

evoked memories of people affected by HIV and what they felt when they were finally seen and acknowledged. The author even managed to make me cry on two occasions when I had the opportunity to learn about the vital role played by activists performing services for HIV-positive people, using their vocational skills. I was also made to weep by the musical theme, during funerals and the care for the identity of the buried dead listening to Barbra Streisand, Donna Summer and Jimmy Somerville songs. I also had the pleasure of reading with amusement and laughter at the right-wing effusions of young students, church hierarchs or just ideological shuriken.

While every reader will experience and perceive this work differently, I believe no one who comes across this book will remain indifferent to it —and what it conveys, how it embraces the activism in its fullest forms by exploring its complex spectrum and how it shows that 'people with everything to lose create networks to not simply survive but find joy and pleasure' (p. 132). ■

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**Caroline Rusterholz.** *Responsible Pleasure: The Brook Advisory Centres and Youth Sexuality in Postwar Britain*. Oxford: Oxford University Press; 2024. 270 p. ISBN 978-01-9286-627-1. 30 £

In the introduction of her book, Caroline Rusterholz, a leading scholar of the history of sexual and reproductive health in twentieth-century Europe, succinctly summarises the objective of *Responsible Pleasure: The Brook Advisory Centres and Youth Sexuality in Postwar Britain*: to highlight post-war Britain's "sociocultural history of young people's sexuality," spanning from the 1960s to 2000. To me, it also provides a political overview of Britain's history of youth sexuality. The book delivers a chronological analysis of changes in youth's sexual culture in Britain over 40 years and gives a detailed account of the involvement Brook, a national charity that provides sexual health and well-being support to the youth through clinical and educational services, in transforming the nation's norms, notions and behaviours concerning youth sexuality. Lived experiences, feelings, and individual subjectivity related to sexual health services rarely find space in

history. By incorporating oral history interviews of Brook's former staff and clients, along with a robust primary and secondary source base, Rusterholz effectively demonstrates what youth sexuality meant to the youth themselves, rather than solely focusing on society's perceptions of it. The author has organised the book into seven sequential chapters, each further divided into sub-sections. Rusterholz introduces the main arguments of the upcoming chapter toward the end of the previous one, making the transition seamless. Additionally, she has used archival photos, quantitative graphs and content from various materials developed by Brook to visualise her descriptions.

In Chapter 1, Rusterholz starts by providing the readers with a comprehensive account of the social, cultural, medical and political debates surrounding youth sexuality in Britain during the 1950s and 1960s when the needs of married women took precedence. Against the backdrop of this narrow focus, she introduces Helen Brook's vision as a founder of the first Brook Advisory Centre (BAC) to provide sexual health services to unmarried girls and young women amidst criticism for allegedly encouraging promiscuity. Prior to establishing the first-ever BAC, Helen Brook worked at the Family Planning Association (FPA), initially as a volunteer and later as the chairperson of the Islington FPA clinic, before moving to the Marie Stopes Clinic. During her many years of working closely with young women, she recognised the dire need for birth control among unmarried ones. This realisation along with her empathy for young women, motivated her to relentlessly work for the cause. When discussing the history of Brook's expansion, Rusterholz does not portray it in a continuous, linear progression. In Chapter 2, she analyses different roadblocks Brook faced while opening local BACs in various parts of Britain (Birmingham, Bristol, Edinburgh, Liverpool, and London) and the strategies they developed to overcome persistent resistance and gain respectability. By doing so, she brings out the diverse localised perspectives on youth sexuality, nuances that are often overlooked. In Chapter 3, Rusterholz emphasises Brook's role in shaping the local and national culture and politics concerning youth sexuality in Britain from 1970s to 1990s, which led to the formulation and implementation of numerous important sexual health policies and legislations, including the Department of Health and Social Security guidance (1974) and the Health of the Nation (1992). Along with the success, she also discusses the financial hardships and their impact on Brook's expansion plans, working policies and ethics. Rusterholz does not attribute the development in the field of youth sexuality solely to Brook. She acknowledges the contributions of Brook's staff and the collective efforts of other sexual and reproductive health charities, including those that existed before Brook.

Brook succeeded not only because the organisation met the needs of young people but also because it did so in a way that truly resonated with them. Unlike their families and society, which infantilised them, Brook treated young people as responsible individuals. Brook made dedicated efforts to understand their viewpoints and consistently took their feedback to improve its services. In Chapter 4, Rusterholz highlights Brook's labour in establishing safe, non-judgmental, and relaxed spaces for young people to express their concerns freely. Starting from the locations and their accessibility to the centres' interiors and aesthetics, everything was designed with the sensibility of the youth in mind. Chapter 5 shows the experiences (positive and negative) of Brook's former clients, where Rusterholz analyses how these interactions were transformative for both. Through Chapter 6, the author reflects on the new services offered at BACs, particularly the expansion of counselling from solely birth control to include pregnancy and psychosexual issues, and the emergence of confidentiality and listening as guiding principles for Brook. In Chapter 7, Rusterholz examines Brook's contributions to public health and sex education in Britain and discusses how Brook expanded its clientele base by including gays and lesbians and queered heteronormative ideas of sex for youth by placing pleasure at the centre of sexual intimacy.

The most significant feature of the book is Rusterholz's examination of British history at the intersection of race, class, gender and youth's sexual and reproductive politics. Throughout the book, the author discusses how and why Brook engaged with and sometimes challenged the stereotypical and political ideas of race, ethnicity, class, and gender. For instance, Brook defied norms by advocating for unmarried women's sexual and reproductive rights in the 1960s but operated within the heteronormative, classist, and racialised ideals. Similarly, in its early years, Brook primarily targeted young unmarried white women from middle- and upper-class communities even though class and race were central to Brook's genesis. Rusterholz avoids applying a present-day perspective to the past, demonstrating that, although these strategies are questionable now, they were politically necessary at the time to establish and sustain Brook. Rusterholz also highlights BACs' discriminatory approaches between white and coloured youth. According to me, she wants to illustrate how Britain was socially, culturally, and politically characterised by racism, classism and misogyny during that time. Brook, as a part of this society, reflected a similar outlook in its interactions with youth from marginalised communities. Over the years, Brook has confronted its internal racism, classism and homophobia, and raised awareness about these pertinent matters.

To conclude, Rusterholz has beautifully interwoven the evolution of Britain's youth sexuality culture along with the evolution of Brook against the backdrop of class, race and gender. She provides a closer look at the advancement of individual and collective attitudes towards sex and pleasure in mid-twentieth-century Britain. It shows Britain's youth's progressive journey from having 'responsible sex' to 'responsible pleasure.' Due to the unavailability of race, ethnicity and class-specific data, Rusterholz's exploration of these aspects in the book remains limited. However, it is a great introductory read for any scholar or individual interested in exploring a feminist historiography of the development of youth sexuality in Britain. ■

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**Katherine L. Carroll.** *Building Schools. Making Doctors. Architecture and the Modern American Physician.* Pittsburgh: Pittsburgh University Press; 2022, 428 p. ISBN 978-0-8229-4705-9. 70 USD

La reciente concesión del Premio FAD de Arquitectura 2025 al nuevo edificio del Instituto de Investigación del Hospital Vall d'Hebron en Barcelona permite comprender la importancia del libro que reseñamos aquí para la historia de ciencia y, en especial, de la arquitectura de edificios de ciencia. Más allá del lenguaje de la arquitectura cuando habla en público —una jerga, a menudo, tan incomprendible como vacía de significado— el edificio plantea cuestiones a las que se enfrenta la arquitectura desde el siglo XIX: cómo y dónde se produce el conocimiento científico; qué prácticas tienen lugar en aquellos espacios y cómo cambian, obligando a soluciones de adaptación o transformación; en qué medida el espacio contribuye a formar la identidad profesional de sus usuarios; o de qué manera el edificio refleja el medio sociocultural en el que se inscribe. Aspectos poco conocidos y escasamente atendidos por la historia de la medicina, pese a ser cuestiones relevantes, relacionadas con el alcance y profundidad del diálogo entre arquitectos, ingenieros, científicos y otros usuarios en el proceso de planteamiento de estos edificios. Otros tienen que ver con el papel del conocimiento de la historia, pasada o reciente, del diseño de edificios similares o qué