

## Book Reviews

An important turning point for the NBTF came in the immediate aftermath of World War II. With the sweeping Labour victory in 1945 and the establishment of the National Health Service (NHS), the role of the NBTF lost some of its importance and urgency. The NHS, after all, had as its primary function to see that health care was provided for all citizens, and it was established so that poor people did not feel stigmatized by accepting government assistance. This put the role of the NBTF in assisting, caring, and giving voice to the needs of poor women in a secondary position. In particular, no longer did they have the need to assist poor, pregnant women in attaining the same medical treatment as wealthy women. The government was promising assistance for all Britain's citizens. With the implementation of the NHS, the NBTF continued its work in helping poor mothers but expanded its focus to include the needs of all mothers. This was an attempt to keep in line with the politics of the post-war period as well as continuing its work to improve the health of mothers. However, the post-war period further shifted the organization's focus to include the needs of babies. Again, this was a pragmatic strategy.

The book's concluding chapters examine the survey work of the NBTF in 1946, 1958, and 1970. In 1946 the NBTF had a role in interviewing women for the Maternity in Great Britain survey which was initiated over the concern in the fall of Britain's birthrate. In 1958 and 1970, however, the NBTF had the leading role in conducting the surveys, with the most famous being the 1958 Perinatal Mortality Survey (p. 196). By the end of the 1980s it was apparent that the NBTF, having taken on a research role, was in financial difficulty and recognized its need for a partner. On 4 November 1993 the NBTF merged with the research section of the Royal College of Obstetricians and Gynaecologists, Birthright. Because of some confusion with the abortion issue, Birthright changed its name to WellBeing. As the twentieth century concludes, WellBeing is involved in all aspects of women's health: "infertility, menstrual and menopausal problems, incontinence and

osteoporosis and on methods to improve the screening diagnosis and treatment for gynaecological cancers and breast cancer" (p. 257). Williams states that with the merger, an organization to serve women has emerged with goals that are clinically oriented as well as socially conscious.

The strength of this study is that the NBTF was involved in many medical issues touching the lives of women from 1928 to 1993, and, as a result, Williams delves into the politics and medical history of childbirth, drugs in childbirth, and abortion. In the end she has produced a book that examines class, women, medicine, and politics while documenting the history of the National Birthday Trust Fund. The book is clearly written, the photographs and charts are relevant to the narrative, and the scope of primary sources makes it a valuable resource for the many issues addressed. This is a fine piece of scholarship that concludes with an appeal for continued awareness and help for all women as we move toward the twenty-first century.

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**Stephen Addae**, *The evolution of modern medicine in a developing country: Ghana 1880–1960*, Bishop Auckland, Durham Academic Press, 1997, pp. xii, 523, £32.50 (hardback 1-900838-05-2), £17.50 (paperback 1-900838-04-4).

**Stephen Addae**, *The history of western medicine in Ghana 1880–1960*, Bishop Auckland, Durham Academic Press, 1997, pp. xii, 321, £17.50 (paperback 1-900838-04-4).

These two books by Stephen Addae cover basically the same ground but they are not the same book in different covers. The difference is in the depth in which some of their content is covered and especially in the readership at which they are aimed. *The evolution of modern medicine* covers a number of topics in somewhat greater detail, has an additional chapter on health in mining areas, a

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particularly valuable chapter on some modern African medical men and their work, 1940–1960, and has more tables. It is especially aimed at those studying selected aspects of the medical history of Ghana in depth, who may wish to use it as initial source material. It is this book, particularly, that is covered by this review although much also applies to *The history of western medicine*.

Stephen Addae is professor of physiology and lecturer in the history of medicine in the University of Ghana medical school. He is able, therefore, to bring to bear on his research and writing the perspectives of both a medical doctor and a historian, and he does so in a rewarding fashion.

The broad historical framework is covered by two, inevitably brief, introductory chapters. The first is a survey of the status of health and disease on the west African coast between 1482, when the Portuguese built the Elmina castle, and 1878, when the first civil colonial hospital was built in Accra—shortly to be followed by others in the coastal towns. The second is a study of the way in which medical policy evolved between 1880 and the 1950s when the country became self-governing and then independent. To these chapters is added, at the end of the book, a valuable survey of medical institutions and public health services, bringing the story up to the mid-1990s. In this final chapter the author also highlights the damage caused by the initial failure in the 1960s to maintain the publication of medical data and the annual reports. Other chapters cover various aspects of the development of the public health service and include health, sanitation and laboratory services; medical education, training and research; and the formation of professional associations. There are also important chapters on the staffing of these services: the professional medical staff (including a section on women medical officers) and their supporting staff of dispensers, dressers, dispenser-nurses, nurses and midwives.

Although internationally well known for his work on sickle cell diseases, Stephen Addae, interestingly, does not deal with these here. He does, however, devote individual chapters to

some dozen other diseases, including malaria, smallpox, plague, trypanosomiasis, venereal diseases, yaws, yellow fever, tuberculosis and leprosy. Some of these chapters are tantalizingly brief, for example that on malaria and helminthic infections, the text of which covers less than two pages. He pays especial attention to the failure over the years to shift the policy emphasis from curative to preventative services, and the burden which this failure—common in virtually all developing countries, as elsewhere—has placed on successive administrations.

The books are enriched by over two dozen tables and nearly a score of clear and well drawn charts and graphs in the text. Furthermore, there is a valuable seven page appendix giving year-by-year details from 1898 to 1955 of the number of reported cases of the various ailments to which individual chapters are devoted; and details of public health expenditure from 1883 to 1955, in absolute terms, as a proportion of total government recurrent expenditure and on a per capita basis.

Professor Addae's study of the evolution (or history) of modern (or western) medicine in Ghana is a well written, attractively produced and valuable addition to the existing literature on the development of medical services in former British African territories. His notes and references—nearly 1,500 in total— together with his bibliography of official papers and reports, books, articles and unpublished papers, guide the reader to the sources which he has used in researching and writing these books. These sources, with his narrative and analyses, should be of great value to those who wish to take further the study of the development of medical services in Africa.

**Colin Baker**, University of Glamorgan

**Martin Dinges** (ed.), *Homöopathie: Patienten, Heilkundige, Institutionen: von den Anfängen bis heute*, Heidelberg, Karl F Haug, 1996, pp. 371, illus., DM 49.80, SFr 45.00 (3-7760-1574-8).