

Book Reviews

work in social history of psychiatry (p. 38). It is certainly true that social historians have too often ignored or underestimated medical theories, but they have uncovered a great deal about medicine in action. However, since the writing and publication of textbooks, treatises etc. is not a disembodied, ahistorical activity, one might turn Kutzer's claim upside-down and regard social history as a background for the interpretation of medical theories. It is true that the relation between theory and practice and between high and low (medical) culture is a tricky problem and a challenge to any historian of medicine. But a historian who aims to write a revisionist history of early modern psychiatry should at least address these issues. Despite this criticism, Kutzer's attempt to overcome traditional opinions on early modern understanding of madness is very welcome. He presents a corpus of literature that has been largely ignored hitherto.

Michael Hagner,

Max Planck Institute for the History of
Science, Berlin

Christopher Lawrence and Anna-K Mayer (eds), *Regenerating England: science, medicine and culture in inter-war Britain*, Clio Medica 60, The Wellcome Institute Series in the History of Medicine, Amsterdam and Atlanta, Rodopi, 2000, pp. iii, 316, £45.00, €68.00, \$64.00 (hardback 90-420-0911-X), £15.00, €23.00, \$21.00 (90-420-0901-2).

"Regeneration" is a useful portmanteau term to describe persistent and intertwined twentieth-century and, in this case, English preoccupations with community, citizenship and national cohesiveness and vitality. Attaining cultural prominence in the 1880s, this cluster of values peaked between the 1920s and 1950s and re-emerged in evangelical New Labourite guise in the early 1990s. Lawrence and Mayer's well edited

collection confines itself to the inter-war period. In doing so, it distances itself from an ongoing debate, principally associated with the names of Steven Fielding and Nick Tiratsoo, concerned with interactions and contradictions between war-time and immediate post-war labourism, socialism and nationhood. Nevertheless, four of the contributors to this volume succeed in implicitly linking their subject-matter to at least some of these longer-term issues. Tim Boon provides an excellent in-depth reading of Paul Rotha's multi-layered *The face of Britain* (1935): the role played by largely negative perceptions of nineteenth-century industrialization in the shaping of the idea of regeneration features more convincingly in this paper than the others. Elizabeth Darling analyses relationships between environmentalism, housing reform and the construction of community. Abigail Beach, who has already contributed to the historiographical developments mentioned above, creatively revisits the potentially clichéd theme of the inter-war health centre. Mathew Thomson presents a highly original, structural account of the processes whereby mental illness and "deficiency" partially defined and were themselves negatively delimited by the idea of full and responsible membership of a national democracy.

On the crucial theme of Englishness, Michael Bartholomew's essay on H V Morton is disappointing: no single publication by this prolific author is subjected to genuinely detailed textual or sub-textual scrutiny. In contrast, the co-editors seem to be very much on home ground. Christopher Lawrence's survey of the collective *mentalité* of an inter-war "medical patriciate" concludes that his subjects' "response to the crisis years in which they lived was a cocktail of despair and hope, faith in progress and nostalgia" (p. 61). Lawrence might have added that the same could have been said of the great majority of inter-war novelists, poets, politicians and planners. Anna Mayer contextualizes Sir Arthur Keith's plea to the

annual meeting of the BAAS in 1927 that there should be a comprehensive moratorium on scientific research. She also draws on the controversy to deconstruct dominant representations of rationality and Englishness. Working in the under-researched field of the history of inter-war university education, Keith Vernon describes University Grants Commission-inspired efforts to inculcate “culturally deprived” provincial students with “high levels of proficiency with a largeness of view, derived from . . . a disparate yet cohesive community of fellow scholars” (p. 180). In a pioneering voyage into the somewhat arcane world of biopolitics, Rhodri Hayward discovers unexpected intellectual threads connecting the ubiquitous Sir Arthur Keith to the maverick Morley Roberts, author of *Warfare in the human body* (1920) and *Malignancy and evolution* (1926). Finally, Lesley Hall provides an overview of the hectic life of Stella Brown, an activist in the Labour and Communist parties, the Fabian Society, the Workers’ Birth Control Group, the Malthusian League and (briefly) the Eugenics Society. Brown appears to have been less concerned with theoretically defining citizenship and regeneration than living the life of a regenerated citizen—and woman.

This collection contains a number of incisive contributions. However, it would have made for more compelling reading had the time-frame been extended to the mid-1950s, the moment at which patriotic “regeneration” came to be radically modified within increasingly consensual ideological and party political frameworks.

Bill Luckin,
Bolton Institute

Anne Hardy, *Health and medicine in Britain since 1860*, Social History in Perspective series, Basingstoke, Palgrave, 2001, pp. xi, 220, £14.99 (paperback 0-333-60011-4).

Anne Hardy has done those studying, and indeed teaching, the history of medicine

a considerable service with this work. Tightly and authoritatively written, without at any point lapsing into obscurity or unnecessarily technical language, the book deals chronologically with the period from the middle of the nineteenth century to the present day. Among the important issues which receive particular emphasis or are especially well developed are, first, the significance of war in shaping attitudes towards and developments in health and medicine. The Boer War, for example, raised widespread fears about the health of the nation, while the Great War was, as Hardy remarks, a watershed in a range of ways. Indeed this argument can be extended, as it is not explicitly in this particular work, to argue that the Cold War too had an impact on the way western societies viewed and operated their health and welfare systems. Second, the book as a whole benefits considerably from the author’s knowledge of medical science and her ability to present it in a comprehensible way. This is not always an easy task in a work of this sort but it is dealt with here in a skilful manner, thus potentially opening up the subject to a wide range of students of modern British history. Third, the chronological span of the book in itself is a positive attribute in that it allows us to move from the environmentalist, public health concerns of the mid to late nineteenth century (what the author describes as “an age of great cities”); through the rise of “scientific medicine” and the emphasis on individual care, an approach which reached its high point around the time of the creation of the National Health Service; to our own, more sceptical, age. As Anne Hardy points out, by the late twentieth century the British public was becoming increasingly conscious of problems, human and institutional, in the ways in which health care was being implemented; of the limitations on what medicine of itself could “deliver”; and of ongoing inequalities in health provision and outcomes. Placing such concerns in their