

The Battle of the Hemlines: Clothes and Illness in the Early Twentieth Century

By Christopher M. Rudeen

Special Issue:
State of the Field
Issue 1
Article 4

[doi.org/10.38055/
SOF010104](https://doi.org/10.38055/SOF010104)

Keywords

Cross-dressing
Dress reform
Fashion studies
Medicine
Health

Abstract

In *Illness as Metaphor*, Susan Sontag argued that a new mobility in the eighteenth century unsettled established ideas of worth and station. These were reasserted “through new notions about clothes (‘fashions’) and new attitudes about illness. Both clothes (the outer garment of the body) and illness (a kind of interior décor of the body) became tropes for new attitudes toward the self.” Fashion studies and the history of medicine have productively investigated the relationship between clothes and illness, respectively, to the self. But the connection between clothing and health has been under-analyzed. While most work in this overlap focuses on clothing’s ill effects, this paper seeks to open another area of inquiry — using the skirt as case study, it attempts to articulate a theory of clothing as medicine by juxtaposing three well-known issues surrounding preventive care and skirts in the early twentieth century: cross-dressing and the (supposed) pathological drive of “transvestites”; arguments for shorter skirts in light of the new dangers uncovered by germ theory; and the dress reform movements’ promotion of the kilt. These cases illustrate the work of the medical profession to maintain “healthy” selves that could be socially positioned according to recognizable binaries of gender, class, and normality. Through analysis of published case studies, popular media, and articles in medical journals, and attending particularly to the pushback present in all three cases, this paper thus seeks to mine the disciplinary boundary between the history of medicine and fashion studies to expand our notions of medical objects and to add new “language” to clothes.

INTRODUCTION: ON DRESSES AND DREAMS

In the late 2000s, Esmé Weijun Wang started a blog called “Fashion for Writers.” Working in the fashion industry and aspiring to become a writer, Wang used the platform to post photographs of her outfits and muse on what writers wore. The blog covered many topics, from perfume to rummage sales to major life events. Notably, it also addressed questions of health and illness — a post from February 2008 discusses the hospital socks Wang took with her after a stay in a psychiatric facility, among other items contained in a plastic tub under her bed.¹

While the “Fashion for Writers” blog has since become defunct, Wang has continued to write about clothes and about illness. In 2016, she published a series of short pieces centered on individual articles of her clothing for the magazine *Catapult*. In one post, titled “On Dresses and Dreams of Remission,” Wang detailed her complicated relationship with vintage clothes. After developing chronic Lyme disease, Wang became too sick to work and “too sick to care about fashion,” and her wardrobe shifted as a result. “Yesterday,” the post begins, “I bought the fifth in a line of five near-identical caftans...Most days, I wear one because they’re comfortable, and because hardly anyone sees me — chronic illness keeps me at home, if not in bed, and far from critical eyes.” Wang continued, “As someone who had become persistently uncomfortable in her own body, I’d also become insistent on wearing what was comfortable.” The piece ends with Wang hoping to return to her vintage clothes, emphasizing dress in her idea of recovery: “My dream of remission includes what I’ll wear when I’m able to be reliably out and about again I have an entire wardrobe for that other, healthier life. They await my return.”² Dress and disease were tied together, her chronic condition indexed across her closet.³ Functional caftans signaled flare ups and monotonous time spent indoors. Likewise, memories and hopes for health were represented in ornamental vintage, made to be paraded in the street.

¹ Meg Wang, “Clothes To Me,” *Fashion for Writers* (blog), February 29, 2008, <http://web.archive.org/web/20080607232415/http://fashionforwriters.wordpress.com/2008/02/>. This entry was posted under the name Meg.

² Esmé Weijun Wang, “On Dresses and Dreams of Remission,” *Catapult*, July 21, 2016, <https://catapult.co/stories/on-dresses-and-dreams-of-remission>.

³ Chronic illness is one site “on the borderland of medical and disability history,” in the words of historian Beth Linker, where interdisciplinary scholarship is beginning to form. An attention to clothing and design is one means by which to focus on the lives of individuals and not on disease, and interesting work is appearing in this vein, especially by Bess Williamson and Natalie Wright. See Beth Linker, “On the Borderland of Medical and Disability History: A Survey of the Fields,” *Bulletin of the History of Medicine* 87, no. 4 (2013): 499–535; Hanna Bertilsdotter Rosqvist, Hisayo Katsui, and Janice McLaughlin, “(Dis)abling practices and theories?: exploring chronic illness in disability studies,” *Scandinavian Journal of Disability Research* 19, no. 1 (2017):1–6; Bess Williamson, *Accessible America: A History of Disability and Design* (New York: NYU Press, 2019); and Natalie Wright, “Functional Fashions,” *Milwaukee Art Museum* (blog), May 7, 2019, <https://blog.mam.org/2019/05/07/functional-fashions/>.

In an early post on her fashion blog, Wang wrote that she had a habit of saving pieces of clothing “out of an impulse to chronicle [her] life sartorially, as though [she] were shedding skins to put back on again.”⁴ Wang’s 2019 prize-winning essay collection *The Collected Schizophrenias* takes up some of these chronicles once more, focusing even more specifically on her experiences. Musing on the term “high-functioning,” for instance, Wang related how her dress and makeup reflected her state of mind, and how she used fashion to achieve labels that her diagnosis of schizoaffective disorder might normally have made unavailable to her — high-functioning, normal, even successful. Wang wrote,

...because I used to be a fashion blogger and writer, because I worked, for a time, at a fashion magazine and then as a fashion editor at a start-up company, I pass for normal more easily than do my comrades in the schizophrenias. When I browse the virtual aisles of La Garçonne, I am considering a uniform for a battle with multiple fronts. If schizophrenia is the domain of the slovenly, I stand outside of its boundaries as a straight-backed ingenue, and there is no telltale smearing beyond the borders of my mouth.⁵

With a stigmatized condition such as schizophrenia, being labeled as high-functioning, a state achievable partially through dress, allows Wang space in which to hope. While “there are things that good costuming can’t hide,” clothing is an armor that forestalls the clash with society’s expectations of the mentally ill.⁶

Wang’s writing serves as a vivid illustration of how pieces of clothing can tell stories and elucidate forms of being, specifically around health and (mental) illness. This intersection between fashion and medicine has a long history that is rarely documented in such an explicit manner. Here I follow Wang’s example, using one article of clothing, the skirt, to demonstrate how dress can function as a prophylactic prosthetic, an important tool in managing the health of populations. Using the skirt as case study, this article outlines a theory of clothing as medicine by juxtaposing three well-known issues surrounding preventive care and skirts in

⁴ Wang, “Clothes To Me.”

⁵ Esmé Weijun Wang, “High-Functioning,” in *The Collected Schizophrenias* (Minneapolis: Graywolf Press, 2019), 53.

⁶ *Ibid.*, 49, 56.

early-twentieth-century Anglo-America: arguments for shorter skirts in light of the new dangers uncovered by germ theory; dress reform movements' promotion of the kilt; and cross-dressing and the (supposed) pathological drive of what were then termed "transvestites."⁷

These cases illustrate the ways in which the medical profession specifically turned to clothing to maintain "healthy" bodies and selves that could be socially positioned according to recognizable binaries of gender, class, and normality.

This paper thus mines the disciplinary boundary between the history of medicine and fashion studies to expand our notions of medical objects and to add new "language" to clothes.⁸ Put another way, what can we learn by analyzing medical objects as fashion and fashion as a medical subject?

In her 1978 monograph *Illness as Metaphor*, Susan Sontag argued that a new mobility in the eighteenth century unsettled established ideas of worth and station. These were reasserted "through new notions about clothes ('fashions') and new attitudes about illness. Both clothes (the outer garment of the body) and illness (a kind of interior décor of the body) became tropes for new attitudes toward the self."⁹ While often studied separately to uncover historical ways of being, clothes and illness together have received less scholarly attention. Beyond Sontag's invocation of the pairing, scholars have identified particular types of clothing, for instance, as potentially hazardous — carrying germs, containing toxins, or possibly bursting into flames.¹⁰ Others have begun to look at the way

⁷ Cross-dressing has a long history and is often identified as a site of significant anxiety due to its blurring of boundaries. Relatedly, terms such as "cross-dressing" and "transvestite" are subject to their own anxieties, especially in distinguishing the behavior from other groups. Here I use the terms as actors' categories. See Emmett Harsin Drager and Lucas Platero, "At the Margins of Time and Place: Transsexuals and the Transvestites in Trans Studies," *TSQ: Transgender Studies Quarterly* 8, no. 4 (November 2021): 417–425. For more on the cultural tensions of cross-dressing, see Marjorie Garber, *Vested Interests: Cross-Dressing and Cultural Anxiety* (New York: Routledge, 1992); and Clare Sears, *Arresting Dress: Cross-Dressing, Law, and Fascination in Nineteenth-Century San Francisco* (Durham: Duke University Press, 2014). On the productive nature of this ambiguity, see Judith Halberstam, *Female Masculinity* (Durham: Duke University Press, 1998), esp. chap. 6, "Looking Butch: A Rough Guide to Butches on Film."

⁸ Alison Lurie, *The Language of Clothes* (New York: Random House, 1981).

⁹ Susan Sontag, *Illness as Metaphor; and, AIDS and Its Metaphors* (New York: Anchor Books, 1990), 28.

¹⁰ Alison Matthews David, *Fashion Victims: The Dangers of Dress Past and Present* (New York: Bloomsbury, 2015).

dress functions in curative institutions, including its role as a form of therapy in mid-century American mental hospitals.¹¹ Here, however, I want to move beyond the harmful potential of clothes and the reparative space of the hospital to give fuller form to the idea of clothing as medicine, especially as a preventive measure for future physical or psychological distress. How has clothing figured into the practices and theories of the human sciences? How can the mobile figure of the transvestite illustrate the deep connection between dress and wellness? What can the history of medicine learn from fashion studies, and vice versa?

PART ONE: A DIRTY FASHION

Dress reform movements were commonplace in the late nineteenth century. These reformers took aim at fashion under a banner of “health, art, and reason,” to quote the title of a pioneering study by Stella Mary Newton on the group. Building on the work of Newton, Barbara Burman and others have shown that dress reform continued even past World War I and through the 1930s.¹² Burman argued this “movement” was better understood as a heterogeneous cluster of reforms and reformers, including many eugenicists. What brought the groups together was a broader “desire for modernity,” one that often had the perhaps-unexpected outcome of reinforcing traditional gender roles in a time of marked emancipation of women.¹³ Valerie Steele, meanwhile, has critiqued this common interpretation of dress reform as focused on health. In *Fashion and Eroticism*, Steele expressed her belief that “historians have been predisposed to accept unconditionally even the most confused pseudo-medical theories about the disease and debility caused by women’s dress.”¹⁴ While Steele is right to be suspicious of these theories, they cannot be ignored simply for being “confused.” Applying the tools of the history of medicine to this case gives new meaning to these claims, as it has to those surrounding other “pseudo-medical theories” such as lobotomy, for one.¹⁵

¹¹ Renate Stauss, “Passing as Fashionable, Feminine and Sane: ‘Therapy of Fashion’ and the Normalization of Psychiatric Patients in 1960s US,” *Fashion Theory* 24, no. 4 (2020): 601–637. See also Pat Armstrong and Suzanne Day, *Wash, Wear, and Care: Clothing and Laundry in Long-Term Residential Care* (Montreal: McGill-Queen’s University Press, 2017).

¹² Stella Mary Newton, *Health, Art & Reason: Dress Reformers of the 19th Century* (London: John Murray, 1974); Barbara Burman and Melissa Leventon, “The Men’s Dress Reform Party 1929–37,” *Costume* 21, no. 1 (1987): 75–87.

¹³ Barbara Burman, “Better and Brighter Clothes: The Men’s Dress Reform Party, 1929–1940,” *Journal of Design History* 8, no. 4 (1995): 275–290.

¹⁴ Valerie Steele, *Fashion and Eroticism: Ideals of Feminine Beauty from the Victorian Era to the Jazz Age* (New York: Oxford University Press, 1985), 5.

¹⁵ See Jack D. Pressman, *Last Resort: Psychosurgery and the Limits of Medicine* (New York: Cambridge University Press, 1998). For a reevaluation of lobotomy, one that still centers its immense cultural power despite later rejection, see Jenell Johnson, *American Lobotomy: A Rhetorical History* (Ann Arbor: University of Michigan Press, 2014).

The skirt was a central part of dress reform. Reformers decried the fashionable “sweeping” skirt as dirty and praised the shorter skirt or kilt as a healthier alternative for both men and women.

This section takes up the first case, briefly outlining some of the medical claims made around the skirt. The litany of warnings as to the possible dangers of clothes are well documented, and here I only briefly relate some pertaining to the long skirt in particular. The following section looks at the more general push for skirt-like garments among twentieth-century dress reformers to show what more can be learned from this clothing-as-medicine lens.

The case of the trailing skirt and the resulting “battle of the hemlines,” as medical historian Nancy Tomes called it, was very visible in the popular and medical press, making it a helpful place to study the intersection of fashion and medicine in Anglo-America from the 1890s to the 1930s.¹⁶ In 1900, the magazine *Puck* published a cartoon by Samuel D. Ehrhart captioned, “The Trailing Skirt; — Death Loves a Shining Mark” (Figure 1). The top of the image features a peaceful tableau of people walking about a city street. Below this lies a darker scene: a maid cleaning a woman’s long skirt, releasing a cloud of “germs,” “microbes,” and diseases such as typhoid, consumption, and influenza. Children look on, unaware of their fate. The figure of death looms in the background, ready to make an early appearance into the lives of this family.¹⁷ This image serves as the cover of Tomes’ *The Gospel of Germs* and the frontispiece of Alison Matthews David’s *Fashion Victims*.¹⁸ The image’s inclusion in those two monographs also illustrates one area in which fruitful overlap is starting to take place, as Tomes and David attend to both dress and disease, albeit largely from within the history of medicine and fashion studies, respectively. Interdisciplinary approaches will shed further light on cases like the trailing skirt, as will focusing on an expansive definition of health that includes psychological as well as physical normalcy.¹⁹

¹⁶ Nancy Tomes, *The Gospel of Germs: Men, Women, and the Microbe in American Life* (Cambridge, Mass.: Harvard University Press, 1998), 157.

¹⁷ Samuel D. Ehrhart, “The Trailing Skirt; — Death Loves a Shining Mark,” *Puck* 47, no. 1222 (August 8, 1900): 16. For more context on this image, see Bert Hansen, “The Image and Advocacy of Public Health in American Caricature and Cartoons from 1860 to 1900,” *American Journal of Public Health* 87, no. 11 (November 1997): 1805–1806.

¹⁸ David, *Fashion Victims*; Tomes, *The Gospel of Germs*. Tomes discusses the image and rising hemlines briefly to illustrate the changing practices spurred by a growing knowledge of germs at the turn of the century. See chap. 7, “Antisepticonscious America.”

¹⁹ This is important considering changing relationships between humans and microbes during the COVID-19 pandemic, especially fears over fomite infections. See Carmen McLeod, Eleanor Hadley Kerhsaw, and Brigitte Nerlich, “Fearful Intimacies: COVID-19 and the Reshaping of Human-Microbial Relations,” *Anthropology in Action* 27, no. 2 (Summer 2020): 33–39.



FIGURE 1 A CARTOON BY SAMUEL D. EHRHART FIRST PUBLISHED IN PUCK ON AUGUST 8, 1900, FEATURING A MAID BRUSHING OFF A WOMAN'S SKIRT THAT HAD BEEN WORN WHILE WALKING ALONG THE STREET. IN THE PROCESS OF CLEANING THIS "TRAILING SKIRT," CLOUDS OF GERMS AND MICROBES ARE RELEASED INTO THE AIR, INCLUDING THOSE FOR TYPHOID FEVER, CONSUMPTION, AND INFLUENZA.

This image registered a widespread fear of the dangers of the newly discovered “germs” and a campaign to make people aware of their existence. Published alongside the cartoon was a short editorial lambasting “dirty fashion.” The note indicated that “physicians of Europe have banded together in a war against the trailing skirt.” Many, however, were not convinced that women could be persuaded. The editorial continued, “It may not mean much, for feminine fashion withstands any combination of forces whatsoever as long as it chooses, and it has never chosen to discard any fashion for mere considerations of health.” The commenter wryly noted that, “Rather than be false to its ideal of beauty it will suffer the tortures of the rack.”²⁰ In the same year, *Life*, the American general-interest magazine, published “A Ballad of the Trailing Skirt.” This lamentation in verse of the so-called “idiotic fashion” is worth quoting in full:

I met a girl the other day,
A girl with golden tresses,
Who wore the most bewitching air
And daintiest of dresses.
I gazed at her with kindling eye
And admiration utter—
Until I saw her silken skirt
Was trailing in the gutter!

“What senseless style is this?” I thought,
“What new sartorial passion?
And who on earth stands sponsor for
The idiotic fashion?”
I’ve asked a dozen maids or more,
A tailor and his cutter,
But no one knows why skirts are made
To drag along the gutter.

Alas for woman, fashion’s slave;
She does not seem to mind it.
Her silk or satin sweeps the street
And leaves no filth behind it.
For all the dirt the breezes blow
And all the germs that flutter
May find a refuge in the gowns
That swish along the gutter.

What lovely woman wills to do
She does without a reason.
To interfere is waste of time,
To criticise is treason.
Man’s only province is to work
To earn his bread and butter—
And buy her all the skirts she wants
To trail along the gutter.²¹

The author of this “ballad” registered his shock at the image of a “bewitching” girl with a trailing skirt, a fashion he sought to understand but to no avail. In doing so, he put to verse common conceptions of the practice, which seemed to defy all sense and reason (particularly to those who held on to the sexist notion that women did not have access to rationality in the first place).

²⁰ “A Dirty Fashion,” *Puck* 47, no. 1222 (August 8, 1900): 7.

²¹ Henry Robinson Palmer, “A Ballad of the Trailing Skirt,” *Life* 35, no. 914 (May 17, 1900): 418. Author’s collection.

The conversation was also present in the medical press. *The Philadelphia Medical Journal* reported on a paper read at a conference of an Italian medical association on the dangers of such garments. The author added “That women should willingly subject themselves to the filth, say nothing of the possible dangers of trailing skirts, has long been a wonder to sensible people who are acquainted with bacteriology.” In a similar vein to the cartoon and poem, the author lamented, “However, we cannot expect reform in this matter without those who set the fashions...for women are bound to be in the fashion [*sic*] regardless of any ordinary considerations.”²² The study in question was conducted by Dr. Philip Casagrandi in Rome. Casagrandi sent women out in long skirts to walk the streets for an hour and, upon their return, examined the garments using a microscope. In response to his findings, the assembled physicians “determined that the germs of influenza, consumption and typhoid fever” — the same ominous microbes in the clouds of dust depicted in the *Puck* cartoon — “are the least of the evils which careless mothers, after an hour’s promenade, bring home to the cradles of their children.”²³ This study was published widely, fueling growing conversations about dress reform and hygienic living in the newly “antisepticonscious America.”²⁴

The congruences in the sources I have analyzed here indicate a wide-ranging and sustained conversation linking dress and health. The separation of women and men across lines of rationality — with “sensible people...acquainted with bacteriology” balking at women’s supposed need to be “bound” to fashion — was one common theme in such reporting. This was, of course, part of wider patriarchal and sexist understandings of behavior and reason rampant in this period — many commentators lamented that fashion, like the female sex, seemed to be untouchable, operating by its own rules outside of conscious control.

More important, however, is what comes next — how medical professionals sought to forestall health problems using another piece of clothing.

While some saw interfering as a “waste of time,” a group of reformers sought to change the length of skirts as part of a medical campaign against the germs they carried.

²² “The Dangers of Trailing Skirts,” *Philadelphia Medical Journal* 6, no. 8 (August 25, 1900): 310.

²³ “The Trailing Skirt,” *Biloxi Herald* (Biloxi, Mississippi) 16, no. 48 (August 26, 1900): 6.

²⁴ This term comes from a 1933 article arguing that America had become more aware of germs during the early twentieth century. William W. Bauer, “Antisepticonscious America,” *American Mercury* 29 (July 1933): 323–326, quoted in Tomes, *The Gospel of Germs*, 159.

PART TWO: ACHES AND PAINS

These articles, studies, and debates indicate that one solution to the problem of the “microbe-collecting trailing skirt” was to change the fashion — to adopt shorter skirts to protect the people’s health. These skirts or kilts were thereby positioned as a form of preventive care by medical professionals. This section takes seriously entrées into debates of fashion by medical men and women as part of public health outreach, in line with broader Progressive era reforms. However, matters of race, gender, and class complicated these efforts and opened the profession to potential ridicule when conventional lines were crossed.

The question was posed directly to readers in an issue of the *St. Louis Post-Dispatch* in 1907: “Will St. Louis Women Wear the Microbe-Collecting Trailing Skirt Again?” The long skirt had been professed next season’s “fashion decree,” causing a stir in the city. Members of the medical profession, which “universally” opposed the look, hoped to convince women not to don the long skirt again. On the other side were “dressmakers, modistes, and fashion molders” who “will agitate in [its] favor.” One doctor argued that while “it is rather a delicate matter for a physician to attempt to interfere with feminine styles... in the matter of the long skirt... there are grave considerations of public health to be thought of.”²⁵ Below the headline was an illustration that evoked the *Puck* cartoon, a maid surrounded by dust emanating from a skirt.

As outlined in the previous section, the harmful action of clothes upon their wearers’ bodies was central to reformers’ worries. Dr. Martha J. Smith chronicled many of these woes in a paper read before the Indiana State Medical Society in 1894. This paper also highlights the connection among particular forms of dress and preventive medicine. “American women are known abroad for two distinguishing traits,” Smith wrote, “and these are their ill health and extravagant devotion to dress.” Smith focused, however, on what should be done to alleviate these ills before they arose. Eschewing the “pathetic sentiments” made by many men about women’s “physical frailty,” Smith instead linked the “traits” of dress and disease: “The dress adopted by the women of to-day certainly is conducive to the development of many diseases, and proves both a predisposing and exciting cause of them.”²⁶ To that effect, Smith ended the paper with a call to physicians: “Medicine has become the science of the prevention of disease rather than the cure of it, and it is true that the intelligent application of hygienic measures is supplanting the empirical use of drugs. The physician should give more attention

²⁵ “Will St. Louis Women Wear the Microbe-Collecting Trailing Skirt Again?” *St. Louis Post-Dispatch*, September 15, 1907, p. B8.

²⁶ Martha J. Smith, “The Effects of Modern Dress on the Health of Women,” *Journal of the American Medical Association* 23, no. 19 (November 10, 1894): 716.

to removing the predisposing as well as the exciting cause of disease, anticipating rather than awaiting the actual presence of sickness.”²⁷ Although she did not suggest specific styles in the article itself (she did provide some recommendations in response to discussion), the paper as a whole illustrates Smith’s belief that attention to clothing ought to fall under the doctor’s purview, especially as a form of prophylaxis that kept women away from the doctor’s office in the first place.²⁸

Smith’s article is also important for its participation in the turn-of-the-century battle for professionalization in the medical field. Sociologist Paul Starr, in his landmark book *The Social Transformation of American Medicine*, located the rise of the “sovereign profession” to the years between the U.S. Civil War and World War I. This process necessitated internal cohesion, the transformation of health into a commodity, and control of important institutions.²⁹ One such institution was public health, a field that has long struggled to define the limits of its remit.³⁰ In the early years of the 1900s, a “new public health” emerged, allowing for clearer boundaries between public health and the field of medicine. One contemporary described this period as one emphasizing education in hygiene and using the physician “as a real force in prevention.”³¹ Doctors such as Smith who commented on the health effects of clothing were therefore part of an ongoing battle to establish cultural authority, especially around the issue of preventing disease.

²⁷ Ibid., 719.

²⁸ My thinking about prophylaxis is informed by Ilana Löwy’s work on prophylactic surgery in the case of breast and uterine cancers. Here, organs are removed to reduce the risk of potential cancer, something only made visible through biomedical intervention. See Ilana Löwy, *Preventive Strikes: Women, Precancer, and Prophylactic Surgery* (Baltimore: Johns Hopkins University Press, 2010).

²⁹ Paul Starr, *The Social Transformation of American Medicine: The Rise of a Sovereign Profession and the Making of a Vast Industry*, 2nd ed. (New York: Basic Books, 2017 [1982]), 18–22. For a critique of Starr, see John Harley Warner, “Grand Narrative and Its Discontents: Medical History and the Social Transformation of American Medicine,” *Journal of Health Politics, Policy and Law* 29, nos. 4–5 (2004): 757–780.

³⁰ For more on the relationship between medicine and public health, see Allan M. Brandt and Martha Gardner. “Antagonism and Accommodation: Interpreting the Relationship Between Public Health and Medicine in the United States During the 20th Century,” *American Journal of Public Health* 90 (2000): 707–715.

³¹ Quoted in Starr, *The Social Transformation of American Medicine*, 190–191.

Smith's commentary also foregrounds gender and race. The article begins, "Every woman's dress expresses, not only some of her own individuality, but it expresses even more, her unity with the race; the common history and status of her sex."³² The evidence marshaled by Smith includes attention to the dress of other "nations," often to illustrate the backwardness of the supposedly more civilized American woman. For instance, Smith cites the research of J. H. Kellogg, who found the healthier "abdominal type of breathing" in "several Chinese and Indian women, whose dress does not constrict the waist," as well as in "civilized women who wore no corset."³³ The less salubrious "costal type" of breathing was, by contrast, observed when a corset was worn. Kellogg also "produced the costal type of breathing in a man by putting him into a corset." The concern with American women's health thus connected to contemporary discourses of civilization and the negative health outcomes of "overcivilization" in particular.³⁴

Moreover, as a female doctor in the late nineteenth century, Smith could use the question of clothing's effects on women as an entrée into medical society.³⁵ One of the paper's discussants noted that he had been attending the society's events for thirty-five years and that Smith's paper was the first he had heard read by a woman. Florence W. Hays, another female doctor, commented that "the subject-matter is one that has not attracted the attention of the medical profession until recently. Leaders in the dress reform movement have not been doctors," she explained, "but have been educated, sensible women of the world, who have been hampered somewhat because they have not the requisite knowledge to know and understand the scientific facts."³⁶ Smith was taken as an authority among doctors due to her gender and, Dr. Hays argued, would be similarly influential among dress reformers due to her profession.

³² Smith, "Effects of Modern Dress," 716.

³³ *Ibid.*, 717.

³⁴ On contemporary ideas of race, gender, and civilization, see Gail Bederman, *Manliness and Civilization: A Cultural History of Gender and Race in the United States, 1880–1917* (Chicago: The University of Chicago Press, 1995); Laura Briggs, "The Race of Hysteria: 'Overcivilization' and the 'Savage' Woman in Late Nineteenth-Century Obstetrics and Gynecology," *American Quarterly* 52, no. 2 (June 2000): 246–273; and Chad Heap, *Slumming: Sexual and Racial Encounters in American Night Life, 1885–1940* (Chicago: University of Chicago Press, 2009). On the relationship of these concepts to sexuality and particularly to cross-dressing in the period, see Siobhan B. Somerville, *Queering the Color Line: Race and the Invention of Homosexuality in American Culture* (Durham: Duke University Press, 2000), esp. chap. 2, "The Queer Career of Jim Crow: Racial and Sexual Transformation in Early Cinema."

³⁵ On the gendered perceptions of physicians around this time, see Rebecca J. Tannenbaum, "Earnestness, Temperance, Industry: The Definition and Uses of Professional Character Among Nineteenth-Century American Physicians," *Journal of the History of Medicine and Allied Sciences* 49, no. 2 (April 1994): 251–283.

³⁶ Smith, "Effects of Dress," 719.

Analogous concerns — and, once again, calls for shorter skirts — were conveyed in the 1920s and 1930s, a time when shorter skirts were gaining wider cultural approval due to a new generation coming of age in a world marked by increased mobility for women.³⁷ In a special to the *Detroit Free Press*, a headline proclaimed that both “Maid And Medic Back 1922 Flapper’s Garb.” A “pretty 17-year-old schoolgirl” named Irene Lincoln, whose smiling picture was included along with the copy, argued that “history lessons are easy” with shorter hair: “I can get my whole history lesson in the time my sister curls and does up her hair.” The article presented a history lesson of its own, as Lincoln commented “None of us [girls] ever have ‘aches and pains’ discussions like our mothers do, and surely the dresses we wear and the things we do are more beneficial to us than the things our mothers did when they were young.” The city health official agreed that there was “no doubt” that short skirts and bobbed hair were “more sanitary than the styles adopted by their sisters with less developed modern instincts.”³⁸ Modernity and health were thus tied to the “flapper garb” that was advertised as a healthy option for women and girls, questions of morality notwithstanding.

In London, the Men’s Dress Reform Party and other groups touted the health effects of certain styles. *The New York Times* reported on a lecture given by the secretary of the MDRP on their proposed changes in men’s fashion. While women had begun to make necessary alterations in their dress, A. C. Jordan argued that “men have hardly begun to struggle against the monster of ugliness and unhealthiness in dress. The slogan for man is: ‘Fewer clothes, lighter clothes, cleaner clothes, brighter clothes.’”³⁹ This repetition shows the connection between “fewer” clothes and “cleaner” clothes, highlighting the health benefits of removing garments. At a luncheon in 1930, the Health and Cleanliness Council in London discussed expanding its remit to promote cleanliness by “tak[ing] up a campaign against long skirts.” The main speaker was physician and professor Louise McIlroy, a pioneering obstetrician. “I do not admire the very short skirt,” McIlroy noted, “but there is a happy mean. If we are going to trail our skirts about the floors a great deal of this council’s work will go to the wall.”⁴⁰ In both

³⁷ On the fashions of the “flapper,” see, Emily Spivak, “The History of the Flapper, Part 1: A Call for Freedom,” *Smithsonian Magazine*, February 5, 2013, <https://www.smithsonianmag.com/arts-culture/the-history-of-the-flapper-part-1-a-call-for-freedom-11957978/>.

³⁸ “Maid And Medic Back 1922 Flapper’s Garb,” *Detroit Free Press*, September 17, 1922, p. D3.

³⁹ “Men’s Dress Reform Party Campaigning in England,” *New York Times*, January 5, 1930, p. XX4.

⁴⁰ “The Trailing Skirt Condemned,” *Manchester Guardian*, March 20, 1930, p. 5.

cases, options were presented for healthier dress, including shorts and shorter skirts. Both also indicated the need for a certain respectability in those new styles. The images shown by Jordan during his lecture, for instance, included “an imaginary portrait of Dean Inge in a shorts suit” and a “picture of King Henry VIII playing tennis in a loose vest and short stockings,” the latter “presented as a royal precedent for the adoption of more ‘sensible’ clothing.”⁴¹

Actually gaining such respectability was more difficult in practice, and reformers often drew the wrong type of attention from observers.

In her article, Smith lamented the position of physicians in combating damaging clothing, writing, “With most women, save those in advanced rank of thought, any suggestion in the way of hygiene in dress is immediately branded as dress reform, and straightaway the masculine type of radical dress is brandished.”⁴² Such a comment coheres with Valerie Steele’s contention that dress reform was unsuccessful largely “because women perceived it as sexually unattractive.”⁴³ Moreover, Joanna Bourke, discussing interwar British dress reform, argued that skirted men were part of the overall movement’s decline — while one reformer argued the kilt was “easily the most becoming of all boys’ wear,” others said few men would “have a leg” for such an outfit.⁴⁴ Indeed, a 1929 newspaper article published on an early rally of the Men’s Dress Reform Party noted that, of the half of attendees not in “conventional clothes,” most were in “short trousers,” while two women wore pants and one man wore a skirt. As one member commented, “If the Reform Party was to exist, they must beware of ridicule.”⁴⁵ These contemporary sources illustrate how cross-dressing behaviors were potentially damaging to the cause of reformers, especially since, as historian Sharon R. Ullman has argued, stigmatization of female impersonation was already widespread by this period.⁴⁶

⁴¹ “Men’s Dress Reform Party Campaigning in England,” XX4.

⁴² Smith, “Effects of Modern Dress,” 719.

⁴³ Steele, *Fashion and Eroticism*, 10.

⁴⁴ Joanna Bourke, “The Great Male Renunciation: Men’s Dress Reform in Inter-War Britain,” *Journal of Design History* 9, no. 1 (1996): 27–29.

⁴⁵ “Men’s Dress Reform: A Rally of Supporters,” *Times* (London), July 4, 1929, Issue 45246, p. 14.

⁴⁶ Sharon R. Ullman, “‘The Twentieth Century Way’: Female Impersonation and Sexual Practice in Turn-of-the-Century America,” *Journal of the History of Sexuality* 5, no. 4 (April 1995): 577n9, 578.

It is clear that health composed a major part of dress reform. The shorter skirt, heralded as a more hygienic and becoming garment than current styles, thus functioned as both medicine and fashion. While this section largely focused on the physical conditions that resulted from dress, some of the effects described were psychological. Burman, for instance, quotes British printmaker Eric Gill, who called the skirt “the garment of dignity.” This made the skirt ideal clothing for men and women, as “dignity” was, in his view, the “essential object of clothes” (Figure 2).⁴⁷ As we will see, scientists and doctors of the time believed that clothing, especially the skirt, had a direct relation to self-regard, even despite the potential of ridicule.

PART THREE: FOR DIGNITY AND ADORNMENT

The combination of the skirt and the body was, for these thinkers, more than the sum of its parts: the skirted body became a powerful figure on which to read different visions of the future. Scholars Emmett Harsin Drager and Lucas Platero, editors of a recent special issue of *Transgender Studies Quarterly* on the transvestite and the transsexual, noted, for instance, that “Transvestite and travesti positionalities are often unintelligible in the register of coherent ‘identity,’ which is to say one that follows the Western sexological narrative of separating an internal gender identity from sexual orientation.”⁴⁸ This is true not only in theory but also in historical practice. Some early twentieth-century figures saw the skirted body as a new form that transcended the limits of nature; when this body was assigned male at birth, however, it took on a dangerous cast.



FIGURE 2 ERIC GILL, “CLOTHES: FOR DIGNITY AND ADORNMENT,” 1927, HARVARD ART MUSEUMS/FOGG MUSEUM, GIFT OF HENRY S. BOWERS, ACCESSION NUMBER M4916 © ESTATE OF ERIC GILL / BRIDGEMAN IMAGES. PHOTO © PRESIDENT AND FELLOWS OF HARVARD COLLEGE. [HTTPS://HVR.D.ART/O/257093](https://hvr.dart/o/257093).

⁴⁷ Eric Gill, *Clothes* (London: Jonathan Cape, 1931): 195, quoted in Burman, “Better and Brighter Clothes,” 285–286.

⁴⁸ Drager and Platero, “At the Margins of Time and Place,” 418.

British psychoanalyst and psychologist J. C. Flügel is a controversial figure in fashion studies, but someone who has nonetheless been very influential—precisely, I argue, because of his engagement with psychological theories in making pronouncements about clothing. The skirt held a particular place in Flügel’s view of the psychology of clothes; for Flügel, the skirt functioned paradigmatically to increase the “apparent size and movement” of the body. Through its decorative aspects, he argued, clothing provides its wearer “an increased sense of power, a sense of extension of our bodily self — ultimately by enabling us to fill more space.” In making this argument, Flügel directs the reader to a series of images of women in skirts (Figure 3), writing that it will be immediately apparent and familiar “that the skirt adds to the human form certain qualities with which nature has failed to endow it. Instead of being supported on just two legs with nothing but thin air between them, a skirted human being assumes much more ample and voluminous proportions, and the space between the legs is filled up, often with great increase of dignity.” One of the photographs features a dancer, who, by holding her skirt, “creates an impression of bodily power and grace which could not possibly be achieved by the naked body.”⁴⁹ As such, clothing is conceptualized as a *prosthetic*, a technology that provides its wearer with enhanced self-regard and bodily capacity by becoming an artificial part of the human form — the “skirted human being” is a new creature, characterized by increased “dignity” (note the use of this term once more) as well as greater power.⁵⁰

These authors also saw dress as a means by which to read the mind’s interior on the body’s exterior. Flügel, for instance, likened the use of clothing to the development of a neurotic symptom.⁵¹ And, as some scholars in the history of psychiatry have noted, clothing has been one method by which to diagnose as well as mark treatment’s efficacy — disordered appearance, quite simply, can imply mental disorder.⁵² To take just one example, casebooks from the Holloway Sanatorium in Surrey, England, are replete with descriptions of patient dress. For instance, a patient named Helena H., admitted in 1906, was said to be “somewhat unruly in dress, clearly in habits.”⁵³

⁴⁹ Flügel, *The Psychology of Clothes*, 34–35

⁵⁰ On the prosthetized body, see Donna J. Haraway, “A Cyborg Manifesto: Science, Technology, and Socialist-Feminism in the Late Twentieth Century,” in *Simians, Cyborgs, and Women: The Reinvention of Nature*, (New York: Routledge, 1991), 149–181; and Laini Burton and Jana Melkumova-Reynolds, “‘My Leg is a Giant Stiletto Heel’: Fashioning the Prosthetised Body,” *Fashion Theory* 23, no. 2 (2019): 195–218.

⁵¹ For a treatment of Flügel’s intellectual milieu, see Michael Carter, “J.C. Flügel and the Nude Future.” *Fashion Theory* 7, no. 1 (2003): 79–101.

⁵² The use of clothing in diagnosis is noted in Rebecca Wynter, “‘Good in all respects’: Appearance and Dress at Staffordshire County Lunatic Asylum, 1818–54,” *History of Psychiatry* 22, no. 1 (2010): 50; Nicole Baur and Joseph Melling, “Dressing and Addressing the Mental Patient: The Uses of Clothing in the Admission, Care and Employment of Residents in English Provincial Mental Hospitals, c. 1860–1960,” *Textile History* 45, no. 2 (November 2014): 147–149; and Sara Wetzler, “The Faces of Madness,” *Psychiatric Times*, January 14, 2021, <https://www.psychiatristimes.com/view/faces-madness>.

⁵³ Holloway Sanatorium, Females No. 17 (Certified female patients admitted August 1905– March 1907), WMS 5160: 205–206. Wellcome Library, London, England, <https://wellcomecollection.org/works/w3v6wrpt/items?canvas=190>.

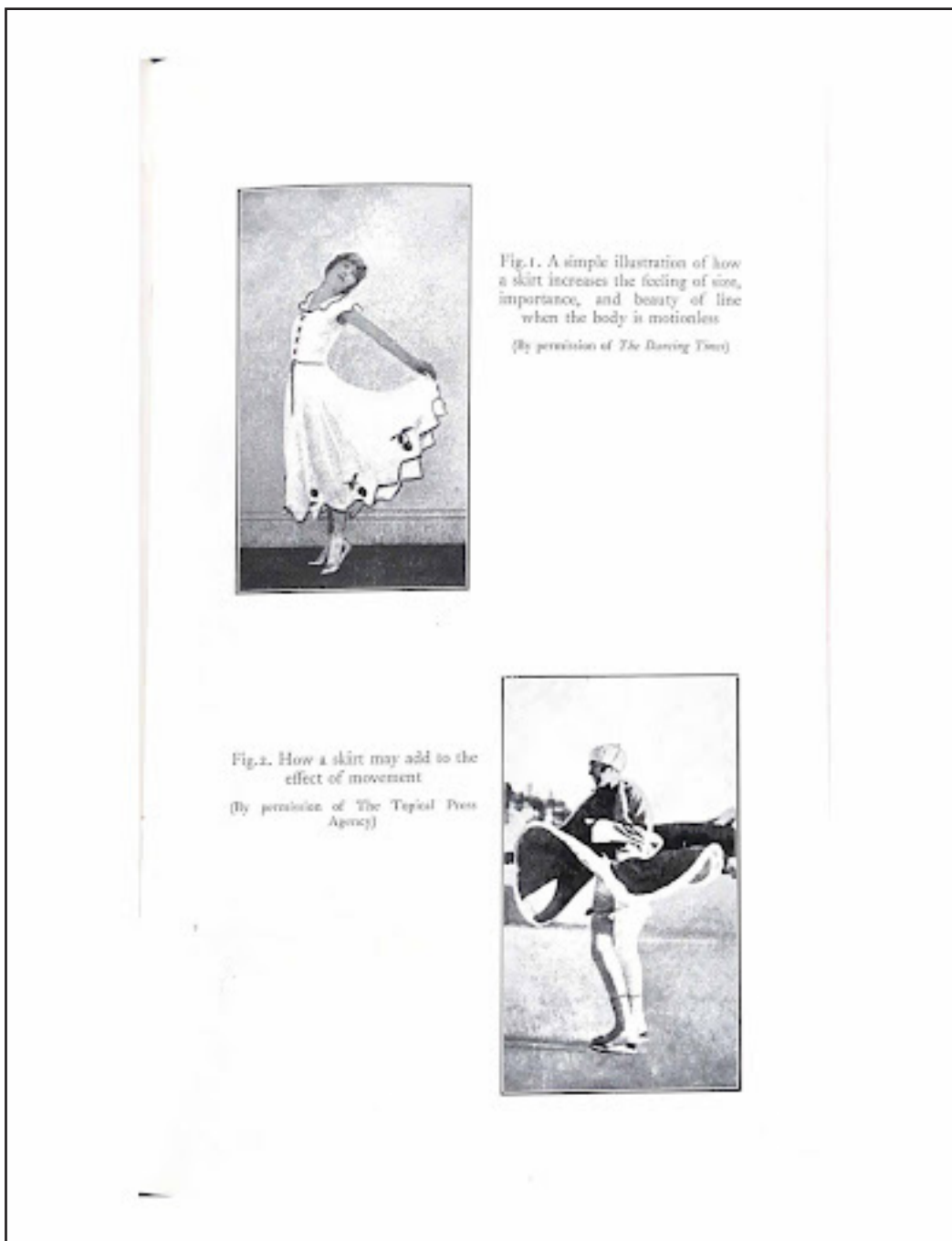


FIGURE 3 A PLATE FROM J. C. FLÜGEL'S *THE PSYCHOLOGY OF CLOTHES* (LONDON: THE HOGARTH PRESS AND THE INSTITUTE OF PSYCHO-ANALYSIS, 1971 [1930]).

The connection between dress and perceived disorder is complicated, however, in the case of transvestism, where observers often pathologized the individual wearing the clothing of another gender while the individuals themselves reported its beneficial effects. Magnus Hirschfeld coined the term “transvestite” in his 1910 book on the subject, though cross-dressing behavior and the identification of these individuals as what sociologist Clare Sears termed “problem bodies” long predates this neologism.⁵⁴ Hirschfeld asserted that, to him, clothing was not “a dead thing,” but rather “a form of expression of the inner personality as a valid symbol.”⁵⁵ He described the strong effects of clothing on his patients’ mental state as follows: “In the apparel of their own sex they feel confined, bound up, oppressed...on the other hand, they cannot find enough words to describe the feeling of peace, security and exaltation, happiness and well-being that overcomes them when in the clothing of the other sex.”⁵⁶ A man named Mr. S., for instance, described how he recovered from his “weakened health” after dressing in his sister’s clothes, “whereas before, it took six weeks long in a sanatorium and to no avail.”⁵⁷

A few years after Hirschfeld’s book was published in German, an American doctor named Bernard S. Talmey recorded five cases of transvestism in men. While Talmey considered the act pathological, he nevertheless noted “the patient’s experience of an increased comfort and well-being by the gratification of the pronounced impulse of cross-dressing.”⁵⁸ The first case Talmey provided (Figure 4) was of a man whose “peculiar anomaly” was “the desire to be a complete woman.” This “desire,” expressed mainly through cross-dressing, “takes the form of an imperative impulse,” according to Talmey: “When he cannot dress up he becomes restless. He would rather commit suicide than be without female apparel.” What is more, the “patient,” in Talmey’s words, “feels himself to be in a normal condition and is cheerful” when in women’s attire: “A feeling of absolute comfort and restfulness comes over him, when in female clothes, and his behavior is in full accordance with his feelings, while in male dress there is a kind of absent-mindedness about him; he is always thinking of his female dresses.”⁵⁹ Here the individual’s “normal” state was one that included particular clothes — a skirted human being.

⁵⁴ Sears, *Arresting Dress*, 10–12.

⁵⁵ Magnus Hirschfeld, *Transvestites: The Erotic Drive to Cross-Dress*, trans. Michael A. Lombardi-Nash (Buffalo: Prometheus Books, 1991 [1910]), 124.

⁵⁶ *Ibid.*, 125.

⁵⁷ *Ibid.*, 70–71.

⁵⁸ Bernard S. Talmey, *Love: A Treatise on the Science of Sex-Attraction* (New York: Practitioners’ Publishing Company, 1915), 297–298.

⁵⁹ *Ibid.*, 300–302.

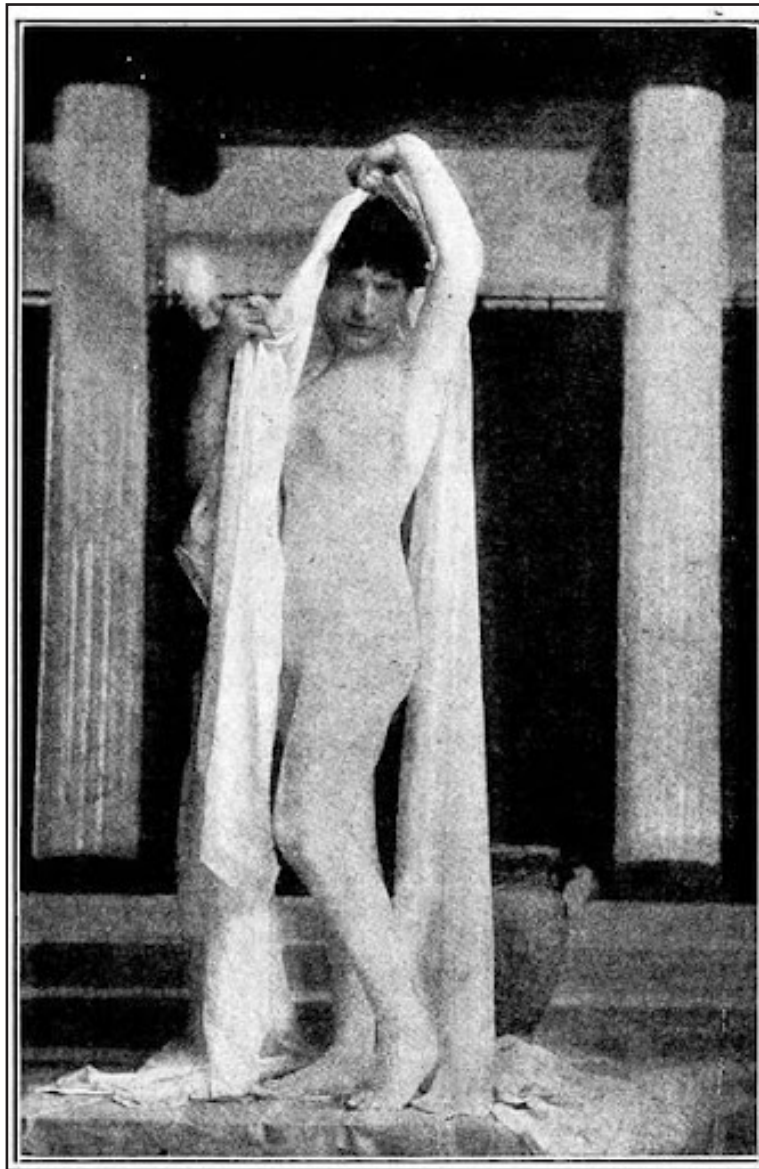


FIGURE 4 A PHOTOGRAPH FROM DR. BERNARD S. TALMEY'S *LOVE: A TREATISE ON THE SCIENCE OF SEX-ATTRACTION* ILLUSTRATING THE FIRST CASE OF TRANSVESTISM DISCUSSED BY THE AUTHOR. THE CAPTION OF THE IMAGE IS "A CHARACTERISTIC PICTURE OF PATIENT NO. 1; POSING IN IMITATION OF THE CELEBRATED PAINTING "PSYCHE IN BATH," DRESSED IN STOCKINET." SO DRESSED, TALMEY REPORTS THAT "NO ONE WOULD TAKE HIM FOR A MAN." BERNARD S. TALMEY, *LOVE: A TREATISE ON THE SCIENCE OF SEX-ATTRACTION*, 3RD REV. ED. (NEW YORK: PRACTITIONERS' PUBLISHING COMPANY, 1919), 299–300. IMAGE FROM PROJECT GUTENBERG EBOOK, [HTTPS://WWW.GUTENBERG.ORG/FILES/53121/53121-H/53121-H.HTM](https://www.gutenberg.org/files/53121/53121-H/53121-H.HTM).

While Hirschfeld and Talmey may have differed in their approach to transvestism, both noted the profound and positive effects dress had on certain individuals. Clothing could provide well-being and even normality, and its lack occasioned of deep despair and discomfort. Counter to the cultural stigmatization of cross-dressing noted above, their writings gave space to explore some of the positives of the practice.

When the condition was translated into the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders* beginning in the 1950s, this aspect of transvestism was lost. The first edition classed transvestism as generic sexual deviation, while the second, published in 1968, provided a specific code for the practice: 302.30.⁶⁰ The latter edition also included the provision that "even though many find their practices distasteful, they remain unable to substitute normal sexual behavior for them."⁶¹ This was further expanded in the 1980 version (which notably did not include the category of "homosexuality" in its pages), where the condition was listed as one of a range of paraphilias.⁶² Although it was noted that "interference with cross-dressing results in intense frustration," the manual is explicit that "*cross-dressing for the relief of tension or gender discomfort* may be done without directly causing sexual excitement" and "should not be diagnosed as Transvestism" but instead as Atypical Gender Identity Disorder.⁶³ In all three editions, the third one most of all, the APA removed any relief associated with the practice of cross-dressing out of the definition of transvestism. One can still be diagnosed with "transvestic disorder," it should be noted, and such a label now explicitly requires emotional distress or impaired functioning.⁶⁴

⁶⁰ Committee on Nomenclature and Statistics of the American Psychiatric Association, *Diagnostic and Statistical Manual of Mental Disorders* (Washington, D.C.: American Psychiatric Association Mental Hospital Service, 1952), 38–39. On the history of this diagnosis in the *DSM*, see Luk Gijs and Richard A. Carroll, "Should Transvestic Fetishism Be Classified in *DSM 5*? Recommendations from the WPATH Consensus Process for Revision of the Diagnosis of Transvestic Fetishism," *International Journal of Transgenderism* 12, no. 4 (2010): 189–197. As an example of the response to a medical label, see Kayley Whalen, "(In) validating Transgender Identities: Progress and Trouble in the *DSM-5*," National LGBTQ Task Force, accessed August 5, 2021, <https://www.thetaskforce.org/invalidating-transgender-identities-progress-and-trouble-in-the-dsm-5/>.

⁶¹ Committee on Nomenclature and Statistics of the American Psychiatric Association, *Diagnostic and Statistical Manual of Mental Disorders*, 2nd ed. (Washington, D.C.: American Psychiatric Association, 1968), 44.

⁶² On the removal of homosexuality from the *DSM*, see Ronald Bayer, *Homosexuality and American Psychiatry: The Politics of Diagnosis* (New York: Basic Books, 1981) and Jack Drescher, "Out of *DSM*: Depathologizing Homosexuality," *Behavioral Sciences* 5, no. 4 (December 2015): 565–575. <https://doi.org/10.3390/bs5040565>.

⁶³ American Psychiatric Association, *Diagnostic and Statistical Manual of Mental Disorders*, 3rd ed. (Washington, D.C.: American Psychiatric Association, 1980), 266–270.

⁶⁴ In its current (fifth) iteration, the *DSM* includes the diagnosis as part of an attempt to distinguish between *behaviors and disorders*: "A *paraphilic disorder* is a paraphilia that is currently causing distress or impairment to the individual or a paraphilia whose satisfaction has entailed personal harm, or risk of harm, to others. A paraphilia is a necessary but not a sufficient condition for having a paraphilic disorder, and a paraphilia by itself does not necessarily justify or require clinical intervention." A diagnosis of transvestic disorder thus "applies to individuals whose cross-dressing or thoughts of cross-dressing are always or often accompanied by sexual excitement (Criterion A) and who are emotionally distressed by this pattern or feel it impairs social or interpersonal functioning (Criterion B)." American Psychiatric Association, "Paraphilic Disorders."

For mind scientists in the early twentieth century, clothing was directly connected to the psyche, adding to the natural abilities of the human form and providing demonstrable therapeutic relief of internal conflict.

Clothing was an important part of the work of psychoanalysts and physicians, though one increasingly ignored as the century went on.

Focusing on this case as a moment in the history of both medicine and fashion helps to elucidate the stakes of cross-dressing and how, for some, it could be a medicinal tool rather than (or in addition to being) a so-called “abnormal” act.

CONCLUSION: “MENTAL ILLNESS AND RHINESTONES”

I have argued that, for a group of professionals in the early twentieth century, clothing functioned as a prophylactic prosthetic to mental and physical well-being. Shorter skirts were offered as a form of protection from the newly “visible” germs that lurked on the street. As part of broader dress reform movements, skirts and other loose garments became material means to achieve a healthy modernity free from the laundry list of ills caused by fashion. And for the psychoanalytically minded, dress was a powerful symbol of gender and self-expression, able to fortify the psyche when used in particular ways.

By arguing for an understanding of clothing as prophylaxis, I am simultaneously expanding the way we conceive of medical objects and of fashion. First, many common forms of prophylactic interventions involve the addition of something to the body to help ward off disease, such as birth control or vaccinations. Less visible are the many ways in which removal also functions in prevention, from daily practices of cleaning to surgeries that remove organs to stop the spread of cancerous cells.⁶⁵ The case at hand highlights not only the quotidian preventative work of professionals and laypeople alike to prevent illness, but also how biomedical understandings of disease brought forward new ways of removing what were seen as potential sites of infection.⁶⁶ Second, this framing allows for a reappraisal of scholarship on dress reform that further contextualizes the group’s medical arguments beyond the highly publicized case of the corset. As others have argued, fashion was believed to be one way to improve the health of pop-

⁶⁵ See Löwy, *Preventive Strikes*.

⁶⁶ This builds, for example, on the work of Tomes in *The Gospel of Germs*.

ulations around the turn of the century. By bringing microbes and professional identity into the picture, this case study helps explain the surprising longevity of reform.

While this story is in many ways specific to the period one hundred years ago, I argue that this form of thinking still permeates cultural conversations in a manner that is not always readily apparent. Take, for instance, the 2022 finale of the fourteenth season of *RuPaul's Drag Race*. The eventual winner of the season, a drag queen who goes by the name Willow Pill, was vocal during her time on the show about her battles with cystinosis. Pill stated that her art was a way to overcome medical trauma and the darkness she had experienced (Pill's last name comes from the many medications she must take for her chronic kidney disease). Moreover, Pill was one of a handful of queens to come out as trans during the airing of the show and emphasized drag as a way for her to more fully understand her gender identity. When asked about her journey during the finale, Pill replied, "I've been finding my gender so much, and just kind of falling in love with myself all over again."⁶⁷

Asked to define drag, Pill quipped that it was "mental illness and rhinestones."⁶⁸ On first read, this might be taken as further pathologizing this group. Other drag queens backed this reading of her remark by responding that "I think all of us are a little bit delusional, all of us have a little bit of mental illness," that "you have to be a little sick and twisted to do drag" because drag is basically "body mutilation."⁶⁹ If adopted outside of the community, such a critique could be leveraged to further marginalize the practice. However, an alternative interpretation is available, especially considering the story told above: Drag draws those who have experienced trauma to work through it using the transformative potential of fashion. As Pill put it in an interview after the finale, "Drag has to be weird and monstrous because life is weird and monstrous....Life is nasty and difficult, and I just don't know how I'd hold on to anything if I wasn't able to take the piss out of it and make it into something that's my own."⁷⁰

⁶⁷ *RuPaul's Drag Race*, season 14, episode 16, "Grand Finale!" hosted by RuPaul Charles, aired April 22, 2022. <https://www.vh1.com/episodes/uzx9s4/rupaul-s-drag-race-grand-finale-season-14-ep-16>.

⁶⁸ Ibid.

⁶⁹ *RuPaul's Drag Race*, "The Pit Stop S14 E16 | Monét X Change & Naomi Smalls Crown A Winner," YouTube video, 29:01, April 23, 2022, <https://www.youtube.com/watch?v=RdiQqrR-LDo>.

⁷⁰ Joey Nolfi, "*RuPaul's Drag Race* winner Willow Pill plans to 'get more disgusting and dirty' — and fun," *Entertainment Weekly*, April 23, 2022, <https://ew.com/tv/rupauls-drag-race-season-14-winner-willow-pill-interview/>.

This example conforms with the work of Iñaki Estella, whose recent article on transvestites during Francisco Franco’s dictatorship shows how the Spanish cabaret “was certainly a place of abuse but also of mediation and protection through which some transvestites could receive the admiration of a public sheltered by the intimacy of this unique space.”⁷¹ Estella found that the private space of the cabaret — wherein fear was transformed into pride and social rules were temporarily suspended — formed a basis for collective political action and social change.

Even beyond this particular group and the more specific case of “functional fashions,” clothes are intimately tied to how humanity copes with mental and physical unrest.⁷² For instance, 2022 has seen the publication of a spate of pieces on the trend of “dopamine dressing,” a form of “mindfulness practice” that testifies to “how our lives are directed mainly by our perception of ourselves and how great an impact clothing has in influencing that perception.”⁷³ Clothing must be considered a part of medicine as well as fashion; and by adding therapeutic language to clothes, new worlds open for seeing how the self is fashioned by dress.

⁷¹ Iñaki Estella, “The Collective Scene: Transvestite Cabaret during the End of Francoist Spain,” *TSQ: Transgender Studies Quarterly* 8, no. 4 (November 2021): 509–510.

⁷² Liz Jackson and Jaipreet Viridi, “Beyond Functional: Unraveling the Long Line of Disability Fashion,” *Bitch Media*, November 1, 2021, <https://www.bitchmedia.org/article/disability-fashion-history-access-issue>.

⁷³ Megan McClelland, “What Is Dopamine Dressing and Why Is Everyone Doing It?” *Grazia*, accessed June 2, 2022, <https://graziomagazine.com/me/articles/dopamine-dressing/>.

Author Bio



Christopher M. Rudeen is a doctoral candidate at Harvard University with a secondary field in Studies of Women, Gender, and Sexuality.

His dissertation explores “the psychology of clothes,” an interdisciplinary effort within the early mind sciences to use objects such as dress as a means of studying inner life in an “objective” fashion. He is also interested in related questions at the intersection of fashion studies and the history of science and medicine, including the use of RIP shirts as a means of group therapy and the role of clothing and cloth in the treatment of mental illness. His work has been published or is forthcoming in *The Fashion Studies Journal* and *The Journal of the History of the Behavioral Sciences*. He received his BS from Yale University, where he majored in Chemistry and the History of Science, Medicine, and Public Health.

ARTICLE CITATION

Rudeen, Christopher M. “The Battle of the Hemlines: Clothing and Illness in the Early Twentieth Century.” *State of the Field*, special issue of *Fashion Studies*, vol. 1, no. 1, 2023, pp. 1-25, <https://www.fashionstudies.ca/battle-of-the-hemlines/>, <https://doi.org/10.38055/SOF010104>.

Toronto
Metropolitan
University

Fashion

at The Creative School



FASHION
STUDIES



Social Sciences and Humanities
Research Council of Canada

Conseil de recherches en
sciences humaines du Canada

Canada

ISSN 2371-3453

Copyright © 2023 Fashion Studies - All Rights Reserved

Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International (CC BYNC-ND 4.0) license (see: <https://creativecommons.org/licenses/by-nc-nd/4.0/>)