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**Gayle Davis and Tracey Loughran** (eds), *The Palgrave Handbook of Infertility in Britain* (London: Palgrave Macmillan, 2017), pp. xvii + 663, £160.00, hardback, ISBN: 9781137520791.

In their introduction to the twenty-five wide-ranging chapters which make up *The Palgrave Handbook of Infertility in History*, Tracey Loughran and Gayle Davis note that modern media coverage of infertility tends to be ‘relentlessly present-minded’ and to situate infertility ‘as a “problem” related to the particular social conditions of Western women’s lives’ (p. 2). One of the many triumphs of this volume is that it queries both the assumption that infertility is a ‘problem’, and that it is specifically a feminine problem. Beginning with Laurence M.V. Totelin’s discussion of understandings of plant infertility in antiquity, which underscores the relational understanding of fertility in both botany and human reproduction, many of the chapters highlight men’s role in infertility. Penny Roberts’ discussion of the succession crisis of the Valois king Henry III and his wife Louise de Lorraine-Vaudémont reveals how both partners participated in medical and religious rituals to encourage a fertile union. Both Hayley Andrew’s review of the (largely positive) discussion of artificial insemination by donor (AID) in the British media in the late 1950s, and Davis’s troubling discussion of Scottish doctors’ pathologisation of women who sought AID in the same period as unhealthily obsessed by their desire to have a child, engage with a changing social context in which male-factor infertility was increasingly acknowledged and treated through donor insemination. Catherine Rider’s chapter on diagnostic and therapeutic treatments for infertility in medieval recipe books reveals that, while infertility was primarily perceived as a female problem, this was not exclusively the case, and many treatments for female infertility actively engaged male partners.

Other chapters, particularly those focusing on the nineteenth century, such as Sophie Vasset’s discussion of French medical understandings of female sterility in the early nineteenth century and Anne Hanley’s discussion of infertility and venereal disease in Edwardian British medicine, highlight the historic origins of present-day popular representations of infertility as a ‘women’s disease’ (representations which are poignantly unpacked in Sally Bishop Shigley’s discussion of infertility, disability and possibility in feminist literature). As Daniel Grey’s article on infertility in contemporary India makes clear, women remain even more likely to ‘bear the blame’ for infertility in more patriarchal cultures. In India, ‘infertile women . . . seem to be at a high risk of abuse, including actual or attempted murder’ (p. 250). Yet, while the balance of chapters focus on women’s experience, the book effectively problematises assumptions that infertility has historically been viewed as a women’s problem.

The *Handbook* offers refreshing breadth in its approach to the history of infertility, but retains a strong bias towards the modern period. The majority of the chapters in Part IV (‘Agency and Invisibility in Constructions of Infertility’) and Part V (‘Reproductive Technologies and Imagined Futures’) deal with artificial reproductive technologies (ARTs) and/or with the relationship between infertility and feminist movements. While all but one of the contributions to the first three sections are written by historians, Parts IV and V include chapters by academics from medical and health sciences, sociology, psychology, philosophy and literature. Sofia Gameiro and Jacky Boivon contribute a brief history of psychology and infertility in the twentieth century, shifting from a preoccupation with the supposed psychogenic origins of infertility in the early to mid century, to a focus on treating the psychological consequences of infertility in the 1970s, to an integration of psychologists into the treatment teams delivering assisted reproductive technologies such

as IVF from the 1980s. While Gameiro and Boivon emphasise the role of psychologists in supporting patients through the process of pursuing ARTs, both Davis's chapter on AID, and Duncan Wilson's chapter on IVF and discourses on the 'right to a child' in 1970s and 1980s Britain underscore how psychology could be used to delegitimise certain individuals' ambition to pursue ARTs.

Wilson's chapter is more about who has a theoretical or legal right to infertility treatment, than who has a social right to such treatment. However, in countries with socialised medicine, or other forms of communal health insurance, the question of rights is as much about the practical rights to access-funded treatment as about theoretical rights to care. Sara MacBride Stewart and Rachel Simon-Kumar approach this issue from a comparative perspective in their review of feminist contributions to the debate on infertility treatment in the global north and south. Picking up on Tracey Loughran's discussion of second-wave feminists and cultural representations of infertility, the two public health scholars note that feminist debate in the global north had initially been preoccupied with providing a gendered critique of the medical discourses of assisted reproductive technology which posited the infertile female body as diseased and in need of treatment, and implicitly placed motherhood at the centre of women's life experience. Feminists in the global south, in contrast, were more concerned to encourage the state to protect women's bodily autonomy and their right to procreate, in the face of widespread state-sponsored campaigns of forced sterilisation. In this context, women from the global south were not averse to ARTs, but most saw them as peripheral to their concerns, not least because of the high costs of such procedures. The sociologist Rene Almeling picks up on the economic angle through her exploration of the cultural economy of sperm and oocyte 'donation'; and Fabrice Cahen traces how religious and political obstacles derailed attempts to bring infertility treatment under the umbrella of state social security in France in the early twentieth century. Yet, these two articles notwithstanding, the economics of infertility treatment are largely absent from the volume.

This engrossing and wide-ranging volume is an invaluable resource for those interested in the comparative study of infertility across time and borders, and it would be churlish to harp on what is excluded. That said, the authors begin by illuminating the range of stories that have remained hidden from history, including 'secondary infertility', or the inability to give birth to a second child. The 'problem' of secondary sterility or sub-fertility was frequently highlighted by medical practitioners in the late nineteenth and early twentieth centuries. Yet, excepting in Angela Davis's chapter drawn from oral interviews with a group of post-war Oxfordshire mothers, secondary infertility receives only glancing attention. Its omission only underscores the volume of work still to be done on the history of infertility in Britain and beyond.

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**Jennifer Tappan**, *The Riddle of Malnutrition: The Long Arc of Biomedical and Public Health Interventions in Uganda* (Athens, OH: Ohio University Press, 2017), pp. xx + 218, £26.99, paperback, ISBN: 9780821422465.

The striking image of the half-naked pot bellied African child that adorns the cover of Jennifer Tappan's new book is one that carries with it a multitude of uncomfortable associations. Images such as this one became particularly common within western mass