

## Book Reviews

ANNE WITZ, *Professions and patriarchy*, London and New York, Routledge, 1992, pp. x, 233, £10.99 (paperback 0-415-07044-9).

Witz's book, based on her doctoral thesis, is primarily concerned to develop feminist and sociological theories of occupational development. But she does this through an analysis of the relationship between gender and the professionalization of medicine, midwifery, nursing and radiography in the late nineteenth and early twentieth centuries. So, although making few concessions to the non-sociologist in its terminology, the book may be of interest to historians interested in the development of the division of labour in health care since the nineteenth century.

Witz compares the "professional projects", that is the strategies to enhance labour market resources and opportunities adopted by members or would-be members of these four occupations. What is original about her thesis is not this neo-Weberian approach but her systematic attention to the significance of the gender of the agents engaging in such strategies. She draws attention to the ways in which gender-related factors are often implicitly embedded in social institutions and structures and to the ways in which women, at least in the nineteenth and early twentieth centuries, often had to work through men to achieve change in the public sphere.

One of her general arguments is that, in comparison with the male-dominated institutions of civil society such as hospitals and medical schools, "it was the nineteenth-century patriarchal state which provided the weaker link in the chain of patriarchal closure" (p.196). Thus, in her analysis of women's campaign to enter medicine in the 1860s and 1870s, she argues that it was only when the women abandoned their emphasis on getting qualifications in favour of pursuing enabling legislation that they achieved at least a formal victory. Pro-registrationist nurses and midwives succeeded in getting a legally defined register on the statute books. But such successes were always constrained by women's relative inability to influence the form of, or access to credentials in other institutions.

In her frustratingly brief case studies, Witz marshalls the details of what are, except for radiography, relatively well-known stories, in an often illuminating way. But, inevitably, many questions are left unexplored. Why, for example, given her stress on the state as a "weak link", does she not consider whether the 1858 Medical Act was the key to women's entry to medicine rather than the barrier that she suggests? As she herself admits in her preface, she underplays the ideological strategies and moral arguments which played a large part in these professional projects. The book is at times heavy going, but certainly should stimulate more research into female professional projects.

Mary Ann Elston, Royal Holloway and Bedford New College

BERNARD CASHMAN, *A proper house: Bedford Lunatic Asylum (1812-1860)*, Bedford, North Bedfordshire Health Authority (3 Kimbolton Road, Bedford MK40 2NU), 1992, pp. xii, 179, illus., £7.95 (+£1 p&p) (0-9513626-2-3).

Over the last twenty years debate has raged concerning the rise of the asylum in nineteenth-century England, following the 1808 Act (Wynn's Act) which empowered local authorities to establish madhouses at public expense. Did the wave of asylum foundation indicate a real increase in lunacy or at least a response to the crises created by industrialization? Did it represent a humanitarian impulse, or was it an expression of medical "imperialism"? Was there overwhelming pressure from families no longer able or willing to shoulder the responsibility of caring for troublesome relatives?

The Bedford Lunatic Asylum, opened in 1812, offers a particularly favourable opportunity for exploring these possibilities, since Bedfordshire was so quick off the mark after the passing of the Wynn Act (the county was beaten only by Nottingham [1811]). But why Bedfordshire? For, *prima facie*, there is something very peculiar in this alacrity. Bedfordshire was a tiny, rural county lacking great towns, heavy industry or labour mobility. Unlike Nottinghamshire with its factories and Luddism, it had no particularly acute social troubles or

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political unrest. Lunacy can hardly be said to have been perceived as a pressing problem: required by the 1806 Select Committee of the House of Commons to report lunatics in the county, the Bedfordshire magistrates made a “nil” return!

Bernard Cashman’s excellent history of the asylum (which was closed in 1860 to make way for a bigger one) offers a wholly convincing solution to this conundrum: the under-used energies of the local bigwig, Samuel Whitbread II (heir to the brewery fortune). A Whig politician, he failed ever to gain office and so directed his frustrated national reformist ambitions to local improvement. In short order, and chiefly through Whitbread’s exertions, Bedford acquired a new house of industry (1794), and a new prison (1801) and infirmary—to say nothing of the rebuilding of the town bridge (1811). The County Lunatic Asylum was a showpiece in a quasi-utilitarian scheme of rational Whig reform designed to shame the corrupt aristocracy while disciplining the poor. Doctors played little part in founding or shaping the institution. Nor was there, initially, much “demand” to fill the Asylum (and hence make its management economic); recalcitrant parochial overseers of the poor had to be bullied into parting with harmless local lunatics long looked after by family and friends. Mr Cashman’s study is thus welcome for the striking light it throws upon the deeply ambiguous role of the “reformer”; who knows what further enormities Whitbread’s suicide three years later spared the county.

In the forty-eight years of its existence, Bedford Asylum operated in a manner probably typical of small county institutions. It grew, became overcrowded, lurched predictably from administrative crisis to crisis, and (equally predictably) found its cure rates disappointingly low. Making admirable use of hospital and other local records, Mr Cashman discusses admissions policy, finances, therapeutic preferences, building extensions, and the occasional exposure of brutality to patients. Bedford Asylum never committed itself wholeheartedly to “non-restraint” or any other modish therapeutic system. No eminent psychiatric doctor was ever involved with it. It suffered no special scandals. It quickly became a routine institution.

The era when historians pronounced with assurance on asylum history on the basis of scanty knowledge of Bethlem and the York Retreat is over. We are now beginning to gain a grasp of ordinary institutions as well as the exceptions. Mr Cashman’s well-researched and clearly written history makes a valuable addition to this sounder grasp of the everyday institutionalization of the insane.

Roy Porter, Wellcome Institute

K. B. ROBERTS and J. D. W. TOMLINSON, *The fabric of the body: European traditions of anatomical illustration*, Oxford, Clarendon Press, 1992, pp. xx, 638, illus., £95.00 (019-261198-4).

The elaborately produced flyer for this book tells us that it is “lavishly illustrated” with “over 250 fascinating plates and figures” and that it is “beautifully produced with a handsome slip case”. So it ought to be at £95.00. We come well prepared to expect a splendid picture book which exploits the modern technology of reproduction to provide a visual feast of the kind that was impossible in 1852 when Ludwig Choulant published his classic *Geschichte und Bibliographie der anatomischen Abbildung*. . . Roberts and Tomlinson have not attempted to replace Choulant as a reference book but have produced an informative commentary on a fine visual panorama of anatomical illustrations from the Middle Ages to the present day.

I have begun by emphasizing the visual aspects of the production because the history of anatomical illustration cannot be adequately understood without a study of the history of the books *as books*—in terms of patronage, production, distribution, audience, technologies of reproduction, artistic style, division of labour between text and illustration, the relative responsibilities of anatomist, artist, printmaker and publisher, and so on. Roberts justly writes in his concluding chapter on “Some themes in this book”: “in retrospect we can see that the anatomical knowledge conveyed by illustrations becomes more refined, more precise and more accurate. This does not mean that representations shown in anatomy books are uninfluenced