

Bailar on Cavé (2016)

Cavé, Isabelle. *État, santé publique et médecine à la fin du XIXe siècle français*. L'Harmattan, 2016, pp. 336, ISBN 978-2-343-08899-0

Melissa Bailar, Rice University

État, santé publique et médecine à la fin du XIXe siècle français is a work of monumental archival research that serves as a valuable resource for scholars interested in French medical history, especially public health and sanitation in the late nineteenth-century. It provides a comprehensive overview of public health legislation during the Third Republic, tracing the legislative, medical, and public educational developments necessary for the sweeping public hygiene laws of 1902, and offers a chapter describing the complex route from the proposal to the enactment of new laws. Although the work offers only brief interpretation of the extensive data, timelines, and citations it provides, the detailed and thoroughly researched accounts of the development of an organized public health system provide ample material for scholars to conduct their own analyses.

The work carefully and enthusiastically lays out the history leading up to the establishment in 1902 of a cohesive, organized, and enforceable collection of national public health laws. This legislation not only established a clear administrative structure for carrying out and enforcing public health measures, it also addressed the prevention and containment of epidemics, education and prison reform, safe housing, mental health care, public assistance programs, worker protection, food and beverage safety, and clean water, among other issues. Cavé sketches the developments in science and medicine that enabled the transformation of the scattered and inadequate laws of the early and mid-century into an effective system, most importantly Pasteur's and Koch's discoveries in bacteriology that led to proper understandings of contagion and vaccination. Using statistics and lengthy citations, she also demonstrates that the high mortality and low birth rates in France comparable to those of neighboring countries after the 1870 Franco-Prussian debacle and smallpox epidemic provided the public and parliamentary motivation for such legislation. She notes the unsanitary overcrowding in working-class neighborhoods in Paris post-Haussmannization, improvements in sewers and water purification methods, and the disparity in resources available to city and rural populations as further impetus for Parliament to pass a rigorous set of public health laws. Her outline of 1870–1902 medical and legislative developments includes many citations and data in its reconstruction of the reforms' histories and cultural contexts, but the extensiveness of the archival evidence at times renders the work's interpretations frustratingly brief to the cultural historian and literary scholar.

In addition to statistics on types of laws, mortality rates broken down by disease, vote counts, and other such issues, by emphasizing opposition to what appears to be common-sense legislation the work provides a key historical resource. The text quotes doctors, parliamentarians, and scholars at great length so that readers can analyze them in ways this work does not (for example, by examining their rhetoric and style). However, as with the statistics, the lengthy citations (many run on for one or two pages) appear to be ends in themselves rather than means to suggest new insights. The text frequently summarizes key debates, provides lengthy citations from one source, and often includes another source or two making similar claims. The changes in discourse over the years or across medical or governmental actors are subtle, and here again the extensive material from carefully assembled sources will provide key material to other scholars.

The primary strength of this work is its documentation of the thirty-year gestation of the 1902 legislation; Cavé draws from handwritten accounts of parliamentary proceedings, correspondence among the ministers and the National Academy of Medicine, archives of select departments of France, printed accounts of parliamentary debates, and votes. In addition, she includes information she gleaned on the professions of parliamentarians through her own exchanges with various departmental offices and archives, other primary and secondary sources from the Third Republic, contemporary scholarship, and museum exhibits. Cavé's passion for effective public health measures is evident, and she presents this history as progress toward a socially, politically, and ethically clear result. While she digs deep into the complications in drafting and passing legislation, she depicts distinct heroes in the process and posits the 1902 laws as an end goal toward which all previous acts led. The lists of questions she occasionally asks are provoking, but she leaves it to other scholars to answer them, perhaps because this work stems from her doctoral thesis and her archival work was quite time consuming (she spent thirteen years gathering this information). This work is ultimately a meticulous reference work that relies on material from vast and disparate sources to detail thoroughly the complexities in the Third Republic process of enacting effective health legislation. It will prove useful to historians and cultural scholars conducting comparative analyses with legislation in other countries or investigating the ethically grey areas of this process and the cultural, economic, and political shifts it occasioned.

Volume: 46.3-4

Year:

- 2018