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Union army, and it is not realistic to suppose that all of them participated in the process of information sharing and learning. The Civil War shed light on the fact that not only medical students, but also physicians had to continue to learn in order to keep up with new scientific findings. Did the post-war medical schools properly reflect such development? Did the physicians continuously update their skills and knowledge by referring to medical journals and attending medical conferences? How about the training of the former Confederate physicians? And of African-American and other minority physicians? When we look at the Flexner report of 1910, which revealed there were many unacceptable medical schools in the United States and Canada, some of the Civil War lessons seem to have been ignored in specific social conditions and because of economic competition.

The function of the Civil War medical model deserves further scrutiny. The model proved its effectiveness in the outbreak of cholera from 1866 to 1873, as argued in chapter six. The experience of success, however, is obscured when we look at uneven development - or even, no development in some areas - of public health administrations in rural areas in the last quarter of the nineteenth century. Medical knowledge itself was not the only source to establish and develop medical and public health institutions. For further investigation of the function and limitation of the Civil War medical model, we may need to look at other sources that made the model work.

The United States government in wartime had peculiar power; Devine slightly touches on this in the book but does not examine it in detail. The Museum, the Library, and the order and advice of the Surgeon General were all possible under the power of the federal government during the war. Therefore, when the war ended and the centralised command system was dissolved, medical officials were confronted with how to maintain the system that had been proved to work effectively in helping the wounded. The theme of medicine and statecraft has been broadly discussed in Europe. The Civil War medical model and its post-war transformation could provide another perspective on the modern medical state.

This is an invaluable book for anyone who is interested in military history, medical history and the history of modern statecraft. Readers will acquire tangible evidence of the development of medical knowledge and sources for contemplating the relationship between the mid-nineteenth century state, the military and medicine.

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S. Benedict and L. Shields (eds), Nurses and Midwives in Nazi Germany: The 'Euthanasia Programs' (New York: Routledge, 2014), pp. 266, ISBN13: 978-0-415-89665-8 (hbk), ISBN13: 978-1-315-83261-6 (ebk).

This is a timely, original and major contribution that will significantly increase understanding of the key role played by nurses and midwives in the Nazi's T4 programme for the elimination of the 'unfit' as it operated within Germany. Two other English language texts have appeared, but both focused upon psychiatric nurses: Icke-McFarlane's groundbreaking study of the role played by nurses in the killing centres

<sup>&</sup>lt;sup>1</sup> B.R. McFarland-Icke, Nurses in Nazi Germany: Moral Choice in History (Princeton, NJ: Princeton University Press, 1999).

138 Book Reviews

at psychiatric hospitals, and the rationales they gave for their participation, and Foth's<sup>2</sup> remarkable and moving case study of an individual psychiatric patient.

This is a collection of meticulously researched and copiously referenced papers, by an international group of scholars; and, since they draw heavily on original sources, it is particularly valuable to those of us who read only English. The book begins by pulling together the key elements of the cultural, political, legislative and scientific background that led to the killings, and by describing in some detail the German nursing and health care context. The account of the legislative and organisational state of German nursing during the Nazi era appears to this reviewer to be the first available in English.

The chapter devoted to psychiatric nurses focuses on their preparation, knowledge and skills, and then moves to a short study of their functioning at Hadamar and the postwar trials. German psychiatric nurses seem to have embraced the opportunity to practise negative eugenics with a sense of relief, if not open enthusiasm, but it remains unclear to what extent the slide into mass murder was driven by scientific beliefs regarding the nature and untreatability of mental disorders, by a long-established contempt for treatment-resistant patients and growing dismissal of their rights, or by Nazi eugenic and economic arguments. Psychiatry had already adopted negative eugenics in other countries, and had long failed to protect the rights of patients, and so the possibility arises that the active participation of German psychiatry and psychiatric nurses was immanent in psychiatric ideology, and that Nazism simply created the opportunity for it to be taken to its logical conclusion.

Despite sometimes obscure English, the chapter on midwifery is especially welcome because, although neglected by historians, midwives played a crucial role in the early implementation of Nazi eugenic policies, notifying the authorities of abnormal births, following up cases, and eventually participating in the murders which preceded and continued as part of the T4 programme.

A chapter in the book describing the use of the T4 programme to teach nursing ethics brings home very powerfully the relevance of this research for today. For some years the authors have run educational courses in Australia and Israel, and here report their study comparing students' reactions. Many of those in Australia were shocked, angered and saddened, as they learned of these events for the first time. Israeli students reacted rather differently: already familiar with the Holocaust, they were also distressed but more concerned with accounting for the Nazi nurses' behaviour and understanding the contextual forces. The courses invigorated all students' interest in the history and heightened their sense of commitment to high professional and personal standards.

None of the authors in the book adopt an explicit ethical standpoint or offer any theoretical interpretations, but the penultimate chapter suggests the value of viewing these events through a theoretical lens drawing on the work of Michel Foucault and the Italian political philosopher Giorgio Agamben. The author used these in his case study, noted above,<sup>3</sup> and they are introduced here in a way that should be accessible to most readers. He argues, in particular, that Agamben's concept of 'bare life', entailing objectification and complete disempowerment, suggests obvious parallels between life in the psychiatric institutions and life in the concentration camps.

The conclusion reminds readers that nurses and midwives can readily become caught up in the machinery of oppression, wherever and whenever that exists. Nurses and midwives

<sup>&</sup>lt;sup>2</sup> T. Foth, Caring and Killing: Nursing and Psychiatric Practice in Germany, 1931–1943 (Göttingen: V & R Unipress, Osnabrück University Press, 2013).

<sup>&</sup>lt;sup>3</sup> Ibid.

have been and continue to be implicated in a wide range of behaviours at odds with the values and codes of their profession, from deadly torture and forced sterilisation in South America, to abuse and neglect in the relatively sophisticated health service in Britain. One of the lessons that we should take away from this book is that this is a shared responsibility, and as much a structural product as a failure of collective and individual agency. Although the book's editors claim that the book is 'about the ethics of nursing and midwifery and how these were abrogated during the Nazi era', there is actually little acknowledgement of the myriad ethical issues that it raises, and no explicit ethical analysis. This works in its favour, however, because it allows the authors to concentrate on the case material around which such analysis should develop, and avoids entering the labyrinthine philosophical arguments such an analysis will entail.

This book not only brings together the existing body of knowledge about nursing and midwifery in the Nazi era, but significantly supersedes it by drawing on an impressive corpus of primary sources, including contemporaneous diaries and biographical material, hospital case notes and other records, and *post-facto* legal and official documents of every kind. The result provides a useful starting point for further research, and will perhaps kick-start the long overdue examination, albeit uncomfortable, of the part played by nurses and midwives in other European countries in the practical application of eugenic policies, including those working under Nazi occupation. More broadly, it will enlarge our understanding of the susceptibility of the human psyche to the deceits of individual and organised power, regardless of where or when it arises, and can therefore be recommended not only to historians but also to philosophers, psychologists, social and political theorists, and those who assume health care leadership roles.

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**Jonathan Reinarz** and **Leonard Schwarz** (eds), *Medicine and the Workhouse* (Rochester, NY: University of Rochester Press, 2014), pp. 1–281, £60.00, hardback, ISBN: 978-1-58046-448-2.

This collection of essays is in two parts, the first dealing with workhouse medical care between 1700 and 1860 and the second covering workhouse medical provisions from 1834 to 1914. The foundation of this important book is a number of papers presented at a two-day conference in 2008. The collection begins with a detailed introduction by Jonathan Reinarz and Leonard Schwarz to the current historiography of workhouse medicine which stresses the need for further research on medical welfare since any 'historian of workhouses is confronted with many potential themes ... nearly as diverse and numerous as presented themselves to medical staff in these institutions in the past' (p. 1). The introduction is both clear and concise, leaving the reader eager to move on to the rest of the volume.

The first chapter by Kevin Siena is a detailed examination of contagion, exclusion and the medical role played by the eighteenth-century institutions. Siena uses his sources very well resulting in the conclusion that the metropolitan workhouse acted as a very different medical institution from the ever-sprouting voluntary hospitals greatly associated with the eighteenth century. The workhouse infirmary provided a service of care and treatment and 'came to the rescue of the destitute sick' (p. 18). However, this care was