only from the broader public, but also from workers themselves. Historians of medicine and public health, and many others, will have much to learn from this strikingly original interpretation of the origins of child labour reform.

Gerald Markowitz, The City University of New York


The history of colonial medicine has become a very productive field in the last two decades, but English writings on the subject have mainly been confined to studies on the medicine of the European empires. Japan, a latecomer to the colonial venture, has been sorely neglected. This is not to say that there is a shortage of scholarly studies on Japanese colonial medicine, but these studies have mainly been carried out by Japanese, Taiwanese, and Korean scholars, and have been published in the native languages of these scholars. Prescribing Colonization is a welcome addition to the English literature on the subject.

Prescribing Colonization covers the entire period of Japanese colonial rule in Taiwan (the first colony of the Japanese Empire). Chapter 1 of the book is a succinct account of the introduction of modern Western medicine into Japan during the last quarter of the nineteenth century. It is commonly known that the Meiji government took the German medical system as the model for its own medical reforms. Using the organisation of sanitary police as an example, Liu’s investigation reveals that Japan not only copied but also modified German medical institutions, adapting them to traditional forms of governance in Japan. Chapter 2 covers the first fifteen years of Japanese rule in Taiwan, focusing on the career of Gotō Shinpei (1857–1929), an ambitious politician with a medical degree who became minister of civil affairs in the Taiwanese colonial government in 1897. In the first few years of colonial rule, frequent rebellions and high mortality and morbidity rates among Japanese troops and settlers caused many Japanese politicians to doubt the sustainability of occupying Taiwan. Gotō’s reforms are generally credited with reversing this situation. Chapter 3 covers the 1920s and explores a variety of subjects, including preventative measures taken against epidemic diseases, the establishment of and subsequent changes to the medical education system, and the regulation of medical and pharmaceutical practices. There is also a brief but useful discussion of the colonial government’s policy of legalising and monopolising the sale of opium to Taiwanese addicts. Chapter 4 covers the period from 1930 to the end of World War Two. It discusses Japan’s attempt to expand and transform studies of tropical diseases in Taiwan into a specialty called ‘southern medicine’, which was to serve the project of colonisation in Southeast Asia. It also details the ways in which Taiwanese medical students and practitioners were discriminated against within colonial medical education and administrative systems.

Prescribing Colonization is based on solid, original research and a great wealth of materials, and contains plenty of revealing details and some insightful analysis. The author is particularly skilled at exploring how personal factors shaped the contours of Japanese colonial medicine. Gotō Shinpei, for example, who successively held important offices in Taiwan and Manchuria, was certainly an important force in the development of Japanese colonial medicine. He came from a samurai family of low rank and possessed less-than-outstanding medical qualifications. The medical elite in Japan looked down on him. Consequently, Gotō teamed up with the followers of Kitasato.
Shibasaburo (1853–1931), a favourite pupil of Robert Koch. Kitasato fell out with the medical faculty of Tokyo Imperial University after his return to Japan. This rivalry forced his students to seek careers in the colonies. The investigation of the medical network formed in Taiwan and within Taiwan, Manchuria, Shanghai, and Korea by this group of medical personnel is one of the author’s most original contributions to the study of Japanese colonial medicine.

Another important but controversial argument developed in this work is Liu’s assessment of the health benefits that Japanese colonisation brought to the Taiwanese population. Until now, mainstream historiography has credited Japanese colonial medicine and sanitary measures with reducing mortality rates and improving the general health of the Taiwanese population during the colonial period. Using extensive data collected by the Japanese colonial authority, Liu conducts an anthropometric analysis and argues that these improvements were mainly due to better income resulting from economic development. The claim will no doubt incite controversy among scholars studying colonial Taiwan.

My only major criticism of the work concerns the author’s writing style. There is too much repetition in the book, and the narrative and argument are sometimes difficult to follow, especially when the author abruptly changes the focus of his analysis. There are also a few typographical errors that render some sentences difficult to understand. Better manuscript editing could have weeded out these mistakes and greatly improved the readability of the book. Some omissions in the work are also regrettable; for example, there is a good discussion of some of the photos in Takagi Tomoe’s Die hygienischen Verhältnisse der Insel FORMOSA (p. 110), but the photos themselves are not reproduced in the book. A list of abbreviations with corresponding full names would also have been helpful for readers.

At the present time, Prescribing Colonization is the most comprehensive English-language study of Japanese colonial medicine available. It is an indispensable reference for any further research on the subject and deserves to be read by students of both the history of Japanese medicine and the history of colonial medicine.

Shang-Jen Li,
Institute of History and Philology, Academia Sinica, Taiwan


The great exhibitions of the nineteenth century were organised to show the industrial and cultural progress of civilisation. Many historians of recent decades have made creative use of these well-documented and spectacular material surveys of modernity to explore a whole range of themes, and this has especially been the case among those interested in the history of science and technology. However, so far, comparatively few studies have analysed how issues related to medicine and health were articulated when the world was put on display. Julie K. Brown’s overview of the four major American expositions between 1876 and 1904 from this perspective is thus a very welcome contribution to the literature.

Brown’s study is organised as a rather straightforward description and characterisation of how health and medicine were part of the consecutive exhibitions, both as organisational problems and as subjects to be displayed. She documents how health and medicine were concerns in the planning and building of the fairs. At least some medical services had to be provided on site to the many thousands of construction workers as well as to the millions of visitors. A whole range of sanitary issues had to be addressed when planning and building such massive