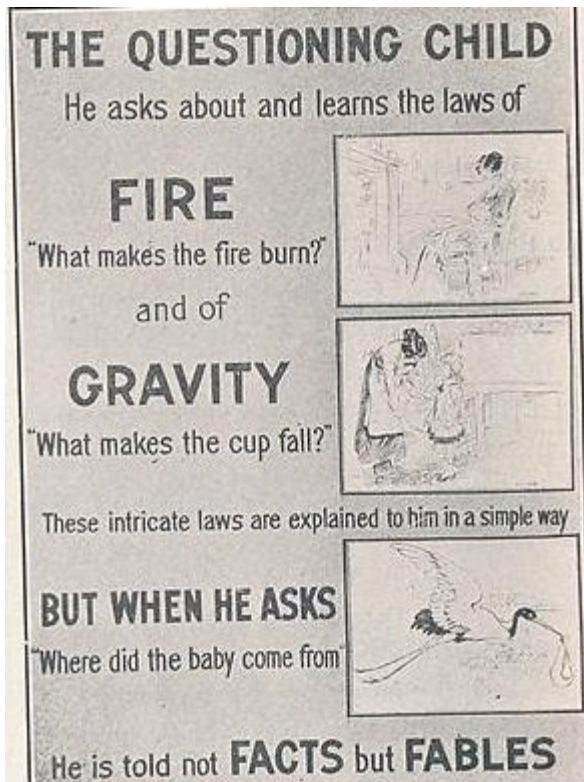


Figure 1: This ASHA publication asked parents to teach their children the fundamentals of sex hygiene in the same way they would teach other science lessons. "Social Hygiene Home and Community" (Box 170, Folder 02), 28. American Social Health Association Records, 1905-1990 (SW 45). University of Minnesota Libraries, Social Welfare History Archives.

Gravity... These intricate laws are explained to him in a simple way," the image read. "But when he asks Where did the baby come from he is told not FACTS but FABLES" (see figure 1).²⁸ Far better, the teacher asserted, to use the principles of biology to explain sex to children. One of the ASHA's most popular publications became Mrs. Bertha C. Cady's *The Way Life Begins*, a small book whose early printings totaled over 25,000 copies.²⁹ Each chapter focused on a different type of animal, underscoring "nature study" as a way of understanding sex hygiene. In addition, the ASHA continued its mission of spreading what they considered the light of reason. Educator

Grace Ellis explained, "When lectures are given indoors I never use lantern slides for the following reasons: first, there has been too much whispering in the dark about this subject, and the more light we have—physical, mental, and moral—the better."³⁰ ASHA educators consistently suggested that parents use animals and plants as reasonable, science-based explanatory examples for sex and inheritance.

²⁸ "Social Hygiene Home and Community" (Box 170, Folder 02), 28. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

²⁹ Bertha C. and Vernon M. Cady, "The Way Life Begins," 1917 (Box 170, Folder 05). American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

³⁰ Grace Ellis, "How Shall We Teach?" *The Journal of Social Hygiene* 1, No. 2 (March 1915), 260.

Frustratingly for the ASHA and other educators, parents seemed unwilling to teach their children the basics of sex hygiene. The biology teacher from New York City polled several of his male students and was appalled to find that over 78% had received no instruction from their fathers. While several had heard lectures from the YMCA or similar organizations, still more based their education on “jokes and stories told on the street,” from which they received “only the dirty and evil side.”³¹ When a female instructor polled female students, she reported similar percentages. Interestingly, many of the female students reported taking the lessons home to their mothers.³² Though ASHA educators preferred parents to provide the fundamentals of sex education in the home, in some cases school children carried the messages back home to their parents and became educators as well as the educated.

It may have been the case that many of the students’ parents lacked the education necessary to teach sex hygiene to their children. The ASHA recognized that a large part of their target audience resided in immigrant communities whose first language may not be English. “If the talks can be given to the foreign mothers in their own language there is a greater likelihood of complete understanding,” one ASHA reformer encouraged. ASHA reformers recognized the danger presented by such a large language gap between children and parents; growing up in such a home often led to a life of immorality because the experiences of one generation and the next were so radically different.³³ The ASHA struggled to decide when and where the hand of educators should supplant that of parents, especially in cases where the parents proved incapable of teaching in accordance with ASHA principles.

³¹ James E. Peabody, “Sex Education in the Home and High School,” *Journal of Social Hygiene* 2, No. 3 (July 1916), 368.

³² *Ibid.*, 368, 372.

³³ Maude Miner, “Report of Committee on Social Hygiene,” *Journal of Social Hygiene* 1, No. 1 (April 1914), 82.

The ASHA educational programs demanded a certain degree of flexibility because their target audience was broad and far-reaching. The *Honolulu Star* complimented ASHA programming on the island and pointed out that “every school i[n] Hawaii is constantly confronted, directly or indirectly, with the problems of sexual immorality, venereal diseases and their results, and the abuses which arise from the lack of sex education.”³⁴ George Kneeland, an ASHA lecturer, discussed the origins of criminality amongst young women. His presentations fascinated women’s groups from Bisbee, Arizona to Salem, Oregon and Keytesville, Missouri.³⁵ Though in many ways teaching the necessary fundamentals of sex hygiene was an end in and of itself, the ASHA faced the challenge of reprimanding those who still insisted on endangering their own sexual health and the sexual health of their communities. Legal reform provided the opportunity to police as well as educate.

The influence of many ASHA officials did not extend comfortably into the realm of law, however, and so many reformers believed education should take precedence over legal reforms. ASHA members came primarily from medical and professional backgrounds rather than backgrounds in traditional law enforcement. Their influence stretched farther into the realm of education than it did in matters of law. Dr. Winfield Scott Hall observed that medical quarantine and the denial of marriage licenses to venereal disease carriers represented moments where “the interference of the state will be generally welcome.” He hastened to add: “But we must recognize at the start that the influence of that interference at the very best can accomplish but little...positive hygiene and positive eugenics can be brought about in the human race only

³⁴ Vaughan MacCaughey, “Educational News of Special Interest to Teachers in Hawaii,” *Honolulu Star-Bulletin* (November 24, 1917, 3:30 Edition), 12.

³⁵ “Tells Club Women They Have Work to Do in Own Circles,” *Bisbee Daily Review* [Bisbee, AZ] (June 17, 1914), 1; “Vice Investigator Arouses Club Women by Declaring Society Girls are Immoral,” *Daily Capital Journal* [Salem, OR] (June 17, 1914), 1; “Vice Not All Ignorance,” *Chariton Courier* [Keytesville, MO] (June 26, 1914), 2.

through education.”³⁶ The stress on education allowed eugenicists to foreground their message in the ASHA rhetoric rather than focusing on law.

Despite the pervasive belief that legal reforms could accomplish their aims only in conjunction with educational efforts, ASHA reformers supported a wide bevy of new laws and legislation. They endorsed anti-quack legislation which targeted advertisers selling fake cures for venereal diseases. In an effort to shut down organized vice, reformers created abatement laws to target property holders in addition to brothel keepers and prostitutes. Recognizing the need for preventative training as well as reactionary policies, the ASHA championed mandatory reporting laws which required physicians to keep records of those infected with venereal disease in an effort to check their spread. The ASHA partnered with state and local government boards to achieve its varied agenda, creating a system of support that paralleled its educational apparatus.

The ASHA endorsement of abatement laws uniquely empowered individual citizens to bring case against bawdy houses and brothels, reflecting a “new conception of the interest of individual citizens in the public welfare.” Rather than rely on law enforcement officials, private citizens could bring suit against red-light district businesses as a nuisance. If the court ruled the institution a nuisance, a judge could issue a “permanent injunction perpetually restraining all parties from continuing the nuisance.”³⁷ The ASHA embraced Iowa’s abatement law, passed in 1909, as a model. Several states adopted similar legislation under the ASHA’s guidance including Maryland, Nebraska, and the District of Columbia.³⁸ Using abatement laws, private

³⁶ Hall, “The Relations of Education in Sex to Race Betterment,” 69.

³⁷ Bascom Johnson, “The Injunction and Abatement Law,” *Journal of Social Hygiene* 1, No. 2 (March 1915), 230-233.

³⁸ “Resume of Legislation Upon Matters Relation to Social Hygiene Considered by the Various States During 1914,” *Journal of Social Hygiene* 1, No. 1 (April 1914), 95; “Law Notes,” *American Social Hygiene Association Bulletin* 2, No. 3 (June 1915), 4.

citizens—or ASHA reformers—could now take primary responsibility for closing brothels and saloons rather than relying on police power.

Many of the ASHA reformers came from legal backgrounds; some were professional social workers employed by protective agencies, probation boards, and prison systems. Their familiarity with institutionalized vice often came from firsthand experience working in communities. Early social work professionals were often women, and their observations stressed sympathetic solutions other than incarceration. Lawyers and doctors, on the other hand, were mostly men, and their observations were more inclined to punitive measures. Social workers in particular thus tended to look for environmental causes for prostitution. One observer noted the lack of education for young girls. Of 45,591 employment certificates issued in one year, “over twenty-four thousand...were to pupils who had not completed the elementary school course.” Harold Begbie, author of *The Crisis of Morals*, wrote “Where women...are despised, it is useless to pray to God...Educational conditions which slight her mind, industrial conditions which exploit her body, and social conditions which destroy her soul are all responsible for our lack of social health and happiness...All social progress leans upon this alteration of man’s attitude towards woman.”³⁹ That attitude, Begbie hinted, involved more than just the moral codes between sexes, but also stressed the social realities women faced when attempting to support themselves. This gender dynamic is not clear-cut; many women also believed in harsh treatment for venereal disease carriers, and many men sympathized with prostitutes as much as vilified them.⁴⁰

³⁹ “What Shall We Read?” *Journal of Social Hygiene* 1, No 1 (April 1914), 122, 127.

⁴⁰ For more on gender dynamics in the professions, see Penina Migdal Glazer and Miriam Slater, *Unequal Colleagues: the Entrance of Women into the Professions 1891-1940* (New Brunswick, NJ: Rutgers University Press, 1987); Daniel J. Walkowitz “The Making of a Feminine Professional Identity: Social Workers in the 1920s.” *The American Historical Review* (1990): 1051-1075.

During its earliest years, much of the ASHA educational and legal reforms refused to vilify prostitutes and venereal disease carriers, perhaps because social workers flooded the publications with stories of individual women and vice campaigns. M.J. Exner commented, “Young men are often all too ready to forget that the less fortunate girl with whom he enters into immoral relations is somebody’s sister and daughter. The fact that a girl has been unfortunate enough to fall...does not remove from him in the least degree his obligations to respect in her the rights of all womanhood.”⁴¹ The stress on male patrons of prostitutes represented an important aspect of the legal battle; while educational tactics had long decried the double standard of morality, laws had rarely targeted the very men whose demands created a market for prostitution.

Some ASHA reformers suggested laws that would target male customers of vice districts as well as the women sex workers. “Every state should have on its statute books laws which make it possible to reach the procurer and the male who lives on the earnings of prostitution,” Maude Miner opined. She pointed to the Mann Act—which prohibited the trafficking of women across state lines for immoral purposes—as a good start, but inapplicable to state or local issues. “Why should it be a crime for a person to keep a resort, for a woman to be an inmate of the resort, and yet not an offense for a man to frequent a resort?” she asked.⁴² Miner’s opinion represented an important point of tension amongst reformers. Some believed “the problem of self-control is for the most part more difficult for men than it is for most women,” an opinion which implicitly shifted the blame for sexual immorality away from male behavior.⁴³ The legal codification of that bias which excused men’s bad behavior frustrated many reformers.

⁴¹ Exner, Max J., "Friend or Enemy? To the Men of the Army and Navy" (Box 170, Folder 03), 13. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

⁴² Maude Miner, "Report of Committee on Social Hygiene," JSH 1, No. 1 (April 1914), 83-84.

⁴³ Exner, Max J., "Friend or Enemy? To the Men of the Army and Navy," 13.

Another method of targeting male criminals was in changing age of consent laws. By endorsing such laws, the ASHA hoped not only to target procurers of women for red-light districts but also those who preyed upon children. The ASHA pointed out the innocence of children and the dangers of their being exposed to the malicious ravages of venereal disease and sexual immorality. “There came to mind the case of a little girl...who was brought into Court after she had strangled her newly born baby of which one of the lodgers had been the father. Yes, and the case of another child who had contracted an incurable disease from one of the lodgers that her family had been forced to harbor to help in meeting the monthly rent.”⁴⁴ In Georgia, Florida, and North Carolina the age of consent was 10 years old in 1916. Changing age of consent laws would allow police officials to prosecute those who would take advantage of young girls particularly.⁴⁵

Not all reformers, however, found the plight of prostitutes and venereal disease carriers pitiable. One eugenicist questioned the intervention of social reformers in the lives of “the lowest social class.” When contemplating the high infant mortality rate, the eugenicist cautioned against surrendering to sociologists’ “appeals to humanity and child-love.” Instead, the energies of reformers should be devoted to the most deserving groups of individuals, those most likely to propagate and produce fit members of the white race. The eugenicist noted, “the daughters of prostitutes have hardly one chance in two of reacting otherwise than their mothers....If we have greater power to prevent it (death) than ever before, so much the greater is our responsibility to use that power SELECTIVELY, for the survival of the best stock; more than those who are

⁴⁴ “What Shall We Read?” *Journal of Social Hygiene* 1, No 1 (April 1914), 124.

⁴⁵ For more on legal reform and exploitation of young women, see Stephen Robertson, “Age of Consent Law and the Making of Modern Childhood in New York City, 1886-1921,” in the *Journal of Social History*, Vol. 35, No. 4 (Summer 2002), 781-798; Mary Odem, *Delinquent Daughters: Protest and Policing Adolescent Female Sexuality in the United States, 1885-1920* (Chapel Hill: The University of North Carolina, 1995).

feeble-minded and without moral control."⁴⁶ In attempting to determine who was worthy of assistance, some felt that prostitutes and venereal disease carriers were beyond the pale of reform.

Though reformers struggled to agree on the issue of reforming career prostitutes, one of the major ASHA targets of legal reform became the destruction of the red-light district and organized prostitution. The ASHA advocated outright abatement of red-light districts, refusing to tolerate previously held conceptions about the success of segregation as a method of controlling vice. Some staunch segregationist reformers declared disbanding districts would only scatter vice throughout the town, meaning less oversight from officials and an overall lowering of moral standards in the city. The ASHA authoritatively declared:

Segregation had really never segregated. Regulation and medical inspection proved to be failures, and the district the most virulent source of venereal infection. The district enabled vice to organize on a vast scale...and provided a source of sexual brutalization and degeneracy. Segregation corrupted the police force, stimulated the illegal sale of liquor, increased crime and debauchery, and fostered sexual perversion.⁴⁷

As if the example of American vice districts were not enough to stress the failings of segregation, reformers often pointed to the failure of European regulations as well. In the nineteenth-century England had attempted to register its prostitutes under the Contagious Diseases Acts, providing medical examinations to ensure they were free of venereal disease. The effort turned out to be a magnificent failure; some reformers suggested medical examinations spread venereal disease rather than prevented it, as doctors used unclean tools and prostitutes

⁴⁶ "What Shall We Read?" *Journal of Social Hygiene* 1, No 1 (April 1914), 142.

⁴⁷ Joseph Mayer, "The Passing of the Red Light District—Vice Investigations and Results," *Journal of Social Hygiene* 4, No. 2 (April 1918), 198.

struggled to hide their illnesses. Others pointed out the unenforceable nature of the law.⁴⁸ ASHA reformers refused to consider a similar plan for American vice districts.

When advocating legal change, the ASHA often underscored the failures of the current system before suggesting a wide implementation of new laws and regulations. “Lack of support of public opinion is the greatest difficulty in enforcing laws,” Maude Miner wrote. “When officers do not feel that the public favors law enforcement they do not take steps to enforce the law.”⁴⁹ To combat the apathy of law enforcement officials—and their flagrant corruption or willingness to take bribes—Miner suggested choosing officers for their “honesty and integrity.” She also advocated an increase in the salary of police officers “so that temptation may be lessened and a reasonable standard of living made possible.” Miner also advocated the creation of female police officers to care for female lawbreakers, at least partially because she believed women could take better care of women, but also because male police officers had a reputation for excusing vice or exploiting it for personal gain.⁵⁰

Much as they provided educational tools to parents, ASHA reformers offered guidelines for how a city should approach eliminating its vice district. In 1914, municipal officials of Richmond, VA invited five ASHA reformers into the city. The city council provided \$1,000 for ASHA experts to train law enforcement officials and reformers in the city. The mayor said, “The problem has to do with an evil which is old as history itself, and which has puzzled the world for a solution from the beginning of history.”⁵¹ To combat the evil, Richmond created a Committee of Fifteen similar to those chartered in New York and Chicago. The citizen led board

⁴⁸ For more on the Contagious Diseases Act, see Judith Walkowitz, *Prostitution and Victorian Society: Women, Class, and the State* (New York: Cambridge University Press, 1982).

⁴⁹ Maude Miner, “Report of Committee on Social Hygiene,” *Journal of Social Hygiene* 1, No. 1 (April 1914), 87.

⁵⁰ For more on Maude Miner, see Maude Miner, *Slavery of Prostitution: A Plea for Emancipation* (New York, NY: The Macmillan Company, 1916); Maude Miner [Hadden], *Quest for Peace: Personal and Political* (Washington, D.C: Farrar Publishing Company, 1968).

⁵¹ “Advises Closing of Vice District,” *Richmond Times-Dispatch* (February 06, 1915), 3.

investigated vice conditions in the city in partnership with the ASHA investigators. Their ultimate recommendation involved founding a “morals squad” and closing the segregated vice district for good. By providing its expertise to cities across the nation, the ASHA touted its plan of vice suppression as the most effective, a tactic reinforced by press coverage.

In an effort to enforce the ideals of continence amongst non-married individuals, the ASHA undertook massive efforts to police public spaces where hetero-social interaction took place. The influx of women into the workplace had changed the urban landscape irrevocably; new areas of leisure such as amusement parks and dance halls sprung up in order to accommodate a flourishing youth culture. Women, chronically underpaid, relied on men to purchase admission to entertainment; women occasionally repaid men with sexual favors. This culture of “treating” worried ASHA reformers. To combat such practices, the ASHA favored the creation of new police forces whose officers would include women specially trained to patrol areas of public amusement.⁵²

The ASHA also encouraged states to adopt minimum wage laws in an effort to curb the culture of “treating.” Montana became one of the first state to pass an equal pay act in 1919, but many states struggled to implement even the most basic minimum wage policies for women. The ASHA reported the failure of Maryland to pass a wage commission law designed specifically to protect women workers. The proposed law read: “If, after investigation, the commission is of the opinion that the wages paid to women or minors in any industry are inadequate to maintain the worker in decency and moral well-being, the commission shall establish a wage board which

⁵² For more on the changing sexual mores and courtship practices of the early twentieth century, see Kathy Peiss, *Cheap Amusements: Working Women and Leisure in Turn-of-the-Century New York* (Philadelphia: Temple University Press, 1986); Elizabeth Alice Clement, *Love for Sale: Courting, Treating, and Prostitution in New York City, 1900-1945* (Chapel Hill: The University of North Carolina Press, 2006); Beth Bailey, *From Front Porch to Back Seat: Courtship in Twentieth-Century America* (Baltimore, MD: Johns Hopkins University Press, 2013).

shall fix the minimum wage for this industry.”⁵³ The criticism of low wages was not limited to social workers. Noted anarchist Emma Goldman wrote: “Nowhere is woman treated according to the merit of her work, but rather as a sex...it is merely a question of degree whether she sells herself to one man, in or out of marriage, or to many men.”⁵⁴ The failure of protective laws frustrated social workers particularly, many of whom saw low wages as the primary reason women turned to a life of prostitution.

Not all laws earned ASHA approval. Though they eagerly supported many legal reforms, the ASHA proved just as eager to decry legislation which would prove detrimental to anti-venereal and anti-vice campaigns. New Jersey attempted to pass a law “prohibiting the teaching of sex hygiene or sexology, and the distribution of any books or pamphlets in which such subjects are treated or discussed,” but it failed in the state Senate, much to the ASHA’s delight.⁵⁵ The ASHA also berated any effort to establish regulated prostitution. The municipal recognition of the infamous Storyville red-light district in New Orleans infuriated the ASHA, and they eagerly encouraged women’s groups and vice commissions to speak out against the largest vice district in the nation, one with over six hundred female residents and a “blue book” advertising available services.⁵⁶

Though professionals championed both the educational and legal reforms, ASHA medical professionals seemed uniquely poised to combine the two elements into one type of anti-

⁵³ “Resume of Legislation Upon Matters Relation to Social Hygiene Considered by the Various States During 1914,” *Journal of Social Hygiene* 1, No. 1 (April 1914), 96.

⁵⁴ Emma Goldman, “The Traffic in Women,” in *Anarchism and Other Essays* (New York, NY: Dover Publications, 1969), 179.

⁵⁵ “Resume of Legislation Upon Matters Relation to Social Hygiene Considered by the Various States During 1914,” *Journal of Social Hygiene* 1, No. 1 (April 1914), 97-98.

⁵⁶ “Laws and Their Enforcement,” *American Social Hygiene Association Bulletin* 1, No. 4 (July 1914), 4; “New Orleans Acts Against Segregation,” *American Social Hygiene Association Bulletin* 4, No. 2 (February 1917), 6. For more on Storyville, see Emily Epstein Landau, *Spectacular Wickedness: Sex Race, and Memory in Storyville, New Orleans* (Baton Rouge: Louisiana State University Press, 2013).

venereal campaign. One ASHA pamphlet boldly declared, “If the moralist is so little protection, let him stand aside. Here is business for the health officer.”⁵⁷ Doctors employed educational techniques as a matter of preventative care while simultaneously endorsing legal reforms to protect individuals and the community from those who had already contracted venereal diseases. Though many of the clinics were free or low-cost in an effort to encourage individuals to seek treatment, officials also used the clinics as an alternative to jail. Judges could sentence women convicted of prostitution to medical care; in fact, Chicago often sent arrested women to the Iroquois hospital for venereal disease testing before they could be tried in court. One Chicago woman charged of running a “disorderly house” was arrested and “forced to submit to a blood test.” Despite the intervention of her attorney, the woman “screaming her protests, was examined.”⁵⁸ A judge dismissed the case the following day. The coercive, involuntary aspects of venereal disease clinics often infringed on the rights of individuals in an effort to protect the community.

The ASHA relied heavily on preventative health measures because the available medical treatments for venereal diseases remained ineffective. Despite the discovery of the syphilis germ in 1905, the creation of the Wasserman diagnosis test in 1907, and the patenting of medical Salvarsan in 1910, curing syphilis remained a challenge.⁵⁹ Salvarsan, also known as arsphenamine or “606,” required intravenous injections. Doctors unfamiliar with the process were unwilling to adopt it. A Public Health Bulletin observed “the question of death immediately following an injection of salvarsan,” noting with considerable pride that “in over

⁵⁷ Edward Keyes “Morals and Venereal Disease” (New York: The American Social Hygiene Association, 1916), 51. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

⁵⁸ “Women Seared, Then Freed, in Morals Court,” *The Chicago Tribune* (October 26, 1918), 15.

⁵⁹ Brandt, *No Magic Bullet*, 42.

2,500 intravenous injections we have not experienced any fatalities.” The pamphlet identified three causes for fatalities: poor post-injection treatment, pulmonary embolisms, and “epileptiform convulsions,” the explanation of which “is still in dispute.”⁶⁰ Some physicians remained skeptical of the treatment throughout the 1910s, preferring to apply mercury based cures to affected areas. The results were haphazard, and because the benefits of treatments remained unclear, the ASHA preferred preventative methods. “Keep Well So You Will Not Have To Get Well” remained the ASHA credo.⁶¹

The ASHA refused to let those already infected with venereal disease endanger their communities. To combat the spread of disease, they encouraged communities to set up municipal venereal disease clinics where syphilis and gonorrhea could be treated free of charge. The clinics served as an educational tool but also required the participation of state officials, often in the form of boards of public health. Many hospitals refused to admit patients suffering from either syphilis or gonorrhea. The ASHA suggested municipal venereal disease clinics and pharmaceutical dispensaries as an alternative. They also begged hospital officials to stop refusing patients based on an outmoded moral condemnation of individuals who contracted venereal diseases.⁶²

The free venereal disease clinics also served to advance and enforce the ASHA’s eugenic agenda. The ASHA encouraged states to pass mandatory blood testing laws before marriage so that no partner would unknowingly marry someone hiding a venereal disease. Several states—

⁶⁰ Stimpson, W.G. “Treatment of Syphilis: Comparison of the Number of Days’ Hospital Treatment Required for Patients suffering With Syphilis, With and Without the Use of Salvarsan or Neosalvarsan” United States Public Health Service (Washington, D.C.: Government Printing Office, 1914), 17.

⁶¹ “Keep in Fighting Trim,” (New York: The American Social Hygiene Association, 1917) (Box 170, Folder 06), 6. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

⁶² Frank Osborne, “Community Control of the Venereal Diseases” (Box 170, Folder 07). American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

including Michigan, Utah, Pennsylvania, North Dakota, Washington, and Wisconsin—passed such laws. Though some questioned the effectiveness of Wasserman tests used to test for venereal diseases, the laws nonetheless reflected a commitment to marriages that could produce healthy children and maintain the sexual health of both partners.⁶³ By stressing mandatory reporting as a service to the community, the ASHA constantly reinforced its own medical authority and commanded the participation of individuals and officials alike.

The ASHA drew parallels between other diseases and syphilis in an effort to encourage public outcry. Mrs. Behrens, part of the Bureau of Public Health and Department of Public Welfare in Nebraska, commented: “You quarantine for smallpox, for scarlet fever, for dozens of other contagious diseases...then why not quarantine for syphilis, which an infected person may scatter broadcast.” She went on to decry the dangers of syphilitic citizens working in restaurants or “places where they come into direct contact with the public.”⁶⁴ A newspaper editorial in the *Ellensburg Dawn* expressed a similar sentiment. Acknowledging the public health department’s use of signs to quarantine households, the Washington author commented: “Place the ‘red light’ sign over the homes that are known to be hot beds for the propagation of venereal disease.”⁶⁵ For at least one individual, the notorious red light no longer signified the pleasures of vice but the dangers of venereal disease.

The educational and legal efforts of the ASHA united organizations which had previously been working independently. The ASHA asked that the state provide legal protection to homes and families. It asked the community to “supervise amusements” and “light public places adequately.” Schools maintained the responsibility for teaching parents as well as children,

⁶³ Edward Keyes, “Can the Law Protect Matrimony From Disease?” *Journal of Social Hygiene* 1, No. 1 (April 1914), 9.

⁶⁴ “Campaign Against Venereal Disease,” *The Alliance Herald* [Alliance, NB] (January 16, 1920), 9.

⁶⁵ “Municipal Rule and Misrule No. 3,” *The Ellensburg Dawn* [Ellensburg, WA] (January 26, 1911), 1.

developing healthy recreation, and stressing the importance of the home and family life. Even the church had a role in the ASHA plan for eliminating vice by promoting morality and discouraging vice and disease. The ASHA recognized “the importance of cooperation between these and other agencies for like purposes” and viewed its own role as one of providing “a clearing house for social hygiene in its various phases.”⁶⁶ In doing so, the ASHA underscored its commitment to flexibility and to reaching practical solutions by whatever means necessary.

Ultimately the ASHA agendas of legal and educational reform braided together more often than they remained separate. Both contributed to the massive publicity campaign of the ASHA, earning it enough notoriety that the federal government would take notice in 1917. As the nation mustered an army and faced fears of rampant venereal disease amongst enlisted men, they looked for examples of educational and legal reform. The ASHA, having mastered both techniques, offered their services in exchange for unprecedented access to national audiences.

⁶⁶ “Social Hygiene Home and Community” (Box 170, Folder 02), 20. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

“The Biggest Experiment In the History of Democracy:” The ASHA, World War I, and
the New Militant Morality

In 1918, the *Owosso Times* of Owosso, Michigan printed an article calling for “drastic action to stamp out the ‘third great plague.’”¹ In a county of roughly 34,000 mostly rural inhabitants, the article began by describing recent efforts to curb hog cholera in the state.² The state spent thousands of dollars reimbursing farmers for the loss of livestock killed. “No one has ever complained,” the newspaper continued. “In fact, the activities of the state along this line have received the active co-operation and support not only of the farmers, but of the city folks as well.” Though hog cholera had clearly united the people of Michigan in one interest, the article in the *Owosso Times* demanded citizens “eliminate venereal disease” because “the farmer knows only too well how quickly one tubercular cow will infect an entire herd.” At the behest of the War Preparedness Board, Michigan was turning its attention to a different type of disease set to ravage the welfare of its people. “The records of the board of health show that gonorrhoea and syphilis annually cause more death and suffering in Michigan than smallpox, tuberculosis and infantile paralysis combined,” the article reported. It then demanded mandatory reporting of diseases, the protection of drafted men, and the protection of training camps. Michigan’s recognition that “frankness is necessary” echoed the national call to arms for reformers concerned about military effectiveness; it also echoed the call of the ASHA, ready and willing to bring their educational tools and legal resources to citizens across the United States gearing up for a fight against venereal disease.³

¹ “Hogs Protected, People Neglected,” *The Owosso Times* [Owosso, MI] (March 15, 1918), 2.

² United States Census Bureau, *Fourteenth Census of the United States Taken in the Year 1920: Population 1920-Number and Distribution of Inhabitants Volume I* (Washington, D.C.: Government Printing Press, 1920), 111.

³ “Hogs Protected, People Neglected,” 2.

The ASHA eagerly embraced an opportunity to seize a national stage for their campaign, one in which their method of cooperation and education suited both military goals and their own agenda. When President Woodrow Wilson called the nation to war in 1917, he demanded a level of cooperation unheard of in the history of the nation. New partnerships between private agencies and the federal government included efforts to raise a 1.5 million man army, to train and supply that army, and to be sure that once abroad the American Expeditionary Force would represent to the world all the best of American progress and ideals. The *New York Sun* called this massive undertaking “the biggest experiment in the history of democracy.”⁴ The ASHA committed their resources and expertise to the federal government, and thus stood on the front lines of a new battle for sexual health and morality.

The federal government also demanded participation from all American citizens, creating a culture of obligation to the new military’s campaigns abroad and on the home front. In asking Congress to declare war on Germany, Wilson famously declared: “The world must be made safe for democracy.”⁵ Americans whole-heartedly responded. They committed not only their pocketbooks in the form of massive fundraising drives such as the Liberty Loans but also their sense of duty. When the ASHA and military officials asked communities to self-police their red light districts, towns responded because the demands were couched in appeals to democracy. Because so many men enlisted in the military, officials could also appeal to a sense of familial obligation; to support the war meant supporting America’s sons who were fighting for

⁴ “First Year of the Draft and How it Affected the Nation,” *The New York Sun* (June 2, 1918), 5.

⁵ Woodrow Wilson, “Joint Address to Congress Leading to a Declaration of War Against Germany” Sixty-Fifth Congress, 1 Session, Senate Document No. 5 (Washington: Government Printing Office, 1917).

democracy.⁶ Though many ASHA reforms needed the enforcing power of the federal government, many gained widespread support and implementation at the local level.

By the time Congress voted to enter World War I on April 4, 1917, the ASHA had been commenting on international venereal disease concerns for years. Their practical knowledge of venereal disease in the military came from observing American military outposts on the Mexican border and in the Philippines. They had seen the toll venereal disease wrought on the German, French, and British armies. Several of the top ASHA officers came from a military background, and new board members would only increase that number during the years of the war. The ability of ASHA officers to move between national and local reform organizations across a wide range of disciplinary fields also left them uniquely suited to helping the military establish a new system of policing venereal disease; the ASHA had spent the last several years developing the tools necessary for just such a campaign, and World War I presented them with an opportunity to use their expertise.

The military fear of venereal disease was not unfounded. In 1895, the British army stationed in India reported venereal disease in 537 men per thousand. In 1907, the United States army reported 167.8 per thousand.⁷ An ASHA publication observed: "It is generally admitted that in all the nations engaged in this war, the results of prostitution present one of the greatest, if not the greatest, army problem." One of the European armies even reported more men incapacitated by venereal disease than on active duty at the front."⁸ Over the course of the war, American forces lost 6,804,818 days of active duty due to venereal disease. Hospital wards

⁶ For more on the culture of obligation during wartime, see Christopher Capozzola. *Uncle Sam Wants You: World War I and the Making of the Modern American Citizen* (New York, NY: Oxford University Press, 2008).

⁷ Vernon L. Kellogg, "The Bionomics of War," *Journal of Social Hygiene* 1, No. 1 (April 1914), 51.

⁸ Exner, Max J., "Friend or Enemy? To the Men of the Army and Navy" (Box 170, Folder 03), 4. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

admitted an estimated 100,000 more men for venereal disease than for the total number of casualties among American forces. Venereal disease ranked fourth among causes for medical discharge from service. During the second year of American involvement, one in every ten enlisted men had a venereal disease.⁹ The ASHA had recognized the dangers of venereal disease before the war began, but their efforts took on newfound meaning for military efficiency during the war years.

From its inception, the ASHA recognized the military ramifications of venereal disease infections. They viewed the military as an epitomized expression of American citizenship, a showcase of progress and of national morality. Woodrow Wilson created the Commission on Training Camp Activities (CTCA) on April 8, 1917, two days after the United States entered the war. He acted on the advice of a team of ASHA, Bureau of Social Hygiene (BSH), and social reformers who brought Secretary of War Newton D. Baker the idea for the commission.¹⁰ Baker appointed Raymond Fosdick—an ASHA contributor—to head a new type of social engineering experiment. He no doubt recognized Fosdick's years of experience both in observing European police systems and the American military. Fosdick also brought with him connections to several key organizations, including the ASHA. Over the years of the war, the ASHA provided publication, staff, organizational connections, and a propaganda platform for the newly created governmental agencies tasked with staging a large anti-venereal campaign. As the military increasingly recognized the necessity of enlisting non-military support, they relied on the ASHA

⁹ Maj. Gen. M. W. Ireland, *The Medical Department of the United States Army in the World War: Volume IX Communicable and Other Diseases* (Washington, D.C: US Government Printing Office, 1928), 263, 271. 263; The War Department, *Commission on Training Camp Activities* (Washington D.C; Government Printing Office, 1918); Nancy K. Bristow, *Making Men Moral: Social Engineering During the Great War* (New York and London: New York University Press, 1996), 4.

¹⁰ M.J. Exner, "Social Hygiene and the War," *Journal of Social Hygiene* 5, No. 2 (April 1919), 277.

to bridge the gap between federal power and non-governmental agencies. The model of cooperation the ASHA had developed for itself now become a model of federal power.

The ASHA methods of championing legal change and implementing educational programming allied well with the goals of the military. The United States Secretary of War Newton D. Baker created a new program to curb immorality in training camps. The Commission on Training Camp Activities (CTCA), staffed by leading social reformers, advocated for education, recreation, and legal protection for soldiers enlisting in the American Expeditionary Force (AEF). Though the goal was to improve overall social morality, the CTCA hoped specifically to lower venereal disease rates and minimize the cost of healthcare as well as the days lost from active duty due to illness.

Unfortunately, partnering with the federal government did not come without cost. Though the ASHA gained a national platform for their campaign, the organization's rhetoric shifted during the war years. Efforts to avoid vilifying venereal disease carriers proved untenable in the wartime system of policing prostitution, which favored the wide scale incarceration of women without the nuance some ASHA reformers desired. The military legal policies—though based on some tenets of ASHA thought—shifted the punitive blame for venereal disease onto the shoulders of women. While the military and ASHA extolled the virtues of chastity to men, they enforced chastity upon women by incarcerating them. By criminalizing venereal diseases, reformers created a strict code of behavior with no room for nuance in social mores.

World War I was not the first time the American military attempted to confront the seemingly endemic issues of vice surrounding military training camps. Reports from the Mexico border in 1916 described a hedonistic, vice-ridden military situation where the efforts of social

reformers such as the ASHA were desperately needed. When Raymond Fosdick visited the region, he recalled “an almost unrelieved story of army camps surrounded by growing batteries of saloons and houses of prostitution.”¹¹ ASHA contributor M.J. Exner commented: “The soldier is subjected to unusual moral strain...many of them mere boys...It is the period when desire is strong and the will is weak.” Exner went on to observe: “He is away from the restraining and supporting influence of the home and home society.”¹² Through the concerted participation of the Secretary of War Newton D. Baker, social reformers succeeded in improving the moral environment of the border. The primary success came in closing down the red light districts and saloons, though many social reformers clamored for alternative entertainment for soldiers. Raymond B. Fosdick remembered spending long afternoons in the War Department with Baker. “We thought we were talking about the Mexican border. In fact, although we were unaware of it, we were discussing ways and means of normalizing the life of the American soldier in the greatest war in which the United States, up to that time, had ever been involved.”¹³

The CTCA’s multi-faceted mission aimed “to supply the normalities of life to nearly a million and a half young men in training camps, and to keep the environs of those camps clean and wholesome.”¹⁴ CTCA officials organized cantonment song books, letter writing stations, and hostess houses where enlisted men could interact with community women in a chaperoned environment. On a less optimistic note, the CTCA acknowledged: “Suppressive work in dealing with vicious conditions is handled by direct representatives of the Commission,” the officials of whom remained in steady contact with vice repression committees across the country, including

¹¹ Raymond Fosdick, *Chronicle of a Generation: An Autobiography* (New York: Harper Publishing, 1958), 137.

¹² M.J. Exner, “Prostitution in Its Relation to the Army on the Mexican Border,” *Journal of Social Hygiene* 3, No. 2 (April 1917), 206.

¹³ Fosdick, *Chronicle of a Generation*, 141.

¹⁴ The War Department, *Commission on Training Camp Activities*, 3.

the ASHA.¹⁵ The CTCA demanded cities near training camps shut down or police vice districts. If they proved too expensive to police, Secretary of War Baker threatened to remove the camps—and their purchasing power—from the area.¹⁶ A complicated system of enticements paired with militarized repression to encourage moral behavior.

Perhaps tellingly, no women were present at the first “Hearing on the Control of Venereal Diseases” before the Council of Defense in April 1917.¹⁷ Several members and friends of the ASHA were present, including Raymond Fosdick and ASHA Secretary Colonel William Snow, both of whom would head committees under the umbrella of military anti-vice campaigns. Fosdick appointed many familiar ASHA contributors to head various subcommittees of the CTCA. Colonel William Snow eventually led the Social Hygiene Division of the War Department, an agency tasked with publishing posters and lectures.¹⁸ Both Fosdick and Snow necessarily relied on the materials and connections of the ASHA in order to accomplish their various tasks. Though Fosdick appointed several women to CTCA subcommittees, the work of female reformers was noticeably absent in the highest echelons of organization. As wartime policies increasingly targeted women with punitive measures, tension would flare between some reformers and the national agencies.

The ASHA as an organization, however, committed whole-heartedly to supporting the CTCA by mobilizing their readership and membership on behalf of the new organization. They encouraged Americans to seek out more information about venereal disease, to improve the safety of their towns, and protect themselves and their families. ASHA reformers advised

¹⁵ *Ibid.*, 5.

¹⁶ Raymond Fosdick, “The Program of the Commission on Training Camp Activities with Relation to the Problem of Venereal Disease,” *Journal of Social Hygiene* 4, No. 1 (January 1918), 74.

¹⁷ William Snow, “Social Hygiene and War,” *Journal of Social Hygiene* 3, No. 3 (July 1917), 429.

¹⁸ “Women Physicians Will Continue Lectures Here,” *Richmond Times-Dispatch* (April 18, 1919), 18.

citizens to write the CTCA “to signify your desire to fight with Uncle Sam right here at home and to go on record as a broad gauge, patriotic individual.”¹⁹ The *Journal of Social Hygiene* (*JSH*) added a new feature column titled “Social Hygiene and the War.” Additionally, the journal’s editors began gathering for immediate publication articles related to the war specifically and featuring some of the major figures of the American military, including Woodrow Wilson, Surgeon General Major General William C. Gorgas, and Secretary of the Navy Josephus Daniels. The ASHA “through its cooperation with the departments of government on the one hand and the civil authorities on the other, is serving as a clearinghouse for social hygiene societies and allied agencies particularly in the medical and hygienic phases of the work and in organizing public opinion on support of the measures adopted.”²⁰ Eager to serve both military ends and its own, the ASHA set to mobilizing its resources on behalf of the CTCA.

The CTCA recognized the necessity of enlisting other agencies such as the ASHA and others to help police the morality of training camps. A short pamphlet issued to communities near military places advocated “full cooperation and coordination of work with that of other organizations and public agencies such as the health departments, Y.M.C.A., Knights of Columbus, women’s clubs, businessmen’s organizations, and churches, and with the American Social Hygiene Association and the Commission on Training Camp Activities of the War Department.”²¹ The document went on to describe the interweaving agenda of reformers: it encouraged exhibits and education efforts in community, free venereal disease care, and the legal

¹⁹ William H. Zinnser, "Social Hygiene and the War, Fighting Venereal Diseases a Public Trust" (Box 170, Folder 08), 523. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

²⁰ “The American Plan for Concerted Action on the Part of the National & Allied Agencies to Stamp Out VD” (Box 171, Folder 09). 6. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

²¹ “Suggestions for Communities Near Military Places” (Box 170, Folder 06), 1. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

repression of vice. The CTCA's mission overlapped closely with that of the ASHA, and much like the early efforts of the ASHA, one of the CTCA's first goals was to create partnerships between other useful agencies and like-minded organizations.

Unlike the ASHA, which had targeted state social hygiene organizations in an attempt to influence regional and local laws, the CTCA used the power of the federal government to address state officials directly. The Surgeon General's office issued a telegram to state boards of health demanding state anti-venereal laws in "this vital campaign, one of the most important that has ever confronted the public."²² Many states responded favorably. Virginia's Governor responded by promising cooperation with the state chapter of the ASHA in saving enlisted men "from physical and moral contamination."²³ The Mohave County Miner of Arizona reported the response of their state officials: "Within six hours after your plan arrived venereal diseases were made reportable and put in the same legal status as smallpox, scarlet fever, and diphtheria." The Mohave County Miner reminded its readership that "this campaign is being instituted by the federal authorities...and they have all the federal laws behind them. In localities where the local officials do not cooperate with the state authorities, the federal officials may have to take control."²⁴ Like the threat of moving camps altogether, the promise of federal reprisal often ensured the support of state governments. The CTCA and other military officials used the force of the federal government to encourage states to implement anti-venereal laws, a power which the ASHA gained access to by partnering with federal agencies.

To legitimize the threat of federal intervention, military officials rhetorically crafted their mission as one of protecting military men and showcased the federal desire to match the

²² "Registration of Venereal Diseases Becomes State Law," *Mohave County Miner* [Mohave, AZ] (January 26, 1918), 2.

²³ "Aim to Reduce Source of Moral Contamination," *Richmond Times-Dispatch* (July 12, 1917), 1.

²⁴ "Registration of Venereal Diseases Becomes State Law," 2.

sacrifices of troops; the ASHA had often made similar pleas for protection on behalf of the family. In doing so, both the ASHA and CTCA kept their motives from seeming wholly self-serving. They acted on behalf of families and soldiers. The Secretary of War Newton D. Baker wrote a letter to the governor of each state asking for their participation in creating a training camp culture free of “temptation and peril.” The Secretary of the Navy Josephus Daniel praised “the finest youth of the land who have offered their lives for the service of their country at a time when this sacrifice is not figure of speech...the Government will safeguard them from unnecessary perils.”²⁵ The ASHA constantly reprinted Woodrow Wilson’s declaration promising the health of soldiers. Wilson said: “The federal government has pledged its word that as far as care and vigilance can accomplish the result, the men committed to its charge will be returned to the homes and communities that so generously gave them with no scars except those won in honorable conflict.”²⁶ The statements of the three military men did not make overt references to venereal disease, but rather attempted to create in the minds of Americans a vision of camps free from immoral influences.

The ASHA often relied on images of motherhood to inspire good behavior, and the CTCA continued that trend. By begging the participation of the YWCA, General Federation of Women’s Clubs, and other female organizations, military officials attempted to imbue the camps with a sense of comfort and home. “America, Here’s My Boy” quickly became a popular tune in wartime America, and the lyrics underscored the sacrifice made by mothers:

America, I raised a boy for you.
 America, You'll find him staunch and true,
 Place a gun upon his shoulder,
 He is ready to die or do.
 America, he is my only one; My hope, my pride and joy,

²⁵ William Snow, “Social Hygiene and War,” *Journal of Social Hygiene* 3, No. 3 (July 1917), 436.

²⁶ “Standard Forms of Laws, War and Navy Departments” (Box 171, Folder 04), 5. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

But if I had another, he would march beside his brother;
America, here's my boy.²⁷

In return, the government attempted to reinforce morality as a way of honoring the sacrifice of mothers. The military newspaper *Stars and Stripes* reported: “Mothers need have no fear that their sons are being dragged down to hell by vicious women.”²⁸ Fosdick had recognized the lack of a home influence on the Mexico border, and by the time World War I training camps filled to the bursting point with America’s sons, he had found ways to assure parents that their children would not suffer from a lack of moral guidance.

The implementation of CTCA policies involved a radical reorientation for federal health agencies. In the pre-war years, federal agencies paid little attention to venereal disease as a health crisis. In 1915, the Public Health Service’s public exhibit at the Panama-Pacific International Exposition in San Francisco included preventative information on diseases such as the bubonic plague, yellow fever, smallpox, and typhus fever.²⁹ Though an ASHA booth at the same Exposition decried the dangers of venereal diseases, the Public Health Service did not mention them. By 1918, however a pamphlet called “The Citizen and Public Health” was able to ask:

Where are the bubonic plague or black death, Asiatic cholera, typhus fever, yellow fever, and smallpox? ...on account of the public health application of our knowledge of these diseases they have been reduced or held in check...In their place we have the white plague (tuberculosis), cholera infantum and its kin, typhoid fever, and the pox or syphilis.³⁰

²⁷ Arthur Lange, composer. “America, Here’s My Boy” (New York: Joe Morris Music Co., 1917).

²⁸ “Clean Morals of the Boys in France,” *Evening Public Ledger* [Philadelphia, PA] (February 18, 1918, Night Extra), 8.

²⁹ W.C. Rucker and C.C. Pierce, United States Public Health Service, “United States Public Health Service Exhibit At the Panama-Pacific International Exposition, San Francisco, 1915” (Washington, D.C.; 1916).

³⁰ A.M. Stimson, Passed Assistant Surgeon United States Public Health Service, “The Citizen and the Public Health” (Washington, D.C.: 1918), 4, 12.

Moreover, the document recognized a “lack of knowledge” and “lack of moral training” as major causes of the spread of venereal diseases and presented solutions including “public control of prostitution...[and] of obstetrical practitioners, doctors, and midwives.” The Public Health Service also encouraged refusing marriage licenses to venereal disease carriers, implementing educational reforms and providing prophylactic solutions.³¹ The recognition of venereal disease as a national public health concern reflected the degree to which CTCA and ASHA policies infiltrated other governmental policies.

ASHA’s legal and educational strategies served as a model for the United States Public Health Bureau efforts. The 1918 pamphlet *Instructions to Medical Officers in Charge of State Control of Venereal Diseases* contained many of the policies the ASHA had perfected in the pre-war years. The Public Health Service endorsed community-supported venereal disease clinics, informational placards in public restrooms, and the use of literature, lectures, and “moving pictures” in a widespread educational effort. The agency endorsed partnerships between State and private organizations, encouraging the participation of groups such as the Red Cross and Young Men’s Christian Association (YMCA) as well as federal agents. Though divided primarily into medical and educational sections, the Public Health Bureau also supported anti-quack legislation and begged cooperation from druggists. Their model of operation closely paralleled the ASHA, and so did the Bureau’s efforts to remove the stigma of venereal disease. “[The Medical Officer] shall see to it that the moral atmosphere of clinics, hospitals, detention homes, etc., is constantly hopeful, inspiring, and as normal as possible.”³² The efforts of ASHA

³¹ *Ibid.*, 4, 12.

³² Treasury Department, United States Public Health Service, Division of Venereal Diseases. “Instructions to Medical Officers in Charge of State Control of Venereal Diseases.” (Washington, D.C.: Government Printing Office, 1918), 15.

and CTCA policies to treat venereal disease involved creating a culture which could address the diseases forthrightly, continuing the fight the ASHA started years before the war began.

The CTCA and ASHA efforts also represented a concerted program of militarizing health policies. By framing their policies as a matter of military necessity, they participated in a national rhetorical exercise wherein war became the central defining paradigm. A militaristic language crept into discussions of even non-military health care issues. “Keeping Fighting Trim,” a pamphlet addressed toward citizens, described the imperative need to create a “standing army of health.” It went on to describe various public health measures in military terms, including the need to protect “seaports and frontiers from disease invasion,” “policing houses and public spaces,” “establishing cordons to prevent dangerous communication with the camping grounds of disease,” and “posting sanitary sentinels about the territory from which a sortie is feared.” The enemies described in the pamphlet are not German Huns but syphilis and gonorrhea. Nonetheless, the ASHA described the need for “extermination, wherever found, of an enemy that gives no quarter.”³³ The militant language represented a wider wartime trend of turning all citizen and state efforts towards the war effort.³⁴

Although some communities eagerly participated in the CTCA efforts, others adopted a more recalcitrant tone which required all of the persuasive power the government and its partners could muster. Fosdick recalled “the existence of considerable skepticism in regard to the serious intentions of the Federal government. Mayors and sheriffs were asking whether this was not an ‘idealist program’ put out for popular consumption.”³⁵ To assuage such concerns, Woodrow

³³ J.M. Eager, Surgeon, United States Public Health Service. “Fighting Trim: The Importance of Right Living” (Washington Government Printing Office, 1917), 4.

³⁴ For more on the American home-front during World War One, see David Kennedy, *Over Here: The First World War and American Society* (New York: Oxford University Press, 2004).

³⁵ Fosdick, *Chronicle of a Generation*, 146.

Wilson appointed newspaper man George Creel to head the Committee on Public Information (CPI), a federal agency designed to create and maintain a massive wartime propaganda machine. Creel recognized “that the three great agencies of appeal in the fight for public opinion were: The Written Word, the Spoken Word, and the Motion Picture.”³⁶ Though the CPI addressed everything from liberty loans to German atrocity crimes, their approach to mustering public support paralleled the structure of ASHA educational efforts.

Just as the ASHA successfully used film to educate its audiences, the CTCA used the new media tool to reach soldiers and civilians alike. One of the first films ever produced by the American government was *Fit to Fight*, a feature length production created by the ASHA which shared a name with Raymond Fosdick’s training manual for troops.³⁷ The film followed three men through the training camps and recounted each soldier’s struggle with the temptations of venereal disease. The CTCA also released a forty-five minute film titled *The End of The Road*. The wildly popular motion picture detailed the lives of Vera and Mary, two young women newly arrived in New York City.³⁸ Vera gives in to her passions and contracts syphilis from one of her many partners. Mary avoids the sexual company of soldiers and emerges beatified, a guiding light for the young women of her generation. The two films represented the gendered system of education the ASHA perfected; films and pamphlets were created for each gender rather than for a co-ed audience. In addition to films developed by the CTCA and its subcommittees, soldiers also watched existing films such as *Damaged Goods*. The National Theater showed the film to enlisted men free of charge as part of a cooperative program between the CTCA and several

³⁶ George Creel, *Complete Report of the Chairman of the Committee on Public Information* (Washington: U.S. Government Printing Office, 1920), 47.

³⁷ Commission Training Camp Activities, “Committee on Protective Work for Girls” (Washington D.C.; Government Printing Press, 1917); “Association Produces Four Reel Educational Film for the Surgeon General of the Army,” *American Social Hygiene Association Bulletin* 5, No. 4 (April 1918), 1.

³⁸); Elizabeth Alice Clement, *Love for Sale: Courting, Treating, and Prostitution in New York City, 1900-1945* (Chapel Hill: The University of North Carolina Press, 2006), 165.

other organizations, including the ASHA. Film provided a valuable tool for reaching out to both civilians and soldiers, and reformers became ever more familiar with film as a tool of education.

Much as the ASHA had struggled to educate non-English speaking audiences, the CTCA and wartime offices faced the challenge of presenting their message across many languages. During the war there emerged a concerted campaign against “hyphenated Americans,” those immigrants or first generation Americans whose loyalties might lie beyond the borders of the United States.³⁹ The 1910 census reported one in three Americans had a parent born abroad or were born abroad themselves. Of the 32 million Americans that figure encompassed, more than 10 million related somehow to the Central Powers of the war.⁴⁰ An attempt to elicit the patriotic fervor of those individuals—or at least repress their dissent—led to foreign language educational efforts by wartime propagandists. The CPI boasted a Scandinavian Bureau, Polish Bureau, Ukrainian Bureau, Lithuanian Bureau, Czechoslovak Bureau, German Bureau, Hungarian Bureau, Italian Bureau, Russian Bureau, and a Yugoslav Bureau, all staffed by native speakers with connections to immigrant communities. The CPI also deployed staff to Mexico, France, Holland, Switzerland, and other nations across the world.⁴¹ The transnational scope of the CTCA and ASHA underscored the international stakes of the fight against venereal disease.

In addition to targeting non-English speakers as a unique audience, the CTCA provided for the first time a bevy of statistical evidence on the rate of venereal disease amongst “Negro” or “colored” soldiers. While white enlisted men’s rate of venereal disease infection depended on location, African-American enlistees overall showed higher rates of syphilis and gonorrhea.

White soldiers in the Philippines islands showed the highest admission rate at 192.12 per 1,000,

³⁹ James Robert Mock, *Words That Won the War: The Story of the Committee on Public Information, 1917-1919* (Princeton: Princeton University Press, 1938).

⁴⁰ Kennedy, *Over Here*, 24.

⁴¹ George Creel, “Report on the Committee of Public Information,” 85-93.

but African-American soldiers serving in the United States reported 331.62 cases per 1,000. The Army did not care to ponder the social reasons for the disparate figures based on race, nor did it intend “to imply that colored men are more susceptible, or that the white soldiers possess a higher degree of immunity to venereal infection; but from the Army standpoint the greater the proportion of black troops the higher the venereal rate.”⁴² The military need to address the disparity led them to adopt specific, racially targeted education.

The ASHA furnished just such an education by recognizing the severe health disadvantages of African-American troops and targeting specific education programs at those enlisted men. The problem, they admitted, stemmed partially from the lack of reliable statistics before the war, but also from “race discrimination, by the indifference of the white communities and the civil authorities to negro health and morals; by the bad sanitary and worse housing conditions under which negroes are obliged to live,” and by the lack of adequate education and medical care in African-American communities. Much as reformers assumed prostitutes expressed high rates of venereal disease, it seemed Southern physicians assumed the same of African-Americans. They reported rates of infection as high as ninety percent, an opinion perhaps more reflective of contemporaneous ideas of African-Americans’ supposed sexual immorality than of actual infection rates.⁴³ When the ASHA approached the problem of educating a group whose health seemed overall low, they adopted different techniques which revealed many of their racial biases. “Keeping Fit to Fight: For Negro Boys and Men” was a poster campaign modeled after “Keeping Fit to Fight,” an exhibit targeted at white men. The exhibit for white men featured photos of white men and cultural heroes such as Theodore

⁴² Ireland, *The Medical Department of the United States*, 270.

⁴³ Arthur B. Spingarn, “The War and Venereal Diseases Among Negroes,” *Journal of Social Hygiene* 4, No. 3 (July 1918), 334, 337.

Roosevelt. The exhibit for African American men featured mostly photos of African-American men and featured such cultural figures as Booker T. Washington. Unlike the exhibit for white men, the African-American exhibit featured no allusion to science, perhaps because the ASHA believed its audience was too uneducated to understand scientific concepts. Communications scholar Robin Jensen described the exhibits as an attempt to isolate difference and shape an understanding of social hygiene through a “white” lens. Though “Keeping Fit to Fight: For Negro Boys and Men” offered targeted education to a group whose sexual health needed assistance, the exhibit did not challenge ideas of racial inferiority but rather reinforced them by continuing to create an image of African-American men separate from—and inferior to--white.⁴⁴

The war also loosened some of the strictest modes of censorship which the ASHA had been railing against for years, though enlisted men benefitted most from the new rules of censorship. On February 9th, 1912, Margaret Sanger attempted to publish “Some Consequences of Ignorance and Silence---Part III,” an entry in her twelve part sexual education column running in the *New York Call*. Unfortunately, the post office—enforcer of the Comstock anti-obscenity laws--censored the article. The *New York Call* responded by running a blank column with the annotation: “What Every Girl Should Know; NOTHING! By Order of the Post Office Department.”⁴⁵ In 1917, however, Margaret Sanger reported her pamphlet “was now, officially but without credit, reprinted and distributed among the soldiers going into cantonments and abroad.”⁴⁶ Military necessity cast off what shades remained around the once taboo discussion of

⁴⁴ Robin Jensen, *Dirty Words: The Rhetoric of Public Sex Education, 1970-1924* (Urbana: The University of Illinois Press, 2010), 136.

⁴⁵ Esther Katz, Ed. *The Selection Papers of Margaret Sanger. Volume 1: The Woman Rebel, 1900-1928* (Urbana, IL: University of Illinois Press, 2007), 41.

⁴⁶ Margaret Sanger, *The Autobiography of Margaret Sanger* (New York: W.W. Norton Publishing, 1938) 256.

venereal disease even as agencies implemented ever stricter laws policing the sexuality of the citizenry.

The ASHA embraced the new discussion of venereal disease and used the opportunity to enforce their eugenic agenda of creating a male and female ideal for society. The military provided the opportunity to select the best young men America had to offer, and their presence in training camps meant the ASHA could inculcate ideas of chivalry and continence. The best of America's women also mobilized for war service by organizing their voluntary groups into Red Cross bandage sewing brigades and other supportive endeavors. Those same groups, the ASHA believed, could be targeted for educational campaigns stressing good sexual hygiene and picking the right partner. However, the effect of war on reproduction rates worried eugenicists particularly. "It is sometimes claimed that military selection is of biological advantage to the race as a purifier by fire," eugenicist Vernon L. Kellog observed. He went on to point out that the men selected tended to be individuals of the utmost "sexual vigor and fecundity" exhibiting "a certain desirable standard of physical vigor and freedom from infirmity and disease."⁴⁷ Not all observers agreed that the best men would find their way into the army, but the CTCA and ASHA attempted to secure a level of morality which would ensure those men who survived would express all the best ideals of citizenship.⁴⁸

The American Expeditionary Force envisioned itself as a moral army that would provide a worthy example for foreign observers. The *Stars and Stripes*, a newspaper published for the soldiers while they were abroad, remarked "These American Expeditionary Forces constitute an

⁴⁷ Vernon L. Kellog, "The Bionomics of War," JSH 1, No. 1 (April 1914), 48.

⁴⁸ For instance, the *El Paso Herald* observed: "Something must be done about the health of the nation. For some years past the statisticians have been pointing out to us that while we have nearly conquered many of the germ diseases, the degenerative diseases are on the increase..." The newspaper went on to blame cities and "harmful occupations" for such poor health among draftees. "Men Unfit for Army A Menace," *El Paso Herald* (January 19, 1918), 21.

army which is in every way a worthy successor to the first army of liberty, whose commander was George Washington.”⁴⁹ Many military officials and social reformers called upon images of manhood and virility—as well as competition—to inspire soldiers to remain healthy. “You are to represent America’s manhood in Europe. She expects you to prove yourselves the best soldiers in the world—and all the world is fighting shoulder to shoulder in France.”⁵⁰ The CTCA and ASHA propaganda preyed on fears of dishonor in an effort to encourage the morality of soldiers. “It is a very strong appeal to patriotism now to point out the fact that the greatest injury any soldier can do to our country is to voluntarily contract a disease which will take him from the fighting line,” the Surgeon General remarked in a speech excerpted for the ASHA Journal.⁵¹ “A bullet wound is honorable,” one social reformer remarked bluntly, “but a venereal disease is not.”⁵² Reformers attempted to demand that a soldier’s duty included not only the task of fighting the German Hun, but also the task of fighting his personal immorality.

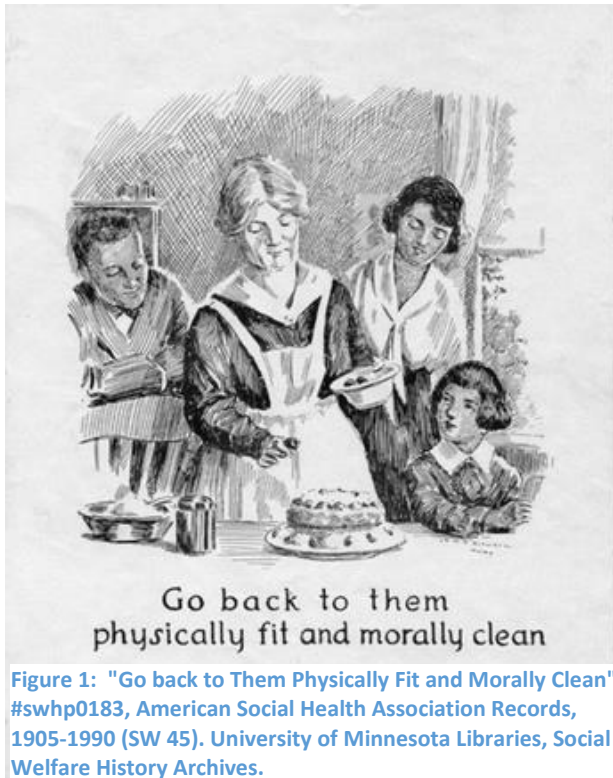
Just as previous ASHA educational efforts had stressed continence for both men and women, the new military educational strategies attempted to encourage chastity among enlisted men by calling on their sense of obligation to family and nation. One pamphlet featured the maternal icon, a mother who willingly sacrificed her son to fight for America. The pamphlet read: “She does not fear your death—your honorable death—but the dread that you may become innocently contaminated pulls at her heart-strings.” The ideals of motherhood and dutiful sons and husbands also appeared in the ASHA visual rhetoric. One poster featured a white haired matron surrounded by children above the caption. “Go back to them physically fit and morally

⁴⁹ “To the Folks Back Home,” *The Stars and Stripes* 1, No. 1 (February 8, 1918), 4.

⁵⁰ Francis P. Schiavone, “The Honor Legion.” (Box 170, Folder 12), 6. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

⁵¹ Major General William C. Gorgas, “The Doctor and the War,” *Journal of Social Hygiene* 3, No. 4 (October 1917), 476.

⁵² “Women Physicians to Fight Vice in Army,” *New-York Tribune* (June 15, 1918), 6.



clean” (see figure 1). Like mothers, wives also proved useful tools in the rhetoric of military officials and reformers. “She expects you to be pure—she expects you to be true to her—to preserve for her alone all the powers of your manhood...she has let you go to the defense of your country, but she trusts you to be man enough to come back to her clean in mind and body.”⁵³ By reminding soldiers of their obligations to family and home, the ASHA and CTCA hoped to encourage soldiers to avoid venereal infection.

The national effort to envision soldiers as the epitome of masculine nationalism necessarily meant enforcing that vision once abroad. The CTCA focused on domestic training camps and the ASHA moved primarily amongst reform networks. An examination of anti-vice policies in the AEF while in France, however, showcases just how well the two organizations succeeded in designing and implementing anti-venereal programming. Fosdick recalled the necessity he felt in keeping his own civilian status: “I found I could talk with complete freedom and frankness to privates and generals alike, a freedom and frankness that would have been impossible if I had had military rank.”⁵⁴ That frankness earned him the respect of military officials with whom he had contact, including General Pershing. Pershing promised “every possible support from the American Expeditionary Force,” and provided military transport for

⁵³ Francis P. Schiavone, "The Honor Legion." (Box 170, Folder 12), 11, 12. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

⁵⁴ Fosdick, *Chronicle of a Generation*, 165.

Fosdick on his brief forays to France.⁵⁵ Though CTCA officials were rightfully concerned about conditions abroad, it fell to the army to see how anti-vice policies would be enforced.

One of the first challenges American officials faced was the disdain of European officials regarding the policy of continence for AEF soldiers. French Prime Minister Georges Clemenceau scoffed and declared that prohibiting regulated prostitution would only spark a rise in venereal infection in local French communities. Clemenceau offered to establish and regulate brothels for the use of American soldiers, but Pershing and his staff displayed a strong commitment to the social reform agenda inculcated by the ASHA and CTCA.⁵⁶ Despite the presence of state-run brothels in German, British, and French trenches, Pershing refused the offer of French regulated prostitution and demanded continence from American soldiers. He passed several general orders relating to the moral environment of camps, including reiterating a 1912 policy which made the contracting of venereal disease a court-martial offense.⁵⁷

Military officials also had to combat soldiers' intentional efforts to contract venereal diseases. Some soldiers preferred the dangers of venereal disease to the dangers of fighting in the trenches. They visited brothels with the intention of catching either gonorrhea or syphilis. Soldiers purchased pus from prostitutes or infected compatriots; they rubbed it either on their genitals or, in particularly desperate cases, in the eyes.⁵⁸ The ASHA publication "Keep in Fighting Trim" cautioned soldiers against handling infected discharge: "This pus contains millions of germs to every drop and is highly contagious. A small drop getting into the eye could

⁵⁵ *Ibid.*, 168.

⁵⁶ *Ibid.*, 173.

⁵⁷ Edward M. Coffman, *The War to End All Wars: The American Military Experience in World War I* (New York: Oxford University Press, 1968), 132; *The Stars and Stripes* 2, No. 14 (May 9, 1919).

⁵⁸ Peter Englund, *The Beauty and the Sorrow: An Intimate History of the First World War* (New York: Random House, LLC, 2012), 283.

easily cause blindness in a few days.”⁵⁹ Measuring intentional infection is impossible, but the overall decline in venereal infection suggests American soldiers may have decided blindness was not worth the risk.

One of the greatest successes of anti-venereal disease propaganda was its ability to create a system of self-enforcing morality in which soldiers policed one another’s behavior. The handbook for soldiers reminded its readers that the enlisted man who contracted a venereal disease “keeps equipment idle. He keeps a uniform out of service. He leaves a break in the line.”⁶⁰ The idea of camaraderie and loyalty also carried the ominous threat of failure; a sick soldier disappointed his peers, and often in more ways than one. The *Stars and Stripes* detailed a parade through one of the military camps, led by a soldier who had returned from seven-day leave with a venereal disease. Camp officials had declared a ban on all passes for a month if a certain number of men contracted a venereal disease. Unfortunately, the parade leader’s “case made the number which brought down the ban.”⁶¹ The hour long spectacle served as a source of entertainment for the newspaper readership but also as a reminder: in addition to facing military sanctions for contracting a venereal disease, a soldier might also have to face the wrath of his peers.

⁵⁹ “Keep in Fighting Trim” (Box 170, Folder 06), 6. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

⁶⁰ The War Department, *Commission on Training Camp Activities*, 4.

⁶¹ “Buck Heads Parade, But Not for Fun,” *The Stars and Stripes* 2, No. 3 (February 21, 1919), 3.

As a final threat against contracting a venereal disease, military officials implemented a strict physical examination before men could be discharged from service in France. Any soldier who displayed signs of venereal disease would find his discharge deferred and would be required to work on provisional labor squads throughout France.⁶² Known as General Order 32, the policy required soldiers to remain continent even when their war service was all but over. . . The order read: “The pride which every soldier in the A.E.F. feels in its achievement, and which the whole American nation shares, must not be marred by the return of anyone to civil life who, by his misconduct, has rendered himself incompetent to maintain that high standard of citizenship which America rightfully expects of her returning soldiers. The future health and welfare of our people demand that the soldiers of the A.E.F. return to their homes as clean in person as they have been brave in battle.”⁶³ Printed posters asked soldiers: “Will You Go



Figure 2: "Will You go Home with Your Outfit?" #swhp0181, American Social Health Association Records, 1905-1990 (SW 45). University of Minnesota Libraries, Social Welfare History Archives.

Home With Your Outfit?" (see Figure 2). The shame of contracting a venereal disease would become the additional shame of returning home branded as a venereal disease carrier, because “the wise ones” nodded their head when a soldier did not return home with his regiment.⁶⁴ The order clearly outlined an expectation of morality even beyond the bounds of official enlistment.

⁶² “Discharge Camp for Soldiers Who Muster Out Here,” *Stars and Stripes* 1, No. 49 (January 10, 1919), 7.

⁶³ “Segregation, Then Work, For Venereals,” *The Stars and Stripes* 2, No. 5 (March 7, 1919), 1.

⁶⁴ “Unjust Suspicious,” *The Stars and Stripes* 2, No. 10 (April 11, 1919).

Now that the ASHA and military had created a moral army, they needed to find a way for that army to maintain its discipline once the soldiers returned to civilian life.

Unfortunately, policies such as G.O. 32 often had unintended consequences. Rumors of immoral behavior reached the American home-front, as did news of the punitive regiments put together for men who contracted a venereal disease. The resultant outcry proved frustrating for commanders of non-punitive labor battalions. A peeved officer published an open letter defending the 6,000 men working at Le Mans, defending “the honorable character of their work.”⁶⁵ The *Stars and Stripes* reported widespread suspicion in the states when “Johnny doesn’t come marching home with his original outfit.” One soldier who volunteered to stay in France bemoaned: “After a long lapse I got my first letter tonight from my sweetheart with a very plainly written note inside the envelope stating the reason she had not written sooner and bidding me a fond farewell.”⁶⁶ The effort to police the behavior of returning soldiers by punishing venereal disease carriers as long as possible had unintended consequences for healthy men, but no doubt military officials thought cases such as the poor unjustly accused soldier would be in the minority.

By November of 1918, the ASHA and military officials grappled with how to maintain a system of war-time efficiency once the war was no longer being fought. As an additional safeguard against infection amongst soldiers waiting to return home, the A.E.F. leadership issued General Order 32. Infected men would not go home with their regiments, but would rather stay behind in France and work on provisional labor crews

⁶⁵ “Labor Battalion’ Carries No Stigma: Confusion Results from Assignment of Men to Punitive Outfits” *Stars and Stripes* 2, No. 8 (March 28, 1919).

⁶⁶ “Unjust Suspicions,” *The Stars and Stripes* 2, No. 10 (April 11, 1919).

The ASHA and CTCA stepped forward to ensure America would be worthy of her moral champions once the soldiers returned from war. The military provided a space in which officials could make certain demands of moralities upon soldiers. The widespread American social sphere, however, initially seemed beyond the bound of such policing. The ASHA and CTCA created a rhetoric of patriotic obligation among the communities. One publication read: “This is what the Government wants you to be sure of. Is your community backing up Military discipline and keeping your young men fit for service, or is it helping the Hun by letting the worst elements of your City demoralize and infect your soldier and sailor visitors and your future draft quotas?” Reformers drew a clear parallel between flourishing commercial vice and treason; if a community was not helping the army then they were helping the enemy. The pamphlet encouraged citizens to “investigate these things in person and let us know.”⁶⁷ In doing so, they essentially turned citizens into a moral police force. Their patriotic fervor would inspire them to action and the CTCA and ASHA could direct their energies from afar.

The federal government recognized the need for widespread social change, and officials relied on the ASHA to provide model laws for a variety of ends. The ASHA provided “Standard Forms of Laws” for Fornication and Adultery, Injunction and Abatement Laws targeting red light districts, Control of Venereal Diseases, impeachment laws for officers whose “moral turpitude” demanded their removal from office, and models for the creation of reformatories for women.⁶⁸ In providing the models to the Army and Navy Departments, the ASHA accomplished one of its major goals; they “found opportunity to render increased assistance to the state and

⁶⁷ William H. Zinsser, "Social Hygiene and the War, Fighting Venereal Diseases a Public Trust" (Box 170, Folder 08), 504. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

⁶⁸ "Standard Forms of Laws, War and Navy Departments" (Box 171, Folder 04), 5. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

federal authorities, at the same time urging Congress to initiate a nation-wide official campaign.”⁶⁹ As communities passed laws based on ASHA models, they affirmed the wishes of the federal government and extended federal policy without extending the federal bureaucracy.

If the military perfected the use of a maternal ideal to inspire the soldier, the domestic efforts of the ASHA and CTCA also perfected the art of using the soldier to inspire the mother. Major William F. Snow, ASHA secretary and head of the national Social Hygiene Bureau, called upon women to influence public opinion and create an environment suited to the needs of a soldier. “Our biggest work is at the ports of embarkation and the camps in France,” Snow said. “It is up to you to look after him further along the line.”⁷⁰ His language shifted the duty from the government to women despite the original governmental impetus for stamping out prostitution. Moreover, in doing so he mobilized the massive networks of women’s groups and voluntary organizations clamoring for a mission. Fosdick recalled an “unhealthy spirit of competition” as societies jostled for the “spectacular and dramatic value” of working as close to the front lines as possible.⁷¹ By framing the home front as a different kind of battleground, reformers and military officials channeled public energy to their own ends.

Despite reformers’ efforts to encourage the participation of local authorities and organizations wherever possible, the looming presence of federal power never faded from sight. Woodrow Wilson demanded loyalty and devotion to the ideals of liberty and justice, but moreover he “earnestly appeal[ed] to all American citizens that they...uphold the laws of the land and give undivided and willing support to those measures which may be adopted by the

⁶⁹ “The American Plan for Concerted Action on the Part of the National & Allied Agencies to Stamp Out VD” (Box 171, Folder 09). 6. American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

⁷⁰ “Women Physicians Will Continue Lectures Here,” *Richmond Times-Dispatch* (April 18, 1919), 18.

⁷¹ Fosdick, *Chronicle of a Generation*, 170.

constitutional authorities in prosecuting the war to a successful issue and in obtaining a secure and just peace.”⁷² If local politics failed to achieve the goals of policing prostitution and addressing venereal disease infections, Wilson asked Americans to support whatever federal legal power proved necessary to achieving military goals.

Military discipline extended well beyond the bounds of military camps. When Philadelphia complained of soldiers and marines hampering efforts to police vice districts, “forty marines with nightsticks” flooded into the area. Rear Admiral Benjamin Tappan, commandant of the Navy Yard, attempted to address the “chaos now exist[ing] in the vice situation in this city.”⁷³ Federal power was not only legal but physical; before the end of the war the government would order military police to force closures of red light districts where legal attempts had failed. General Pershing observed the extensive powers allying themselves with the federal government: “We have the common ground of humanity; we have the well-considered conclusions of the best scientific minds on our side...we have all the elements which will force cooperation between military and civil authorities.”⁷⁴ Though he praised the nature of cooperation in the military endeavor, he also recognized the unique opportunity to force the will of the government upon the populace.

Ultimately, the ASHA and CTCA were successful in its efforts to create a cleaner training camp environs. Fosdick reported “every red light district in the United States had been closed.”⁷⁵ The rate of venereal disease in the army continued to drop throughout America’s participation in the war. Though rumors of bad behavior persisted, the *Stars and Stripes* eagerly

⁷² Woodrow Wilson, “Why We Are At War: Messages to the Congress, January to April, 1917” (New York: Harper and Brothers Publishers, 1917), 65.

⁷³ “16 More Caught in Vice Round-up,” *Evening Public Ledger* [Philadelphia, PA] (July 20, 1917), 13.

⁷⁴ General Pershing, “A Letter from General Pershing,” *Journal of Social Hygiene* 5, No. 1 (January 1919), 124.

⁷⁵ Fosdick, *Chronicle of a Generation*, 147.

reported back “to the fathers and mothers, sisters and brothers, wives, sweethearts, and friends of the men in the American Expeditionary Force...the percentage of venereal disease in this army of yours is three-tenths of one per cent—the smallest percentage on record for any army, or any civil population, in the world’s history.”⁷⁶ A jocular report declared “There is as much chance for vice to creep into Camp Meade as there is for Kaiser ‘Will’ to become Mayor of Philadelphia.”⁷⁷ The partnership of federal agencies and non-governmental organizations had ended in success for anti-venereal campaigns.

The success of the ASHA’s campaign required creating increasingly strong links between venereal disease and the individuals who carried it. Moreover, because prostitutes often carried venereal disease, they became not just a carrier of the enemy but an enemy in and of themselves. According to Harold D. Lasswell, a scholar of propaganda, a major impetus of wartime messages necessarily involved efforts “to mobilize hatred against the enemy.”⁷⁸ As the war fervor continued to escalate, the ASHA and CTCA adopted increasingly militant attitudes and policies. As more military officials contributed to the ASHA *Journal of Social Hygiene*, the journal failed to maintain its original goal of not vilifying venereal disease carriers. “Could the Kaiser Do Worse?” one ASHA broadsheet asked before observing that even if the German leader sent an “army” of German prostitutes into the trenches, they could infect no more men than American prostitutes had already infected.⁷⁹ Direct comparisons between prostitutes and agents of foreign nations became commonplace. As venereal disease grew more and more conflated with prostitution, the message of the ASHA began to change. Where before the ASHA invited anyone

⁷⁶ “To the Folks Back Home,” *The Stars and Stripes* 1, No. 1 (February 8, 1918), 4.

⁷⁷ “Vice is Barred at Camp Meade,” *American Social Hygiene Association Bulletin* 4, No. 9 (September 1917), 5.

⁷⁸ James Robert Mock, *Words That Won the War: The Story of the Committee on Public Information, 1917-1919* (Princeton: Princeton University Press, 1938), ix.

⁷⁹ “Could the Kaiser Do Worse?” (Box 170, Folder 07). American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

to partake in their free clinics without fear of shame or reprisal, the ASHA rhetoric during the war years vilified venereal disease carriers and created enemies out of the individuals it had once seemed most likely to protect.

Militant images and tones swept the country. Publications large and small picked up on the vitriolic language found in the *Journal* and in CPI propaganda. The *Indiana Farmer's Guide* accused venereal disease carriers of “aiding the kaiser.” Noting that prostitution is “the cause of nearly all venereal infections,” the anonymous author went on to say, “Society at large, the state, the city, the town and the individual, all share in the responsibility of eradicating this cancer that is gnawing at society’s vitals.”⁸⁰ Billboards urged citizens to “Fight the Enemy at Home” by visiting free venereal disease clinics.⁸¹ The militant language permeated American rhetoric, and turned consciously towards immediate, physical results in the fight against venereal disease. Major Bascom Johnson—an attorney for the ASHA as well as Director of the Sanitary Corps of the National Army--explicitly linked the campaign against prostitution to the ongoing military conflict abroad. “The Allies in France have been battering their way forward from one line of defense to another,” he wrote. “A similar campaign is being waged in America against commercialized prostitution near military camps.”⁸² By characterizing the ASHA and CTCA missions as inherently related to military combat, Johnson could tap into the patriotic fervor of the nation. He could relate adherence to the new laws and moral standards to patriotic duty, which he did explicitly later in his article: “It should be emphasized that any man or woman who knowingly tempts a soldier or sailor to immorality and, therefore, to run grave risks of infection

⁸⁰ “Venereal Diseases,” *Indiana Farmer's Guide* (July 6, 1918), 7.

⁸¹ Photograph: “Fighting Venereal Disease,” accessed via the American Memory Project, originally from the R.C. Maxwell Company Collection at Rare Book, Manuscript, and Special Collections Library, Duke University, Digital ID: ncdeaa M0064 (<http://hdl.loc.gov/loc.award/ncdeaa.M0064>), accessed on April 15, 2013.

⁸² Major Bascom Johnson, “Next Steps,” in *The Journal of Social Hygiene*, Vol. 4, No. 1 (January 1918), 9.

and incapacity for further service, is a traitor to his or her country.”⁸³ By making the deliberate link between treason and prostitution, Johnson created an enemy in the eyes of the American public.

Rather than viewing prostitutes as carriers of a disease, reformers began to create images of prostitutes themselves as a disease; the dehumanizing rhetoric focused on the health ravages of syphilis and gonorrhea. In an ASHA *Journal* article, Fosdick characterized prostitution as “a disease which cannot be treated symptomatically,” one which would require “violent alterations” if the future of society was to be salvaged.⁸⁴ He also conflated venereal disease and prostitution in the handbook for all incoming soldiers. *Keeping Fit to Fight* asked:

No matter how thirsty or hungry you were, you wouldn't eat or drink anything that you knew in advance would weaken your vitality, poison your blood, cripple your limbs, rot your flesh, blind you and destroy your brain. Then why take the same chance with a prostitute?⁸⁵

In keeping with the escalation of militarization, articles in the *Journal* appeared with increasingly dehumanized portrayals of venereal disease carriers. William Henry Welch was named the head of the ASHA in 1918. His qualifications included a recent appointment as Director “of the new School of Hygiene and Public Health of Johns Hopkins University” as well as his rank as an active “Lieutenant Colonel in the medical corps of the United States.”⁸⁶ Welch’s appointment coincided with the increasing militarization of language in the *Journal*, and alongside his appointment appeared articles by military officials such as Surgeon General W.C. Gorgas, Major General William C. Gorgas, and Colonel F.F. Russell. The ASHA had effectively infiltrated

⁸³ *Ibid.*, 19.

⁸⁴ Raymond Fosdick, “Prostitution and the Police,” *Journal of Social Hygiene* 2, No. 1 (January 1916), 11.

⁸⁵ The American Social Hygiene Association, *Keeping Fit to Fight*, pamphlet authorized and distributed by the War Department and Commission on Training Camp Activities (New York, NY: 1918), 4, 2.

⁸⁶ “William Henry Welch, M.D., LL.D: President of the American Social Hygiene Association” *The Journal of Social Hygiene* 4, No. 1 (January 1918), 1.

government offices with the creation of the CTCA, but the reciprocal relationship demanded previously non-military spaces be turned over to federal use.

Surgeon General W.C. Gorgas compared venereal disease to the destructive force of yellow fever infections. Once medical technicians discovered mosquitoes carried the disease, prevention became a key tactic in dealing with infection. “The destroying of infected mosquitoes and screening was so obviously good that it was easy to convince the authorities that it should be done. It was not so obvious that it was good to destroy all mosquitoes.”⁸⁷ Gorgas went on to say, “For military purposes and the purposes of this war, it would be obviously unwise to wait for any slow process of education. We have to do as we did in yellow fever, load our gun as we would a shotgun and fire at everything in sight.”⁸⁸ Though Gorgas explicitly referenced yellow fever, his implicit meaning left little open to interpretation: if the way to deal with communicable diseases involved eradicating the carrier, then the course for venereal disease treatments should be obvious. His observations underscored two trends in wartime *Journal* issues: in pursuit of immediate efficacy, education seemed increasingly less important to the social reformers. Moreover, any methods of assisting prostitutes as something other than disease carriers took a back seat to removing them from areas surrounding the training camps.

As the war continued, officials struggled to distinguish between policing prostitution and eliminating venereal disease. Though certainly prostitution and venereal disease were related, public boards of health—following in the early example set by the ASHA—tried to showcase public health campaigns as something separate from wholly legal or moralizing efforts to police vice. In Helena, Montana, the Lewis and Clark County Board of Health dismissed a raid on the city’s brothels, declaring “the quarantine procedure under which the arrests were made was not

⁸⁷ W.C. Gorgas, “Venereal Diseases and the War” *The Journal of Social Hygiene*, Vol. 4, No. 1 (January 1918), 6.

⁸⁸ *Ibid.*, 7.

done with the knowledge of the city or county board of health...health regulations are entirely separate from bootlegging and prostitution violations, and should not have any political motives.” The health department decried the policing practices in question, pointing out that the 41 arrested women spent the night in a jail equipped to house 6 women. “The purpose of the venereal law is to check and to treat infection among unfortunates and it is a humane procedure,” the county health official continued. “It is a matter of education and does not contemplate sensational midnight raids.”⁸⁹ Officials attempted to maintain clear distinctions between anti-prostitution policies and anti-venereal polices, partially to keep police and the public from believing prostitutes were the only citizens carrying disease.

The attempt to divorce prostitution and venereal disease may also have been an attempt to provide due process for women in the court of law. While venereal disease carriers could be quarantined, isolated, or committed to institutions, prostitutes and other women law-breakers often had a wider variety of options. Maude Miner, a member of the New York Board of Probation and ASHA contributor, advocated for a tiered system of justice for women. She advocated probation for “younger girls who are physically, mentally, and morally fit to go out into society,” while reformatories offered “some hope of reform as the result of a different environment and of a period of moral and industrial training.” Full or life-time incarceration was meant only for “the more hopeless ones who are so completely enslaved by the life that there is little chance for reform.”⁹⁰ By approaching prostitution in such a way, Miner hoped to provide second chances for many of the young women under her charge.

⁸⁹ “Lewis and Clark County Board of Health Repudiates Action Taken in ‘Midnight Raid’ on South Main,” *The Helena Independent* (September 14, 1919), 2.

⁹⁰ Maude Miner, “Report of Committee on Social Hygiene,” *Journal of Social Hygiene* 1, No. 1 (April 1914), 89.

Miner was another familiar figure among the ASHA publications, and she too moved from her network of regional reform networks onto the national stage once America entered the war. Miner contacted Raymond Fosdick shortly after the creation of the CTCA and offered to create and chair a subcommittee focused on the delinquent girls thronging military cantonments. Miner called her project the Committee on Protective Work for Girls (CPWG) and hoped to build “such safeguards around young girls as would prevent later delinquency.”⁹¹ She staffed her committee with other familiar ASHA names, including Martha P. Falconer and Mrs. John D. Rockefeller. Rather than relying on existing police officials, Miner gathered together over fifty-five female probation officers and police officers to patrol the areas of amusement around the camps.⁹² She acknowledged “carefree happiness...is the right of all girls and young women,” and thus she often returned girls to their homes or found them gainful employment rather than arresting them. For hardened criminals she had less sympathy, but her endorsement of probation rather than arrest formed the foundation of early CPWG policies.

By 1918, however, the military interest in policing camps reached an all-time high alongside the peak in venereal disease infections. As part of a major military appropriations bill, Congress passed the Chamberlain-Kahn Act on July 9, 1918. The act, also known as the American Plan, called for the foundation of the Interdepartmental Social Hygiene Board (ISHB) and the United States Public Health Service Division of Venereal Disease (DOV). The bill also stated: “That the Secretary of War and the Secretary of the Navy are hereby authorized and directed to adopt measures for the purpose of assisting the various States in caring for civilian persons whose detention, isolation, quarantine, or commitment to institutions may be found

⁹¹ *Manual for Field Agents of the United States Interdepartmental Social Hygiene Board* (Washington D.C.; Government Printing Office, 1920), 20.

⁹² “Miss Miner Discusses Plans of the Committee on Protective Work for Girls” *American Social Hygiene Association Bulletin* 5, No. 3 (March 1918), 3.

necessary for the protection of the military and naval forces of the United States against venereal disease.”⁹³ With one million dollars from the federal government—and a flurry of donations from organizations such as the ASHA—the CTCA had the necessary funds to enforce their new police power.

The ASHA greeted the American Plan warmly. It issued a pamphlet declaring its full-fledged support and calling for similar support from its readership. It also confirmed the ASHA role as “a volunteer or non-official organization, national in scope, membership, and endeavor. It is directly cooperating with the government agencies charged with the conduct of the American Plan...The Association often serves as a connecting link between the government agencies and organizations” such as church groups, local social hygiene organizations, the Red Cross, and other clubs and fraternal leagues.⁹⁴ While the ASHA continued to focus on education and on the new connections fostered by the huge funding appropriations, they were not unaware of the punitive policies the American Plan also enabled.

Reformers originally planned to use their federal funding to “build four human reclamation institutions in the eastern, southern, western and northern parts of the United States, to which all prostitutes, convicted in the Federal courts, could be sent for the period of the war.”⁹⁵ Before plans could begin, however, the federal comptroller ruled that funds appropriated by the Chamberlain-Kahn Act could not be used for new construction. The ASHA, ISHB, and the CTCA found the ruling disappointing but agreed that fruitful partnerships might be made using the federal funding to finance local efforts. The CPWG likely approved of the decision,

⁹³ *Manual for Field Agents of the United States Interdepartmental Social Hygiene Board* (Washington D.C; Government Printing Office, 1920), 18.

⁹⁴ “The American Plan,” Publications. Pamphlets. The American Plan, for Concerted Action on the Part of the National & Allied Agencies to Stamp Out VD. (Box 171, Folder 09), 6.

⁹⁵ *Manual for Field Agents of the United States Interdepartmental Social Hygiene Board* (Washington D.C; Government Printing Office, 1920), 18.

because by denying the construction of federal institutions the reformers necessarily turned to local efforts such as those Miner and Falconer described in the pages of the ASHA publications.

The decision not to build federal institutions meant relying on existing reformatories and isolation hospitals to treat venereal disease carriers. Reformatories were often rural institutions which offered vocational training and focused on fresh air treatments. They sometimes existed alongside state industrial schools. The average length of stay in a reformatory was 365 days; at an isolation hospital, women stayed on average for 70 days.⁹⁶ Isolation hospitals often proved more restrictive. Administrators denied patients mail and offered no vocational training. The quality of reformatories and isolation hospitals proved highly subjective. Some boasted clean new buildings while others occupied reclaimed brothels. Some prided themselves on providing phonographs and entertainment; others “found it necessary as well as expedient to employ such measures as guards and barbed wire fences.”⁹⁷ Some accepted women of all races and ages, while others enforced the segregationist tactics common amongst eugenicists; tactics which privileged young white women over those viewed racially inferior.⁹⁸

The Morals Court process in Chicago provides a representative example of the arrest and incarceration process for suspected disease carriers. Immediately after arrest, police took women to a holding facility. In the morning officials took arrested women to be tested for venereal disease at the Iroquois Hospital. The standard test method was a Wasserman blood examination, the results of which took ten days to develop. In the afternoon, accused woman came before a

⁹⁶ Mary Macey Dietzler in *Detention Houses and Reformatories as Protective Social Agencies in the Campaign of the United States Government Against Venereal Diseases* (Washington D.C; Government Printing Office, 1922), 99, 112.

⁹⁷ *Ibid.*, 76.

⁹⁸ *Ibid.*, 3. For more on the persecution of women see Jessica Pliley, *Any Other Immoral Purpose: The Mann Act, Policing Women, and the American State, 1900-1941*. PhD Dissertation, Ohio State University, 2010; Adam Hodges, “‘Enemy Aliens’ and ‘Silk Stocking Girls’: The Class Politics of Internment in the Drive for Urban Order During World War I,” *The Journal of the Gilded Age & Progressive Era* 6, No. 4 (October 2007): 431-458.

judge; the judge usually sent her back to the detention facility to wait for the blood test to be returned. A court study lamented: "The observer is struck forcibly by the practice of long-time continuance...of the one hundred cases there shown only eleven percent were tried without a continuance of more than ten days."⁹⁹ Although the practice of not immediately indicting an accused woman was theoretically to preserve her honor should the blood test return negative, the legal process failed to protect women. The exploitative nature of the Morals Court involved incarceration without fair trial. Moreover, if the test came back positive, a judge could send a woman to an isolation hospital or reformatory without a formal charge being brought against her, effectively denying the accused her right to due process. Here the link between venereal disease and prostitution became most apparent; officials assumed those who carried either syphilis or gonorrhea were prostitutes and persecuted them as such. Reformers in effect criminalized venereal disease during the war, leaving no room for nuance in the social and sexual mores.

ASHA reformers viewed the more punitive aspects of the war work with varying degrees of distaste. Fosdick commented, "I would have preferred to have the positive side of our work take precedence over the negative aspects, but there was no choice, and we were launched into a resounding battle."¹⁰⁰ Maude Miner, so long determined to protect women from men and vice, found her work in direct conflict with the new focus on incarceration. Though designed to be an independent committee focused as much on education as repression, Fosdick moved the CPWG under the Division of Law Enforcement, thus enabling the incarceration of women wholesale by removing the protective stopgap of probation officers.¹⁰¹ The increasing demand for results translated into an extension of repressive techniques in the fight against venereal disease.

⁹⁹ George E. Worthington and Ruth Topping, *Specialized Courts Dealing with Sex Delinquency* (Montclair, NJ: Patterson Smith, 1969, reprint of 1924), 19.

¹⁰⁰ Fosdick, *Chronicle of a Generation*, 145.

¹⁰¹ Bristow, *Making Men Moral*, 116, 126.

Historian Barbara Meil Hobson writes: “ultimately [policewomen] had to choose between the rights of women and the protection of soldiers.” Left with little recourse, Miner resigned. She retracted her support of the CTCA in a private letter, rejecting an organization which valued the well-being of soldiers over the rights of women.¹⁰²

Many reformers, however, viewed their accomplishments with pride and a sense of accomplishment. Delighted with their own achievements, many attempted to capitalize on their successes by observing: “The national crisis has roused the social conscience and quickened the imaginations of men and women to see and fill certain great gaps in our national life. This should not be a temporary movement.”¹⁰³ One poster featured a young American soldier with an eagle perched on his shoulder. “You kept fit and defeated the Hun,” it read, “Now set a high standard for a clean America” (see figure 3). The United States Public Health Service Secretary William McAdoo wrote to state government asking them to protect soldiers returning home. One Oregon newspaper noted the inevitability of some war programs being

abandoned during peacetime, but begged its readership to not abandon anti-venereal policies: “Don’t scrap your patriotism and community spirit in this matter. Make your blows knockouts against vice. There should be no peace with prostitution, no truce with the red light district, no



Figure 3: Ernest Fuhr, “You Kept Fit and Defeated the Hun.” Library of Congress Prints and Photographs Division Washington, D.C.

¹⁰² Hobson, *Uneasy Virtue*, 166, 175.

¹⁰³ “Note and Comment,” *Journal of Social Hygiene* 1, No. 3 (June 1915), 502.

armistice with venereal disease. Unconditional surrender is the government's demand from this enemy at home."¹⁰⁴ Though the Armistice brought an official end to the war in November of 1918, the fight for sexual health in America seemed willing to continue.

Not all reformers approved of the marriage between war and social hygiene. Thomas Eliot warned "Let not social hygiene be too exclusively associated with war and military efficiency, lest it impair its opportunity to influence and protect the normal family after the war is over."¹⁰⁵ His cautionary admonition proved telling. The CTCA disbanded shortly after the international armistice in 1918. Federal administrators cut funding for venereal disease projects. By 1921 the ISHB was all but defunct, though the DOV survived until 1943. In its final report, ISHB reformers hoped that many of the detention houses and reformatories would be maintained by state efforts, but the federal campaign came to an end.¹⁰⁶

The ASHA, however, emerged from the war years invigorated and eager to continue the vice fight. They continued to use many of the militant themes which had so entranced the American populace during 1917 and 1918. One pamphlet compared the lurking danger of venereal disease to unrestricted German submarine warfare. In an attempt to disabuse the American public of any lingering doubts, the pamphlet boldly asserted: "MORE THAN FIVE-SIXTHS OF THE VENEREAL CASES TREATED IN OUR NATIONAL ARMY WERE BROUGHT IN FROM CIVIL LIFE." Though the ASHA relied on images of warfare to inspire fear, they also used the opportunity to remind citizens of their obligations: "Every business and fraternal organization and all civil authorities must take steps not so much to protect the general

¹⁰⁴ "U.S. Continues Fight For Healthier Nation," *Rogue River Courier* [Grants Pass, OR] (December 10, 1918), 2.

¹⁰⁵ Thomas D. Eliot, "Possible Effects of War Upon the Future of the Social Hygiene Movement" *The Journal of Social Hygiene* 4, No. 2 (April 1918), 219.

¹⁰⁶ *Report of the United States Interdepartmental Social Hygiene Board* (Washington, D.C; Government Printing Office, 1922), 3.

public from the soldier, as to protect the soldier from the surroundings he will encounter on his return to civil life.” The war may have come to its official end, but the ASHA exhorted Americans to continue the fight.¹⁰⁷

The ASHA’s success in protecting enlisted men came at the expense of women infected with venereal disease. As the legal sanctions against disease carrying grew more and more stringent, it would be women who bore the brunt of the punitive policies enacted by the CTCA and ASHA. Though framed as policies of utmost military necessity, the widespread arrest and incarceration of women venereal disease carriers had a transformative effect on the ASHA and on its federal partnerships.

¹⁰⁷ Emphasis original. “V.D. U-Boat No. 13,” (Box 170, Folder 10). American Social Health Association Records, 1905-1990 (SW 45). Social Welfare History Archives, University of Minnesota Libraries.

Conclusion

In the second decade of the twentieth-century, the ASHA enjoyed a meteoric rise to power. Their partnership with the federal government resulted in new standards of sexual health for all citizens. By 1918 the ASHA had published over twenty-five million pamphlets, hundreds of thousands of posters, and twenty-five hundred pages in their academic journal. The reach of their message transcended national borders and reached to every corner of the United States from Alaska to Hawaii. The ASHA recorded hundreds of new laws regulating venereal disease and, for the first time, Americans seemed poised to address syphilis and gonorrhea without stigma.

The successes of their movement, however, are difficult to determine qualitatively. By 1917, a Missouri woman could count on public outrage and legal support when filing for divorce because her husband created “indignities such as to render her condition in life intolerable... [by] contract[ing] a venereal disease.”¹ In 1920, social reformers gathered in the hundreds to participate in the first National Conference on Venereal Diseases. One organizer commented euphorically: “The dynamic thing... bigger far than the Institute itself, is the fact that at last the American people have shaken off their cowardice, opened their eyes to menacing facts and begun to combat intelligently instead of fearing ignorantly.”² A sense of accomplishment accompanied the ASHA campaigns against venereal disease, at least for some reformers.

Some viewed the sexual health policies of the First World War with a more cynical gaze. Margaret Winfield Stewart, Staff Writer for the Federated Press, penned an irate editorial which ran in the *Butte Daily Bulletin* in 1920. She railed against laws which created in “the legislative mind” a connection between “morals” and “woman.” Her editorial was a direct response to a

¹ “Order of Publication,” *The St. Joseph Observer* [St. Joseph, MO] (January 06, 1917), 3.

² “Milwaukee Delegates Endorse Public Health Institute,” *The American Social Hygiene Bulletin* (February 1921), 9.

South Carolina law which declared any woman infected with a venereal disease “a nuisance to the public health [to] be kept confined.” Stewart sharply criticized such legal language, which conflated women with morality and freed men from similar legal persecution. “The number of times the word ‘woman’ is repeated throughout the act is so great as to suggest the idea of panic in the drafter’s mind for fear something enforcing the law might have some doubt as to his intention.”³ Another journalist observed, “Every one of these laws has been devised, written and enacted in the identical spirit with which the Puritans in Massachusetts branded the red letter on the scarlet woman.”⁴ Laws written in such a fashion did not uphold the social vision of the ASHA, which demanded moral behavior of both men and women, but it represented a legal reality coming out of the First World War. The criminalization of venereal disease—and the resultant incarceration of thousands of women—revealed a standard of policing sexual health where women bore the punitive burdens.

The ASHA’s power continued to rise throughout the twentieth century. It switched to monthly publications for *The Journal of Social Hygiene* and enjoyed continued financial support from philanthropists such as John D. Rockefeller. The cooperation fostered by war outlasted the battles; in 1920 the National Red Cross donated \$10,000 to the ASHA for the development of a traveling exhibit on sex hygiene. The project represented an effort “to demonstrate to the people a constructive method of dealing with the control of venereal disease as part of a nation-wide health campaign.”⁵ Throughout the 1930s the ASHA continued its public educational campaigns and endorsement of legal reform. In 1941 it again partnered with the federal government and military in a renewed campaign of “Blitzing the Brothels,” borrowing again the violent rhetoric

³ Margaret Winfield Scott, “Fine Discrimination,” *The Butte Daily Bulletin* [Butte, MT] (June 22, 1920), 3.

⁴ “What Shall We Read?” *Journal of Social Hygiene* 1, No 1 (April 1914), 149.

⁵ “With American Red Cross Here and Abroad,” *Mohave County Miner and Our Mineral Wealth* [Mojave, AZ] (February 14, 1920), 5.

of war to encourage participation and obedience.⁶ In 1960 its name changed to the American Social Health Association. As of 2014, it continues to operate under that name.

The legacy of the ASHA in the World War I era is a legacy of rising police power. The ASHA engineered opportunities for the federal government to exercise unprecedented control over the sexual health and private lives of American citizens. The incarceration of fifteen thousand women during the war is but one example; over the course of the first half of the twentieth century, more than 70,000 individuals suffered forced sterilization in the United States.⁷ In 1973, the Supreme Court affirmed the right of the government to determine access to sexual health care by ruling in the case of *Roe v. Wade*. In 2011, lawmakers considered a record-breaking 92 legislative acts somehow limiting women's access to abortion and other women's health care services.⁸ In 2013, *The Los Angeles Times* reported the unlawful sterilization of at least 148 women in the California prison system, many of whom underwent the procedure involuntarily.⁹ The United States government continues to police the sexual health of its citizens, and often women bear the brunt of its legislative attention.

"It is rather amusing," Stewart remarked to the readers of the *Butte Bulletin*, "to find the exponents of 'personal liberty'" attempting to forgive their own immoral personal habits but demanding "control of women's personal habits as a matter of course." Stewart went on to assert: "The question 'are women people' has not yet been determined in the affirmative, and the legislative attitude of treating women as irresponsible wards of the masculine half of the world is just as apparent as ever."¹⁰ The ASHA played a role in sculpting the legislative and social

⁶ Harry Cain, "Blitzing the Brothels," *The Journal of Social Hygiene* 29, No. 9 (December 1943), 594.

⁷ Nancy Ordovery, *American Eugenics: Race, Queer Anatomy, and the Science of Nationalism* (Minneapolis, MN: University of Minnesota Press, 2003), 134.

⁸ Rachel K. Jones and Jenna Jerman. "Abortion Incidence and Service Availability in the United States, 2011." *Perspectives on Sexual and Reproductive Health* 46.1 (2014): 3-14.

⁹ "Female Inmate Surgery Broke Law," *The Los Angeles Times* (July 16, 2013), 4.

¹⁰ Scott, "Fine Discrimination," *The Butte Daily Bulletin* [Butte, MT] (June 22, 1920), 3.

perceptions of sexual health in the Progressive Era. They provided education and medical care, placing the fight against venereal disease into the field of public reckoning. The ASHA's call to action would echo throughout the rest of the century, raising important questions about the rights of the individual and the limitations—if any—of the state in policing the sexual health of its citizens.

Glossary of Organizations

- (AEF)** American Expeditionary Force
- (ASHA)** The American Social Hygiene Association
- (ASSMP)** The American Society of Sanitary and Moral Prophylaxis
- (AVA)** The American Vigilance Association
- (BSH)** The Bureau of Social Hygiene
- (CTCA)** The Commission on Training Camp Activities
- (CPWG)** The Committee on Protective Work for Girls
- (DOV)** United States Public Health Bureau, Division of Venereal Diseases
- (ISHB)** The Interdepartmental Social Hygiene Board

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The Ellensburg Dawn (Ellensburg, WA)
The Evening Public Ledger (Philadelphia, PA)
The Helena Independent (Helena, MT)
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