

Compte rendu

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Construit à partir des témoignages des femmes qui ont vécu le quotidien des hôpitaux militaires et des stations d'évacuation pendant la Deuxième Guerre mondiale, cet ouvrage offre une vision différente mais non moins pertinente de l'histoire officielle, des journaux de combattants ou des autorités politiques et militaires. Nous considérons toutefois que l'utilisation d'entrevues, réalisées plusieurs décennies après l'événement, aurait exigé une réflexion plus poussée sur la méthodologie et la place des représentations dans la construction des discours. Nous estimons aussi qu'une analyse approfondie sera nécessaire pour déterminer l'impact réel du retour des infirmières vétérans sur l'évolution de la profession. Les conclusions de l'auteure sur le sujet sont prématurées.

Somme toute, Toman atteint ses objectifs, se servant de l'histoire orale pour redonner la parole aux femmes qui ont vécu l'événement et pour apporter un éclairage nouveau sur leur collaboration au système médico-technologico-militaire de la Deuxième Guerre mondiale. Cet ouvrage constitue par le fait même une contribution importante à l'histoire socio-militaire canadienne, à l'histoire des sciences, des technologies et de la médecine, à l'histoire des soins infirmiers et à l'histoire des femmes.

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***Nutrition Policy in Canada, 1870-1939.* By Aleck S. Ostry.** (Vancouver: University of British Columbia Press, 2006. x + 160 p., ill., bibl., index. ISBN 978-0-7748-1327-3 hc. \$85 978-7748-1328-0 pb. \$34.95)

In the "Introduction" to *Nutrition Policy in Canada, 1870-1939*, Aleck Ostry writes that he wants this book to alleviate some of the current confusion regarding nutritional information amongst the public and suggests that this confusion is compounded by a lack of historical research on nutrition policy. Ostry hopes, therefore, that his volume will contribute essential research to "policy-making efforts" (p.3). To this end Ostry divides the history of nutrition policy in Canada into five eras. The first period is quite long, covering the years between 1870 and the end of the First World War. During this period nutrition policy concerned the adulteration of food and the protection of consumers. The second era that Ostry considers occurred in the inter-war years and Ostry devotes three chapters to nutrition and nutrition policy in the 1920s and 1930s. Ostry's third era is the life span of the Canadian Council on Nutrition (CCN), which advised the federal government on matters of nutrition policy from 1938 until 1972. The fourth era of nutrition policy in Canada, lasting

from the demise of the CCN to the early 1990s was marked by consumer activism and an increased concern by the government to delivery nutrition education. The fifth era, from the early 1990s until present day, concerns the globalization of dietary policies and food technologies. The book is relatively short and, given the timeframe he covers, Ostry's account is necessarily in broad brush-strokes.

Ostry's contribution in this book is to present historical data that until now were to be encountered only by researchers in the archives. Insofar as it performs this service, the work provides many points for investigation. Ostry's account is important insofar as his is one of the few accounts of nutrition in Canada from the archives. Further, as part of this project, Ostry makes a small contribution to the under-researched history of Canada's relation to the League of Nations and presents a brief account of Canada's involvement in League of Nations nutrition initiatives. It is a reflection of the sorry state of affairs in each of these research areas that Ostry's is one of the few contributions. Ostry's book, therefore, is a necessary starting place for current investigations into the history of nutrition in Canada.

Although it is one of the few contributions to the history of nutrition and nutrition policy in Canada, Ostry's work suffers from a lack of careful reference, both to the small body of literature that does already exist and to his own archival data. One gets the sense that Ostry has developed his ideas over the course of many, many months with much data and has become so immersed in the topic that he cannot distinguish any longer between what he knows and thinks and what is common knowledge. Ostry seems to have frequently forgotten to present the data needed to make his arguments and in this way the book creates many more questions than it answers.

The chapters devoted to the depression era are typical of the text as a whole in their failure to present the data needed to develop or support their arguments. For example in Chapter Six, "Food Safety and Marketing and the Role of the Medical Profession in Dispensing Nutritional Advice in the 1930s," Ostry suggests that paradoxically, "as the depression deepened, fears about ill-health surfaced... the health status of the population improved" (p.68). While such certainly appears a paradox, Ostry never provides any evidence in the chapter for one prong of the paradox, the increased concern about hunger and nutritional status. Indeed, it is never even made clear who was concerned, whether bureaucrats, health care providers or individual citizens. I have no doubt that there exists evidence for this claim. However, Ostry appears to have become so familiar with his data as to no longer consider it as such.

In another of the depression era chapters, Ostry considers the decline in infant mortality rates during the depression from deficiency diseases generally and rickets particularly. Ostry tells us that the rate of rickets deaths decreased during the depression and concludes that such was “due to a relatively stable supply of cheap food in combination with public health infrastructural enhancement and increased birth spacing (particularly in Quebec, where declines both in infant and rickets mortality were most dramatic)” (p.96-97). However, in the chapter’s one paragraph to deal with access to food during the depression, Ostry determines from the data that in fact such could not have had a profound impact on rickets mortality rates. He tells us that increased access to food would improve rates of mortality due to rickets because such would provide higher-quality breast milk as well as improve breastfeeding practices. But he ultimately concludes that “enhanced feeding of mothers would not likely have had a direct impact on rickets mortality, especially in Quebec where such improvements were most dramatic” (p.92). It seems therefore to be in spite of his evidence that Ostry can conclude by presenting increased access to food as the leading cause of the decrease in mortality due to rickets during the depression. Given the structure of the argument, Ostry is clearly convinced, however, he does not present us with the data by which he became so convinced.

More rigorous attention to his data would no doubt have prevented Ostry from embroiling himself in the difficulty of claiming on page 80 that: “in 1938 Canada was the first nation in the world to establish a modern dietary standard” and then on page 98 that “[i]n 1862 the British government ... developed the world’s first dietary standard.” Neither is it clear what we should think when we read in Chapter Six first that “[t]he Division of Child Welfare was shut down, due to budget cuts, in 1933” (p.58), then later that through the depression the Division of Child Welfare “took a back seat” (p.62) in nutrition education, and finally that the Division of Child Welfare was eliminated in the “latter part of the 1930s” (p.63).

In light of my reading, I suggest that researchers looking to use Ostry’s claims for their own writing do so only after they investigate for themselves Ostry’s source for archival documents, “The Ottawa Historical Archives” (p.9).

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