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For all that, Donegan's work, too, is a milestone.

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Gagan, David. *'A Necessity Among Us': The Owen Sound General and Marine Hospital 1891-1985.* Toronto: University of Toronto Press, 1990. Pp. xiii, 161. Black and white photographs; index.

David Gagan's new book concisely analyzes the development of the general hospital at Owen Sound from its beginnings as a local charitable enterprise in 1893 to its emergence in the age of medicare as the central institution in an integrated web of regional medical resources. An excellent introduction solidly places the hospital's history in its broader context: the twentieth-century transformation of North American hospitals from "charity" shelters for the sick poor to efficient, scientific and enormously expensive dispensers of care. This case study is particularly valuable in that the operation of these forces in Canada is still largely unexplored.

The history of the G & M illustrates a central contradiction. In the 19th century, the well-to-do supported hospitals as a charitable haven for the poor, who could not afford home care by a private physician. In response to a variety of factors including a growing spirit of progressive urban reform, an increased availability of effective medical therapies and an increase in the status of the medical profession, the 20th century hospital came to be perceived as a vital necessity for the community as a whole, expected to deliver quality health care to all classes while functioning as an efficient business enterprise. The book's greatest strength is in its depiction of the characteristically uneven yet continuing growth that resulted not only from technological and administrative change but from these gradually changing attitudes.

Even as the hospital began its transformation, the demand for health care and the costs of providing it began their modern spiral. These changes guaranteed that patient fees, even coupled with periodic fundraising drives, would quickly prove insufficient to sustain services even at current levels, and still less to provide for timely modernization and expansion. Older ideas about what a hospital should be, however, were slow to die, and conflicting expectations ensured early and ongoing conflicts over hospital control and financing. Among the lay volunteers who helped to found the G & M, women were the first casualty, being quickly and systematically excluded from any decision-making function. Next came the struggle for dominance between medical professionals and lay trustees, with the "lady superintendent" eventually giving way to a team of administrative specialists. Like other hospitals, the G & M experienced repeated financial crises. While it was often forced to postpone expansion, and even at times to curtail or to impose surcharges on existing services, the community and its politicians seemed slow to appreciate that the problem was, perhaps, less a question of "inefficiency" than of unrealistic expectations.

After 1945, the crisis became acute. People were less likely than ever to see the hospital as a legitimate recipient of charitable donations, and, in Gagan's words, the G & M was "caught between the millstones of ... [booming] demand for its services and lack of public interest in its problems." Originally offered optional "extras" and relied upon to subsidize basic services for all, paying patients might now face "medical impoverishment" even for routine hospital procedures. Postwar, the immediate problem was alleviated through increased availability and utilization of private hospital insurance.

The observation has become commonplace that the subsequent involvement of the provincial and federal governments, first in hospital and then in general medical insurance, has not solved all of Canada's health care problems and may, indeed, have created some. But Gagan's exploration of the hospital's history between 1960 and 1985, covering about fifteen pages, is far too short and sketchy to shed much light on these issues. For earlier periods, changing patterns of hospital income and patient utilization are given in helpful statistical summaries integrated with the text, and should offer a sound basis for comparison in studies of other Canadian hospitals. Discussion of the earliest years of the G & M are also supplemented with a richly detailed picture of daily life in the hospital, where student nurses, who had "virtually complete charge of the wards" during their 12-hour shifts, attended classes in their "free" time; and where patients were faced with a bewildering array of rules governing behaviour whose violation could bring discharge. Unfortunately, this descriptive account is not sustained into later periods, and hence there is little sense of changes in actual patient experience to counterbalance the hospital's changing administrative and financial condition. In fact, less emphasis might have been given overall to the minutiae of the G & M's financial woes. While the description of funding sources makes an essential point about the perceived role of the institution in the community, even readers quite undaunted by long discussions involving debentures, bonds and sinking funds might wish for a more lively style, and more balance with the changing social context.

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