Unavoidably, users following the career of one vessel will find that small changes in her rig or port of registry may throw her records out of chronological order. Researchers should also remember that published whaling narratives are as valuable as manuscript ones, though far less numerous and now, ironically, less easily traced. Furthermore, the distinction between whaling and general trading voyages was blurred in the Canadian Arctic after 1900 and not all repositories treat these voyages the same way: since \textit{Finback} (1919) and \textit{Ernest William} (1912, 1913) are included, the fine run of Sabellum Trading Company voyage records in the Dartmouth College Library might equally well have been listed. There is no avoiding such anomalies: they merely underscore the fact that researchers are ultimately responsible for finding and sifting the material they need.

The disappointing coverage of Canadian holdings also throws Canadian researchers, to some extent, back on their own resources. The \textit{Inventory} mentions some forty microfilmed logs at the Scott Polar Research Institute; the originals, in fact, are in the National Archives of Canada. Other logs in the National Archives are not mentioned at all, and neither are valuable items in the Provincial Archives of Manitoba, in the Hudson's Bay Company Archives, in the Glenbow-Alberta Institute and, doubtless, in other places.

The editors of the \textit{Inventory} sensibly brought the work to press while knowing there was still room for “further expansion of the inventory [which] will have to be undertaken at another time.” (p. viii) In the meantime, they have produced a valuable and impressive work, a tribute to the possibilities of international collaboration among archives holding similar types of material. Judith Downey and Virginia Adams compliment Howard Pasternack’s computer expertise, which “made the impossible possible.” Equally impressive, however, is the collaboration of so many institutions in setting aside their local priorities long enough to fulfil Stuart Sherman’s dream of a union list. \textit{Whaling Logbooks and Journals} will give important aid to researchers in several disciplines, with interests spanning many oceans and shores. In Canada, it should be on the reference shelf of every library and archives used by students of the North.

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Research on the history of medicine in British Columbia was given a dramatic “shot in the arm” in the fall of 1986 with the publication of \textit{A Guide to the Medical Archives of British Columbia}. Practitioners, administrators, historians, and archivists, particularly those interested in the evolution of medicine and its professional organizations in the province, will benefit from this welcome addition.

The \textit{Guide} is the result of a 1986 summer project conducted under the auspices of the BC Medical Association (BCMA). A grant obtained from the BC Heritage Trust enabled the BCMA to hire Jim Lewis, a Master of Archival Studies student, to arrange and describe the textual holdings of the Medical Archives. The \textit{Guide} was compiled to establish control over the existing collection and provide a framework for future expansion. It was also decided that it should serve as both a resource for researchers and a staff finding aid. It has successfully achieved both goals.
The introduction to the Guide explains that the mandate of the Medical Archives is to "acquire, preserve, arrange, describe, and make available, material documenting the growth and development of the medical profession in this province." Specific objectives include providing information to assist doctors and administrators with their work and source material for both public relations activities and scholarly research. It should be noted that the Guide refers only to the records held by this one repository and, despite the title, is not an exhaustive listing of all medical archives in the province.

The Guide is divided into seven sections, with the BCMA Collection, the largest with 5.6 metres of records, described in Part I. The other major record groups are the Canadian Medical Association, the College of Physicians and Surgeons of BC, the Osler Society of Vancouver, and the Vancouver Medical Association. The smaller record groups, comprising the BC Board of Health, the Greater Vancouver Health League, the Osteopathic Association of BC, and the Vancouver General Hospital, are placed together in Part VI, "Medical Organizations and Institutions." Personal papers are described in Part VII.

The Guide is composed of descriptive inventories for each collection. Based on the SAA's Inventories and Registers: A Handbook of Techniques and Examples (1976), they include administrative histories or biographical sketches at the collection and subgroup levels, scope and content notes, series descriptions, and file lists. The inventories are more detailed than those found in many repositories. This was done deliberately due to the importance of the material for research, the absence of complete administrative histories for some organizations, and the limitations on available reference service — the latter demanding finding aids that permitted researchers to work independently.

The administrative histories describe the structure and evolution of the medical organizations. Due to a lack of readily available information, these histories vary in detail and comprehensiveness. In a separate project report, the author admitted that time restrictions prevented completion of all the research required. Despite this, the information provided is extremely useful. For example, while the administrative history of the BCMA stops at 1952 (the records span the period 1922-1982), it is nonetheless an incisive overview of the Association's evolution through several crucial decades.

The scope and content notes and series descriptions provide analysis of the records and the various subjects documented. Attention is drawn to any gaps, strengths, or weaknesses. They represent, in effect, short histories of the records themselves. Comments on potential research value are particularly useful for the large correspondence or subject series, where important topics are often hidden. Information is provided on the arrangement of the records and any reasons for deviating from original order. This analysis continues to the file lists, where original titles are distinguished from those which have been added or amended. One of the Guide's strengths is the author's conscientiousness in indicating the details and rationale of all arrangement and description decisions.

To assist researchers, reference is made to the records of any of the organizations that can be found in other repositories. While useful, this information is not always complete. The archives at the Canadian Medical Association offices in Ottawa are described, but the existence of additional CMA records at the National Archives of Canada is overlooked. As well, the presence of Vancouver General Hospital records in the Vancouver City Archives is not mentioned.

In terms of research value, the various record groups document far more than just the development of medical organization in the province. Information is available on the
general medical challenges and specific issues faced by both the profession and society throughout this century. The records address such topics as the battle waged against patent medicines at the turn of the century, administration of medical relief during the Depression, early interest in medical economics, debate on health insurance, and changes in diagnostic and therapeutic procedures.

A complement to the official records held by the archives are three manuscript collections. These comprise the papers of Drs. W.F. Drysdale, Nanaimo Medical Officer and physician to the local native population; J.H. MacDermot, editor of the VMA Bulletin and the BC Medical Journal for some forty years; and P.A. McLennan, a leading orthopaedic surgeon during the first half of the century. In addition, the archives has a small amount of material relating to Dr. R.C. McKechnie, two-time CMA President, and a letter from the British doctor, Edward Jenner, the discoverer of vaccination. Because of their small volume, these items have been placed in the vertical file. While this may be appropriate for the Jenner letter, the McKechnie Papers could easily be grouped with those of the other doctors, thereby making them more readily accessible.

As was the case with the record groups, the inventory entries for these collections provide detailed information about the papers and their creators. Of particular interest to medical historians is the MacDermot Collection. An avid student of history, Dr. MacDermot was working on his History of Medicine in BC until his death in 1969. His papers include typed drafts and research notes on such subjects as the founding of hospitals and medical associations, the contributions of doctors to various war efforts, the role of women in the delivery of health care, and the evolution of workers' compensation, health insurance, and medical education. Despite the richness of this material, Dr. MacDermot's contemporaries apparently had reservations about his “interpretation, accuracy and style.” For this reason, the author wisely cautions researchers to “confirm through other source material, all data taken from the MacDermot manuscript.”

Perhaps surprisingly, given the sensitive nature of records relating to medicine, the only records which are restricted are the BCMA Executive Director's subject files (1959-1982). Although closed until 1996, series descriptions and file lists are provided. As the Guide is designed to assist staff members, the file list obviously needs to be available to them. Beyond this, however, some will argue that the list should be removed from public use. Many archives never make lists of restricted material available lest the file titles themselves divulge sensitive information. On measure, unless there is very specific information in the file titles, the listing of restricted files appears justified. Researchers using the Guide will benefit by knowing that records exist on such topics as child abuse or extra billing, although they may not yet be able to obtain the details.

The greatest concern about medical archives and confidentiality is reserved for patient records. The majority of the collections described in the Guide do not appear to contain such information. The only exception, the Drysdale Papers, includes a ledger listing patient names and addresses, diagnoses, and fees charged for the period 1930-35. The author notes that this ledger is “particularly useful for documenting Dr. Drysdale's medical services to persons on relief and the native community.” While one cannot dispute the research value of this source, especially on the relationship between medical service and economic status during the Depression, the fact that such material is apparently unrestricted is a cause for concern. Admittedly the information in the ledger is over fifty years old, and is certainly not as detailed as a modern medical record, but the fact remains that a direct link is made between patient identity and diagnosis. Some formal
control mechanism, perhaps an agreement not to reveal individual identities, should be in place to deal with patient information that may be discovered in any collection. Such a policy decision is beyond the author's jurisdiction, but it is a matter for those responsible for the Medical Archives to consider seriously.

Although the project did not include photographs, the Guide contains occasional reference to them. In the McLennan Papers, for example, mention is made of photograph #104 LMC BW of the 1898 McGill University graduating class being transferred to the photograph collection, but there is no indication of how it can be located. A brief appendix noting the existence of non-textual records would be a useful addition, particularly for novice staff members or researchers using the Guide independently. The only other notable omission from the Guide is a subject index. Given the scope of the project, the preparation of a comprehensive index was clearly impossible, and its absence is compensated for by the careful organization of the Guide which permits efficient provenance-based research. However, consideration should be given to the creation of an index before the collection grows much larger.

Despite the occasional criticism, the Guide is an excellent example of what can be achieved by a carefully planned and executed project of limited scope. It sets a high standard for future staff members of the Medical Archives and it should serve as a model for similar projects. Indeed, this reviewer used the Guide when establishing a similar system for legal archives. If the current projects undertaken with funding from the Canadian Council of Archives produce finding aids of the quality of A Guide to the Medical Archives of British Columbia, then the archival and research communities will be well-served indeed.

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According to guest editor Bruce Dearstyne, this special issue of The Public Historian explores and analyses recent developments in the archival world for the benefit of the public history community. Six eminent American archivists and one distinguished Canadian professional portray archival developments in their respective countries over the past decade and delineate the boundaries establishing archival endeavours as separate from, but related to, public history.

Larry Hackman, State Archivist of New York, takes the reader through the recent past and present situation in “A Perspective on American Archives.” He implicitly sets up 1974 as a watershed year for archives in the United States: the hiring of the first executive director by the Society of American Archivists (SAA), the formation of the National Association of State Archives and Records Administrators (Government was later substituted for State, making it known as NAGARA), and the creation of the records programme of the National Historic Publications and Records Commission (NHRPC). Hackman discusses the National Endowment for the Humanities (NEH), the National