

in others (for instance, names are suddenly introduced with no helpful antecedent for the uninitiated reader, such as Netley, site of the large nineteenth to mid-twentieth century medical hospital in Hampshire, England) and the blight of spelling errors is occasionally manifest, leaving this reviewer with a sense that perhaps one more editing lick might have converted a highly polished penultimate draft into a ready-to-publish version, the criticism is ultimately venial and should not detract from the urgency of this effort. An earlier review I had provided of another book by the same author for this journal suggested that he had written a simmering book, one of controlled anger against the excesses of empire. *Bacteriology in British India* is likewise a powder keg of a publication in that vein, a tightly argued, cogent and sustained interrogation of that empire whose heart was British India.

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**Rhodri Hayward**, *The Transformation of the Psyche in British Primary Care, 1880–1970* (London and New York: Bloomsbury Academic, 2014), pp. xiv, 268, £65.00, hardback, ISBN: 978-1-780-93726-7.

Rhodri Hayward's *The Transformation of the Psyche in British Primary Care, 1800–1970* provides an illuminating insight into the development of psychological models of selfhood that are relatively central to modern debates about medicine and health. It explores the historical connections formed between health, identity and personal history, investigates shifting conceptions of the psyche in modern Britain and probes into the changing interactions between doctors and patients as researchers constantly reconfigured the concept of psychological distress. In adopting this approach, Hayward provides an important contribution to a growing body of historical research into the development of modern psychological thought and its influence in individual, social and political domains.

In his first chapter, Hayward makes a subtle but important point that complicates standard interpretations of turn-of-the-century psychological thought. He maintains that the unconscious was understood in diverse ways as it became fashioned by a plethora of expert and lay individuals from the late eighteenth century onwards. In adopting this line of argument, Hayward makes a convincing case for reconsidering commonly accepted narratives of the Freudian discovery of the unconscious and the First World War as important watersheds. On the contrary, the unconscious emerges from Hayward's analysis as a contested, somewhat uncertain, space that became known through the activities of French hypnotists, the support of individuals in Britain including Frederic and Arthur Myers and a growing interest among health reformers. Yet psychological concepts took on diverse meanings. For occultists, the unconscious extended beyond the body as opposed to being firmly enclosed in the physical space of the body.

Hayward proceeds by positing that the new psychology was in many ways born through the intimate administrative workings of schemes such as the Workmen's Compensation

Act. Insurance compensation is, perhaps, a somewhat mundane site in which to locate developing ideas of an unconscious self, lacking the inherent glamour of the First World War or industrial modernity as wellsprings of psychological modernity. Nonetheless, as Hayward maintains, the extensive patient-record-keeping that came along with issuing sickness certificates led to the production of a wealth of psychological data, allowing for a new analysis of biographical medicine that helped psychological thought secure a foothold in psychiatric and general practice. In the 1930s, James Halliday made effective use of patient records to track what he saw as the shifting psychological makeup of British society in a transitional period marked by economic downturn and widespread neuroses.

In his third chapter, Hayward demonstrates that the interwar period witnessed a rapid infiltration of psychological thought in government strategies; a development that formed part of a growing desire to assess the psychic state of the British population in an era tinged with deep socio-political anxiety and a foreboding sense of national social crisis. In this period, new epidemiological models emerged that added complexity to explanations of disease aetiology that focused almost exclusively on the bacteriological. Instead, psychologists sought to link the onset of physical complaints such as rheumatism to psychological disturbance. Hayward refers to the problem of the middle-class housewife, a suburban neurotic, as a mentally troubled case study whose psychological analysis reflected an increasing turn towards transforming the private inner state of individuals into a public object of government. In turn, inner life, once psychologically assessed and pathologised, could be targeted as an object of both individual and social reform. As Hayward discusses, the psychological reform of individuals provided a basis for considering social reconstruction.

Nonetheless, those observing the mental well-being of the general public soon turned into objects of surveillance themselves. Hayward's fourth chapter argues that a mid-century desire to incorporate psychotherapeutic methods into general practice raised concern about whether general practitioners were in fact in a fit psychological state themselves to adequately use the force of their personality to address patient needs. If medical record-keeping had once provided a resource for socio-medical analysis, it now seemed plausible that those producing the records were in need of psychological assessment and personal reform. Hayward expands upon this intriguing theme by examining mounting mid-century concern about the personal influence of the physician in contributing to a patient's illness. To achieve this he examines various problematic questions. By constantly formulating new diagnoses and pathologising emotional and physical conditions, were doctors and psychologists encourage patients to consider themselves as ill? Does the emotional state of the physician influence his or her interaction with the patient? Is the power of medical influence and suggestion in itself productive of neuroses, psychological complaints and physical conditions? And how can an exemplary physician, conscious of the power of his interventions and insulated from the patient, be moulded? Hayward's concluding chapter explores the development of the placebo and its relationship with psychotherapeutic methods, adding insight into the ongoing role of psychotherapeutic models in an era marked by growing popularity in prescribing pharmaceutical remedies for mental illness.

In *The Transformation of the Psyche in British Primary Care 1880–1970*, Hayward offers an illuminating study that deepens historical understandings of the multiple

functions of psychological thought the emergence of new understandings of the self and how concepts of the unconscious underpinned certain therapeutic regimes, affecting how many general practitioners performed their therapeutic role. Hayward's study, an important contribution to a growing body of research on twentieth-century psychology, is condense but meticulously researched, thoughtfully crafted and well-presented.

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**Martin Halliwell**, *Therapeutic Revolutions: Medicine, Psychiatry, and American Culture, 1945–1970* (New Brunswick, NJ: Rutgers University Press, 2013), pp. 383, \$62.50, hardback, ISBN: 978-08135-6064-9.

*Therapeutic Revolutions*, the first part of a broader inquiry into American medical history and culture, focuses on the immediate postwar period and takes the analysis as far as the 1970s. The second part of this study, which is currently in development, will centre on the final three decades of the twentieth century, and could conceivably extend into the twenty-first century. Martin Halliwell, the book's author, is Professor of American Studies at Leicester University and an international authority on postwar US culture. In recent times, he has written about *Modernism and Morality*, *Images of Idiocy* and *Progressive Rock since the 1960s*. Yet, in this diverse, dynamic and complicated volume, he marshals a remarkable range of sources, from *One Flew Over the Cuckoo's Nest* to *The Bell Jar*, as a means to examine medicine and culture or, as he frames it, 'discourses of illness, health and therapy as they evolved in the 25 years following World War II'. He does so 'by combining discussions of subjects that range from national politics, public reports, and health care debates' with 'culture and the media'. A significant highlight of the book is its emphasis on race and mental health. Of course, it is well known that race and insanity have a long, variegated and troubled past in the United States, and such authors as Jonathan Metzl and Matthew Gambino have sought to locate blacks within asylum history and expose how race is written into definitions of mental illness. Yet, here Halliwell, to his credit, enhances the understanding of the relationship between African American mental health and institutional psychiatry by viewing the negotiation through the lens of culture. Using such films as *Shock Corridor* and *A Raisin in the Sun*, as well as novels, including Richard Wright's *The Outsider* and James Baldwin's *Another Country*, Halliwell recognises how mental health services have been shaped by and delivered in a racially charged milieu. While doctors' files and patient records are not used here, this absence does not markedly detract from Halliwell's cultural analysis.

More broadly, having written numerous well-received and influential monographs on music, fiction and film, among a host of other topics, Halliwell is well positioned to describe the intersection of medicine and culture. With *Therapeutic Revolutions*, which builds on recent scholarship by Michael Staub, Bradley Lewis and Linda Sargent Wood, Halliwell convincingly positions medicine and psychiatry if not within, then certainly alongside, American culture. He argues that the 'broad social interactions and the