

as opposed to setting them apart as somehow unique from all others. "Native girls usually came into conflict with the law for much the same reasons as other girls did" (151). Aboriginal girls may have been repeatedly put at one end of a behavioural continuum, but it was, all the same, a continuum as opposed to a dichotomy. As Sangster explains in respect to the book as a whole, "protection was always differentially applied according to class, and it could become racialized paternalism directed at Native girls" (3).

*Girl Trouble* is interesting for its methodology as well as its content. Sangster's approach is meticulous, imaginative, and thought provoking. *Girl Trouble* provides an excellent example of careful yet innovative meaning making. The actual data Sangster uses is fairly prosaic, but by interspersing clear tables and figures and personal accounts she both holds her audience and underlines her points. In explaining the workings of the courts, for instance, usually not the most exciting of tasks, she interweaves individual experiences to make the law, quite literally, come alive in terms of its function and uses. The sections on girls' range of responses to their circumstances are particularly remarkable. Sangster aims throughout the book at what she terms "a delicate balance" between "regulation and resistance, structure and agency" (5). *Girl Trouble* demonstrates firmly and convincingly that history need not be dull.

*Girl Trouble* is also important for its activist approach. Sangster is concerned not just with making history come alive but with making it relevant to the present day. Particularly in her first and last chapters, she interweaves past assumptions and practices with those of today, emphasizing how we still create boundaries for our children to suit ourselves. She draws several times on newspaper accounts to demonstrate that notions from half a century and more ago have not disappeared from view. The downside is, of course, that in a few years, when the book will still be relevant for its historical analysis, sections referring explicitly to the year 2000 will also be in the past tense. This minor limitation does not prevent *Girl Trouble* from being an excellent model for all of us who are convinced that the stories of yesterday also belong to today and tomorrow.

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Sharla Fett, *Working Cures: Healing, Health, and Power on Southern Slave Plantations* (Chapel Hill: University of North Carolina Press, 2002).

In *The Souls of Black Folk*, W.E.B. Du Bois described the "Priest or Medicineman" as the "healer of the sick, the interpreter of the Unknown, the comforter of the sorrowing, [and] the supernatural avenger of wrong."<sup>1</sup> Healing, comforting, and avenging are just a few of the roles that Sharla Fett, in *Working Cures*:

*Healing, Health, and Power on Southern Slave Plantations*, sees slave health workers as playing in Virginia, North and South Carolina, and Georgia. She tells the story of black healers, both those who worked in the slave hospitals as midwives and nurses and those “conjurers” who used otherworldly methods to diagnose and heal sickness. Fett has written a cultural and political analysis of health and medical practice in the southern United States, one that situates U.S. practices within the larger African diaspora. She builds on the work of medical historians – such as Todd Savitt and Kenneth Kiple – who have done much of the ground-work on illness and mortality among southern slave populations. She also draws on historians and anthropologists, such as Michael Gomez and Wyatt MacGaffey, who have enriched our understanding African diasporic cultural practices. This is more than a history of slave medicine; it is, as Fett writes, a “political history that bears upon our larger understanding of the very institution of slavery” (199).

In her introduction, Fett signals her emphasis on racial power relations. She begins by reminding readers about the decades-long Tuskegee study on the effects of untreated syphilis in black men and characterizes this as an example of “scientific and medical injustice” which, along with such twentieth-century practices as eugenics and enforced sterilization, comprised part of the “legac[y] of slavery and racism” (1, 2). This medical inheritance included the enforced examination of enslaved Africans before shipment to the Americas and their medical abuse and torture on the plantations, and it belies the paternalistic myth of southern slavery. Medicine, Fett argues, was used to “discipline and torture” (1). White doctors and planters tended to sick and injured slaves and treated them with standard remedies such as purgatives and emetics, but, as Fett shows, some used these to punish as well. Doctors, thus, were key planter allies, helping maintain plantation discipline by meting out punishment and assessing slave complaints of illness, a common way enslaved African Americans resisted slavery. Medical mistreatment also extended to enslaved and free blacks subjected to risky experimental medical procedures that white doctors would not have inflicted on white patients. Even death could not protect slaves; African American bodies were autopsied and used for medical school demonstrations, which enslaved blacks saw as a cultural and spiritual affront, “an unholy theft from the dead” (156).

This book does not portray enslaved African Americans only as “victims of medical malice” (2) or interpret “health” solely from a white/Euro-American perspective. White planters and doctors saw blacks as chattel and their health in monetary terms. Enslaved African Americans, on the other hand, viewed health more broadly: relationships among humans and spirits determined emotional and physical health. Healing was consequently a “collective enterprise,” calling upon the living, the dead, and the spirits (56). The practice of “conjunction,” as Fett argues, illustrates this understanding of health and healing. Conjurers, or

root doctors, diagnosed sickness and proffered remedies but also attempted to solve problems internal to the community of the enslaved, which could manifest themselves as physical illness. One of the best sections of the book is Fett's analysis of "conjure narratives," tales of sickness and social conflict that highlighted the ability of conjurers to diagnose and cure a range of physical and social ills. In their efforts to divine the cause of illness, conjurers often pointed to a "conjure packet" (102). Drawing on the work of African anthropologists, she tries to show the similarity between these African American "conjure packets" and Kongo medical/magical practices. This discussion and her examination of "sacred plants" and African American herbalism illustrate Fett's attempt to place African American practices within a black Atlantic context. She admits that "evidence of direct African retentions" was more apparent in Cuba, Brazil, and Haiti but argues that black American medical practices "rested on a notion of a spiritually enlivened landscape drawn from both African cosmologies and African American theology" (78).

Fett maintains that the gendered nature of plantation life meant that slave women played an important role in the expansion of African American herbal knowledge and indeed were often the primary health workers in the plantation hospitals and in the slave quarters. They acquired medical skills through a lifetime of work on the estates, as mothers and caregivers to their families and the wider community, tasks demanded by slave owners but also performed out of affection. Although they carried out much of the health work needed on the plantations, slave women were represented as unskilled and callous. The "contradictory characterization of enslaved nurses as capable and ignorant, reliable and deceptive," Fett contends, "reflected planters' fears concerning their inability to control slave women's work" (140). Their duties gave them opportunity to undermine plantation discipline. Enslaved nurses could, for example, administer poison or help other slaves feign illness and thereby avoid work (194). Although on one level such actions can seem banal, they represented the larger struggle between enslaved blacks and white slave owners over the control of black bodies and black labour. Feigning illness was just one of the many ways that enslaved African Americans fought "against a relentless assault on their humanity" (193).

Although the subject of struggle is central to this book, its examination of the subtle and complex interculturalism that was part of southern medical practice is as important. In the early years of conquest and settlement, Africans, Europeans, and Amerindians borrowed each others' medicines. Even as the slave system became more entrenched over time, blacks and whites continued to exchange remedies, displaying a kind of medical pragmatism that contradicted the dominant racial ideology. The exigencies of plantation life facilitated such exchanges, particularly among women, as enslaved women and female slaveholders at times worked together nursing the sick.

One of the book's many strengths is its ability to move back and forth between different medical worlds, that of white doctors (and planters, as lay practitioners) and enslaved African Americans, each drawing on different traditions informed by the American environment. The well-established Euro-American medical infrastructure – medical schools, hospitals, and journals – produced such documentary sources as doctors' letters and medical case studies which provide a window on white medical ideas and practices. These are supplemented by plantation records, including slave owners' diaries and correspondence, and plantation reports. The picture of African American healing is crafted from a careful reading of diverse sources: Fett has used slave narratives, interviews with former slaves, and physical remains, such as medicine bowls and "conjure packets". She acknowledges that post-emancipation sources, most prominently the interviews with former slaves, are problematic but defends them as "an invaluable source for studies of African American life under slavery" (209, n.68). *Working Cures* does more than look at black healers and healing practices, it examines a southern medical culture produced by the meeting of African and European medical traditions and practiced by white Euro-Americans and enslaved African Americans, a "medical history in which human interactions, not diseases or treatments, occupy center stage" (10).

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<sup>i</sup> W. E. B. Du Bois, *The Souls of Black Folk* (Greenwich: Fawcett Publications, Inc., 1953; 1968), 144.

Pamela H. Smith and Paula Findlen, eds., *Merchants and Marvels: Commerce, Science, and Art in Early Modern Europe* (London and New York: Routledge, 2002).

This splendid volume of essays traces the relationship of art, science, and commerce in early modern Europe, posing important challenges to received wisdom about the Scientific Revolution and the history of collecting practices. As Smith and Findlen suggest in their introductory essay, the historical relationship between science and commerce has received rather less scholarly attention than that of science and art. While the intersection of visual representation and scientific practice remains a major theme of many of these essays, the incorporation of questions about commerce adds a significant and exciting new dimension to the history of early modern science.

Smith and Findlen note that their emphasis on the centrality of commerce in early modern scientific practice introduces a different cast of characters and a