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seems rather too neat. And in her eagerness to identify the mixed motives of the medics who voluntarily proffered their services and the middling sort benefactors whose subscriptions kept the institution financially afloat, she may underemphasize the role of pure human compassion. Certainly a genuine desire to assist the sick poor was not incompatible with “a shrewd calculation” (p. 115) of the social capital one could accrue, but to conclude that “far from being disinterested Good Samaritans . . . Georgian patrons of the Bath Infirmary were able to follow a series of economic, social, political and ethical goals” (p. 387) is perhaps to end on slightly too cynical a note. Borsay is apt to belabour her points and the comprehensive summaries which preface every chapter become somewhat formulaic: one suspects that some of the detail in the book might have been sacrificed without diminishing its overall impact. Even so, there are one or two gaps. The author comments that at Bath the holistic assumptions which underpinned balneology helped preserve “a degree of meaningful consultation” (p. 128) between doctors and their clients at a time when scientific knowledge and terminology was widening the gulf between them and erasing the patient’s narrative from hospital records. And yet there is relatively little consideration of clinical encounters between practitioners and patients, of the reactions of the latter to the philanthropic endeavours of the élite, or indeed, of the medical techniques which physicians and surgeons employed. Nor is much room made for discussion of the relationship between the regimen of treatment experienced by the inmates and the fashionable practice of taking the waters which centred on the Pump Room.

These reservations aside, *Medicine and charity in Georgian Bath* is a model contribution to Ashgate’s History of Medicine in Context series: deft, perceptive and carefully crafted, it takes us beyond the imposing portico of the Infirmary to a

nuanced understanding of the values and preoccupations at the heart of eighteenth-century society itself.

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Martin Gorsky, *Patterns of philanthropy: charity and society in nineteenth-century Bristol*, Studies in History, New Series, vol. 15, Woodbridge, Boydell Press for the Royal Historical Society, 1999, pp. xiv, 274, illus., £40.00, \$75.00 (hardback 1-086193-2455).

In the past twenty years, the espousal of a mixed economy for contemporary welfare has encouraged increasing historical interest in voluntarism. *Patterns of philanthropy* is a valuable addition to the literature. Based on a meticulous study of the primary sources for Bristol, the book opens with a useful overview of the historiography, from the Whig/liberal tradition of the early twentieth century to the new social history of the 1960s and 1970s. Martin Gorsky’s aim is to challenge the “underlying assumptions” of state welfare and class conflict that these approaches generated, turning to economic theory for “a more dispassionate guide to research questions” (p. 10). Though why this methodology should be any less value-free is unclear, the subsequent deployment of concepts like state failure, market failure, and contract failure does yield a series of nuanced interpretations which offer fresh insights on endowed charity and the role of voluntary associations in urban politics.

After a first chapter on the Bristol context, the book is divided into two sections. Endowed charities are the subject of Part I. Chapter 2 gives sound empirical backing to a chronology of decline from the mid-eighteenth century, previously evidenced only by “general inference or ahistorical assertion” (p. 39). Chapters 3 and 4 put forward explanations for this

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demise. The author stresses how a perception of corruption arose from the “politicisation of charity” (p. 85) at local and national level, and from the “marginalization of the parish” (p. 109), which had formerly served as the perpetual body for administering trusts. In Part II, the focus shifts to the voluntary societies that took over from endowed charity. Chapter 5 examines the antecedents of these subscriber associations in guilds, parishes and chapels, and the organizations for sociability that emerged in the post-Restoration town. Chapter 6 tracks three distinct phases in the trajectory of voluntary charities: the “swelling river” (p. 139) from 1790 to 1820, when foundations multiplied rapidly; “fragmentation and specialization” (p. 147) from 1820 to 1860, when philanthropic organizations defined their parameters more narrowly, or became more closely related to religious congregations; and “proliferation and change” (p. 154) from 1850 to 1880, when new client groups were recruited, and the power of subscribers weakened. Chapters 7 and 8 then address the social characteristics of such donors. Women became more active from the early nineteenth century, albeit largely through societies that were managed by men. These men were pursuing a middle-class identity, but their opinions were diverse and so their philanthropy could not be reduced to a monolithic ideology. Nor was it without limitations. For Gorsky concludes that despite the “ability to develop new forms of social intervention and to win them public support” (p. 228), Bristol’s nineteenth-century voluntary sector was unable to achieve financial security.

Medicine does not feature prominently in this volume. The Bristol Infirmary attracts most attention; several passages critique Mary Fissell’s *Patients, power and the poor in eighteenth-century Bristol* (Cambridge University Press, 1991)—in particular, her emphasis on the social discipline of the lower orders, and the withdrawal of the old elite from hospital government. There are

also brief references to a number of associated schemes besides the Infirmary: for example, the Bristol Dispensary; the Bristol Lying-In Institution; and specialist hospitals for diseases of the eye and of the skin. Endowed charities of a medical nature, however, were not common. For readers of this journal, therefore, it is the general thrust of *Patterns of philanthropy* rather than its detailed content that will be of most relevance. Such scholarly treatment of the voluntary mechanism which produced so many medical projects has much to stimulate the medical historian.

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V M Leveaux, *The history of the Derbyshire General Infirmary, 1810–1894*, Cromford, Scarthin Books, 1999, pp. viii, 151, illus., £18.95 (hardback 1-900446-00-6).

This book might be described as being architecturally orientated rather than medically, which is perhaps not surprising when one reads that in a Special General Meeting held on 29 July 1890, it was decided “That the most satisfactory course would be to erect an entirely new hospital on the present site, but to the north or south” of it. Earlier in the year grave building defects had been found; by February of the following year it was decided that the Infirmary was to be entirely rebuilt, even the newest block, the Nightingale Wing, could not be saved but would be used for administration whilst rebuilding was carried out.

Derbyshire had been rather late in providing a general hospital and it was not until April 1803 that a subscription list was started, and even then it was seven years before its doors were opened on 4 June 1810. The moving spirit of the Building Committee was William Strutt, eldest son of Jedediah, founder of a successful hosiery