On the other hand, at times its prose is hyperbolic and its narrative slides into a politics of victimization.

Throughout Sherer Jacobson's memoir, frequent tensions arise between Denise and her in-laws, Denise and her husband, Denise and her housekeeper. A particular strength of this work is that it does not gloss over the interpersonal struggles engendered by varying perceptions of ability and disability. I wonder, however, if the story would not be enriched further by a more multi-faceted analysis of the interpersonal struggles described. For example, Denise's ongoing contest of wills with Challukah, her housekeeper, portray Denise as victimized and Challukah as stubborn, careless, and unreliable. Indeed, every mother who has relied on another caregiver can identify with the frustration Denise experiences when Challukah is late or inattentive. Nevertheless, it is important also to recognize that an employee has needs that may be thwarted by the employer-employee relationship. Disability renders Denise dependent on Challukah; socio-economic class renders Challukah dependent on Denise. Similarly, all adult children—especially, perhaps, adult children with disabilities—will empathize with Denise's frustration at her mother-in-law's failure to treat her as capable. Yet, the tension between Denise and her mother-in-law appears also to be related to their differing relationships to Judaism and the Holocaust. *A Question of David* would be enriched by greater recognition of the complexities of these and other human relationships. Sherer Jacobson's memoir about the adoption of David raises important questions about our perceptions of disability; however, it may be that we cannot adequately answer these questions without also raising questions concerning how our perceptions are influenced by factors such as gender, class, age, and ethnicity.

**Baby Catcher: Chronicles of a Modern Midwife**

Peggy Vincent  
New York: Scribner, 2002

**Reviewed by Michelle Moravec**

With a background in obstetrics nursing, natural childbirth education, and her experience administering a birthing centre, Peggy Vincent's decision to become a licensed midwife with a specialization in home births might have been expected. As *Baby Catcher: Chronicles of a Modern Midwife* aptly illustrates, however, Vincent's experiences as a midwife were anything but the expected. Vincent's career neatly encapsulates the scope of the women's health movement. As a young nursing student at Duke University, she became disillusioned with traditional obstetric practices that gave labouring women no control over the experience of childbirth. The occasional pregnant women who "thrived on the challenge and the passion" of birth and refused to submit to the
drugs and procedures considered necessary by the medical establishment showed Vincent that women could make their own decisions about what was best for their own labour and delivery.

Inspired by the sweeping changes wrought by the various social movements of the 1960s, Vincent set out to transform women's experiences of childbirth. In Berkeley, California in the early 1970s, Vincent began working as a labour and delivery nurse just as the Lamaze movement was gaining popularity. Her own labour and delivery, however, convinced her that women were empowered by neither a formulaic approach to natural childbirth nor the stuffy practices of traditional medicine. Over the years, she developed a childbirth education course centred on the notion that “every birth is different” (52).

As the women’s health movement rapidly transformed the field of women’s health, more women began seeking out alternative methods of childbirth and in 1974 Vincent had the opportunity to witness firsthand the work of a “lay” midwife. She found the woman’s skill so impressive that she began contemplating a career in midwifery. In her work as a nursing coordinator at a local birthing centre, Vincent enjoyed a degree of autonomy unheard of in conventional medical settings, but she still faced “physicians who believe that normal childbirth is a retrospective diagnosis” (58). After 15 years as a nurse, Vincent began training as a midwife and she spent the next 15 years attending home births. While most of Vincent’s narrative is inspirational, she sounds some cautionary notes. For example, that lay midwives in the United States have difficulty acquiring malpractice insurance and medical back-up from physicians and hospitals has severely curtailed the number of home births.

Perhaps the most remarkable aspect of Baby Catcher is Vincent’s style. While Vincent has delivered more than 2,500 babies, every case she recounts reflects the joy and awe she feels at each birth. Deftly, she interweaves memoir and case studies with an overview of the transformations that have altered childbirth practices in the United States over the past 40 years. Baby Catcher is a valuable work for multiple audiences, including health care professionals, scholars of pregnancy and birth, and the general reader interested in issues of women’s health and pregnancy.

Making Care Work: Employed Mothers in the New Childcare Market

Lynet Uttal
New Brunswick: Rutgers University Press, 2002

Reviewed by Heather E. Dillaway

Lynet Uttal begins by suggesting that her title, Making Care Work, can be