

Book Reviews

YANNINCK RIPA, *Women and madness: the incarceration of women in nineteenth-century France*, transl. Catherine du Peloux Menagé, Feminist Perspective Series, Cambridge and Oxford, Polity Press, 1990, pp. 175, £29.50 (0-7456-0454-4).

We meet a parapraxis on p. 86: "There is a clear analogy to be drawn between asylums and hospitals and indeed it was a truism for the madwoman." Read asylums and *prisons*, as the context makes clear. Ripa moreover suggests more than once that the French "special doctors" were a specially backward lot by the scientific standards of the day.

Would she say the same of their colleagues abroad? Certainly, Ripa thinks that "there are common attitudes to madness throughout our Judeo-Christian civilization" (p. 43). But elsewhere she shows, more convincingly, how nervousness about politically-active women was not the least interesting legacy of the events of 1789, 1848, and 1871, and, more generally, that the mad-doctor's discontent with civilization acquires a certain edge in a country that remains unique in the Western world for that history of violence in the streets.

Surprisingly effective are the quotations from such unpromising-sounding sources as the entry 'Femme' in Panckoucke's *Dictionnaire abrégé* (1821-6): women, "cannot exist in their own right and are forced to use the people around them to strengthen their own lives" (p. 58). Ouch. Ripa is one of the few psychiatric historians to ask, simply, whether the experts *believed* the astounding rubbish they wrote—she's not sure. More familiar, for example from Roy Porter's writing about John Haslam, is the related notion of how the language of the committal forms can unveil for us the "hidden anguish" and "fantasies" of their medical authors (p. 13). From this point of view, Ripa writes, only "borderline" cases that "show the boundary between normality and madness" are described in the book. Now this is back-door retrospective diagnosis, and that always leads to trouble: here, most notably, in Ripa's assumption that post-partum insanity can be "excluded from the discussion because of [its] physiological basis" (p. 53), which she seems to identify with puerperal fever. Her cool accounts of how society made horrors out of puberty and menopause show that Ripa could have done better by childbirth.

This is a model of *haute vulgarisation* that wears its learning, and a lot of work in the Salpêtrière archives, lightly. Lapses into ellipsis and sometimes sheer incomprehensibility are forgivable in a book that has so many interesting things to say about menstruation, washerwomen, and the novels of Eugène Suë (rich sources of madwomen, they were banned from at least one asylum library). The chapter 'Outcasts from the family' utilizes admission and discharge registers to show how *La ronde des folles* (the book's French title) was circumscribed by the impossibly self-contradictory agenda laid down for working-class women of all ages by their male relatives and employers in an oppression more crushing than any government, or anguished asylum superintendent, could hope for.

Christine Stevenson, Wellcome Institute

SALLY G. McMILLEN, *Motherhood in the Old South: pregnancy, childbirth, and infant rearing*, Baton Rouge and London, Louisiana State University Press, 1990, 8vo, pp. xiii, 237, £23.70.

In the American South between 1800 and 1860, Sally McMillen maintains in this engaging study, motherhood was both more celebrated and more perilous than in other regions of the country. On the one hand, Southern culture prided itself on rigorously delimited gender roles, and singularly glorified motherhood as women's "sacred occupation". On the other, maternal mortality rates were higher there than in other regions. McMillen attributes this partly to the unhealthy climate of the South, and partly to southern physicians, who, she asserts more than establishes, clung tightly to traditional heroic practices at a time when their colleagues elsewhere were more open to innovation and change. Against this backdrop, McMillen traces in moving detail how white women managed pregnancy, childbirth, infant feeding, childhood illness, and, all too often, maternal bereavement. While women sometimes are portrayed here as passive victims of the expectations of a patriarchal society and the ignorance of their doctors, as often they are cast as active players, embracing motherhood as the most significant cultural role society afforded them and making choices about how they would fulfil this role.

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What makes McMillen's work exceptional is extensive research in letters and diaries that brings the rich texture of real lives to the narrative. We hear the voices of antebellum southern women, who testify to the emotional and physical strains of motherhood as well as to the meaning they found in it. The words we hear, though, were almost all spoken by the most privileged women in southern society. The sources that survive in abundance are those of middle- and upper-middle class white women, and, as the author recognizes, the book tells only their story, a focus oddly out of keeping with the energetic exploration of the yeomanry so prominent in recent southern historiography. Motherhood as it was experienced by white women of the lower classes, still less by African-American slaves, is little explored. More than this, while the book dwells on the white male doctors who attended childbirth, it says little about the perceptions or practices of midwives, white or black, despite the fact that more often than not, they were the sole medical attendants even when middle- and upper-class white southern women were brought to bed.

This is a fine book that admirably exemplifies the programme to rewrite the history of health and healing from the sufferer's perspective. Yet, perhaps it equally displays one potential risk of that programme, to inform a new brand of élitism in our representations of the past.

John Harley Warner, Yale University

RICHARD A. MECKEL, *Save the babies: American public health reform and the prevention of infant mortality, 1850–1929*, Baltimore, The Johns Hopkins University Press, 1990, 8vo, pp. xi, 302, illus., £30.50, \$42.50.

Richard Meckel has written an excellent account of the American campaign against infant mortality in the critical period between 1850 and the Depression of 1929. Although reductions in infant mortality have been impressive, the United States' infant mortality rate is still one of the highest among developed nations. Meckel's historical analysis of the debates, policies, and programmes against infant mortality is therefore an examination of both success and failure. By examining the changing strategies used to reduce infant mortality and their limitations, he provides a narrative that is at once historiographically sophisticated, and highly relevant to contemporary policy debates.

Throughout the period of Meckel's study, child-health reformers perceived infant mortality as primarily a problem of the urban immigrant poor. Between 1850 and 1880, infant mortality was defined and addressed through efforts at general environmental reform. From about 1880 to 1910, concern narrowed to a concentration on infant feeding, focused particularly on the quantity and purity of the urban milk supply. Between 1910 and 1930, infant health reformers redefined infant mortality as a problem of untutored motherhood, and tried to educate immigrant women about better ways to care for their infants. This study details the shifts and transitions in policy from 1850 to 1929 and concludes with a fine but regrettably brief epilogue outlining the subsequent policies between 1930 and 1990.

Meckel is mainly concerned to analyse the "discourses" around infant mortality; in other words, he is interested in the way that social conditions, practices, and ideology have helped shape the definition and redefinition of the problem and hence the various attempts to address it. He offers, or tries to offer, an analysis that is sympathetic to the efforts of individual reformers, while remaining highly critical of the structural limitations of reform. He is thus sensitive to the various interests and contributions of paediatricians, obstetricians, and public health doctors, while deploring the increasing medicalization of the problem of infant mortality—the ways in which American policy efforts have tended to ignore the social and economic problems of motherhood, while emphasizing the need for access to medical and obstetrical care.

Meckel makes an important point about the racial and ethnic concerns of American social policy. He makes good use of comparative context to show, for example, that where the British saw class differentials, Americans perceived only ethnic and race differences. The latter view was culturally compatible with a behavioural analysis of infant mortality: babies died because their mothers did not provide proper care.