

ater itself. Her study attends to every one of Corneille's thirty-three plays (including *Psyché*), some in greater detail than others, but it is the close analyses of particular plays—*Attila*, *La Suite du Menteur*, *Cinna*, *Edipe*, *Horace*—that are the most satisfying, and the most fun, sections of this monograph. Some of Ekstein's conclusions—particularly those dealing with heroism and the sublime, and Corneille's occasional subversion of both—are perhaps not surprising. And at times she posits a particular case of irony without clearly explicating the precise object of ironic intent. But then again, is it not this very undecidability that makes Corneille's theater, and Nina Ekstein's book, so very fascinating in and of themselves?

Tim McHugh. *Hospital Politics in Seventeenth-Century France: The Crown, Urban Elites and the Poor*. Aldershot & Burlington: Ashgate, 2007. x +191 pp. £55.00; \$99.95. Review by SUSAN BROOMHILL, THE UNIVERSITY OF WESTERN AUSTRALIA.

It has become commonplace in studies of hospitals, charity and poverty to set their particular focus against the backdrop of struggle between local and state, of an aggrandizing crown keen to gain control of the country through charitable institutions and policies. Tim McHugh's new text proposes to examine thoroughly the truth of this oft-told tale, not only examining the policies of central government but importantly those of the local communities delivering these services across France. McHugh argues that the dominant historiography of early modern charity has seen in royal edicts the trace of an emerging strategy of crown control, often with little attention to the evidence of extant local records. His study will go some way towards showing the interpretive possibilities of remaining local evidence for offering a more complex narrative of early modern hospital politics. Concentrating on the seventeenth century in its own right, rather than as a stepping stone in a broader trend, and studying the archives produced at the local level for poor relief and hospitals, McHugh reveals communities that endeavored to meet their obligations, and enacted care that typically reflected the evolving tenets of Catholic Reformation belief about the salvation of the poor and redemptive

power of charity.

In the first chapter, McHugh examines the social, political, and religious theories from the sixteenth and seventeenth centuries concerning poverty and the poor, which were to inform developments in the latter century. His analysis suggests that mercantile, reformed Catholic, and noble ideologies came together in changing views of poverty. In particular, he provides a compelling argument of the intertwined set of beliefs that led to the eventual distinction of the poor as deserving or otherwise, and the proposal of enclosure as a way in which moral as well as physical care could be guaranteed. Social and economic theorists perceived the poor as an underutilized source of labor. Both Jansenists and Jesuits, for different reasons, signaled the importance of donation to organized charity. In concrete terms, the rise of influential confraternities involving a likeminded community of the urban elite (from which administrators would be increasingly drawn) provided a concrete forum in which charitable work could be organized. Finally, through hospital governance, long-held notions concerning noble responsibility for those on their lands were recast by urban elites to allow for their own demonstration of elite status.

In Chapter Two, the focus shifts to the relationship of hospitals to the state, in which McHugh questions whether the crown had the desire or apparatus to control charity at the local level, or to force reforms where they were not supported by local communities. Monarchs, he suggests, gave little more than noble patronage to charity organizations, although the significance of soft power and symbolic indications of central policy are not explored here. Instead, McHugh insists, it was the administrators of Parisian hospitals who sought the support of central government for their specific charitable developments. Where the crown did engage with charity in this century, it was as a mediator reminding urban communities to fulfill their paternal duties towards their poor, rather than being intent on usurping local roles.

The next two chapters explore the developments in Paris, firstly of the Hôtel-Dieu as the long-established and premier institution for care of the destitute in Paris, and then of the newly created 1656 Hôpital Général in the context of the broader reforms to poor relief in that city. In the first of these chapters, McHugh examines the degree of

medicalization of the facility in close detail, as measured through the provision of medical care by nursing orders, physicians and surgeons, and through the expansion and distinction of patient groups into discrete wards. McHugh's description of these changes as a shift from amateur to professional care may concern some of those scholars who have examined the wide range of healthcare providers within early modern hospitals, but it is clear that broader integration of the elite university and corporate medical communities was perceived as a form of improvement by the equally elite administration. Financially, expansion allowed more opportunities for elite patronage of the institution and new donations provided support to the hospital's reliance on local taxes and rents for its income. McHugh's emphasis in tracing these developments is to signal how much of the impetus stemmed from the governors, and to argue for a rehabilitation of the medical assistance provided by the hospital at this period in line with other recent analyses of hospital care.

The broader reforms of poor relief in the city which are the subject of the following chapter chart the ideologies behind the decision to distinguish the deserving poor and providing direct relief to them, as well as eradicating vagrancy, begging, and dealing with an influx of new paupers/migrants to Paris. The 1656 Hôpital was a sign of this development, but also a mechanism by which the aspiring urban elite (many of whom were members of the *Compagnie du Saint-Sacrement* which helped to spread the idea of enclosure) could demonstrate their attainment of ranks of civic responsibility equivalent to the landed nobility. The central government's eventual intervention in the governance of the facility was the result of the hospital's failing financial situation. The crown's retrospective celebration of its involvement in the Hôpital should not beguile us into believing, McHugh argues, that its actions were in fact the achievement of an intended central policy.

McHugh contrasts the developments of Paris by providing two further chapters that explore Montpellier and Nîmes. In Montpellier, changing demographics of the city saw the rise of an administrative elite distinct from the artisanal groups that had traditionally controlled the charitable organizations of the city. They now demanded representation in these institutions. Developments were also influenced

by the diminution of the rural economy and increased urbanization. The return of the Catholic elite to hospital management after 1622 led to Protestant rights to care being slowly undermined amid complaints about the hospital's use as a site of conversion. Charity again became a site in which civic leadership by new social groups could be shown. When, towards the end of the century, the *maison de charité* was enlarged in the model of the Parisian Hôpital Général, McHugh suggests that it was under the influence, not of the crown, but of a reforming bishop working with the local urban elite.

The religious compromise that persisted in Nîmes through the century merits a closer analysis, for both groups used charity as a way of defining their faith. They shared control of the Hotel-Dieu for the first half of the century until the Protestant consuls develop a new facility in the 1650s. When this was shut down at the end of the next decade by the strongly Catholic Parliament of Toulouse, Protestant charity returned to the model of outdoor community relief to avoid conversion attempts by Catholic hospital staff. It was only in 1686 that Nîmes moved to create a hospital enclosure that invested in training and up-skilling of deserving adults and children. McHugh argues that Nîmes may be unusual in its religious divisions but that these help to highlight exactly how much charity developments were governed by local forces, rather than crown policies. Moreover, it seems too that the focus on these particular towns works particularly well to articulate the important role of Catholic ideologies, rather than state policies, in the development of hospital politics. The Catholic Reformation Church's relatively unified position on charity and poverty was reflected in similar solutions to common problems across the country.

The hospital reforms of the seventeenth century were, in McHugh's view, a product of an emergent local urban elites using charity as the demonstration of their power. He argues that urban communities treated royal edicts only as reminders of their social responsibility to the poor and as recommendations to action, and that the crown had little interest in intervening in communities which were successfully managing charitable care. The text is patently about charity, and yet the poor themselves remain silent in shaping notions about poverty and charity. Did they have expectations that were ex-

pressed through their recorded statements to clerks, or by their actions in seeking relief to which they felt they were entitled in particular locations and contexts? McHugh's text is admittedly not intended as a social history of paupers: this is a study of the administrators of hospitals, their intellectual and cultural influences, and their religious and social allegiances. Yet one feels that further study of paupers within the extant bureau and hospital archives may add to a rounded picture of the intellectual and cultural meanings, expectations, and expressions of charity in seventeenth-century communities.

While it is hoped that further studies of the seventeenth century will continue to elucidate the relationships between participants in charity, in addition to expanding the environments analysed, McHugh's detailed study of sources from the local community level provides a cautionary tale against assuming the authority and efficacy of royal edicts. Hospital reforms, he argues, were largely driven by local initiatives. Transitions towards central control occurred slowly in a more haphazard, less intentional manner than the dominant narrative might suggest. Ultimately, what *is* distinctive about the seventeenth-century innovations, argues McHugh, is not so much control of charitable care, but rather the forms of moral and physical care provided.

Francine Wild. *Naissance du genre des Ana (1574-1712)*. Paris: Honoré Champion, 2001. 781 pp. 126 € Review by JENNIFER R. PERLMUTTER, PORTLAND STATE UNIVERSITY.

Adapted from the author's doctoral thesis, this is an exhaustive, seminal work on the once popular, but now little-known genre called the "ana." Wild clearly sets forth her goals in her introduction: she will first establish a definition based on the original form of the ana and will then trace its subsequent diversification following both a diachronic and synchronic approach. A study of the word "ana" will complete this description of the genre. In her concluding chapter, Wild will raise some questions about the ana's relationship to society, politics and literature. A primarily chronological study, this book is not thesis-driven. It does, nonetheless, lay the groundwork for further studies of the genre by providing invaluable information as well as