

have been and continue to be implicated in a wide range of behaviours at odds with the values and codes of their profession, from deadly torture and forced sterilisation in South America, to abuse and neglect in the relatively sophisticated health service in Britain. One of the lessons that we should take away from this book is that this is a shared responsibility, and as much a structural product as a failure of collective and individual agency. Although the book's editors claim that the book is 'about the ethics of nursing and midwifery and how these were abrogated during the Nazi era', there is actually little acknowledgement of the myriad ethical issues that it raises, and no explicit ethical analysis. This works in its favour, however, because it allows the authors to concentrate on the case material around which such analysis should develop, and avoids entering the labyrinthine philosophical arguments such an analysis will entail.

This book not only brings together the existing body of knowledge about nursing and midwifery in the Nazi era, but significantly supersedes it by drawing on an impressive corpus of primary sources, including contemporaneous diaries and biographical material, hospital case notes and other records, and *post-facto* legal and official documents of every kind. The result provides a useful starting point for further research, and will perhaps kick-start the long overdue examination, albeit uncomfortable, of the part played by nurses and midwives in other European countries in the practical application of eugenic policies, including those working under Nazi occupation. More broadly, it will enlarge our understanding of the susceptibility of the human psyche to the deceptions of individual and organised power, regardless of where or when it arises, and can therefore be recommended not only to historians but also to philosophers, psychologists, social and political theorists, and those who assume health care leadership roles.

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Jonathan Reinartz and **Leonard Schwarz** (eds), *Medicine and the Workhouse* (Rochester, NY: University of Rochester Press, 2014), pp. 1–281, £60.00, hardback, ISBN: 978-1-58046-448-2.

This collection of essays is in two parts, the first dealing with workhouse medical care between 1700 and 1860 and the second covering workhouse medical provisions from 1834 to 1914. The foundation of this important book is a number of papers presented at a two-day conference in 2008. The collection begins with a detailed introduction by Jonathan Reinartz and Leonard Schwarz to the current historiography of workhouse medicine which stresses the need for further research on medical welfare since any 'historian of workhouses is confronted with many potential themes ... nearly as diverse and numerous as presented themselves to medical staff in these institutions in the past' (p. 1). The introduction is both clear and concise, leaving the reader eager to move on to the rest of the volume.

The first chapter by Kevin Siena is a detailed examination of contagion, exclusion and the medical role played by the eighteenth-century institutions. Siena uses his sources very well resulting in the conclusion that the metropolitan workhouse acted as a very different medical institution from the ever-sprouting voluntary hospitals greatly associated with the eighteenth century. The workhouse infirmary provided a service of care and treatment and 'came to the rescue of the destitute sick' (p. 18). However, this care was

not always guaranteed since many of the poor could be refused admission for different reasons. Susannah Ottaway's chapter then looks specifically at workhouse medicine and elderly poor people in eighteenth-century England. Ottaway admits early on, that it is no easy task to 'pinpoint old-age in society' (pp. 40, 41). In the eighteenth century there was a clear developing optimism towards preserving health during old age. Attitudes towards old age and good health in eighteenth-century England developed in a way that took off in Europe or America around that time and continued until the nineteenth century. Ottaway concludes that the workhouse (including workhouse medicine) introduced a new element which destabilised the relief culture which generations of elderly poor people had come to know.

The next chapter of the volume by Jeremy Boulton, Leonard Schwarz and Romola Davenport is also concerned with the eighteenth-century London workhouse, concentrating specifically on the large Westminster parish of St Martin-in-the-Fields. This contribution is yet another part of the authors' ongoing researches on the parish workhouse, mortality and demography in London's West End. This chapter unlike the others in the collection deals specifically with mortality and the workhouse. Here the authors apply highly quantitative methods, by providing detailed statistics on the changing levels of mortality in the workhouse as well as the parish generally. The age structure of St Martin's workhouse suggests that many inmates entered the workhouse when they were sick and dying, resulting in high mortality rates. Death from 'fevers' and the foul disease was over-represented amongst the workhouse population compared to outside the workhouse walls. Here, the authors also stress that the relatively high crude death rate indoors came about mainly 'by the admission of the elderly, the fragile, and those already seriously ill' (p. 79). This is a very important contribution to our knowledge of mortality and the medicalisation of an urban workhouse which adds further emphasis to the need for more research on this aspect of indoor relief.

Alannah Tomkins's chapter provides a very different, yet revealing account of workhouse medicine based on a much-neglected source; that is working-class autobiographies dating from 1750 until 1834. This chapter highlights the pauper narrative relating medicine and healthcare inside the workhouse. Tomkins stresses that using these narratives derived from autobiographies allows the historian to see the pauper experience of workhouse medicine, 'of participating in relief systems, expressing viewpoints that are not yielded from other genres' (p. 99). Tomkins's study makes clear pleas for further research using autobiographies which will no doubt tantalise interest in future research of this type. Leonard Smith moves from pauper narratives to the treatment of 'insane' people in nineteenth-century Midlands workhouses. Here Smith uses a mixture of both archival material and contemporary publications (especially the Commissioners in Lunacy reports). Smith emphasises that the parish workhouse and the Union workhouse (post 1834) were important refuges for the mentally ill, most of whom were probably considered 'idiots' or 'imbeciles'. Once a more specific diagnostic 'label' was given to an inmate they were transferred to a more specialist institution. Smith argues convincingly that in the second half of the nineteenth century contemporary expectations of 'cures' and mental recovery were disappearing. This in turn led to the nineteenth-century asylum becoming an overcrowded institution that enabled the workhouse to become a more integral institution for the treatment and retention of 'insane' people.

Virginia Crossman's chapter is the first to move to the New Poor Law and refreshingly deals with workhouse medicine in Ireland. Although, only a preliminary analysis (and one hopes for further research on the Irish workhouse), Crossman examines the many difficulties which surrounded improvements in workhouse medical care. Once the control

of workhouse medicine was made more local, these local authorities were able to borrow money and hire more professional medical personnel. However, these improvements were lost in the 'upheaval that followed the Easter Rising'. Crossman uses individual case studies examined in contemporary reports, which is insightful. Throughout this chapter she stresses that further research is needed urgently if historians are to fully understand the dynamic relationship between institutions, medical professionals, the public and the state.

Chapter seven by Jonathan Reinartz and Alistair Ritch explores the medical care and the workhouse in Birmingham. The authors stress throughout their piece that in comparison to other institutions, the workhouse infirmary has not received the attention it deserves from historians. While the workhouse in Birmingham played an important part in the 'medical landscape' of the city, it did not secure a permanent place for medical teaching in the nineteenth century. It was not until the twentieth century that the workhouse became a common environment for medical training. Reinartz and Ritch stress that the role played by the workhouse infirmary secured its secondary place in the history of British health care. Samantha Shave's chapter continues with workhouse medicine in the provinces by looking at the Bridgewater Union Scandal and Policy Change. Shave's principle interests and themes are addressed thoroughly, based mostly on contemporary personal and published accounts. This is an important and somewhat neglected aspect of medical history and she stresses that the study of welfare scandals provide one with an insight into issues such as maltreatment and neglect and allows the historian to view how 'cruel' the welfare system was in the nineteenth century. Angela Negrine's chapter turns attention to the Leicester Union workhouse between 1867 and 1905. Here, the 'status' of workhouse medical services is examined as well as the role performed by the workhouse infirmary which contextualises the 'functioning' of the workhouse medical system in the Leicester Union. She then directs attention to the medical officers. Issues related to treatment, childbirth, nursing and patients' attitudes are examined at much length.

The two final chapters in the collection stand out. The first by Rita Pemberton relating to workhouse medicine in the British Caribbean (1834–8) is a pioneering piece since little literature exists on this important aspect of welfare and medical history. Her chapter examines topics such as the development of penal institutions in this area, discusses aspects of the workhouse environment, medical provisions and the range of medical tasks performed by the medical staff. This chapter represents a significant move from the English workhouse as an institution for study and will no doubt spark interest in future research. The collection ends with a useful and insightful contribution by Steven King. This will be of essential importance to anyone interested in the medical and welfare history of the eighteenth- and nineteenth-century workhouse and the Poor Laws.

In sum, this superb collection of essays represents a significant contribution to welfare medical history, which has emerged in the past thirty years or so. By applying a number of different methodological approaches to both eighteenth- and nineteenth-century institutions the editors have brought together a collection which will be of interest to academic historians as well as wider audiences. One can also recommend the book to students since all of the chapters are clear and concise. The only minor criticism is the front cover which is referenced as *The Parish Vestry* by Thomas Rowlandson: this may need to be edited in future editions. This minor point, however, does not detract from what is a superb contribution to welfare and medical history in the eighteenth and nineteenth centuries.

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