Historians have long been puzzled by the decline in fertility which took place in Britain between about 1870 and 1939. Specifically, they have wondered how exactly it happened, and have tended to assume that it was the consequence of three interlocking factors: the spread of contraceptive education by pioneers like Marie Stopes, leading to a wider awareness of mechanical birth control methods; the gradual emergence of less patriarchal, more "companionate" marriages in which women's interests were more readily voiced and discussed; and the consequent ability of wives to take control of decisions about birth control and family size. All of these, it is often suggested, were a constituent part of modern attitudes to sex, fertility, subjectivity, and society itself. In particular, the increasing use of birth control has been seen as a rejection of the "traditional" and fatalistic belief that conception, and hence the future, could not be controlled. In contrast, small families and fertility control appear to represent a revolutionary moment in the making of modernity, one in which people began to develop a "modern" mentality of trying to control uncertainty through careful planning.

A number of related assumptions accompany this narrative: first, that women were empowered by taking control of contraceptive decisions--what was in effect their natural province; second, that new methods of birth control required more marital communication and hence were the key cause of the decline in patriarchal marriages; and finally, that the adoption of increasingly reliable appliance methods occasioned the demise of birth control techniques which historians have seen as unreliable, unsatisfying, and harmful to the sex lives and psyches of those practicing them. In this account, the vagaries and frustrations of coitus interruptus are replaced by more predictable condoms, caps, and pessaries. This story is also central to the rise of women's sexual, moral, and political autonomy, a narrative in which key obstacles to female sexual enjoyment--ignorance, insensitive masculinity, unreliable contraceptive methods, and the possibility of conception itself were gradually removed.
However, the paradox remains that histories of the fertility decline, especially those accounts which rely on the statements of sex reformers and birth control pioneers, seem to record an almost total feminine ignorance of sex, birth control, and even the processes of birth and coitus. Part of the problem for the historian then, is reconciling the rise of small, modern families with this widespread profession of sexual ignorance, especially on the part of women who lived through this period.

Kate Fisher's book, for which she conducted 193 interviews, mostly with individuals and couples married in the 1930s, goes some way to solving this puzzle. In doing so, she overturns many of the assumptions historians have made about fertility and sexuality in this period. Fisher concludes that the fertility decline did not necessarily empower women. In working-class communities, it was men, and not women, who retained control of birth control and fertility decisions even up to the 1960s. Sexual knowledge of all kinds was often seen as "sleazy" or unrespectable, and was therefore regarded by most interviewees as the province of men, who were more likely to encounter it, or to learn how to obtain it, in the type of public, homosocial milieu which they occupied. Generally, men were trusted to obtain birth control, and to decide when to use it.

This in turn complicates assumptions about the supposed rise of companionate marriage in the first half of the twentieth century. As Fisher points out, marital discussion of birth control did not follow the companionate model of frank openness and reasoned argument, but instead was a matter of subtle negotiations, assumptions, and indirections. Making explicit plans about family planning and birth control was regarded by most interviewees as excessively rational, and cold-blooded—an approach more associated with medical authorities than the intimacy of marriage. Couples instead held to an idea of sex, love, and conception as "natural" and spontaneous, things that should not be too carefully planned or calculated. They also did not expect contraception to be infallible—it if failed now and again then it was no tragedy, since "accidents" like these fitted with the ruling ethos of family life as a natural occurrence.

The fact that women ceded authority to men in this way also leads Fisher into a discussion of the almost total sexual ignorance recalled by many women. She concludes that this ignorance should never be taken a face value, but seen in context of a gender identity which prized naivety, innocence, and passivity. A telling anecdote told in similar form by many women shows how formalized this profession of ignorance actually was. On being admitted to hospital for their first child, several women recalled not knowing how the baby was going to be born, only to be informed by a friendly nurse that it would come out "the same way it went in" (p. 72). In fact, many women inadvertently revealed that their younger selves did have extensive knowledge of birth control practices, sex, and their bodies. As Fisher puts it, their professions of ignorance often had stereotypical quality and were marked not by complete lack of knowledge, but, if anything, by an uncertainty about which source of information should be trusted. Ignorance was not simply a passive state, but was actively maintained, partly because to be seen to be enjoying sex, knowing about it, or seeking knowledge about it was to be viewed as unrespectable, or even as a loose woman. One woman who was besieged by workmates eager to enlighten her, recalled thinking "ignorance is bliss' ... I didn't want to know these dirty sex habits," while another said that "Anybody who discussed it was accused of being dirty and filthy and, you know, crazed, that sort of thing, you know" (p. 154).

In this context, contraceptive methods like withdrawal, though disdained by contemporary sex reformers, birth control campaigners, and not least by historians who see it as psychologically damaging and inherently unsatisfying for both parties, remained (along with abortion) the form...
of birth control most widely practiced within marriage--and probably without. Withdrawal (in the North nicknamed "getting off at Mill Hill" after a suburban station reached just before arrival at the main Blackburn terminus) remained popular because it was seen to have many advantages over mechanical contraception. Not least of these was its "spontaneous" and "natural" quality, and the fact that it fitted with the gender and sexual identities of those who practiced it. It gave men ostensible control not only over sexual knowledge and the sexual act, but also over decisions about fertility. The persistence of coitus interruptus not only complicates recent historical accounts which try to make assumptions about coital frequency, and hence sexuality, from birth rate statistics, but also gives the lie to idea of the brutal, patriarchal working-class husband. Withdrawal was often seen by couples as a much more caring option than a condom or a cap precisely because the husband was taking responsibility, and because it distanced a couple from the bloodless calculation associated with mechanical birth control. Neither was withdrawal only about a man’s satisfaction, as many historians have assumed. Instead it was a skill prized by many men as a way to prolong rather than curtail a woman’s pleasure.

In these painstaking interviews, a much more nuanced version of the recent past emerges than that discovered in the historiography. The book also represents significant shift in our understanding, one accomplished by careful inquiry into the context of statements, an unwillingness simply to take these at face value, and a painstaking reconstruction of a particular milieu. In particular, Fisher’s book complicates many existing and recent accounts which suggest in rather contemptuous fashion that until very recently most women knew nothing about sex, were disgusted by their bodies, and lived in benighted ignorance until enlightened by sex reformers, birth control campaigners, and social investigators, and that they were only finally liberated from this purgatory by the arrival of the pill. The book shows that sexual knowledge did not proceed by some linear process, that it was not a matter of people becoming gradually better informed about a particular corpus of fact, but that instead it was a matter of conflicting thoughts, practices, and beliefs, all of which were bound up with battles over class, gender, and cultural politics.

This book, despite a slight tendency towards repetition resulting from an anxiety to really prove what might be regarded as contentious points, is a veritable compendium of good sense, judicious argument, subtle exposition, painstaking research, and exemplary thoroughness. Perhaps Fisher’s chief achievement is not only to have discovered so much, but also to have preserved the passions, frustrations, warmth, and humor of her interviewees so well. Her precise language and unfashionable reluctance to indulge in eye-catching pronouncements actually masks a series of quite radical arguments and assumptions which fundamentally reshape our understanding of modern sexuality.

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