

improvements in Maori health status and increase in population to the rather conventional interest in personal and domestic hygiene that these doctors demonstrated. In other words, he implies that a failure to adjust to European ways was the problem, and better personal hygiene was the answer. Others might want to point to improved resistance to introduced disease, better socio-economic conditions including housing, and greater use of health care facilities – not just to the reform of ‘personal and communal practices’ (p. 259) that Maori doctors advocated. Lange does admit that death rates began to fall in the 1890s, before any Maori doctors were organising hygiene reform. So what were the causes? Perhaps we should be looking less at what these Maori doctors did, and more at how they came to be there at all. Rather than the originators of Maori ‘community development’, they were perhaps themselves the signs of social and political changes that were already occurring in Maori communities in the late nineteenth century. But if there were earlier underlying community developments, what were they?

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*Crack Mothers: Pregnancy, Drugs and the Media.* By Drew Humphries (Ohio State University Press, Columbus, 1999, hard back, ISBN 0-8142-0816-9) 206pp., \$US30.

IN *CRACK MOTHERS: PREGNANCY, DRUGS AND THE MEDIA* DREW Humphries interrogates one of white America’s more recent racialised socio-health panics: the consequences on the unborn of maternal addiction to crack cocaine. Her interest is not, however, primarily in the plight of addicted mothers and their babies, but in the media-driven crusade that erupted as part of the war on drugs initiated by the Reagan presidency. It is, therefore, a story about social blaming, discrimination and the misuse of science and biomedicine for political ends.

Cocaine has historically been a recreational drug of the affluent and the avant garde. It only becomes an option for the poor when it is adulterated and boiled down to a rock so that it can be smoked. Whereas in the nineteenth century, watered-down laudanum increased shop-owners’ profits and protected the poor who consumed it from even more severe poisoning, crack is cheaper but produces quick highs followed by savage lows. The result is an intensified craving for relief

that is more easily satisfied by buying another small ‘hit’. Crack is the mass marketing of an elite vice.

The ‘crack mother’ who scandalised white America was of course black and quite different from the stream of white Hollywood stars and socialites who had ‘had a drug problem’ and even had babies while in its throes. First the crack mother was seen to be black, young, single, promiscuous and oblivious. Even worse she was accused of producing unacceptably large numbers of offspring poisoned in the womb, whose life-long disabilities would cost society in crime, social delinquency and health care. Her irresponsibility was blighting her young who in turn would blight mainstream respectable America. And to the Republican mind, the ultimate horror of poverty, crime and ill-health is that they can consume tax-payers’ money.

The ‘welfare queen’ and the ‘crack mother’ were the feminine face of the undeserving poor, whose misery was their own fault and who had, therefore, no moral claim on society. Indeed welfare payments and support only encouraged them to remain poor and irresponsible. Hospital staff who suspected women of crack addiction reported them to the criminal justice system so that they were arrested on charges that ranged from manslaughter or child abuse or neglect to drug distribution. Their drug-taking was criminalised in a way that others’ drug abuse was not; for it was perceived that they were wilfully harming an innocent second party in their unborn child. As Humphries says:

In focussing on crack and questioning the moral capacity of inner-city minority women to bear and raise children, the stereotype exaggerated beyond all proportion the social ills that most disturbed the New Right—the fundamentalist Christians, conservatives and right-wing Republicans who claimed responsibility for Republican success at the polls in the 1980s.

The answer to this new plague had to be ‘aggressive prosecution and mandatory penalties’.

The outcome, of course, was crippling cut-backs in public funding for health care, drug dependency care, welfare support and special education—undeserving people do not deserve anything. Neither were the Democrats all that enthusiastic about restoring funding levels when they faced a middle-class electorate grown quickly accustomed to lower taxation. Humphries emphasises that the need for housing, food, job skills, child care, and transportation which underwrote people resorting to crack remained unmet, and that when the Clinton administration took office this unmet need for drug treatment was even greater than it had been in 1985.

Then there were the children. The actual long-term effects of exposure to crack *in utero* remain uncertain. Most obviously, once the initial withdrawal symptoms had disappeared, there appears to be a higher incidence of low birth weight, as there is anyway with poverty and social deprivation in affluent societies. Indeed, a recent article in the *AJM* claimed that no cognitive damage has as yet been found in 'crack babies'. The coercive response, however, was to take the children away. Yet crack hit the drug market when child welfare services were already in crisis. Most 'crack children' were placed in foster care where they disappeared into an ever-growing population of abused and neglected children. While some legislators in some states recognised that additional funds needed to be allocated to the education and care of crack-affected children, 'Congress capped the increasing costs and provided districts with greater flexibility in disciplining disruptive and potentially violent students with learning disabilities'.

This is a book of quietly controlled anger. For all the fire and fury, horror and scandal whipped up by the media at the height of the panic, so little real good was done. Conservative moral outrage, however, creates the illusion that action has been taken: the moral outrage is itself all that is needed. Meanwhile the young poor who are weak enough to yield to their depression and despair have no one to blame but themselves.

Is this just America's problem? The Howard government's belated 'war on drugs' is not dissimilar: for instance, the outright rejection of 'medical solutions' such as safe injecting rooms, let alone the legalisation of heroin. But almost as ominous has been the launching of a media campaign that seeks to awaken the middle class to the serpent lurking within their own homes. When drugs stay inside the working class they are a crime problem; when drugs invade the private school, they are a national tragedy.

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