

for queer and feminist approaches to our nation states, constructed sexualities and racialized identities.

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***Obstructed Labour: Race and Gender in the Re-Emergence of Midwifery.*** Sheryl Nestel. Vancouver: UBC Press, 2006; vii+200 pages; ISBN 0-7748-1220-6; \$29.95 (paper).

***Mainstreaming Midwives: The Politics of Change.*** Robbie Davis-Floyd and Christine Barbara Johnson, eds. New York: Routledge, 2006; x+559 pages; ISBN 0-415-93151-7; \$31.95US (paper).

Sheryl Nestel's *Obstructed Labour* is an examination of how the activism and rhetoric leading to the legalization of midwifery in Ontario reproduced racist discourses, problematically affecting immigrant midwives of colour. Nestel posits that Third World women played significant roles in supporting the legalization of midwifery, while simultaneously being used in juxtaposition to the movement's construction of "respectable" midwives. She takes the reader through the local, institutional and interpersonal "technologies of exclusion" within the movement, as well as the larger global processes of domination that arise in the common practice of midwifery tourism, where aspiring midwives travel to Third World countries in order to gather birthing experience. Nestel also highlights narratives from midwives of colour, detailing their experiences of both exclusion and resistance. She closes her work by insisting that "in order for there to be a glimmer of hope in constructing political projects that do not reproduce hierarchical relations among women" (166), it is vital to acknowledge and account for the errors of past political projects.

Nestel's work makes good on its advocacy of the painful accounting for errors of the past, weaving the reader deftly through a highly troubling depiction of racism and the propagation of hegemonic

discourses arising from a well-meaning feminist endeavour. *Obstructed Labour* is neither an easy nor palatable read. However, as disheartening as some of the information is, this work is highly important to the growth of feminist activism and scholarship, as well as for the growth of the midwifery movement. I would highly recommend this book to Women's Studies classes and to feminist readers of all backgrounds. The theme and analysis transcends the midwifery movement itself, providing an excellent examination of the dangers of adhering to notions of generic womanhood and of all forms of socially conscious organizing which do not allow for dissenting voices.

It should be emphasized that this book is not an indictment of midwifery. While certainly critical of how the licensure of Ontario midwifery came into being, Nestel never questions the importance of midwifery and the alternative birth movement. Instead, *Obstructed Labour* offers a difficult but necessary wake-up call to feminist theorists and organizers of all backgrounds.

*Mainstreaming Midwives* provides a variety of essays about the historical and current contexts of midwifery in the United States (US). The book is separated into three distinct sections, each outlining a particular theme within the US midwifery movement. Section I analyzes the national context of midwifery, examining the development of nurse and direct entry midwifery, as well as highlighting the tensions between the various national midwifery bodies. Section II provides case studies of the struggles and successes of direct-entry midwives to obtain licensure in seven states in the US. Section III examines some of the core issues related to the project of mainstreaming midwives, including tensions between midwives who choose to practise outside of state regulated practices and those who are more protocol oriented, and the frictions that occur in the attempts to balance the project of professionalization against the social movement of midwifery. *Mainstreaming*

*Midwives* concludes by delving into many reasons why midwifery needs to be maintained as both a vital, growing profession and a social movement.

*Mainstreaming Midwives* veers from the theoretical in-depth nature of *Obstructed Labour*, providing the reader with a useful and highly descriptive overview of many of the issues facing midwives and alternative birth communities in the US today. The work is at its strongest when examining the impacts of having a fractionalized movement, exploring the tensions between a need for movement unity while also maintaining space for differences in midwifery philosophy and practice. While this book does provide a useful overview of the American midwifery movement, there are also areas in *Mainstreaming Midwives* that are somewhat concerning. In general, there is a lack of attention to issues of diversity and several authors throughout the book make use of the term "woman" or "womankind" without problematizing these generalizing terms. To argue that midwifery benefits "womankind" does not allow for a thoughtful analysis of the varying degrees of marginalization and privilege among groups of women, including women who practise as midwives and those who access (and do not access) midwifery services.

My biggest criticism of *Mainstreaming Midwives* (and this is a problem that occurs throughout the work) is that surprisingly little respect is offered for women who choose more traditional birth options. A few (of many) examples of this occur as one author makes an offensive reference to "counterfeit birth" (414), and the editors note in their conclusion that they "believe that midwives should become the primary caregivers for most American women throughout pregnancy and birth" (508). While it seems clear that their positioning midwifery care as a superior birthing option comes from a place of genuine caring about women's birth experiences, this anthology tends to paint an overwhelmingly singular picture about medical/hospital births, as well as to

denigrate the choices of women who choose not to use midwifery care for their birth experiences. This is both ironic and distressing, given the propensity of midwifery rhetoric to hold up women's "choices" as one of the most important elements to the midwifery model of care.

While overall I'd say that *Mainstreaming Midwives* is a generally informative read, I believe that the midwifery movement is better served by trying to argue for a greater range in birth choices for women, rather than attempting to make decisions on women's behalf.

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***Sick Building Syndrome and the Problem of Uncertainty: Environmental Politics, Technoscience, and Women Workers.***

Michelle Murphy. Durham: Duke University Press, illustrations; 2006; x+253 pages; ISBN 0-8223-3671-5; \$21.95US (paper).

This book examines the modern office building and the history of sick building syndrome (SBS), which by the 1990s was the most commonly investigated occupational health problem in the United States. Murphy defines SBS as a post-modern problem: a syndrome with "a diversity of ill health effects, mostly minor and associated with a building, for which no specific cause was found" (6). Using a Foucauldian framework, each thematic chapter examines the different but entwined histories and practices through which buildings and bodies are connected, including ventilation engineering, building design, feminist activism, popular epidemiology, government policy, ecology and corporate science, to bring together the complex discourses that name and define SBS and the uncertainty that is borne out from these multiple histories.

Murphy provides a concise history of women's office work in the United States, including a detailed examination of the women office workers' movement of the 1970s and 1980s. This history of women's