

confidentiality oblige, when it concerns – as is often the case – genital or urinary disease. Coste successfully underlines that the writing of *consilia* can be linked with a poetic or literary approach: the medical expert writes the *private history* of a patient, as a worthy heir to Hippocrates; he selects words and suitable expressions according to the recipient (an esteemed fellow-member will always learn more than the patient to whom the physician directly answers) and he adds rhetorical effects to the description of the symptoms, which bring him to regard himself as a true *author* (and thus a rightful *authority*) adapting a poetic and/or scientific register according to the circumstances. He replaces the evocation of the suffering of the patient with an account, but not a tale, including narrative passages, making a report which is supposed to have an optimal scientific level. These complaints and confidences are summarised in ‘écrits de la souffrance’ (*writings of suffering*, the obvious title of the book), though can anyone really estimate the distortion caused by the editorial work of the ‘man of Art’ whose point of view is still from above?

In fact, many stereotypes of the history of medicine yield to Coste’s meticulous work: Is the assistance provided to the patient often personalised according to his social status and environment? Can the search for a proof often readable in these consultations, which are not satisfied with simple conjectures – be only an effect of the selection process made before publication? Even if this corpus cannot provide valid conclusions for the whole practice, which is obvious, it makes it possible to redirect, partly, current research towards a much more flexible approach towards the therapeutic relationship. Coste uses the word ‘*interaction*’ to describe the anthropological relationship between doctor and patient, although the standards, the uses, the randomness and sometimes the unforeseeable events of the cure prohibited excessive formalism. Contrary to a global approach, and thus diminished, the book comprises many assets: the treatment of the manuscripts and the printed consultations allows in particular a quantitative approach of the diseases mentioned, the profile of the applicants or types of assumption of responsibility and even the thinking styles. On this point, the mode of justification used by the doctors is deeply explored – but truly, did it differ basically from that adopted in the classical scholarly treatises? – and the ordered treatments illustrate perfectly the early modern therapeutic universe with its frequent adaptation according to the requests of the patients themselves.

Scholars, however, may have liked to learn more of the scientific networks and the sociability of the physicians between them: What determined the choice of the correspondents? Was the role of the medical doctrines (Paris versus Montpellier, Galen versus Hippocrates, new nosologists versus others) a plausible factor? Were these collected letters then used as material intended to help some physicians during the writing of later medical treatises? If the book does not answer these questions, it nevertheless remains an important new reference and an excellent resource on the history of French medical practice, thanks to an effective bibliography, an appendix comprising twelve *consilia* and an extremely useful index for non-specialists.

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Alison Bashford, *Global Population: History, Geopolitics, and Life on Earth* (New York: Columbia University Press, 2014), pp. I–XII, 1–466, ISBN: 978-0-231-14766-8.

‘Think big’ is a cliché you hear time and again in this globalised world: think big in order to succeed in your career, to become leadership quality or to save the world. Bashford’s

Global Population: History, Geopolitics, and Life on Earth is about how Anglophone medical, scientific and technical experts as well as activists, bureaucrats and politicians thought big about population in the period between the dawn of the nineteenth century and the late 1960s.

Population is now an established theme of the historical enquiries into medicine and healthcare. Largely, it is attributable to the idea of ‘bio-politics of the population’, originally presented by Michel Foucault in the 1970s. Foucault, in his *History of Sexuality* (1976), proposed that the regulations of the population constituted, alongside the disciplines of the body, a pole around which modern forms of power had been organised in the West since the seventeenth century. In the new sociopolitical context that emphasised ‘power over life’, Foucault went on, modern techniques of governance were deployed to enhance and maximise human life, both in terms of individuals and of population as the individuals’ aggregate form (Foucault and Rabinow 1991, 258–72).¹ Following the theory, a scholarship grew rapidly that studied how the notion of ‘bio-politics of the population’ mobilised certain ideas of health and medicine and how, simultaneously, medical and healthcare practices were integrated into the modern techniques of governance in a given national – and more recently transnational – context. Reproduction was regarded as an area that demonstrated the deployment of health governance in the ‘bio-politics of the population’ most vividly, and thus historical works grappling with the theme have often focused, for instance, on the process by which the idea of ‘overpopulation’ after the Second World War gave licence to birth control for the sake of population control (Chikako Takeshita 2011; Connelly 2008; Schoen 2005; Greenhalgh and Winckler 2005; Marks 2001).² As a result, population came to constitute a significant concept in the critical studies of medicine and healthcare, predicated on the widely held assumption that population should be first and foremost associated with issues of health.

With *Global Population*, Bashford makes a significant intervention into the trend in the historiography. By tracing intellectual and political discourses on world population, Bashford stresses that population was more than just about reproductive health and sex, but was ‘a spatial and economic issue, too’ (3). And, because geopolitics was at the heart of how the problem of population was articulated in terms of economy and space, the dialogue on the population problem unfolding from the 1920s onwards – a period focused on in the book – was ‘as much about geopolitics as it was about biopolitics’ (3). With the clear analytical stance, the book carefully unravels the intricate relationship between bio- and geopolitics as manifested in the historical narrative of world population. The book maps out how population was not only a vocabulary of reproductive health and sex, but also of expansive yet interlinked socioeconomic themes of food, land, space, territory, security, migration and ecology.

The book presents a total of twelve chapters that are organised into four parts. In the first part, ‘The Long Nineteenth-century’, which consists of a single chapter, the monograph embarks on the ambitious project by offering a reinterpretation of Thomas

¹ Michel Foucault and Paul Rabinow, *The Foucault Reader* (London: Penguin Books, 1991).

² Chikako Takeshita, *The Global Biopolitics of the IUD: How Science Constructs Contraceptive Users and Women’s Bodies* (Cambridge, MA: The MIT Press, 2011); Matthew James Connelly, *Fatal Misconception: The Struggle to Control World Population* (Cambridge, MA: Belknap Press of Harvard University Press, 2008); Susan Greenhalgh and Edwin A. Winckler, *Governing China’s Population: From Leninist to Neoliberal Biopolitics* (Stanford, CA: Stanford University Press, 2005); Lara Marks, *Sexual Chemistry: A History of the Contraceptive Pill* (New Haven, CT: Yale University Press, 2001); Johanna Schoen, *Choice & Coercion: Birth Control, Sterilization, and Abortion in Public Health and Welfare* (Chapel Hill: University of North Carolina Press, NC, 2005).

Malthus's canonical *Essay on the Principle of Population* (1798) and of the thoughts of the Victorian followers of Malthus in terms of intertwined geopolitics and biopolitics. When Malthus advanced the idea of the imbalance between the exponentially incrementing rate of unchecked population growth and the food supply which grew only arithmetically, what he deemed population determinants – most crucially, availability of cultivable land and liveable space – were inherently tied to colonial geopolitics, while the matters of biopolitics concerning the performances of human bodies as 'species bodies' – such as sexual conduct, birth, illness and death – were among the topics that cropped up in Malthus' idea of population checks. Likewise, when a Victorian neo-Malthusian Annie Besant endorsed birth control as a 'humanitarian' method of population check and hence laid a foundation for the later interpretation that saw the history of population as embedded in the histories of reproduction, medicine and gender, even such a typically biopolitical formulation of the population problem was not devoid of the implication of the themes of geopolitics. Underlining Besant's idea of population, for instance, was also the Malthusian concept of the Earth as a 'confined room', but, unlike Malthus' idea, this time, it was more symbiotic to the new idea of ecology advanced by Ernst Haeckel, which, as Bashford elaborates on in the subsequent chapters, was also inherently tied to geopolitics.

The second part, 'Politics of Earth, 1920s and 1930s' comprises four chapters and is about the role of the politics of the Earth, that is, geopolitics in the population debate of the post World War I period. This part takes the very concept of geopolitics seriously. It makes clear that geopolitics is not only an analytical tool for the understanding of population manifested in the historical debate, but is also a construct of history that was itself tangled up with a biopolitical connotation. Geopolitics was chiefly about the struggles among modern nation states for territorial space, but the space articulated in geopolitics was 'living', as the term *Lebensraum* attested, which was inseparable from the land and population that grew from it. This specific interpretation of population as spatial literally opened up space for various experts to seize the population issue in three dimensions. Thus, when zoologist Raymond Pearl pondered over human populations, he applied the biological notion of density adversely affecting fertility rates of organisms in a bounded space. Furthermore, in the post World War I era, characterised by the rise of international exchanges among population experts, the microbiological formulation of population density was easily applied to the understanding of human population, sanctioning, for instance, Warren Thompson's argument that high population density among humans would trigger political instability if the pressure was not relieved by means of migration or the cultivation of 'waste lands'.

Following the second part, which focuses on the geopolitical aspects of the narrative of world population, the third part, 'The Politics of Life, 1920s and 1930s', offers the stories of biopolitics in the population debate of the period. This part, however, rejects the aforementioned narrow interpretation of biopolitics of population. Thus it details the population debate taking place in the hitherto uncharted fields of ecology, economics and agriculture, before revising the familiar narrative that depicts population as manifested in the politics of sex and eugenics.

The final part, 'Between One World and Three Worlds, 1940s–68', complicates the picture of the global population control movement, which primarily refers to the post World War II efforts among the governmental, international and philanthropic institutions to deploy aggressive family planning initiatives in Asia, Africa and Latin America as development and population control measures. The message of this part is crystal clear: although international communities eventually resorted to the regulation of fertility –

or what Bashford calls the ‘biopolitical solution’ (305) – to solve the world population problem in the post-war period, geopolitical imperatives of food security, land ownership, resource and ecology, which also occupied the pre-war commentators of population, continued to act as crucial determinants in the global debate on population even after the war. A crucial difference in this period was a new way of imagining the world geography, which oscillated between the image of the one round Earth and the idea of the globe segregated into the three discernible ‘worlds’, which was originally proposed by French demographer Alfred Sauvy and consolidated in the Cold War politics. Bashford carefully chronicles how this particular view of the world(s) played a critical role in the post-war debate on population control. It was both the concern that global population growth might erode the Earth as the sole habitat for humankind *and* the argument that unequal distribution of resources and populations among the three ‘worlds’ might inflict further economic and political instabilities that spurred John Boyd Orr and Julian Huxley, the first heads of the new United Nations Food and Agricultural Organization and UNESCO, the newly established New York based Population Council and cosmopolitan demographers such as Sripati Chandrasekhar, Frank W. Notestein and Dudley Kirk to begin to consider fertility reduction as a possible population control measure. Still, this did not mean that the pre-war and wartime exigencies were nullified. *Au contraire*. For instance, the concern over population quality encroached in what appeared to be a discussion over population quantity, just as in the pre-war period. But, against the familiar narrative that associates eugenics with coercive and top-down measures of, say, sterilisation, Bashford in this part brilliantly argues that eugenics integrated in world population control in the post-war period was recalcitrant precisely because it was tied to Anglophone eugenicists’ continued investment in the concept of modern freedom. This kind of poignant analysis truly complicates the post-war global politics of world population.

In addition to introducing the new analytical framework to the critical studies of population, with *Global Population* Bashford changed the scholarship fundamentally in the following two ways. First was in the area of periodisation. Throughout the book, Bashford categorically emphasises that the post-war global population politics dovetailed with health, gender and sexual politics, environmentalism and cosmopolitanism was also rooted strongly in the pre-war politics of Earth and life. Secondly, by utilising a postcolonial analytic, Bashford critiques the historiographical tendency to underwrite the dualistic caricature of Western/European ‘fertility decline’ and non-Western/Asian ‘population growth’. These two points, corroborated carefully throughout the book, are powerful; they have already begun to influence the scholarship’s trajectory (eg. Homei and Huang 2016).³

Global Population will surely become a staple in the history of medicine and healthcare, but it throws the greatest challenge at a reader, both for the same reason: it appears to give a straightforward account on the Anglophone genealogy of population thoughts, but, at the same time, resiliently refuses to be complacent with one methodological perspective or to rely on cliché and reduce complex narratives to a discernible pattern. On the one hand, it is about how Malthus formulated population and how the likes of George Drysdale, Carlos Paton Blacker, Alexander Carr-Saunders, George Knibbs, Margaret Sanger, Radhakamal Mukerjee and Kingsley Davis engaged with the population problem where relevant to the backgrounds from which they came. It was an attempt to unravel discourses on global population by ‘putting together’ the participating factors for the formulation of the world

³ Aya Homei and Yu-ling Huang, ‘Population Control in Cold War Asia: Introduction’, *East Asian Science, Technology and Society*, forthcoming.

population problem, that is, eugenics, Malthusianism, feminism, ecology, economics and environmentalism (360). But, on the other hand, the book presents convoluted histories as they are, and forcefully thrusts to the fore the aspects of inconsistencies and conflicts in the arguments, beliefs and moral judgements about the world population problem. It is an extremely difficult book to summarise, but it is precisely because of this that the book merits attention and praise. The book, indeed, helps you to think big.

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Victoria Bates, *Sexual Forensics in Victorian and Edwardian England: Age, Crime and Consent in the Courts* (Basingstoke: Palgrave Macmillan, 2016), pp. 200, £58.00, hardback, ISBN: 978-1-137-44170-6.

When and how is a line drawn by medicine and by wider society between the ostensibly separate categories of ‘child’, ‘young person’ and ‘adult’? What constitutes ‘responsibility’ and ‘consent’? Who should have the power to ultimately decide on whether an individual fits these labels? These broad descriptions are, of course, neither value-neutral nor unchanging, but they are historically and culturally specific. In this well-written, accessible and engaging study, Victoria Bates has drawn on a rich variety of published and archival sources in order to interrogate the role played by forensic medicine (both in theory and in practice) in shaping trials for child sexual abuse in Victorian and Edwardian England. Structured around six primary themes – knowledge, injury, innocence, consent, emotions and offenders – Bates is careful to strike a fine balance between giving details of individual trials and setting these distressing but sensitively discussed cases in their broader social, cultural and intellectual context. If the law expected that matters such as chronological age might smooth out criminal proceedings, such as in cases where the victim was too young for any question of ‘consent’ to have arisen, conflicting medical and cultural expectations could often mean that even very young children were examined carefully for physical signs of ‘resistance’ such as cuts and bruises, despite the fact that their age made this totally irrelevant. The body and mind of the victim (and to a lesser extent the perpetrator) and how this was ‘read’ by an examining physician was therefore crucial in determining both what charges might be brought against an assailant and the final outcome.

One particularly fascinating aspect of the book, and one that will guarantee its place on multiple reading lists, is that Bates has included at the end of Chapters 2–6 her careful transcriptions of individual case studies that illuminate the issues highlighted by the relevant chapter. She has also provided a detailed two-page analysis in each of these instances about what the significance of this case was for the broader picture of sexual forensics in Victorian and Edwardian England.

Reproducing in full pre-trial witness statements taken at the quarter sessions of Middlesex and Somerset between 1858 and 1889 gives a vivid insight into how the specifics of these cases played out before the magistrates, and, given the patchy survival rate of assize depositions relating to crimes other than murder, the quarter sessions can provide an invaluable glimpse of how offences that have otherwise left limited traces in the archival record were dealt with. Moreover, as Bates herself observes, not only did the assize courts deal with offences in a somewhat different manner to the quarter sessions, but the latter – which tried indictable misdemeanours like attempted rape rather than the