

Canberra has also been unique in its access to Commonwealth government funding. It has had the most generously endowed public sector in the country. It also possesses a disproportionate share of the nation's intellectual capital, both in the government sector and in the Australian National University, with its research schools of international standing. It was, until the advent of the Howard government, the place for new ideas about constructing a good society. And it had the money and the will to experiment.

The result was a tense, prolonged conflict between a conservative medical profession which was determined to 'go it alone' and a cohort of *progressive doctors* who saw the opportunity to bring the government sector into the clinic. The ideological differences were deep and damaging, to the point of being almost 'disastrous for the health professionals and the patients'.

This history has been amassed from interviews with *ninety-one* doctors and thirteen other professionals, plus a wide archive of personal and public files. It is detailed and candid. It provides an invaluable record of an intense period of medical politics which will be of continuing interest and relevance to the conduct and history of health policy and professional organisation for many years to come.

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*Sex and Medicine: gender, power and authority in the medical profession*, Rosemary Pringle. (Melbourne, Cambridge University Press, 1998), x + 240.

Many endeavour to navigate the turbulent seas of gender and work, however few successfully reveal the subtleties of the gendered workplace in a way which is both theoretically mature and linguistically understandable. In *Sex and Medicine*, Rosemary Pringle charts the historical voyage of women in medicine, and examines the struggles and successes which have accompanied these travels. Pringle embarks with the reader upon a journey into the complex world of power and gender, however her feminist perspective is not forcefully thrust upon the reader. Instead, Pringle displays the complexities of sex and medicine upon the foreshore for observation, rarely pronouncing judgment.

Perhaps the most striking feature of *Sex and Medicine* is Pringle's ability to consider all the different parties involved—their agendas and ideological frameworks. Pringle illustrates the complicated relationships which exist between men and women, doctors and allied health care workers, feminists and medical practitioners. The conflicts evident in these relationships are laid bare for examination. The individual is left to choose whether or not to accept the numerous challenges which Pringle presents.

The primary focus of *Sex and Medicine* is on how the presence of women in medicine has transformed the medical workplace, by challenging traditional medical values and forcing change. Pringle considers how the underpinning patriarchal values of medicine have necessarily impacted upon the lives of women doctors, and analyses how those systemic realities regularly discriminate against women. Pringle also examines how female doctors have attempted to change those features which place them at a disadvantage. She also considers the changes which would be necessary in the future to increase the power and presence of women in numerous medical specialities where they remain under-represented.

Pringle bases her analysis and conclusions upon interviews with 150 female doctors and 30 male doctors, and a series of focus groups involving nurses and health care workers. Although Pringle maintains that the male interviews were for 'comparative purposes' (p18) it is debateable whether the low numbers truly do justice to the participating male doctors. The interviewees are from Britain and Australia only, thus Pringle's results are limited to a Western locus. Through the voices of the interviewees, Pringle examines role of gender in different medical specialties, and explores the history of women in these fields. Pringle not only evaluates the different treatment of male and female doctors by the medical establishment, but also their interaction with each other. She also examines the interaction between female doctors and nurses as reflective of the sexualised medical workplace and power relations. Furthermore, Pringle expands into a fascinating analysis of the interaction between doctors and health care workers in a feminist medical workplace; and considers the relationship between practically administering health care and ideology.

*Sex and Medicine* advocates a revolution of working medical conditions. Pringle maintains that reorganisation of the medical marketplace, with greater flexibility over hours worked and speciality time limits, is fundamental to address women's conflicting career and family responsibilities. While this is true and valuable, the underlying

issues which cause the female sex to keep compromising their careers, were raised by Pringle but not followed through to completion. Furthermore, there was little analysis of the changes which must occur in the male sector of both the public and private arenas to revolutionise the medical workplace for women. Nonetheless, Pringle's work is an in-depth analysis of the role of gender in medicine, and an examination of the conflicts which arise when sex and medicine intersect. It was a thoroughly enjoyable read, that was both historically and politically enlightening.

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