in exposure was brought about by a range of factors which have yet to be fully elucidated, but they probably comprised a number of the traditional "industrial revolution" variables, including changes in consumption patterns and the position of the capital in the national urban hierarchy, as well as the actions of members of the medical profession. (p. 357)

While most of Landers's main contentions are familiar, there is much useful information in this book. General users will not find it an easy read, however. The book fairly bristles with tables and graphs, demographic jargon, needless abbreviation, and quasi-mathematical notation. While one appreciates the need to explain the methods by which evidence is produced, it is difficult not to see this as a book written by a demographer only for demographers.

In terms of Landers's stated intention to reintegrate mortality studies into social and economic history, the book can only be seen as a first step toward that goal. While Landers employs social and economic factors to explain mortality levels, these need to be more fully considered, especially with respect to the declining death rate after 1780. Nor does he adequately explain the significance of mortality studies to the general social or economic historian. How important a contribution was the late-eighteenth-century mortality decline to the population surge beginning to take place in these decades? How great was its contribution compared to the rising fertility rate? These may be questions requiring a separate book, in which case we must await the author's further efforts to reintegrate mortality studies into social and economic history.

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As Susan Kingsley Kent acknowledges, there have been many different opinions as to the fate of British feminism in the inter-war years. Some have suggested that feminism adapted to new circumstances, changing tack towards something called by contemporaries "new feminism" and stressing the needs of women qua women, while others have concluded that feminism was virtually destroyed during these years, chiefly by the acceptance accorded sexology. Kent tends to the view that inter-war feminism failed and attributes this to the way in which gender was reconstructed after the war.

The argument traces the representation of gender between 1914 and 1939 and is both stimulating and provocative. Kent suggests that during the first year of World War I separate spheres for men and women were firmly re-established. While men were identified with war and death, women were firmly identified with the domestic arts of sewing and knitting and with motherhood. As women entered munitions factories and donned uniforms, gender identities became increasingly blurred in the
perceptions of men, the media, and women themselves. Kent sees the representation of war giving way in the years after 1915 to sexual disorder.

The preoccupation of the post-war years thus became, according to Kent, the reconstruction of sexual peace. Unlike those who have denied the influence of suffrage militancy on women gaining the vote in 1918, or those who believe women would have been enfranchised even without the war, Kent argues that the fear of a resurgence of militancy and the desire to promote sexual peace was central to men’s decision to give women votes and explains the willingness of the women’s movement to compromise over the age limit of 30 that was imposed. The desire for sexual peace and order is also seen by Kent as the key to explaining the move to “new feminism”, with its stress on the needs of women as mothers and underpinned by the insistence of the new psychology and sexologists on the importance of sex in marriage and of maternity. To argue her case, Kent piles up illustrations from a variety of contemporary secondary sources, mainly periodicals, newspapers, and contemporary published materials including novels. It is, I think, quite possible to be convinced by her arguments regarding the representation of sex, war, and sex war during and immediately following World War I, while retaining substantial doubts over the much longer lines of causation she seeks to draw in order to explain what she sees as the weaknesses of inter-war feminism. Historians have long argued over the extent to which the First World War effected change in gender relations, and it is extremely revealing to have the way in which gender was represented laid out so vividly. But Kent’s purpose is to explain the character of inter-war feminism and this is more problematic.

Kent maintains that feminists shifted from believing masculinity and femininity to be socially constructed before the war to an acceptance of separate spheres after it. New feminism, she says, arose from convictions about sexual difference rather than a faith in the common humanity of men and women. She acknowledges that the demands of new feminists had radical potential. For example, Eleanor Rathbone argued for family allowances as a prerequisite for equal pay for equal work (on the grounds that men would no longer be able to argue that they needed a family wage), thus reconciling a claim for equality to men with a claim for women as mothers. However, at the end of the day, Kent believes new feminism to have favoured policies that threatened “to inscribe motherhood as the only possible identity for women” (p. 119). As Denise Riley pointed out over a decade ago, there was certainly a tendency in government policy to define women’s needs in terms of motherhood as a social function rather than to try and devise policies to meet women’s needs as individuals. Policies such as family allowances did not fall into that trap, however, although new feminism’s attitudes towards birth control certainly accorded with that conventional sexual morality that confined contraception to marriage.

Kent sees new feminism as promoting not the rights of women, but the needs of women as mothers. In the first place, it is by no means clear that needs-based claims are inherently inferior to rights-based claims. New feminists joined working-class women’s groups in making demands based on women’s needs as mothers both for cash and for social services. Claims based on need have had a long and en-
trenched position in the British welfare state. Second, given that there is no unequivocal evidence that new feminists were concerned only with motherhood rather than with the needs of individual mothers, or indeed that they were exclusively concerned with mothering at the expense of women’s position in the labour market, it is not clear that their outlook was in some way inferior to “old feminism”. Certainly it is far-fetched to connect new feminism to fascism, as Kent does at the end of the book. Many feminists in the pre-war period argued for suffrage on the basis that women were mothers. There is no easy progression from equalitarian feminism to new feminism. Many women continued to hold ideas of equality and difference; for example, Vera Brittain, whom Kent regards as an old feminist, was nevertheless a strong supporter of babies’ clubs for middle-class women. Divisions between old and new feminists undoubtedly existed; the split over protective labour legislation, which is recounted once more by Kent, was real enough. But it is by no means clear that inter-war feminism failed as this and other recent accounts suggest. The impressive gains that feminists made both in the reform of the private law of marriage, divorce, guardianship, and adoption and at the local level in terms of the provision of social services are not part of the story that Kent is telling, but they must be considered before any judgement regarding the strength of inter-war feminism is reached.

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This very dense book, part of the Cambridge History of Medicine series, is edited by two co-directors of the AIDS Social History Programme at the London School of Hygiene and Tropical Medicine. Surely the existence of such a programme is itself a comment on contemporary history. AIDS has captured our public attention in a way no disease has done since the epidemics of the nineteenth century, spawning not only the establishment of medical initiatives but also of programmes to study those initiatives, their foibles and their successes.

In addition, the past decade or so has seen the production of a vast literature on AIDS. Just how vast can be ascertained by looking at the notes of the 12 essays in this collection. There are books; there are articles; there are government and private studies and pamphlets. And now, not even 15 years since AIDS was first considered to have become an “epidemic” in Great Britain, there is a history.

The book is divided into two sections. The first, entitled “The Pre-History of AIDS”, not surprisingly deals with such historical background issues as the regulation of sexuality, the rise and fall of public health, a variety of screening techniques, and comparisons with other sexually transmitted diseases and with Hepatitis B.