

trenched position in the British welfare state. Second, given that there is no unequivocal evidence that new feminists were concerned only with motherhood rather than with the needs of individual mothers, or indeed that they were exclusively concerned with mothering at the expense of women's position in the labour market, it is not clear that their outlook was in some way inferior to "old feminism". Certainly it is far-fetched to connect new feminism to fascism, as Kent does at the end of the book. Many feminists in the pre-war period argued for suffrage on the basis that women were mothers. There is no easy progression from equalitarian feminism to new feminism. Many women continued to hold ideas of equality and difference; for example, Vera Brittain, whom Kent regards as an old feminist, was nevertheless a strong supporter of babies' clubs for middle-class women. Divisions between old and new feminists undoubtedly existed; the split over protective labour legislation, which is recounted once more by Kent, was real enough. But it is by no means clear that inter-war feminism failed as this and other recent accounts suggest. The impressive gains that feminists made both in the reform of the private law of marriage, divorce, guardianship, and adoption and at the local level in terms of the provision of social services are not part of the story that Kent is telling, but they must be considered before any judgement regarding the strength of inter-war feminism is reached.

Jane Lewis  
*London School of Economics*

Virginia Berridge and Philip Strong, eds. — *AIDS and Contemporary History*.  
 Cambridge: Cambridge University Press, 1993. Pp. x, 284.

This very dense book, part of the Cambridge History of Medicine series, is edited by two co-directors of the AIDS Social History Programme at the London School of Hygiene and Tropical Medicine. Surely the existence of such a programme is itself a comment on contemporary history. AIDS has captured our public attention in a way no disease has done since the epidemics of the nineteenth century, spawning not only the establishment of medical initiatives but also of programmes to study those initiatives, their foibles and their successes.

In addition, the past decade or so has seen the production of a vast literature on AIDS. Just how vast can be ascertained by looking at the notes of the 12 essays in this collection. There are books; there are articles; there are government and private studies and pamphlets. And now, not even 15 years since AIDS was first considered to have become an "epidemic" in Great Britain, there is a history.

The book is divided into two sections. The first, entitled "The Pre-History of AIDS", not surprisingly deals with such historical background issues as the regulation of sexuality, the rise and fall of public health, a variety of screening techniques, and comparisons with other sexually transmitted diseases and with Hepatitis B.

Jeffrey Weeks begins in "AIDS and the Regulation of Sexuality" by showing that it is very difficult to provide a "monocausal account" (p. 32) of AIDS since more than one "history" is involved. He cites developments in the history of resistance (by the gay community), that of public health (position of the medical elite), and moral history (liberalism in the time of the Thatcher government). The result is, as far as Weeks is concerned, "a deeply historical phenomenon" (p. 17) presenting many challenges to those seeking to sort it out.

In "Public Health Doctors and AIDS as a Public Health Issue", Jane Lewis stands one of these themes on its head. Rather than follow the history of the disease, she asks instead what the study of AIDS can teach us about the status of public health. She shows us the sort of requirements a disease must fulfil to lend support to a large and powerful public health system. Basically, for public health to keep control, AIDS must be shown susceptible to techniques of quarantine and education.

Bridget Towers's "Politics and Policy: Historical Perspectives on Screening", looks at situations where public health has maintained some authority. She briefly discusses the history of screening for people infected with TB and VD, of men accused in paternity cases, and of would-be immigrants. All these situations involve questions of medical veracity and civil rights. She remains unconvinced that screening has much to offer in the case of AIDS. It is interesting to compare her conclusions with Lewis's discussion of quarantine. Ilana Lowy, in "Testing for a Sexually Transmissible Disease, 1907-1970: The History of the Wassermann Reaction", gives us insight into the application and reassessment of perhaps the most widely-known screening programme ever. The expression "Wassermann test" has even entered popular parlance as proof of veracity, a meaning that unfortunately the test in question has not properly earned.

The last two chapters in the pre-history section examine "The Politics of International Co-ordination to Combat Sexually Transmitted Diseases, 1900-1980s" (Paul Weindling) and "Hepatitis B as a Model (and Anti-Model) for AIDS" (William Muraskin). In a flurry of acronyms, Weindling takes us through the jurisdictional problems of dealing with an entity that has no respect for borders. Muraskin laments that too little of what has been learned as a result of the Hepatitis B pandemic has been applied in the fight against it and AIDS. He blames this on reluctance to make either disease a public issue because "no one wanted to risk panic and hysteria, stigma and discrimination" (p. 128).

The second section of the book looks at "AIDS as History" and begins with two chapters on drug use as a vector for AIDS. In "AIDS and British Drug Policy: Continuity or Change?", Virginia Berridge takes us back to the complications made apparent in Weeks's chapter. She argues that "the overall balance of power within policy is too complex and historically specific" (p. 152) to be dealt with easily within discussion of public health and drug policy. In "The New York Needle Trial: The Politics of Public Health in the Age of AIDS", Warwick Anderson canvasses the failure of one attempt to deal with AIDS as a technical problem.

The last four chapters all look at policy issues. Victoria A. Harden and Dennis Rodrigues set a "Context for a New Disease: Aspects of Biomedical Research

Policy in the United States before AIDS'. They argue that there was considerable flexibility in the system even before the enormity of the disease was recognized. Ewan Ferlie, in "The NHS Responds to HIV/AIDS", looks specifically at "how British health care organisations responded to an unanticipated epidemic" (p. 203). John Street ("A Fall in Interest? British AIDS Policy, 1986-1990") follows policies — and the political influence to which they are subject — over a shorter period. Monika Steffen ("AIDS Policies in France") provides comparison with another European nation.

The greatest value of this collection is that it assembles between two covers a wide variety of approaches to this one historical event. The fact that AIDS has captured so much attention has as much to say about the psychology of our society as about the seriousness of the disease. The various articles here try to balance these aspects. The book is also valuable in pointing the way to future issues for examination, making its concluding piece, an appendix by Janet Foster ("AIDS: The Archive Potential") particularly apropos. With the modern world's penchant for producing documentation and its sense that events are moving faster than ever before, treating so recent a phenomenon as AIDS as "history" does not seem misguided.

Janice Dickin McGinnis  
University of Calgary

Walter D. Connor — *The Accidental Proletariat: Workers, Politics, and Crisis in Gorbachev's Russia*. Princeton: Princeton University Press, 1991. Pp. xv, 374.

Éminent spécialiste du prolétariat en régime communiste, Walter D. Connor pose, en lever de rideau, la question suivante : dans quelle mesure les cols-bleus soviétiques forment-ils une classe consciente de son statut social et prête à agir sur la base de cette prise de conscience?

Quoique sociologue et politologue avant tout, l'auteur n'en reconnaît pas moins l'importance d'un regard historique sur l'évolution de cette classe ouvrière, au cours des cent dernières années. Ses mutations sont multiples : déracinée de son environnement rural sous les derniers tsars, décimée durant les années de guerre civile, timidement reconstruite à l'époque de la NEP, soudainement gonflée et caractérisée par une mobilité sociale vers le haut avec l'introduction des premiers plans quinquennaux (1928+) et les années de reconstruction d'après-guerre, cette masse d'individus, soumise à un totalitarisme qui, entre autres choses, anéantit tout mouvement syndical véritablement indépendant, n'a, à toutes fins pratiques, aucune conscience de classe véritable.

La disparition de Stalin en mars 1953, toutefois, entraîne d'importants changements. Durant les trois décades des ères Khrushchev et Brezhnev (1953-1982) — période de relative tranquillité — la qualité de vie et les conditions de travail des ouvriers s'améliorent grandement, mais cette transformation s'accompagne d'un ralentissement du taux de leur mobilité sociale (en raison, par exemple, d'un