

Book Reviews

The second part reviews the circumstances of health work in mainland China from 1949 to 1987. Here, the author gives a brief but systematic description of developments in government health policy and its impact and administration with special reference to rural areas. The author describes the unfavourable influences on health work and medical education of contemporary political campaigns, which deprived medical and public health work of the influence of technically-trained leadership. The account of the author's personal ups-and-downs during this time reveals, between the lines, a Chinese intellectual's strong sense of responsibility for the health of the people.

The last part consists of the author's reflections on the health problems of China with a summary of lessons for health policy makers and workers in developing countries. These include the need to provide the appropriate pioneering leadership and trained personnel and to build the necessary infrastructure for health work. The author also emphasizes the importance of fostering community responsibility and self-help and of securing co-operation with traditional practitioners. Through all shines Dr Chen's conviction that the best possible health care should be available to the population as a whole and not just to the privileged few.

Credit should also be given to the co-author, Frederica M. Bunge, who is responsible for historical material in the book. The photographs illustrated are rare and add significantly to its interest. It is a pleasure to welcome this work, whose appeal is not only to health policy makers and workers in developing countries, but also to students of many aspects of medical history.

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COLIN HEYWOOD, *Childhood in nineteenth-century France: work, health and education among the classes populaires*, Cambridge University Press, 1988, 8vo, pp. xii, 350, £30.00, \$44.50.

Colin Heywood has, with this book, joined the distinguished band of English-speaking historians of the economy and society of France. Heywood's work brings together the world which has been explored by such writers as Olwen Hufton and William Sewell, that of the workers and the poor. It provides a significant new perspective by emphasizing the contribution of children to agricultural and artisan labour, and also proclaims its laudable objective of applying his conclusions to the prevention of the abuse of child labour in Third World countries today.

Heywood avoids sentimentalizing his subject, and instead locates it firmly within currently crucial areas of historical debate. Both labour history and the history of childhood, a sub-field often obsessed by the example of the middle class, benefit from Heywood's questioning of why it was that the employment of children, a custom that had been accepted without question for centuries, suddenly became a public issue during the second quarter of the nineteenth century, and declined in importance thereafter.

Educational history, which, in the hands of Marc Raeff and many other historians of Enlightenment Europe has become an integral part of the history of new disciplines crucial in the emergence of the modern world, is implicated in Heywood's second major topic, that of the way in which informal methods of educating the young in the family and the local community gave way to the formal educational system of the schools everywhere triumphant in Europe by 1914. The nature of the modern state itself, whose class base of repression has been so powerfully sketched by Michel Foucault, is implicated in Heywood's final major theme, that of the assessment of the effectiveness of the state in its efforts to promote the welfare of children. Historians of medicine will focus especially on Heywood's treatment of the debates on national physical and moral decline which fuelled pressure for the tighter state control of child labour, and of industrial working conditions generally. Though Heywood's treatment of this theme adds little to the classic account by William Coleman, it does highlight the close connections between campaigners' efforts to arouse public opinion on the specific issue of child labour as part of a broader context of public health concerns, and the rapid change of attitudes which led to more effective enforcement of regulation.

Book Reviews

In the end, however, Heywood's conclusions are unsurprising. He decides that child labour ended in industrial sectors such as textiles because rising real wages by the end of the nineteenth century allowed parents to dispense with childrens' earnings at precisely the same time that compulsory elementary education became more strongly enforced. These two factors were more effective than legal controls, which in any case were consciously gradualist, for fear of driving child labour underground and completely out of the reach of the state. These conclusions offer predictions for the Third World today: they suggest that there is no immediate hope of ending child labour without strong state enforcement through compulsory education, and even more importantly, without favourable economic conjunctures, which are unlikely to materialize in the immediate future.

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RIMA D. APPLE, *Mothers and medicine. A social history of infant feeding, 1890–1950*, Madison, University of Wisconsin Press, 1987, 8vo, pp. xv, 261, illus., \$39.50, \$16.25 (paperback).

Detailed studies of the history of infant nutrition are rare for all periods and all countries; consequently every new contribution to the subject is welcome. In this important and well-documented book, Apple has explored a wide and varied range of source material: medical textbooks and journals, child-rearing manuals, women's magazines, published letters and diaries, interviews with physicians and mothers, and advertising and other information relating to the development and marketing of breast-milk substitutes. She uses this to show how, and why, American mothers, who in the nineteenth century mainly breast-fed their babies, increasingly turned to artificial feeding so that, by the mid-twentieth century, the vast majority of infants were bottle-fed.

After an introductory chapter on feeding practices in the nineteenth century, the volume is divided into four sections covering the period 1890–1950. 'Infant feeding theories and infant-food products' examines medical ideas about infant feeding; how patent baby foods became established; and the interaction between the medical profession and the manufacturers of artificial infant foods. 'Infant feeding in medical practice' describes how physicians actually dealt with conflicting theories and advertising of new products; sought to find both clean milk supplies and a safe means of artificial feeding; and how, by medical education and professional pressure on food companies and mothers, bottle-feeding increasingly became the norm for American mothers. 'Scientific motherhood' deals with the ideology of motherhood and how mothers were made to feel that they were incapable of feeding their infants and therefore needed to consult a physician even when their babies were healthy. 'Mothers and infant-feeding practices' examines the mother's role: the influences and pressures placed on her by physicians, manufacturers, women's magazines and, particularly, the hospitals in which more and more mothers were delivered, and thus subjected to their regulations. A concluding chapter looks at infant feeding in the twentieth century.

Apple is strongest in her emphasis on the important role of advertising; the dynamics of the three-way relationship between the medical profession, infant food companies, and mothers; and in her understanding of the mother's confusion and problems when confronted by these imposing institutions. However, the book deals exclusively with the United States: the very few references to practices elsewhere are relegated to endnotes. This is regrettable because it is clear from her account that there were major differences between the United States and elsewhere.

For example, although adapted by some overseas physicians, percentage feeding was an essentially American invention and practice, and the introduction of this highly complex method was a key factor in the medicalization of infant feeding in the United States. Again, the American Pediatric Association persuaded patent babyfood manufacturers to remove from their labels and magazine advertisements all instructions on mixing and administering their products, thus directing bottle-feeding mothers to physicians for information and supervision.