

Book Reviews

A. MEREDITH JOHN, *The plantation slaves of Trinidad, 1783–1816: a mathematical and demographic enquiry*, Cambridge University Press, 1989, 8vo, pp. xxi, 259, illus., £25.00, \$39.50.

In the words of the author, this study is a “demographic and mathematical analysis in a historical setting, rather than a historical study that incorporates some demography and mathematics” (xv). As such it is a work that may prove difficult even for those with some knowledge of demographic methods and techniques. Moreover, it will likely not be of interest to most readers of this journal for it has relatively little to say about the diet and diseases of Trinidad residents, whether slave or free, and treats only a brief period of the Island’s history. For the specialist in slavery, however—especially Caribbean slavery—the work is vital, for it addresses vital questions in case-study fashion.

Because of a paucity of data, the question has been unresolved as to whether most Caribbean slave populations failed to grow by natural means because of excessive mortality, low fertility, or a combination of the two. Professor John, using the Trinidad Slave Registers for 1813, 1815, and 1816 as well as archival materials from London and Edinburgh answers the questions at least for Trinidad: “The problem lay in the high mortality of the population, especially among infants and children, rather than in low slave fertility . . .” (159).

Other findings of bio-historical interest include: more than a third of those born to slave mothers did not survive their first year of life and probably fewer than half reached the age of five; male slaves died at significantly higher rates than did female counterparts; the crops tended had much to do with mortality, e.g., a male slave was much more likely to die on a sugar plantation than on a cotton plantation; and slaves who worked on plantations with French and Spanish owners were more likely to survive than those who lived on British estates.

To reach these and other conclusions, Professor John has applied modern techniques to flawed data, and a fair number of pages are devoted to discussing his methods of applying those techniques. His findings will not be startling to specialists, save perhaps for the discovery that the fertility of slave women was not low. But such an effort is crucial in confirming conclusions reached by more traditional methods, and we may hope that other studies such as this will be done for other islands.

The study is marred by a good bit of repetition and leaves the reader wishing for some analysis of, and insight into, the major killers of the slaves. Malnutrition is mentioned as a contributing factor right after the author suggests that “There may have been a fair degree of compliance with the requirements of the slave code . . .”, which prescribed a fairly good diet (102). Neonatal tetanus is mentioned as an important killer of slave infants but no other light is shed on what claimed the lives of more than a third of them during the first year of life.

The work is replete with tables, charts, and graphs. It also contains appendices with other materials, among them still more tables plus the slave codes of Trinidad and some drawings of Trinidad slave life. The bibliography is excellent and the index more than adequate.

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ROGER COOTER (ed.), *Studies in the history of alternative medicine*, Houndmills and London: Macmillan Press in association with St Antony’s College, Oxford, 1988, 8vo, pp. xx, 180, illus., £29.50.

NORMAN GEVITZ (ed.), *Other healers: unorthodox medicine in America*, Baltimore and London, The Johns Hopkins University Press, 1988, 8vo, pp. xii, 302, £24.00, £8.50 (paperback).

These welcome collections have a shared animus and programme. Both volumes are informed by the new impulse within social history to study groups situated on the fringes of the establishment, in this case adherents of medical belief systems ordinarily marginalized or neglected in traditional histories of medicine. More than this, both editors stress that the mounting skepticism about reductionist medicine and the concomitant surge of interest in alternative approaches to illness and wellness—ranging from homeopathy to New Age medicine—have been key factors in prompting historians to seek out in the past patterns of alternative healing belief and behaviour that might shed light on the present. At the same time,

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though, both editors take pains to distance their motivation and approach from the efforts of partisan writers who have explored unorthodox medicine principally to expose its perversions or reveal its truths.

But despite all they share, the specific objectives of these two books are quite different. It is no criticism of *Other healers* to point out that very little of it seems new, for breaking fresh ground is not its chief aim. This is instead an overview of some of the leading varieties of unorthodox health care that have flourished in the United States during the past two centuries. Norman Gevitz invited scholars who, by and large, have already published much fuller accounts of some species of unorthodox healing each to distil their work into a succinct chapter. Thus single essays here are condensations of the fine books by James Whorton on nineteenth-century popular health reform, Susan Cayleff on gender and hydrophaty, and Martin Kaufman on homeopathy. The positivist myth that the rise of experimental science undermined medical sectarianism—a thesis Ronald Numbers has convincingly discredited, but which William Rothstein repeats once again in his chapter on botanical medicine—is soundly belied by the second half of this book, which explores heterodox healing in twentieth-century America. There are chapters by the editor on osteopathy, Walter Wardwell on chiropractic, Rennie Schoepflin on Christian Science healing, David Edwin Harrell, Jr. on pentacostal divine healing, and David Hufford on folk medicine. The asymmetry of the chapters can be taken as a prudent acknowledgement that the movements they investigate are widely divergent. The volume as a whole is a splendid resource for the classroom.

Far from seeing *Studies in the history of alternative medicine* as a survey volume like *Other healers*, Roger Cooter presents his collection as a new departure from history written from the perspective of orthodox medicine, and asserts that the contributions “are alternative studies as much as studies of alternative healing” (p. xvii). Though disparate, most of them focus on nineteenth-century Britain. Chapters by Kelvin Rees on hydrophaty, Norman Gevitz on American osteopathy, and Ursula Miley and John Pickstone on Coffinism (Thomsonian botanic medicine transplanted from America to Britain) illustrate how social, political, and economic interests motivated allegiance to particular alternative medical systems. Logie Barrow, in an essay that admirably embraces complexity, similarly shows how the medical commitments of one heterodox practitioner, J. J. Garth Wilkinson, make no sense detached from his other social and spiritual preoccupations. Two fine contributions focus on debate: Glynis Rankin uses a mid-nineteenth-century dispute between two homeopathic medical societies to reveal how the ideals of their distinct groups of lay supporters, Whigs and middle-class radicals, informed different interpretations of homeopathy; and Patrizia Guarnieri shows how in the 1880s the public theatrical performances of a hypnotist triggered a revealing controversy among Italian psychiatrists and neurologists. There is also a contribution by Charles Webster on nineteenth-century attitudes toward Paracelsus and a thoroughly engaging essay by Roy Porter, who shows that many of the distinctions between the regular practitioner and the “quack” we conventionally take from professionalized Victorian medicine dissolve when one looks instead at the free market-place of the eighteenth century.

The underlying strength of both collections is that they take alternative medicine seriously. They regard it not merely as a revealing mirror to hold up against orthodoxy, but as bodies of belief and patterns of entrepreneurial practice worth investigating in themselves, and, more important, as useful contexts for exploring the ways social interests and ideological allegiances were expressed in systems of healing. Most of the contributors recognize that the therapeutic shortcomings of orthodox medicine, while always a factor, almost never offer a very full explanation for why people construct certain alternative healing systems or place their trust in them. That recognition is important, for it has compelled their search for other, more complex reasons. In addition to broad generalizations about how particular approaches to explaining and managing illness met the interests of certain groups, however, we still need much more thought and empirical research on how and why individual patients and practitioners made choices among competing medical options, and what these choices meant to them. Certainly it is helpful to establish that the adherents of one or another medical creed were recruited from a specific social class, political party, or religious faith and to suggest why this was so, as a number

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of these case studies ably do; but having done this, to go beyond reductive explanations the historian must then ask why some people from the group elected to embrace that particular medical option while others did not. We also need to know much more about how public pronouncements about healing deployed in highly politicized arenas correspond to more private belief and behaviour. Most of these studies draw exclusively on public rhetoric, much of it highly polemical; yet one clear message of the new social history has been that such public pronouncements must not be read as exhaustive or unproblematic representations of reality.

The essays brought together in these volumes are a promising springboard for future work on alternative medicine. What is in these ways most promising, though, is an appealingly subversive subtext that runs through both collections. All the contributors wish to move away from a preoccupation with orthodoxy in medical history, but they remain unable to wrench free from the problem that unorthodox medicine received its definition from what it was not—that is, orthodox. Cooter, in an intriguing essay that explores “just how cosmologically alternative were the alternatives” (p. 75), uncovers multiple layers of overlap between orthodoxy and fringe, and many of the other contributors do the same less systematically. Indeed, the best of these essays all display uneasiness with the fact that abolishing the orthodox/unorthodox duality also tends to undercut the rationale for volumes of historical scholarship devoted to separatist studies of unorthodox medicine, however heuristically valuable such works are. Medical orthodoxy, after all, was a concept that the historical actors themselves not only invented but also disputed. It changed over time, as Porter’s contrast of eighteenth- and nineteenth-century Britain underscores, and over place, as comparison of nineteenth-century Britain with America would amply reveal, and it was always fuzzy. In the final analysis, perhaps what these two collections should most urge upon us is a history not of *either* orthodox medicine *or* alternative medicine, but a more fully integrated history of healing. If, as both editors argue, the concerns of the present are one leading motivation for studying the expressions and meaning of alternative medicine of the past, then this tack is doubly attractive, for it also holds the promise of relevance. Dismantling a rigid dichotomy between orthodoxy and heterodoxy, after all, may be one of the most helpful ways for us to better understand the pluralism that is so distinctly emerging as a hallmark of post-modernist medical culture.

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CYNTHIA EAGLE RUSSETT, *Sexual science: the Victorian construction of womanhood*, Cambridge, Mass., and London, Harvard University Press, 1989, 8vo, pp. 245, £15.95.

The number of new books that have appeared in the past few years on the general topic of the social construction of the feminine within science is staggering. Titles by Elaine Showalter, Emily Martin, Betteann Kevles, Anne Fausto-Sterling, and Susan Suleiman come quickly to mind, but these are only the best and most frequently cited. Now Cynthia Eagle Russett, a distinguished historian of American science at Yale (*Darwin in America*), has turned her hand to the question of the “Victorian construction of womanhood” and has provided the reader—male and female—with a solid, well-written introduction to the basic questions of how (and perhaps even why) nineteenth- and twentieth-century science needed to place the woman within specific categories. It is the biological sciences (and to a lesser extent such social sciences as anthropology) which take centre stage. And Russett deals with these questions from the late nineteenth to the mid-twentieth centuries with a great deal of style and intelligence. This is especially true with her discussion of the erosion of the “Victorian paradigm” with which she concludes her study. What is important about this study is that it is not merely a “horror show”. Indeed, in her presentation of the phrenologists and their image of the feminine we have a pragmatic example of how a scientific institution (phrenology) encouraged women to reach into spheres of activity (such as medicine) hitherto denied them, even when the theoretical basis of such “liberalism” was the innate difference between men and women.

This study rests heavily on existing work by a wide range of social and intellectual historians. And this is the real strength of Russett’s study—it summarizes and orders a mass of material