

Warsh, Cheryl Krasnick, *Moments of Unreason: The Practice of Canadian Psychiatry and the Homewood Retreat, 1883-1923.* Montreal and Kingston: McGill-Queen's University Press, 1989. Pp. xxiii, 279. Black and White photographs, bibliography. \$29.95, (hard)

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A certain obscurity of interpretation is the book's most serious weakness. Mac-Dougall states that "[b]y adapting the changing focus of the international public health movement to Toronto's circumstances, the staff were translating public health theory into services and programs, while consistently seeking to remain at the forefront of the crusade for health." This effective unifying thesis is offered in the introduction, and results of international influences are indeed reported, ranging in time from acceptance of the germ theory of disease to adoption of antibiotics and (for health education) the latest forms of mass communication; furthermore, local problems that faced

the department are enumerated in considerable detail. Some things are lacking, however, for a clear interpretation along the indicated lines: there is no concise general description of "Toronto's circumstances" (a chapter analogous to Judith Walzer Leavitt's "Milwaukee: the City and its Health Problems," in her *The Healthiest City* (1982), would have been very welcome); more seriously, although local and international developments are regularly presented side-by-side, it is seldom clear just what influence local circumstances had on the timing or effectiveness of "translating . . . theory into services." Clear interpretation is particularly lacking in the treatment of recent years, where focus on the health department is lost in accounts of the work of hospitals, voluntary organizations, citizens' action groups and agencies of senior levels of government. Unfortunately, flawed writing also interferes with clarity of interpretation throughout. There are paragraphs without unifying themes and series of questions not clearly answered.

Considering the level of detail and the time span covered, it is not surprising that several theses are implicit in Activists and Advocates. One that strikes me as particularly significant for institutional history is the declining importance of the department to the city's health as environmental problems were found to lie mainly beyond the city's authority. The value of coordination on a larger scale put advanced medical research beyond its means, and social and political decisions put expensive procedures for diagnosis and treatment into other hands.

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Warsh, Cheryl Krasnick, *Moments of Unreason: The Practice of Canadian Psychiatry and the Homewood Retreat, 1883-1923*. Montreal and Kingston: McGill-Queen's University Press, 1989. Pp. xxiii, 279. Black and White photographs, bibliography. \$29.95, (hard).

In the second half of the nineteenth century, Canada developed a number of large public asylums for patients with nervous and mental disorders. The model for the public asylum network in Canada was in the province of Ontario, and included the asylums in Toronto, London, Hamilton and Kingston. Although originally set up as centres for "moral treatment"—based on the belief that the patient's environment was partially responsible for the mental disorder and that removal to a new, controlled and pleasant environment was a first step to recovery—overcrowding, deteriorating facilities, lack of staff and a growing chronic population negated this aim.

In 1883, the Homewood Retreat, the first large private asylum for nervous and

mental disorders in Canada, was established in Guelph, Ontario, to try to address the growing need for the mental health care of the middle class that many felt was not being met by the provincial asylums.

Moments of Unreason is a study of the Homewood Retreat and its patients during the first forty years of its existence (1883–1923). The book is derived from the author's thesis and includes extensive notes, numerous figures and tables and a forty nine page bibliography. In the thesis, as reported in the book, the author studies the case records of 567 male and 567 female patients who were admitted to the Homewood Retreat during this period (about one quarter of the total number of patients admitted to the Homewood Retreat during this forty year period.) This is the first detailed study of a private asylum in North America but the work puts the Homewood Retreat in perspective by also painting the broader picture of North American and European psychiatry and the social climate that contributed to the patients' conditions during this period.

The chapters of the book deal with: the establishment of the retreat; the superintendents of the retreat during this period, Dr. Stephen Lett and Dr. Alfred Hobbs, and their relations with the broader medical community in North America, and particularly in Ontario; diagnostic and therapeutic procedures used at the retreat; family motivations for commitment, and the dynamics of the social redundancy of women during this period; domestic life and mental breakdown, and the way the retreat dealt with these; the retreat staff; resistant patients, and the way the retreat coped with them; alcoholism and its

treatment; and the aristocratic vice (drug addiction) and its medical treatment in the nineteenth century.

Warsh not only presents a picture of the Homewood Retreat, its methods of treatment, financial and staffing problems and changing population, but also portrays the changing urban climate and family situations that led to the admission of many of the patients. There is a tendency today to think of family and urban problems as being a product of the post-second world war period. In this study, however, we see the effect of nineteenth century urban development, the decline of the extended family and the increased social redundancy of widows and spinners on the mental health of many members of the middle class (especially the females). Whereas for the middle class female patients this frequently resulted in a diagnosis of neurasthenia, for the middle class male patients alcoholism and drug addiction were significant problems. During the period of study the presenting problems recorded for 424 females and 450 males illustrate the differences. The most frequent presenting problems for the females were bereavement (36), exhaustion from overwork (42), stress (26) and debility following illness (49). For the male patients, the most frequent presenting problems were alcoholism (159), addiction to drugs (35) and syphilis (32). Male patients with alcohol problems tended to dominate the early years of the Homewood Retreat, but by the turn of the century the "more normal" pattern of females being over-represented as patients was finally established at Homewood.

The most frequent psychiatric diagnosis over the years was neurasthenia with respectability concerns on the part of the family being a significant reason for

families having patients committed ("better that people should think you insane than think you a bad immoral woman"). Also, by the turn of the century, many dependent women were seen as socially redundant (particularly after the death of the family member they had cared for) and their subsequent stays in the retreat were lengthened if they were not seen as being useful in the family setting. Some of the females (particularly widows) were kept in the retreat by relations eager to control their finances.

During this period, the fundamental treatment feature was the rest cure (isolation from over-indulgent relatives, bed rest, limited mental diversion, over-feeding and massage), but as the years passed this approach was augmented by hydrotherapy (continuous warm water baths), electrotherapy (the application of direct and alternating currents to various parts of the body), sexual surgery for females (based on the philosophy that the reproductive organs were central to a woman's mental and emotional well-being), and chemotherapy (salvarsan) for syphilis. Hereditarianism (the theory that the major cause of mental problems, including substance abuse, was hereditary) was a major causal philosophy for much of the work at the retreat.

Warsh's work is primarily a scholarly thesis, one that is thoroughly researched and footnoted. It provides a detailed study of a slice of Canadian psychiatric practice and the conditions that contributed to mental problems in the middle class at the turn of this century. The notes and bibliography provide a significant source for those interested in further investigation of this topic.

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Dubé, Philippe, *Charlevoix: Two Centuries at Murray Bay*. Kingston and Montreal: McGill-Queen's University Press, 1990. Pp. 271

Wetherell, Donald G., with Irene Kmets, *'Useful Pleasures': The Shaping of Leisure in Alberta 1896-1945*. Regina: Alberta Culture and Multiculturalism/Canadian Plains Research Centre, 1990. Pp. 430.

Leisure is serious business in Canada, as in all societies touched by the heavy hand of the Protestant ethic. Whether on the shores of the St. Lawrence at glorious Murray Bay or in wild rose county, a society's recreations tell us much about its values.

In 'Useful Pleasures': The Shaping of Leisure in Alberta 1896-1945, authors Donald G. Wetherell and Irene Kmets examine "social, economic and technological influences on leisure in Alberta," in the light of the political, economic and social evolution of the province. They succeed admirably. The book hypothesizes that the hegemony of the British/Ontario values of the province's anglophone elite groups (whose numbers fluctuated around 50% of the population between 1901 and 1945) infused the spectrum of leisure activities in Alberta. The work ethic was paramount in society in the period, and most leisure activities were implicitly conceived as enhancements or inducements to productivity, good citizenship and related virtues. Wetherell and Kmets examine leisure in its many forms, from the development of libraries, parks, playgrounds, rodeos, fellowship organisations and the performing arts in the province to the evolution of radio and film, as well as the history of bars, poolrooms and