alternatives are available. But this book fills such an important gap that this issue is easy to ignore.

To conclude with one final point: This book is magisterial and distinctive. That is because it teaches us about the dynamic interactions of Atlantic, Hispanic American, Caribbean, and African histories to an extent rarely seen in this field. Wheat has firmly anchored Africa and Africans in the early modern Caribbean and Hispanic Americas, thus bestowing us with what can only be described as an essential and timeless book.

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## **COLONIAL MEDICINE IN PERSPECTIVE**

Beyond the State: The Colonial Medical Service in British Africa.

Edited by Anna Greenwood.

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The introduction to this volume identifies its two core aims, which are to reveal the Colonial Medical Service's internal diversity in British Africa and its far-reaching external connections. Judged by these goals, the collection is far more successful in fleshing out the former than the latter.

The collection's seven essays provide brief and straightforward explorations of a range of topics loosely organized around the Colonial Medical Service. The introduction openly acknowledges the heavy focus on East Africa in the collection (five out of seven of the chapters), explaining somewhat unconvincingly that this resulted from 'the expertise of the scholars who were available to contribute' (2). This unevenness is especially troubling when the lone essay on West Africa, though fascinating, was far less well integrated into the volume than the others. Here the link to the Colonial Medical Service is virtually nonexistent, although Matthew Heaton's essay on the role of the Elder Dempster shipping line in transporting so-called lunatics from Britain back to Nigeria is well worth reading. In terms of topics, four chapters explore the interrelations between the Colonial Medical Service and voluntary organizations (three are about medical missionaries and one concerns the Zanzibar Maternity Association); one delineates the rise and fall of Indian medical officers in Kenya; one reveals the influence of social science research on medical practice; and one is the piece mentioned above about transporting mental health patients. While individual essays are intriguing, their variable subjects and the lack of common substantive questions mean that the volume coheres uneasily.

The essays, though, certainly demonstrate the internal diversity of the Colonial Medical Service. Anna Greenwood and Harshad Topiwala's chapter on Indian doctors in Kenya is a particularly intriguing read and represents well the importance of their 2015 book-length treatment of the topic. It is clear that in Kenya, as elsewhere, the presence of Indian doctors



complicated racial politics in the competition they represented for both European and African medical workers. They simultaneously threatened Europeans' hegemony and the colonizers' paternalistic claims of improving African capabilities and so were first written out of records and then squeezed out of jobs in the 1920s – just as Indians throughout Kenya saw their economic opportunities and political rights curtailed. The essays on medical missionaries also diversify our image of colonial doctors, as it is clear that medical missionaries' local expertise, facilities, education, work, and manpower were critical to the functioning of the Colonial Medical Service. At the same time, the essays reveal how medical missionaries pursued their own priorities by refusing to engage in unpopular medical practices like exhumations or autopsies in Malawi, or pushed for a greater role in making Tanganyika's medical policies and providing care.

The collection less convincingly establishes the far-reaching connections of the Colonial Medical Service. While it is clear that medical officers had links to medical schools in Britain and India and international missionary societies, other broad connections are not apparent. It is difficult, for example, to view relationships with local missionaries or with social scientists also employed by colonial governments as being other than an intimate set of relationships. These men existed in the same tight colonial circles, and so the volume better illustrates the porousness of the Colonial Medical Service than what the title suggests – that its functioning moved beyond the state.

Reading across the volume, several important conclusions do emerge. One is the centrality of the intellectual lives of medical professionals for creating consensus and collegiality. Those inside and outside of government service were drawn together through conferences, learned societies, and, most powerfully, in collaboration across disciplinary lines as in Shane Doyle's exploration of the influence of non-medical research in Tanganyika and Uganda. Another significant issue is how medical expediency was trumped by other colonial priorities. Changing race relations in Kenya determined medical personnel decisions, concern over Arab and Indian dominance in Zanzibar translated into the curtailment of maternity services, and medical officials' desire to control medical education in Malawi duplicated services already provided by missionaries.

In the end, while the collection certainly offers engrossing presentations of the functioning of colonial medicine, it is hard not to view it as a missed opportunity. Rather than the essays engaging with each other or grappling over a clearly articulated set of questions, each essay follows the interests of the author without reference to the greater work. If the essays had been in better dialogue with one another, the authors could have pushed their conclusions into new or different directions and produced a better synthesis. Still, the volume amply demonstrates just how rich a history there is to the Colonial Medical Service.

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