1850s, the Qing court in Beijing forged a new identity with commoners and treated the outlawry found in pihuang opera as patriotism. The Qing patronage of pihuang opera gave it new respect and elevated it to middlebrow and high culture.

In the last two chapters Goldman analyzes the scripts of Garden of Turquoise and Jade and the I, Sister-in-law operas to gauge audience reception. Garden uses some Suzhou dialect in a plot in which a clever seamstress and a clown stop a powerful and corrupt official from appropriating a poor scholar’s plot of land. When the seamstress marries the scholar’s son and the clown gets a job, the theater-goers identified with the downtrodden and rejoiced at the triumph of social justice against corruption, and some among them relished the erotic allure of the actors and cross-dressing youths on stage.

In the I, Sister-in-Law scripts, women characters from the novel, Water Margin, are killed as punishment for plotting their husbands’ deaths and for seducing their husbands’ biological or sworn brothers. Goldman states that the kun scripts maintained a balance between “titillation and decorum” and accorded primary attention to these women, whose plight garnered sympathy from the audience. The pihuang operas were entirely performed in Beijing dialect; they were misogynous and put primary focus on the wronged husband and brother, who violently executed the unfaithful women before joining the outlaws to bring down the government. While the I Sister-in-law kun scripts are female-centered, the pihuang scripts are male-centered and heap praise on male martial valor and outlawry. The clever seamstress and sexually charged I Sister-in-law scripts air private desires in public space and as such could be observed as violating the social norms of class and gender hierarchies. Indeed, Goldman’s overall thesis argues that opera served as “a site of resistance” in Beijing when the characters, actors, and the audience blurred the boundaries of gender, class, ethnicity and morality. She correctly concludes that it was the intersection of opera culture with commercial interests and state intrusion that prevented the playhouses, actors, and audiences from turning this site into a public sphere where oppositional politics could challenge state authority.

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If, like me, you tried to write an undergraduate essay in the early 2000s on “Spanish Flu” in Canada, you probably found few sources, wrote your 10 or 20 pages, and moved on with your life thinking you knew what there was to be known. Mark Osborne Humphries’ The Last Plague: Spanish Influenza and the Politics of Public Health in Canada now joins Esyllt Jones’s Influenza 1918: Disease, Death, and Struggle in Winnipeg (UTP 2007) in showing us how little we actually understood. Humphries’ important and insightful book significantly alters the place of Spanish Flu in the landscape of Canadian social and medical history. Some 50,000 Canadians died in this epidemic, and in The Last Plague Humphries demonstrates that their deaths ultimately brought Canada into a new, modern era of public health work and knowledge.

Even if they have never spared a thought for cholera, smallpox, or any other historical epidemic, most students and scholars of modern history are at least familiar with the existence of the global 1918-19 influenza pandemic, hot on the heels of the First World War.
Humphries gives the wartime context of the epidemic its due, but his crucial contribution to the historiography is to reframe the story completely, moving it from the footnotes of wartime social and military history to a central position in the long history of Canadian public health. In Humphries’ assessment, the Spanish Flu epidemic served as a vital turning point in the evolution of Canadians’ collective understanding of the proper role of government in fostering a healthy population, as well as the country’s understanding of disease more broadly (from something outsiders brought in, to something Canadians themselves spread). In public health, as in so many other respects, the wartime crisis prompted dramatic re-imagining of how state and citizens should interact. The book therefore has important things to say to those interested not only in health history, but also in wartime society and state formation.

Above all, this is a book about context, and this long view proves not only innovative but also highly instructive. After the introduction, the book begins nearly a century before the Spanish Flu epidemic, outlining in chapters two to four how Canada dealt with various 19th century epidemics, how public health and sanitation reform movements influenced Canada before 1914, and how the country dealt with an influenza epidemic in 1889-91. Chapters five through seven examine the 1918-19 influenza pandemic, assessing the impact of the disease’s first (milder) and second (deadlier) waves, as well as municipal, provincial, and federal government responses. Chapter eight covers the related-but-separate issue of the epidemic’s wartime context. The remaining two chapters and conclusion demonstrate the role of the epidemic in fundamentally changing the course of Canadian public health policy from 1919 onward. Sixty-nine pages of endnotes, a wide-ranging 39-page bibliography, and a 17-page index round out this useful resource for both scholars and students.

The bibliography stands as a testament to Humphries’ exhaustive primary and secondary source research, which encompasses bureaucratic, military, women’s, labour, and Western social history, as well as the history of medicine and health which is its primary focus. Overall, Humphries’ sources serve him well: his detailed tracking of the multiple vectors of influenza in chapters five and six, for example, convincingly overturn the previously-held assumption that the epidemic came to Canada from Europe with returning soldiers. Similarly, in chapter seven he makes excellent use of primary sources and existing provincial and local studies of the epidemic, to tell the on-the-ground story of how Canadians dealt with the deadly flu. The discussion of medical and popular remedies in circulation (pp. 121-22), and the descriptions of poverty and sickness in flu-stricken working-class districts (pp. 124-26) are particularly evocative and moving. However, Humphries’ love affair with his sources occasionally gets out of hand: his fondness for long block quotations becomes particularly tiresome in chapter eight, where he uses 11 in 18 pages. Letting historical voices speak for themselves is a valuable technique for any social historian, but a little judicious pruning is in order.

Throughout the book, Humphries makes his study as truly national as he can, highlighting instances of similarity and difference between regions, provinces, and cities. Even tiny, often-overlooked Prince Edward Island has its moment on centre stage, as Humphries considers the effectiveness of the island’s self-imposed quarantine from the mainland. The one hole in this otherwise expansive net is rural Canada. The book focuses upon urban areas, and when it does explicitly address “rural Canada” it is to Aboriginal reserves that Humphries turns. The inclusion of Spanish Flu’s catastrophic impact on First Nations communities is an important addition to the broader discussion, but presumably the conditions of extreme poverty and isolation which created such a noticeably higher mortality rate on reserves also made the Aboriginal experience somewhat different.
from that of non-Aboriginal rural Canadians. Perhaps a lack of sources prevents a fuller
discussion, but the issue deserves to be explicitly addressed.

Several chapters deserve individual mention. Chapters two and three offer a sweeping
synthesis of Canadian public health before 1914 which would make a perfect introductory
overview for students in history of medicine courses. In chapter four, Humphries’
explanation of the influenza virus and how the human body responds to it stands out as one
of the clearest and most engaging medical explanations I have ever read. Unfortunately
chapter eight, in which Humphries sets the epidemic in the wider context of wartime Canada,
is unsatisfying. The basic themes are sound: soldiers dying from the flu undermined the
“worthwhile death” war myth and therefore upset Canadians, while ineffective government
responses played into wider socio-political debates; together these factors led Canadians
to question why their government could manage a war, but not an epidemic. However,
the chapter as a whole is overly-contextualized and relies too much on long quotations. A
shorter, tighter chapter would serve the purpose more successfully.

The Last Plague is neatly book-ended with glimpses into Dr. Frederick Montizambert’s
life and career. From cutting-edge young champion of maritime quarantine, to disappointed
retiree not asked to head the new Department of Health, Montizambert’s story makes
plain the distance Canadian public health travelled in the period covered here. Scholars
of interwar public health in Canada traditionally explain the post-1918 surge of public
health activity as a result of three factors: the poor health of wartime military recruits; the
deaths, wounds and venereal diseases of war; and the Spanish Flu epidemic. Mark Osborne
Humphries’s great achievement in The Last Plague is to show that Spanish Flu was not
merely a factor, but was in many ways the factor. When innocent citizens of all stripes
began dying from the flu, they blamed the federal government for failing to protect them.
Intense public pressure led in 1919 to the creation of a new federal Department of Health,
and Canada finally entered the modern era of promoting health and preventing disease
within its boundaries, instead of trying to keep disease out.

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ISITT, Benjamin — Militant Minority: British Columbia Workers and the Rise of a New

The New Left was not as new as it might have seemed; it instead needs to be understood
as having deeper roots than the more traditional narrative of rupture might suggest. This
is one of the key take-homes of Benjamin Isitt’s expansive Militant Minority: that the
New Lefts of the sixties, which would provide a crucial support to the path-breaking
1972 victory of Dave Barrett’s New Democratic Party in British Columbia, owed much to
those who came before. The Old Left, epitomized by institutions such as the Communist
Party of Canada, may have waned through persecution, prosecution, and the revelation
of Stalin’s crimes against the Russian people; yet it, and fellow institutions such as the
United Fishermen and Allied Workers’ Union, helped sustain an oppositional culture in
the province. While the CCF/NDP experienced electoral and organizational nadirs in the
1950s and 1960s, other left organizations – from Trotskyists, student movements, and the
women’s movement – helped carry the torch. All of this helps make what happens in the
late 1960s and early 1970s all the more significant. Indeed, a reframing of the period is one

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