

utilisation of the Church to legitimise and integrate the Fascist state. For historians outside these fields, Caponi's work is a well-crafted model of thorough micro-history.

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'Misfits' in Fin-de-Siècle France and Italy: Anatomies of Difference, by SUSAN A. ASHLEY, London/New York, Bloomsbury Academic, 2017, 312 pp., £90.00 (hardback), ISBN 9781350013391

In the second half of the nineteenth century, as part of the debate on evolutionism, a broad discussion developed on the presence in contemporary society of groups and human types showing serious limits of adaptation. Evolutionism, considered as a linear and progressive mechanism of development, could offer a key to understanding this reality. Although Darwin, indeed, had not presented his thinking in these terms, social theory had interpreted deviance as a delay in reaching higher stages of development or as the persistence in the present of earlier stages in the overall cultural and psychological dynamic. Moreover, deviance was attributed not only to a deceleration in the progressive rhythm of transformations, but also to degenerative processes of retreat. The idea of mental health had to deal with this complex perspective, which accompanied the importance given to biological determinism in the justification of aberrant behaviour. Such an approach took it as obvious that the signs of cognitive and moral deficiencies could be read in a person's outward appearance.

Starting from these considerations, the historian Susan A. Ashley sets about analysing the ways in which experts (criminologists, sociologists, psychiatrists, neurologists) in France and Italy, at the end of the nineteenth century, tried to explain the existence of a variety of deviant figures, and to comprehend their specific features, with a view to a sort of classification. Her research is focused on six categories of deviants: geniuses, lunatics, neurotics, vagabonds, criminals and sexual deviants; the first three regarded as mental 'misfits', the others as social 'misfits'. Each of these categories is treated in a single chapter, each of which opens with the presentation of the problem, and follows with an analysis of the scientific debate and its psychological and social implications.

An introductory chapter illustrates the key elements of the research, supported by a wealth of historical documents and literature. On an interpretative level, inevitably, the works of Michel Foucault emerge, linking the dominant idea of health and normality to the structures of power. The punitive attitude usually adopted by institutions, in the name of the defence of society, required the imprisonment of misfits, perpetrators of crimes and the insane at detention centres.

France and Italy provide the terrain for Ashley's study (although there is no lack of comparative incursions beyond their borders), where, although industrial development was slower than in some other European countries, the social tensions generated by the changes taking place were strongly felt.

A general question concerns the identification of the boundary between normal and abnormal behaviours; although this could be relatively easy with murderers (Henry Landrou, Giuseppe Musolin and Jack the Ripper became stars of the judicial chronicles and newspapers), it was less so for other figures. Commentators of the time, for example, were quite convinced that there was a relationship between genius and recklessness. Both geniuses and people with inferior intelligence showed eccentric behaviours, characterised by an absence of measure. The sociologist

and criminologist Cesare Lombroso linked genius to nervous disorders, especially epilepsy, as demonstrated by great personalities such as Napoleon, Caesar, Dostoevsky, and Petrarch. Moreover, a remarkable numbers of geniuses bore the characteristic physical marks of degeneration. Although many scholars disputed these assertions, the challenge was to understand the factors that gave rise to genius and intellectual disability, idiocy, imbecility, and cretinism.

One of the most interesting aspects of the debate was the need to build a vocabulary of insanity in order to describe the observed symptoms, mental states and anatomical details – in short, the forms in which it manifests itself. This was accompanied by theories of the topography of the mind: the goal was to find correspondences between the inside and the outside, the psychological anomalies, the somatic and behavioral anomalies. The cases of lucid and temporary madness suggested that the mind is organised in compartments, by different, separate faculties.

On the social level, among the population there was an enhanced perception of the risks which might arise from people who became insane, while legislation adapted by increasing the number of asylums to segregate potentially dangerous people.

Among scholars, attention was also growing towards the environmental causes of mental illness: ‘While doctors and social thinkers discussed treatment’, Ashley writes, ‘they also focused their attention on prevention, particularly in light of the connections between mental illness and factors such as diet, environmental toxins, and alcoholism. Just as reformers urged for measures to increase jobs and reduce poverty, in order to curb occasional crime, similarly doctors proposed aggressive political initiatives to fight certain mental illnesses. For example, they urged for better nutrition to minimise pellagra and cretinism and campaigned to keep youth from falling into nasty habits’ (p. 75). The medical and social paradigms seemed to chase each other, but a naturalistic approach still prevailed. Atavism and epilepsy were regularly considered among the causes of crimes and mental distress, and to these other categories were added, which were very useful for the purpose: ‘Three illnesses stormed through Europe at the end of the nineteenth century: epilepsy, hysteria, and neurasthenia’, Ashley writes (p. 81). But it can also be said that a wind of normalisation blew in the name of science. Eccentric characters, vagabonds, murderers, thieves, visionaries, rapists, pederasts and charlatans were not new in the history of European countries; rather the novelty was this generalised attempt to medicalise deviations, to look for the defect which deviated from the norm.

The naturalistic reduction of behaviours tended to direct the phenomena into determined patterns and to exclude, in the analysis, their cultural dimensions. This is a question on which Ashley could have spent more time. Changes in social values led to a disorientation among certain social groups. The discussion on lunatics, from this point of view, is interesting because, while scholars reflected on bipolarity and abulia, afflictions such as lunacy (an affection attributed to the full moon), lycanthropy, and San Donato’s malady (a malaise sent by the saint) were disappearing, and with them choreutic epidemics and those involving convulsions, traditional therapeutic systems, ecstatic and possession practices, of which there are also extensive testimonies.

However, in retrospect, France and Italy, and the whole of Europe, appear to have been restless places, beyond the faith in progress and prosperity – characterised by an elusive modernity, ambiguous, and full of contradictory stimuli which acted differently on bodies and minds.

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