

develop better openings and be more patient with those aspects of a text that even in our dualist world can, when not managed helpfully, make the reader feel bodily displeasure or ill-feeling.

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**Catharine Coleborne**, *Insanity, Identity and Empire: Immigrants and Institutional Confinement in Australia and New Zealand, 1873–1910* (Manchester: Manchester University Press, 2015), pp. xiv, 224, £70.00, hardback, ISBN: 978-0-7190-8724-0.

In her third book on the history of madness in colonial Australasia, Catherine Coleborne portrays a society in motion and one means of bringing order to it. As port cities, Melbourne and Auckland – the book's case studies – were not only gateways for immigration. As economic, political and population centres, they also attracted transient people and those who struggled to make a living. They were characterised by constant spatial and social mobility. While workers could find work and prosperity quickly, both could easily evaporate. Without family connections and savings, many would fall on hard times, some of them permanently. This was difficult to accept for a colonial society that was still unsure of its identity, as the visible poverty seemed to contradict the narrative of a successful, vigorous and muscular settler society. Would colonial Melbourne and Auckland have a prosperous future if so many immigrants could not cope with the hard and uncertain circumstances there?

That this sense of insecurity and dislocation felt by many had consequences for the mental health of some inhabitants of Melbourne and Auckland was perceived as an unavoidable reality of colonial life by contemporaries, and public asylums were supposed to take care of the insane. There they would be treated and detained, but also registered and categorised according to disease, gender, social status, ethnicity and race with the aim of bringing order to the minds of those who had been unable to adjust to life in the colonies. These records of the Yarra Bend Asylum in Melbourne and the Auckland Asylum form the foundation for Coleborne's analysis, as they allow her to probe a society in search of its own identity. In so doing she has two different objectives set out in the introduction: the examination of imperial discourses on insanity and the exploration of institutional knowledge and practices in the colonies.

Coleborne pursues these two objectives in six chapters. She sets the scene by portraying the cities of Melbourne and Auckland from the 1850s to the 1880s and then continues in the second chapter by establishing each city's network of social institutions taking care of immigrants in need, including the asylums for the insane. The third chapter focuses on the patients. Through quantitative analysis of the records, Coleborne can identify the medical, social, cultural and racial categories that the authorities considered useful to tabulating those in their care. During a patient's career in the asylums, doctors would add further information. Thus, Coleborne concludes, the casebooks contain not just neatly ordered data but narratives of the insane that reflect not only their history as patients but also their perception by physicians and the production of the meaning of madness in the colonies. In contrast, the final three chapters are based on a qualitative analysis of the casebooks. They allow Coleborne to study the roles colonial societies expected men and women, whites, Chinese and Maori to play by interpreting the records on those of them who did not want or were unable to do so. In the fourth and fifth chapters, the author zooms in

on gender as a category within the racial majority – whites of European extraction – in both institutions in order to study colonial ideologies of masculinity and femininity. In particular, men who apparently were too mentally and physically weak to cope with the harsh conditions of colonial life, and women who could not fulfil their functions of giving birth and raising children, caused anxieties about the viability of the colonies. Yet the prognosis of future usefulness was gendered, too: while men detained in the asylums had failed, institutionalised women could be rescued. The sixth and final chapter deals with those considered ‘the other’ on a racial basis. The Chinese in Melbourne and Maori in Auckland were small yet visible minorities both in the asylums and in the general population. By subjecting them to the process of categorisation in the casebooks, the institutions marked their difference not only in racial but also in social and cultural terms.

In her conclusion, Coleborne emphasises the power of institutions to produce categories, to subject people to them, to create social and cultural norms and, thus, to include and exclude individuals, to create social structures, attribute social status and construct racial and gender identities. She also highlights the importance of the local as well as the imperial context for these processes. Yet, despite this insistence, the results for both case studies remain amorphous and indistinct. Despite the potential for a comparative or entangled historical perspective, Coleborne homogenises Melbourne and Auckland. Thus, the data collected in the casebooks of the Yarra Bend Asylum and the Auckland Asylum serve Coleborne to mutually reinforce her conclusions about the production of a colonial white settler identity in both institutions and not to point out local peculiarities of Victorian and New Zealand identities. She locates complexity and difference within Australia and New Zealand, not between them. This emphasis on the commonalities also makes it more difficult to determine the specifics of both Australasian colonies within the framework of the Empire or, more generally, the formation of modern institutions and societies. Therefore, the ‘Empire’ Coleborne refers to in the book’s title remains remarkably vague. Imperial power structures and connections rarely feature prominently. The book’s perspective is firmly Australasian; the British Empire serves mainly as a backdrop for local developments while its relevance for the case studies remains unclear. In the end, ‘Insanity, Identity and Empire’ leaves the impression of a contribution to the regional debate about the national identity of two former colonies of white settlement in the age of globalisation and multicultural immigration.

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**Megan J. Coyer** and **David E. Shuttleton** (eds), *Scottish Medicine and Literary Culture, 1726–1832* (Amsterdam and New York: Rodopi, 2014), pp. v–xi, 315, \$98.00, hardback, ISBN: 978-90-420-3891-2.

*Scottish Medicine and Literary Culture*, edited by Megan Coyer and David Shuttleton, is a necessary contribution to the field of literature and medicine, in which very little has appeared focussing on the Scottish context – despite the fact that Scotland was a hotbed of medical discovery and education during the Enlightenment period and generated some of the most recognisable medical theorists and literary writers of the time. Demonstrating that literature was vital to the development and accessibility of medicine in Scotland and beyond while ideas about medicine shaped the creative output and reception of several