

regions of politics depended on many more factors than just the amount of alcohol consumed in a given period. His main argument is that the history of alcohol legislation reflects the complexity of the political process in this particular period, as a dialogue between new and growing pressures of collectivism and a long-established persuasive strain of liberalism.

This book is an analysis of Whitehall élites discussing a social problem. The social aspect of drinking, however, or the politics of drink at the grassroots, would be the subject of a completely different study. John Greenaway admits that as a political scholar his main concern is with power at the level of high politics and this results in a rather dry history of drink.

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Signhild Vallgård, *Folkesundhed som politik. Danmark og Sverige fra 1930 til i dag*, Aarhus Universitetsforlag, 2003, pp. 299, kr 298.00 (paperback 87-7934-065-2).

What counts most in public health policy ideology and economy of a specific period or national characteristics? This is one of the questions asked by the Swedish-Danish historian Signhild Vallgård in her book on public health policies in Denmark and Sweden during the 1930s and 1940s, and from 1970 to the present. Through nearly 300 pages she analyses campaigns to promote a healthy population, health legislation (primarily mother and child) and measures taken to prevent contagious diseases such as tuberculosis and AIDS. Her sources are public documents, i.e. committee reports, legislative proposals, parliamentary debates, etc. One of her key questions is: what kind of arguments were used by politicians and the bureaucracy (supported by experts) to legitimize public health policy? Her theoretical framework is first and foremost Michel Foucault's notion of *governmentality*—the kind of power imposed upon people to obtain recognition and self-discipline—and the notion of *empowerment*—to impose power by

motivating and inspiring people to act in the interest of the authorities. The book also forms part of the big Danish research project on Democracy and Power which was launched by the Danish Parliament in 1994. The purpose of the project was to carry out an analysis of the state of Danish democracy at the beginning of the twenty-first century, and Signhild Vallgård was a member of this project's Steering Committee.

Vallgård's book, which is a thorough and well documented investigation, contains some interesting findings. As to the question of what is most influential in forming public health policy, prevailing political culture, or specific national traits, she definitely concludes from her comparison of Denmark and Sweden that political culture is more influential than nationality. For example, the population decline, which was a severe problem in both countries in the 1930s, produced similar responses. Sweden had the lowest birth rate in Europe at the time. Denmark had a relatively high infant mortality rate (no. 13 in the European table), which threatened its self-image as a civilized country. Low birth rate and high infant mortality both resulted in a decline in population. In both Denmark and Sweden political and expert rhetoric referred constantly to the need for a solid population of civilized citizens. The aim was not just to be on the same level as other "nations of culture", but to surpass them.

An overriding theme throughout these periods was the unending discussion about individual freedom versus the protection of the society, or liberalism versus the authorities' obligation to protect the citizens from such dangers as contagious disease. Here the author has found differences between the two countries but also similarities hitherto unrecognized. The Danes see themselves as liking pragmatic policies and viewing all regulations as violations of individual rights. The Swedes, on the other hand, are looked upon, by themselves and others, as restrictive and rationalistic, accepting regulations which would not be tolerated in Denmark. Vallgård's analysis shows that this is only partly true. Danish public health policy has certainly been restrictive, especially

Book Reviews

towards individuals on the lower rungs of the social ladder. On the other hand, the Swedish authorities have always been more willing than the Danes to regard health, disease and social problems as the results of structural conditions rather than of individual choices. Accordingly their respective politics have partly developed in different directions. Yet the differences between the two countries are rather small and far from the general national images.

Other interesting conclusions are that political initiatives increasingly have been based on scientific findings and recommendations and that the politicians' willingness to intervene has risen considerably between the 1930s and 2000. According to Vallgård, there have never been more restrictions and regulations intruding on the individual than today, and never have the politicians been more anxious to "educate" a "clean" and healthy population. This is a paradox at a time when individual freedom is set high, if not extremely high.

Signhild Vallgård says that she limits herself solely to an analysis of health promotion which is initiated and sanctioned by politicians. This means that she says very little about the users, about how the many regulations and control measures were received. This is a weakness in the book. What about the question of compliance? What about opposition and resistance? There must have been protests and discussions among the public. And in the event of protest and public debate, were policies revised? You can hardly talk about the exertion of power if you consider only one of the parties and ignore the other. The failure to consider the practical outcomes of policy is a serious omission. An analysis of the way in which these many measures were received might have given another picture, or a revised picture, of the growth of public health policy and the differences between the countries. And, not least, it might have given a more rounded and interesting account. I found part of the book rather "dry" and the central theme difficult to follow. There are quite a number of repetitions, and the author has perhaps kept too rigidly to her theoretical framework. However, this is a solid presentation of public health policies in two of the

Scandinavian countries in the twentieth century.

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A Grieco, D Fano, T Carter, and S Iavicoli (eds), *Origins of occupational health associations in the world*, Amsterdam and Boston, Elsevier, 2003, pp. x, 291, illus., €100.00, US\$100.00 (hardback 0-444-51301-9).

This volume looks at associations in twenty-three countries spread across four continents and rarely can any study in any branch of history claim such worldly breadth. Both the earliest and the latest industrialized countries are included. Unsurprisingly we see that the establishment of occupational health associations is in most countries dependent upon, and so usually lags behind, industrialization. The stark and curious exception to this is Singapore, which established an occupational medical society in 1966 simultaneously with the onset of rapid industrialization. One would expect those countries in which organized labour and capital have been around since the beginnings of industrialization to be those where trade unions and employer associations compete for, and have influence over, the framing and jurisdiction of occupational health institutes and legalization. In some cases, organized capital tends to comply only minimally with health and safety laws as in Ecuador; in others trade unions are a real partner in health legislation as in Norway. Occupational institutes and laws are located within the wider state tradition. A notable incongruity is France, with its strong state and bureaucratic tradition, which saw an impressive array of institutes established in the twentieth century to deal with the problems of industrialized work, but the law regulating them is and was very liberal. It was the big cities, Lyons, Lille, and Paris, which saw the first occupational institutes, the earliest was established in 1930 in Lyons. In another detailed and contextual chapter, Germany, like France is also shown to have a lineage of