

of conditional cash transfers, it is clear that this role is becoming ever more significant.

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María Soledad Zárate C., *Dar a luz en Chile, siglo XIX: De la 'ciencia de bembra' a la ciencia obstétrica* (Santiago de Chile: Ediciones de la Dirección de Bibliotecas, Archivos y Museos, 2007), pp. 547, pb.

This meticulously researched and exhaustive volume addresses the shifting practices around and understandings of birth in nineteenth-century Chile. Building on the extensive literature about the subject for Europe and the United States, as well as the more recent work on other Latin American countries, this volume situates childbirth not only within Chile's social, cultural and political contexts but also within transnational changes to medical practice and biological knowledge. Moreover, a gendered analysis is deftly employed to demonstrate how these discourses played into changing practices of childbirth.

The volume is divided into three thematic sections: a literature survey and an overview of the experience of birth; an examination of the shift towards formal training for midwives; and a history of hospital births. Part I, 'Parturientas, parteras y médicos: Del parto natural al parto obstétrico', begins with a discussion of how, as in other parts of Latin America, well into the middle of the nineteenth century birth was almost exclusively attended by traditional midwives, who had trained through informal apprenticeship; there were not, as of yet, formally trained midwives and medical training in obstetrics. In the nineteenth century, however, traditional midwives were increasingly depicted as dangerous and ignorant; Zárate links both gender and class considerations to this discourse. University-based medicine, practiced by male doctors, supplanted popular medicine (including traditional midwifery), practiced by poor women, which was negatively linked in the elite imagination to indigenous medical practices and suspect 'supernatural' beliefs. This first section makes swift reference to the fact that professional medicine, obstetrics and formal midwifery required professors of medicine to offer the requisite training. It was originally foreign doctors who filled this role. Part I finishes with a detailed description of how male obstetricians undertook various interventions, such as the use of forceps and caesarean sections, and addressed maternal health problems, such as puerperal fever.

Part II, 'De partera a matrona', provides an overview of the various forms of training available to women attending childbirth, which ranged from teaching at the midwifery school opened in 1834 or official courses at the Casa de Maternidad to private courses run by medical doctors. The impetus behind this formal training, regardless of where it took place, was a common perception of traditional midwives, mixing race and class prejudices, as ignorant, poor and dangerous. But as this section makes clear, the history of childbirth in Chile is not simply a story of male doctors supplanting traditional midwives, but of formally trained midwives competing with traditional midwives, some of whom worked closely with doctors, who in turn supported their right to continue working even without having passed the requisite titling examination. In this section, Zárate's variety of sources brings the debates and complications of the period into sharp relief.

Part III, 'Asistencia hospitalaria femenina y del parto', addresses the influential but then still uncommon practice of giving birth in a hospital; these facilities were limited, even in urban areas. Hospital births, with access to a male obstetrician, tended in this period to be used as the last resort for women suffering difficult births (this helps account for the high hospital mortality rates) and were also an option for the very poor. The first maternity ward was founded in 1831 at the Casa de Huérfanos in Santiago, which was a charitable institution intended to help poor women, giving them food, clothing and basic medical care. Later in the century, hospitals also took up a teaching role, both for obstetric care and formal midwifery. The increasing role of hospital births in Chile coincided with scientific understanding of the vectors that transmitted puerperal fever. This new scientific knowledge about the infection was essential to prompt not only sanitary measures within hospitals but also further regulation of midwives, who could spread the infection because they delivered babies in both homes and hospitals.

The strengths of this volume are many. Its coverage and the level of detail offered are notable. Zárata draws on a wide range of sources, from judicial archives to contemporary journals, medical student dissertations and newspapers, as well as her own interviews with midwives. This range of sources allows Zárata to address multiple levels of her discussion simultaneously: institutional history, history of medical practice and bodily experience, as well as the social, cultural and economic meanings of childbirth. For example, through discussion of the death of Clotilde Mancilla de Luna and her foetus after three days of labour, Zárata highlights the collaboration that existed between midwife and doctor, complicating commonplace understandings of doctors supplanting traditional midwives. Later discussion of the conflicts between traditional midwives and formally trained midwives further presents a varied picture in which, while traditional midwives as a group were depicted as the cause of great misery through incompetence leading to maternal and/or infant death, Mercedes Díaz, a traditional midwife, was able to gather testimonials from elite Valparaíso families and doctors in order to gain the government's permission to continue working without the required formal training. In support of her request these doctors mentioned not only her skill when attending difficult births but also her willingness to assist poor women, even without payment, thus making her services socially valuable. Class-based, gendered views of women's roles come through in the clinical histories maintained by Santiago's Casa de Maternidad. For example, a doctor blamed too much time at the sewing machine for the death of a seamstress's foetus. The volume also includes a medical glossary and 12 tables quantifying some of the primary material.

At times, the level of detail Zárata presents somewhat obscures the overall argument. Moreover, the thematic structure of the three sections, which are each organised chronologically, does allow for some repetition. But these criticisms do not fundamentally undermine this impressive work. The most important achievement of this volume is to open a historical window onto childbirth in Chile, from which a unique view of Chilean society in the nineteenth century is also visible.

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