because historically the meaning of pain had traversed the meaning of childbirth. It’s a compelling thesis, and his narrative of how anesthesia has impacted maternal care since the 19th century is engaging. In a readable approach to a technical subject, Caton follows the impact of anesthesia by narrating individual histories of early supporters and opponents of its use in normal labor, delving into their motivations and influence. Invariably, these figures make flawed medical assumptions, and often have terrible motives and methods. For instance, an early proponent of ether, Dr. James Young Simpson, claimed that the anesthetic was harmless while he did almost no medical research, and he published his “successes” in newspapers, causing a public cry for on-demand “innocuous” pain relief. What is most interesting about Simpson is that he was the first to take the medical matter of childbirth, as a political issue, to women themselves. Conversely, opponents of anesthetics often argued publicly that the pain of childbirth was indistinguishable from its meaning as punishment from God. While these arguments offend, they also encouraged women to consider that their labor was socially meaningful—women would go on to do so variously, in feminist and religious traditions.

Caton’s text is also loaded with striking quotes from many major actors in the drama. For instance, Caton quotes William Tyler-Smith, an early opponent of anesthesia, which, he said, to a laboring woman “… in her hour of trial only offer[s] a choice betwixt poison and pain.” And Queen Victoria herself, one of the earliest known laboring women to receive chloroform, speaks the title of the book.

Finally, Caton believes in painlessness, and this bias tips the book’s balance. He “discounts critics” of obstetric practice which favors using anesthetics, citing dubious reasons. For instance, Caton narrates the 1914 feminist “Twilight–Sleep” movement, which demanded widespread availability of a dangerous morphine-based anesthetic. His point is that women are often misguided in what they want, and therefore their more recent criticisms should be measured accordingly. Ultimately, however, his assertion that painlessness does not equal meaninglessness is well taken. For A.R.M. readers who want to weigh these issues in medical, personal, and political terms, this book is a sober and sobering resource.

**Rock-a-by Baby: Feminism, Self-Help, and Postpartum Depression**

Verta Taylor  
New York: Routledge, 1996

**Reviewed by Kathleen Sorensen**

The aim of this work is to use the model of postpartum depression self-help
groups to understand contemporary social movements led by and for women. To do so with a feminist vision is central to this enterprise. Taylor asks if culturally defined imperatives influence an adversity that may affect as many as 80 percent of mothers. Framed against the background of her own experience with depression, the author uses survivor narratives in order to elucidate poignant aspects of her study.

Taylor wants us to look at the disparity between what we believe should be the feelings of new mothers and the actual feelings expressed by women suffering from postpartum depression. She then asks whether postpartum depression might be a mode of resistance against a societal norm, rather than a clinical illness. If so, why do women seek out medical solutions for what is a social problem, she asks. One of the claims that Taylor analyses is whether self-help groups are simply philosophical exercises, or whether they have the power to correct societal problems. Her mandate, she asserts, is to understand this movement against a feminist backdrop while suspending judgement on whether any individual organization meets any particular feminist standard.

The middle of this book links the personal politics of self-help with the collective action that springs from it. At this point we see the connection that Taylor makes between “talk shows” and postpartum depression self-help groups. In this two-fold composite, Taylor sees the ‘talk-show’ phenomenon as “encouraging viewers to challenge the gender status quo” (115) then it opens a discussion on previously taboo subjects thereby bringing them into the popular consciousness. She suggests that this combination of resistance and knowledge can act as an impetus to social change. Subsequently, she asks whether feminism can remain practicable within contemporary self-help movements for women. She indicates that the move to connect with others also aids in developing a fuller understanding of identity issues within the collective, which in turn acts as a consciousness-raising exercise. She finds that postpartum depression self-help groups both critique the status quo of motherhood, and denigrates any woman who does not emulate this model by declaring them ill. This leads us to her contention that support group movements tell us interesting and useful things about the intersection of gender and society.

Overall, this is an informative look at postpartum depression self-help groups. However, Taylor’s lack of experience with both motherhood and postpartum depression are notable in their absence. She also acknowledges that this movement, is primarily concerned with and run by white, middle class women which creates its own problems as Taylor fumbles with the idea of non-traditional motherhood with only a rarified model with which to work. As a woman who suffered from postpartum depression I had hoped to find some new revelation in this volume, I did not. However, Taylor offers an engaging thesis and an informative look at an unfortunate occurrence in the lives of many women.