COLONIAL PERIOD

Colonial Identity in the Atlantic World, 1500–1800. Edited by NICHOLAS CANNY and ANTHONY PAGDEN. Princeton: Princeton University Press, 1987. Notes. Table. Index. Pp. 291. Cloth. \$35.00

The emergence of identities in European colonists of the Atlantic world distinct from those of their mother countries has long hovered on the periphery of scholars' inquiries, a theme admittedly important but difficult to pin down and solve. A seminar, held at the Institute for Advanced Study in Princeton, in 1982, which directly tackled the problem, is the source of most of the essays in this volume. Two additional ones, by Jack P. Greene on Barbados as an example of the British Caribbean and the introduction by John H. Elliott, were commissioned subsequently. Perhaps surprisingly, but most felicitously, an exploration by Nicholas Canny of the consciousness of separate identity in the English and Scottish settlers in Ireland adds a preview of developments in an earlier series of overseas plantations, although merely across the Irish Sea. The introduction by Elliott and a concluding essay by Anthony Pagden and Canny indicate what they think are the agreements and disagreements of the essays. Pagden and Canny, in addition, draw a distinction between consciousness of separate identity and political independence in the form of a national state, although they admit that the two are often closely related.

All authors agree in finding a common trend, but one with sufficient variation to make inapplicable the idea of a common model. Separate consciousness arose in each of the colonies because of the general tendency of the society and government in the mother country to consider the colonists inferior. Discrimination might be merely social, but usually it extended to economic and political measures. In the meantime, the need to adapt to conditions usually markedly different from those of the mother country created in each set of colonists very real changes. The presence of native peoples, often in a majority, and of slaves of African origin, a clear majority in most of the Caribbean, also gave rise to novel circumstances not easily matched in Europe, except in Ireland and on the Slavic periphery. Canada, Barbados (and presumably much of the British Caribbean), and Ireland were somewhat different cases. In Canada, the interplay of British and French and the lack of a genuine Indian danger created a differing pattern of two weaker identities with failure to arrive at a common Canadian one. In Barbados and Ireland, the menace of the slaves and the native Irish, respectively, dampened the move toward separate antagonistic identities in the colonists since they had to rely on the mother country for aid.

As the writers of the introduction and conclusion were aware, the essays draw

their material from printed and written sources and so deal only with the creoles of relatively pure European ancestry. Stuart Schwartz, analyzing the Brazilian case, and Elliott point out that mixed breeds, Amerindians, and blacks, having no reason for loyalty to the mother country, probably developed consciousness of a separate identity much earlier, but there is no available record on this.

This book breaks new ground with well written, cogently argued analyses. It should evoke considerably more exploration of a hitherto nebulous theme.

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Medicine in the New World: New Spain, New France, and New England. Edited by RONALD L. NUMBERS. Knoxville: University of Tennessee Press, 1987. Photographs. Table. Illustration. Notes. Bibliography. Index. Pp. 175. Cloth.

This tightly constructed analysis of medical practice in New Spain (Gunter R. Risse), New France (Toby Gelfand), and New England (Eric H. Christianson) challenges the premise that the New World environment created a distinct genre of general practitioner, freed from the restraints of Old World methods and learning. In all three European societies, bonafide, licensed physicians and surgeons trained in Alcalá de Henares, Paris, or London, relying on Galen, Hippocrates, and Avicenna, transmitted their theories and practices virtually unchanged to colonies overseas. Because of severe shortages of physicians in the New World, however, homegrown practitioners, who learned as apprentices, emerged by default and were hierarchically arranged according to their specialty. With no local training ground available at all in New France and none in New England until the 1780s, the self-trained empiric became the rule. In Mexico, however, the Royal and Pontifical University began providing European-style, formal training in the late sixteenth century, two hundred years before Harvard, while the protomedicato led the way in licensing physicians. In New France, a nondegree-holding "king's physician" served somewhat the same function for the surgeons of the colony, but in New England private medical societies licensed doctors. Hospitals serving all levels of society dotted Mexico City, and Quebec could boast the Hôtel-Dieu. New England, however, had no hospitals at all until the nineteenth century, only temporary military hospitals and alms or poor houses. Medical practitioners in New England initiated medical innovations such as inoculation earlier than their counterparts in New France or New Spain, but by the late eighteenth century, doctors in Mexico were as quick as those in Boston to put in place new curative or preventive health measures.

Ably edited by Ronald Numbers, this piece of comparative history shows that medical practice in the Spanish empire in the New World compared favorably with methods and techniques used elsewhere. In fact, the Hispanic sense of public responsibility for the sick at all levels was more deep-seated, regulatory agencies