

done so. Those with stronger convictions regarding doctrine found that, after a time, Catholic reforms began to catch up to Protestant ones. Many people simply did not care very much about the doctrinal differences between the two faiths, Hanlon argues. It was thanks to this indifference that the people of Aquitaine were able to shift their allegiances with apparently minimal anguish. The direction of their shifts depended on any number of factors: Crown policy, marriage, the faith of the majority. The Crown eventually decided that harmony in France could best be preserved by Catholic uniformity, and so Protestantism came to be associated with rebellion. This, Hanlon argues, was the real reason why French Protestantism lost most of its vigour and many adherents by the end of the seventeenth century, even without overt persecution at the local level.

Was this tolerance? Hanlon is careful to point out that the tolerance of the Midi in the seventeenth century was not an idealistic but a practical choice for many communities. Tolerance in the modern sense of *respect de la différence* would be an anachronistic term to describe their modes of co-operation. The people of early modern France did not consciously seek out tolerance in an attempt to achieve peace or justice; nor did they believe that tolerance as such was a virtue. They learned tolerance through their need for co-operation. One problem with Hanlon's thesis is that religious strife was in fact so persistent during the period he studies. His argument that such strife was the result of Crown policy and the efforts of a small number of powerful religious leaders, rather than widespread inter-confessional hatred, is convincing, however. In that way, Hanlon's history affords us some hope for a resolution of today's religious quarrels.

Lise Legault
University of Ottawa

John Landers — *Death and the Metropolis: Studies in the Demographic History of London 1670–1830*. Cambridge: Cambridge University Press, 1993. Pp. xxiii, 408.

In this book John Landers argues for the reintegration of mortality studies into social and economic history. To this end, he develops an explanatory model incorporating social and economic factors to account for mortality levels in London during the eighteenth century. He believes that London's very high mortality rates during this period resulted largely from its extraordinarily high potential for the spread of infectious diseases.

In the metropolitan centres populations were large enough to act as perennial reservoirs of infections, being characterised ... by a high level of both retention and, given their crowded populations and poor sanitation, conduction. (p. 29)

He hypothesizes, as well, that mortality rates among infants, children, and immigrants should be disproportionately high and that there should not be huge fluctuations in London's death rate. He argues that the extent to which London's housing

supply kept pace with the needs of the metropolitan population is "central to our understanding of mortality trends in the capital for a large part of the eighteenth century" (p. 87) since overcrowded buildings in poor condition bred disease. Landers shows that the supply of housing had in fact worsened for ordinary Londoners by mid-century. A preliminary analysis of the Bills of Mortality, moreover, bears out his main contentions.

In the second part of the book, Landers tests his model further. Using a family reconstitution study of London Quakers and a more in-depth analysis of the Bills of Mortality, Landers finds London's mortality level was substantially higher than that in other parts of the country until the last quarter of the century, when it began to fall. He also shows that infants and children were struck down disproportionately, as were recent immigrants to the capital. Finally, he finds continually very high levels of mortality in which fluctuations were moderate.

In the third section of the book, Landers seeks to understand the reasons both for London's mortality rates, which remained high until the 1780s, and for the dramatic transformation in the capital's epidemiological regime thereafter. He explores the seasonality and spatial variations in London's mortality level and he looks at its short-term variations. Landers blames the high mortality levels that characterized much of the century neither on water- and food-borne gastric diseases nor on malnutrition. Rather, he targets infections communicated person-to-person as the main culprit. He shows that a rising incidence of smallpox and typhus in the first half of the century was mostly responsible for the increasing mortality rates.

Landers also addresses the vexing question of the relationship between mortality rates and price levels. He finds that London mortality rates were sensitive to price movements, but not to a marked extent. In any case, he does not think this factor was the main determinant of short-term variations. Rather, he thinks "shifts in levels of exposure to infection and immunological resistance are likely to have been more important and to have reflected changes in population density and movement patterns" (p. 299).

Landers turns to these changes in his last chapter and finds substantial geographic variation within the capital during the century. He identifies a salubrious area in the westerly districts of London and a belt of inner suburbs where the mortality rates were particularly high. The latter were home to a great number of recent immigrants and were subject to deplorable housing conditions which led to overcrowding. He says that improvements in housing in the late eighteenth century lowered these high rates and, indeed, changed the geographic patterns of mortality.

Landers concludes by reiterating the close connections he sees between economic growth — particularly as they affected housing conditions — and mortality levels. He offers only a tentative sketch of the reasons for the late century decline, however. Aside from "renewed metropolitan growth" (especially of the housing market) and "a degree of financial 'modernization'" (p. 355), Landers says:

It thus seems likely that the story of mortality decline in London was chiefly one of a general decline in levels of exposure to infection, with an important, specific, contribution being made by changes in methods of infant care and feeding. The decline

in exposure was brought about by a range of factors which have yet to be fully elucidated, but they probably comprised a number of the traditional "industrial revolution" variables, including changes in consumption patterns and the position of the capital in the national urban hierarchy, as well as the actions of members of the medical profession. (p. 357)

While most of Landers's main contentions are familiar, there is much useful information in this book. General users will not find it an easy read, however. The book fairly bristles with tables and graphs, demographic jargon, needless abbreviation, and quasi-mathematical notation. While one appreciates the need to explain the methods by which evidence is produced, it is difficult not to see this as a book written by a demographer only for demographers.

In terms of Landers's stated intention to reintegrate mortality studies into social and economic history, the book can only be seen as a first step toward that goal. While Landers employs social and economic factors to explain mortality levels, these need to be more fully considered, especially with respect to the declining death rate after 1780. Nor does he adequately explain the significance of mortality studies to the general social or economic historian. How important a contribution was the late-eighteenth-century mortality decline to the population surge beginning to take place in these decades? How great was its contribution compared to the rising fertility rate? These may be questions requiring a separate book, in which case we must await the author's further efforts to reintegrate mortality studies into social and economic history.

Lynn MacKay
Trent University

Susan Kingsley Kent — *Making Peace: The Reconstruction of Gender in Inter-war Britain*. Princeton: Princeton University Press. 1993. Pp. x, 182.

As Susan Kingsley Kent acknowledges, there have been many different opinions as to the fate of British feminism in the inter-war years. Some have suggested that feminism adapted to new circumstances, changing tack towards something called by contemporaries "new feminism" and stressing the needs of women *qua* women, while others have concluded that feminism was virtually destroyed during these years, chiefly by the acceptance accorded sexology. Kent tends to the view that inter-war feminism failed and attributes this to the way in which gender was reconstructed after the war.

The argument traces the representation of gender between 1914 and 1939 and is both stimulating and provocative. Kent suggests that during the first year of World War I separate spheres for men and women were firmly re-established. While men were identified with war and death, women were firmly identified with the domestic arts of sewing and knitting and with motherhood. As women entered munitions factories and donned uniforms, gender identities became increasingly blurred in the