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John Foster Dulles, Illness, Masculinity and U.S. Foreign Relations, 1953-1961*

After several difficult years in Anglo-American relations following the fall-out over the Suez Crisis in 1956, work to cultivate a more harmonious relationship was well underway by 1959 as British officials adjusted to the reality of their international situation and as U.S. officials sought to shore-up a relationship with an ally whose strategic importance had been reinforced in the wake of the Soviet launch of Sputnik in 1957. Accordingly, on March 20 1959, British Prime Minister Harold Macmillan journeyed to Washington D.C. for a series of important meetings with the Dwight D. Eisenhower administration. With Macmillan having recently played a key role in attempts to temper a mounting crisis over Berlin, the focus was very much on rapprochement. As the *New York Times* editorialised on the eve of Macmillan's visit: 'It is a commonplace of contemporary politics that Britain and the United States are inseparable allies.'²

The following day, Macmillan met with President Eisenhower at the White House and the two men travelled together to the Walter Reed Naval Hospital just outside Washington. Upon arrival they took the private elevator up to the presidential suite where they were due to meet with Eisenhower's secretary of state, John Foster Dulles, who had been diagnosed with a recurrence of the highly aggressive form of cancer that he had previously fought off in 1956. The prognosis this time was much less hopeful; both Dulles and Macmillan knew that this was likely to be the last time they would see one another. The meeting that followed, however, did not adhere to the rapprochement agenda. Instead, the meeting laid bare the extent to which emotional responses shaped by perceptions of illness could come to dominate high-level diplomacy during the 1950s. Dulles, in the midst of confronting his own mortality, harangued Macmillan about what he saw as being Britain's general failings and weakness; the British leader, meanwhile, responded angrily to a man whom he believed had stayed too long in office and whose judgement was being affected by his failing health. They clashed

over their competing views of the right approach to take toward Moscow and decried what they saw as the inherent wrong-headedness of each other's positions. At one point, Dulles denounced what he termed 'Britain's chronic pathology: the weak-kneed attitude that had plagued him throughout his tenure as secretary of state' and provoked Macmillan into an impassioned defence of his nation. Later, writing in his diary, Macmillan pointed to Dulles's illness as being responsible for the direction the meeting had taken and expressed regret at the combative turn that their discussion had taken. I felt I ought not to have argued at all with this dying man, Macmillan wrote. I felt that his illness had made his mind more rigid and reverting to very fixed concepts.

The nature of their discussion demonstrated the extent to which emotional patterns of behaviour and socially constructed norms centred on masculinity and ill-health could influence leading policymakers at this time. Consequently, this episode provides an entry point for considering an area of U.S. foreign policy history that has hitherto remained underexamined. For while an increasing number of scholars have begun to factor cultural forms of power and representation into their assessments of the post-war era, there has been far less work on the way that emotions and, within that field, perceptions of illness and disease, intersected with dominant tropes of masculinity and influenced the course of diplomacy.⁶

To be sure, the path-breaking work of Frank Costigliola is a powerful corrective to this. In his study of the Grand Alliance in World War Two, Costigliola demonstrates the way that complex emotional patterns of behaviour, often shaped through social interactions and influenced by shared confidences and illnesses, affected both the making and the breaking of the U.S.-British-Soviet relationship. Here, as Costigliola demonstrates, the interplay between emotions and illness was a key factor in shaping diplomatic relations and the outcomes of that era were, as a result, highly uncertain. But these patterns underwent a significant shift following the onset of the Cold War, when U.S. officials in particular felt pressurised to

adhere to widely held norms of masculinity lest they be seen as weak and ineffectual.⁸ Indeed, the emergence of these tropes had a profound impact on U.S. policymakers' views of the world. As Christian Appy has highlighted, 'Aggressive masculinity shaped American Cold War policy...deep-seated ideas about gender and sexuality cannot be dismissed as mere talk. They have explanatory value.'9

Government officials and politicians thus felt under great pressure to be seen as rough, tough, masculine figures ideally suited to waging the Cold War with any deviation from this seen as posing a threat to the American national security state. 10 Along with leftist political groups and homosexuals, both of whom were subject to government crackdowns in the 1940s and 1950s, perceptions of ill health could serve to disrupt these narratives of masculine rigour due to the language that typified mid-century American political discourse and the way that ill-health was viewed. 11 Illness and the way it is perceived, in social constructionist terms, can be 'shaped by cultural and social systems' that, in channelling Foucalt's argument that a keen awareness of human normality and abnormality is of significant importance in denoting power in modern society, can result in a diagnosis of illness being freighted with significant political meaning. 12 Though this phenomenon was in no way limited to the Cold War, it was given extra significance at this time due to the abiding belief that any signs of weakness, or frailty, were a boon for the Soviets. 13 More broadly, as research in medical science has demonstrated, there is a correlation between ill-health in men over the age of sixty—as both Dulles and Eisenhower were in the 1950s—and the way it influences their subsequent behaviour and perception of their own masculinity.¹⁴

By furthering the historiography on masculinity, gender and emotions during the Cold War to consider the issue of illness, therefore, this article highlights the ways in which perceptions of infirmity influenced foreign relations during the 1950s. It does so by focusing primarily on Dulles, a figure who confronted the impacts of illness in a broad range of ways

during his time as Eisenhower's secretary of state—from his appraisals of the ill-health being suffered by American allies during the first two years of his tenure, to his engagement with the consequences of Eisenhower falling ill in the years that followed, to the way that he began to reappraise his own position and policies after being stricken with the cancer that would eventually kill him in 1959. The influence of these issues typically stemmed from domestic political pressures and the fear that U.S. officials held that if they were seen as being weak their enemies—both at home and abroad—would be emboldened. Traditional geopolitical factors, of course, were undoubtedly to the fore in shaping U.S. decisions in this period. But while a great deal of work has been produced charting the way those elements influenced U.S. policy, far too little has been done on considering the way that emotions and perceptions of illness further contextualised these processes.

After briefly examining the relationship between the Cold War, gender, emotions, and perceptions of illness, and highlighting their impact on Dulles and Eisenhower, the article identifies the way that U.S. perceptions of the ill-health among British and French leaders during the Indochina crisis of 1954 shaped the Eisenhower administration's determination to reject a diplomatic solution. The article subsequently examines the way that these processes changed when Eisenhower and Dulles themselves began to suffer from serious illness. The emergence of ill-health among the administration's two leading figures coincided with widespread fears in the U.S. about the nation's capacity to adequately respond to shifts in Soviet policy and to counter the alleged existence of a missile gap. Correlations were drawn between the sense that American power seemed to be in decline and the fact that its two leading political figures were suffering from serious illness, a situation that was believed to benefit the Soviets and which emboldened the Democrats eager to run for the White House in 1960.¹⁷

Thus the article demonstrates the importance for historians in considering more fully the way that gendered patterns of behaviour could influence the course of international politics. Certain presidencies, of course, have seen more of an emphasis on ill-health given its centrality to events during their administrations. This is particularly true of Woodrow Wilson and Franklin Roosevelt, both of whom saw illness and infirmity bedevil their attempts to foster post-war peace, and John Kennedy, whose time as president was affected by chronic ill-health. The nascent Cold War, however, gave these issues a greater salience in everyday political discourse. Perceptions of gender and illness mattered in an age of international tension, where the health and standing of the nation-state could be influenced by 'bodily characteristics' that were 'heavily freighted with values and meanings.' Weakness in the bodies of political leaders was seen as a 'synecdoche' for weakness in the body politic of the nation more broadly. These pathologies, as this examination of Dulles and his role in U.S. diplomacy in the 1950s demonstrates, played an under-examined role in shaping the way that American officials understood the world in which they were acting.

Disease, Masculinity and the Cold War

Anxieties about America's future—and, in particular, the capacity of American men to meet the challenges confronting the nation—were irrevocably altered by the dual shocks of the nation's use of nuclear weapons in Japan and the uncovering of the horrors of the Holocaust.²⁰ One of the most prominent attempts to resolve the challenges that the wartime era had thrown up was Arthur Schlesinger Jr's book, *The Vital Center*. It is a work that, as K.A. Cuordileone has demonstrated, is highly gendered, resting its hopes for the post-war era on 'a secure and restored American masculinity.'²¹ When seeking to demonstrate the potential perils that Soviet Communism posed to the U.S., Schlesinger made reference to the

body, to health, and to ideas regarding infection and injury. Free society in the twentieth century, Schlesinger argued, 'had been on the defensive, demoralized by the infection of anxiety, staggering under the body blows of fascism and Communism....the death pallor will indeed come over free society, unless it can recharge the deepest source of its moral energy.'²² Illness was seen as a flaw, liable to provoke blame and disgust, and physical fitness was seen as a vital indicator of American success.²³

The idea of alien ideologies infecting the healthy body politic of nations gained significant force during World War Two. In Nazi Germany, Judaism and Germany's Jewish population were repeatedly referred to as 'bacili,' 'bacteria', and 'vermin' posing a threat to the nation's racial purity. ²⁴ In the United States, by contrast, the good health of the nation—as typified by abundant food and growing economic performance—was seen as protection against 'infections' like Communism. As Emily Rosenberg has illustrated in her assessment of Life's photo essay 'The American Look,' which showcased American women who were presented as being the embodiment of good health, the characteristics of these vibrant, attractive and healthy women was marked out as something that was 'constructed by environment and performance' and was, thus, replicable elsewhere. Stockpiles of food at the end of the war persuaded the U.S. that it was possible to export American resources and alleviate the shortages that were evident in other combatant nations. ²⁵ These views suggested that, if Communism was a disease, there was an effective antidote: to eradicate its breeding grounds. For Schlesinger, indeed, the entire Cold War could be seen as having two intrinsic elements—one of containment, which was to prevent Soviet expansionism, and one of 'reconstruction: that is, the removal in non-Communist states of the conditions of want and insecurity which invite the spread of Communism., 26

As the Cold War started to take shape, therefore, a powerful view had taken hold in the United States that equated rigorous masculinity and good health with emerging perceptions of national security.²⁷ These views were driven by an inherent sense of 'insecurity'—the idea that, by the late 1940s, the U.S. was vulnerable despite its extraordinary military and economic power and that Communism, with is power to 'infect' the nation, posed a mortal danger—that sat alongside the confidence that came from being the world's strongest power and that saw U.S. policymakers adopt 'a germ, or viral, theory of ideas and behaviour.'²⁸ Combating this required leaders that were trenchant, brave, and vigorous in order to prevent any perception of weakness providing succour to those who sought to undermine the U.S.

Here, again, the argument was drawing on lessons from the war, particularly the link that emerged between perceptions of masculine strength and the health of the nation. Widely held images of American troops, typically portraying them as muscled warriors and archetypes of American manhood, were highly prominent throughout the war and, in turn, became the embodiment of what seemed to characterise U.S. success. Moreover, it was accompanied by an attendant sensibility that a serious injury was 'more deeply emasculating than in earlier wars' because it hindered a person's capacity to perform their role. In a new era of international tension this would evolve into a fear about what infirmity, illness, and difference denoted in an age where U.S. security was believed to be imperilled.²⁹ This went hand-in-hand with the view that a nation's susceptibility to illness and disease, and an inability to combat it, came to be seen—in the development-driven argot of the time—as a sign of inherent backwardness.³⁰

The emergence of McCarthyism after February 1950, of course, and its intersection with the security concerns thrown up by the outbreak of the Korean War, hardened these trends and helped to shape an environment in which leading U.S. policymakers felt compelled to act and behave in certain ways. Senator Joseph McCarthy's campaign against alleged communists in the upper echelons of the American political system—a movement

backed both by likeminded Republicans eager to try and undermine the Democratic Party's long run of political success and southern Dixiecrats who saw McCarthy's views on the Cold War as an effective way of undermining growing support for Civil Rights—prompted a crackdown against anybody perceived to be acting in a manner that might be considered un-American.³¹ Furthermore, McCarthy's rhetorical blasts often contained insinuating remarks that impugned the masculinity of his targets. This was particularly true of his allegations against secretary of state, Dean Acheson, who McCarthy labelled as a 'pompous diplomat in striped pants' who 'endorsed communism.' It was an attack that, as Acheson noted in a private letter to a friend, was bitingly personal. 'I have tried not to let the present barrage of charges and innuendoes go below the surface,' Acheson wrote.³² The broader reaction to this reshaping of the American political landscape, as explained by Andrea Friedman, was for Cold War liberals to establish 'their anti-Communist credentials by embracing a rhetoric of masculine virility.'³³ To speak and to act tough was to protect oneself from McCarthyist jibes about effeminacy and being portrayed as a threat to the nation's security.

Dulles, like most of his contemporaries, accepted the importance attached to public statements and performances of masculine strength as a key component in seeking to be taken seriously as an elite U.S. policymaker. A formidable and imposing physical presence, and someone who throughout his life revelled in the privations of a log cabin on Duck Island in Lake Ontario that was stripped of all modern conveniences, there was something of the frontiersman to Dulles despite his role as a very well remunerated Wall St lawyer for much of his pre-secretary of state career. In 1948, while assisting Thomas Dewey's failed bid for the presidency, a pre-election feature in *Life* magazine, written by James Reston, offered a warm appraisal of the man deemed likely to take over as secretary of state and, in doing so, highlighted his masculine virtues. Dulles, Reston wrote, 'is well read. He has a sense of history, and is good at the vanishing art of simple speech and definition.' When interrogated

by willing interlocutors, Reston continued, Dulles would respond 'as if he had just been asked the most brilliant question of the evening. There is never much danger that his reply will give you hysterics, but what he says is almost always to the point: clear, intelligent, and usually interesting.' Accompanying the article were a series of photographs of Dulles at work and leisure. One of these was particularly eye-catching. Dulles is shown, away from the office, in casual trousers, no tie, and with his shirt sleeves rolled up, heartily cleaving a log in two with an axe. 'Chopping wood,' the caption notes, 'provides [a] healthy form of exercise for the prospective secretary. Here he lays lustily into a log at home near Cold Spring Harbor, N.Y.'

Though defeat in the election was a bitter blow, Dulles took from it the lesson that it was vital to be seen as someone who could prosecute U.S. foreign policy in a rigorous manner.35 A year later, while running for the Senate, Dulles adopted a tough-minded and unyielding persona. Following a clash with his opponent, Herbert Lehman, who had labelled Dulles a 'bigot', Dulles challenged him to a public confrontation. When the offer was refused Dulles responded by impugning his masculinity. 'Even in private life one who insults another is expected either to meet him face-to-face or to withdraw the charges,' Dulles wrote to Lehman. 'I demand that you be man enough to meet me openly or apologize.' He adopted a similar line when talking publicly about international affairs. In an interview with the radio programme, Capital Cloakroom, Dulles argued that an improved position was now evident in Europe because 'our policies over the last 18 months or two years have toughened up greatly the fibre of Western Europe.' He also argued that Moscow had not made greater overtures to Germany because they were 'too afraid' of relaxing their stringent political controls and highlighted what he believed to be a 'great weakness' in the Soviet system.³⁷ Similarly, in an appearance on Meet the Press, conducted as the campaign neared its conclusion, Dulles was asked whether 'Joe Stalin is afraid of you?' Naturally, Dulles replied: 'it's perfectly apparent

in everything that they have said and done for the last four years that they consider that I am the most formidable single opponent that they have.'38

Though neither campaign brought electoral success, Dulles continued to cultivate his reputation as powerful cold warrior. In his 1950 book, *War or Peace*, Dulles set forth his view that, in order to defeat the Soviets' attempts for world domination, you had to be toughminded. Power, he wrote, 'is the key to success in dealing with the Soviet leadership.' Soviet leaders, he went on, not only possessed greater power themselves; they also recognised—and respected—it in others. But, he concluded, 'they have only contempt for pleading that stems from weakness or fear.'³⁹

In 1952, when he was asked by Dwight Eisenhower to craft his campaign's foreign policy platform, he again adopted a tough-minded approach and sought to portray the Democrats' policy as one characterised by weakness and fear. 'It is time that we took command of events instead of running hither and thither,' Dulles told an audience in Hartford, Connecticut early in the campaign. 40 He gave these sentiments a fuller airing in an essay published in Life. A Republican foreign policy, Dulles argued, would be muscular, coherent, and driven; it would reject the craven failings of the policy pursued by Harry Truman and his advisors. That debates about isolationism were still evident in America, Dulles wrote, was a direct consequence of an approach that 'minimizes our assets pathetically and exaggerates those of Soviet Communism ludicrously. It assumes we are lacking strength.'41 Chief among his targets on this front was Truman's secretary of state, Dean Acheson, a figure who for some was considered too urbane and sophisticated to be a vigorous opponent of Soviet communism and who Dulles alleged had been 'exuding fear.' While he did not quite go as far as Joseph McCarthy in his allegations against Acheson, Dulles nevertheless imitated elements of the Wisconsin senator's insidious approach in order to besmirch his opponent in the eyes of the electorate. While Acheson 'rhapsodizes', Dulles argued in a press release two months before the election, 'realistic terrorists are ruthlessly stamping out love of God, love of country and the sense of personal dignity among 800,000,000 people and fashioning them into an unthinking, unbelieving obedient mass animated only by fanatic hatred of the United States.' It was a stance that, while tinged with hyperbole, nevertheless sat neatly alongside Dulles's focus on muscular Christianity as a key element in the waging of the Cold War and played successfully with an electorate increasingly attuned to responding emotively to such imagery. 43

These positions were most clearly apparent in the Republican Party Platform, which lambasted the Truman administration in highly emotional terms for its corrupt, ineffectual and damaging policies that had 'so undermined the foundations of our Republic as to threaten its existence.' Worse, the Truman administration had squandered the position of strength the U.S. had been in at the end of World War Two, pursued the 'appeasement of Communism at home and abroad,' and 'abandoned' millions of people in Eastern Europe to Soviet tyranny. 'They swing erratically from timid appeasement to reckless bluster,' it continued. Republican policy, by contrast, would be characterised by 'courage, self-respect, steadfastness, vision, purpose, competence and spiritual faith.' Four days after the platform was announced, Eisenhower adopted a similar tone in accepting the party's nomination. His aims were to 'sweep from office an administration which has fastened on every one of us the wastefulness, the arrogance and corruption in high places, the heavy burdens and anxieties which are the bitter fruit of a party too long in power.'

By the time he became Eisenhower's secretary of state, then, Dulles had accepted the gendered norms of the Cold War and was acting emotionally in his engagement with them. For him, toughness and masculine vigour were vital traits in an effective Cold War policymaker; any visible deviation from this denoted weakness and insecurity. In the administration's dealings with their British and French allies in their first two years in office,

these traits, especially in the case of the crisis over Dien Bien Phu in 1954, would play a significant role in shaping U.S. policy.

Dulles, Britain and France, and the role of Masculinity and Illness in the Dien Bien Phu Crisis

For all the bluster on the campaign trail, the Eisenhower administration did not pursue aggressive confrontations with the Soviets. ⁴⁵ Nevertheless, in attempting to match-up to their stated standards of toughness, Eisenhower and Dulles would often adopt bellicose positions in the belief that this would help them to achieve their goals. Furthermore, there was a keen sense, at least during Eisenhower's first term, that brinksmanship worked. Quelling Soviet adventurism in Europe, ending the war in Korea, compelling China to back-down in the dispute over Quemoy and Matsu that erupted in 1954—all were achieved, the administration believed, as a consequence of its stated willingness to adopt tough positions. ⁴⁶

This had two consequences. First, it further conditioned them to see bold, masculine positions as being vital in successfully prosecuting the Cold War; and second, it prompted frustrated and emotional responses toward Allies who were deemed to be less robust. An example of this can be seen in a memorandum Dulles sent to the president-elect before he met with Syngman Rhee, the leader of South Korea, in late 1952. Rhee, wrote Dulles, is 'old and feeble. He is highly nervous and moves from fits of great despondency to elation.' As such, he advised, it was his opinion that 'political matters be discussed as little as possible.' Indeed, the South Korean should be coddled and treated condescendingly—with flattery, firmness and reassurance the diplomatic tactics deemed likely to yield the best results.⁴⁷

But it was with respect to Washington's main European allies that these sentiments were most recurrent. During an early discussion over reforming basic national security policy in May 1953, for example, Dulles made the case that American leadership was vital in facing up to the threat posed by the Soviets because Europe's leaders were 'shattered old men' who could not be relied upon to provide much in the way of support. 48 It was a sensibility that was embedded in Dulles's view of the international situation. He had remained disdainful of British resolve since a trip there during the war when, upon his return, he penned a memorandum in which he noted that British reluctance to be proactive about the need for a sustainable post-war peace stemmed largely from a 'public psychology which seems predominantly defensive of the status quo and which does not adequately appreciate the fundamental changes which the war is working.'49 His concerns hardened after the war when the Labour Party entered office and launched the welfare state. For Dulles, this suggested the loss of fortitude, resolve and adventurism. The emergence of the welfare state, he argued, was 'discouraging' the sort of boldness that had driven previous ages of greatness. 'Will inventions and venture come adequately,' he asked, 'from a society where there is no hard necessity because everyone is provided for on a survival basis?⁵⁰

Eisenhower shared Dulles's concerns about the fortitude of Washington's ally. In 1951 Winston Churchill had returned to Downing Street as the Conservatives swept back to power. But, for Eisenhower, there was growing concern that the British leader was past his best. 'Churchill is as charming and as interesting as ever,' Eisenhower wrote in his diary shortly before his inauguration, but he was 'quite definitely showing the effects of the passing years...I wish that he would turn over leadership of the British Conservative party to younger men.' Within months the severe health problems being suffered by Churchill and his foreign secretary, Anthony Eden, would harden these concerns.

Eden's health had been declining for a number of years but, in the spring of 1953, what should have been a routine cholecystectomy to solve problems related to jaundice and gall stones, resulted in a major biliary tract injury that almost proved fatal.⁵² As a result, Eden was unable to work for much of 1953 and was replaced, in the short-term, by Churchill who said he would serve as his own Foreign Minister.⁵³ In June, however, on the same day that Eden was undergoing another major operation in Boston, Churchill was stricken by a severe stroke. In the months that followed, with an out of touch Lord Salisbury filling in at the Foreign Office, British foreign policy badly lacked focus and direction.⁵⁴

Churchill's health had begun to recover by July and he wrote to Eisenhower and informed him that 'I had a sudden stroke which as it developed completely paralysed my left side and affected my speech.' He had suffered a similar attack, he confided, in 1949: 'as I was out of office I kept this secret and have managed to work through two General Elections and a lot of other business since. I am therefore not without hope of pursuing my theme a little longer but it will be a few weeks before any opinion can be formed.' Two weeks later, Churchill informed Eisenhower that he was making 'a great deal of progress' and could 'now walk about,' but that his doctors did not think he would be well enough to appear in public until September. Winthrop Aldrich, the U.S. Ambassador in London, met with Churchill in September. According to Aldrich's subsequent report, Churchill strove to convey the image of a leader on the cusp of recuperation. 'He only repeated himself once,' Aldrich reported. 'When I left he walked all the way from the Cabinet room and waved goodbye to me on the doorstep. His walking is very much improved and his general condition appeared better than I expected.'

Unsurprisingly, these events hardened U.S. doubts about Britain's capacity to be an effective Cold War ally. This was particularly true at the Bermuda Conference in December 1953, where Churchill appeared frail, weak and unable to hear much due to his rapidly

worsening hearing, and Eden was still visibly recuperating from the effects of his illness.⁵⁸ Allusions to British weakness thus increasingly began to seep into policy discussions and reports, and the language used to describe British policies was often emotive and peppered with phrases such as weakness and references to them being afraid. A macabre example of this can be seen in Dulles's appraisal of Churchill's sudden decision to back the European Defense Community (EDC) in 1954 after years of opposition. 'The old man seems at long last to be putting his heart into EDC,' Dulles wrote to Eisenhower. 'I hope it is not too late.'⁵⁹

U.S. appraisals of French leaders were little better. France had struggled to come to terms with the upheavals wrought by the war, and a period of widespread political instability had taken root at the same time as attempts to re-establish and maintain the French empire. 60 In Southeast Asia, aided by British collusion, they had succeeded in regaining control of Indochina (present day Vietnam, Laos and Cambodia); but the situation had soon turned sour and war had been raging with Vietnamese nationalists since 1946.⁶¹ After 1945, the French were increasingly seen by the U.S. as an insecure and unhelpful ally, too ready to cede ground and not wholly committed to the fight against Soviet Communism. As Frank Costigliola has argued, Americans 'diagnosed French anxieties and neutralist leanings as symptoms of illness, cowardice, or a lack of manliness.'62 Linkages thus began to be drawn between the French inability to stem the nationalist uprising in Indochina and the view that France was a sick nation. In September 1953, for example, during discussions with Pierre Mendes-France (a leading French politician who would, later, become president), this exact point had been raised. The situation in Indochina, Dulles told Mendes-France, was of 'deep interest' to the U.S. and it was highly important that there was 'a successful outcome.' Dulles emphasised the 'impossibility of negotiating from weakness' and spoke of the 'necessity of building a situation of strength.' Mendes-France's reply, while agreeable, seemed to confirm U.S. perceptions. The difficulties of France in Indochina, he explained, were 'primarily

mental,' which 'perhaps makes the situation worse as those are the illnesses most difficult to cure.' The aforementioned Bermuda Conference offered further evidence on this front. Not only were Churchill and Eden suffering; their French counterparts were also ailing badly. French president Joseph Laniel was confined to his room for most of the conference with a fever; his Foreign Minister, Georges Bidault, was feeling the burdens of his task, drinking too much, and even fell asleep during a social occasion. 64

These concerns coalesced in the spring of 1954 when the battle of Dien Bien Phu quickly began to go badly and French leaders appealed to Washington for some form of military assistance. The subsequent discussions and strategic considerations—whether the U.S. should intervene with troops or, more likely, air power; whether Eisenhower and/or Dulles were committed to using some kind of force; whether at some point they offered French officials a tactical nuclear weapon—have been poured over by numerous scholars. And while there remains much disagreement—particularly over the key issue of whether or not U.S. leaders truly wanted to intervene—there is a broad consensus that the administration determined that it wanted to take a strong stance and that, in order to do so, it wanted support from Congress and Britain.

Eisenhower and Dulles believed it was vital that the U.S. be seen to be standing firm against what was being portrayed as rampant Communist aggression. In a press conference on April 7, at which Eisenhower set out the oft-cited domino theory, the president responded to a question from a reporter by stressing the importance of the U.S. being stout-hearted. He had urged the nation to 'realize that we are 160 million of the most productive and the most intelligent people on earth', he explained, and had asked them 'why are we going around being too scared?' Congress, however, soon made it clear that they would only offer their support for threatened military action if Britain and France were in agreement. Consequently,

Dulles was dispatched across the Atlantic in an attempt to broker a deal that would see Washington, London and Paris agree on a way forward in Indochina.

Any hopes that Dulles had of reaching a swift agreement with the British were soon dispelled once he met with Eden. Surely it was better, Eden argued, to pursue a diplomatic track and broker a binding peace deal even if it seemed to come from a position of weakness. With Eden unwilling to budge, and Dulles growing increasingly frustrated, an impasse was soon reached. Tellingly, as Dulles fed back to Washington he peppered his reports with descriptions of Churchill's health and more emotional phrases that suggested the British were frightened. In one report, following two frustrating days of talks, Dulles began by noting:

The Prime Minister's physical condition seemed to have deteriorated. He enunciated about as usual, and at the end of the evening, walked down two flights of stairs with me to the door where we were photographed together. He seemed, however, mentally less robust and more pliable and more dependent upon guidance from Eden.⁶⁹

The following day, in what was an otherwise positive report, Dulles noted that the British 'are extremely fearful of becoming involved with ground forces in Indochina.'⁷⁰

By the time he arrived in Paris a few days later, Dulles was beginning to see the mental and physical failings of Washington's allies at every turn. In an effort to persuade Georges Bidault of the need to adopt a strong stance, he told the French foreign minister that it was now vital that the French government 'demonstrate its capacity to act' as 'there was no weakness greater than indecision.' Bidault, he reported back to Eisenhower, 'gives the impression of a man close to the breaking point... it has been painful to watch him presiding over the Council at this afternoon's long session. He is obviously exhausted and is confused

and rambling in his talk.'⁷² Eisenhower told his chief diplomat that he wanted to make sure that British and French leaders appreciated the 'gravity of the situation' and that they would not be able 'merely to shut their eyes and later plead blindness as an alibi for failing to propose a positive program.'⁷³ Dulles subsequently captured the mounting sense of gloom that he had perceived in Paris with a further report to Eisenhower. 'Dien Bien Phu has become a symbol in the mind of the French people,' Dulles reported, and it had become 'a tremendously emotional thing.'⁷⁴

A sense of how this was affecting Dulles's appraisals can be seen in a note that he penned to Bidault on April 24. The situation, Dulles wrote, evoked 'a determination to combine ever more closely and more vigorously with our trusted allies':

We believe that it is the nature of our nations to react vigorously to temporary setbacks and to surmount them. That can be done in relation to the present situation if our nations and people have the resolution and the will. We believe that you can count upon us, and we hope that we can count upon you.⁷⁵

A day later, from Geneva now, where leaders from all the main nations had gathered for an international conference to settle on peace deals in Korea and Indochina, Dulles reported that Eden had come out against the idea of intervention. Warning Eden that, absent a bold 'declaration of common intent' to stiffen French resolve, their position in Indochina was liable to collapse, Dulles noted his view that British leaders were providing so little in the 'way of comfort to the French that the prospect' of Paris 'standing firm here was now very slight.' Later, after further talks with Bidault and Eden, Dulles wrote that the French position was 'rather confused' and that the British position was characterised by 'fear' over the prospect of intervention. 'I intend to see Eden alone tomorrow morning,' Dulles

continued, 'to talk with extreme bluntness to him expressing my dismay that British are apparently encouraging French in direction [of] surrender.'⁷⁷

Dulles's annoyance with British and French leaders was escalating. The United States was prepared to stand firm and not deal with the Communists; Britain and France seemed to be scared and unwilling to act. On April 29 Dulles reported that the 'UK attitude is one of increasing weakness' and suggestions that nuclear weapons might be a viable option had 'badly frightened them.' In a general summary, Dulles ranged more broadly. 'The decline of France, the great weakness of Italy, and the considerable weakness in England,' Dulles wrote, 'create a situation where I think that if we ourselves are clear what must be done, we must be prepared to take the leadership in what we think is the right course.' This did not mean he was advocating war, Dulles clarified, but it did mean that it was incumbent upon the U.S. to determine the way forward.⁷⁸ During a conversation with Eden the following day Dulles raged at his British counterpart. At an international meeting of such importance, he said, 'we were presenting a pathetic spectacle of drifting without any agreed policy or purpose.' If cooperation over Korea and Indochina was not possible, the U.S. would be compelled to 'consider who there was upon whom we could depend.'⁷⁹

These recurring sentiments—constantly impugning the masculinity of British and French leaders; remarks about the physical and mental sufferings prevalent among officials in both nations—shaped U.S. attempts to conceptualise the debates over Indochina. The gendered norms of the Cold War, and U.S. perceptions of what was required in order to avoid accusations of weakness, fostered a determination not to settle for a peace deal that, in American eyes, was tantamount to appeasement. ⁸⁰ Consequently, they continually came back to the point that it was necessary to bolster British and French leaders and compel them to adopt a tougher stance. This could be seen in an NSC briefing memo, produced on the day

after Dien Bien Phu had finally fallen, which asked if it was possible for the U.S. to 'stiffen their [Britain and France] spines by any conceivable means.'81

By the time that the Geneva Conference came to discuss peace in Indochina, therefore, the Eisenhower administration was fundamentally opposed to any negotiated peace. It was a stance that blinded U.S. officials to the strengths in Eden's position, who had come to see, albeit belatedly, that a negotiated peace was the only way to avoid an expanded and ruinous war. Indeed, Eden's view was that American machinations and the lack of clarity over whether they were serious about the possibility of using force had actually weakened French resolve. When a peace deal was eventually agreed in July, the U.S. delegation—there only in an observational capacity—refused to sign it. This, as Eisenhower reminded the press, meant that the U.S. was not bound by the treaty and would respond to any 'renewal' of 'Communist aggression.' Even here, Dulles rather fancifully sought to suggest that the fact that U.S. involvement had been required to break a pre-agreement impasse was an assertion of American strength. He told the National Security Council on July 15 that:

He wished to emphasize that from the psychological standpoint our decision to return [to Geneva] had been a grave blow to the Communists. The fact that the entire Geneva Conference had ground to a standstill when Mendes-France left for Paris to talk to an American Secretary of State, and that Chou En-lai and Molotov had cooled their heels during this interval, had punctured the Communist prestige which had been built up so high at Geneva. All this indicated that when it really comes down to something important, the United States is the key nation. This had been a matter of great chagrin to the Communists.⁸⁴

It was a hollow point and elided the fact that gendered and emotional patterns of behaviour, and the explanatory context of British and French leaders' ill-health, had helped to condition U.S. officials to adopt an unworkable stance over the crisis. For Dulles, the key point had always been that the U.S.—and, ideally, its allies—needed to be seen to be willing to stand firm against Communist expansion in Asia. As he explained to an aide a few years afterwards 'the important thing was that we kept the pressure on the Communists...if they had thought we would do less than we were prepared to do, they might have pushed for more, or all of Vietnam. That would have really been dangerous.' Eden's focus on diplomacy, then, was antithetical to the pervading cultural norms in the U.S. and, as such, was explained through reference to perceptions of British and European weakness. It was a point encapsulated later in an oral history interview by State Department official, Theodore Achilles. 'Mr Eden had not been well,' he told the interviewer, 'and I think we all had a feeling that he had almost a dilettante approach to the thing. He did not seem to be taking things particularly seriously. I think we all, on the Delegation [at Geneva], had somewhat that feeling.'86

Eisenhower's Heart Attack and the Battle for Hearts and Minds

The trenchancy of the administration's position over Indochina had resulted in a confused policy; the desire to be seen to be acting from a position of strength had fatally undermined a realistic chance of brokering a sustainable peace in Southeast Asia. If this episode demonstrated the way that masculinity, emotions, and perceptions of illness could lead to a more aggressive stance, however, the situation changed dramatically in 1955 when first Eisenhower, and then Dulles, were themselves struck down with serious illness. Suddenly, U.S. officials began to worry about America's role in the world and fretted over whether signs of illness among their leading figures were emboldening a new group of Soviet leaders who had come to power following Josef Stalin's death in 1953.

In September 1955, the president had been stricken by a moderate heart attack, which left him recuperating in Denver for several months. Remarkably, his illness was greeted with great sanguinity at home despite the fact that he was out of the White House for a prolonged period. He was pictured on his birthday in a wheelchair at the hospital; his shirt had been embroidered with the words 'much better thanks'; and, as a recent biography notes, the president believed that things were 'running so smoothly in Washington' that he 'ruled out any return until he could walk into the White House without assistance.' Nevertheless, the attack did make him question whether or not he should stand for re-election. His mood was low, as is wont to be the case among those that have suffered heart problems, and he became obsessive about his health. Eventually, he did decide to stand and, despite further scares, went on to serve a full second term.⁸⁷

Yet fears abounded in Washington as to whether the president's health problems were undermining their international position. In particular, U.S. officials worried about how Soviet leaders would interpret Eisenhower's position. In an NSC meeting over policy toward the Middle East a week after Eisenhower's heart attack, Vice President Richard Nixon clarified the fear that had underpinned much of the discussion. 'If things go badly for the United States in this area,' he said, 'there will be many who say that our misfortunes result from a lack of leadership.'88 Efforts were thus made to ensure that it did not seem as if U.S. policy-making was in crisis. After a report in the *Washington Post* suggested that the Kremlin had determined it would 'go slow in dealing with the West' as a result of the president's illness, for example, Dulles responded by stating that Eisenhower's recuperation had 'not interfered with carrying out the Nation's foreign policy.'89 As the president's absence became more prolonged, however, the concerns increased. At a press conference in mid-October, Dulles mounted a stronger defence, one which belaboured the fact that the president's strength seemed to be returning and suggested he was overcompensating. Upon meeting with

Eisenhower for the second time since his heart attack, Dulles told the press, 'I found very distinct evidence of more vigor—more vigorous health. His mind was as vigorous as it could be last time, and again this time there was more evidence of physical robustness.'90

Notwithstanding these efforts, observers soon began to discern patterns between shifts in Soviet policy and Eisenhower's absence. Furthermore, the press began to suggest that illness in the administration was equating to less sure-footed leadership. Would the Soviets negotiate 'seriously' at a forthcoming summit in Geneva, the Washington Post's editorial staff asked, 'without the galvanizing influence of President Eisenhower?' More importantly, had the president's illness, coupled with the likelihood that he would not stand for re-election, prompted 'Soviet leaders to alter their plans?' Under such circumstances, the piece concluded, it was vital that the U.S. and its 'Western Allies give evidence that they are resilient in their own planning.'91 A more pugnacious Soviet policy—as evidenced by the failure of talks at Geneva and bolder moves by Moscow in the Third World—led to concerns that this had come in response to the president's health worries. 92 It was a point made directly by the journalist, Chalmers Roberts, who in reporting on the 1955 Geneva Conference wrote: 'A good many diplomats [in Geneva] felt that one reason Moscow was so abrupt' was 'due to Eisenhower's illness and resulting uncertainty over who will speak for America during the next presidential term.'93 Doubts about how Eisenhower's illness made Washington look, meanwhile, were factoring into the administration's thinking. Foster Dulles, for one, was torn between not spending too much time away from Washington and not altering his plans because Eisenhower had fallen ill. Richard Nixon agreed with Dulles's assessment that he should not be away for too long, but was also at pains to point to out that it would be 'bad' if Dulles was seen to be 'changing his plans because of the President's illness.'94

One outcome of this was a move by Dulles to forestall Soviet attempts to follow up the Geneva Summit with an official visit to the U.S. by persuading Eisenhower to reject the idea and by offering a public statement about the Cold War's ongoing importance. ⁹⁵ A larger consequence, however, was the fact that concerns prompted by Eisenhower's illness fed into wider alarm about Soviet attempts to expand their international influence, especially in the so-called Third World. By 1955 the administration had developed a wide-ranging policy of propaganda and public relations aimed at courting people across the world to side with the U.S. rather than the Soviets. ⁹⁶ When Moscow launched a corresponding attempt in the years after Stalin's death, the U.S. response was one of alarm. It was a stance, as Robert McMahon has argued, that was disproportionate. That it emerged at the same time as Eisenhower's ongoing recovery and broader concerns about what this meant for U.S. policy is highly significant. 'The sense of impending peril is likely to increase,' McMahon has argued, 'when a nation, like an individual, lacks confidence in its ability to fend off potential threats.' With the president recuperating and absent from the White House, and with real doubts surfacing about whether or not he would stand for a second term, the perceived shifts in Soviet policy prompted great concern as U.S. officials' confidence in their capacity to see off the challenge was correspondingly diminished.

There were fears, too, about whether the image of the U.S. president suffering from such a severe illness had impacted negatively on the way that governments and people in the West viewed American power. One such episode came prior to a planned trip to Washington by British officials in early 1956, which saw perceptions of the president's health playing a key part in broader considerations about the West's position in the Cold War. Eden, who had finally replaced Churchill as prime minister, was eager to bolster Britain's position in terms of international leadership. Accordingly, Eden wrote to Eisenhower and indicated his desire for an Anglo-American meeting. However, he closed with a caveat. I would not want to make any suggestion, Eden explained, that could put any strain upon your health.

U.S. officials were not unsympathetic to Eden's desire to try and boost Anglo-American relations; yet they were concerned that it would be difficult for any discussions to be too exacting as they were uncertain as to the president's fortitude. In light of his recent health problems, one advisor wrote to Dulles, 'it would be placing too great a burden on him to ask him to go into all the detailed and multiple facets of the various foreign policy problems.' This appraisal chimed with a briefing sent to Washington from the U.S. Embassy in London just ahead of Eden's visit in January 1956. Generally, the report explained, British views of the United States were good. Nevertheless, there were concerns among some areas of the general population as to the 'soundness and vigor' of Anglo-American 'responses to new international challenges.' Churchill's retirement was one explanation for this; another was concerns over Eisenhower's physical well-being. In the face of a new Soviet policy, some sections of British society were thus concerned about whether 'American and British leadership are coping adequately with the old enemy in a new guise.'

The period after Eisenhower's heart attack, then, led to considerable shifts in the way that U.S. policymakers viewed the international situation and made them more susceptible to fears about American power. At the same time, the administration began to reappraise its previous stance on nuclear weapons—moving away from the belligerence and brinksmanship of their first two years in office toward a more circumspect stance that looked to minimise risk. On a more minor level, it also prompted a shift in the way that Dulles perceived matters of ill-health and infirmity. Following Eisenhower's illness, for instance, his perception of the president began to change. Whereas previously Dulles had believed they saw most matters in a similar fashion, he was less sure about Eisenhower's actions in the period after his heart attack and saw his behaviour as increasingly 'unpredictable.' The reconsiderations prompted in the wake of the president's illness, however, were given a much

sharper edge in late 1956 when Dulles himself fell seriously ill and began to witness at first-hand the way that such misfortunes could affect the way in which he was perceived.

Cancer, Eisenhower's Stroke, and the Democrats' Challenge

On November 3, 1956, after a period of intense diplomatic activity, Dulles awoke with crippling stomach pains and uncontrollable shivers. His doctor was called and, after a brief and inconclusive consultation, it was decided that he should be admitted to hospital immediately. Unable to walk, and with the spiral staircase in his Georgetown home making any attempt to carry him to an ambulance on a stretcher impossible, Dulles instead bumped himself down the stairs on his rear, barking instructions to an aide about what work needed to be dealt with while he was incapacitated. Exploratory surgery was required to ascertain the nature of the problem: a cancerous growth that had burst through his large intestine. The cancer was removed, as was the damaged portion of his intestine, and an eager for information patient was told what the cause had been. 104

Attempts were immediately made to reassert Dulles's vitality. Eisenhower told the press that Dulles had 'devoted himself unselfishly to his complicated and strenuous duties—even, as it is now apparent, at the risk of his own health. He has given untiringly of himself to the cause of world peace based on justice.' Dulles might be ill, in other words, but only because he had committed so much of himself to the fight against Communism. Notwithstanding this effort by the administration to shape the narrative surrounding Dulles's illness, concerns were raised in the press as to whether his sufferings were a result of an unsustainable schedule. After noting that he was already sixty-eight, the *Washington Post* reported that 'for nearly four years he has been dashing around the world in his country's

service as though he were, let us say, two-thirds that age. Maybe he dashed too rapidly and too far. '106

The difference between these two interpretations was significant. The administration's line painted Dulles in heroic terms and suggested he had been laid low by the vigour with which he had pursued the anti-Communist crusade. The press angle, by contrast, was one that suggested an infirmity within the administration and that portrayed Dulles as being unable to endure the difficulties of waging the Cold War. Thus, the administration attached significant importance to reinforcing its position. In a press conference less than two weeks after Dulles fell ill, Eisenhower used the opportunity to reference UN Secretary General Dag Hammarskjold's efforts in pursuing peace in the Middle East and Eastern Europe as a way to restate his position on Dulles.

I should like to take just a moment to say what he [Hammarskjold] has been doing. The man's abilities have not only been proven, but a physical stamina that is almost remarkable, almost unique in the world, has also been demonstrated by a man who night after night has gone with 1 or 2 hours' sleep, working all day...In the same way, although Foster Dulles is in the hospital, every day he is thinking and working on these problems...I am happy to say, by the way, that he is so far as health is concerned coming along rapidly and, apparently, to the entire satisfaction of the doctors.¹⁰⁷

Eisenhower's points of reference were the emerging crisis in Hungary, where Soviet forces were quashing an anti-government uprising with brutal force, and the Middle East, where Egypt's seizure of the Suez Canal had kick-started a process that had culminated, in late October and early November, with Britain, France and Israel launching military action in order to retake the canal zone. Dulles's illness, indeed, incapacitated him right at the point

that the Suez Crisis was reaching its climax, as the U.S. was confronted with the decision of whether to back its European allies or whether to turn against them and support Arab nationalism. Though confined to hospital, Dulles nevertheless played a key role in determining that the U.S. would force Britain and France to withdraw from Egyptian territory. Eden, whom the crisis exacted a huge personal toll on, later cited Dulles's illness as being a major factor in the U.S. decision to turn against him. ¹⁰⁸ Though as much impetus for this came from others within the administration—not least deputy secretary of state Herbert Hoover Jr—Eden's views are given extra credence by a recollection in Dean Rusk's memoirs about a meeting he had with Dulles in the latter's hospital room in the spring of 1959. Rusk, who would later serve as John Kennedy's secretary of state, recounted how Dulles had spoken about things 'a dying man has on his mind' and explained that Dulles had told him, 'Dean, I would not have made certain decisions about Suez had I not been sick at the time.' 109 Frustratingly, Dulles did not go on—at least in Rusk's telling—to provide any thoughts on what, specifically, he would have done differently. Nevertheless, it does illustrate the fact that, from the moment he was struck down and rushed to hospital, Dulles's own views and the way that others perceived him began to shift.

In the press, doubts were raised as to whether Dulles would be able to continue to serve a full second term now that Eisenhower had been re-elected. One report in the *Washington Post* suggested that his carrying on 'seems pretty close to impossible for a man who has undergone an operation for cancer.' Marquis Childs, similarly, wrote that there was much anxiety about Dulles's condition 'since it is assumed that a man who has had a major operation for cancer at the age of 68 cannot carry on for long in the incredibly demanding job of Secretary of State.' 110

It was a question Dulles had asked himself. At the very least, he concluded, he could not carry on as he had before: flying around the world to diplomatic meetings and spending

so much time overseas. The indefatigable strength and vigour that had been his hallmarks seemed to be waning and this, in turn, began to affect his capacity to achieve his goals. A week before he was rushed to hospital, in fact, Dulles confided in the president, telling him that he was inclined to continue 'as long as I felt physically up to it' but that changes would have to be implemented. 'I said I did not think I could go on at the pace I had been going and that it would be necessary for me to have as Under Secretary someone that would be more or less understood to be prepared to take over and who with that prestige would be able to lighten my load.'111 This was not the only time that Dulles mentioned the prospect of retirement. In September 1957, he told Eisenhower that he was keen not to 'let matters drift' and to reach a decision about how long he should serve sooner rather than later. 112 The following year, when the symptoms of his returning cancer were starting to present, he spoke more forcibly about retirement to Richard Nixon. In a highly confidential meeting in November 1958, Dulles confided that 'it might be better' if he stood down and let 'a younger man' take over 'who could have two years in which to make good.' Within weeks of this meeting he would begin to experience severe stomach pains and rapidly lose weight. 'If a situation developed where I felt that my health did not enable me to do a good job,' Dulles continued presciently, 'I would of course quit.' 113

Dulles would not, ultimately, leave his post quite that readily. But these examples demonstrate the way that his diminished health began to influence his views of his own strength and fortitude. Illness made him more fatalistic, less certain, and more likely to acknowledge frailty. Given how central his trenchant statements on the importance of strong, masculine policies had been in previous years this was quite a shift. Now, for the first time, Dulles seemed to doubt both his longevity and his capacity to achieve his aims. The wider political context in the United States at this time, furthermore, only served to heighten these concerns. For someone who had so visibly railed against the infirmities of British and French

leaders in 1954, and who had impugned the manhood of Democratic leaders in 1952, it was quite a transformation.

A sharp illustration of how his illness would come to affect the way that others viewed him can be seen in the Congressional debates that took place in early 1957 over a proposed change in the administration's policy toward the Middle East. Amid concerns that Suez had created a vacuum that the Soviets might seek to fill, the Eisenhower administration launched a new policy for the region that would enable them to play a more active role. What later became labelled as the Eisenhower Doctrine was a wide-ranging commitment to protect the area's security through the infusion of \$200 million in economic and military assistance and a pledge to commit U.S. troops to aid any country in the region that requested assistance against international communism.¹¹⁴ Getting this through Congress, however, was far from straightforward and, in early 1957, Dulles led an attempt to get the necessary legislation passed. That Congress would play hardball over this was hardly surprising. But what was different was the way that their opposition to Dulles prompted both the secretary and those close to him to respond. Dulles was hardly unused to being disliked and serving as the focus of criticism from the administration's opponents; but, at this point, the criticisms seemed to have more consequence. Dulles felt exposed and, furthermore, was being perceived as such by colleagues and the press.

Among the plan's opponents on Capitol Hill, Democrat senators Hubert Humphrey and J. William Fulbright were perhaps the most forceful. In their statements on this matter it is not difficult to discern signs that they now perceived Dulles as being vulnerable. Not only did Humphrey note that Dulles's 'usefulness may be nearing an end'; it was also telling that he chose to use numerous medical terms in making his case. 'Dr. Dulles,' he stated, 'has not diagnosed the situation or prescribed correctly for it...Mr. Dulles may well be a casualty of the cold war, just as Mr Eden was.' Fulbright, while using fewer medical metaphors, was

no less vituperative. Dulles, he charged, had pursued policies that 'have been harmful to our interests' and intended to 'weaken the influence of the Free World in the Middle East.' The impact, on both sides of the political divide, was to portray Dulles as weak and thus liable to enact weak policies. It was a stance that was taken up by the conservative magazine, the *National Review*, who in their assessment of Dulles's role also utilised language inflected with barbed medical meaning. Dulles, a highly critical column argued, did not 'know what he is doing'—he was 'fighting for his life'; if he lost this battle with Congress he would be 'through' and should 'step down now.' 117

Eisenhower sought to offer his support by reaffirming his abiding faith in Dulles and meeting with Congressional leaders to give him his backing. 118 Despite the president's show of support, in private those close to Dulles were speaking in highly sympathetic terms about his ordeal. Clare Booth Luce, a U.S. Ambassador and wife of Time editor Henry, called Dulles and advised him 'to keep your chin up' because 'all of this is so exaggerated.' 119 There were also signs of sympathy. His sister, Eleanor, wrote to a close friend in early 1957—Cecil Lyon, the U.S. Ambassador in Chile—and noted that the secretary had been having a rough time, had suffered a 'gruelling week' and was thoroughly 'tired', though she believed he would prove able to 'take another week or so if that is to be.' 'How wonderfully the Secretary has borne up under it,' Lyon responded. 'He is splendid, but why should he have to be?¹²⁰ Administration spokespeople, concerned at the implications of Dulles's struggle, sought to convey the message that all was well and, most importantly, that Eisenhower's government retained sufficient vigour to effectively prosecute the Cold War. In among the fevered Congressional debates, indeed, one of the president's aides spoke before a regional Republican organisation and pointedly noted that Eisenhower's recent actions left 'no "doubt as to his physical ability".' 121

Fears that ill-health among the administration's most visible figures might undermine the U.S. position in the Cold War were heightened in the autumn of 1957 when, for the first time, doubts about America's technological supremacy came to the fore. The catalyst for this shift was the successful Soviet launch of Sputnik—the first satellite put into orbit around the Earth—which prompted a hail of criticism about why U.S. policymakers had allowed this to happen. In Congress, allegations about a missile gap began to surface and calls were made for a dramatic expansion of defence spending as a result of the fact that the U.S. was now believed to be highly vulnerable to a Soviet first strike. Though Eisenhower and Dulles knew that the missile gap was an illusion and were never likely to sanction massive increases in defence spending, they also recognised that it was a troubling image that provided their opponents with a powerful line of attack.

An added complication on this front was the president's continuing ill-health. After his heart attack in 1955, Eisenhower had endured a severe case of ileitis in 1956 and, in November 1957, suffered a stroke. As Richard Nixon later wrote, the view within the administration was that 'this was the worst time possible, short of outright war, for the President to be incapacitated.' The successful launch of Sputnik just a month previously, Nixon explained, meant that 'the whole structure of America's military might and scientific technology was under suspicion here and throughout the world.' At the same time, the wider public response was one of deep concern. 'The public,' Nixon wrote, 'seemed to say: okay, he may get well, but will he ever be the same again? I received hundreds of letters evoking the mythology of the dark ages on insanity, mental aberrations, and the like.' Some sections of the press, meanwhile, responded by calling on Eisenhower to resign and referencing the fact that, if he survived, he would 'be past seventy' and the oldest president in the nation's history by the end of his second term. Eisenhower's response was to tackle his duties with renewed vigour, well aware that any sign of impaired performance would damage

his credibility. 'Extremely sensitive to any suggestion that he was not able to do the job,' Nixon wrote, 'the President brushed aside any expressions of sympathy and struggled to avoid giving any impression of weakness or disability.' 127

These issues raised fears about American strength to significant new levels. The United States, leading Democrats and high-profile commentators began to argue, appeared to be in the midst of a serious decline. Worse, this went far deeper than a possible shortfall in ballistic missiles. America, these commentators worried, was losing its will and its capacity to fight against the Soviets. In his nationally syndicated column, Walter Lippmann argued that the nation's inability to respond effectively to Sputnik and the missile gap—as evidenced by months of indecision by the administration and the absence of any clear alternative from the Democrats—was due to a general unwillingness to take tough decisions. 'What the experts call a missile lag,' Lippmann wrote on August 21 1958, 'is essentially a weakness in American education and a lack of seriousness in American national purpose, when there is a choice between private pleasures and the public interest.' This, Lippmann argued, required a change in attitude. 'We are in competition with a new society which is in deadly earnest,' he wrote, 'and there is no use pretending that amidst our comforts and our pleasures we are serious enough.' 129

It was a theme that was attracting an increasing amount of interest among prominent Democrats who were starting to position themselves for a run at the White House in 1960. Chief among the latter was the young Massachusetts Senator, John F. Kennedy, and the self-styled action intellectuals who advised him. From 1957 onwards, Kennedy and those close to him cultivated the idea that America was going soft—that it lacked vigour, courage, braveness, and the willingness to endure hardships in order to pursue foreign policy success. It proved a powerful image. Wider cultural norms, specifically the idea that the U.S. was increasingly in thrall to 'momism' and was being emasculated by its fixation on consumerism

and the easy life, also fed into this process. The broad popularity of the novel *The Ugly American*, which rather crudely contrasted the effete embassy-bound overseas diplomats who had grown too comfortable with the rough, tough frontiersmen out in the field who were prepared to sacrifice everything to get the job done, helped this image to feed into the wider public consciousness.¹³¹

But if these lines of attack had credence because they fed into archetypal views about what American manhood should look like, they had a wider salience because the charges being made seemed to chime with the image of a president and secretary of state who were stricken with ill-health. In a speech in Atlantic City in September 1958, Kennedy charged Eisenhower and Dulles with overseeing a period of neglect. 'Drift and indecision,' he charged, 'are incapable of meeting the problem of change—and the world has changed in the last six years.' Kennedy's conclusion was to paint the Eisenhower administration as lacking in manly resolve. 'I will tell you who is selling America short,' Kennedy stated: 'it is the little men with little vision who say we cannot afford to build the world's greatest defense against aggression—it is those who say we cannot afford to bolster the free world against the ravages of hunger and disease and disorder upon which Communism feeds.'

Accordingly, the administration was under pressure to respond lest allegations of the missile gap, drift and indecision, as well as the persistent image of illness among high-level officials, combined to undermine their credibility. A chastening set of results in the mid-term elections in November 1958 compelled the president to reflect on the fact that, just maybe, his party was seen as being old and tired. In a lengthy reflection on the elections and summaries of conversations with Nixon and Republican strategists over how to respond to the Democrats' gains in Congress, Eisenhower twice referred to the need for an influx of young talent into the Republican Party. A grassroots organization should be formed, he wrote, which 'should emphasise youth, vigor, and progress' so that local parties would be

filled with 'the finest young leaders we can find.' Similarly, attractive and youthful candidates must be found to stand for office and these should be 'young and vigorous and intelligent.' Though he did not state it explicitly, the implication was clear: Eisenhower feared that, in the wake of the rise of Democrats like Kennedy and his and Dulles's illnesses, his own party looked tired and old.

Eisenhower also came to suspect that he and Dulles no longer fully saw eye to eye when it came to the Soviets. Dulles, Eisenhower confided in his diary in January 1958, approached the problem of the Soviets as a lawyer would—'he consistently adheres to a very logical explanation' of the 'difficulties in which we find ourselves with the Soviets.' This was all well and good, Eisenhower continued, and it was only right that the U.S. should 'have a concern and respect for fact and reiteration of official position', but at the same time, 'we are likewise trying to "seek friends and influence people". '134 On this front, moreover, Eisenhower was not entirely wrong: he and Dulles were starting to adopt different tacks when it came to the matter of geopolitics. Whereas Eisenhower in the wake of his stroke had become more tough-minded and likely to adopt robust positions on matters of national security, Dulles was increasingly taking a more moderate line. This was not uniformly true, by any means, as the account of his meeting with Harold Macmillan in 1959 makes clear. But there was an emerging pattern that backed-up Eisenhower's suspicions. Following the diagnosis of his cancer in 1956, indeed, Dulles proved more willing to pursue policies that were characterised by compromise and agreement rather than dogmatic adherence to a position of toughness. In contrast to his stance over Indochina in 1954, for example, his arguments with respect to the Middle East were markedly less belligerent. Whereas in Indochina he had advocated taking a combative position in order to prove the nation's willingness to stand firm, his approach in the Middle East advocated the sort of compromise he had ruled out in Southeast Asia. Any talk of a 'showdown' with the Soviets, Dulles

advised in December 1956, was a non-starter: 'we must rely on the basic soundness of our position and the growth of internal difficulties within the Soviet orbit.' 135

In late 1958, Dulles again began to suffer from illness. His doctors initially diagnosed a hernia and an abdominal inflammation, but the pain eventually compelled him to seek further tests in hospital early the following year. Dulles was again diagnosed with cancer—this time more serious and likely to prove fatal. As the once physically imposing Dulles began to suffer from dramatic weight loss and became gaunt and haggard, it impacted on his mood and the way he was perceived. In her account of his final year, his sister pointed to the fact that illness had taken its toll on Dulles's moods and behaviour.

There is reason to think that he tried at this time to reconcile his knowledge that the discomfort experienced in the last two months of that year [1958] might have grave meaning, with his inherent optimism of temperament and confidence in his physical strength. To one or two close friends he talked about the possibility that either persistent pain or a recurrence of cancer might lead to a blurring of his judgement, a state of mind that would render the execution of his job difficult. There is no doubt that his mood and even his condition changed from time to time from the end of October on. 137

Once he was compelled to seek hospital treatment in early 1959, observers began to judge him by referencing his illness. After he scurried from a six-day stay in the Walter Reed Hospital to a conference in Paris, the *New York Times* opined that even those that disagreed with Dulles on matters of policy would 'agree in admiration of the energy and courage which make a man more than 70 years in age get up from a hospital bed and tear off on one of the most difficult diplomatic errands in all our history.' 138 Drew Pearson, in a report on Dulles's efforts in Paris, described how the other delegates were 'talking to a sick but courageous

man.' Though the reports typically made reference to his courage in seeking to fight against his illness, they were also clearly using his diminished health as a yardstick by which to measure his effectiveness.

For some, news of Dulles's illnesses prompted reflections on what his loss might mean for the West's prospects in the Cold War. In a telling assessment, at odds with the criticism that had often shaped its appraisals of his policies, the *National Review* noted:

For six years Mr. Dulles has been the strict schoolmaster, the tough sergeant, the Catonian censor of the West. It is he who has said the 'noes' to the seductions and to the assaults of the enemy. The pupils, recruits or soft-living citizens have, as they always do, railed at the disciplinarian who has rapped their fingers digging into the fleshpots. But in our hearts we have all really known how lucky we are that Mr. Dulles has been on hand to check the tempter. Mr. Dulles has thus symbolized what remains of the West's spirit of resistance, its will to survive. This is why, moreover, his present physical collapse becomes so weighty a factor in the scale of the crisis. ¹⁴⁰

It was a view echoed, albeit in a rather different manner, by Harold Macmillan. Dulles, the British Prime Minister announced in Parliament, 'is a figure whose very bigness is hardly realised until we are threatened with its absence' and who had been a 'great, important and vital figure in the life of the world.' Senator Mike Mansfield, another who had often clashed with Dulles, made a similar point. Being secretary of state, Mansfield said in the Senate, was a tough job: 'the intellectual demands of the job are enormous...the physical demands are appalling.' Given this, he continued, Dulles's 'stamina and durability' had been remarkable. Still, he noted, 'there is a physical limit' and Dulles's commitment to the job at hand had 'taken its toll of his health.'

Not everyone agreed of course. George Kennan, who remained furious with Dulles for his treatment of him in 1953, wrote in his diary that he struggled 'to avoid a certain bitterness' that was provoked in him 'by Mr. Dulles latter day acceptance in Western opinion as a statesman of titanic dimensions. I cannot help but compare with my own powerlessness and relative obscurity the eulogies now heaped on this dying man.' Kennan had been roused to anger by the insinuation that Dulles's illness was robbing the United States of its most stout-hearted diplomat at a time of great need. Writing in an opinion piece he ultimately decided (perhaps wisely) not to publish, Kennan argued that managing the nation's foreign affairs had to be taken more seriously. 'The least the United States can do in a moment of this sort,' he wrote, 'is to see that the conduct of its foreign relations is entrusted to a man who can give full time and vigor to the performance of this tremendous office.' It was, in truth, merely a much more sour version of the sort of opinion that had increasingly been characterising Democrats' jeremiads against the Eisenhower administration since 1955.

Yet as well as shaping perceptions, Dulles's illness was also having an impact on policy. One particular example of this was the mounting crisis over Berlin, which had been prompted in 1958 by Nikita Khrushchev's ultimatum that the western powers sign a peace treaty with the East German government and recognise their legitimacy. Dulles's stance on this was less bellicose than that of the president: whereas Eisenhower was sabre rattling and threatening the use of nuclear weapons and conventional forces, his secretary of state advocated a less pugnacious policy. At the height of these tensions, in early 1959, Dulles spoke with West German Chancellor, Konrad Adenauer, about his health in a car ride to the airport following a visit to Bonn. In all likelihood, Dulles told Adenauer, he would have to be 'looked over by the doctors' on his return and might, perhaps, have to undergo an operation for a suspected hernia. This, he stressed, was top-secret; not even the president knew. But, Dulles continued, he was telling the West German chancellor because if he did have to have

an operation 'the press would play it up as a major affair and perhaps suggest that it was a recurrence of my malignancy.' When Dulles's allusions proved to be correct, he ordered a telegram to be sent to Adenauer as soon as he had come round from his sedation explaining what had happened, lest the chancellor think that the secretary had not been candid with him. Such actions suggest a man worried about his emotional ties to Adenauer, about the need for candour among allies, and also, a man eager to ensure that his illness did not get in the way of one of the most pressing foreign policy problems facing the United States. ¹⁴⁶ On that front, Dulles told Eisenhower after he returned from Germany that Washington's allies would believe Dulles to be the only person that could resolve the dispute over Berlin and, as such, it 'would be most important that they not get the impression that the Secretary's illness would remove his influence from the scene.' If they did, he suggested, then they might prove too willing to settle for an unfavourable agreement. ¹⁴⁷ His rapidly declining health was not solely driving these shifts, of course, but it did provide an important part of the context in which his decisions were being made.

The end for Dulles, once the severity of his returned cancer was confirmed, was evidently not far away. But, even then, Eisenhower proved unwilling to readily accept his resignation. However, this bore the sign of stubbornness and a refusal to contemplate the future rather than support for an ailing colleague. It was to no avail. Dulles eventually had to resign and, on May 24 1959, passed away.

David Lawrence, the Conservative journalist, wrote a week after Dulles's death that the former secretary of state 'was brave in life and braver still as, with a full awareness of his fate, he approached the brink of death.' It was an appraisal that would have pleased Dulles

greatly; he had long felt certain that being prepared to fight under the most trying of circumstances was a vital part of any policymaker's make-up. In the first eight years of the Cold War, in fact, he had increasingly come to portray himself as the sort of masculine figure ideally suited to prosecuting a global struggle against Soviet Communism. He and Eisenhower had used this imagery relentlessly during the 1952 presidential campaign and had taken office on the back of a powerful commitment to inaugurating a more muscular and tough-minded foreign policy that carried with it significant emotional appeal. A more muscular rhetoric suffused the New Look foreign policy and characterised the 'more bang for the buck' styling of the administration's massive retaliation policy.

In Southeast Asia in 1954, these traits combined with an abiding antipathy toward British and French leaders—exemplified, in the minds of U.S. officials, by the persistent ill health being suffered by leaders in Paris and London—to push the administration toward a damaging position. Rather than engage with British proposals for a negotiated solution to the crisis in Indochina—a proposal that, with the benefit of hindsight, has come to look like an increasingly opportune way for the U.S. to have extricated itself from the region a decade before it committed to a ruinous land war in Asia—Eisenhower and Dulles sought to stiffen British and French resolve and derail the diplomatic process. Their belief that Britain and France were pathologically weak helped persuade them that a diplomatic solution was tantamount to surrender and appeasement.

The highly transient nature of such emotional tropes became apparent soon after when Eisenhower and Dulles were stricken by serious illness. This altered the way that the administration perceived the relationship between illness and international affairs. Beholden to the idea that any reverse for the U.S. was a gain for the Soviets, and wholly accepting of the belief that the image of American weakness could have profound consequences for the West's position in the Cold War, the administration sought to ensure that its leading figures

appeared to be as robust as they had ever been. Wide-ranging public relations attempts were undertaken in order to convey the sense of this being business as usual. But in the face of a significant shift in Soviet policy, which saw Moscow seeking to expand its influence in the global south, U.S. officials began to doubt their capacity to succeed. Furthermore, this went hand-in-hand with a retrenchment in U.S. national security policy, with the muscular rhetoric of massive retaliation abandoned for something that saw nuclear policy used as an instrument of containment rather than belligerence. The diagnosis of Dulles's cancer compounded the situation. In the weeks and months that followed, Democrat charges of the administration's weakness grew ever louder. When Eisenhower suffered a stroke in 1957, and the Soviets successfully launched Sputnik, the eruption of debates about a missile gap and American credibility were entwined with the broader context of serious ill health among U.S. leaders.

Tellingly, it was at this supposed point of weakness that Dulles began to adopt more prudent policy positions; he even began to reconsider his approach toward the Soviet Union and mused on the benefits of cooperation with Moscow. Moreover, it was a point that was picked up on in an editorial in *The Nation*—a publication that had been sharply critical of Dulles throughout his time at the State Department. Though noting that, in the past, it had been 'more critical than commendatory', the editorial went on to state that it was important to 'note the fact, neglected by most of the press, that as the Secretary's health deteriorated, his diplomacy improved. This, moreover, helps us to understand a surprising eulogy from Nikita Khrushchev. The Soviets had often opposed him, the Soviet leader announced, 'but there had been an essential difference between his policy at the end of his term of office and that which he had pursued at the beginning.' During recent talks, Khrushchev continued, it seemed as if Dulles was 'giving up the struggle against Communism in countries of Eastern Europe' and as if he was displaying 'a more sober understanding of [the] prevailing international situation.' Had Dulles lived to see out his second term of secretary of state, in

fact, it is possible that he might have pursued greater cooperation with Soviet leaders. He hadn't tempered his dislike of the Soviet model, but he did now recognise the limitations of a policy that was so infused with aggressive rhetoric. And though there were undoubtedly clear strategic and economic imperatives effecting these decisions, the emotional consequences that had developed in response to perceptions about the finite lifetime of the human body were also exerting an important influence.

By the time of Dulles's death, the Democrats, and John Kennedy in particular, had come to see the allegations of weakness against the Republicans as a highly effective weapon. Firmly persuaded by the broader cultural narratives about the decline of American manhood and the need for U.S. policymakers and foreign policy actors to be tougher and more open to sacrifice, Kennedy's campaign for the presidency was steeped in the language of masculinity and vigorous action. 153 Like Eisenhower and Dulles in the early 1950s it would be a position made by courting emotional responses and by making thinly veiled allusions to the relationship between good health, fitness, and the strength of the nation. When accepting the Democratic nomination in July 1960, indeed, Kennedy said that he embraced the nomination by stressing his willingness 'to devote every effort of body, mind and spirit to lead our Party back to victory and our Nation back to greatness.' 'After eight years of drugged and fitful sleep,' he continued, 'this nation needs strong, creative Democratic leadership in the White House.' The old ways would not do and a new generation of 'young men who can cast off the old slogans and delusions and suspicions' were needed to make America great again. The only 'valid test of leadership,' he proclaimed, 'is the ability to lead, and lead vigorously. 154

This position, of course, was largely a fiction. Kennedy himself suffered from chronic ill health and was one of the least healthy presidents ever to occupy the Oval Office. As Robert Dallek has argued in thoroughly charting Kennedy's health problems, '[Kennedy]

worried that disclosure of his repeated hospitalizations in the 1950s and his reliance on steroids to combat the debilitating effects of Addison's disease and on antispasmodic painkillers, testosterone, antibiotics, and sleeping pills to help him cope with collateral problems would almost certainly block him from becoming president. ¹⁵⁵ In this belief he was surely right. But the image was what mattered. Kennedy and the advisors he surrounded himself with conveyed the impression that they would oversee a new far more dynamic era in U.S. foreign relations. They came to office convinced that they had the opportunity to put U.S. foreign policy on a new footing. This can be seen in the administration's ready embrace of Modernization Theory as a blueprint for galvanising and overseeing global development and, moreover, in Kennedy's enthusiasm for the Green Berets who, he believed, could successfully prosecute a counter-insurgency operation in Southeast Asia. They, like the Peace Corps, were the epitome of what Kennedy and his advisors believed to be the very best Americans to pursue successful policies overseas. 156 The result was a policy that was too aggressive and too confident in certain areas and, more broadly, a presidency that was often marked by 'a profound ambivalence' and 'an uncertainty over which direction the United States should take.' Indeed, it was not until 1963, after the angst of the Cuban Missile Crisis, that Kennedy began to retreat from the bellicose positions that characterised his first two years in office and to try and take on the vested domestic interests that he believed were chiefly responsible for the continuance of the Cold War (and, even then, he continued to escalate the American commitment in Vietnam for fear that any kind of withdrawal would appear weak). 157

Focusing more closely on the way that perceptions of illness factored into U.S. thinking during this period, therefore, helps us to understand far more fully the profound impact that socially constructed perceptions of masculinity and emotions could have on American policymakers. Neither Eisenhower, Dulles or Kennedy felt that the way they

viewed their own health and that of others had overweening strategic importance; yet they were all susceptible to engrained emotional responses about what serious illness meant and were aware of the fact that physical failings could be used as an allegory for national decline in the competitive arena of the struggle against the Soviets. Their tendency to respond emotionally to perceived challenges to their masculinity, and to any sense that the "health" of the nation was imperilled, highlights the important ways in which culture can influence policy and the need for historians to think more expansively about the way that decisions were reached during times of high international tension.

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¹ David Reynolds, From World War to Cold War: Churchill, Roosevelt, and the International History of the 1940s (Oxford: Oxford University Press, 2006), 309-14; Matthew Jones, 'Anglo-American Relations after Suez, the Rise and Decline of the Working Group Experiment, and the French Challenge to NATO, 1957-1959,' Diplomacy and Statecraft, Volume 14, No 1 (March 2003), 49-79; Tore Tingvold Peterson, 'Anglo-American Rivalry in the Middle East,' International History Review, Volume 14, No 1 (February 1992), 71-91

² 'Mr Macmillan's Mission,' *Washington Post* (hereafter *WP*), March 19 1959, A22; Chalmers Roberts, 'Macmillan, Eisenhower Meet Today,' *WP*, March 20 1959, A1; 'Mr Prime Minister,' *New York Times* (hereafter *NYT*), March 19 1959, 32

⁶ The range of works on these issues is now huge. For broader surveys, which highlight recent trends in scholarship focusing on gender, masculinity, race and religion, see Thomas Zeiler, 'The Diplomatic History Bandwagon: A State of the Field,' *Journal of American History*, Volume 95, No 4 (March 2009), 1053-73; Erez Manela, 'The United States in the World,' in Eric Foner and Lisa McGirr (eds), *American History Now* (Philadelphia: Temple University Press, 2011), 201-21. Emotions, of course, have been a rich source of investigation for some historians, particularly for those seeking to establish the presence of 'emotional communities' or to highlight the way that shifting sensibilities can be seen as highlighting broader shifts in society. See: Barbara Rosenwein, 'Worrying about Emotions in History,' *American Historical Review*, Volume 107, No 3 (June 2002), 821-45; Jan Plamper, *The History of Emotions: An Introduction* (Oxford, UK: Oxford University Press, 2015); William Reddy, *The Navigation of Feeling: A Framework for the History of Emotions*

³ Barron Lerner, *When Illness goes Public: Celebrity Patients and How we Look at Medicine* (Baltimore: John Hopkins University Press, 2006), 97-9; 'Dulles Greets Press at Hospital before President and British Call,' *WP*, March 21 1959, A1

⁴ Memorandum of Conversation between Foster Dulles, Dwight Eisenhower and Harold Macmillan, March 20 1959, Box 7, White House Memoranda Series, John Foster Dulles Papers, Eisenhower Library, Abilene, Kansas (hereafter EL); Richard Immerman, *John Foster Dulles: Piety, Pragmatism, and Power in US Foreign Policy* (Wilmington, DE: Scholarly Resources Inc, 1999), 195

⁵ Diary Entry by Harold Macmillan, March 20 1959, in Peter Catterall (eds), *The Macmillan Diaries Volume II: Prime Minister and After 1957-1961* (London: Pan Books, 2011). Writing in his memoirs, Eisenhower took a different view of the meeting, praising Dulles's approach and noting that 'whatever treatment he had been given in the hospital had done nothing to dull his mind.' Dwight D. Eisenhower, *The White House Years: Waging Peace*, 1956-1961 (London: Heinemann, 1966), 353

(New York: Cambridge University Press, 2001); Jerome Kagan, What is Emotion? History, Measures, and Meaning (New Haven: Yale University Press, 2007); 'AHR Conversation: The Historical Study of Emotions,' American Historical Review, Volume 117, No 5 (December 2012), 1487-1531; Colin Jones, The Smile Revolution in Eighteenth Century Paris (Oxford, England: Oxford University Press, 2014); Erin Sullivan, Beyond Melancholy: Sadness and Selfhood in Renaissance England (Oxford, UK: Oxford University Press, 2016). Nicole Eustace, meanwhile, has highlighted the importance of emotions as a driver of political change. Nicole Eustace, 'Emotion and Political Change,' in Susan Matt and Peter Stearns (eds), Doing Emotions History (Urbana, Illinois: University of Illinois Press, 2014), 163-84; Sarah Knott, Sensibility and the American Revolution (Chapel Hill: University of North Carolina Press, 2009); Michael E. Woods, Emotional and Sectional Conflict in the Antebellum United States (New York: Cambridge University Press, 2014)

⁷ Frank Costigliola, *Roosevelt's Lost Alliances: How Personal Politics helped start the Cold War* (Princeton, New Jersey: Princeton University Press, 2012); idem, "Unceasing Pressure for Penetration": Gender, Pathology, and Emotion in George Kennan's Formation of the Cold War,' *Journal of American History*, Volume 83, No 4 (March 1997), 1309-39. For a further superb study, which highlights the importance of emotion in Henry Kissinger's statecraft, see Barbara Keys, 'Henry Kissinger: The Emotional Statesman,' *Diplomatic History*, Volume 35, No 4 (September 2011), 587-609

⁸ Robert Dean, *Imperial Brotherhood: Gender and the Making of Cold War Foreign Policy* (Amherst: University of Massachusetts Press, 2001), 6; see also, K.A. Cuordileone, *Manhood and American Political Culture in the Cold War* (New York: Routledge, 2005); idem, "Politics in an Age of Anxiety": Cold War Political Culture and the Crisis in American Masculinity, 1949-1960, *Journal of American History*, Volume 87, No 2 (September 2000), 515-45

⁹ Christian Appy, *American Reckoning: The Vietnam War and our National Identity* (New York: Viking, 2015), 78; Kristin Hoganson, 'What's Gender Got to Do with It? Gender History as Foreign Relations History,' in Michael Hogan and Thomas Paterson (eds), *Explaining the History of American Foreign Relations* Second Edition (New York: Cambridge University Press, 2004)

¹⁰ On the rise of the national security state see, among others, Andrew Preston, 'Monsters Everywhere: A Genealogy of National Security,' *Diplomatic History*, Volume 38, No 3 (June 2014), 497-8; Melvyn Leffler, *A Preponderance of Power: National Security, the Truman Administration, and the Cold War* (Palo Alto: Stanford University Press, 1992); Michael Hogan, *A Cross of Iron: Harry S. Truman and the Origins of the National Security State, 1945-1954* (New York: Cambridge University Press, 2000)

11 On the importance of language see, Frank Costigliola, 'Reading for Meaning: Theory, Language, and Metaphor,' in Hogan and Paterson (eds), *Explaining the History of American Foreign Relations...*, 279-303; on crackdowns against leftist political groups and homosexuals, Ira Katznelson, *Fear Itself: The New Deal and the Origins of Our Time* (New York: Liveright Publishing, 2013), 460-1; Ellen Shrecker, *Many are the Crimes: McCarthyism in Cold War America* (Boston, Massachusetts: Little, Brown & Company, 1998); Landon Storrs, *The Second Red Scare and the Unmaking of the New Deal Left* (Princeton, New Jersey: Princeton University Press, 2012); David Johnson, *The Lavender Scare: The Cold War Persecution of Gays and Lesbians in the Federal Government* (Chicago: University of Chicago Press, 2004); Andrea Friedman, 'The Smearing of Joe McCarthy: The Lavender Scare, Gossip, and Cold War Politics,' *American Quarterly*, Volume 57, No 4 (December 2005), 1105-29; Stacy Braukman, "Nothing Else Matters but Sex": Cold War Narratives of Deviance and the Search for Lesbian Teachers in Florida, 1959-1963,' *Feminist Studies*, Volume 27, No 3 (Autumn 2001), 553-75

¹² Peter Conrad and Kristin Barker, 'The Social Construction of Illness: Key Insights and Policy Implications,' *Journal of Health and Social Behavior* Volume 51, Special Issue (2010), S67-S79; Michel Foucalt, *Discipline and Punish: The Birth of the Prison* (New York: Vintage, 1977)

¹³ Kenneth Osgood, *Total Cold War: Eisenhower's Secret Propaganda Battle at Home and Abroad* (Lawrence, Kansas: University of Kansas Press, 2006); idem, 'Hearts and Minds: The Unconventional Cold War,' *Journal of Cold War Studies*, Volume 4, No 2 (Spring 2002), 85-107; K.A. Cuordileone, "Politics in an Age of Anxiety"...; Robert McMahon, 'Credibility and World Power: Exploring the Psychological Dimension in Postwar American Diplomacy," *Diplomatic History* Volume 15, No 4 (September 1991), 455-72

¹⁴ Cara Tannenbaum and Blye Frank, "Masculinity and Health in Late Life Men," *American Journal of Men's Health*, No 5, Volume 3 (2011), 243-54; J.P. Stansbury, M. Matthewson-Chapman, and K.E. Grant, "Gender Schema and Prostate Cancer: Veterans' Cultural Model of Masculinity," *Medical Anthropology*, Volume 22, No 2 (April-June 2003), 175-204

¹⁵ An important point here is the fact that, as we shall see, personal experiences of illness—and, thus, someone's response to it—can vary significantly from patient to patient, a fact which helps to explain the different ways that Eisenhower and Dulles responded to their own illnesses. Phil Brown, 'Naming and Framing: The Social Construction of Diagnosis and Illness,' *Journal of Health and Social Behavior*, Volume 35, Extra Issue: Forty Years of Medical Sociology (1995), 34-52

Alan Schwartz, "Henry,...Winning an Election Today is Terribly Important": Partisan Politics in the History of US Foreign Relations, *Diplomatic History*, Volume 33, No 2 (April 2009), 174-90; Fredrik Logevall, 'Politics and Foreign Relations,' *Journal of American History* Volume 95, No 4 (March 2009), 1074-8; Robert Dallek, *The American Style of Foreign Policy: Cultural Politics and Foreign Affairs* (New York: Knopf, 1983); Jussi Hahnimaki, 'Global Visions and Parochial Politics: The Persistent Dilemma of the 'American Century,' *Diplomatic History*, Volume 27, No 4 (September 2003), 423-47; Robert David Johnson, *Congress and the Cold War* (New York: Cambridge University Press, 2006); James Meriwether, "Worth a Whole Lot of Negro Votes": Black Voters, Africa, and the 1960 Presidential Election,' *Journal of American History*, Volume 95, No 3 (December 2008), 737-63; Andrew Johns, *Vietnam's Second Front: Domestic Politics, the Republican Party, and the War* (Lexington, KY: Kentucky University Press, 2008)

¹⁷ Here, again, there is a longer history whereby the health of a leader—or monarch—was seen as being analogous to the health of the nation. See, for example, the arguments made by Thomas Penn and Simon Schama about the England of Henry VII and pre-Revolutionary France in particular: Thomas Penn, *Winter King: The Dawn of Tudor England* (London: Allen Lane, 2011), 333-52; Simon Schama, *Citizens: A Chronicle of the French Revolution* (London: Penguin, 1989),171-87, but especially 177. A different approach, as typified by Jeanne Abrams, looks at the experiences that American revolutionary leaders and their families had with

health, illness and medicine. Jeanne Abrams, *Revolutionary Medicine: The Founding Fathers and Mothers in Sickness and in Health* (New York: New York University Press, 2013)

¹⁸ On FDR, David Reynolds, *Summits: Six Meetings that shaped the Twentieth Century* (London: Allen Lane, 2007), 96-207; Costgliola, *Roosevelt's Lost Alliances...*, 205-59; Sally Stein, 'The President's Two Bodies: Stagings and Restagings of FDR and the New Deal Body Politic,' *American Art* Volume 18, No 1 (Spring 2004), 32-57. On Kennedy, Robert Dallek, *John F. Kennedy: An Unfinished Life* (New York: Penguin Books, 2004). On Wilson, who is arguably the most notable case, Edwin Weinstein, *Woodrow Wilson: A Medical and Physiological Biography* (Princeton, NJ: Princeton University Press, 1981); see also, John Milton Cooper, *Breaking the Heart of the World: Woodrow Wilson and the Fight for the League of Nations* (New York: Cambridge University Press, 2001), 2-4; for a demurral from their arguments, Lloyd Ambrosius, 'Woodrow Wilson's Health and the Treaty Fight, 1919-1920,' *International History Review*, Volume 9, No 1 (February 1987), 73-84. Other studies have focused on ill-health among leaders of other nations, Amir Arsalan Afkhami, 'The Sick Men of Persia: The Importance of Illness as a Factor in the Interpretation of Modern Iranian Diplomatic History,' *Iranian Studies*, Volume 36, No 3 (September 2003), 339-52

¹⁹ Emily Rosenberg and Shannon Fitzpatrick, 'Introduction', in Emily Rosenberg and Shannon Fitzpatrick (eds), *Body and Nation: The Global Realm of U.S. Body Politics in the Twentieth Century* (Durham, North Carolina: Duke University Press, 2014), 2; Frank Costigliola, 'The Nuclear Family: Tropes of Gender and Pathology in the Western Alliance,' *Diplomatic History*, Volume 21, No 2 (Spring 1997), 164; in literary studies there has been some discussion of tropes of illness, infirmity and mental illness, particularly in relation to the nuclear era. Jacqueline Foertsch, 'Not Bombshells but Basketcases: Gendered Illness in Nuclear Texts,' *Studies in the Novel*, Volume 31, No 4 (Winter 1999), 471-88

²⁰ For an excellent account of this period and these events, Mark Grief, *The Age of the Crisis of Man: Thought and Fiction in America, 1933-1973* (Princeton, New Jersey: Princeton University Press, 2015), 27-101; Paul Boyer, *By the Bomb's Early Light: American Thought and Culture at the Dawn of the Atomic Age* (Chapel Hill, North Carolina: University of North Carolina Press, 1994)

²¹ Cuordileone, Manhood and American Political Culture in the Cold War..., 2

²² Arthur Schlesinger Jr, *The Vital Center: The Politics of Freedom* Revised Edition (London: Transaction Publishers, 1998), 243-6; Cuordileone, *Manhood and American Political Culture in the Cold War...*, 7.

²⁵ Emily Rosenberg, 'The American Look: The Nation in the Shape of a Woman,' in Rosenberg and Fitzpatrick (eds), *Body and Nation...*,189-208, esp 193-4, 206; Lizzie Collingham, *The Taste of War: World War Two and the Battle for Food* (London: Penguin, 2011), 11, 75-88, 460-1; Nick Cullather, 'The Foreign Policy of the Calorie,' *American Historical Review*, Volume 112, No 2 (April 2007), 362-4

²³ Rosenberg and Fitzpatrick (eds), *Body and Nation...*, 8; William Ian Miller, *The Anatomy of Disgust* (Cambridge, Massachusetts: Harvard University Press, 1997), 203. As Jerome Kagan has demonstrated, it is an entrenched American—and Western—trait to see factors that block or impede personal or national success, such as illness, in very emotional ways (fear, disgust, anger, sadness, etc). Kagan, *What is Emotion...*, 197

²⁴ Richard Evans, 'Written into History,' *London Review of Books* Volume 37, No 2 (January 2015), 17-19;Susan Sontag, *Illness as Metaphor* (London: Allen Lane, 1979), 82-4; Mark Mazower, *Dark Continent: Europe's Twentieth Century* (London: Penguin Books, 1999), 161-84

²⁶ The use of the word 'spread' here is instructive and redolent of the notion of disease spreading. Arthur Schlesinger, *The Vital Centre...*, 223; for an excellent discussion of the 'epidemiological model' of the Cold War and cultural depictions of masculinity, Heonik Kwon, *The Other Cold War* (New York: Columbia University Press, 2010), 72-6

²⁷ On masculinity, gender and health, Cuordileone, *Manhood and American Political Culture...*, xvii-xxii; Elaine Tyler May, *Homeward Bound: American Families in the Cold War Era* (New York: Basic Books, 1988); Robert Dean, 'Masculinity as Ideology: John F. Kennedy and the Domestic Politics of Foreign Policy,' *Diplomatic History*, Volume 22, No 1 (Winter 1998), 32-4

²⁸ H.W. Brands, 'The Age of Vulnerability: Eisenhower and the National Insecurity State,' *American Historical Review*, Volume 94, No 4 (October 1989), 963-89; for the quote, Geoffrey Smith, 'National Security and

Personal Isolation: Sex, Gender, and Disease in the Post-War United States,' *International History Review*,

Volume 14, No. 2 (May 1992), 310-11; Martin Halliwell, *Therapeutic Revolutions: Medicine, Psychiatry, and American Culture, 1945-1970* (New Brunswick: Rutgers University Press, 2013), 76-8. In a similar vein, fears about 'brainwashing'—the idea that the health of the nation could be corrupted through mental manipulation—became a recurrent trope in discussions about whether America was fit enough to defeat the Soviets. Matthew Dunne, *A Cold War State of Mind: Brainwashing and Postwar American Society* (Amherst, Massachusetts: University of Massachusetts Press, 2013)

²⁹ Robert Nye, 'Review Essay: Western Masculinities in War and Peace,' *American Historical Review*, Volume 112, No 2 (April 2007), 422-4; Christina S. Jarvis, *The Male Body at War: American Masculinity during World War II* (DeKalb, Ill.: Northern Illinois University Press, 2004)

Charles Leslie, 'Backing into the Future,' *Medical Anthropology Quarterly*, Volume 15, No 4 (December 2001), 430; Erez Manela, 'A Pox on your Narrative: Writing Disease Control into Cold War History,' *Diplomatic History*, Volume 34, No 2 (April 2010), 299-323; idem, 'Globalizing the Great Society: Lyndon Johnson and the Pursuit of Smallpox Eradication,' in Francis Gavin and Mark Atwood Lawrence (eds), *Beyond the Cold War: Lyndon Johnson and the New Global Challenges of the 1960s* (New York: Oxford University Press, 2014), 168-9; Marcos Cueto, *Cold War, Deadly Fevers: Malaria Eradication in Mexico, 1955-1975* (Baltimore: Johns Hopkins University Press, 2007); for a broader overview of development's role in the Cold War, David Ekbladh, *The Great American Mission: Modernization & the Construction of an American World Order* (Princeton, New Jersey: Princeton University Press, 2010)

³¹ Howard Brick and Christopher Phelps, *Radicals in America: The U.S. Left since the Second World War* (New York: Cambridge University Press, 2015), 52-5; Katznelson, *Fear Itself...*

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