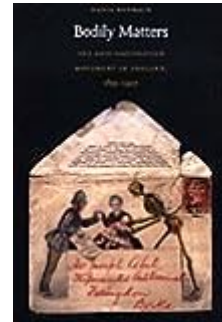


Nadja Durbach. *Bodily Matters: The Anti-Vaccination Movement in England, 1853-1907.* Durham: Duke University Press, 2005. xiii + 276 pp. \$23.95 (paper), ISBN 978-0-8223-3423-1; \$84.95 (cloth), ISBN 978-0-8223-3412-5.



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Published on H-Albion (August, 2005)

Vaccination and the Body Politic

Nadja Durbach's *Bodily Matters* is an engaging study about the politics of anti-vaccinationism in England from 1853 to 1907. Durbach explores anti-vaccinationism on its own terms, questioning the validity of statistics to discern the efficacy of the practice, and locating vaccination as an "invasive, insanitary, and sometimes disfiguring procedure" (p. 3). In Durbach's story, the state is the representative of coercive policies of compulsory vaccination, fought against by the combined forces of medical, social, and religious dissent. These were alternative healers, liberal individualists, and the poor whose bodies were the targets of the offending legislation. The groups that argued against vaccination did so from convictions about society, politics, and the body that could be violently at odds with those making policy and those wielding the "parliamentary lancet." Durbach convincingly shows how the anti-vaccination movement was fundamental to debates about medicine, the state, and society, and in fact represented "popular understandings of bodily economy and assumptions about the boundaries of state intervention in personal life" (p. 4). Anti-vaccinationists challenged official claims to and knowledge of the body, proposing alternative medical, political,

and bodily understandings.

Durbach's chapters are thematic and chronological. She begins with an investigation of the medical cultures of the mid-nineteenth century and their relationships to the first compulsory vaccination legislation passed in 1853, and takes her story through the legislative approval of a broad definition of conscientious objection in 1907, which effectively ended vaccination's compulsory status. Along the way, she investigates questions of citizenship, liberalism, class formation, vampires and vivisection (or the "gothic body"), and the impact of the germ theory of disease. A good social and cultural historian, Durbach pays attention both to what anti-vaccinationists did and what they said, and establishes that anti-vaccinationists very quickly took control of the discourse from those in favor of vaccination. They had excellent grass roots organization, forceful popular demonstrations, and a lot of publicity through a well-circulated anti-vaccination press. Their politics was national in the shape of anti-vaccination leagues and publications, but more importantly, it was expressed locally and related to local cultures of dissent and working-class strategies of mutual

self-help.

Durbach shows that the working poor objected to compulsory vaccination on the grounds of both principle and experience: they were opposed to compulsion and to being “experimented” upon. Both middle-class and working-class antis positioned orthodox medical practitioners as evil aristocrats parasitically feeding on the bodies of the poor. Here was old-fashioned radical politics that joined together the disparate forces opposed to old corruption as represented by the medical profession (decidedly middle class, rather than aristocratic). Durbach argues that working-class identity, in reference to the politics of vaccination, was formed around a “shared bodily experience” (p. 28), while middle-class opponents of vaccination shaped their opposition around abstract principles. The anti-vaccination leadership, indeed, could be patronizing to its working-class constituency, and Durbach highlights class tensions in the movement that were covered over by populist discourse and an inclusive rhetoric of citizenship. Good citizens, the movement claimed, expressed their belonging through resistance, not through submission to vaccination, which was seen as inherently un-English. Yet it was only members of the working class who were pursued by the state for failing to vaccinate; they were the ones who were subjected to what they saw as the unclean, stigmatizing practices of vaccination, or fined repeatedly if they avoided them.

Durbach demonstrates the ways that the vaccination debate was implicated in wider discussions about the medical profession and medicine’s relationship to the state. Many anti-vaccinationists were alternative healers or somehow outside the boundaries of official medicine. They (correctly) saw compulsory vaccination as an attempt by professionalizing medical men to gain authority over state medical policy, and a variety of medical dissenters, feeling threatened by the professionalization of medicine and their own marginalization, came together around the issue of anti-vaccination. In discussing the movement’s medical position, Durbach emphasizes the centrality of ideas about purity, cleanliness, and the maintenance of the healthy body—a different regimen of prevention than compliance with vaccination. Anti-vaccinationists were flexible enough to incorporate new medical theories into their opposition: rather than bowing down before the authority of the germ theory disease in the last decades of the nineteenth century, they adapted it to their own purposes, stressing the relationship between germs and dirt, in effect domesticating a potentially radical threat to their claims. Anti-

vaccinationists, according to Durbach, criticized orthodox medicine for ignoring the social roots of disease, such as poverty. In this context, Durbach sometimes seems to portray the antis as social justice crusaders, which is perhaps somewhat at odds with her detailed discussion of the ways the middle-class leadership fell short of really understanding the body politics driving working-class resistance.

The class and gender aspects of anti-vaccinationism inform Durbach’s approach to her subject throughout. While her attention to the class politics embedded in the movement stresses the gaps between reality and rhetoric in terms of class solidarity, she is more positive regarding the gender politics of anti-vaccinationism, arguing that there was “little tension between the sexes” in the movement (p. 55). While working-class men’s anti-vaccination politics revolved around claims for the authority of the head of the household, women engaged in what Anna Clark has referred to as “militant domesticity,”[1] not challenging their role as mothers but instead using it to make public claims to protect their children. In this way, Durbach argues, the anti-vaccination movement offered women a very political part to play. This part was affirmed in the 1907 conscientious objector legislation which acknowledged that working-class mothers as well as fathers could claim a conscience with which to object, a decision that Durbach insists significantly “challenged the primacy of the middle-class man as the model of individual subjectivity” (p. 196).

In her most “cultural” chapter, Durbach links anti-vaccinationist constructions of the body with the gothic bodies produced by anti-vivisection and vampire tales. All three were preoccupied with blood purity and fears of cross-species interactions, expressing a “shared cultural symbolism” (p. 143). The gothic body, according to Durbach, was a body seen as vulnerable to transgression and transmutation. Anti-vaccinationists portrayed vaccinators as vampires, butchers, mad doctors, rapists, and murderers, polluting innocent, pure bodies with foreign substances that could lead to the degeneration of the race. Durbach also positions anti-vaccinationism alongside other movements of “physical Puritanism” (p. 122)—vegetarians, food reformers, temperance activists, some feminists—aligning it with a more widespread push for social and bodily purity.

Durbach convincingly rescues the anti-vaccination movement from the fringes of medical, political, and social history, and demonstrates that anti-vaccinationists should be seen as central players in the construction of

Victorianism, particularly surrounding notions of citizenship, the role of the state vis-à-vis the individual, and understandings of medicine. This book has much to say about the ambivalence with which people absorb new medical technologies, and the shaky relationship between state provision of health care and the recipients of this care. Durbach ends her book by contrasting the National Health Service (NHS) with the state medicine of the nineteenth century. While Victorian state medicine, according to Durbach, always was tainted with pauperization (through its association with the Poor Law), under the NHS, “free medical care [was] a right without fear of pauperization” (p. 206). Durbach credits the anti-vaccination movement with contributing in large part to the reconstruction of the state provision of health care in relationship to citizenship.

Durbach clearly admires the success of this popular

politics of anti-vaccination; her story is a triumphant one that illustrates the power of the people to change state policy and practice. Yet, while there is no question that vaccination in the nineteenth century had its problems, it also had its benefits. By upholding the termination of compulsory vaccination legislation as the heroic end to the story, Durbach perhaps underplays the very real dangers to public health that are a consequence of the freedom to say no. This underplaying is probably the result of Durbach’s insistence on the importance of the power of the anti-vaccination movement itself—a point she establishes without a doubt, with persuasive evidence, and through a lively narrative.

Note

[1]. Anna Clark, *The Struggle for the Breeches: Gender and the Making of the British Working Class* (Berkeley: University of California Press, 1995), p. 229.

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Citation: Marjorie Levine-Clark. Review of Durbach, Nadja, *Bodily Matters: The Anti-Vaccination Movement in England, 1853-1907*. H-Albion, H-Net Reviews. August, 2005.

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