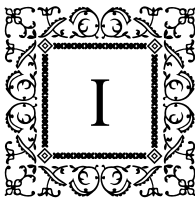


Models of Masculinity: Sex Education, the United States Public Health Service, and the YMCA, 1919–1924

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ABSTRACT. In 1918, the U.S. Public Health Service (PHS) told American parents that “it is no longer possible for you to choose whether your child will learn about sex or not.” According to the PHS, most American boys learned about sex from “improper sources” by the age of nine. The “unfortunate effect of these early impressions” had, PHS warned, not only resulted in a gross misunderstanding of sex, but also been a major factor in the spread of venereal disease (*The Parents’ Part* [the U.S. Public Health Service, 1918], p. 5). To counter and correct this miseducation, PHS joined with the Young Men’s Christian Association (YMCA) to create a sex education program aimed at adolescent boys. Officially launched in the spring of 1919, the “Keeping Fit” campaign provides a unique insight into the federal government’s attempt to medicalize and regulate American sexuality through the forum of public health. **KEYWORDS:** adolescence, public health, sex education, the United States Public Health Service, venereal disease, Young Men’s Christian Association (YMCA).



IN October 1919, a group of adolescent boys attended a lecture at the Camden, New Jersey Young Men’s Christian Association (YMCA). The evening was billed as an educational one—the boys were to be shown a poster exhibit entitled “Keeping Fit” and then asked to participate in a “healthy boxing bout.”¹

1. Report from William Partenheimer, Camden New Jersey YMCA, October 1919, YMCA File, New Jersey Folder, Box 281, General Records of the Venereal Disease Division, 1918–1936, Record Group 90, Records of the Public Health Service, National Archives, Washington, D.C. (hereinafter NA). All materials cited from the National Archives, Washington, D.C., are from Record Group 90, General Records of the Venereal Disease Division, 1918–1936. The PHS records are currently housed in the Archives II facility in College Park, Maryland.

Although the title of the exhibit—Keeping Fit—may have led some attendees and their parents to believe that the focus of the evening would be on the benefits of physical activity, the organizers of the event saw the evening in a very different light. Keeping Fit was to be the first salvo in a government-sponsored sex education program. Created by both the U.S. Public Health Service (PHS) and the YMCA, the Keeping Fit campaign was intended to address what Surgeon General Rupert Blue called “the urgent need for social hygiene education . . . in the years of early adolescence.”² The program that emerged in response to this demand proved to be, at least for these organizations, an innovative health campaign. Reflecting both the structure and concerns of postwar American society, Keeping Fit also provides a unique insight into the federal government’s attempts to medicalize and regulate American sexuality through the forum of public health.

BACKGROUND

For both the PHS and the YMCA, “the urgent need” for sex education had been graphically demonstrated by a series of studies done in 1917 and 1918. Done under the aegis of the YMCA, these studies had indicated that “a large majority of boys [got] their first impressions about sex from improper sources before the age of twelve.” Was it any wonder, PHS asked, that young men who derived their sex education from a “vast underground operation [of] . . . unreliable gossip . . . quack doctors and . . . lurid motion pictures” were prey to the worst sorts of temptations such as masturbation and easy women?³ Was it any surprise that a lack of “clean [and] helpful information” caused “needless worry and suffering . . . over such normal processes as nightly emissions?”⁴ And, even worse yet, was it any wonder that poor sex education had resulted in the “hidden submarine attacks” of venereal disease?⁵

The concerns of PHS about the status of American sex education were not completely misplaced. The early decades of the twentieth century had seen the rise and emergence of, if not a “vast underground

2. Rupert Blue to E. M. Robinson, 3 March 1919, Van Dis Correspondence Folder, Box 288, NA.

3. *The Problem of Sex Education in Schools* (Washington, D.C.: The Public Health Service, 1918), p. 4.

4. *Ibid.*, p. 6.

5. *A People's War* (Washington, D.C.: The Public Health Service, 1919), p. 2.

operation,” then what was certainly an extensive number of sex programs, films, and literature masquerading as sex education. Much of this material, PHS believed, was “so wrong from a medical and psychological standpoint that it might work real harm” on boys and young men who viewed it. Sexploitation films, such as *The Solitary Sin*, that told the story of a man whose masturbation ultimately leads him to kill his wife, were especially dangerous because PHS believed that they might cause “mental depression and [a] loss of confidence” among boys who indulged in masturbation—as opposed to a desire to reevaluate and cease this behavior.⁶ Films such as *The Spreading Evil* and *Some Wild Oats* were criticized in equally harsh terms, with *Some Wild Oats* being pulled before it could even be put into general circulation because of its sensationalist nature.⁷ By 1919, concerns regarding these films had risen to such an extent that the U.S. Interdepartmental Social Hygiene Board provided a grant of \$6,600 to investigate “the informational and educative effect upon the public of certain motion-picture[s] . . . used . . . [in] the control, repression and elimination of venereal diseases.”⁸ The grant specifically addressed the question of whether these films sensationalized venereal disease “without stressing the moral aspects of the problem”⁹—an obvious reflection of the government’s fear that film makers were exploiting sex education films to convey an inappropriate message.

Fears regarding the use of sex education as pornography were not, however, limited to films. Equally disturbing, at least in the eyes of PHS and public health advocates, were the ubiquitous “medical shows” in which quacks lured the prurient with titillating displays and promises of quick cures for real or imagined sexual diseases. Advertisements that provided misleading information regarding the causes of venereal disease and the effects of masturbation were also viewed as dangerous forms of misinformation.¹⁰ Overall, the widespread availability of these misleading programs and films meant that a corrective was much needed.

6. C. C. Pierce to A. A. Surgeon D. J. Jacobson, 22 April 1919, State Board of Health File, Iowa Folder, Box 279, NA.

7. Theodore Blank, “An Historical Survey of the Development of the Use of Audio-Visual Materials in Venereal Disease Educational Programs, 1900–1949” (Ph.D. dissertation, Boston University, 1970), p. 316.

8. Karl S. Lashley and John B. Watson, “A Psychological Study of Motion Pictures in Relation to Venereal Disease Campaigns,” *J. Soc. Hygiene*, 1921, 7, 2, p. 181.

9. *Ibid.*, p. 186.

10. PHS’ concerns regarding quack advertisements included a campaign to encourage all magazines to reject these advertisements. Charles V. Herdlika, “Educational and Medical

Of course, not all of the available sex education was “wrong from a medical and psychological standpoint.” Some sex education programs and films *did* fit the PHS standard of “clean and helpful information”; but, in assessing these programs, PHS recognized that “people do not go to a moving picture show to be educated . . . they go for amusement.”¹¹ In West Virginia and Wisconsin, for example, two PHS-approved sex education films, *Fit to Win* and *Open Your Eyes*, were advertised in highly sensationalistic terms, with *Fit to Win* being described in a West Virginia newspaper as “a Naked Dramatic Revelation of Sex [and] Truth Combined with a Gripping, Heart Throbbing Love Story,” whereas advertising for *Open Your Eyes* was so sensationalist that “people go to see it in a very wrong attitude of mind.”¹² Clearly, the promoters of these films were more interested in providing entertainment than education.¹³

To counter both the exploitation of good sex education as well as the misinformation provided by quacks, the PHS believed it should provide information on “the whole process of reproduction and nurture of children, the meaning of marriage, prostitution, venereal diseases, illegitimacy and the hygiene of sound recreation . . . at appropriate periods from early childhood to mature manhood and womanhood.”¹⁴ With this in mind, PHS launched a series of sex education campaigns aimed at the general public. Initiated in the wake of World War I, these campaigns also reflected concerns that had emerged during the war. Paramount among these was the belief that high levels of venereal disease could be found throughout American society.¹⁵ According to PHS, the repercussions of this venereal epidemic could be found everywhere—in “industrial inefficiency, poverty . . . graft, exploitation of women, blindness, deformity, disgrace, suffering, insanity

Campaign of the Division of Venereal Diseases During the Fiscal Year Ended June 30, 1919,” *Public Health Rep.*, 34, 41, p. 2246.

11. W. C. Rucker, “The Health Education of the General Public,” *J. Am. Med. Assoc.*, 1916, 67, p. 1408.

12. Newspaper excerpt [undated but from 1919], State Board of Health File, West Virginia Folder, Box 283, NA; Earl W. Brandenburg to J. A. Van Dis, 29 May 1919, YMCA File, Wisconsin Folder, Box 283, NA.

13. Many moralists and reformers were reluctant to view film as having any possible educational benefit—especially for children. David Nasaw, “Children and Commercial Culture: Motion Pictures in the Early Twentieth Century,” in Elliot West and Paula Petrik, eds., *Small Worlds: Children and Adolescents in America, 1850–1950* (Manhattan: University Press of Kansas, 1992), p. 15.

14. PHS, *The Problem of Sex Education in Schools*, p. 7.

15. Allan M. Brandt, *No Magic Bullet: A Social History of Venereal Disease in the United States Since 1880* (New York: Oxford University Press, 1987, Expanded Edition), pp. 9–17.

[and] death.”¹⁶ Only by ridding America of venereal disease could the nation be elevated and its social ills be eliminated.

Recognizing that the eradication of venereal disease and its attendant social ills required a multifaceted approach, PHS cast its sex education campaign in the broadest terms. Targeted individuals included teachers, political leaders, youth workers, parents, social workers, adolescents, and young children. Reaching this varied audience demanded a range of tactics, and the government’s overall sex education initiative had several components: teacher education via summer schools, the coordination of community efforts to eradicate “vice” (prostitution), the creation of literature aimed at young children and their parents and, finally, the development of sex education programs for adolescents, especially male adolescents. This broad approach to education, as well as the more fundamental belief that education could alter sexual behavior, was not unique to PHS or the YMCA. Almost all organizations that launched sex education programs during this period—from the American Social Hygiene Association to the Boy Scouts—believed that education could be instrumental in shaping sexuality.

For this reason, Keeping Fit, which focused on the young, was, in many ways, the most important aspect of the PHS initiative. Since the mid-nineteenth century, “the central target of . . . prescriptive literature [had been] young men.”¹⁷ As Jeffrey Moran has pointed out, concerns regarding adolescence, specifically male adolescence, had greatly intensified during the early twentieth century. Several factors, among them, rising ages for marriage, the declining age of puberty and finally, the expansion of the educational system and its corollary, the creation of a segregated child’s world, all made the control of adolescent sexuality an absolute imperative.¹⁸ Further intensifying these concerns was the emergence of a youth-based flapper culture that seemed to be at war with traditional values.

Although concerns over adolescent sexuality had escalated in the early twentieth century,¹⁹ they were not completely unique to this

16. PHS, *A People’s War*, p. 15.

17. Jeffrey Moran, *Teaching Sex: The Shaping of Adolescence in the Twentieth Century* (Cambridge, Mass.: Harvard University Press, 2000), p. 12.

18. *Ibid.*, p. 15; David I. Macleod, *The Age of the Child: Children in America, 1890–1920* (New York: Twayne Publishers, 1998), pp. 139–48.

19. The strong association between adolescence and sexuality does not appear to have been consistent throughout the twentieth century. Although physicians were concerned about sexual characteristics and gender stereotyping during the 1950s, they do not appear

period. During the nineteenth century, new definitions of childhood as a period of innocence and asexuality had sought to separate children from the corrupt and sexual world of adults. As the transition point between childhood and maturity or innocence and corruption, puberty came to be widely regarded as one of the most dangerous periods in an individual's life. Rigid self-control, especially of sexuality, was essential if the child was to emerge unscathed from this. Unfortunately, not all children managed to maintain the necessary level of self-control during this period—as Kathleen Jones points out, child advocates “saw in many of the nation's children not goodness but signs of the ailments of a rapidly changing society—generational stress, urban living, industrial poverty, ethnic diversity and multicultural standards of behavior.”²⁰ The “troublesome child,” as Jones characterizes these children, provided social workers, physicians, parents, youth workers, and teachers with a grim reminder of the dangers that confronted children and adolescents in particular. This emphasis on the aberrant child, as well as Freud's visit to America in 1909, gradually led a growing number of reformers and laypeople to reassess the idea of childhood as a period of innocence. By the 1920s, many educators and health professionals were not only willing to admit that children had sexual feelings, they were also prepared to confront these urges. This does not mean, of course, that parents and educators felt comfortable discussing adolescent sexuality—they were not. However, the emergence of sex education campaigns by organizations as varied as the American Social Hygiene Association, the Boy Scouts, local school boards, and various Christian youth groups would seem to indicate not only a willingness to address the issue of adolescent sexuality, but also a belief that the issue needed to be addressed.

CREATING KEEPING FIT

To address these concerns, PHS launched a campaign that they called “Keeping Fit.” Funded by the Chamberlain-Kahn Act of 1918, which provided money for the eradication of venereal disease, the campaign was to be created by PHS, but paid for and distributed by state boards

to have been overly concerned about sexual *desire* among adolescents. Heather Munro Prescott, *A Doctor of Their Own: The History of Adolescent Medicine* (Cambridge, Mass.: Harvard University Press, 1998), p. 57.

20. Kathleen Jones, *Taming the Troublesome Child: American Families, Child Guidance and the Limits of Psychiatric Authority* (Cambridge, Mass.: Harvard University Press, 1999), p. 17.

of health with help from the YMCA. State departments of education were also asked to participate in the campaign by allowing lecturers open access to schools.

Although the support of both state boards of health and departments of education was crucial, PHS looked to other volunteer organizations for assistance on the campaign. Rotary clubs, the Boy Scouts, and women's clubs were encouraged to participate in the broader sex education campaign sponsored by PHS, but it was the YMCA that played the central role in Keeping Fit's success and, ultimately, its failure. Unlike Rotary Clubs and women's clubs, the YMCA focused on boys and young men, making it a natural partner for Keeping Fit. And, unlike the Boy Scouts, the YMCA was an established and older organization with a proven track record in boy's programs. The YMCA's role was clearly spelled out in the fall of 1918, when a series of contracts between the various state YMCAs and PHS were drawn up authorizing the YMCA to distribute the Keeping Fit material in schools and through local YMCAs. These contracts did not make the YMCA an equal partner with PHS. The YMCA was simply to provide access to boys, funding, and, whenever necessary, foot soldiers for the cause. All of the material that was to be used in the campaign was to be sent out under the PHS name, and the campaign itself was always linked to the PHS. The primacy of the PHS in this campaign was undoubtedly a reflection of the expansion of the PHS mission during this period.²¹

PHS had a variety of reasons for using the YMCA as their partner in this campaign. First, the YMCA had a history of promoting sex education for male adolescents.²² Second, the YMCA was organized on a nationwide level with state and district regions, all of which made it easy to coordinate a nationwide campaign that was to focus on local communities. Third, the YMCA had already worked with both state boards of health and federal agencies on public health campaigns.²³ Finally, and perhaps most importantly, the YMCA was prepared to fund directly a substantial amount of the campaign by paying

21. Fitzhugh Mullan, *Plagues and Politics: The Story of the United States Public Health Service* (New York: Basic Books, 1989), p. 82.

22. C. Howard Hopkins, *History of the Y.M.C.A. in North America* (New York: Association Press, 1951), pp. 385–86; Nancy Bristow, *Making Men Moral: Social Engineering during the Great War* (New York: New York University Press, 1996), p. 33.

23. See, for example, Earl Brandenburg to J. A. Van Dis, 22 December 1919, YMCA File, Wisconsin Folder, Box 238, NA.

the salaries of the men assigned to PHS; indirectly, the YMCA was also prepared to fund the campaign both by using their paid staff to recruit lecturers and by providing facilities and equipment for the lectures. In picking the YMCA as their partner, PHS seemed to have no real qualms about the use of what would later come to be called a “faith-based” organization to further its goals.

The YMCA’s reasons for cooperating with PHS were no less calculated. Internal documents indicate that the YMCA was struggling with its mission throughout the first decades of the century. Competition from organizations such as the Boy Scouts as well as heated debates regarding the YMCA’s religious objectives had led many directors to search for ways both to recapture their membership and redefine themselves and their mission.²⁴ The PHS campaign and its push to educate all male adolescents, Christians and non-Christians, on the nature of moral sexuality was, in many ways, tailor-suited to the new YMCA, one that placed its primary emphasis on health and morality, as opposed to Christianity.

KEEPING FIT

As created by both PHS and the YMCA, the campaign actually had two components, a program for white boys and one for African-American boys. Both of these programs were entitled Keeping Fit and both were aimed at boys between the ages of twelve and twenty. However, the Keeping Fit campaign for white boys should be viewed as the more critical of the two. First, the program for whites was the first to be created and, as such, it provided the model for all later versions. Second, although sexuality was usually defined in terms of race, evidence indicates that the Keeping Fit program for white boys was actually used to educate many African-Americans. Third, the late launch of the Keeping Fit program for African-American boys meant that it reached only a small audience. Finally, the Keeping Fit program and the entire push by PHS to educate male adolescents was intended to provide for the salvation of the race, *specifically the white race*.²⁵

24. For a discussion of the decline of religion in the YMCA, see Hopkins, *Y.M.C.A.*, pp. 590–91.

25. Nancy Bristow maintains that the sluggishness in providing sex education for African-Americans was the result of a belief that African-Americans were fundamentally ineducable. Bristow, *Making Men Moral*, p. 157.

Intended, then, for white males between the ages of twelve and twenty, Keeping Fit was written and developed not by members of PHS, but by two YMCA youth directors who were assigned to Washington to work with PHS. Clark Hagenbuch, who initiated the writing of the campaign, was a physician who specialized in physical education. His colleague and the real architect of the campaign, J. A. Van Dis, was a youth director who had worked on a range of YMCA activities, everything from war relief work to thrift savings programs. Although the campaign was clearly conceived of as a form of sex education, Van Dis and his PHS co-workers preferred to describe Keeping Fit as “a physical fitness” program both among themselves and when speaking to the general public. This reluctance to address sexuality directly was evident not only in discussions of the program, but also in the structure of the exhibit itself. Keeping Fit consisted of forty-eight panels (or lantern slides in the slide version of the exhibit). As was typical of other earlier health campaigns such as those conducted by the National Tuberculosis Association, “moralistic appeals were . . . combined [in each panel] with more direct, fear-based warnings about the consequences of carelessness.”²⁶ To emphasize this point, the exhibit drew on new advertising techniques to combine images with brief slogans or captions, with each panel focusing on one aspect of the venereal disease menace. The first six panels highlighted the importance of physical activity, the next five panels discussed proper eating and bathing, and the final thirty-five panels explored the issue of both sexuality and disease.

Although images of sports and training dominated the campaign, the first panels used these images exclusively. To some degree, this emphasis on training was derived from an early precursor to the Keeping Fit campaign, which had been created for recruits during World War I. But because PHS significantly altered the original Keeping Fit to render it more suitable for adolescent boys in a peacetime society, the retention of these images should be viewed as a deliberate decision by both Van Dis and PHS. This raises the question then of why PHS and Van Dis felt it so important to use the metaphor of sports to discuss human sexuality. Nancy Bristow points out that many reformers viewed sports as a means of civilizing and homogenizing the

26. Nancy Tomes, *The Gospel of Germs: Men, Women and the Microbe in American Life* (Cambridge, Mass.: Harvard University Press, 1998), p. 119.

country's increasingly diverse population²⁷—a sentiment that Van Dis, who worked on Americanization programs with the YMCA, clearly shared. Training and playing hard also entailed the idea of sacrifice and constant vigilance, messages that PHS approved because they were tied to the idea of sexual control. Equally importantly, training exercises could also be interpreted to include “chopping wood, mowing lawns, shoveling snow and gardening.” This focus on household chores undoubtedly stemmed from fears regarding the growth of leisure for adolescents. In the world of *Keeping Fit*, boys turned their excess energy and free time to good purpose, thereby assuaging fears that boys would loiter and consort with the “wrong crowd.”

The next five panels, which focused on proper eating, sleeping, and bathing assumed that all American boys had access to—or would soon have access to—middle-class comforts. Boys whose families lacked modern bathrooms could, *Keeping Fit* informed them, aspire to “Equipment Everyone Can Hope to Afford” in the near future. But even with such simple implements as “warm water and soap, cold water [and] . . . a coarse towel,” any boy could assume the outward respectability associated with the middle-class lifestyle. Not all boys had a bedroom with access to a window and fresh air, but by advocating this, PHS underscored the importance of middle-class accoutrements and values.²⁸ Yet, for all its emphasis on what many members of the working class might have viewed as luxuries, PHS was not advocating or encouraging the adoption of affluent lifestyles. It was moderation, PHS insisted, that was the real key to good health. Food, water, medication, and even bowel movements could—and should be—regulated and regularized. Control of the body, PHS believed, was the first step in providing morality and health, but control was also a first step toward inculcating values that had traditionally been associated with the American middle class. Health education was to provide, in other words, a form of moral uplift for the working class.

In the final segment, which discussed sexuality and disease, the focus here was on the germ aspect of venereal disease. Using images of “the germs of gonorrhoea . . . [and] syphilis as seen through the microscope,” viewers were encouraged to “observe . . . the interior

27. Bristow, *Making Men Moral*.

28. This emphasis on fresh air was, of course, tied to prevailing ideas regarding ventilation and the spread of germs. Tomes, *The Gospel of Germs*, p. 59.

of the diseased body.”²⁹ This use of microscopic images served several purposes. First, this type of imagery was, as Robert Eberwein points out, common in both sex education lectures given to military recruits during World War I as well as sex education films such as *Fit to Fight*; thus, it was familiar to and readily understood by audiences.³⁰ Second, because “growing numbers of American men and women were coming to fear more [and more] acutely the hazards of the germ,” Keeping Fit’s discussion of the “germs of gonorrhoea [and] syphilis” undoubtedly inflamed existing concerns regarding both the ease with which venereal diseases spread, as well as the virulence of these “germ” diseases.³¹

Venereal disease itself is referred to in vague and often dire terms, with women and men who engage in sex out of wedlock all being cast as carriers of the disease. There are no real explanations as to how reproduction works or what sexual maturity entails. Overall, the PHS discussion of sexuality was so elliptic that boys who lacked a prior knowledge of the “facts of life” would be unlikely to learn the basics of human reproduction from viewing the exhibit. Although remarkable by modern standards for its failure to address sexuality, the reticence displayed by the organizers of Keeping Fit was typical of most sex education campaigns during this period.³²

This deliberate downplaying of sexuality was, both PHS and the YMCA believed, essential if the program was to gain the support of parents and local communities. For both Van Dis and PHS, the balance between discretion and education was always to be tipped more toward discretion, although both genuinely believed that they were seeking to maintain a fine balance. Discretion was to be maintained through the “silent lecture.” Basically, the silent lecture meant no lecture. As Van Dis put it, “the slides and charts [used in the exhibit] speak for themselves.”³³ Boys would watch the slides or walk through

29. Panel 34, *Keeping Fit* (Washington, D.C.: The Public Health Service, 1919); Robert Eberwein, *Sex Ed: Film, Video and the Framework of Desire* (New Brunswick, N.J.: Rutgers University Press, 1999), p. 29.

30. *Ibid.*, pp. 29–30.

31. Tomes, *The Gospel of Germs*, p. 158.

32. See, for example, *The Boy Problem* in which the American Social Hygiene Association recommended that, “it is well to avoid the word ‘sex’ when discussing reproduction” and which recommended that parents “avoid ‘going into too much detail’ when discussing reproduction.” *The Boy Problem* (American Social Hygiene Association, 1920), p. 14.

33. J. A. Van Dis to F. A. Stanley, 20 February 1919, YMCA File, Connecticut Folder, Box 278, NA.

a poster version of the exhibit in complete silence, while the presenter was equally mum on “the medical and physiological aspects of the subject.”³⁴ In rural areas, the silence was even more deafening as boys were simply given a pamphlet version of the exhibit and asked to take it home to read. Thus, to combat what they termed the “silence and evasion . . . [which gave] the wrong kind of education,”³⁵ PHS offered an alternative form of silence. This type of dichotomy—the push to initiate an open discussion about sex through a closed forum—colored the entire campaign.

To some degree, this “conspiracy of silence,” as Allan Brandt terms it, was typical of sex education campaigns during the period immediately after the war. Although the urgency of the war had made open discussions of sexuality a necessity, “public mores held no place for the unseemly subject of venereal disease” in the postwar world. Open discussions of sexuality thus became a casualty of the peace. As a result, sex education campaigns sponsored by both the federal government, as well as private organizations such as the American Social Hygiene Association became increasingly reticent regarding sexuality and venereal disease—even as these organizations called for open and frank discussions of the venereal disease problem.³⁶

From its very beginnings, then, the Keeping Fit campaign was shot through with contradictions. Starting with the decision to launch a sex education campaign, sharp divisions between PHS perceptions of sexual knowledge and their willingness to address this issue were apparent, especially in discussions of the relationship between age and sexual knowledge. According to PHS, only by initiating sex education programs for children who were 6 or 7 could the spread of venereal diseases and the development of abnormal sexuality be halted.³⁷ Yet the Keeping Fit campaign, the first and most organized push for sex education by the PHS, was targeted toward adolescents—most of whom, PHS openly admitted, were already both sexually formed and informed. In other words, PHS was aware, even as they

34. C. C. Pierce to Edward T. Biver, 4 January 1919, State Board of Health File, Idaho Folder, Box 279, NA.

35. *The Parents' Part* (Washington, D.C.: The United States Public Health Service, 1918), p. 5.

36. Brandt, *No Magic Bullet*, p. 129.

37. *The Wonderful Story of Life: A Father's Talks with His Little Son Regarding Life and Its Reproduction* (Washington, D.C.: The Public Health Service, 1924), p. iii.

launched Keeping Fit, that the campaign would not address the issue of sexual education at the level that they deemed necessary.

The campaign began, then, with a compromise and it continued to be characterized by compromises. In part, these compromises were inevitable. In 1919, PHS was a federal agency in a nation that was resistant to federalization. To launch the campaign, PHS was forced to negotiate an uneasy truce with state boards of health, many of which not only resented PHS but also felt that the culture of their state did not lend itself to a government-sponsored sex education campaign.³⁸ Further complicating the issue was the fact that PHS wanted its message to be a uniform one that would appeal to a highly diverse audience. To be effective, the campaign needed to use language and images that were easily comprehensible to rural and urban boys, to native-born and immigrant boys, to Southerners and Midwesterners, to Christians and Jews, and to working boys and boys still in school—a sure formula for a “compromise” message that pleased very few.

In both internal documents and conferences, PHS officers expressed their concerns regarding these differences and the difficulty of creating a uniform message. On one level, some PHS officers were prepared simply to translate Keeping Fit pamphlets directly into Yiddish, Italian, and other languages. But, on another level, PHS officers insisted that working-class boys needed a different pamphlet altogether. Believed to be in the most dire need of guidance, working-class boys, especially those who were already employed outside the home, were a primary focus of concern for both PHS and the YMCA. Reflecting existing stereotypes of the lower class as more sexually promiscuous and more careless than their middle- and upper-class counterparts, PHS and YMCA pointed out that only “one who has not . . . mingled with these boys can . . . [fail to] conceive the need in their lives of just such a message as is proposed.”³⁹ This need

38. In some states, for example, “state boards of health were dubious about going ahead on account of the political situation and the Catholic element.” J. A. Van Dis to E. M. Robinson, 22 April 1919, E. M. Robinson File, Van Dis Correspondence Folder, Box 288, NA. Sometimes the resistance could be extremely localized—in Milwaukee, for example, “there [was] a ruling . . . that nothing of that kind can be put on in the schools.” The campaign could, however, be mounted with less difficulty elsewhere in the state. Earl Branderburg to J. A. Van Dis, 6 May 1919, YMCA File, Wisconsin Folder, Box 283, NA.

39. Plans and Principles in the Project to Reach 300,000 Employed Boys, YMCA Folder, Box 286, NA.

translated into ongoing efforts to reach working-class boys by bringing the message directly and aggressively into their workplace. While middle-class boys were given an option to attend—or *not* attend—the Keeping Fit lecture at their local YMCA or in their school, working-class boys were given no chance to opt out of viewing the exhibit.

Despite—or perhaps because of—these class differences, the Keeping Fit campaign reflected both the structure and divisions of early twentieth-century American society. Influenced by broader discussions of race, sexuality, childhood, the family, medicine, and education, Keeping Fit and its rigid construction of sexual inclusion and exclusion demonstrated, at the most basic level, a deep-seated uneasiness with existing images of Americanism. This anxiety was rooted in a series of events that had occurred in the twenty years preceding the campaign: the rapid acceleration of immigration between 1880 and 1920; the acquisition of far-flung territories with non-Caucasian races such as Guam, Hawaii, the Philippines, and Puerto Rico; the events of World War I that had brought concerns regarding the health of young men to the forefront of the national consciousness;⁴⁰ and the revelation, through the recently developed Wassermann Test, that high numbers of Americans were suffering from syphilis. Wherever they looked, health reformers and social workers found overwhelming evidence of a racial degeneration so extensive that it could be addressed by only the most radical measures.

Keeping Fit emerged, then, in a nation that saw itself being stalked by the specter of ill health and racial degeneration. But the campaign also evolved in a nation that was experiencing new-found prosperity and the growth of urbanization and diversity, both within its own immediate geographic boundaries, as well as within its emerging global empire. To address these issues, Keeping Fit's organizers created a campaign that they perceived as "modern." The campaign *was* indeed a pivotal moment in the emergence of sexual modernism—that moment when "society and culture [broke] free from the Victorians and [opened] out to the possibilities" of freedom and self-awareness.⁴¹ Keeping Fit and its organizers were clearly reacting against traditional

40. This was evident in a variety of articles. See, for example, Frank Keefer, "Causes of Army Rejection: What Health Officers Can Do to Remedy Conditions," *Am. J. Public Health*, 1920, 15, 3, pp. 236–239.

41. Frank Mort, *Dangerous Sexualities: Medico-Moral Politics in England* (London: Routledge, Second Edition, 2000), p. xi.

notions of sexuality and what they viewed as the stifling constraints of Victorianism. False modesty, a notion PHS and YMCA employees linked with older generations, was repeatedly condemned in the campaign literature, and PHS constantly stressed the idea that “all that is best in modern life and civilization [has] grown mainly out of the sex impulses.”⁴² But for all its modernity, *Keeping Fit* was also colored by Victorian concerns and Victorian constructions of sexuality and gender.

At the most basic level, the campaign was rooted in the desire for “sexual control [which] came to define the Victorian concern for the civilized self.”⁴³ Sexual control was seen primarily as the obligation of the male; according to PHS and YMCA personnel, it was men’s failure to control themselves that spread venereal disease, that weakened the male body and, most importantly, that imperiled the future of the race.⁴⁴ Central to the campaign literature was an emphasis on the idea of control—control of the body and control of the mind. Words and phrases used repeatedly throughout the text include “self-control,” “will-power,” “take no liberties,” and “the control of the sex impulse.” Conversely, the term “yield” was always used to refer to those with venereal disease, both men and women.⁴⁵ Simply put, lack of control leads to disease, decay, and ultimately death; this was a message that was undoubtedly already familiar to most Americans because it had been a central component of the anti-alcohol, anti-narcotic, and anti-tuberculosis movements.

By focusing on control, *Keeping Fit* endorsed contemporary medical beliefs that emphasized “the need for sexual control of both sexes in order to remain ‘pure’ for marriage.”⁴⁶ Although this emphasis on purity allowed physicians to discuss venereal disease and sexuality without fear of opprobrium, *Keeping Fit*’s use of this concept served

42. *Keeping Fit* (Washington, D.C.: The Public Health Service, 1918), p. 9. This 1918 version of *Keeping Fit* was the precursor to the 1919 *Keeping Fit* and had been written primarily for soldiers.

43. Moran, *Teaching Sex*, p. 2. See also Vern Bullough, “American Physicians and Sex Research and Expertise, 1900–1990,” *J. Hist. Med. Allied Sci.*, 1997, 52, 2, pp. 236–253.

44. Allan Brandt points out that this was the scenario most commonly cited by health reformers. Brandt, *No Magic Bullet*, p. 8.

45. Out of 48 placards, 10, or slightly more than 20%, contain the word “control” or “willpower.” A different group of the placards, 4 in total, contain the word “yield” or discuss the concept of temptation. All in all, then, almost 30% of the exhibit deals with the contrast between yielding to temptation and controlling temptation through one’s willpower.

46. Bullough, “American Physicians and Sex Research,” p. 240.

several purposes. First, by linking the campaign with contemporary medical beliefs on sexuality, Keeping Fit's emphasis on purity and self-control provided the campaign with the patina of cutting-edge science. The campaign was sure to gain the support of physicians who read medical journals and prided themselves on being aware of wider medical developments.⁴⁷ Second, because the idea of self-control was a central theme in literature created by both the Women's Christian Temperance Union and antidrug campaigners, Keeping Fit was able to exploit and play on existing sensibilities regarding the idea of control. Finally, by emphasizing the idea of abstinence or control, Keeping Fit's creators balanced the more shocking aspects of their campaign (an open discussion of venereal disease) with a conservative message (a call to reprioritize marriage). Obviously, this emphasis on sexual purity did not totally eradicate the shock presented by the candid discussion of venereal disease by PHS, but it did enable the agency to discuss venereal disease in a fashion that would gain the support of the more traditional elements of society.

To illustrate this idea of control, Keeping Fit used specific and very telling images. Two of these, the plane and the train, exploited images of industrial modernism to endorse traditional messages (Fig. 1). The parallel between the body and the machine was an obvious reflection of the "machine age" but these images also juxtaposed technology/science and the idea of self-control, with self-control being given the imprimatur of science through its link to technology.

A more common image of self-control and one that appeared frequently in the first half of the twentieth century was that of Teddy Roosevelt who appeared in the twenty-eighth panel or slide of the exhibit. The well-known and very well-crafted story of Roosevelt's physical development served a dual purpose. First, as Dorothy Porter has pointed out, the image of Roosevelt reinforced "the idea that a somatic map of national progress was to be found in the vigor of the American male."⁴⁸ As the image *par excellence* of the American soldier, Roosevelt reminded viewers that the nation's strength and well-being rested on the health of the individual.⁴⁹ But, even more

47. Reports from nearly every state indicate that local physicians did endorse the campaign.

48. Dorothy Porter, "The Healthy Body" in Roger Cooter and John Pickstone, eds., *Medicine in the Twentieth Century* (Amsterdam: Harwood Academic Publishers, 2000), p. 208.

49. As a strong advocate of eugenics, Roosevelt constantly reiterated these sentiments in articles and speeches. Diane B. Paul, *Controlling Human Heredity, 1864 to the Present* (Atlantic Highlands, N.J.: Humanities Press, 1995), p. 102.

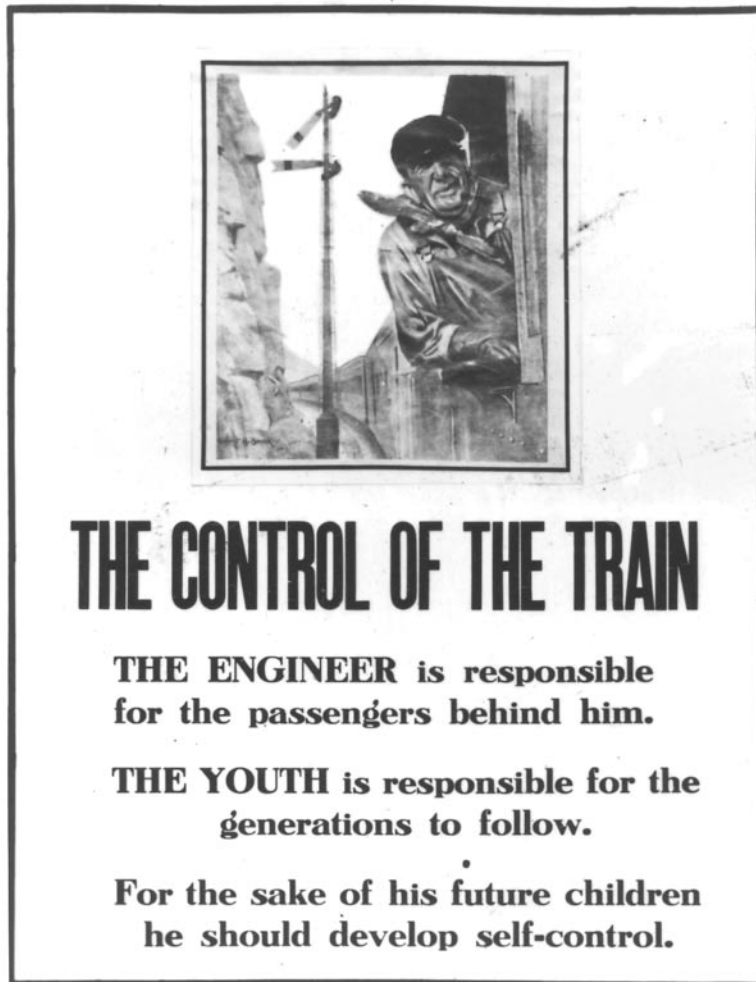


Fig. 1. Images of industrial modernism were used to endorse a very traditional message, one that highlighted the idea of self-control.

than that, the link commonly made between Roosevelt and American imperialism also reminded the American boy that he needed to be at his moral and physical best if he was to lift up those who were of an inferior race, a duty that was increasingly seen as the obligation of the white American male. On a less lofty level, the image of

Roosevelt also served to reinforce the idea that willpower was all that was needed to create a strong and healthy body. Obviously, this idea had a strong appeal for all boys regardless of their innate physical abilities or attributes. This image may also have been used because it was so widespread during this period; this was, after all, the era of fitness guru Bernarr MacFadden, as well as the era that would ultimately produce Charles Atlas, the 98-pound weakling who reshaped his body through his own force of will.

This emphasis on reshaping and recreating one's body was also tightly linked to the rise of eugenics. As Martin Pernick and Daniel Kevles have pointed out, early twentieth-century eugenicists believed that heredity was malleable.⁵⁰ Good health might be inherited from one's forebears, but even the best of inherited health could be squandered through reckless living.⁵¹ Conversely, one could develop good health through proper living and diligent exercise. This belief that one could control one's destiny may have had an especially strong appeal for American eugenicists because it reflected the American myth that one can be whatever one desires. The idea of controlling one's destiny or health was first introduced in the more innocent discussion of food as opposed to sexual urges. In a set of contrasting images, a healthy boy is presented as possessing the habits of the civilized American, whereas his unhealthy peer slouches, wears a hat and gobbles his food (Fig. 2). To become healthy—to become *American*—this boy must literally control his appetite and adopt proper behavior. Achieving good health becomes simply a matter of exerting control over one's behavior.

This link between good health and civilized—or *American*—behavior was further reinforced by images of American heroes, specifically, Abraham Lincoln, Ulysses S. Grant, Robert E. Lee, Teddy Roosevelt, and Woodrow Wilson. Internal documents indicate that the use of these images was intended to play directly on a boy's patriotic sentiments. Southerners did complain about the use of Lincoln, but

50. Martin Pernick, *The Black Stork: Eugenics and the Death of "Defective Babies" in American Medicine and Motion Pictures since 1915* (Oxford: Oxford University Press, 1996), pp. 43–48. Daniel Kevles, *In the Name of Eugenics* (Berkeley, Calif.: University of California Press, 1985), p. 70.

51. As a government agency, PHS cannot be said to have uniformly endorsed eugenics, but the literature related to the Keeping Fit campaign clearly espoused this view as did many individual members of PHS. Kevles argues that the YMCA did have a eugenics agenda. Kevles, *Eugenics*, p. 58.

WHOLESOME FOOD



1. Eat enough to maintain weight, endurance and general feeling of well being. *S*
2. Eat slowly and thoroughly masticate your food. *S*
3. Use judgement in the amount and choice of foods. *S*
4. Drink 4 to 6 glasses of water every day. *S S*

Fig. 2. To become healthy—to become American—boys must literally control their appetites by adopting proper behavior.

the use of Lee undoubtedly served as a regional and political counterbalance. In fact, the images of Lee and Lincoln served to counterbalance one another in a different and more important way, with each man demonstrating one side of good health. Lincoln, who was described as “working in the open air . . . wrestling, jumping and run-

ning races,” as well as “walking long distances,” illustrated the important role of physical activity in developing good health.⁵² Lincoln also served as a reminder of the American myth—the idea that one’s origins did not determine one’s fate (any boy could follow in Lincoln’s footsteps to achieve good health just as any boy could follow in his footsteps to the presidency). If Lincoln demonstrated the physical side of good health, Lee illustrated the importance of mental discipline. “Purity and virtue,” Lee reminded viewers, are integral to good health.⁵³ This idea of mental discipline was reinforced by the image of Grant, who “would not tolerate a dirty story.”⁵⁴ Although Grant and Lee have rarely been combined in American propaganda, their intertwining here reminded viewers that purity was a manly trait espoused by even the most masculine of men, the soldier.⁵⁵ In using an inverted illustration, one that features soldiers endorsing purity and intellectuals advocating physical discipline, PHS created a memorable and unforgettable image.

The belief that masculinity and purity are not antithetical was also central to the idea of chivalry, and *Keeping Fit* exploited traditional images and concepts of chivalry to remind boys of the importance of self-control. This use of chivalric images served several purposes. First, chivalry had been a standard component of Anglo-American children’s literature during the late nineteenth and early twentieth centuries and, as such, its emphasis on “[protecting] the honor of all women and girls” would have been familiar to many of the boys who viewed the exhibit.⁵⁶ Second, by using chivalric images, PHS used metaphors and concepts that had been universal during World War I—a war in which the American soldier had taken on the role of the chivalric knight protecting the world for democracy. For PHS and the YMCA, the soldier or the knight errant was an ideal image, as it presented a composite of strength and virtue. This image allowed

52. Panel 12, *Keeping Fit*.

53. Panel 26, *Keeping Fit*.

54. Panel 27, *Keeping Fit*.

55. Although the boys who viewed the exhibit did so in the wake of World War I, the Civil War, even in 1918, provided stronger and more visceral images for Americans.

56. Panel 46, *Keeping Fit*. Chivalry was such a standard component of children’s literature that it was frequently used in other public health campaigns; the National Tuberculosis Association, for example, created “a game in which youngsters ‘jousted for honors’ and received points, titles, and medals as rewards for their chivalry.” Georgina D. Feldberg, *Disease and Class: Tuberculosis and the Shaping of Modern North American Society* (New Brunswick, N.J.: Rutgers University Press, 1995), p. 112.

PHS to create an ideal boy, one who would not lose his masculinity even as he pursued the more feminine attributes of compassion and virtue. Third, the use of chivalric images, especially the image of a wreck at sea, reflected concerns regarding modernism—concerns that had been highlighted by the recent sinking of the *Titanic*. By claiming that chivalry could be found even during a crisis at sea, PHS reinforced Victorian values even as those values were disintegrating. This belief reflected the broader conviction of PHS that they could reverse the existing trend toward declining sexual morals by advocating a return to traditional values or, even more simply, by maintaining that these values had never declined. Chivalry could, in other words, restore order to the chaos that characterized the modern world.

Most importantly, however, the use of these images allowed PHS to shift responsibility for the nation's health onto men (in chivalric codes of behavior, men are accountable not only for themselves but also for the well-being of women and children). Men's accountability was not only for themselves and their wives; pictures of syphilitic and handicapped children reminded boys that their actions also had consequences for future generations. This was at odds with other public health campaigns, such as those directed by the Children's Bureau during this period.⁵⁷ Focusing on infant mortality, these campaigns tended to shift responsibility for future generations onto the mother. In breaking with this tradition and shifting responsibility for future generations onto men, *Keeping Fit* endorsed a view of women as passive and therefore in need of protection—just like the children of future generations. Linked as it was to the idea of control, female passivity came to be regarded as a positive ideal and one that men needed to emulate. In endorsing this Victorian view of femininity and female sexuality, PHS and the YMCA demonstrated their own traditionalism—at least in terms of “appropriate sexuality.”

But while PHS and the YMCA may have endorsed Victorian views of female sexuality, they *were* breaking new ground. Unlike the Victorians, PHS and the YMCA believed that female and male sexuality were capable of being uniformly controlled. To a minor degree, this reflected the attitude of many of the more liberal contem-

57. Richard A. Meckel, *Save the Babies: American Public Health Reform and the Prevention of Infant Mortality, 1850–1929* (Baltimore: Johns Hopkins University Press, 1990), pp. 119–23.

poraries of the PHS who maintained that male and female sexuality were fundamentally the same. But, unlike many of their contemporaries who argued that female sexuality was as *strong* as male sexuality, PHS maintained that male sexuality could easily be *muted* to imitate female sexuality. Neither female nor male sexuality, in other words, was or should be characterized by an intensity of passion.

The reasons of the PHS and the YMCA for endorsing this essentially conservative message were varied. First and foremost, it must be remembered that, in choosing to launch a sex education campaign, both PHS and the YMCA were challenging the existing status quo. Although it is true that both the message and forum of the Keeping Fit campaign were essentially conservative, this program needs to be viewed within the context of interwar society, as well as contextualized within the history of American sex education programs. Early attempts at providing sex education for adolescents date back to at least 1885, when the YMCA organized a corps of the “White Cross Army”—young men who were provided with a rudimentary sex education and who then took oaths of purity. Although this first venture in sex education fizzled after encountering opposition from opponents within and outside of the YMCA, it laid the groundwork for the emergence of a variety of sex education initiatives between 1890 and 1920. During this period, several different school districts attempted to implement sex education programs, but this was done sporadically. The American Social Hygiene Association (ASHA), founded in 1913, was more aggressive and more interested in creating a nationwide approach to sex education. But their efforts revolved primarily around the creation and distribution of literature. Although their sex education pamphlets were, in many ways, the most detailed and most explicit literature available, these materials were available only to those who requested them.

Attempts to provide sex education by the federal government had been equally sporadic. During World War I, concerns about venereal disease had led to the creation of the Commission on Training Camp Activities (CTCA)—an organization that “combined elements of uplift and distraction, coercion and repression in [an attempt] . . . to make the military venereal-free.”⁵⁸ Through the CTCA, the government provided sex education for military recruits and a corresponding

58. Brandt, *No Magic Bullet*, p. 59.

effort to provide sex education for young women also developed during this period. Before World War I, however, public health campaigns by the government and/or the PHS were scatter-shot; none were created or perceived as long-term and national efforts. In fact, before Keeping Fit, *all* PHS public health campaigns had been limited in scope.⁵⁹ Defined by geographic considerations and constructed in response to emergencies, these campaigns tended to focus on a specific epidemic, such as typhoid or the bubonic plague. As a result, early twentieth-century PHS campaigns had been short-lived and regionally based. In advocating that Keeping Fit be created as a permanent and national campaign, the organizers of this program were breaking new ground—not only in terms of sex education, but also in terms of public health campaigns. Knowing that they were advocating a radically different type of public health campaign, Van Dis and members of PHS preferred to advocate a conservative message. Any other type of message, they believed, could antagonize conservatives who could destroy not only Keeping Fit, but also any other attempt to create a national and permanent public health campaign.

THE DECLINE OF KEEPING FIT

These attempts to appease even the most traditional elements of society were extremely effective. In terms of gaining the support of their target audience, Keeping Fit was an unconditional success throughout the United States. In Arkansas, teachers hailed the program saying, “this is what we have been wishing for for some time.”⁶⁰ In Illinois, ministers “spoke in [the] highest terms of the display and [silent] lecture.”⁶¹ From Boston—which had originally resisted the campaign—came high praise and even in California where the Protective League of California had rallied against Keeping Fit came requests for more information and more pamphlets.⁶² Southern parents embraced the program, with one father asserting that “it was worth \$500

59. Nongovernment organizations, such as the National Tuberculosis Association and the American Social Hygiene Association, had already launched nationwide and continuous public health campaigns.

60. George W. Lewis to John Van Dis, 26 April 1919, YMCA File, Arkansas Folder, Box 278, NA.

61. Reports on the Keeping Fit Campaign, National Keeping Fit Campaign Folder, Box 284, NA.

62. *Ibid.*; Reports on the Keeping Fit Campaign, California Folder, Box 278, NA.

to his sons.” Most importantly, thousands of American boys applauded the campaign, suggesting that it also be “shown [to] 8th grade boys.”⁶³ Clearly, *Keeping Fit* struck a chord with the American public. True, there were some detractors, such as the New Hampshire Committee on Public Safety, the California Protective League, the Catholic Church, and various local school boards, but the program was popular enough to be adopted on a wide scale, reaching several million boys over a three-year period—with the promise of reaching even more in the coming years.

If the general public saw the campaign as an unqualified success, so, too, did its organizers. In a confidential annual report, J. A. Van Dis maintained that “in those states where systematic efforts to give instruction to the boys and young men to encourage clean, whole living were made the percentage of venereal infection was in many cases less than one per cent.” Conversely, states that made no effort to arrest venereal disease through sex education had, or so Van Dis claimed, rates of infection between fifteen and twenty-five percent.⁶⁴ Although C. C. Pierce, the head of the PHS Venereal Disease Division, admitted that “the real effect of . . . [venereal disease educational programs] can never be definitely known,” PHS consistently maintained that the high number of requests that they received for *Keeping Fit* indicated that the program was having some impact on the sexual behavior of American adolescents.⁶⁵ These claims notwithstanding, there is no evidence that *Keeping Fit* permanently or even temporarily altered the sexual behavior of American adolescents.

Independent assessments of the program also characterized it as highly effective and successful. A 1923 study of social hygiene literature indicated that *Keeping Fit* was the sex education pamphlet most likely to be read in its entirety by boys and young men.⁶⁶ Overall, the program was described in generally positive terms, with the only real criticism being that it was not explicit enough.⁶⁷ In *The American*

63. National *Keeping Fit* Campaign, Miscellaneous Folder, Box 286, NA.

64. 1919 Annual Report of J. A. Van Dis, Personal File, Van Dis Correspondence Folder, Box 288, NA.

65. C. C. Pierce, “Venereal Disease Control: Methods, Obstacles and Results,” *Am. J. Public Health*, 1920, 10, 2, p. 135–36.

66. Paul Strong Achilles, *The Effectiveness of Certain Social Hygiene Literature* (New York: Association Press, 1923), p. 24.

67. *Ibid.*, p. 35.

Journal of Public Health, Evert G. Routzahn, the creator of the nation's first traveling tuberculous campaign, praised Keeping Fit, calling it "interesting and valuable."⁶⁸ But, by 1925, just six years after its introduction, Keeping Fit had been relegated to the sidelines.

The disappearance of Keeping Fit and the failure by PHS to follow through on sex education campaigns for adolescents and children in the following years raise several questions. The most important of these is why PHS was not more aggressive in pursuing this or a similar type of campaign. It is clear that the factors shaping American sex education programs were—and are—myriad. At the most basic level, Keeping Fit failed not because of opposition from conservatives who feared sex education, but because of financial constraints, tensions between states and the federal government, and, most importantly, shifting views of adolescence and education.

Keeping Fit was hampered from the beginning by its ties to the 1918 Chamberlain-Kahn Act. In 1919, the first year of the Act's implementation, two million dollars was allocated to fight venereal disease, with money being divided among forty-six states.⁶⁹ As the dispenser of funds, the federal government dictated the division of this money. Fifty percent of the allotment was to go to treatment, twenty percent to the repression of vice, ten percent to administrative costs, with the final twenty percent being reserved for educational programs such as Keeping Fit. To receive this funding, states simply needed to agree to mount a campaign to fight venereal disease. Amounts varied according to a state's population, with more densely populated states receiving the most funding and rural states receiving the least.⁷⁰ Seen from the perspective of those who were providing medical care or seeking to repress vice, this approach to funding made sense; larger populations obviously required greater funding for treatment or control of morals. But for the organizers and advocates of Keeping Fit, this approach to funding presented problems. Keeping Fit actually cost *more* to present in rural areas as the less dense the

68. Evert G. Routzahn, "Health Education and Publicity," *Am. J. Public Health*, 1924, 14, 12, pp. 1091–1092. For a discussion of Routzahn's work on antituberculosis campaigns, see Tomes, *The Gospel of Germs*, p. 116.

69. Two states turned down funding.

70. *Annual Report of the Surgeon General of the Public Health Service of the United States for the Fiscal Year 1919* (Washington, D.C.: The Public Health Service, 1919), pp. 235–37.

population, the greater the distances the exhibit and its presenter had to travel.⁷¹ Not surprisingly, the organizers of Keeping Fit tended to concentrate their efforts on urban areas where they could get more for their money.⁷² Although this focus may have reflected the popularly held belief that urban areas were more vice-ridden than their rural counterparts, it did little to address the problem of venereal disease education in states such as Arizona, Montana or New Mexico. All of this meant that Keeping Fit was never uniformly implemented throughout the United States, despite the fact that uniformity had been one of the central goals of the program.

This was not, however, the only problem associated with Chamberlain-Kahn. Funds appropriated by Chamberlain-Kahn were lavish in the years immediately after World War I (when concerns regarding venereal disease were highest), but these funds quickly tapered off in the early 1920s. By 1923, for example, funds had been cut in more than half, with only \$400,000 being appropriated for the fight against venereal disease.⁷³ As Thomas Parran, a later Surgeon General, put it, "Congress apparently thought the spirochetes of syphilis were demobilized with the army [in 1919] . . . no further thought whatever was given to syphilis and the first national public health effort came to an untimely end."⁷⁴ The strong association between venereal disease and the need for healthy military recruits had, in other words, proven to be a primary impetus to sex education in the years during and immediately after World War I. But as concerns regarding the military faded, education regarding venereal disease came to be seen as less urgent and therefore less in need of funding. While federal and state funds that had been allocated for venereal disease were *not* allocated to other disease campaigns, money spent on venereal disease simply came to be seen as unnecessary for the nation's health or security. In linking sex education with a disease and one that attracted varying

71. Discussing the situation in the rural Southwest, a YMCA director noted that "the highest railroad rates in the United States hold in this territory . . . [where] distances are so great and railroad connections are so poor." W. W. Thomas to Clark Hagenbuch, 21 January 1919, YMCA File, Arizona Folder, Box 278, NA.

72. This emphasis on urban areas may also have stemmed from the fact that the YMCA, which had begun life as an urban phenomenon, was still heavily concentrated in cities during the 1920s.

73. *Annual Report of the Surgeon General of the Public Health Service of the United States for the Fiscal Year 1923* (Washington, D.C.: The Public Health Service, 1923), p. 243.

74. Thomas Parran, *Shadow on the Land* (New York: Reynal and Hitchcock, 1937), p. 85.

levels of interest at different periods, PHS ensured that the Keeping Fit campaign would live—and die—with concerns about venereal disease.⁷⁵

The campaign also suffered from poor organization. Because PHS and the YMCA believed that opponents of sex education would attack and scuttle Keeping Fit if they had advance knowledge of the program, the campaign was organized very quickly and with no real advance publicity. Unfortunately, this reluctance to take the time to organize and publicize the campaign caused difficulties almost from the beginning. Some of the difficulties veered on the ludicrous—as when letters to the YMCA headquarters in West Virginia were mistakenly directed to Charleston rather than Clarksburg,⁷⁶ causing several months of preparation to be lost. Other problems were more mundane. In some states, the lack of advance publicity meant that even its supporters did not have a “very clear idea . . . as to what the . . . Campaign was” or how it was to be implemented.⁷⁷ Additionally, because arguments over the structure of the exhibit had delayed its completion, many schools wound up receiving the exhibit just as the summer vacation was beginning, with the result that the campaign was postponed in several areas. The influenza outbreak of 1918–1919 further exacerbated this problem as schools and youth organizations closed to prevent the spread of the flu. Even when a region was prepared to mount the exhibit, slides and exhibits had a lamentable tendency to arrive broken or missing pieces. Often it took several months for lecturers to acquire unbroken equipment. Most damaging of all, however, were the financial problems caused by the organizers’ reluctance to notify and prepare state boards of health and education in advance. Although Chamberlain-Kahn provided ample funds for

75. In the 1990s, the tight link between sex education and AIDS (acquired immune deficiency syndrome) education presented problems of a different sort. According to Susan Wilson, director of New Jersey’s Family Life Education Network, AIDS education had “absolutely squashed any education about healthy sexuality.” This jettisoning of discussions of teenage pregnancy and other aspects of teenage sexuality in favor of an emphasis on sexually transmitted diseases was, in many ways, similar to earlier campaigns such as Keeping Fit which were characterized more by a discussion of venereal disease than sexuality. Susan Wilson quoted in Moran, *Teaching Sex*, p. 208.

76. “Your letters . . . came to me by a streak of fortune. My state headquarters are at Clarksburg, W.Va., and not at Charleston . . . I have doubtless lost some very valuable mail.” Gilbert Bush to E. M. Robinson, 1 November 1918, YMCA File, West Virginia Folder, Box 283, NA.

77. H. L. Hoisington to J. A. Van Dis, 17 December 1919, YMCA File, Colorado Folder, Box 278, NA.

educational activities in 1919, many states had already made decisions about the allocation of this money before receiving information about Keeping Fit. Consequently, states from Mississippi to Nebraska found themselves scrambling to provide funds for the program.

Some of these difficulties were typical of the birthing pains associated with any nationwide campaign. But these problems were neither resolved nor addressed during the second and third years of the campaign—lecturers continued to struggle for funds (which had begun to decline by 1921); exhibit materials continued to arrive damaged at their destination; and state boards of health and education continued to receive little or no information about the campaign. In 1937, Surgeon General Thomas Parran aptly summarized the difficulties of Keeping Fit and other early sex education initiatives by pointing out that although “it takes some months to set an operating unit for a new job and to provide it with especially trained personnel . . . this [organizing] hardly had been accomplished before the drastic curtailment of federal funds.”⁷⁸ Thus, the failure of Keeping Fit stemmed, in large part, from the government’s reluctance to see the campaign as one that would require both advance planning and a continuous long-term investment—despite the fact that the organizers of Keeping Fit had always viewed the exhibit to be a permanent element of health education.

But the program also suffered as views of adolescent education shifted. In 1919, when the campaign was introduced, more adolescent boys were in the work force than in high school. But the 1920s saw a gradual shift with more boys entering high schools.⁷⁹ In unison with this shift, PHS came to believe that the high school, with its planned curriculum, provided a more accessible audience for a sex education campaign—one that was both more detailed and more connected to the school’s overall curriculum. In endorsing this view, PHS turned sex education programs over to local school boards, many of which were reluctant to take on this responsibility. As a result, sex education programs came to be implemented in a sporadic fashion,

78. Parran, *Shadow*, p. 85.

79. In 1919, 31.2% of American adolescents attended high school. By 1929, the number had jumped to 50.7%. David L. Angus and Jeffrey E. Mirel, *The Failed Promise of the American High School, 1890–1995* (New York: Teachers College Press of Columbia University Press, 1999), p. 203.

with some regions aggressively incorporating sex education into their curriculum, while others sidestepped the issue completely.⁸⁰

In many ways, the campaign was both a product and a victim of the Progressives' belief in the power of education to transform behavior. Keeping Fit was created because progressively minded reformers believed that education could transform sexual behavior. But this belief in the power of education was also the impetus for the expansion of the American high school. With the majority of American boys in high schools, there was no need for special evening lectures or events, because these lessons could easily be taught within the school setting. The only problem with this idea was that school districts were under local control—PHS had no power to force schools to provide sex education or to ensure that federally initiated sex education programs were not dramatically altered by local communities. Thus, although many schools continued to use images and concepts lifted from Keeping Fit and even to show a silent film derived from the Keeping Fit campaign, there was never any consistency in the use of this material, and PHS was effectively relegated to the sidelines.

This sidelining of PHS should not be interpreted as evidence of Keeping Fit's ineffectiveness or unimportance. This program laid the groundwork for several important innovations in both the structure of government-sponsored public health campaigns and approaches to sex education. Keeping Fit medicalized and federalized sex education, taking it out of the hands of parents and placing it firmly in the hands of the government. More importantly, though, Keeping Fit set a new standard for the way in which public health campaigns could be run—by envisioning health education as an ongoing and continuous effort, Keeping Fit's organizers challenged contemporary views of PHS health campaigns as stopgap measures intended to address specific or regionally focused health crises. Although it is true that Keeping Fit itself did not become a permanent exhibit in the way in which its creators had hoped, the program was the first step in what can now be seen as a continuous campaign by the American government to educate the public on sexuality and sexually transmitted diseases.

80. Michael Imber notes that "support [for sex education] among educators was soft at best" during the 1920s. Michael Imber, *Analysis of a Curriculum Reform Movement: The American Social Hygiene Association's Campaign for Sex Education, 1900-1930*, (Ph.D. dissertation, Stanford University, 1980), p. 111.

In this sense, it can be argued that Keeping Fit never really died; rather, it simply changed over time.

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