

and Whitehall Palace's surviving Banqueting Hall and nearby Westminster Abbey and Westminster Palace (the Houses of Parliament, rebuilt after fire destroyed the original in 1834), where Indigenous visitors over many centuries witnessed or participated in Britain's ceremonies of state.

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WRIGHT, David – *SickKids: The History of The Hospital for Sick Children*. Toronto: University of Toronto Press, 2016. Pp. 480.

In this engaging study of Toronto's Hospital for Sick Children (commonly referred to as "SickKids"), David Wright chronicles its growth from a tiny charitable effort to an international enterprise. Using the hospital's development as a lens, Wright interweaves institutional politics, medical practice, gender inequality, and changing perceptions of children, as well as the structure's physical development, into a satisfying historical narrative. The author recognizes its failings, yet presents a largely positive vision of its role in helping shape modern paediatric care (please note, the hospital underwrote the publication).

Taking inspiration from London's pioneering children's hospital on Great Ormond Street, Elizabeth McMaster (niece-in-law of the William McMaster whose generosity created McMaster University on nearby Bloor Street) and her committee of moralistic, dedicated women created a children's hospital for Toronto in 1875. The institution's narrative mimics those of most of its North American counterparts. Professional, largely male medical staffs relatively quickly marginalized female founders. The hospital's reputation and acceptance by the middle class increased with new surgical successes flowing from the discovery of anaesthesia and the application of bacteriological procedures.

In the twentieth century, with the concept of the children's hospital established, SickKids hired non-medical, finance professionals to replace medical administrators, while ethical issues became more prominent, expensive medical technology drove up the cost of care, and new medical challenges, such as polio, replaced old ones, such as tuberculosis. SickKids also struggled with evolving financial structures, most dramatically the 1960s' creation of Canada's Medicare, whereby government funded health care.

Wright deftly integrates these larger themes into his narrative, reporting how SickKids' leaders and staff reacted. In some cases, personnel proved prescient, while in others, social biases and narrow vision limited their response. For instance, Wright explores the apparent murders of patients in the early 1980s, for which police charged nurse Susan Nettles, but the judge later threw out all the charges. Although the case damaged the hospital's reputation, and exposed poor administrative oversight of critical procedures, Wright, despite giving us perhaps excessive detail, fails to connect the case to a larger discourse on hospital and

social ethics. He could have contrasted the high social value of children today with the behaviour he describes earlier of some early-twentieth-century surgeons willing to experiment with risky procedures despite very high mortality rates.

Wright effectively portrays the hospital's wavering mid-century development after its spectacular early growth. Medicine's perceived omniscience, demands for ever-more expensive technology, new roles for nurses, and seemingly constant expansion of the physical plant proved hard to manage. Well-conceived and intriguing chapters on fund-raising challenges ("The Atrium," starting p. 289), a "Genetic Wilderness" (beginning p. 311), and the illuminating discussion of taking care to First Nations communities in upper Hudson Bay ("A Hospital without Walls," starting p. 337) are somewhat fragmentary, as an increasingly complex institution develops multiple storylines.

Throughout, Wright forcefully pursues gender politics—a chronic problem in children's hospitals. Founders of most were society women setting up charitable care for poor children, leading usually—as in Toronto—to conflicts with the often entirely male medical staff, which tended to take control of the daily routine. At SickKids, mostly male medics lorded over mostly female nurses (and custodial and other staff as well—85% females in the 1960s (p. 259). Battles over nurses' pay, training, and rules/regulations (including, for many decades, nurses' having to resign if they married) course through the book, effectively integrating gender politics common throughout the medical world into the story at SickKids.

The author also deals tellingly with the difficult relationship of staff to parents—a 1916 photograph shows a mother forlornly holding her hand against the glass that separates her from her sick child (p. 166). Concerns about infection and perceptions of parents as a "nuisance," harming the patient's health, kept parents from offspring (p. 172). However, upper-class families could typically visit their children in private rooms, and some upper-class donors could walk the wards, seemingly defying the underlying rationale for such quarantine. Wright suggests that quite simply the medical staff disliked the perceived interference of parents. Only in the 1960s did practice reverse, and parents became part of the hospital world.

As for the hospital's design, Wright describes the early surgical suites and the famous SickKids' atrium, but only mentions two sea changes: the evolution from wards to private rooms—in effect, from equality/charity to middle-class privacy—and various schemes to manage infection (as in the poignant 1916 photo above). The hospital's physical design is not simply a backdrop to people's acts, but an active element in delivery of care and a matter worthy of serious exploration.

The book's discussion of the institution's growing reach is especially valuable. As the only children's hospital in Toronto for generations, SickKids eventually developed new patient bases elsewhere in Canada and around the world, especially through telemedicine. Sustaining its monopoly and expanding its spatial reach each required deft political handling of public officials and funding sources, which Wright details. Especially helpful is the description of its efforts to develop an international entity, SickKids International, to separate potential international profits from the traditional non-profit hospital (p. 354). Joining that

with a final look at the research tower, which the construction manager joked was “sufficiently tall to loom over Toronto City Hall,” Wright concludes with a vision of high-powered, high-priced, high-rise medicine in the name of children’s health (p. 360).

Overall, the book is beautifully illustrated, especially the striking, bold cover. The narrative flows easily, even as Wright takes us through the increasingly arcane jargon of modern medicine. The stories about murder, experimentation, politics, and power are well balanced, with incisive analysis of evolving medical science and political wrangling. We need such histories of major medical institutions to help us understand the history of children, modern health care, and social issues.

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