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regulation only as a step to their speedy replacement by their rival general practitioners; that the Institute faced bitter opposition from Mrs. Bedford Fenwick's Nurses' Association; and that even their medical and lay supporters often tried to persuade them to abandon their reasonable demands for *one* representative on what was to be their regulatory body. So events are mentioned but not explained. Earlier (unsuccessful) attempts at gaining registration had been made by doctors. We are told, "The men had failed to act. Now their sisters . . . would try". It was well for the English midwife that those early medical attempts did *not* succeed, since their purpose – her extinction – was only too clear.

In the same vein, we are told that in 1936 King George V died and the Institute sent a message of sympathy to Queen Mary; it was also the year of the Abdication. We are given no indication why, after all the struggles to obtain the first Midwives Act, the crucial act of 1936, *requiring* local authorities to provide an adequate *qualified* midwifery service, and empowering them forcibly to retire (with compensation) unsuitable midwives, passed without opposition. The fact of the Abdication is more important than the pro-natalist concerns of a parliament expecting a major war, and willing to foot the bill for safer childbirth and more live infants, and in so doing, raising the qualified midwife to the status of a local government servant like the Health Visitor or District Nurse!

The latter part of the book deals better with some of the burning issues of the day. Some, however, would question if continuity of patient care *can* be provided by a *team* (p. 87), and the only reference to the threat to their status many midwives feel is posed by the modern medicalization of childbirth in hospitals is an assertion that as many midwives will still be needed. The thorny question of whether these women will actually *be* midwives, or merely machine-minders for the doctor, is totally ignored.

It is a pity that this opportunity to describe the enormous difficulties which the hard-working leaders of the Midwives' Institute faced – struggles with sections of the medical profession, sometimes with the Medical Officer of Health and the health visitor, with the Local Government Board and later the Ministry of Health, and – occasionally – with the Central Midwives Board itself, has not been adequately taken. They worked hard, and they deserve better.

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ANDREW SCULL (editor), *Madhouses, mad-doctors, and madmen. Ther social history of psychiatry in the Victorian era*, London, Athlone Press, 1981, 8vo, pp. xv, 384, illus., £16.00.

As the soft underbelly of the medical profession, psychiatry has proved an attractive target for social theorists of various persuasions. No one has defined the reasons for their interest more clearly than Michel Foucault: "If one poses, for a science such as theoretical physics or organic chemistry, the problem of its relations with the political and economic structure of society, doesn't one pose a problem which is too complicated? Isn't the threshold of possible explanation placed too high? If, on the other hand, one takes a knowledge such as psychiatry, won't the question be much easier to resolve, since psychiatry has a low epistemological profile, and since psychiatric practice is tied to a whole series of institutions, immediate economic exigencies and urgent political pressures for social regulation? Cannot the interrelation of effects of knowledge and power be more securely grasped in the case of a science as 'doubtful' as psychiatry?"

Foucault himself, as G. S. Rousseau has observed, is essentially a philosophical poet with no more than a subsidiary interest in certain aspects of the history of medicine. Nonetheless, the heady brew of poetic understanding, erudition, and wrongheadedness which made up his *Histoire de la Folie* has loosened the tongues of medical and non-medical critics alike. For the anti-psychiatrists, it has lent support to a crude view of psychological medicine as what one of their spokesmen has called "a convenient but ultimately misguided way of evaluating the social meaning of madness", and of curing as "a sort of anti-healing – a process not entirely dissimilar to the curing of bacon". And for social scientists, it has helped to focus attention on the past as

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well as the present and so, indirectly, back to Henry Sigerist's emphasis on the sociological approach to the history of medicine.

In his earlier work, Andrew Scull has employed the method of historical sociology to challenge some of the assumptions underlying the moral treatment and the community care of the mentally ill. In this book he has brought together essays by a group of British and American scholars, most of them historians, on the social history of psychiatry in the Victorian era. All the papers, half of which have been published previously, are concerned from different standpoints with the aftermath of the psychiatric revolution of the late eighteenth and early nineteenth centuries. They are organized around four broad themes: institutions, therapeutics, professional orientations, and legal issues.

As a group, the essays pinpoint several complex problems raised by the gradual extension of the medical ethos to a variety of heterogeneous mental states and forms of conduct. The design and administration of asylums represented the most visible expression of this trend, which Nancy Tomes and John Walton exemplify with their studies of the work and outlook of Thomas Kirkbride in America and the development of Lancaster Asylum in England respectively, while the editor looks at the influence of corporate asylums on American lunacy reform. Even at the height of the asylum movement, however, the ideology of non-restraint, philanthropy, and reform was challenged by the concept of extra-mural care embodied in the Geel Lunatic Colony, a model which is analysed in some detail by William Parry-Jones. Attitudes to the mentally ill were partly dependent on the expectation of treatment, a theme which underlies W. F. Bynum's overview of the rationales for therapy in British psychiatry from 1780 to 1835 and is given more specific consideration in Roger Cooter's chapter on phrenology and Scull's on moral treatment. Barbara Sickerman traces the origins of the mental hygiene movement, and the early conflicts between the psychological and somatic approaches to mental disorder are outlined by Bonnie Blustein and Michael Clark. For the public at large it was then, as now, the forensic implications of psychiatric theory and practice which attracted most attention, and the chapters by Peter McCandless and Roger Smith – one on compulsory commitment and the other on criminal responsibility – illustrate the problems arising from divergent concepts of insanity and standards of behaviour. Finally, Elaine Showalter tackles the complex interrelationships between Victorian criteria of mental abnormality and the emerging notions of feminine conduct inside and outside the asylum.

In one form or another most of these issues are with us still and the editor may be said to have justified his claim that "historical analysis may have something to contribute, if not to their resolution, then at least to a broader understanding of their social roots and significance". In many respects, the history of psychiatry lends support to Goethe's maxim – "Die Geschichte einer Wissenschaft ist die Wissenschaft selbst". But not entirely. As G. M. Young observed in his magisterial portrait of Victorian England, it can be useful to "see what happened next", and in retrospect it is apparent that the fumbblings and posturings on the part of most nineteenth-century alienists represented little more than early efforts to map the varieties of human behaviour and experience according to medico-scientific principles. The contours of that map were not to be charted during the Victorian era and whole continents remain unexplored. In consequence, a longer, complementary perspective is required to do justice to the subject in the round. In the meantime, *Madhouses, mad-doctors, and madmen* should serve to stimulate further interest by medical historians in an area which contains rather more than Foucault's "discourse of power".

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JOSEPH P. MORRISSEY, HOWARD H. GOLDMAN, and LORRAINE V. KLERMAN (editors), *The enduring asylum. Cycles of institutional reform at Worcester State Hospital*, New York, Grune & Stratton, 1981, 8vo, pp. xi, 356, illus., \$31.50.

Worcester State Hospital has played a prominent role in the history of American psychiatry. Founded in 1830, it was the first state institution in which the new moral treatment was practised, and as such served as an influential model on which other states drew heavily as they