

significant increase in research into Welsh medical history, with many good studies, *Medicine in Wales* is a welcome addition to what is still a limited historiography.

As the editor makes clear, *Medicine in Wales* is designed to “illustrate the growing corpus of research-based material” (p. 2) on the social history of medicine and health in Wales. Its content is deliberately diverse. The contributors draw on a range of sources from documentary records to oral testimony to film to examine the relationship between the public and private provision of healthcare since c. 1800. This relationship provides the intellectual context for the volume. Drawing on Jürgen Habermas’s notion of the public and private sphere, the contributors raise questions about the utility of this approach by examining issues of class, gender, participation and citizenship, and the role of the state. David Hirst, for example, in his chapter on the school medical service, highlights how the relationship between family and state was unresolved in the service, and how the state remained ambivalent about offering medical care. Steven Thompson in examining the provision offered by medical aid societies shows how they created a forum for participatory democracy that represented a “proletarian” public sphere, one that effectively determined the nature of local medical care and authority. Borsay on the other hand demonstrates how in the treatment of industrial accidents in the 1940s independence suffered when the state intervened. Chapters by Sara Brady on nursing at the King Edward VII Hospital and Susan Pitt on midwifery in post-war Swansea point to how there is no simple equation between gender and the public/private sphere. In questioning the boundaries between the public and private provision of healthcare, the contributors offer a critique that supports the concept of a mixed economy of welfare and a “moving frontier” between private, voluntary and public provision of medical care.

However, this is a mixed collection. Aside from Pamela Michael, Thompson and Borsay, many of the contributors pass little comment on Welsh national identity, or look at what Gwyn Williams has referred to as the “Welsh effect”. Indeed, some of the contributors appear to push

Wales into the background. For example, in the chapter by Hirst, and in the contribution by Richard Coopey and Owen Roberts on the municipalization of water, the Welsh dimension is subordinate to a metropolitan or English history. David Greaves in his synthesis of debates about inequalities in health and medical care makes little reference to Wales despite the problems the region faced. Given the peculiar economic, social, and political milieu of Wales, this seems a missed opportunity.

Despite this criticism, the volume has its strengths. For example, Michael in her telling analysis of suicide in north Wales examines how the Denbigh asylum came to replace the family as a source of care and how suicide was medicalized. Coopey and Roberts add further weight to the need to revise the heroic historiography of state intervention. They demonstrate how local authorities were important in shaping local initiatives and how the nature of satisfactory water remained a contested commodity. Borsay suggests how documentary film could push the boundaries of the public sphere, helping to construct citizenship around stereotypes of masculinity and femininity. Questions are also raised about the nature of rural services and the urban/rural divide that shaped medical provision in Wales.

The volume demonstrates that medicine and health in Wales cannot be reduced to a simple equation between public service and private commodity. In raising questions about the public sphere, and in highlighting the rich medical history of Wales, *Medicine in Wales* suggests that the “Welsh context” offers a vibrant and under-researched field for the study of the history of medicine.

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Ian Dowbiggin, *A merciful end: the euthanasia movement in modern America*, New York, Oxford University Press, 2003, pp. xix, 250, \$28.00 (hardback 0-19-515443-6).

Nick Kemp recently produced a history of the British euthanasia movement ‘*Merciful release*’

Book Reviews

(Manchester University Press, 2002). Now, with this new book by Ian Dowbiggin, we have a companion volume that charts the history of the euthanasia movement in modern America.

Opening with the Jack Kevorkian case, Dowbiggin's book has six short chapters. The first charts the history of euthanasia as a concept and a practice from classical Antiquity to the Progressive era. The next, entitled 'Breakthrough', covers the period 1920–40, and the establishment of the Euthanasia Society of America (ESA) in 1938. The third chapter, called 'Stalemate', surveys the struggles of the ESA with the Roman Catholic church in the years 1940–60. Chapter four, 'Riding a great wave', deals with the period between 1960 and 1975, including the reinvention of the ESA with the idea of passive euthanasia in the 1960s. The following chapter, 'Not that simple', covers the splits that characterized the 1970s, and the emergence of new populist right to die organizations in the 1990s. The conclusion deals with the 1990s and beyond, a period when many Americans have come to believe that euthanasia or assisted suicide would be bad public policy, and when no conclusive outcome is in sight.

Dowbiggin has had privileged access to the files of the euthanasia movement, and he is keen to explode the myths that euthanasia only began in the 1960s and 1970s, and that it should be seen as a triumphalist struggle. Other important themes that emerge from his admirably brief but wide-ranging study include the way that euthanasia intersected with other progressive social causes, such as birth control, abortion, and eugenics. Euthanasia was seen "as a critical component of a broad reform agenda designed to emancipate American society from anachronistic and ultimately unhealthy ideas about sex, birth, and death" (p. 30), but also was bedevilled by perennial fears that mercy killing would be extended to people with disabilities. Dowbiggin shows that support for euthanasia in the 1900s was due more to shifting ideas, attitudes, and social forces than to changes in medical practice and technology. Equally important have been the interchangeable social, biological, economic, and humanitarian justifications that have been advanced in its support. A final theme running

through Dowbiggin's history is the tension between public authority and personal autonomy, between paternalism and individual freedom. He ends with the new issues posed by September 11, and concludes that the question of "where does the freedom to die end and the duty to die begin" remains unanswered (p. 177).

One of the difficulties faced by Dowbiggin is that he has to contend with a large cast of individuals (Felix Adler; William J Robinson; Charles Francis Potter; Charles Killick Millard; Inez Celia Philbrick; Eleanor Dwight Jones; Joseph Fletcher; and Olive Ruth Russell among others). Similarly, by the 1970s the picture becomes very complex as the movement fractured into numerous smaller organizations with frequent name changes (the Society for the Right to Die; Concern for Dying; the Hemlock Society; Choice in Dying; Partnership for Caring, and so on). Nevertheless Dowbiggin has coped admirably with these problems to produce a thoroughly researched and well-written history that convincingly explains the reasons for the ebb and flow of support for euthanasia, locating these movements within wider national and international contexts. Dowbiggin is unable here to engage with the recently published Kemp volume. However, comparative studies of Britain and America (and elsewhere) would seem one obvious way to provide new perspectives on "society's long struggle to deal with the grim reality of human disintegration that we call death" (p. xiv).

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Martin Dinges (ed.), *Patients in the history of homoeopathy*, Network Series 5, Sheffield, European Association for the History of Medicine and Health Publications, 2002, pp. xiii, 434, UK £39.95, Europe £43.33, USA £52.10, elsewhere £47.82 (hardback 0-9536522-4-6).

Using an array of sources from the eighteenth to the twentieth century, this volume addresses the question "Why did and why do patients come to homoeopathy?" The answer is framed in market model terms in four sections: patients in