

of the Amritsar asylum spent nearly all of his working hours with his patients and their families, the latter often camping out in the asylum grounds. In Japan, a publicly funded, nationwide network of asylums did not emerge before World War II, but there had been a long tradition of the insane being cared for in 'brain hospitals' that had originated in Buddhist temples and Shintoist shrines. Many of the Japanese insane also lived out their lives locked into cages in their families' homes.

Attitudes towards class and race have also made a big difference. Not until after the American Civil War did the South Carolina asylum begin admitting members of the black population. And the race and class composition of the Robben Island asylum in Cape Town was tightly linked to social and economic patterns affecting much of the colony. During the 1850s the asylum contained mostly poor whites, then the introduction of 'moral management' in the 1860s–70s saw the arrival of far more from the white middle classes. But with the establishment of new asylums for the middle classes and increasing racism towards the black population, by the early 1900s the asylum had become a largely custodial institution housing insane blacks. The development of asylum systems in each region follows a unique trajectory.

All in all, this is a first-rate book. It is not light reading and the views it affords are seldom of the pleasingly panoramic kind. But it is the outcome of high-quality research involving much-neglected patient records as well as a mature engagement with the existing literature. *The Confinement of the Insane* does not overthrow the revisionism of Scull, Rothman and others. But we can no longer accept that either the need to dispose of the economically unproductive or the aspirations of aspirant psychiatrists were the *only* important driving factors in the rise of the asylum system. In short, this collection of case studies is a must for the historian of psychiatry and for any library that wishes to keep up-to-date with scholarship in this vibrant field.

John Waller
University of Melbourne

'Madness' in Australia: Histories, Heritage and the Asylum. Edited by Catharine Coleborne & Dolly MacKinnon (University of Queensland Press with the API Network, Brisbane, 2003).

THE TIME OF THE 'GRAND' HISTORIES OF PSYCHIATRY, MAD-DOCTORING and the asylum has been over for a while. The first generation of historians dealing with these topics wrote narratives in which humanitarianism, understanding, care, and effective treatment methods

replaced cruelty, abuse and neglect. The second generation of historians analysed psychiatry and the asylum as a tool of social control. According to them, mad-doctors and psychiatrists medicalised and pathologised behaviour that did not conform to middle-class standards of economic prudence and behavioural propriety, thereby reinforcing dominant social values. Recent work in the history of the asylum is no longer based on these grand narratives. It is informed by a variety of historical perspectives that seek to analyse how race, class and gender are reproduced and reinforced in the construction of the asylum and the regulation of behaviour within it. The essays in *'Madness' in Australia* exemplify the latest scholarship in the history of the asylum in Australia; the volume presents a number of fascinating essays of high quality written by scholars from a variety of disciplines. This volume illustrates the wealth of recent scholarship on the history of the asylum in Australia. Unfortunately, it is impossible in this review to comment on all the essays; I will therefore highlight some of the common themes.

In his historiographical essay Stephen Garton reflects on scholarly work on the history of 'madness' in Australia. He emphasises the importance of analysing the asylum as a social space of surveillance and discipline, instead of merely being the end-point of processes of involuntary or voluntary commitment. In his essay, Mark Finnane analyses the legal procedures involved in committing someone to a mental hospital and emphasises the role of the family in this process.

The history of the asylum in Australia appears to have been riddled with abuse, neglect and public scandal. Raymond Evans details how repeated media exposure of the conditions in Goodna Mental Hospital in 1915 led to the appointment of a royal commission to investigate the situation there. Using the transcripts of this official investigation and the coverage in the press at the time, Evans sketches the dismal conditions in the hospital. Emily Wilson relates how, seventy-five years later, media attention forced the appointment of another royal commission to investigate the abuses at Chelmsford Private Hospital, where Dr Harry Bailey had practised deep sleep therapy for more than two decades with often disastrous results for the patients involved. Despite the often dismal conditions in asylums and mental hospitals, they could also function as a place of temporary refuge for men and women who had nowhere else to go. Janice Chesters follows the path of several women through the asylum. Some of them were committed because their family wanted to get rid of them; others were temporarily placed in an asylum only to return in an improved condition.

The gendered construction of the spaces of the asylum receives ample attention in this volume. Susan Piddock analyses how the protagonists of moral treatment translated their ideals of treatment and care in the

architecture of the asylum. In her analysis of the Adelaide and Parkdale Lunatic Asylums, she demonstrates that the ideals formulated in the literature were only realised to a limited extent there. Both she and Catharine Coleborne analyse the gendered nature of the spatial organisation of the asylum: men and women were kept in separate quarters and the work they did (as occupational therapy) was strictly organised along gender lines. While most male patients worked outside in the gardens and the work-shops, women were generally employed inside in the laundry and kitchen. Recovery was measured with the extent that male and female patients conformed to then-current gender expectations. The role of gender is also analysed by Lee-Ann Monk in the way that male attendants construct their identity by refusing any physical contact with female patients, while, at the same time, contrasting themselves to male inmates by emphasising the male characteristics of control and restraint. Ruth Ford analyses the increasing importance of psychiatry and medicine in policing gender expectations by formulating theories of female sexual abnormality. She does this by tracing the case of Harcourt (Annie) Payne, a woman (as the physicians asserted) who had lived under a male identity for most of her adult life.

In two highly original essays, Dolly MacKinnon investigates what she calls the soundscape of the asylum. Historians of the asylum have often emphasised vision over sound. Alienists and psychiatrists, however, based their diagnoses on their observations of patients as well as on interpretations of their utterings. Doctors judged whether these were excessive, incoherent, meaningful, or referred to a world which only existed in a diseased mind. After the introduction of psychopharmacological treatment methods, the soundscape of mental hospitals changed considerably: its inmates became quieter. In a second paper, MacKinnon analyses how recreation, in particular listening to music, became part of the treatment program in the asylum. It was thought that the harmonies of music could instil harmony in the soul. In particular, for women of the middle classes, piano playing was considered therapeutic and most asylums had at least one piano.

A number of papers reflect on the fact that the asylum is from an era that is now behind us. Many Australian asylums were centrally located and dominated the landscape of the neighbourhoods around them. As a consequence of deinstitutionalisation, asylum buildings have been deserted. Ray Osborne discusses how, in recent years, old asylums have been converted to university buildings and apartment complexes. Catharine Coleborne analyses two psychiatric collections that were initiated by psychiatrists and psychiatric nurses when deinstitutionalisation was in full progress. According to her they wanted to preserve elements of a past that was fast disappearing, while, at the same

time, safely situating it in a distant past before the era of new psychiatry had commenced. Belinda Robson examines the Cunningham Dax collection of psychiatric art, which contains more than 9000 paintings made by patients in mental hospitals over a period of forty years. The psychiatrist Dax introduced art therapy when he was working in England in the 1950s and brought the practice to Australia. Robson argues that Dax interprets these art works as reflections of specific disease states in patients. How the patients who were producing these art works themselves viewed what they were doing has been marginalised in this interpretation.

The essays in *'Madness' in Australia: Histories, Heritage and the Asylum* reflect the state of current scholarship in the history of asylum, psychiatry and 'madness' in Australia. The essays are well argued, well researched and contribute to the growing body on the history of the asylum worldwide. It is to the credit of the editors that they have brought together these various volumes written from different theoretical perspectives and disciplinary backgrounds.

Hans Pols
University of Sydney

For Fear of Pain: British Surgery, 1790–1850. By Peter Stanley (Editions Rodopi, Amsterdam/New York, 2003, ISBN 90-420-1024-x [Paper] ISBN 90-420-1034-7 [Bound], illus.) 362 pp.; (Clio Medica 70: The Wellcome Series in the History of Medicine).

FOR FEAR OF PAIN IS A VERY PERSONAL BOOK IN WHICH PETER STANLEY explores the pain inflicted by surgeons, and suffered by patients, in the last half century before the widespread adoption of anaesthesia. Stanley explains in his epilogue that as a primary school child he read about the amputation of Nelson's arm in 1797. The image of Nelson on board a ship at sea having his arm removed without anaesthetic haunted Stanley for nearly thirty years. He had nightmares about hospital conditions during the Napoleonic Wars and developed an appalled fascination for pre-anaesthetic surgery. This book, he acknowledges, began as an attempt to exorcise this preoccupation.

Stanley has published widely and specialises in British and Australian military history, but although *For Fear of Pain* includes a chapter on surgery during the Napoleonic Wars, most of the book is devoted to civilian surgery. Drawing extensively on what surgeons themselves wrote about their craft, Stanley explores how surgeons dealt with the impact of the pain they inflicted. Few patient views of surgery have