The final chapters examine contemporary trends in Aboriginal healing and the issue of self-determination in health care. The latter is a pressing issue in contemporary Canadian politics and refers to the larger efforts by Aboriginal groups to wrest control of their economic and political affairs from government. Where control of health care fits into this larger picture is still to be determined, but the authors warn that “Indian control of Indian health care” may not necessarily translate into improved health status.

This is a second edition necessitated, as the authors note, by the great expansion in the field since its original publication in 1995. The impetus for much of this recent research and publishing can be traced to the Royal Commission on Aboriginal Peoples established in 1991 with a wide-ranging mandate to investigate the relationship between Aboriginal people and the Canadian government. One of the results of the Royal Commission was the Aboriginal Healing Foundation, endowed in 1998 with $350 million, to address the legacy of physical and sexual abuse of Aboriginal children in the residential schools funded by the Canadian government and managed by missionaries until the 1970s. As well, in 2000 the government established the Institute for Aboriginal People’s Health to support Aboriginal health research and the training of Aboriginal health researchers. While these government initiatives are generally welcomed, the disparity in economic and social status between Aboriginal people and other Canadians remains the greatest challenge to health.
reproduction. Overwhelmingly, those of the interwar period are on tuberculosis. Included is a set of ten from 1934 which nicely illustrate the use of the would-be universal graphic language—‘ISOTYPE’—invented by Otto Neurath. As we move into the 1940s the double-cross icon of the anti-tuberculosis campaign gives way to images of happy healthy families and dietary knowledgeable housewives. More noticeable, too, is the involvement of commercial companies in sponsoring “culture physique”—no less than fourteen of Renaud’s samples coming from Molson Ltd, a major Canadian brewery. Also in the 1940s are Department of Health posters for diphtheria immunization, and a few warning against syphilis and gonorrhoea. Among the latter is the “decadent” ‘L’Hecatome La Syphilis’ by the Dutch artist, Louis Raemaekers—a poster that made its controversial debut in 1922–23, but was issued by the Ligue Canadienne de Santé only in 1944, whether for reasons of provincial prudery or influence of the Catholic Church we can only guess.

The 1960s and 1970s mark a shift, not simply because of the absence of health posters referring to infectious diseases (increasingly believed to be a thing of the past), but also, in terms of the sophistication of graphic design, which, from here forward, more and more approximates that of commercial advertisement. Tooth decay, road safety, proper diet, fluoridation, and— slickest of all—anti-smoking posters predominate. Gone are mothers and babies, and concerns over the health of labouring bodies. Interesting is another absence (though not peculiar to Quebec health posters) of bio-medical and medical professional iconography—white coats, test tubes, retorts, microscopes, stethoscopes, and the like.

Thereafter, to 2005, the number of pages per decade doubles. Surprisingly, this is not attributable to posters on AIDS (SIDA). These take up only a few pages and, in contrast to those reproduced in several recent coffee-table books, are among the dullest in the volume. An exception is a series of three posters issued by the Quebec government depicting photo-like images of cemetery statuary in erotic AIDS-conducive poses. Unfortunately, no information is supplied on the artists, designers, and production agencies involved, nor on costs, print runs, circulation, and places of posting. As throughout, Renaud makes no attempt to put contextual flesh on these ephemeral, mass-produced material objects, or ask how, why, when, where, and which people came to think they had value. Thus the volume serves to sustain the impression that such images simply speak for themselves. It also reinforces a notion of continuity in their educational function. In these respects this book supplies compelling evidence for engaging in the historical questions it begs.

Roger Cooter
The Wellcome Trust Centre for the History of Medicine at UCL

Robin Haines. Doctors at sea: emigrant voyages to colonial Australia, Basingstoke, Palgrave Macmillan, 2005, pp. x, 248, illus., £45.00 (hardback 1-4039-8685-1).

Through my daily journey along Liverpool’s Dock Road, I have become the maritime equivalent of a train-spotter. I can recognize familiar ships and I know roughly how often they are in port. There have been some mornings when hitching a ride on one has seemed infinitely preferable to arriving at work. Yet I have realized, through reading Robin Haines’s excellent study of oceanic voyages, how little I actually know about what happens in that long interval between ports.

This latest book by Haines continues a series of publications on nineteenth-century emigration to Australia. Whereas the focus has previously been on the experiences of the emigrants, especially their morbidity and mortality, this aims at understanding the role and contribution of the doctors, who accompanied every oceanic voyage after 1849. Haines uses a selection of case studies from the 323 emigration voyages made between 1848 and 1885 from Britain to Australia.