Book Reviews

certainly sound if a bit obvious. In a more narrowly-focused and somewhat polemical article, Martin Dinges assesses the impact of Foucault—in his eyes lamentably meagre—on German historiography.

The following section on 'Hospitals and asylums' examines particular experiences in specific places and times. All these essays modify, and some fracture, the theoretical models offered by Foucault, Elias, and Oestreich. Morris Vogel's lucid and wideranging review of the forces that transformed American hospitals combines some older materials with shrewd new observations on the heterogeneity of factors affecting hospitals and hospital personnel. His is a version of hospital history fully integrated into the broader currents of American life. But all parts of this section (including the one by Christina Vanja, who is perhaps most Foucauldian in her approach) carry us a long way from Foucault's abrupt "ruptures" and precipitate "births". Articles by Colin Jones on 'The construction of the hospital patient in early modern France', by Guenter Risse on the ante-natality of the clinic, and by Robert Jütte on syphilis hospitals in early modern Germany press home the point that things changed slowly and that the historical path leading to the "modern" hospital twisted and often turned back upon itself. All these authors remind us how disparate, and sometimes unexpected, were the influences on that evolution. Renate Wilson's work on the Francke Foundations, for example, reveals "the artificiality . . . of postulating the enlightened versus the religious mind as the standardbearer of social change" (p. 152).

This volume will not strike the last blow in the three-sided battle among adherents of Foucault, Elias, and Oestreich. Its opening essays, and its overall structural integrity, however, offer the uninitiated a solid, thoughtful and by no means simplistic introduction to the history of institutions of confinement. The treatment of assorted institutions reflects an emerging new orthodoxy; one that highlights the multifunctionality of such institutions (confinement and control were not their raison

d'être), their convoluted course over several centuries, and the need to consider the many actors involved in hospital history, not just patients and physicians (or surgeons) but nursing orders, philanthropists, and religious reformers among others. All in all these authors present a complex, and thus particularly authentic and reliable view, of how hospitals and asylums developed by taking into account the many elements that have moulded Western "institutions of confinement" (sic!) over the past four hundred years.

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Ian Robert Dowbiggin, Keeping America sane: psychiatry and eugenics in the United States and Canada, 1880–1940, Cornell Studies in the History of Psychiatry, Ithaca and London, Cornell University Press, 1997, pp. xvi, 245, £29.50, \$37.50 (0-8014-3356-8).

Keeping America sane is a valuable addition to the still small number of first-rate studies we possess of any aspect of the history of twentieth-century psychiatry. It also represents one of the few sustained attempts at developing a comparative history of psychiatry, usefully comparing and contrasting developments in the United States and Canada over a period of more than half a century, and suggestively linking the differences in the two psychiatric histories to enduring disparities in the political cultures of the two neighbours. In the course of tracing the attractions of eugenics for a number of leading figures in North American psychiatry, Ian Dowbiggin likewise enriches our understanding of this extremely powerful movement—delineating both the extent of psychiatric involvement in the development and application of eugenic ideas (through programmes of compulsory sterilization of the mentally "defective", for example, and through their interventions in debates over immigration policy); and the limits and complexities of that involvement, including its intra-professional roots.

Book Reviews

Two figures dominate Dowbiggin's treatment of the subject: the American psychiatrist, G Alder Blumer, superintendent successively of the Utica State Hospital in New York, and of the Butler Hospital of Providence, Rhode Island, and sometime president of the American Medico-Psychological Association; and the Canadian, Charles Kirk ("C.K.") Clarke, arguably the most famous psychiatrist Canada has produced, superintendent of Rockwood Asylum and the Toronto Asylum, and subsequently dean of the Faculty of Medicine at the University of Toronto and superintendent of the Toronto General Hospital. Much of the narrative is drawn from their papers, and the analysis of the evolution of their views in relation to their changing personal circumstances underpins and gives weight to many of Dowbiggin's central conclusions. But the book ranges much more widely than this, and the views and actions of many other leading figures within the profession also receive considerable attention.

Fundamentally, Dowbiggin believes that the infatuation of early twentieth-century psychiatry with eugenics should not be reduced to the power of racial, class, and gender prejudice (though he shows that these were by no means minor aspects of the story). Instead, he places professional concerns at the very centre of his account, insisting that the "morally and scientifically dubious decisions" made by these fallible human beings must be seen as rooted in the vulnerabilities and professional marginality of their chosen speciality. So far from it being surprising that such self-professed humanitarians should become protagonists of "a cause their profession might prefer to forget", Dowbiggin suggests that the more pertinent question is "why any psychiatrists [of the period] resisted the eugenic message . . .". The sense, as one of their number put it, that psychiatric therapeutics was simply "a pile of rubbish", when coupled with the relentless accumulation of chronic patients and the growing pressures on the profession exerted by parsimonious politicians, was more than sufficient to convince most psychiatrists that "mental

diseases were chronic ailments whose incidence could only be reduced through extreme preventative measures".

Dowbiggin is careful to point out, however, the limits of psychiatry's loyalty to eugenics, and the shifting stance of individual practitioners, complexities he persuasively links to altered professional and career contingencies. Ultimately, he suggests, it was the combination of the discredit heaped upon programmes of asexualization by their association with the horrors of Nazism and the ability of many in the profession "to cut their ties to 'the enduring asylum'" after World War Two that led to an evaporation of their earlier enthusiasm for eugenic ideas. The profession, he shows us, was populated by careerists, not proto-Nazis.

One can raise a few quibbles about Dowbiggin's account. In some places, his narrative is excessively dependent on a small handful of secondary sources. In passing, too, he badly misconstrues the relationship between Alan Gregg and the Rockefeller Foundation on the one hand, and American and Canadian psychiatry on the other. (So far from having "little sympathy for psychiatry" and emphasizing "disinterested laboratory medical research", Gregg and the Foundation made psychiatry their major funding priority during the 1930s.) Fundamentally, though, this is a well-researched and original monograph that deserves a warm wellcome. Together with Lynn Gamwell and Nancy Tomes' fine illustrated survey of Madness in America, it sets a high standard for the new series of Cornell Studies in the History of Psychiatry.

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David Wright and Anne Digby (eds), From idiocy to mental deficiency: historical perspectives on people with learning disabilities, Studies in the Social History of Medicine, London and New York, Routledge, 1996, pp. viii, 238, £45.00 (hardback 0-415-11215-X).