

Christine Stevenson, *Medicine and Magnificence: British Hospital and Asylum Architecture, 1660–1815*. New Haven and London, Yale University Press, 2000, 312 pp., 86 black-and-white illus.

Sherry McKay

Volume 27, numéro 1-2, 2000

URI : <https://id.erudit.org/iderudit/1069736ar>

DOI : <https://doi.org/10.7202/1069736ar>

[Aller au sommaire du numéro](#)

Éditeur(s)

UAAC-AAUC (University Art Association of Canada | Association d'art des universités du Canada)

ISSN

0315-9906 (imprimé)

1918-4778 (numérique)

[Découvrir la revue](#)

Citer ce compte rendu

McKay, S. (2000). Compte rendu de [Christine Stevenson, *Medicine and Magnificence: British Hospital and Asylum Architecture, 1660–1815*. New Haven and London, Yale University Press, 2000, 312 pp., 86 black-and-white illus.] *RACAR : Revue d'art canadienne / Canadian Art Review*, 27(1-2), 154–156. <https://doi.org/10.7202/1069736ar>

since they destabilise the entire system” (p. 28), which is just what her new readings of urban space, gender, class, race and imperialism ought to do.

ANNE-MARIE LINK
Augustana University College

Notes

- 1 Deborah Cherry, *Painting Women: Victorian Women Artists* (London and New York, 1993).
- 2 Lynda Nead, *Victorian Babylon. People, streets and images in nineteenth-century London* (London and New Haven, 2000).
- 3 Gayatri Chakravorty Spivak, “Three Women’s Texts and a Critique of Imperialism,” in Henry Louis Gates Jr, ed., *Race, Writing, and Difference* (Chicago, 1986), 262–80. The article was originally published in *Critical Inquiry*, 12 (1985), 243–61. Spivak’s article comments on the construction of First World female subjects – as individuals and as independent – through the representation of the “Third World Woman” as collective and plural.
- 4 Spivak’s concept of “worlding” is part of her analysis of the representation (Spivak focuses on literary representation) of an uninscribed “Third World,” which only becomes a “world” through European imperialism. See Spivak, “Three Women’s Texts;” and G.C. Spivak, “The Rani of Sirmur,” in Francis Barker et al., eds, *Europe and Its Others*, vol. 1 (Colchester, 1985), 128–51.
- 5 For a discussion of theories of hybridity, including a critique of Homi Bhabha’s original use of the term, see Robert Young, *Colonial Desire: Hybridity in Theory, Culture and Race* (London, 1995).
- 6 Cherry provides a good overview of the feminist analysis of *Zenobia*, from Roszika Parker and Griselda Pollock, *Old Mistresses: Women, Art and Ideology* (London and New Haven, 1982), to Whitney Chadwick’s *Women, Art and Society* (London, 1990).
- 7 Cherry refers mainly to the critic Craig Owens’ essay “The allegorical impulse: toward a theory of postmodernism” in Scott Bryson, Barbara Kruger, L. Tillman and Jane Weinstock, eds, *Beyond Recognition: Representation, Power and Culture* (Berkeley, 1992), 52–69.
- 8 For a recent and stimulating discussion of Symbolism and a Symbolist feminist aesthetic, see Patricia Mathews, *Passionate Discontent: Creativity, Gender, and French Symbolist Art* (Chicago, 2000).

Christine Stevenson, *Medicine and Magnificence: British Hospital and Asylum Architecture, 1660-1815*. New Haven and London, Yale University Press, 2000, 312 pp., 86 black-and-white illus.

Hospitals must be solidly but simply built. With absolutely no other kind of building is luxury more destructive of propriety ... Magnificence announces too much money in the foundation, or too little economy in the administration ... Too much beauty in a house of charity ... stifles charity ... Great cleanliness and convenience [are wanted] but no ostentation at all.¹

The premise of this curious and challenging, at times entertaining and occasionally perplexing book seems to be that the asylum (in the seventeenth to nineteenth centuries) was a product of different and multiple discourses that circulated through images and texts as well as through buildings. It is therefore, perhaps, fitting that the structure of the book and each of its ten chapters is as digressive, diffuse and episodic as the discursive production that the author has set out to explain. Among the discourses pursued are those of political economy and Christian morality, both demanding that architecture distinguish useless ostentation (luxury) from noble liberality (magnificence). In this history the social and medical uses of architecture collide or collude with the ambitions of architectural practice and theory. Christine Stevenson also sets out to explore the paradox that although hospital buildings were much criticized as ostentatious, ineffective and even dangerous to health, they were also

built in abundance. Conventional architectural formats for studying asylum and hospital architecture are largely eschewed – architect, typological study, monograph do not order the material here, although all are discussed. *Medicine and Magnificence* aims to represent these institutions “as their contemporaries understood them as buildings” (p. 1), rather than by the conventions of present-day history. This, for the most part, the author does admirably.

It is perhaps this intention that explains the unusual flow of the narrative. It follows the itinerary of a discourse about asylum and hospital architecture as it was articulated in two often conflicting sites of consideration – medicine (involving physicians, institutional custodians and governors, scientists) and magnificence (engaging political economy, architecture). This is not an easy undertaking, despite the inspiration and example of Foucault, who is generously referenced in the bibliography. Specific hospitals and asylums seem to disassemble into the various components that link them as a category – hospitality, monuments, patriarchal medicine – and consequently into “the frets of luxury,” “Golden names,” and “native American architecture” (Chapter 1). Under the chapter heading “Looking at asylums,” one will find Chelsea Hospital, Palladianism, Alexander Pope’s “Epistle to Lord Burlington,” Venetian windows, Hogarth’s “Rake in Bedlam,” various illustrations dating from 1775 to 1809 of London’s first St Luke’s, at Moorgate, by George Dance the Elder (1750) and its new St Luke’s at Old Street by George Dance the Younger (1782–87), and the younger Dance’s All Hallows London Wall. The array brings to mind Foucault’s comments about “a certain Chinese encyclopedia” in

which he apprehended “the exotic charm of another system of thought,” one which revealed “the limitation of our own.”²

The book is ambitious and astounding in the range of the material brought together, not only in the volume as a whole but also in single chapters, and even in paragraphs. Each topic is shown to have its history as well as its multiple relationships with other topics. It offers a rich description, necessitating asides into origins and forays beyond Britain. Hence, the mid-eighteenth-century French architectural theorist, Marc-Antoine Laugier, contributes to a discussion of luxury, and under the topic of restoration, we find not only a poem about “Bethlehems beauty” from the seventeenth century but also the thoughts of the second-century physician, Galen, and the first-century architectural theorist, Vitruvius (p. 66).

Stevenson charts the development of hospitals from private house to “surrogate household,” to the public buildings of wards and pavilions. Hospitals will borrow the vocabulary and administrative logic of the private residence, and appropriate the monastic cell, the gallery of great houses and the Venetian window of architectural high design. But as Stevenson so ingeniously and often wittily reveals, hospitals were built of more than bricks and mortar, columns and ornamental devices; guide-books and prints, ideas about charity and the multiple aspirations of groups of governors could also be influential in their construction. She plots the complex legacy of architectural knowledge – of ventilation, orientation, spatial distribution, communication – and its conflict with and eventual undermining by the “triumph of medicine over architecture” by the 1850s (p. 4). Hence, her history is also about the conflict between architectural knowledge and medical knowledge. That knowledge is a source of power is a commonplace belief in post-Foucauldian academic thought. But Stevenson is correct to remind readers of Adrian Forty’s observation that “there is no reason why scientific knowledge should be applied to buildings, or anything else, unless it is in someone’s interest to do so” (p. 4). In Stevenson’s account it is clear that the interests served were inevitably contested, never secure and always negotiated – whether they were of a religious, professional or political nature. There was much to undermine the interests and power of architecture as a profession: military doctors preferred ruins and huts to purpose-built hospitals, political economists chastised them as money wasted, physicians worried over contagion and infection brought on by the congregation in one place of so many sick. We learn that asylums and hospitals were the products of architects and poets, artists and governors, as well as physicians. That all were influential reminds us that professional grounds were not then as securely staked out as they would later become.

The book offers a large view of “asylum,” frequently going beyond the dates and geographical extent indicated by the title. It charts the etymology of words, their denotations and conno-

tations; we learn for example that infirmary meant “for the sick” but it also had the connotation of “the poor” and the “modest” and that hospitals evoked almshouses while infirmaries did not. It also endeavours to synthesize the materials, documents and histories of many different sources and disciplines. At times this produces a tension between the long sweep of historical development and specific temporal and site contexts. The book will perhaps be difficult for readers who are uninitiated in the seventeenth and eighteenth centuries. It may be hard to follow the fast-paced introduction of poets, artists, architects and other luminaries. It may also be challenging to keep the time and space of the study clearly in view. The fifteenth-century Alberti (p. 16) follows the nineteenth-century A.W. Pugin (p. 15) and leads to an exposition on the eighteenth-century Alexander Pope (p. 18), while an explanation of hospitals built in London (p. 32) leads to a digression on Philadelphia (p. 33) and Paris (p. 46). We will become knowledgeable about lunette windows that are prominent features of the London façade of St Luke’s, but not about what went on behind them; we are given information about exterior appearances and architectural detail but not much insight into the day-to-day experience of the sick who were forced to dwell within. This is, no doubt, an oversight caused by the sweeping reach of the subject presented in the book.

The writing is dense, complex and often so full of long supplementary phrases that “its” and “theirs” sometimes lose their referents. But this profuse writing style does allow also for witty remarks and adjacencies as exemplified in the discussion of poets “trained in paradox” who aimed their skill at “Bedlam.” The text is not luxuriously illustrated and almost uncharitable in the terseness of the annotation given to plans and images. However, the subject is magnificently researched; the study offers an impressive array of archival and contemporary historical material as well as philosophical writings complemented with the work of present-day medical, cultural and architectural historians.

Although the author clearly wishes to understand the buildings as their contemporaries did, there are occasions when twentieth-century theorists are introduced, recalling the reader, often jarringly, to the present-day and its ways of thinking. Thus, the discussion of “Inhabitants and visitors” draws upon the present day conceptualizations of space and social relations (Hillier and Hanson, 1984; and Markus, 1982). Stevenson admits her use of this twentieth-century theory is “simplified,” and readers might be puzzled as to why it is employed at all; it is too schematic and undeveloped to really bring much insight to the discussion of hospitals here. Likewise the introduction of Lucy Gent’s (1995) distinction between “looking at” and “looking through” architectural space, while intriguing, is not developed. However, the inclusion of twentieth-century references such as these, as well as those to Mark Wigley, Clifford Geertz

and Helen Rosenau, may suggest just how relevant this material is today.

Although not the author's explicit aim, perhaps, the book does raise some interesting questions for contemporary architects and architectural historians. It alerts both to possible determinants of their services and practices that reside outside their constituted professional arena. In the seventeenth and eighteenth centuries an architect might be no more influential on the construction and understanding of the built environment than a poem by William Blake, a treatise by a physician or the "observations" of a donor or governor. Also highlighted are the multiple roles of those involved in the complex ways in which hospitals were conceived and constructed. A single person might be a donor, governor, architect, benefactor and beneficiary; hospitals might be built for visitors as much as for the sick; as an "exhibition space," as well as an apparatus for air and warmth. Likewise, as Stevenson so often demonstrates, a building is also a part of an urban space and public sphere, and one would do well to pay heed to this enlarged view. Finally, *Medicine and Magnificence* invites future scholars to explore more fully some of the topics and themes brought to view by the breadth of this work and the fractured taxonomy of hospital and asylum architecture that it discusses. "Moveable" and "Flying" hospitals not only conjure the bizarre and fantastic; they also, in this era of medics without borders and refugee camps, suggest the useful and timely. While the depiction of the visitors/inhabitants, donors, physicians and architects is vivid here, there remain to be considered the sick, poor, aging and home-

less who often came to reside in these buildings. And there are hints that sexuality and gender were clearly important aspects of how contemporaries understood these buildings. Readers will be intrigued by comments about "medicine that was literally patriarchal, that is of the line of Abraham" (p. 29) and others, provoked by the women spectators depicted in Hogarth's "The Rake in Bedlam," that "the identification of other people's curiosity was ... ultimately a gendered one in the eighteenth century" (p. 96). Such provocative hints given passing reference here will no doubt inspire future research.

In *Medicine and Magnificence* readers might find familiar images and names; they will, however, find unexpected interpretations and unusual lines of argument, as well. They will also find suggestions for other ways of thinking about architectural production and unconventional formats in which to do so. It is well worth reading carefully.

SHERRY MCKAY
University of British Columbia

Notes

- 1 Marc-Antoine Laugier, *Essai sur l'architecture*, 2nd edn (1755) quoted in Christine Stevenson, *Medicine and Magnificence* (New Haven and London, 2000), 5.
- 2 I am thinking of Michel Foucault's comments on the insights offered by Borges' description of "a certain Chinese encyclopedia." "Preface," *The Order of Things: An Archeology of the Human Sciences* (New York, 1970), xv.

Bernard Smith, *Modernism's History*. New Haven and London, Yale University Press, 1998, 376 pp., no illus. \$60 Cdn.

Bernard Smith, a professor and critic who has carved out a considerable reputation in the writing of Australian art history, now turns his hand towards the European modernist tradition in his recent volume, *Modernism's History*. His name was established with the publication of *Place, Taste and Tradition* (1943), an account of Australian art since 1788, one of the earliest Marxist accounts of art in the English language. Smith's book evaluated the development of Australian art in its social, political and cultural context, as well as analysing the influence of individual artists and art movements in Europe, North America and the South Pacific. *Place, Taste and Tradition* was also the first overview of Australian art since William Moore's *Story of Australian Art* (1934). Other volumes by Smith followed, including *Education Through Art in Australia* (1958), *European Vision of the South Pacific* (1960), *Australian Painting 1788–1960* (1962), and the invaluable *Documents on Art and Taste in*

Australia: The Colonial Period 1770–1914 (1975). Together with numerous other volumes and articles on Australian art, Smith has charted a reliable course for scholars to follow. Along with years of teaching at the University of Melbourne and the Power Institute of Fine Arts at the University of Sydney, he has achieved a substantial position in the historiography of Australian art. Smith's recent foray into the mainstream modernist tradition should, therefore, be viewed with great interest. His voice from the margins of the European tradition in Australia may be expected to leave its mark, and one may hope that this volume is the first of such endeavours.

Bernard Smith sets out in *Modernism's History* to establish a new period style for the modernist tendency in art between ca. 1890 and ca. 1960. He asserts that the modern period in art is no longer "modern" and must be characterized as a style cycle equal to that of the Romanesque, Gothic, Baroque and Rococo; towards this end he coins the term "Formalesque" to describe the period in art which was oriented towards formalism and ultimately towards abstraction. The Formalesque may then be