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What's Wrong with the Poor?: Psychiatry, Race, & the War on Poverty by Mical Raz

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Under the impetus of President Lyndon Johnson’s War on Poverty, American policymakers in the 1960s sought ways to relieve, cure, and prevent the onset of poverty within American society. Physician and historian of medicine Mical Raz analyzes welfare programs, such as Project Head Start, and their connections to mental health theories produced by psychiatrists and psychologists during the 1950s and 1960s. Raz utilizes an interdisciplinary approach combining studies of medicine and social policy to argue that the welfare policies of this period were based on mental health theories that understood poverty as originating from the deficits of men, women, and children who belonged to the underprivileged class. By focusing on what these individuals were missing, policymakers hoped to design programs that would make up for what was lacking. For programs like Head Start, government reformers described low-income children as coming from dungeon-like homes where they did not know their own names or had never seen a flower. Raz contends these perceptions found their basis in psychiatric theories that placed lower classes and African American homes at the crux of need.

Raz’s work focuses heavily on the study of sensory deprivation and its emergence as a viable field of research in the 1950s. Sensory deprivation posited that certain stimuli were necessary for the progression of normal intelligence. The growth of this field in turn fostered the growth of new areas of research within the deprivation framework, such as maternal deprivation, which analyzed the appropriate role and relationship of mother and child. Raz suggests that mental health experts’ research took on a distinct class-based interpretation and thus informed American day care policy. For instance, these researchers concluded that middle-class mothers who placed their children in day care facilities allowed them to be at risk due to separation from their capable mothers. Low-income mothers, however, benefited from placing their children in day care because it mitigated the sensory deprivation that occurred in the home. The seemingly contradictory nature of these two views, according to Raz, reinforced a conservative view of the family, which upheld the middle-class ideal of a male-breadwinner, female-homemaker model. Raz is also apt to point out that when psychiatrists or policy makers referenced lower-class groups, this disproportionally signaled a discussion about African American families and communities.

While Raz emphasizes the importance of sensory and maternal deprivation theories, she is particularly concerned with cultural deprivation theory. Raz argues that cultural deprivation was linked closely with notions of a culture of poverty, but that while some used the term synonymously, she finds that the theory drew more directly from other theories of deprivation that had already gained significant traction and support. Cultural deprivation theory understood “poverty not simply [as] an economic condition but rather a distinct socio-cultural pathology that caused academic and even intellectual disadvantage and social disability…creat[ing] an additional generation of culturally deprived individuals thus perpetuating the cycle of poverty” (p. 37). Shockingly, cultural deprivation theory did more to shape educational welfare policy than any other, and yet had no empirical data to support its claims. Instead, Raz finds that researchers used the data from sensory and maternal deprivation to support cultural deprivation theory. She emphasizes that cultural deprivation fell in line with traditional understandings of
poverty. By connecting it to notions of personal failure and a lack of hard work and motivation, researchers looked for elements lacking in an individual’s life that caused poverty and sought to provide them with the necessary stimuli to overcome such deficits. Raz argues that while it was wholeheartedly embraced in the 1960s as a means of understanding the underprivileged, it did foster a notion of blaming the victim for their situation rather than looking for structural disparities or faulty social policy. This argument falls in line with other historiographical treatments of reform and government action, which argue that these efforts overwhelmingly sought to change individual or cultural factors rather than the inherent inequalities of capitalism or of the American political economy.

Race holds an important place within Raz’s work. Throughout What’s Wrong with the Poor?, we see that even as policymakers or mental health experts used “color blind” language to discuss their research and ideas, their references to underprivileged or low-income groups always correlated to African Americans. Raz maintains that deprivation theories were understood as non-racist ways of understanding why minority or non-white communities struggled in education, income, and employment. Researchers believed that their ideas provided information not based on racial inferiority. Thus policy makers could utilize these ideas without disrupting the necessary power balance within American society. Raz finds that while liberal social scientists and leftist policy makers embraced the theories of deprivation in the 1960s, a decade and a half later these same ideas were interpreted as racist and fell out of use. While it is understandable that this change occurs, Raz fails to elucidate the process fully. Despite the associational word change, the effects of these racially changed ideas have had lasting effects that educators and policy reformers are still trying to get away from today.

Raz’s work is a provocative and stimulating analysis and reads effortlessly, not an easy task when discussing psychiatric theories. She does well to describe clearly the various maternal, sensory, and cultural deprivation theories, while also describing how they inform one another. Her interdisciplinary approach enables her work to speak to historians and social scientists across a variety of fields interested in such topics as the history of poverty, the American welfare system, race, mental health, and education. Her work falls in line with other treatments of poverty that have found a close association between notions of poverty and disease. Whether it was syphilis, tuberculosis, or alcoholism, the idea of a person’s deficits as a cause of poverty remains a common theme. Raz employs a wide variety of sources ranging from the work of the mental health researchers in the 1960s to an extensive use of secondary material from the variety of disciplines she encounters. This enables her work to bring a vital and unexplained part of the War on Poverty to light. Overall, this work is significantly valuable to students of poverty, welfare, and twentieth century American social policy.

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