Few historians working in gender and sexuality have concentrated on youth in the Canadian context. Adams makes an important contribution to a growing Canadian tradition of emerging and immensely fertile literature, laying bare how societal-level power relations shape sexuality, race, class and gender. But she doesn't overdo it. She makes certain that we understand that the hegemony of heterosexuality is never complete. Rather, normality must be constantly fought for, despite ideological constructions of it as 'natural' (106).

The Trouble With Normal: Postwar Youth and the Making of Hetero-sexuality provides a valuable overview of sexualities in postwar youth. No one book can provide a full historical account of the social relations of heterosexuality, even in a specific group within a rather narrow time frame, but Adams' account both informs us about the nature of the knowledge of heterosexuality in the postwar era and examines the complexity of what it means to write histories of sexualities. This is an impressive, timely, instructive text, essential for educators, sociologists, and historians working in the area of sexuality.

Blye W. Frank Mount Sainte Vincent University

Vera C. Pletsch, Not Wanted in the Classroom: Parent Associations and the Education of Trainable Retarded Children in Ontario: 1947-1969. London, On.: The Althouse Press, 1997. Pp. 156.

Written largely as an in-house history, Vera Pletsch's pioneering work shows the need for historical research on childhood disability and its treatment, on the politics of school inclusion, and on how parents vie with experts, government officials, and law makers over access and funding. Despite its many flaws, this book makes two significant contributions to the history of special education and special services for children in Ontario. It is the first study of children labelled "trainable mentally retarded" and excluded from public education altogether, including the segregated special classes created by Helen MacMurchy in 1911 and the auxiliary classes for slow learning children enabled by legislation in 1914. Second, it is unusual in highlighting the role of parental lobby groups in forming school policy.

Parent interest groups pushed for enabling legislation and the funding of classes, yet we know little about the origins and activities of parent associations on behalf of children with disabilities. Pletsch tries to fill this gap by describing the grass-roots movement of nine parent associations in Ontario and their struggles to open local experimental schools for children thought to be uneducable. She interviews members of parent associations,

teachers, and school inspectors from Kirkland Lake, Toronto, Hamilton, London, Windsor, Brant-Norfolk, Welland, Niagara Falls, and Petersborough. She also studies organizations such as the Ontario Association for Retarded Children (OARC) instrumental in educating the public and pressing for changes in school legislation.

It is difficult to talk about the history, education or experience of children labelled "mentally retarded" without discussing problems of classification. Not Wanted in the Classroom begins with an apt observation:

[M] any histories that discuss mental retardation are extremely misleading for two reasons. First, they fail to distinguish between concepts about mental retardation and concepts about mental illness and, secondly, their authors mistakenly apply labels interchangeably at various levels of mental deficiency. (9)

Despite this warning Pletsch's work is itself a case in point. She does not take into consideration the fact that all classification systems used to delimit populations for purposes of treatment, service, or education, including "mental illness" and "mental retardation," are social constructs. Mental retardation is a twentieth century term that may or may not refer to a clinical condition of biological origin (as in hereditary syndromes). Educators use behavioural classifications, supported by intelligence tests (IQ) and social assessments, to determine a child's learning potential. Behavioural classifications often lack any medical basis, nor are they justified by an underlying biological or clinical condition, and thus are subject to a variety of abuses and mis-diagnoses on the basis of social class, cultural, linguistic, religious, or socially-grounded developmental expectations for age groups. Classification systems may facilitate distribution of public and private funds to provide services for people who can't live independently. These classifications nonetheless remain groupings of convenience. By their very definition they are of questionable validity, given the persistence of human differences and the variation of the abilities and characteristics of any single individual subject in any one category.

Pletsch accepts without question not only the classification systems but also the intelligence test as a definitive means of identification. She states that by the 1920s

the term 'retardation' had been clarified in the minds of most professionals. The development of the Binet tests, which initially promised to be an almost exact measure for separating the mentally defective child from the normal one, indicated to what degree a child was retarded in mental development. (26–7)

She treats IQ as a definitive indication of abnormality and the labels as a reality, although she notes that "many professionals expressed reservations about the dependability of the IQ as scientific proof of mental deficiency" (27). Pletsch uses the archaic classification systems of the times she discusses without acknowledging their complications or assessing who benefits or is

disadvantaged by alternative classification and labelling systems. Boundaries between the categories of mental illness, mental deficiency, and physical disability are in fact fluid and tied to contextual influences. The same disability can be differently diagnosed depending on the affiliation or discipline of the agency or individual doing the assessment. This is one reason why social histories of evaluation and labelling are important and why it is vital to examine how parents of children labelled "retarded" contributed to changes in definitions and services.

Pletsch's ambitious overview of the early history of special services in Ontario is occasionally confused and sometimes misleading. For example, she cites one of Canada's leading mental hygienists, Clarence Hincks, as an "environmentalist" (28) but fails to identify his important role as medical director of the Canadian National Committee for Mental Hygiene (now the Canadian Mental Health Association) and later general director of both the Canadian and U.S. committees.

Her historical overview is of little help in clarifying the broader dynamics of Ontario society from 1947 to 1969. The eugenics and mental hygiene movements were then central to an intellectual climate that encouraged hereditarian social thought and promoted segregation and custodial care of individuals considered abnormal. Policies fostered by these movements shaped legislation and the training of professionals as well as the attitudes of parents (especially from the upper classes). These pressures shaped the ability of parent associations to form and to organize effectively on behalf of their children.

How did the actions of these pioneer parent groups help and hinder efforts to provide for the specialized needs of their children? The paradoxes of parental attitudes toward their children by social class, culture, and gender should be a central aspect of this story. What were the divisions and internal politics of the parent associations? The complexity of the struggles, confusions, biases, and triumphs of personal growth of these individuals and groups are barely tapped, much less adequately explained or analyzed.

Pletsch has opened a door. One hopes other social historians will take up this important topic and tell this potentially rich story.

Theresa Richardson University of South Florida