## Book Reviews

EDWARD H. BEARDSLEY, A history of neglect: health care for Blacks and mill workers in the twentieth-century South, Knoxville, The University of Tennessee Press, 1987, 8vo, pp. xvi, 383, illus., \$34.95.

The concern of this study is a crisis of health among two groups of Southerners in the twentieth-century, Blacks on the one hand and mostly white millworkers on the other. More specifically the concern is for the health of these people in the states of Georgia and North and South Carolina, although most of Professor Beardsley's conclusions are applicable to the South as a whole.

The beginning of this century found both Blacks and millworkers with very serious health problems. Tuberculosis, syphilis and pellagra were winnowing the black population with some vigour, while a high rate of infant mortality was hindering the replacement of those lost to disease. Smallpox, lung ailments, pellagra, and hookworm (called by some "cotton mill anemia") constituted the major (or at least the most prominent) enemies of millworker health.

The reasons for these twin crises of health were in part biological. Blacks, for example, were susceptible to tuberculosis and pneumonia because of an abbreviated experience with them historically. Similarly Whites were (relative to Blacks, at least) susceptible to hookworm infection. But the major reason for their high rates of morbidity and mortality stemmed from the "second class" status of the millworker and the "third class" status of the Black in a "three-tiered edifice" (p. 1). The "respectable whites" at the top had managed to enmesh the other tiers in a paternalistic net that assured their poverty as well as their subservience, kept them ignorant and more or less isolated from Southern health care systems. Thus, as Beardsley shows, the poor hygienic conditions of the mills with dust and humidity, coupled with the poor sanitary habits of the workers, ensured an abundance of lung and hookworm disease for one group; while segregation generally, and segregated medicine in particular, meant little medical attention for the Black. Poverty, of course, was the cause of the constricted diets that produced pellagra for both.

As the century moved along, tuberculosis declined steadily among Blacks until by the late 1920s heart disease had become their most important killer, while hookworm infection receded among the millworkers in the face of hookworm eradication programmes. But the lung ailments of the millworkers continued at a high frequency, as did syphilis among Blacks. In both groups, pellagra ebbed and flowed with wage levels to peak at the end of the 1920s.

Ironically, as the author demonstrates, health conditions began to improve during the Great Depression as New Deal measures initiated programmes that brought better health to Blacks and mill workers alike. This amelioration was further accelerated by World War II and an enhanced federal concern for health and fitness among the members of the Armed Forces that also reached into factory and farm. Yet following the war some forty per cent of the black population remained "outside existing health and medical systems" (p. 274). Actual hunger stalked many, many more had serious vitamin and mineral deficiencies, and venereal disease, especially syphilis, was still widespread among them even if, with the advent of penicillin, it no longer killed as before.

The health picture for post-war millworkers was similarly mixed. Many mills had become concerned with providing better nutrition, sanitation, and medical services for their workers, and air-conditioning had resolved old problems of humidity control. But in "smaller, out-of-the-way mills conditions remained the same as in the 1930's" (p. 223). Moreover an old enemy of mill worker health, byssinosis or "brown lung disease", had yet to be recognized and its recognition constitutes the subject of a particularly fascinating chapter.

The foregoing is a kind of biological framework within which Professor Beardsley treats a multitude of political, social and cultural, as well as medical matters in enormous and impressive detail. It is truly "A History of Neglect" in which there is plenty of blame for everyone. Mill

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owners are blameworthy because of an interest in high profits rather than in healthy workers. The American Medical Association in general and white Southern physicians in particular receive their share for a dogged determination to maintain segregated medicine and a tendency to ignore problems of occupational health. Censured, too, are black physicians, many of whom also had a vested interest in a continuation of segregated medicine.

The task of uniting these two, somewhat disparate, stories—the health of white millworkers and the health of black people—was no small challenge and Beardsley is to be commended for accomplishing it in surprisingly smooth fashion. The study is lavishly documented, rests in part on oral interviews, and contains numerous photographs, as well as a useful bibliographic essay. In short, this is an important book which joins other recent studies in exploring questions of the history of Southern health since the Civil War.

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MICHAEL HUNTER and ANNABEL GREGORY (editors), An astrological diary of the seventeenth century: Samuel Jeake of Rye, 1652–1699, Oxford, Clarendon Press, 1988, 8vo, pp. xxiv, 297, illus. £40.00.

At one point in Ben Jonson's *The Alchemist*, the gullible apothecary Abel Drugger entreats Subtle, the bogus *magus*, to help him discover astrologically the best and the worst days for business. He is modest in his demands and asks Subtle

But to look over, sir, my almanac, And cross out my ill-days, that I may neither Bargain, nor trust upon them.

(I.iii, 96-8)

Now, thanks to Michael Hunter and Annabel Gregory, an actual Abel Drugger, another star-struck tradesman, has stepped down from the boards in the person of Samuel Jeake, a merchant of Rye in Sussex. Jeake, however, was no bumpkin. He was instead an intellectually inclined Nonconformist and a highly skilled astrological adept, the author of unpublished treatises on astrology who avoided the sort of crude divination that Drugger (and Nancy Reagan) craved. His diary displays an outlook—an eclectic fusion of science, magic and religion—that still appealed to many intelligent men and women in the later seventeenth century, despite the decaying prestige of astrology in fashionable circles and the jibes of satirists.

The bulk of this book is an edition of a long retrospective journal that Jeake compiled in 1694; appended to it is a fragment of a diary he kept in 1699, when he was in London, playing the stock market. Hunter and Gregory display impeccable editorial skills. The annotation is scrupulous and informative; books, people and significant events are briefly and precisely identified. They have also supplied a brilliant introduction, essential reading for historians of the period, and a series of appendices, mainly concerned with astrology, that greatly enhance the value of the book.

Medical historians will find Jeake's descriptions of his illnesses, the treatments he underwent to cure them, and his medical reading of special interest. As Hunter and Gregory observe, Jeake relates the course of the maladies he suffered with almost obsessive precision. Like many laymen of his time, he administered medicines himself, occasionally recording what he took and what effect they had on him. He was as well-informed about medicine as about astrology. He read both popular medical works and abstruse scientific treatises, including Harvey's description of the circulation of the blood. His diary therefore provides one of the fullest and most interesting pictures of illness, healing and lay medical knowledge in the seventeenth century. Jeake's astrological interests do not distort this picture; they add significantly to it. They were shared by many of Jeake's contemporaries, and they encouraged him to be a more exact clinical observer.

Finally, beyond the realm of medical history, Jeake's diary illuminates vividly the interplay of religion and magic (a theme skilfully analysed by the editors in the introduction), and it adds as well to our knowledge of contemporary commercial and financial practices, and of