

It begins with a brief, clear, and convincing historical outline of how a post-modern culture emerged as the result of the ultimate logic of liberal market capitalism. But by the end of the account, Jenkins is talking about "post-modern pastlessness" (p. 67), which means, not that popular consciousness is largely ahistorical—a plausible assertion—but quite literally, that we do not have a past. Then he confounds his useful distinction between the past and history, by talking about "reading the past." (Surely, we read history, not the past.) Finally he tangles his language incomprehensibly when he advocates that history should really be seen as "a discursive practice that enables present-minded people(s) to go to the past, there to delve around and reorganise it appropriately to their needs" (p. 68, my emphasis). Out of this stew, Jenkins wants to believe that we can extract tools for democratic emancipation. I remain unconvinced.

Jenkins is to be admired for accepting the challenge of writing a lean text which aims to introduce these much-discussed perspectives to an undergraduate audience. If there are serious flaws in the logic, they are much more exposed in such a volume than if they were hidden beneath the mountains of self-reflexive verbiage characteristic of other works advocating a similar position. I only wish that Bryan Palmer's *Descent into Discourse*—an attack on the deconstruction of history—were as accessible.

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Patricia A. Vertinsky. *The Eternally Wounded Woman: Women, Exercise and Doctors in the Late Nineteenth Century.* Manchester and New York: Manchester University Press, 1990. Pp. 279. \$59.95 U.S.

In recent years, the importance of the medical perception of women and its influence in both medical and non-medical areas has been the focus of many studies. Such research revealed the widening definition of the term "medical" in the past and, consequently, the increasing authority of the medical profession in our society. *The Eternally Wounded Woman* is a welcome addition to this literature in that it is a sensitive examination of the prescriptive texts on women using sources that straddle the Anglo/American world in the decades of the late nineteenth and early twentieth centuries. Such an approach emphasizes both how artificial national boundaries for such a topic can be and also their importance at the level of rhetoric. This is especially true in the use that American and British physicians made of their common acceptance that British women were healthier than American women.

A study of prescriptive literature by its very nature focuses on the way a woman should be, but in doing so Vertinsky has delineated how those perceptions relate to the entire life of the woman. This is significant, for previous studies have tended to emphasize the young woman reaching puberty or the mature woman and her experiences of childbearing, ignoring

the reality of the older woman. The book is divided into three sections. The first examines the prescriptive literature which doctors directed to middle-class women. The three chapters in this section follow a life-cycle approach in that they examine puberty, the years of menstruation, and menopause. Part two of the book goes beyond prescription by adding women's voices, those of female doctors who read and prescribed the advice. The two chapters of this section trace women's entry into the medical profession and analyze their views of women's bodies. Such women were not of one mind in their perceptions and Vertinsky's sensitivity to this reveals the complexity of the past. Almost all female doctors examined were influenced by the rhetoric of the wider society in which they lived and believed that women really should limit themselves physically because of their bodies. The conservatives among them, however, were influenced by eugenics and by the fear that women in their efforts to become physically fit (in which they were encouraged by other women physicians) were not performing their duties to society and having their health undermined. Thus Vertinsky traces the dynamic between the medical literature, reaction to the literature on the part of some women physicians, and reaction against that reaction by other women physicians. The last section of the study narrows the focus even more to detail two voices, one the anti-feminist psychologist, G. Stanley Hall, and the other, feminist Charlotte Perkins Gilman.

At present, we do not really know how much of the body is socially constructed. As historians, however, we are beginning to understand that the body has its own history; over time it has altered in size, weight, age of puberty, life expectancy. The body is not separate from culture. This is a concept that few scientists in the past ever imagined and with the rise of sociobiology it would seem that some in the present do not either. But whether differences between the male and female body are socially constructed or not, we live and have lived in a world where different means inferior. Nowhere is this seen more than in the medical focus on menstruation. Doctors perceived menstruation as an "eternal wound," a striking image that dominates the book. This process expended energy which in the theory of the time meant that women's activities had to be restricted to make up for this loss. Yet this is not the only way our ancestors could have looked at this phenomenon. Why not assume that since all women menstruated and this was God's design, that God would have given women extra energy to cope with the added burden; or if not God directly, that women would have evolved to develop that energy.

Doctors were always treading a thin line in order to reconcile their ideas of women and the way in which much of society functioned. For example, women were supposedly weak because of menstruation and in general lacked bodily health and yet the latter was needed to be a healthy mother. The challenge for physicians was to ensure the well-being of women who were to give birth but not in such a way

as to deny woman's basic frailty compared to man. Male doctors expressed concern about the biological problems facing female doctors; yet those facing nurses did not seem to stimulate the same kind of worry. It would appear that the body was to understand when energy was being demanded of it for socially appropriate or inappropriate tasks and react accordingly. What this led to was a constant waffling about what women could and could not do. Exercise was good but nothing too strenuous. As Vertinsky describes it, "Swimming and golf were health-engendering if not performed to excess. (In the case of golf, this sometimes meant leaving driving to the men while women confined themselves to putting.)" (p.81). What a wonderful absurdity except for those affected by it.

Those women trying to live in the world both as women and physicians had an especially difficult challenge. At times historians have suggested that few people act according to the precepts of prescriptive literature. The way in which women doctors internalized the images of female frailty reveals that we should not be so dismissive of this literature. Because of their own efforts to excel, many female doctors had a great deal of respect for women and for their strength. They believed that women should be and could be healthy but they also believed that women should be mothers. Women were different from men and those differences had to be addressed. Those advocating sports activities limited them to non-competitive athletics. The more conservative among female doctors, women such as Arabella Kenealy, cautioned that

women's procreative role had to dominate their lives for the well-being of future generations. She warned that if women developed their physical strength and mentality it would be at the cost of the virility of their future sons. It would be a form of racial suicide. Indeed one of the fears in the early decades of the twentieth century was just that. Many doctors such as Kenealy were influenced by the eugenics movement and feared that women had gone too far in challenging their domestic roles. The irony of this is that while some women had been agitating for women's rights, many more had not and even when some rights were granted the differences this made to the lives of most women were negligible. But the fear in the shift of power from male to female was there. The real tragedy in all this was for women who were caught in the conflicts of a changing world. Charlotte Perkins Gilman was such a woman. As a feminist, she believed that women were healthy and that a healthy body would ensure a healthy mind; yet in the particulars of her own life she could not always escape the thrall of social expectations and pressures. The result was a nervous breakdown and a feeling of personal failure.

Vertinsky has done a great amount of research for this study which she presents in such a way that the reader is overwhelmed by the widespread currency of these ideas. They were not minority opinion. They were linked to culture. She sensitizes the reader to the language used by the medical elite and non-elite alike. They saw woman as a "natural invalid." The meaning of each word and the meaning of the

phrase itself is grounded in context and after reading *The Eternally Wounded Woman* we cannot help but have a better understanding of that context.

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John Calam, ed. *Alex Lord's British Columbia: Recollections of a Rural School Inspector, 1915-36*. Vancouver: UBC Press, 1991. Pp. 192. \$15.95.

Over the last two decades, much history of education in Canada concentrated on urban schooling and placed educational reforms within the context of making the system more socially efficient as the nation industrialized. *Alex Lord's British Columbia: Recollections of a Rural School Inspector, 1915-36*, on the other hand, recounts the experiences of a prominent educator who served the rugged frontier of a developing resource-oriented province.

Alexander Lord was born in 1885 in Nova Scotia, the son of a Presbyterian minister. He attended public school in Ontario, taught for two years before attending Queen's University Medical School, then was lured to British Columbia in 1910 by professional challenges and modest salaries, accepting a principalship at Central Elementary School in Kelowna. Showing promising educational leadership, Lord was induced into ac-

cepting a principal's position in Vancouver in 1914. But by 1915 he quickly climbed the administrative ladder, becoming a Prince Rupert-based provincial inspector. Over the next several decades his career swung back and forth between rural inspectorships and the Vancouver Provincial Normal School.

Editor John Calam organized Lord's memoirs according to the regions he travelled on his inspections of country schools. In an introductory essay, Calam helps bridge Lord's sometimes nostalgic recollections of his duties and observations with references to his original reports. Calam reinforces Lord's strong contention that B.C.'s historical development was a product of its geography. For its part, the school's main function was to help overcome the social ills associated with economic development in the rugged frontier by promoting citizenship. Lord, like his contemporaries, had faith in the humanizing effects of public schools.

With his background as a geographer, Lord places developments in rural schooling in their geographic and economic context. Establishing schools and later reforming them was a difficult proposition in B.C.'s hinterland. Settlement was sparse, often because land speculation along railway lines alienated large blocks, making them unaffordable to people who wished to farm. Therefore it was often difficult to build schools in thinly populated areas. Lord documents developments along the Grand Trunk Pacific Railway, where primitive "assisted" schools were erected. Here the Department of Education paid for