Historical Perspectives: Santa Clara University Undergraduate Journal of History, Series II

Volume 27 Article 12

2022

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Recommended Citation

Vergnolle, Adelaide (2022) "Medicalization of Sex in the Cold War," Historical Perspectives: Santa Clara University Undergraduate Journal of History, Series II: Vol. 27, Article 12.

Available at: https://scholarcommons.scu.edu/historical-perspectives/vol27/iss1/12

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Medicalization of Sex in the Cold War

Adelaide Vergnolle

What does it mean to be an American? After World War II, all of society was focused on answering this question. Not only were government officials working towards a clear definition, but medical professionals were also attempting to medicalize what it meant to be a model citizen. This medicalization of heterosexuality had a wide range of effects on citizens across the US including the LGBTQ+ community.

According to Williams, "To be truly American in the early Cold War, one had to be married, properly adjusted masculine man or feminine woman." Deviating from the predetermined gender roles implied not only trouble for yourself but also for your entire family and national security. The picture painted of being an American was one that was middle-class, suburban, heterosexual, and fulfilling the defined sex roles, and popular media emphasized this standard. In a 1960 publication of TIME magazine, the cover article discussed suburbia, and it emphasized the heterosexual family, with the article describing how "the keeper of the suburban dream is the suburban housewife." The magazine emphasized the roles that women and men should play in the idealistic view of what it meant to be a "typical" American.

These societal notions were supported by laws and executive orders enacted by the United States Government. President Dwight D. Eisenhower through Executive Order 10450 expanded the previously established mandated Loyalty Oaths which "signaled a change in the emphasis from issues of political loyalty to broader

Historical Perspectives, Series II, Volume XXVII, 2022

¹Deborah Maureen Williams," Building the Perfect Citizen: Gender and Patriotism in Early Cold War America." (*Dissertation Abstracts International, Section A: The Humanities and Social Sciences*. Temple University UMI; ProQuest Ebrary, 2008), iii. ² "Suburbia USA" *Time Magazine* 1960, 16.

notions of general characters and suitability."³ These notions were to be the model of US citizenship that was not just encouraged but was now legally enforced as well. Executive Order 10450 affected sex and the family by describing legal and illegal sexuality. The order states "Any criminal, infamous, dishonest, immoral, or notoriously disgraceful conduct, habitual use of intoxicants to excess, drug addiction, sexual perversion" is banned from holding a government position.⁴ Homosexuality or sexual perversion was one of the behaviors that was deemed unsuitable for federal employment. Homosexuality officially became a national security threat just as severe as communism.

These normative roles were not only enforced through politics but also through medicine. In 1950, during Congressional hearings surrounding the "homosexual problem" the government linked the issues facing the nation with homosexuality.⁵ In medical journals across the US medical professionals were publishing articles about the practice and appropriate appearance that "typical" relationships should practice. Medical professionals "sought to establish guidelines for behavior that they considered emblematic of true sexual normalcy" rather than simply labeling dysfunction.⁶ The medical society saw themselves as another institution to prevent communist infiltration of the "American way of life." An arena that should have been objective was poisoned with political motivations leading to a wide array of consequences⁷.

³ Thomas M. Group and Joan I. Roberts, *Nursing, Physician Control, and the Medical Monopoly: Historical Perspectives on Gendered Inequality in Roles, Rights, and Range of Practice* (Bloomington, IN: Indiana University Press, 2001), 149.

⁴ President Dwight D. Eisenhower, Executive Order 10450, (1953).

⁵ Carolyn Herbst Lewis, "Walking Sleeping Beauty: The Premarital Pelvic Exam and Heterosexuality during the Cold War" *Journal of Women's History* (2005): 86-102.

⁶ Carolyn Frances Lewis "The Medicalization of Heterosexuality in the Cold War United States." (Dissertation for the University of California, Santa Barbara, December 2007) viii.

⁷ Ibid.

In 1966, in the *Journal of Marriage and Family*, Daniel Brown and David Lynn published on the meaning of sexuality. They stated that there was some gender plasticity in childhood but after early childhood the role of feminine or masculine is set in stone and that all people fell into one category or the other. The article argued that "The standard outcome is heterosexuality. More specifically, the prescribed outcome in our society is monogamous heterosexuality8". It then emphasizes that heterosexuality is the basis of society, and that any other outcome is a biological defect and should be treated as such. The article medicalized heterosexuality as the norm and enforced it as the standard for American culture. Not only did it define heterosexuality as the standard, but it also defined any other sexuality as defective. The language of this article is critical and detrimental to people who may not identify as strictly heterosexual and is the foundation of what many medical professionals were publishing at the time.

Medical professionals argued that healthy sexuality in a heterosexual marriage encouraged "consideration, devotion, responsibility, and loyalty" in husbands which promoted the foundations of a moral nation.⁹ The health of the people was equated to the health of the nation.

In the mid-1950s, physicians went beyond just defining who people should be having sex with, but also described how sex should be evoking pleasure. Medical professionals "argued that how a woman climaxed sexually was a significant marker of her gender and sexual well-being." It was defined that the only appropriate orgasm occurred from deep penile penetration which

⁸ Daniel G., Brown and David B. Lynn," Human Sexual Development: An Outline of Components and Concepts." *Journal of Marriage & Family* 28:2, 1966, 161.

⁹ Nadina R. Kavinoky, M.D., "Medical Problems of Family Life: Outline of Lectures, Delivered at the School of Medical Evangelists to Senior Medical Students," Louise M. Darling Biomedical Library, University of California, Los Angeles, Los Angeles, California, 1929-1943.

¹⁰ Carolyn Frances Lewis "The Medicalization of Heterosexuality in the Cold War United States." (Dissertation for the University of California, Santa Barbara, December 2007), 99.

further reinforced the ideas of passive femininity and women's reliance on men. Science declared that the man was in charge of all areas of a woman's life, including the bedroom. Doctors stipulated that a healthy relationship is with both partners fulfilling their gender roles and orgasming on a regular basis. Doctors continued to reenforce the idea that sexual relationships, the family, and the home were the best tool against communism.¹¹

As mentioned before, doctors stated that a "true orgasm" could only be achieved though deep penile penetration rather than other types of stimulation. Although Alfred Kinsey in *Sexual Behavior in the Human Female* (1953) published that the clitoris was the site for female pleasure doctors still insisted that the vagina was the primary organ for female pleasure¹². Physicians said that women who did not experience this vaginal pleasure would later in life suffered from a psychological neurosis.¹³

The vaginal orgasm became the building block for a stable, healthy, and happy marital relationship and family. Furthermore, the sex lives of Americans became a crucial factor in the stability of the nation. Medical professionals took it upon themselves to ensure that women were having vaginal orgasms in order to protect the nation, meaning that their goals were no longer scientific but patriotic in nature. The focus and importance placed on the vaginal orgasm emphasized heterosexual relationships and female passivity. The family structure then became not only a social idea but also an idea that was promoted as healthy and natural.

As a part of associating the ills of society to sex, doctors linked the rising divorce rate to female sexual maladjustment caused by fear and ignorance. Physician Nadina Kavinoky stated that the bleeding and pain caused during intercourse would cause trauma that would, in turn, lead to unhappy marriages and

¹¹ Ibid.

¹² Alfred Kinsey, *Sexual Behavior in the Human Female* (New York: Grune & Stratton, 1954)

¹³ William S. Kroger and S. Charles Freed, "Psychosomatic Aspects of Frigidity," *JAMA* 143 (10 June 1950), 528.

divorce.¹⁴ This led to an emphasis on eradicating ignorance about sex before marriage and preparing women for marriage.

The linkage of the vaginal orgasm to marital stability inspired physicians to take measurable action into monitoring women's response to penetration. During premarital consultations physicians would attempt to ensure the stability of their patients' marriages and their psychosexual adjustment. Physicians believed that they were the best guides for couples seeking a healthy marriage rather than parents or ministers, or for that matter, the couple themselves. The physician emphasized the treatment of the family alongside the individual. Psychologists' responsibility expanded, and they began to not be concerned with "curing the insane, but tending to [the] maladjusted as well," which included sexual behavior at the time. ¹⁵

Doctors enforced many of these ideals in the required premarital examination. The premarital exam legislation had been in effect for about a decade since the end of the Second World War. Some states as early as 1913 though required a physical examination certificate before marriage. As physicians became more professionalized the less likely it was for politicians to be able to interfere in the contents of these examinations and the more physicians began lobbying the government for more public health policy. Most state laws only required blood tests and venereal disease screenings, but in fifteen states there was also a premarital consultation. 16 Physicians believed that "the clear objective (of the premarital consultation was) to foster and preserve a sound family unit, a happy marriage, and healthy children."¹⁷ This exhibits medical professionals' desire to ensure the health of the family rather than the health of the individual and was enforced through the premarital examination.

¹⁴ Kavinoky, "Premarital Medical Examination," 692.

¹⁵ Carolyn Herbst Lewis, "Walking Sleeping Beauty: The Premarital Pelvic Exam and Heterosexuality during the Cold War" *Journal of Women's History*, 2005, 86-102.

¹⁶ Lewis, "Walking Sleeping Beauty."

¹⁷ Editorial, "Premarital Laws," JAMA 187 (March 1964): 948.

During the premarital exam physicians centered their attention around the pelvic exam. The obstetrician-gynecologist Nadina Kavinoky said that after inspecting the female genitalia physicians should discuss sexual adjustment. She suggested this because "a fearful virgin must first be taught to cooperate and relax" in order to allow her "to cooperate and develop a more spontaneous rhythm." After this she suggests that the physicians should then insert a lubricated instrument into the patient's vagina in order for the patient to "realize that there is a normal opening in the hymen that leads into a deep vaginal canal." After the initial insertion of the instrument the physician should then insert it deeper into the vaginal canal. Nadina Kavinoky then instructs the physicians to monitor the patient's reaction and see her anxiety reducing, this, she states, "convinces the physicians of the therapeutic value of this simple procedure." 18

At this time, many misconceptions about the hymen plagued the medical community and society. Some doctors would not carry out an examination if the hymen was already ruptured assuming that the exam would provide useless information. Physicians were also considered male and female anxieties surrounding the rupturing of the hymen so to avoid this, doctors did a "premarital dilation of the hymen." Doctors did disagree about whose responsibility it was to rupture the hymen. Some doctors claimed that the hymen breaking provided husbands a lesson on how to be considerate of their wives. Other doctors argued that the breaking of the hymen provoked more anxiety than consideration.

All of these steps of the premarital examination ensured that physicians played a key role in the development of a healthy relationship and family. Therefore, doctors felt as if they were protecting the nation through ensuring that the most important building block of society, the family, was secure.²⁰

¹⁸ Kavinoky, "Premarital Medical Examination," 692-95.

¹⁹ Ibid.

²⁰ During the Cold War, national security was defined as the defense of the nation against the communist threat. This security went beyond just military defense and expanded to

Doctors not only enforced heterosexuality, but they also actively denied homosexual individuals their experience and tried to "convert" them. Martin Duberman in his autobiography, "Cures: A Gay Man's Odyssey" is a personal study of what it was like to be gay during the Cold War in the United States. Outwardly, Duberman appears to be a great success but internally, he is a lonely and distressed man who struggles with coming to terms with himself.

Duberman throughout his life spoke to several therapists in order to try to solve the "problem" of his homosexuality. His autobiography discusses his encounters with these therapists, stating that one, Dr. Igen, encouraged him to change his sexual orientation, saying that "the ultimate rewards will be great." Not only did this doctor place a mental burden on Duberman, he also placed a financial burden by requiring Duberman to have "three sessions a week, at twenty dollars a session." Duberman suffered tremendously from this intensive therapy and notes that this caused mental suffering throughout his life. Although Duberman appears successful he recounts living a life filled with mental turmoil and torture fueled by the medical community.²¹

Not only was the anti-gay rhetoric enclosed in the therapist's office, but it was also published and spread throughout popular media. A 1969 issue of *Time Magazine* in an issue on "The Homosexual in America," stated that people who were homosexual presented a danger to society and were deviants from the traditional values of American society. The article says that the ethics of LGBT people were against those of the straight world and were therefore un-American. During the Cold War, to be an American meant to fit into the mold set by the society and culture and deviancy from that was not only seen as socially incorrect but also as a threat to the nation. It also discusses how LGBT people

the personal lives of all the people of the nation. Not only was capacity for security in the nation's military but within all the people, and the threat of communism was seen as not towards just the United States government but also towards individual's minds.

²¹ Martin B. Duberman, Cures: A Gay Man's Odyssey. (Boulder, CO: Westview), 2002.

are unsure of their position and status in society but find comfort that society is also unsure about their position and status as well. The medicalization of homosexuals was also emphasized by some posing questions like "are homosexuals sick."²² The discourse of medical journals was not confined to the doctors office but also pervaded society.

The enforcement of heterosexuality led, paradoxically, to the birth of a thriving counterculture that still affects us today. This counterculture directly opposed the society that the government and medical community was attempting to create. This counterculture was in the name of a new society based on alternative values and institutions. Several important movements emerged from the counter-culture to the enforced conformity of the Cold War, including the civil rights movement, the women's and gay liberation movements, Red and Black Power, the New Left, and environmentalism. This culture emerged in response to a society that repressed individual expression with the goals of creating a new and improved environment where people could be themselves.²³

The definition of the American citizen was very narrow during the Cold War Era. Not only was this enforced through law, political discourse, and societal expectations but it was also medicalized and encouraged by the medical community. The family unit had become the building block of the nation and the tool to leading to a free world. Conforming to this model was seen as ensuring a free world and those who fell out of line with this definition were seen as a danger to the American way of life.

Physicians attempted to protect the ideals of the nation through premarital examinations and changing those who were did not fit into the established model of conformity. After states

²²" The Homosexual in America," *TIME Magazine* 87, 1966, 3.

²³ Damon Bach, "Imprisoned in the American Dream: Cold War America and the Origins of the Counterculture, 1945 to 1965" in *The American Counterculture: A History of Hippies and Cultural Dissidents*, (Lawrence, KS: University Press of Kansas, 2021).

mandated premarital medical examinations, physicians believed that it was their role to offer this advice and expertise to patients.

Oftentimes medicine is received as the truth. During the Cold War, people had a blind faith in science and equated science with the unequivocal truth while trusting in the strange ideologies that doctors were proposing even if it seemed to extend beyond logic. This trust in science gave doctors significant power in society. Science had many limitations, but American society put science at the same level as truth. This was dangerous because science and politics were deeply intertwined and interconnected during the Cold War. At the time, science was used as a tool to enforce established political beliefs surrounding conformity and the importance of the traditional family unit. This then became the truth and those who did not fall in line were poisoning the well and out of place. Science wielded such great power and influence over society and many people saw it as the truth rather than recognized its connections to politics which caused many abuses and wrongdoings to occur.