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Author(s): Courtney Shah

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# *THE WOMAN'S DEPARTMENT: MATERNALISM AND FEMINISM IN THE TEXAS MEDICAL JOURNAL*

COURTNEY SHAH

In 1912, a physician praised the *Texas Medical Journal's* newly established Woman's Department in a letter to the editor. "The department you are establishing . . . along this line, giving women good, wholesome knowledge without the taint of quackery is a most worthy undertaking and deserves hearty support,"<sup>1</sup> he wrote. The *Texas Medical Journal*, the most popular and long-standing independent medical journal in the state, was the creation of Dr. Ferdinand Eugene Daniel. His wife, Josephine Draper Daniel, founded the Woman's Department as an insert within the pages of the *TMJ*. Like so many journalists and activists in the Progressive Era, Josephine used maternalism as a justification to expand women's roles in the public sphere, as well as to justify her own ambitions. But while she usually stressed conservative reforms that did not challenge the dominant model of family life or women's place within it, Josephine Daniel simultaneously presented two curious lines of dissent. First, she challenged the *TMJ's* (and thus her husband's) pro-eugenics stance; and second, she introduced a veneer of radical feminism into the publication, expressed mainly in a more open attitude toward women's sexuality.

As Americans coped with the harsh realities of industrialization, urbanization, and immigration in the late nineteenth and early twentieth century, a reform-minded cadre of well educated, middle-class men and women saw the possibility for change to eradicate the evils of modern society.<sup>2</sup> This response to the Gilded Age capitalist status quo is often called the Progressive movement. Women activists, both locally and on a national level, demanded government involvement to alleviate poverty, poor living conditions, and disease. Many more women entered the professions than had previously, particularly the social sciences. Through education and a scientific approach to problem solving, influential female reformers such as Florence Kelley, Jane Addams, and Julia Lathrop hoped to improve the lot of American citizens,

*Courtney Shah is a Ph.D. student in history at the University of Houston.*

<sup>1</sup>W. R. Blailock to the Editor, *Texas Medical Journal* 28 (1912): 67.

<sup>2</sup>See Richard Hofstadter, *The Age of Reform: From Bryan to F.D.R.* (New York, 1955); and Robert Wiebe, *The Search for Order, 1877–1920* (New York, 1967).

especially workers, women, and children.<sup>3</sup> To justify their actions, female reformers played upon the older Victorian representation of women, particularly mothers, as the moral arbiters of society: sexually pure, uncorrupted by commercial or political concerns, the educators of children.<sup>4</sup> Yet by the early twentieth century, progressive women took their moral identity a step further. Rather than holding women responsible only for the “separate sphere” of the home and children, they embraced the concept of municipal housekeeping: reformers saw the town or city as an extension of the home, the schools as an extension of their own children, and indeed political involvement as necessary in order to clean up the problems of the public sphere.<sup>5</sup>

Maternalism played a crucial role in women’s political activism in the years immediately preceding the passage in 1920 of the nineteenth amendment, which gave women the right to vote. Historians Sonya Michel and Robyn Rosen stress that maternalism accepted the prevailing principle of gender difference and women’s identity as mothers.<sup>6</sup> While the term carries a variety of meanings, essentially it refers to the utilization of gender differences, particularly women’s role as mothers, to demand the application of domestic values to society at large. Josephine Daniel’s department was filled with maternalist rhetoric: the moral worth of motherhood as a challenging and necessary career, the centrality of children’s well-being to public policy, and the unique abilities of women to improve society by extending their maternal responsibilities to the community at large. In opposition to feminism at the time, maternalists did not undermine the popular Victorian concept of women’s biological and moral difference from men. Rather, they advocated a politics of difference, while radical feminists advocated a politics of sameness.

Radical feminists, politically less powerful during the Progressive Era, urged America to refuse the widely accepted theories of sex difference. Denying that women possessed less ability or different characteristics than did men, they demanded all the rights and responsibilities of citizenship not through their role as mothers, but as human beings. Anarchist Emma Goldman and birth control advocate Margaret

<sup>3</sup>See Ellen Fitzpatrick, *Endless Crusade: Women Social Scientists and Progressive Reform* (New York, 1990); Kathryn Kish Sklar, *Florence Kelley and the Nation’s Work* (New Haven, 1995).

<sup>4</sup>Barbara Welter, “The Cult of True Womanhood: 1820–1860,” *American Quarterly* 18 (Summer 1966): 151–74.

<sup>5</sup>Paula Baker, “The Domestication of Politics: Women and American Political Society, 1780–1920,” *American Historical Review* 89 (June 1984): 620–47; Maureen A. Flanagan, “Gender and Urban Political Reform: The City Club and the Women’s City Club of Chicago in the Progressive Era,” *American Historical Review* 95 (October 1990): 1048–50.

<sup>6</sup>Sonya Michel and Robyn Rosen, “The Paradox of Maternalism: Elizabeth Lowell Putnam and the American Welfare State,” *Gender and History* 4 (Autumn 1992): 362–86.

Sanger both saw sex differentiation as artificial and harmful.<sup>7</sup> They demanded equality for women in the workplace, in the home, and in the arena of sexual emancipation. For these reasons, radical feminists were often seen as a threat to the patriarchal family.

F. E. Daniel's journal, founded in 1885, was one of the first and longest-lasting independent journals in the state. By its second decade of publication, *Daniel's Texas Medical Journal* (the journal's original name) claimed a readership of approximately 1,000 subscribers, though the *TMJ*'s "Special Notice to Advertisers" claimed to print 2,000 copies each month for both regular subscribers and individual sales. "The Journal circulates principally in Texas, and is extensively read by the better element of Texas physicians; it has an influence with them second to none," the editor reported in 1892.<sup>8</sup> The journal also attracted readers outside of Texas, including U.S. Surgeon General John B. Hamilton.<sup>9</sup> While Daniel perhaps exaggerated, a readership of even 1,000 was quite significant at a time when the Texas State Medical Association (TSMA) scarcely topped 500. In fact, it was widely considered the most influential journal in Texas prior to the advent in 1904 of the *Texas State Journal of Medicine*, the official publication of the state medical association.<sup>10</sup>

Ferdinand Daniel built his journal on the back of two major Progressive campaigns: professionalization of the medical field and the new "science" of eugenics. At a time when proprietary medical schools could and did churn out licensed physicians after only a few weeks of study, progressive circles were abuzz with the need for medical education reform. Local and national agitation to organize resulted in the formation of the American Medical Association (AMA) and its member state associations, the development of state boards of health, state licensing laws, and regulations regarding medical education during the Progressive Era. Daniel, convinced that doctors should shape the society that depended on them both through healing and through legislation, believed strongly in regulating who could wear the title "physician" and who could thus influence society and the law through this heightened status. Many articles and editorials in the *TMJ* (nicknamed the "Red Back") urged guidelines for medical licensing and purging from the profession those Daniel considered unqualified.

Medical regulation culminated in 1910 when the AMA published the Flexner Report, requiring uniform standards for medical education: longer curricula, better

<sup>7</sup>Christine Stansell, *American Moderns: Bohemian New York and the Creation of a New Century* (New York, 2000), chaps. 7–8.

<sup>8</sup>*Daniel's Texas Medical Journal* 8 (1892): 166.

<sup>9</sup>*Daniel's TMJ* 4 (1888): 81.

<sup>10</sup>Pat Ireland Nixon, *A History of the Texas Medical Association 1853–1953* (Austin, 1953), 246.

laboratory equipment, and training in a variety of specialties. The Flexner Report closed many of the smaller, poorly funded, proprietary medical schools—usually the ones catering to female or black students. This action reinforced the regulatory actions of the AMA and the state associations for which F. E. Daniel fought, providing for doctors the elite and masculine identity that reinforced its authority to the public.<sup>11</sup>

Daniel was also a strong advocate of eugenics, the effort to improve human heredity by controlled breeding. In favoring negative eugenics, which aimed at preventing the undesirable elements of the population from breeding, Daniel represented an extreme wing of the movement. Swept up in the popular hereditarian thought that followed publication of Charles Darwin's *Origin of Species* in 1859 and Sir Francis Galton's *Hereditary Genius* in 1869, he was convinced that traits such as intelligence, morality, poverty, alcoholism, and criminal behavior passed genetically from generation to generation.<sup>12</sup> His antipathy toward reforming or curing degenerates and the negligible role he believed environment played in criminality led Daniel to conclude that the cheapest and most effective way to limit social degeneracy, which Daniel assumed was caused mainly by black or foreign people, was to sterilize the unfit before they could reproduce.<sup>13</sup> Daniel proposed castration as a punishment for rape and other violent crimes, arguing that such a harsh punishment would act as a deterrent to rape and prevent criminals from breeding a future generation of unlawful and violent citizens.<sup>14</sup> He devoted much of his journal to the pro-eugenics argument and campaigned for a sterilization bill in Texas in 1907 and 1910.

After his legislative efforts failed, F. E. Daniel switched strategies, using the *TMJ* to educate physicians and the lay public in his eugenics theories. He particularly targeted women, who comprised a powerful pressure group interested in progressive reform. To this end, he enlisted the help of his wife to create the Woman's Department in 1912, an insert emphasizing health as it related to women and children.<sup>15</sup> With allegorical illustrations and the admonition, "Ignorance is not innocence," the

<sup>11</sup>Ibid., 86–87; James G. Burrow, *AMA: Voice of American Medicine* (Baltimore, 1977), 35–36; Kenneth Ludmerer, *Time to Heal: American Medical Education from the Turn of the Century to the Era of Managed Care* (Oxford, 1999), 3.

<sup>12</sup>Daniel Kevles, *In the Name of Eugenics: Genetics and the Uses of Human Heredity* (New York, 1985), chap. 1.

<sup>13</sup>See F. E. Daniel, "Castration for Rape," *Daniel's TMJ* 22 (1907): 393; G. Henri Bogart, "Sterilization: The Indiana Plan," *TMJ* 26 (1910): 82; and F. E. Daniel, "Elements of Decay in American Civilization," *TMJ* 25 (1909): 2.

<sup>14</sup>F. E. Daniel, "The Cause and Prevention of Rape," *TMJ* 23 (1908): 398.

<sup>15</sup>*TMJ* 28 (1912): 63–72.

Woman's Department made its first appearance in the pages of the *Texas Medical Journal* in August 1912, and under Josephine Daniel's direction it became a staple of the *TMJ* for the next several years.

As Ferdinand Daniel's health faded, Josephine Daniel assumed more of the day-to-day operations of the entire journal. With her input, the journal took on a "feminized" tone, appealing not just to the predominantly male field of physicians but also to the lay public and especially to women. Partly to promote Ferdinand Daniel's social and political platform, and partly due to competition from the successful *Texas State Journal of Medicine*, the *TMJ* wished to broaden its audience. As competition picked up, the Red Back subscription price dropped from \$2.00 to \$1.00, making it affordable to the general public.

Before she could influence her readers, Josephine needed to establish her reputation as a reliable source of information, just as Ferdinand had done two decades before with the *TMJ*. To accomplish this, Josephine employed techniques similar to those used by her husband in his battle against quackery. The first was to stress the cachet of a medical degree in the post-Flexner era of strict regulation.

Josephine said the department was merely "conducted by Mrs. F. E. Daniel," and cited an impressive list of contributors on whom she depended for her information. She also included several reform leaders from outside the medical profession to add weight to the less scientific ideas she wished to support. The first issue, for example, mentioned collaboration with such figures as Miss Eleanor Brackenridge, president of the Equal Franchise Society of San Antonio, and Mrs. John S. Turner, recording secretary of the Texas Congress of Mothers and wife of the TSMA president. Interestingly, she also included Dr. Margaret Holliday, a women's physician from the University of Texas.<sup>16</sup>

Josephine Daniel's reliance on male medical experts—seven of her eight regular contributing doctors were men—illustrates the gendered nature of the medical profession at the time of the Flexner Report. Debate raged during the Progressive Era regarding women in medicine. The stance of the *TMJ*, however, was somewhat surprising. Throughout his career, Ferdinand Daniel maintained an almost legendary prejudice against black physicians and alternate schools of medicine such as osteopathy and homeopathy. He applauded the Jim Crow regulations in Texas and elsewhere that barred blacks from the legitimacy they would have received through membership in the AMA.<sup>17</sup> In 1910, he went even further, proposing the "Daniel Amendment" to the TSMA constitution, which called for changing eligibility from "the entire medical profession of the State of Texas" to "all the reputable, white

<sup>16</sup>*TMJ* 28 (1912): 63.

<sup>17</sup>F. E. Daniel, "Status of the Colored Brother in Relation to the A.M.A." *TMJ* 21 (1906): 362–63.

physicians of the state.”<sup>18</sup> The measure failed in committee, however; ironically, the TSMA commented that Daniel’s amendment, which would bar black and Asian physicians, was not necessary because a similar stipulation already existed in the organization’s bylaws. Yet while Ferdinand Daniel’s racism remained virulent, he maintained a liberal policy toward the acceptance of women into the “old boys’ club.” In 1888, *Daniel’s Texas Medical Journal* “boasted that Texas could claim the honor of being the first [state] to receive a woman [Dr. Florence Collins] into fellowship without a dissenting voice.”<sup>19</sup>

Daniel’s enlightened attitude toward female physicians was unusual at the turn of the century. While many medical schools possessed a quota system to allow women to fill up to five percent of the admissions, in reality few schools admitted enough applicants to fill these quotas. Women who had made strides entering professions in the late nineteenth century found that professionalization and regulation in the Progressive Era reduced educational opportunities for the next generation of professional women. In the late nineteenth century, prominent voices within the medical profession held that advanced education was dangerous to women’s health. Doctors such as Edward H. Clarke of Harvard University concluded that female students could not survive the rigors of higher education without endangering their reproductive strength.<sup>20</sup>

The AMA also feared that women in the field could saturate the market and drag down the status and economic advantages of the medical profession. In the late 1890s, the AMA endorsed the domestic science movement in the hope that it would reduce “competition of labor between the sexes” in the more masculine sciences, as well as other social problems ranging from infant mortality to divorce.<sup>21</sup> By the turn of the century women increasingly vied with men for admission to male-dominated medical schools, as well as for lucrative practices, despite heavy resistance,<sup>22</sup> but the ratio of women in the medical field actually declined in the early decades of the twentieth century as hospitals and medical schools practiced sex discrimination under the guise of professional standardization.<sup>23</sup> Female medical colleges, disparaged by the Flexner Report, closed down across the nation.

<sup>18</sup>“Transactions,” *Texas State Journal of Medicine* 6 (1910): 3.

<sup>19</sup>“Feminine Physicians,” *Daniel’s Texas Medical Journal* 3 (1888): 111.

<sup>20</sup>Edward H. Clarke, *Sex in Education, or A Fair Chance For Girls* (Boston, 1873), 43.

<sup>21</sup>“Public-School Instruction in Cooking,” *JAMA* 32 (1899): 1183.

<sup>22</sup>Mary Roth Walsh, “Doctors Wanted: No Women Need Apply”: *Sexual Barriers in the Medical Profession, 1835–1975* (New Haven, 1977), 191.

<sup>23</sup>Ellen Chesler, *Woman of Valor: Margaret Sanger and the Birth Control Movement in America* (New York, 1992), 45; Regina Morantz-Sanchez, *Sympathy and Science: Women Physicians in American Medicine* (New York, 1985), chap. 9.



Women therefore remained a rarity in medical schools. The University of Texas medical branch graduated its first woman in 1897 and never officially denied women admission on the basis of gender. Yet the numbers of female medical students in Texas and across the nation remained well below five percent of the total due to hostility on the part of faculty, administrators, and male students. The entering class of the University of Texas medical school in 1900, for example, contained 62 men and one woman.<sup>24</sup> The AMA, lagging behind state societies, did not accept its first female member until 1915.<sup>25</sup> The “gentleman physician” had arrived at the expense of the “lady doctor,” and Josephine Daniel recognized the wisdom in deferring to male, rather than female, medical expertise.

The major topics of the Woman’s Department fell into step with women’s clubs and reform organizations of the Progressive Era.<sup>26</sup> Many reform-minded women belonged to organizations such as the National Congress of Mothers or the General Federation of Women’s Clubs, or local and state affiliates of either. These groups provided political support for maternalist aims such as school improvement, public health initiatives, and (for some) women’s suffrage.

The first issue of the Woman’s Department introduced many of the subjects that Josephine Daniel planned to address, including pure food laws (in existence since 1906 but poorly enforced), social and public hygiene, efficient motherhood, sex education, eugenics, and the emancipation of women.<sup>27</sup> These topics ran the gamut from conservative maternalism, which focused on women’s duty as mothers to improve children and society, to the more radical facets of feminism—more individualistic demand for equal rights to men—that began to pervade the press.<sup>28</sup> The list of contributors read like a *Who’s Who* in expertise, as Daniel included each contributor’s position and credentials. One byline read, “By William J. Robinson, M. D., New York, Chief of the Department of Genito-Urinary Diseases and Dermatology, Bronx Hospital and Dispensary; Editor *Collectanea Jacobi*, etc.”<sup>29</sup> Thus, she stressed

<sup>24</sup>Geneva Fulgham and Elizabeth Silverthorne, *Woman Pioneers in Texas Medicine* (College Station, 1997), 86.

<sup>25</sup>Barbara Ehrenreich and Dierdre English, *For Her Own Good: 150 Years of Experts’ Advice to Women* (New York, 1979), 66.

<sup>26</sup>See Judith McArthur, *Creating the New Woman: The Rise of Southern Women’s Progressive Culture in Texas, 1893–1918* (Urbana, 1998); Theda Skocpol, *Protecting Soldiers and Mothers: The Political Origins of Social Policy in the United States* (Cambridge, 1992); Molly Ladd-Taylor, *Mother-Work: Women, Child Welfare, and the State, 1890–1930* (Urbana, 1994).

<sup>27</sup>*TMJ* 28 (1912): 66.

<sup>28</sup>Nancy F. Cott, *The Grounding of Modern Feminism* (New Haven, 1987), 3; Ladd-Taylor, 45.

<sup>29</sup>William J. Robinson, M. D., “Gonorrhea and Marriage,” *TMJ* 29 (1913): 259.



the scientific, professional treatment that would set the *TMJ* apart from women's magazines like the *Ladies' Home Journal*. While not claiming herself as an expert, she nevertheless reassured her readers that the information she provided was only the most scientific and correct.

According to the prescriptive literature of the nineteenth century, a woman's first and foremost duty was to become a good wife and mother. But the Progressive Era and President Theodore Roosevelt's ethos of activity suggested a new model of wifehood and motherhood. Educated, middle-class women could forsake the delicate, sickly Victorian ideal for robust health without damaging their gentility, and physically active women could be involved in clubs, philanthropy, and self-improvement. But in order to accommodate all of these interests, they also had to be efficient housekeepers.<sup>30</sup>

Many feminists and progressives alike dubbed the twentieth century as "the century of the child," and activists' use of maternalist rhetoric for a variety of political purposes certainly contributed to that label. Women's clubs and the Congress of Mothers both used maternalist rhetoric to achieve a broad range of political aims, from conservative health education measures to innovative state-sponsored provisions that became the precursors to the American welfare state.<sup>31</sup> Most women activists agreed that for the safety of the family, modern times required a woman to be educated in order to combat the medical and moral problems that threatened her sphere of influence.

The new germ theory of disease presented a scientifically recognized threat to children, although many still disagreed about how to solve the problem of microbes. Josephine Daniel advocated two specific methods to stop germs from reaching children. In August 1912, she praised the state legislature's passage of the 1906 state pure food law, though she bemoaned the lax enforcement of this law, and called upon women to pressure both politicians and the grocerymen to toe the line. But the impetus fell on mothers as well: "Believing that every woman should know something about the adulteration of our simplest foods, I asked Dr. Abbott [Dairy and Food Commissioner of Texas] to write an article on this subject for the Journal, and he has done so."<sup>32</sup> Dr. Abbot, for his part, placed the burden of pure food vigilance on the housewife: "Is it not perfectly reasonable to say that the housewife should spend a little time studying some of our common articles of diet and that

<sup>30</sup>Ehrenreich and English, *For Her Own Good*, 141–42.

<sup>31</sup>Skocpol, *Protecting Soldiers and Mothers*; Seth Koven and Sonya Michel, "Womanly Duties: Maternalist Politics and the Origins of the Welfare States in France, Germany, Great Britain, and the United States, 1880–1920," *American Historical Review* 95 (1990): 1076–1108.

<sup>32</sup>Josephine Daniel, "Woman's Part in Helping to Enforce the Pure Food Laws," *TMJ* 28 (1912): 64.

she should get some first-hand knowledge of [the] dietetic value of such food-stuffs?"<sup>33</sup>

In November 1912, the Woman's Department published an article by Dr. M. B. Grace of Seguin, Texas, discussing the variety of diseases spread from child to child in schools through the common drinking cup. The doctor advised,

Mothers, teach your children the necessity of protecting their health. Warn them against the common or public drinking cup, loaning and borrowing pencils, chewing gum and eating from the same apple or banana, and teach them why. In this way you can impress them with the necessity of guarding against infection, remembering that the occurrence of any preventable disease is *someone's fault*.<sup>34</sup>

Grace's advice clearly illustrates the double-edged sword of scientific women's work: as women gained educational opportunities, personal fulfillment, and social benefits from their scientific vocation, they also shouldered the blame for whatever wrongs occurred. Women were the protectors of children, and the seat of blame when children got sick or died.

A similar pattern was echoed in the Woman's Department and throughout progressive America on the topic of infant mortality, a problem that drew much attention during the first 20 years of the century. In 1912, the U.S. infant mortality rate was calculated at 51 per thousand births, one of the highest rates of any industrialized country.<sup>35</sup> Historian Richard A. Meckel categorizes the infant mortality campaigns of the Progressive Era into three distinct phases: environmental reforms, milk purity, and finally mothers' education, as infant mortality came to be blamed on mothers' ignorance. This perception reflected particularly the class and ethnic bias of middle-class, white women reformers, who distrusted the domestic and maternal abilities of women in slums, immigrant enclaves, and large cities.<sup>36</sup>

Concern about infant mortality resulted in the creation of the Children's Bureau in 1912, founded under the direction of settlement veteran Julia Lathrop. One of the bureau's goals, like that of many women's organizations and publications, was to instruct mothers and mothers-to-be on the proper care of themselves and their

<sup>33</sup>J. S. Abbott, "Some Causes of Adulterated Food," *TMJ* 28 (1912): 70.

<sup>34</sup>M. B. Grace, M.D., "The Dangers of the Public Drinking Cup," *TMJ* 28 (1912): 200–201 (emphasis in original).

<sup>35</sup>"New Zealand Society for the Health of Women and Children," *TMJ* 29 (1914): 550; Meckel, *Save the Babies*, 238.

<sup>36</sup>Richard A. Meckel, *Save the Babies: American Public Health Reform and the Prevention of Infant Mortality, 1850–1929* (Baltimore, 1990), 6.

children. In 1913, the Woman's Department likewise provided instructions to new mothers, claiming that "the chief causes of this shocking mortality of infants, are ignorance and neglect." What is more, the author declared "dangerous" and "unnatural" several common practices of feeding and nursing infants. "No mother with a proper regard for the comfort and well-being of her child will indulge in a custom so pernicious [as giving her baby a taste of jelly, chicken, or bacon]."<sup>37</sup>

A 1914 article praised New Zealand's efforts to fight infant mortality: "The infant mortality rate of New Zealand has been for some time recognized as the lowest of any country in the world, and it is stated that recent further reductions are due in large measure to the activity of [the New Zealand Society for the Health of Women and Children]."<sup>38</sup> Such efforts included state-run maternity hospitals, educational prenatal centers, and visiting nurse services.<sup>39</sup> "[T]here is every reason to believe that similar volunteer effort in this country would produce similar results," the author concluded. The *TMJ* recognized early on that infant mortality was not limited to urban or immigrant areas and demanded the problem be addressed "not only in cities but in country districts."<sup>40</sup> Eighty-three percent of infant welfare stations organized after the 1912 founding of the Children's Bureau were located in the North, mostly in major cities. By 1915, the South had only 41 infant welfare stations, 20 of which were in Baltimore or Washington, D.C. Reflecting the bias of many northern reformers who worked primarily with the immigrant poor, the Children's Bureau realized only later that infant mortality was an acute problem in rural, and particularly black, communities in the South.<sup>41</sup>

The very nature of the infant mortality prevention movement in the country was closely tied to the eugenics movement. While not intrinsically incompatible with pronatalism, eugenics theories nevertheless presented a stumbling block for public health measures, especially among African American populations, as some eugenicists saw infant mortality as a way to allow inferior races to die out naturally.<sup>42</sup> Theodore Roosevelt was the most prominent advocate of "positive" eugenics, encouraging the fit to produce more children. In his mind, a higher birth rate

<sup>37</sup>David Allyn Gorton, M.D., "Infancy and Childhood," *TMJ* 29 (1913): 211–12.

<sup>38</sup>"New Zealand Society for the Health of Women and Children," 550.

<sup>39</sup>Meckel, *Save the Babies*, 195–97.

<sup>40</sup>"New Zealand Society for the Health of Women and Children," 550.

<sup>41</sup>Meckel, *Save the Babies*, 142; Susan L. Smith, *Sick and Tired of Being Sick and Tired: Black Women's Health Activism in America, 1890–1950* (Philadelphia, 1995).

<sup>42</sup>Klaus, *Every Child a Lion*, 14, 35–36.

among healthy, native-born white women directly resulted in an increase in national and imperial strength.<sup>43</sup> Roosevelt and other positive eugenicists argued that Americans must bear more and better babies; infant mortality campaigners countered that Americans needed to protect the children already born to them. Furthermore, the leaders of the Children's Bureau argued, scientific studies showed that the main cause of death in the first months of life was not heredity but environmental problems, especially poverty.<sup>44</sup>

The infant mortality campaign directly contradicted the very viewpoint that gave the *TMJ* its identity and reputation in the first decade of the twentieth century: Ferdinand Daniel's vision of coercive eugenics. Daniel had spent years crafting his journal into a polemical, pro-eugenics reader, even going so far as to establish a separate "Department of Eugenics" in 1912 to explore the extreme pro-eugenics argument. Daniel's opinions were by no means typical of the entire eugenics movement; he embraced a fringe philosophy that almost entirely discounted the influence of environmental factors in human development, which set him in opposition to many eugenicists of the time.<sup>45</sup> Josephine Daniel, given a voice in her husband's journal to express her own interests, directly contradicted his stance on the significance of nature over nurture. In an article entitled "Habit," which ran with her byline in 1912, she wrote:

The people of the twentieth century can no longer stand quietly by and acquiesce in the exploded world-old theory that we can't help our shortcomings and failures because we inherited them. . . . We may have inherited a predisposition to evil, just as we may have inherited a predisposition to consumption. We know now that we do not inherit consumption; and we also know that no man inherits a bad habit from an ancestor.<sup>46</sup>

Her attack on Lamarckian genetics, the theory that acquired characteristics such as criminal behavior would be passed on to offspring, hit right at the core of the struggle between eugenics and the emerging field of genetics. Whereas Ferdinand claimed that criminal behavior, particularly in black and Eastern European populations, was hereditary and solvable only by sterilization, Josephine concluded that "there are two potent factors in the formation of character: environment and

<sup>43</sup>Thomas G. Dyer, *Theodore Roosevelt and the Idea of Race* (Baton Rouge, 1980), 148–54.

<sup>44</sup>Meckel, *Save the Babies*, 101–17.

<sup>45</sup>Mark Haller, *Eugenics: Hereditarian Attitudes in American Thought* (New Brunswick, 1963), 130–32; Martin Pernick, *The Black Stork: Eugenics and the Death of "Defective" Babies in American Medicine and Motion Pictures Since 1915* (New York, 1996), chap. 3.

<sup>46</sup>Josephine Draper Daniel, "Habit," *TMJ* 28 (November 1912): 196.

heredity. Most authorities agree that environment is a greater force in the moulding of human character than heredity." A child taken away from the "rough language" of the slums and left with a "proper" family, she theorized, would develop nothing but good habits and perfect English.<sup>47</sup>

In the October 1913 issue of the *Woman's Department*, F. E. Daniel wrote that "[o]wing to Mrs. Daniel's absence from Austin, we are without her usual chatty and breezy articles this month and we crave the indulgence of our women readers."<sup>48</sup> Ferdinand's summation of his wife's work as "chatty and breezy" certainly calls into question how carefully he read the journal that bore his name. Through the mass of maternalist topics, two intriguing lines of dissent emerged. Josephine wrote and published articles contradicting her husband's intensely pro-eugenics stance, arguing for the dominance of environment over heredity affecting a person's development, and she also gave voice to ideas that went beyond the maternalist politics of difference to embrace the politics of sameness popular among radical feminists.

At this time the women's movement focused largely on the benefits of granting women additional rights, such as the vote, *because* of their sex difference. Maternalism held sway within the women's movement, as women protested their political exclusion. Maternalists saw the community and indeed the nation as the home writ large, a home that must be cared for by those uniquely situated to do so. The influential Texas Congress of Mothers held that women were responsible for the nurture and moral uplift of family and community, and thus would positively influence legislation to prevent social corruption. During the Progressive Era, such policy movements as the Pure Food and Drug Act, women's suffrage, and prohibition depended greatly on women's organizations to mobilize their constituents.

Feminism, far more liberal than the women's movement and fast becoming a household word, in some ways opposed the mainstream women's movement. According to historian Nancy Cott, feminists focused on women's *sameness* to men in everything from intellect to sex drive. Feminism had wider and more ambitious goals than the women's movement, refusing to limit women to their role as mothers either in the private or the public sphere. The feminist movement refuted such mainstays of the women's movement as Victorian sexual purity. Consequently, feminism appealed to a smaller audience, remaining a fringe movement while the women's movement predominated.<sup>49</sup>

<sup>47</sup>*Ibid.*, 197; see also Haller, *Eugenics*, chap. 5; Donald Pickens, *Eugenics and the Progressives* (Nashville, 1968); and Daniel J. Kevles, *In the Name of Eugenics: Genetics and the Uses of Human Heredity* (Cambridge, 1985), chaps. 4–6.

<sup>48</sup>*TMJ* 29 (1913): 155.

<sup>49</sup>Cott, *The Grounding of Modern Feminism*, 29–38.

In June 1914, the Woman's Department reprinted an article by Charlotte Perkins Gilman in the first issue after Ferdinand's death. At the time, Gilman was one of the best-known feminist theorists in America, lecturing and publishing a wide variety of articles and books on the "woman question." Arguably, her most famous work was *Women and Economics*, published in 1898. Providing an economic and evolutionary justification for women's emancipation from home and childcare, Gilman called for the collectivization of housework, salaries for women who performed such work, and the freedom to enter the public sphere and work for those women who shunned housework.<sup>50</sup>

Gilman's article in the *TMJ*, "Romance and Reality in Married Life," brought out several of the themes for which she was best known. Her two principal demands were equal educational opportunities for women and the right to economic and sexual independence. Gilman derided the so-called ladylike curriculum of literature, art, and music, while men studied business, law, and politics. She blamed increased divorce rates during the Progressive Era on this inequality of the sexes in education and in experience: "All this difficulty could be avoided by proper teaching of both boys and girls" on the same subjects. A wife should be more than a help-mate, Gilman argued; she should be an equal:

Beyond all this we should remember that love is not the whole of life—even for a woman. It is easier for a man to bear the lack of it because he has a wider life outside, but she also may strengthen herself by taking an honest interest in world, in study, in any line of human growth that is open to her.<sup>51</sup>

Gilman further posited that women who performed housework should expect a salary commensurate with the public standards of laundresses, cooks, dressmakers, or domestic servants. If the wife did not enjoy housework (as Gilman did not), "let her have the joy of striking out in new fields, learning the business that belongs to her, and doing it proudly."<sup>52</sup> Her article, which began as typical women's magazine fare for improving romance in a marriage, instead advocated radical feminist ideas like women in the professions and in the traditionally male domain of higher education. Women should have the option to gain fulfillment through a career rather than to "drudge" out of economic necessity inside or outside the home, Gilman argued. Her call for economic independence may not have struck a chord with all

<sup>50</sup>Charlotte Perkins Gilman, *Women and Economics: A Study of the Economic Relation Between Men and Women as a Factor in Social Evolution* (Boston, 1898).

<sup>51</sup>Charlotte Perkins Gilman, "Romance and Reality in Married Life," *TMJ* 29 (1914): 551–56.

<sup>52</sup>*Ibid.*, 556.

*TMJ* readers, but it did with Josephine Daniel herself, who continued her career in journalism well into the 1920s.

The Woman's Department also addressed an even more taboo topic: birth control. For years, the medical profession had opposed artificial contraception, as witnessed by numerous articles in the *Journal of the American Medical Association* (*JAMA*) discussing the medical and social dangers of purposeful family limitation.<sup>53</sup> Medically, the AMA doubted the effectiveness and safety of artificial birth control, while socially they feared sexual promiscuity and the demise of the traditional family. The federal government also shunned birth control, as evinced by the passage of the Comstock Law in 1873, which forbade sending contraceptive information or devices through the mail by defining contraception as obscene.

In 1912, the battle over sex education—even in a medical publication—had still to be won, and Josephine Daniel laid the groundwork for birth control by her interest in social hygiene. Without advocating the kind of sexual emancipation embraced by bohemian radicals like Margaret Sanger and Emma Goldman, Josephine used the conservative language of social purity and hygiene to open a frank dialogue with her audience. An article by Mrs. M. C. Kersh of the Women's Christian Temperance Union, for example, declared that "Diseases of vice, the most insidious evil of this and future generations, are spreading rapidly . . . the reason for which is, perhaps, that we have lacked the moral courage to openly recognize and fight this evil."<sup>54</sup> The Woman's Department motto, "Ignorance is not Innocence," was a catchphrase of the social hygiene movement, which urged physicians not to deny women knowledge on the basis of keeping them "pure."<sup>55</sup>

As Ferdinand had publicized various states' passage of sterilization bills in an effort to encourage Texas to do likewise, so Josephine printed articles about the liberalization of sex education in various states and municipalities. In 1912, she noted, "After months of argument, the Board of Education of Orange, N.J., has come to the conclusion that sex hygiene should be taught in the public schools."<sup>56</sup> She offered no editorial comment regarding this decision, but its mere mention laid the groundwork for her own advocacy of sex education.

In November of that same year, the Woman's Department advertised two educational texts by Dr. E. B. Lowry: *Truths* (for boys) and *Confidences* (for girls) would

<sup>53</sup>Chesler, *Woman of Valor*, 64.

<sup>54</sup>M. C. Kersh, "An Appeal to the Women Organizations," *TMJ* 27 (1912): 204.

<sup>55</sup>John C. Burnham, "The Progressive Era Revolution in American Attitudes Toward Sex," *Journal of American History* 59 (1973): 898.

<sup>56</sup>"Sex Hygiene," *TMJ* 28 (1912): 68.



supply information for parents, teachers, and physicians regarding the teaching of sex hygiene. Josephine believed that boys and girls required sex education in order to maintain proper health and well-being. "The health and happiness of every girl demands that she receive when approaching adolescence an intelligent presentation of the vital life process," Josephine concluded.<sup>57</sup> In keeping with the social hygiene movement, early sex education focused on the prevention of venereal disease.

The sex education Josephine advocated was not meant to threaten conservative notions of marriage and women's role as mothers, but it did challenge the code of silence and the double standard of denying girls the instruction boys received.

An article reprinted from *The [Portland] Oregonian* entitled "Teaching Social Hygiene" made more explicit the need for sexual education from a conservative, moralistic sense. The author applauded the Buffalo Congress on School Hygiene for abandoning the old theory that equated ignorance with innocence and demanding sex education in their curriculum. Sex education, the author argued, should be implemented along with censorship of salacious literature, theatre, and the arts. Though still holding to the double standard that men were controlled by their sexuality and women were merely passive victims of men's passions, the writer admitted the inevitability of sex drive. "Safety [therefore] lies not in eliminating passion, but in controlling it." And in order to control it, children had to understand the consequences of passion.<sup>58</sup>

Purity crusaders had advocated sex education since before the 1880s as a way to protect women, prevent disease, and end prostitution. Advocating a single sexual standard—abstinence before and fidelity within marriage for both men and women—they decried the commonly accepted practice of men sowing their wild oats.<sup>59</sup> Other purity campaigners argued that the only solution to venereal disease was the elimination of prostitution; to that end, men needed wives who could satisfy their husbands' sexual appetites and who were not ashamed of their own sexual needs. Historian Linda Gordon argues that "the basis for the weakening of prostitution between 1910 and 1920 was not the conversion of men to purity; it was the conversion of women to 'indulgence.'"<sup>60</sup>

In December 1913, the *TMJ* opened up completely, bringing out the medical specifics to which social hygiene advocates had merely alluded. The article

<sup>57</sup>"List of Premiums," *TMJ* 28 (1912): 207–8.

<sup>58</sup>"Teaching Social Hygiene," *TMJ* 29 (1913): 160–62.

<sup>59</sup>David J. Pivar, *Purity Crusade: Sexual Morality and Social Control, 1868–1900* (Westport, 1973), 108–15.

<sup>60</sup>Linda Gordon, *Woman's Body, Woman's Right: A Social History of Birth Control in America* (New York, 1976), 192.

"Gonorrhea and Marriage" encouraged couples to be tested for venereal disease before marriage. In order to protect women from disease, the author suggested open discussion of sexual histories and recommended condoms to prevent infection.<sup>61</sup> The leap from moralistic, continence-based sex education to a forthright discussion of artificial birth control broke the line of public acceptance at the time, as well as legal barriers like the Comstock Laws. Birth control advocates also faced the hostility of the male-dominated medical community and the AMA.

In February 1916, Josephine Daniel ran an article by C. V. Drysdale, a leader of the British Neo-Malthusian League (a pro-birth control organization that linked population growth to poverty). Refuting American medical texts that suggested that birth control caused health problems, Drysdale wrote, "I challenge any physician, any gynecologist, to bring forth *a single* authenticated case in which disease or injury resulted from the use of the modern methods of prevention. I know they cannot do it." He attributed the profession's anticontraception attitude to "conventional and theological prejudice." Abstinence and continence, the medically and religiously recommended methods of family limitation at the time, had "almost universally broken down in practice, with terrible consequences," Drysdale said.<sup>62</sup> Drysdale believed the law should not require parents to bring into the world children whom they did not feel had prospects for health and happiness. Unlike Ferdinand Daniel, who believed government should punitively restrict the birth of potentially undesirable offspring, Neo-Malthusians stressed the right of a couple to choose whether or not they should bear children.<sup>63</sup> Like Margaret Sanger's arguments for family limitation and child spacing, Drysdale's argument rested the decision with the individual, not on the state, the church, or the medical profession.

Josephine Daniel, although not openly recommending a radical feminist political platform, quietly introduced feminist ideas to her maternalist audience as well as to many male physicians. The Woman's Department walked a narrow path between deference to medical and societal experts, and a demand to liberate women from the very institutions the experts represented: the sexual hierarchy of the family, the medical profession, and the state.

After Ferdinand's death in 1914, the *Texas Medical Journal* moved further and further from its polemical roots and especially from the pro-eugenics argument. Josephine Daniel's reform agenda, for the most part conservative, maternalist, and

<sup>61</sup>William J. Robinson, M.D., "Gonorrhea and Marriage," *TMJ* 29 (1913): 260.

<sup>62</sup>C. V. Drysdale, "Is Contraception Injurious to Health?" *TMJ* 31 (1916): 324–25 (emphasis in original).

<sup>63</sup>Thomas Shapiro, *Population Control Politics: Women, Sterilization, and Reproductive Choice* (Philadelphia, 1985).

aligned with the political action of powerful women's organizations such as the Texas Congress of Mothers, pushed the envelope to include some traces of radical feminism. She successfully united elements of women's political "sameness" (feminism) and women's "specialness" (maternalism) in order to promote reform in education, public health, and women's status. Her glints of feminism were few and far between in the Woman's Department, but they came to fruition in the final years of the *Texas Medical Journal*.

Josephine Daniel learned from her husband's victories and disappointments. She implemented the progressive strategy of expertise to promote her own two-pronged campaign of reform: maternalist issues such as reducing infant mortality and pure food laws, and the more radical feminist edge of birth control and women's emancipation. Maternal and infant health education propaganda such as the Woman's Department contributed to the "politics of influence" employed by progressive interest groups such as the Texas Congress of Mothers and the Texas Federation of Women's Clubs. They aimed to persuade male voters rather than demanding the vote for themselves.<sup>64</sup> Political scientist Theda Skocpol notes the reliance of the National Congress of Mothers on magazines and newspapers as a propaganda tool for manipulating public opinion and influencing voters.<sup>65</sup> These groups in turn pushed for legislation such as the Texas mothers' pensions in 1917 and the federal Sheppard-Towner Act of 1921, which provided financial and public health assistance to needy mothers and children. Money provided by the Shepherd-Towner Act finally allowed the habitually underfunded Children's Bureau work to reach the South and, particularly, black and Mexican-American populations previously neglected by government health programs.<sup>66</sup>

Even more successful was the progressive challenge to Victorian sexual purity. During the Victorian period, public discussion of sexuality was extremely limited, and a double standard of sexual behavior between men and women flourished. Turning from coercive eugenics to a more individualistic debate, Josephine Daniel was part of the wave of publications—both book and periodical—that brought sex education into the public domain after 1910. Outcroppings of reformist propaganda such as Daniel's journal and the work of her colleague, Dr. Malone Duggan, demonstrated that despite a lack of national coordination, sexual reform made its way into the public consciousness far away from the cosmopolitan Northeast.

<sup>64</sup>Megan Seaholm, "Earnest Women: The White Women's Club Movement in Progressive Era Texas, 1880–1920," (Ph.D. diss., Rice University, 1988), chap. 6.

<sup>65</sup>Skocpol, *Protecting Soldiers and Mothers*, 365.

<sup>66</sup>*Ibid.*, 453–57, 510; Meckel, *Save the Babies*, 212.

During World War I, federal public health campaigns addressed the serious problem of venereal disease in the army and throughout the civilian populations in the South. Birth control gained the acceptance of the medical profession and the general public. Discussion of birth control became common, and the transportation of birth control devices and information gained legal sanction in the following two decades. While political forces in the 1920s rolled back much of the previous decade's gains, historian John C. Burnham considers the "revolutions of morals" of the social hygiene movement "one of the lasting legacies of progressivism in American life."<sup>67</sup> The feminist and maternalist efforts of Josephine Daniel contributed to an altered public attitude toward sex, birth control, and women's rights.

Josephine continued managerial and editorial duties in the *TMJ*, converting it into a new journal, *Practical Medicine & Surgery*, in 1919. In 1924, this journal merged with the remnants of the *Texas Medical News*, one of the other major independent journals in the state, to form *Medical Insurance*. Dr. S. A. Woolsey of the *Texas Medical News* served as editor-in-chief, but Josephine continued her position as managing editor and publisher.<sup>68</sup> With or without her husband, Josephine Daniel was a professional journalist of significant influence within Texas medical circles.

The *Texas Medical Journal*, although it lived on under various names for a few years more, lost its Progressive reformist purpose as World War I engulfed the nation. Ferdinand's campaign for professional regulation lived on in the work of his wife, although she manipulated it to serve her own goals. Through the Woman's Department, Josephine found her niche in medical journalism, influenced progressive reform politics in the state, and continued to be a force in Texas medicine for years to come.

<sup>67</sup>Burnham, "Progressive Era Revolution," 885.

<sup>68</sup>J. M. Coleman, "Medical Journalism in Texas," *TSMJ* 51 (1955): 487.