best served within the parish of their birth. Maria Bogucka's essay on Danzig provides an interesting contrast to this picture. The failure of the city's extensive systems of hospitals, workhouses and poorhouses to cope with the relatively high proportion of transient workers meant that traditional forms of charity such as alms giving and begging continued throughout the period.

Robert Jütte discusses how health care and poor relief were seen as two sides of the same coin by contemporaries. Sickness and unemployment were debilitating both to individuals and their dependants and to those who supported them. In this respect, hospitals and workhouses served a similar purpose, the former in trying to rehabilitate the sick to the workforce, the latter in providing some form of productive labour or education. In either case, care for the sick or the poor was not specifically *medical* in anything like the modern sense. Until well into the eighteenth century, the majority of healers were likely to be laymen and women or occasionally surgeons. Maria Bogucka's essay is notable for its attention to the actual care that might have provided for sick poor; while E I Kouri's work makes a welcome attempt to look at poor relief from the viewpoint of the poor themselves, in particular their recognition that they should pray and show humility.

This is a broad-ranging and detailed collection that should help to inform as well as stimulate further research in this area.

Alexander Goldbloom,

Wellcome Institute for the History of Medicine

Norbert Finzsch and Robert Jütte (eds), Institutions of confinement: hospitals, asylums, and prisons in Western Europe and North America, 1500–1950, a publication of the German Historical Institute, Washington, DC, Cambridge University Press, 1996, pp. ix, 369, £45.00, \$69.95, (0-521-56070-5).

To say that Michel Foucault casts a long shadow borders on the trite if not the positively

absurd, for it is impossible to escape the impact his work has had on historical writing over the last thirty years. More recently, however, Norbert Elias and his "process of civilisation" have come to command almost as much respect. The dual influence of these men-neither an historian-has strongly affected the writing of cultural and medical history. Indeed, we now have something like two "schools" of historians who have been vigorously, and sometimes stridently, asserting the superiority of one over the other. Less familiar, except to the most informed of English-speaking audiences, is the work of Gerhard Oestreich whose "social regulation" (which he distinguished from Elias's "social disciplining" and from Max Weber's theory of "rationalization") has had much more impact on the writing of social history (especially on the history of poor relief) than on medical history and even then mostly in Germanspeaking countries. This volume is a seriousand for the most part successful-attempt to appraise these theories and to measure what their "different outlooks on the process of social discipline" have meant for the writing of the history of hospitals, asylums, and prisons. While it is, of course, artificial (and wrong) to separate the history of any of these institutions from its mates, this review will concentrate on the first half of the book which treats hospitals and asylums.

Opening articles by Norbert Finzsch and Pieter Spierenburg evaluate how Elias, Foucault, and Oestreich assembled their individual "historical theories of confinement". Finzsch introduces the theoretical issues and briefly describes how the following essays fit the broader purpose of the volume. Spierenburg summarizes "four centuries of prison history" and, not too surprisingly, stresses the peculiarity of the Dutch experience where "from an early date [the sixteenth century], the prevention of crime was seen as a major objective of the prison-workhouse" (p. 23). Spierenburg's chief point, that "imprisonment is a reflection of the cultural climate of the society in which it develops . . . [and] reflects different aspects of that climate in different periods" (p. 35) is

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.

Mary Lindemann, Carnegie Mellon University

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.