

operated. Many of the problems Heaton's psychiatrists grappled with were ones discussed at pan-African psychiatric conferences and meetings throughout the 1960s and 1970s, and it is surprising that these networks are largely ignored.

One of Heaton's most interesting and reflective discussions concerns the ways that Nigerian psychiatrists sought to establish themselves as 'gatekeepers of the mind' (Ch. 5). Although Nigeria's psychiatrists were, on the whole, largely ambivalent about the value of traditional healers for the treatment of mental illness, they nevertheless saw themselves as the most appropriate people to mediate the divide between 'western' psychiatry and 'traditional' medicine. In doing so, they reaffirmed their conviction that mental illness, and the human psyche more generally, could be understood in universal terms. Heaton's arguments here could certainly be applied to other post-colonial contexts, including Kenya and Uganda, if, as in Nigeria, attempts to incorporate traditional healers into psychiatry were rare. The notion of 'gatekeepers' may also be relevant to scholars working on the professionalisation of medicine more generally in Africa. Yet Heaton's discussion is ultimately weakened by its one-sidedness – there is no consideration of how traditional healers viewed their relationship with psychiatrists, or of the implications this had for patients. Indeed, beyond a broad outline of the Aro Village Scheme, there is almost no consideration of the realities of patient care.

In its analysis of the international activities of Nigeria's first psychiatrists, *Black Skin, White Coats* offers an extremely well-written and researched account. It has much to commend it to historians of psychiatry, colonial medicine and decolonisation, as well as those working on international and global health. It is essential reading for scholars working on the history of psychiatry in Africa and globally, and will no doubt provoke new interest in the involvement of non-Western actors in transnational and international networks of psychiatry.

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Katharine Hodgkin (ed.), *Women, Madness and Sin in Early Modern England: The Autobiographical Writings of Dionys Fitzherbert, The Early Modern Englishwoman, 1500–1750: Contemporary Editions* (Farnham: Ashgate, 2010), pp. x, 290, £95.00, hardback, ISBN: 978-0-7546-3018-0.

An erudite and illuminating introduction to Dionys Fitzherbert's troubled life and autobiographical writings, Katharine Hodgkin's edition is an indispensable guide to any specialist and non-specialist reader interested in Fitzherbert's world, both in terms of her private life and the culture within which she lived and wrote; in how body, mind and spirit were perceived to function and malfunction in the seventeenth century; in the intimate connections between medical and religious approaches to physical, mental and spiritual crisis; in the definition and treatment of madness in early modern England; and in the role that class, gender and notions of selfhood and identity played in the process of autobiographical writing and scribal publishing during the period. Hodgkin begins by mapping out the four main sections of her introduction (pp. 1–4), which are: 'The Life Story: Family Order and Disorder' (pp. 4–34), 'Exemplary Lives: Writing the Self and Protestant Culture' (pp. 34–55), 'Madness, Melancholy, Spiritual Affliction' (pp. 55–73), and 'Writing and Reading, Private and Public' (pp. 73–92). Hodgkin

then appends a full and very informative bibliography (pp. 93–105) before providing a transcript of Fitzherbert's autograph manuscript along with a modernised text on the facing page (pp. 110–279).

The first section 'explores Fitzherbert's life and family background, looking at kinship and household networks, tracing financial and religious relationships, and giving an account of her affliction as she describes it'. (p. 4) Here, Hodgkin introduces the reader to Fitzherbert's relationship with her family members; her position as an unmarried daughter in a gentry household, a position in which she chose to be in favour of a dedicated and religiously motivated virginity; and the consequences of this decision for how her family regarded her and for her mental health (pp. 4–13). Hodgkin then records how Fitzherbert's intense religious commitment set her even further apart from her less pious family. Her spiritual dedication provided her with alternative networks of support (personal, spiritual and intellectual) which sustained her independence of mind and refusal to marry (pp. 14–20). Fitzherbert's religious commitment and tensions over marriage led to her being sent off to a number of high-status households to work as a lady's maid, which was considered to be part of her training as an upper-class young woman (pp. 20–4). During this period, she experienced bouts of delusion, physical illness, confusion and identity crisis, afflictions which she perceived to be a form of punishment for her decreasing attention to her religious duties (pp. 24–34).

The next section relocates Fitzherbert's experience of selfhood and writing about the self in what was for her its true spiritual context. Hodgkin identifies the reasons that motivated Fitzherbert to write and publicise her life in the first place (pp. 34–8); puts her findings in dialogue with modern scholarship on early modern women's access and relationship to the process of writing and publication (pp. 38–40); considers her position as a writing woman; the role that writing played in her life; and how she negotiated the complex and sometimes conflicting requirements of godliness, learning and gender (pp. 40–55). In her account, Hodgkin has found that Fitzherbert's breakdown was associated with the loss and regaining of the desire to read, particularly the Bible and religious meditations. In this context, reading and books become sources of anxiety, while Fitzherbert's well-informed commentary and notes on her own narrative bespeak her teleological drive to assert that the person who writes as she does cannot be mad.

The third section turns to the various ways in which madness and disorder were approached during the period, from a symptom of disappointed love and witchcraft to divine punishment and physical illness treated according to the practices of contemporary humoral medicine (pp. 55–9). Hodgkin also records how Fitzherbert negotiated her affliction, at once physical, mental and spiritual, within the framework of a Protestant religious culture, whereby such types of illness were often connected to sin and religious melancholy (pp. 59–67). Hodgkin brings her findings to bear on contemporary notions about the connections between gender, madness and melancholy, opening a fruitful discussion on the place of women within the context of the period's humoral system and constructions of female identity. Once again, Fitzherbert would find recourse to religion, for in the Christian elevation of spirit over body she found a means to transcend the entrenched association during the period of the female body with melancholy (pp. 67–73).

In the final section of her comprehensive and stimulating introduction, Hodgkin places Fitzherbert's writings in the context of seventeenth-century manuscript writing and scribal publication, and explores in brief the problematic connections between the public and private spheres, between visibility and concealment during the act of writing about and

publicising one's own private life (pp. 73–5). In this section, Hodgkin also looks at Fitzherbert's extant manuscripts in terms of the significance of their locations and recorded readers (pp. 75–80); amendments and corrections, from minor ones, such as orthography, grammar and wording (pp. 80–2), to corrections pertaining specifically to spiritual issues (pp. 82–7); and exclusions of what could have been construed during the period as dangerous or inappropriate words and ideas (pp. 87–8). Lastly, Hodgkin discusses her editorial strategies and summarises her editorial practices (pp. 88–92).

The transcript itself is a very welcome presentation of Fitzherbert's autobiographical writings in a readable format. Where the original text is obscure, the editor prefers exegesis to emendation. Footnoting could have been richer and more thorough. It is thus likely to be more helpful to the general reader, though there are moments of originality in the notes which may well interest future editors. Until then, *Women, Madness and Sin* is very likely to be, for many years, the standard edition of Fitzherbert's autobiographical writings and introduction to her life, work and culture.

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Mark Honigsbaum, *A History of the Great Influenza Pandemics: Death, Panic and Hysteria, 1830–1920* (London & New York: I. B. Tauris, 2014), pp. x + 313, £62.00/\$95.00, ISBN: 9781780764788.

Epidemics of infectious disease are indeed wondrous objects of historical analysis. From their first appearance on the horizon to the choking gasp of their final victim, epidemics are practically ready-made as mass events, with their unpredictability punctuated by expressions of state and class power, and their horror leavened by incredulity, foolhardiness, cowardice, heroism, and any number of other limiting expressions of the human spirit.

But flu? It's just not like that. Not, at least, according to Mark Honigsbaum's most recent book on the topic. Eschewing the more predictable approaches of social history or historical epistemology for cultural analysis, this *History of the Great Influenza Pandemics* uses a century's worth of flu outbreaks to develop an 'emotionological' account of influenza's symbolic fortunes. The results are ambivalent, and expressly so. In the end, Honigsbaum's intriguing collections of adverts, headlines, cartoons, celebrity rumours, literary anecdotes and Ministry circulars offer no evidence for a definitive emotional response to influenza. 'Flu appears deadly, yet prosaic. Its waves first emerge on foreign shores, yet it remains endemic and domesticised. It is democratic, striking all groups equally, even as celebrity victims are readily sensationalised. Men are emasculated for falling victim to it, but male sufferers are equally chastised for 'carrying on' in spite of it. Women (actually just one: Virginia Woolf) publicly celebrate a long convalescence from such illnesses as a potentially valuable literary trope, while in private, she makes precisely nothing of her own extended and repeated bouts of flu.

Honigsbaum's understanding of these symbolic representations emerges out of the logic of his historicist approach: ambivalence merely reflects the biomedical knowledge of the day. After all, influenza was not the viral disease then that we know it to be today: *that* story begins with researchers developing viable animal models and cross-immunity