

actively effected change by creating new roles for women, albeit within socially acceptable limits. Simply by 'playing the game', they transformed and redefined expectations of women; their trespassing on activities identified culturally as male provided an important element of social discontinuity that successfully challenged the stereotypes and system which restricted the potential of their sex (286).

McCrone's book should therefore rank as required reading for all who hope to understand the diverse and multidimensional aspects of women's emancipation from the stultifying passivity of Victorian ladyhood to a freer, healthier, more self-determined womanhood.

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Angus McLaren and Arlene Tigar McLaren — *The Bedroom and the State: The Changing Practices and Politics of Contraception and Abortion in Canada, 1880-1980*. Toronto: McClelland and Stewart, 1986. Pp. 186.

Part of McClelland and Stewart's Canadian Social History Series, *The Bedroom and the State* is a welcome addition to the growing literature on the lives of everyday Canadian men and women in the past. The McLarens make an important contribution to the very sketchy literature on birth control in Canada by showing that reformers on the left, rather than middle class philanthropists or the cautious and conservative medical profession, initiated the birth control movement in Canada. Through its analysis of letters written by Canadian women to the prominent British and American birth control advocates, Marie Stopes and Margaret Sanger, the book also provides a rare glimpse into the lives of ordinary Canadian women whose voice is so seldom heard.

Using a diverse selection of both qualitative and quantitative sources, *The Bedroom and the State* successfully brings the history of reproductive policies, as formulated by political, medical and religious authorities, together with a portrayal of reproductive decision-making by ordinary Canadians. This balanced approach helps to illuminate the relationship between ideology and social practice.

Canadians began to restrict their fertility in the 1870s, yet contraceptive technology was not officially de-criminalized until 1969. Presumably ignoring the pronatalist rhetoric of elites, and subverting an unpopular law, Canadians responded to economic and social factors which made large families undesirable. These included compulsory education, restrictions on child labour, the rise in non-domestic work for women, and a transition in the idealized family from the patriarchal to the companionate (12).

Nonetheless, birth control was both risky and unreliable, due to the use of traditional methods and the clandestine nature of the market in contraceptive products. Not surprisingly, abortion became an integral part of reproductive control, used increasingly as a back-up measure by couples whose contraceptive measures had failed. Abortion related deaths — the inevitable consequence of the operation's

illegality — contributed to the high rate of maternal mortality in Canada from the late 19th century until the 1940s, the McLarens assert.

But the official policy of pro-natalism, with its restrictive measures against both birth control and abortion, gradually gave way to a reluctant acceptance of contraception. The McLarens portray this as no victory of the common people, however. Although the Canadian birth control movement was initiated in the 1920s by a British Columbia based socialist alliance with a socialist-feminist component, the movement was taken over by the middle-class reformers in the 1930s. Anxious to make birth control respectable, these reformers assured religious, political and medical authorities that it could be used to bolster the existing sexual, political and economic status quo. Elites endorsed the widespread practice of contraception only when they learned that it could be harnessed to socially conservative ends.

The earlier socialist movement may have had more in common with its conservative counterpart than the authors sometimes acknowledge, however. Extremely sensitive to gender divisions in their excellent analysis of the left's position on birth control, for example, the authors scarcely acknowledge comparable involvement of women within the middle-class movement. The McLarens' simply lump middle-class "clubwomen" with their male reformer/businessmen allies, and assume that their interests were identical. It is clear that socialist-feminists articulated an early and unambivalent advocacy of birth control, while middle-class women were hesitant on the question, due to their commitment to motherhood and the family as women's primary role. Nonetheless, middle-class women did much of the day to day work of disseminating contraceptive technology to the poor in the 1930s. Evidence that they viewed birth control from a gender perspective, despite the constraints of patriarchal structures, needs to be more carefully weighed. These women were marginalized within their own movement, forced to play subordinate roles, and to put their arguments in terms of male-defined social and political priorities. Their contribution, and their motivations, deserve more serious study.

Working-class women also had to contend with the pervasive patriarchal ideology which marginalized women's input. Birth control was never a priority within the left for any but a small minority of socialist-feminists. As the McLarens put it, the left's ambivalence concerning birth control often came down to "the belief held by many males that contraception was an unnatural, modern, middle-class practice that would only deprive the worker of the joys of heading the traditional large, healthy family" (84).

The McLarens often downplay the very real opposition to birth control, both on a societal and familial level, in their efforts to show its transformation into a tool of conservative policy. For example, in blaming the human tragedies caused by restricted access to safe and reliable contraception and abortion on physicians, the McLarens go little further than professional self-interest in explaining Canadian doctors' failure to provide these services. Nineteenth-century physicians promoted the idea that life began at conception and that abortion was therefore a crime to justify their claim on the coveted role of moral advisor to an increasingly secular populace. Yet in order to make such a claim, doctors had to diligently reflect and reinforce the prevailing elite morality of a deeply patriarchal society. When these doctors discovered their women patient's casual attitude toward abortion and birth control, they were distressed to find patients making decisions independent of medical expertise but more importantly, they were shocked to find women making moral judgements independent of men.

Defining morality was long considered an exclusively male prerogative, and doctors were able to enhance their authority only by protecting it against the assault.

Abortion and contraception symbolized a threat to patriarchal authority on a familial level as well. Unfortunately, one finds little evidence of Canadian women's own agenda for contraceptive technology in the McLarens' analysis of letters written by Stopes and Sanger. Here, they stress women's expressed desire to use birth control to enhance their role as wives and mothers. Evidence contrary to this generalization can be found in the letters themselves, however. One writer speaks approvingly of a woman who used birth control to thwart the ambitions of a "mean, jealous husband" who sought to ensure his wife's fidelity by having a new baby every year (30).

Attributing reproductive decisions largely to couples rather than to women, as the McLarens seem to do, and assuming that such decisions were made in response to socio-economic factors alone, leaves little room for a discussion of gender divisions within the family. One must question whether there is enough evidence to conclude that Canadian couples were unanimous in their reproductive decision-making, or that women's lip service to conventional sex roles is sufficient evidence of acquiescence to male authority within the family.

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Desmond Morton and Glenn Wright — *Winning the Second Battle: Canadian Veterans and the Return to Civilian Life, 1915-1930*. Toronto: University of Toronto Press, 1987. Pp. xiv, 328.

Veterans have never been a fashionable topic for historians. With respect to the First World War, much more has been written about how and why men joined the armed services than about their departure. What work has been done on returning servicemen has tended to focus on their organizations and the role these played in political movements and social protest. Most books on the period can manage little more than a reference in passing to veterans as victims of economic depression and government callousness. What governments actually did is hardly mentioned.

Desmond Morton and Glenn Wright have set out to fill this gap. Government activity forms the very heart of their book, along with an examination of its relationship to the veterans' organizations across the country. This is essentially a study of bureaucratic anticipation and adaptation. Insofar as there are heroes, they are the officials or "outsiders" brought into central administration who had the drive, vision and acumen to devise "effective institutions and policies" for problems never before faced: "a small number of imaginative and clear-sighted Canadians, virtually unknown to their contemporaries and wholly unknown to posterity" (xi). The authors demonstrate that the main lines of policy were set before veterans' organizations had sufficient muscle to force a response from government. Policies on pensions, treatment of the disabled, training, land settlement and "re-establishment" generally were not without their shortcomings. Veterans' groups in the 1920s spent much time reminding politicians of just where the deficiencies lay. However, Morton and Wright