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countrywide unrest and riots . . . Red revolutionists . . . denounce the props of an old static society . . . Britain now stands teetering on the brink of collapse—or so it seems to the gentry . . .”. Yet Charles Darwin was one of the gentry, and his letters do not mention any of this, not even the “red revolutionists”. Can it be that the authors have gone over the top and are imposing their own view rather than the reality? But it would be unkind to end on a hostile note. Whatever its excesses of language, the book makes a dull life interesting, while preserving a high standard of scholarship.

D. G. King-Hele, Farnham, Surrey

CHARLES WEBSTER (ed.), *Aneurin Bevan on the National Health Service*, Research Publications 10, University of Oxford, Wellcome Unit for the History of Medicine (45–47 Banbury Road, Oxford OX2 6PE), 1991, pp. xix, 225, illus., £7.95 (paperback, 0–906844–09–6).

This book contains 23 papers setting forth Aneurin Bevan’s views on the Health Service between 1945 and 1958. Before the Service began in 1948, we see him developing and defending the plan he devised, making the concessions necessary to put it across. Above all, he held out to doctors the prospect of clinical freedom, with the state providing the funds and facilities needed to practise medical science to the full. There was also to be no restraint on civil liberties; all employed in the Service would be free to express whatever criticisms they had of it. Nothing could contrast more sharply with the situation that exists today.

After 1948, we find Bevan trying to cope with the funding problems that arose as the result of expenditure far exceeding estimates. His main aim then was to resist the pressure emanating from the Treasury to revoke the principle of free care which he so deeply cherished. Though Bevan himself secured the legislation needed to impose a charge for prescriptions, he later claimed that he never expected it to be implemented and resigned from Government when charges were introduced for dentures and spectacles.

Similarly, though he later proposed a reform of local government that would permit the Service to be administered in the democratic manner he considered desirable, he nationalized the hospital service and sympathized with the doctors in their opposition to municipal rule. As in his subsequent abandonment of the principle of unilateral nuclear disarmament, Bevan proved more flexible than the zealots who worshipped him. Where the health service was concerned, his greatest success—though not cited by Webster in his introduction—was, as one Labour MP put it, “the way he applied the anaesthetic to supporters on his own side, making them believe in things they had opposed all their lives”.

Though the papers provide a convenient reference for Bevan’s views, they are hard to follow without detailed knowledge of the events surrounding them. Webster’s attempts in his Introduction to provide some background are no substitute for a fuller history. The book is thus likely to appeal to those who already know the story, and they will find a curious omission: one of Bevan’s most impressive papers is not contained here. That was the memorandum he submitted to the Cabinet on 16 October 1945, rebutting Herbert Morrison’s arguments against nationalization of the hospital service and ending with a rousing plea for support. A chance like this, he warned his colleagues, came only once in a generation: “If it is not done now, it will not be done in our time.”

After reading this document, it is difficult to attach much weight to Bevan’s later espousal of municipal rule. The reform he proposed in 1954 called for the creation of 240 local authorities, all except those in great cities serving populations of less than 100,000. These would be far too small for hospital administration, as the 1962 Hospital Plan later indicated. Nor did Bevan have any faith in local government ability to finance the move; all the money in his proposed reform was to come from Whitehall with local authorities acting merely on an agency basis. What Chancellor of the Exchequer could possibly have accepted that?

Webster has compiled this collection in an attempt to counteract what he sees as a tendency in histories of the NHS to write Bevan out of the story. This, too, is hard to accept, certainly as far as my own work is concerned. I devoted much space to Bevan’s role, giving full credit to the

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tactics and pragmatism he displayed. But Bevan's accomplishment, formidable as it was, has to be put in proper perspective. Unlike Lloyd George in 1911, Bevan had the backing of a movement that already had force. Does Webster deny that? If so, he takes issue with Bevan himself for this is what the Minister had to say when he introduced the Health Service Bill in 1946: "The first reason why a health scheme of this sort is necessary at all is because it has been the firm conclusion of all parties that money ought not to be permitted to stand in the way of obtaining an efficient health service."

Frank Honigsbaum, London

JONATHAN BARRY and COLIN JONES (eds), *Medicine and charity before the welfare state*, Studies in the Social History of Medicine, London and New York, Routledge, 1991, pp. x, 259, £45.00 (0-415-05741-8).

One would not have thought a decade ago that the history of philanthropy would be such an attractive field for scholars today, but, as the welfare state is being reconsidered, more traditional forms of welfare have come back into focus. This book of essays, which covers western Europe from the Middle Ages to the 1940s, is a worthy addition to the burgeoning literature. It is based on papers given at the annual conference of the Society for the Social History of Medicine in 1988. While it tends to treat medical charity in isolation from other charitable forms (some of the writers seem to be ignorant of the work on philanthropy more generally), it does raise a host of important issues, including the relationship of charity to the state, the role of economic factors in determining charitable trends, and the role of medical practitioners in charitable institutions.

The volume brings together a strong team of historians, though in the nature of conference papers some of them have tried harder than others. In general, those essays succeed best which linger over the sources, and keep the jargon at bay and the generalizations within bounds. Perhaps the strongest part of the volume is the Introduction by the editors Jonathan Barry and Colin Jones. They have pieced together the disparate essays with considerable skill and have treated the wider issues with a becoming tentativeness, as befits the present state of research. They are, for example, not altogether happy with the established economic explanations of charitable relief. As they put it, "a neat fit between medical and economic criteria" is not always apparent. More might have been said in the essays about the charitable "disposition", Christian in character, geared to the giver as well as the recipient, which helps to explain why the relatively prosperous mid-Victorian years were a charitable golden age in Britain. It is a weakness of this volume that it does not get beneath the surface of the psychology of religiously motivated charity.

One of the virtues of the book is that it questions, though not for the first time, the Whiggish perspective which assumes that there is a "linear progression" from charity to welfare. Yet there is a danger, despite the efforts of the editors, that the very title of their book may reinforce this dubious notion. The time is ripe for a conference on medical charity *and* the welfare state, which would begin where this volume leaves off. Should it convene, we may find out just how indebted the welfare state, and the National Health Service in particular, is to charitable traditions and funds. Arguably, the voluntary sector, stimulated by government social policy after the Second World War, has been more resilient than the state welfare departments themselves.

F. K. Prochaska, London

JOHN DUFFY, *The sanitarians: a history of American public health*, Urbana and Chicago, University of Illinois Press, 1990, pp. 330, \$32.50 (0-252-01663-7).

John Duffy's contributions to the history of medicine in America have been substantial and broad-ranging. His vision of medicine as a discipline encompasses the subject not only in its institutional, clinical and scientific aspects, but also takes in public health. Thus his two-volume