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China and mainly focused on foreign countries. This last chapter should be of great use to historians struggling to assess historical materials from the PRC. In the conclusion, Fang clarifies the core concept of the 'emergency disciplinary state' and discusses similarities to how the PRC has responded to the COVID-19 pandemic.

Fang's core argument is that the PRC's emergency disciplinary state was established in reaction to the El Tor cholera pandemic. However, the book can also be read as an account of the resistance, confrontations, and negotiations that occurred between various strands of power in moving towards that style of governance, which was not without its blind spots: public health staff encountered difficulties and even violence when attempting to check inoculation certificates of officers in the People's Liberation Army (Chapter 4); overseas Chinese were exempted from vaccination certificate checks because the PRC needed their remittances and skills (Chapter 4); and the Zhejiang government adapted its 1963 vaccination campaign to avoid peak farming season due to the passive participation of local cadres and farmworkers the previous year (Chapter 6). There was therefore some flexibility in the PRC's seemingly strict approach to epidemic control.

It is unfortunate that Fang does not analyse the sources cited in the text more often, as the rare occasions where he weighs in on conflicting information encountered in the archives (pp. 41–3) are enlightening. Chapter 2 also includes some passages in which the causal relationship between environmental and social factors and the public health situation are not clearly established by historical sources or by the author himself (pp. 74–5, 100).

Fang's account of this much-overlooked public health crisis draws on abundant historical materials. The book is a must-read for historians and students interested in the PRC's health policies, as well as for those curious about crisis governance in the PRC at the national, provincial, and county levels during transitional years between the Great Leap Forward and the Cultural Revolution.

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Sethina Watson, On Hospitals: Welfare, Law and Christianity in Western Europe, 400–1320 (Oxford, UK: Oxford University Press, 2020). 376 pp. ISBN 978-0-19-884753-3.

First of all, readers of this periodical must be reminded that medieval hospitals have little to do with health care or healing. Basically, they were meant for care of the sick and poor, to help them to survive until a good death. But the working of hospitals is not an issue of Sethina Watson's book anyway. It is almost exclusively a book on law or, more exactly, on no law. Generations of historians have been frustrated by the silence of canon law, as forged by popes, councils and scholars for the entire Church, about matters of hospitals, their legal foundations, their place in the hierarchy, their organisation and rules. While there is an enormous amount of regulations surviving for individual hospitals on local level, as well as many papal confirmations and privileges, the important and, from the thirteenth century onwards, papally approved collections and compilations of canon law, and, accordingly, scholarly commentaries on it, contain only a few mentions of hospitals at all. If there were a section on them in canon law collections, it would probably have been titled 'De hospitalibus', and the book's title 'On Hospitals' is modelled on this naming practice. But it does not attempt to provide the missing chapters. Instead, Watson sets out to explain why they are not there. The result is a highly technical discussion and analysis of royal/imperial law, papal letters, ecclesiastical statutes and their shifting interpretations, which remains nevertheless remarkably readable.

The big question is, whether at all or how to fit hospitals into the ecclesiastical hierarchy, and what members of the latter thought and did about it. The unsatisfactory state that canon law has hardly anything to say on hospitals has led to attempts to conjure something up or to explain the problem away. Studies trying to offer a solutions or to find where ecclesiastical hospital law is hidden after all have acquired an influential status. It has been easy (for this reviewer, too) to cite them dutifully, and to move on to one's own special problem or regional study. Watson, instead, politely but mercilessly points out the weaknesses and contradictions of these works, often placing them firmly in the context of national research traditions.

Her own approach is to use, rather daringly, the lack of almost everything as a tool and to revisit the well-known scraps and bits of legal texts dealing with or mentioning hospitals and other institutions of welfare, beginning with Roman law, Carolingian capitularies and Lombard episcopal councils' statutes. Contrary to many earlier works, the canons are regarded in their contexts instead of isolated, with a focus not only on what they are saying, but also on what they remain silent. In accordance with current research, they are not considered as dispositions put firmly in place by uncontested authorities, but as working texts which could be taken up, interpreted, and even tailored to more fitting shapes in other contexts. Therefore, their transmission and textual histories are analysed too.

It appears that the early medieval statutes, eventually adopted by the popes, set a pattern which was to remain: the foundation of hospitals and other welfare institutions was an act of Christian charity, which had to be maintained after the founder's or donor's death, and it served the common good. Therefore, testamentary law was applicable and the State, or what replaced it, had to safeguard the donor's will, and this was what bishops had to do. They acquired no jurisdiction over hospitals via their office, but were obliged to act as guardians and to supervise the administrators. The deeply Christian purpose and the principle of inalienability of ecclesiastical property might have invited the inclusion of hospitals in the Church's organisation and law. However, even when scholars in the increasingly sophisticated canon law of the twelfth and thirteenth centuries, such as Bernard of Pavia, Gilbertus Anglicus, Johannes Teutonicus and Hostiensis, discussed concepts of ecclesiastical communities, sites and property, and distinguished what was 'sacred', 'religious' or 'pious', hospitals were hardly ever paired with monasteries. Instead, they were carefully referred to as sites or objects and not as communities, although the persons running them often lived like a convent. Sporadic attempts to tighten episcopal control, or to impose monastic rules on them, were not followed up and had little immediate effect. Some of them have been considered as milestones in hospital history, but Watson roots them up convincingly. However, as she points out, under the heading of 'religious houses subject to the bishops' hospitals became a matter of canon law after all and appear as such in its decisive compilation, the Liber Extra. In the early fourteenth century, the council of Vienne dedicated a long chapter to them. But again, the old concept prevailed: the hospitals' superiors, whoever they were, were obliged to keep them intact, sufficiently provided for and working according to their institution, and if they failed to do so, the local bishop had to intervene. Popes, bishops and legal scholars obviously had clear ideas of what hospitals were, but as they respected their foundations as 'private' acts, there was no need to deal with them in canon law further than to provide means of safekeeping them.

Although Watson claims to have written 'a historical not a legal analysis' and to explore 'the pattern of laws and legal ideas that underpinned institutional constructions of welfare' (p. 134), readers have to bear in mind that this is still a history of ideas, even if the author rightly pays attention to the interplay of ideas and practical life. On the ground, the canonistic self-restraint left room for many problems. First of all, clearly the oratories or chapels attached to most hospitals were an ecclesiastical, 'sacred' matter, and so under the bishops' jurisdiction. But where to draw the line between their affairs and those of the hospital? And as silence is hardly a guideline, one cannot expect that everybody understood, or wanted to understand, that ecclesiastical authorities ought to keep their hands off hospitals. But this does not contradict Watson's explanation of this silence, which solves or even dissolves a problem which has bothered historians long enough.

Her painstaking work on the sources is documented not only in a wealth of footnotes, but also in two appendices, containing the reconstruction of Alexander III's rule for the Crociferi and a critical edition of

the legate Robert de Courson's decree on hospitals from 1213, which has been considered as pathbreaking but appears to be a limited and local initiative rather than a general reform. The bibliography, not without some typos, privileges publications in English, but contains good numbers of French and German ones as well. Overall, this is an important work of scholarship, not only offering an answer to a fundamental question in hospital history, but also demonstrating with an up-to-date approach, how medieval law worked and was worked with.

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