Black Women, the Economic Crisis and the British State

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The available literature on Black women in extremely diverse. It is broadly divisible into the following four categories which are briefly commented on.

First there is the material produced by Euro-American women about Black women both here and in our countries of origin. This utilizes Western concepts and approaches which can be seen to have varied applicability across the different women they purport to study. This applicability depends on a number of factors, the most significant being the degree to which Euro-American imperialism has succeeded in dominating the cultural, socio-political and economic arenas, and the manner in which such domination has infiltrated the lives and experiences of Black women. This applies particularly to orthodox anthropological and sociological frameworks, as well as to Euro-marxist conceptions of class and Euro-feminist conceptions of gender, patriarchy and sexuality (see Parmar and Amos this issue). The resulting texts are often held together by unspecified assumptions such as the universality of female oppression, or the transcendence of 'sisterhood' over existing differences (for example Cutrufell 1983). Many of these problems are typified in the compilation format employed in Third World, Second Sex (Davies 1983). While this contains some rich texts by women from all over the 'Third World', and as such may provide reference material for some, it is deficient because one is left to wonder what assumptions operated to put such diversity within a single book cover (See also Jayawardena 1982).

These criticisms also apply to some of the work by African women trained in Western academic traditions, particularly those who have opted to remain within some of the more orthodox frameworks. Christine Obbo's 'African Women' for example, is actually about women in a particular part of Eastern Africa, and uses sociological theory which does not do justice to the data she collected (Obbo 1980). More exemplary is the research conducted in Eastern Nigeria (Amadiume 1983 unpub) which concentrates on one people to examine the changing status of women in the traditional (pre-1900), colonial and neo-colonial periods.

The third main source is the growing body of Black American literature currently forming a significant reference point for feminists in this country, perhaps to a greater extent than is merited by the general historical similarities that do exist between Black women in Britain and the U.S. Our specific histories are quite different, as are the political practices and ideologies that have developed out of these (Davis 1981; Aptheker 1982; Ladner 1971; Cade 1979; Josepsh and Lewis 1981; Hull, Scott and Smith 1982; Hooks 1981; Rodgers-Rose 1980).

Finally there is the growing body of literature produced by organizations and individuals on Black women in Britain. In the light of the reservations raised about the first three categories, a major objective of such work must be to develop appropriate conceptual tools and well-grounded theory. By this I mean grounded in the experiences and realities of the specific Black women concerned, and which incorporates the contingency of action on experience. Such grounding should enable us to transcend the assumptions underlying Euro-American (white dominated) thought, methods and practices. This is important because even marxist and feminist theories have been produced out of histories and ideologies that reflect particular and oppressive relations to Black people, and particularly Black women. These in turn, generate 'knowledge' that is partial and particular, despite universalistic claims.

The diversity of the literature we have glanced at here raises the need for clarifying our terms and identifying the communities implicit in my usage of the term 'Black women'. This will be followed by a discussion of our relationship with the British economy as workers, and secondly of our relationship to the state as citizens. These relations are cast in a historical perspective which recognizes the significance of the changing forms of imperialism internationally and racism within Britain, as integral to the relations examined. The manner in which gender textures relations of Black women to the economy and the state is also considered throughout.
Clarifying terms and identifying communities

The historical and political origins of the term 'Black' require particular attention in the light of the prevalent attempts to group all who are not white and English ('non-whites') together as 'ethnic minorities' or 'third world' persons, thereby reducing us to an amorphous, homogenously underdeveloped and oppressed mass. This negation of the validity of 'Black' traditionally comes from the political right, which fails to recognize racism. It has also come from 'marxists', the most recent example being Anthias and Yuval-Davies (1983), ostensibly because they feel that:

The notion of 'Black women' as delineating the boundaries of the alternative feminist movement to white feminism leaves non-British, non-black women (like us — a Greek-Cypriot and an Israeli Jew) unaccounted for politically.

It is interesting that we now have white women responding to Black women's historically-rooted tradition of autonomous organization in this manner: first by seeing it as 'an alternative movement' and secondly 'that this somehow makes them feel 'left out' of things. We have also witnessed the extension of the term 'Black' to include all those subject to imperialist domination, so that 'Black' sometimes refers to 'white' people. Despite the glaring historical inaccuracy and political foolishness of the exercise, time has been wasted arguing whether or not to include Iranians, Palestinians, Phillipinos, even Irish, as 'Black'. In the U S some American feminists have attempted to resolve the issue raised there by Hispanics, Native Americans and others, by adopting the phrase 'women of colour', thus reserving 'Black' for Africans.

In Britain it is clear that Black refers to Africans (continental and of the diaspora), and Asians (primarily of Indian subcontinent descent). All have a shared history of oppression by British colonialism and racism. Only the Caribbean African (Afro-Caribbean) community have the specific history of enslavement. They share with fellow Africans elements of a Pan-Africanist consciousness ('Black consciousness'). Amongst the Asian communities, which include those from the Asian diaspora (the Caribbean, east and southern Africa, (cf Tinker 1974)), the political consciousness that includes self-definition as 'Black' is more recent. It has come from the superimposition of the experience of white racism on the experiences of indentured labour and colonial domination.

Historically, Black consciousness (Pan-Africanism) has its origins in two related sources. First on the African continent it was manifest in movements against settler colonialism in the south and east. These date back to the Khoisan attacks on the white settlers invading the Cape in the 1600's (Marks and Atmore 1971), through to the 1906 Zulu rebellion in Natal (Marks 1970) and Chilimbwe's revolt in Nyasaland, 1915. Today we have a political movement and continuing liberation war against the scourge of apartheid (for example the Black Consciousness Movement of Azania).

In East Africa there was the Nyabingi protest movement (referred to as a 'Cult'), which immobilized the administrative efforts of three colonial powers for nearly two decades in South-Western Uganda, up until 1928. One of the most powerful and feared warrior leaders was a woman known as Muhumusa. Indeed Nyabingi was also female, as were most of her 'bagwira' (mediums or representatives). Male bagwira maintained their influence in part by adopting female patterns of dress. East Africa was also the site of the famous Mau Mau rebellion.

West African political consciousness developed somewhat differently. The Indirect Rule system employed in Northern Nigeria for example, did not facilitate the polarisation of class interests along the specific dimension of skin colour in quite the same way (for example see Azikwe in Langley 1979). However, it took numerous military campaigns to conquer each of the people and empires: Benin, Ashanti, Kebbi and Sokoto. Even after formal assumption of sovereignty over Northern Nigeria, for
example, Lord Lugard had to wage successive campaigns to take over lands whose armies were supplied with arms by the Nupe kingdom (Bida and Kontagora 1900, Yola 1901, Bauchi 1902, Kano 1903, Sokoto 1903 and Burmi 1903).

The diasporic source of Black consciousness must be traced back to the earliest slave rebellions; for example the Maroon wars in Jamaica, the Haitian rebellions; and in post slavery resistance. The reader is referred to the writings and practices of Blyden, Garvey, Padmore, Cesaire, DuBois, CLR James.

'Black' therefore has a particular significance for African peoples. Those from the Indian subcontinent come out of their own history of struggle (see P. Trivedi in this issue).

Among Asians, two subgroups are additionally of interest. East African Asians had a particular relationship both with colonialists (for whom they performed petit-bourgeois functions) and with the Africans who rejected this role with the departure of the colonial masters). This is relevant to the status of this group today, who like the African elites enjoy a class position here which is often facilitated by links with capital 'back home'.

Amongst Indo-Caribbeans, the relation to Black consciousness varies between the different nations, depending on numbers, and the consequent extent of 'creolization'. In Guyana (where Asians are the majority) and Trinidad (where they are the largest single group) communities have remained largely distinct, and thus been less exposed to Africanist Black consciousness.

From this we can see that Black women in Britain are historically rooted in three different continents. It would be foolish even to attempt to summarize the diverse cultural, religious and socio-political histories out of which we have evolved. African women, for example, may come from any part of a continent so diverse that a single nation may have 250 languages reflecting cultural differences which include extremely diverse gender and status relations. To try to isolate the 'position of women' from any such cultural context is difficult yet necessary. To generalize for a whole continent borders on the foolish, and in respect of three continents must be the height of folly. Furthermore, Black women's experiences and struggles, apart from being rooted in so many different contexts are further complicated by the varying penetrations by and relations with British society. Black women here constantly identify with and politically support a range of movements, and accord varying priority to African national liberation struggles, African and Caribbean movements and events in Asia. There is also general political support for other anti-imperialist struggles such as the Latin American fight against Euro-American domination and the Irish liberation struggle against British imperialism.

From another angle we can be viewed as three 'generations'. First there are those who have inhabited Liverpool, Cardiff and London since the seventeenth century, who arrived either as slaves, or as the daughters of Black ex-slaves, or of unions between Black sailors and native white women. The middle 'generation' of Black women came as migrants from the tropical reaches of the British empire. Most recent is the growing generation born and/or predominantly raised here, by migrant parents. This last group is influenced to varying degrees by parental cultures. It is noteworthy here that a substantial proportion of the 'non-white' population is of mixed origin — this ranges from 6% in the West Midlands to 40% in Merseyside (1981 Labour force survey). Most of us are urban: 40% of the 'New Commonwealth and Pakistani origin' community lives in the GLC area, (59% of West Indians) 20% in eight large cities and the remaining 40% in smaller cities. 50% of the Black community are Asian, 30% West Indian, with the remaining 20% from 'Africa, the Far East and the Mediterranean' (Population Trends 28, 1982).

In addition to the various 'parent cultures', there are new cultural and political
forms evolving out of the Black British woman’s unique experience, textured as this is by contemporary forms of racial, class and sexual oppression, and the corresponding patterns of rebellion and resistance (see Black Women Organizing, this issue).

Black feminism in this country reflects the diversity of origin and variation in geographical, historical and cultural reference points. The unity of Black women as Black feminists is a political phenomenon that seeks a coherent and coordinated rebellion against the varied manifestations of oppression. The priority given to Afro-Asian unity by African and Asian women’s organizations such as OWAAD, is a fundamental aspect of the growing awareness of the need for a united front at a time when the British State is intensifying its discriminatory practices in ways detrimental to us all.

**Black Women and the Economy**

The relationship between the various organs of this state and its Black citizens have been discussed along with some of its many ramifications in the context of the economic crisis (Hall et al 1978, Gutzmore 1975 and 1983, Sivanandan 1976, Solomos et al 1982). The effects of this crisis on Black women at the levels of state and economy, and effects of the strategies of Britain’s ruling class for dealing with the crisis on us have rarely been discussed. These are addressed here. Throughout it is recognized that both the crisis and the strategies have both political ideological and economic manifestations, and that these amount to a regrouping, reformulation and restructuring by forces that have a history of domestic and international exploitation in the interests of capital. The apparatus of the colonial state that maintained British supremacy at horrendously destructive costs to Black people on the African and Asian continents during slavery and colonialism continue to uphold the interests of international capital today by means which include the monstrosity of apartheid. At the same time there is an ongoing, many-pronged assault on all sections of the Black communities resident in the UK. It is the fact of racism in its changing forms in the contemporary British context (Lawrence 1982), which underlie the economic strategies and crucially inform the ideological changes we are now witnessing.

Our relations to the economy are discussed here primarily with reference to the NHS and office work, and as such focuses on African and Caribbean Black women, unless specified otherwise. It is argued that these relations are constructed along the dimensions of race and gender, to the detriment of Black women, and that the contemporary situation is one in which these divisions are being upheld and accentuated by the present government’s strategies for dealing with the economic crisis, and by its policies and legislation in general.

The relations of Black women to the British economy should be considered in the context of Black people, but must in addition be analysed in terms of gender. This is because they are not equatable with or reducible to those of Black men, or subsumeable to those of the Black community. It is not simply a matter of going into detail about Black women as a subgroup. There are qualitative differences along the dimension of gender and its meaning in British society which have implications for Black women, and have textured the economic relations of Black people in general. We have played a specific role in the rationalization processes of British capitalism.

To cast things in a historic perspective it is necessary to consider relations from slavery onwards, which have been documented. (Philips 1975, Shyllon 1974, Gutzmore 1975, Williams 1944) In Britain 1764 saw some 20,000 slave workers in London alone, an estimate which discounted what must have been substantial number of slaves, freed slaves and ‘mulattoes’, who must also have been workers of some sort
(Rogers 1942). In the same period, a certain John Fielding protested against bringing these 'poor creatures' over from the West Indies because they became intoxicated with liberty and started to expect wages, and 'corrupt' black servants with notions of freedom. He also connected those sent back to the Caribbean plantations with insurrections. The 'St. Giles black birds' were largely made up of Black men who had served the British Army in America and were discharged in London to become destitutes in 1783 (D. George 1925).

Studies of the post-war period are often discussions of 'immigrants', and therefore collapse all of us into a single, and by implication recently arrived, generation. A second deficiency is that little of this material is gender-differentiated although there are a few recent publications on female immigrant labour (Foner 1976, Phizacklea 1983). Peach (1969) in West Indian Migration to Britain presumed female migration to have been a passive following of menfolk. He put the proportion of 'women and children' at over 40% of the total between 1955 and 1964(p45). A substantial proportion of the women are likely to have been single, since women were specifically recruited. Regardless of marital status, the vast majority of these middle-generation Caribbean women came to this country as workers. Concerning recruitment, the National Health Service and the then Ministry of Labour were in consultation with the Colonial Office as early as 1944, and the local selection committees constituting a centralized recruiting system had been set up in 16 countries (including Nigeria, Sierra Leone, British Guiana, Trinidad, Mauritius and Jamaica) by 1948. Doctors and dentists were recruited primarily from the Indian subcontinent. It is notable that restrictive immigration did not hinder recruitment, since quota systems allowed the NHS to continue importing unskilled labour for ancillary jobs, and skilled labour was not restricted (Doyal et al 1981).

The 1981 Labour Force Survey shows 47.2% of white women to be economically active, as compared to 67.6% of 'West Indian or Guyanese', 48.1% of Indian women, 40.5% of African women and 15.5% of Pakistani or Bangladeshi women. This gives Black women an officially higher rate of 49.4%. The location of Black women in the labour market reflects and compounds the dimensions of inequality intrinsic to British society. In accordance with racial differentiation, we are to be found in the lower echelons of all the institutions where we are employed (this in itself reflecting the patterns of a segmented labour market), where the work is often physically heavy (in the factories and mills no less than in the caring professions), the pay is lowest, and the hours are longest and most anti-social (night shifts, for example).

In accordance with gender divisions, Black women tend to be employed in particular industries (clothing and food manufacture, catering, transport and cleaning, nursing and hospital ancillary work). Jobs in the 'caring' professions (nursing, teaching, community and social work) exploit oppressive notions of 'femininity', and yet actually involve heavy labour as in the case of nurses, ancillary workers and cleaners (see Unit of Manpower Studies 1976).

**The National Health Service**

The NHS is a major component of Britain's Welfare State, which has been developed since the last war. Its birth was fundamentally a fruit of wartime class collaboration and social democratic consensus, and financed by the post-war boom. This was also a time when workers, like soldiers before them, were recruited from the colonies to staff the boom and facilitate white upward (and outward) mobility, while keeping wages to a minimum that would have been unacceptable to the increasingly unionized white working class. Black labour was allocated by the market to specific purposes as we have seen.
Nursing is where professional Black women are employed in the NHS, usually as State Enrolled Nurses (SEns) rather than as State Registered Nurses (SRNs), despite the fact that the lower status SEN qualification is unrecognized in many of our countries of origin. National data on overseas nurses in the NHS are not available, and the studies that have been done include the large and fluctuating proportion that have been recruited from Ireland, Malaysia and the Philippines. In the hospitals they studied Doyal et al (1981) found 81% of the qualified nursing workforce to be from overseas (within this, Irish and Malaysians were more often SRNs, ward sisters and nursing officers, while Afro-Caribbean and Filippino women more SEN or nursing auxiliaries).

With regard to ancillary and maintenance workers the same study found 78% of ancillary workers and within this 84% of domestic and catering workers, from overseas. The proportion of female overseas ancillaries was more than double the number of males, and within that 78% of domestic and 55% of catering workers.

For more detailed exposure of the stratification within nursing and the role of Black labour in facilitating the rationalization of the labour process both within the NHS and industry, the reader is referred to Doyal et al (1981). They argue that, in general, migrant labour has been used to enable changes in the organic composition of capital on terms more favourable to capital accumulation. In the case of the NHS immigrants are seen as having provided a crucial source of cheap labour, enabling the NHS to meet the demands of Britain's changing demography. The ever-increasing numbers of geriatric and chronically mentally and/or physically handicapped people has resulted in a growing demand for long-term care in unpopular areas; migrant labour has been used to facilitate caring for these people without dramatically increasing costs.

The economic crisis and its attendant legislative and political changes have affected Black workers disproportionately across the board. 'Restructuring' involves closing down old, declining areas in favour of new expanding ones. It so happens that because of the historical role Black labour has played, it is exactly those sectors of the market that have employed Black people that are now closing down, while persisting discrimination ensures racist recruitment patterns in those areas being expanded and developed, which are exacerbated by unemployment. Racist redundancy policies
must also be taken into account. While the NHS cannot close down overnight, as we have seen recently, it has been a focus of Tory cutbacks. The government strategy is to whittle away as much as possible while privatizing, and it is the areas where Black women work (ancillary services) that are going first. For workers, privatization means an intensified exploitation; longer hours, less bargaining power, lower wages and fewer people employed on these inferior terms. The laying-off and sacking has already provoked protests from Black women workers (see, for example, Caribbean Times, 158 March 1984).

The recent 'fishing raids' and deportation of Filippino nurses are evidence that the State is using immigration legislation to regulate Black women workers according to demand, much as the Ministry of Labour and the Colonial Office acted together in earlier recruitment strategies. The current context of high unemployment means that inferior jobs are becoming attractive to white British workers who previously enjoyed the luxury of regarding these as 'below' them.

**Offices**

70% of all jobs in the GLC are office jobs and 50% of the Black community live in London. Recent years have seen some Black women employed in some office jobs. These have generally been low-skilled ones, in local government and welfare offices. Offices have been at the heart of the so-called 'technological revolution'. Emma Bird had this to say about it:

- women are disproportionately affected by the introduction of new technology.
- Not only are they more likely to lose their jobs, but they are also more likely to find that the quality of work has deteriorated in the jobs that remain. (Bird 1980)

Her estimates are comparatively low; 2% (21,000) office job loss by 1985, rising to 17% by 1990. In 1979, APEX predicted a quarter of a million job loss by 1983. Assessment of actual job loss is complicated by the fact that many are lost by 'natural wastage'. The West Yorkshire case study (Leeds TUCRIC 1982) concluded amongst other things that new technology leads to job losses in all the areas of women's employment, that new jobs in scientific and technical areas will favour men, that there are disturbing increases in stress and new health hazards are evident (100% increase in
headaches, 77% increase in eye troubles and 69% increase in tiredness are reported) after the introduction of new technology. As in industry, restructuring has had the effect of decreasing certain areas while increasing new ones. Predictably by now, it is the less skilled secretarial jobs, where Black women tend to be employed, that are most affected. The areas currently expanding (banking, finance and telecommunications) are not those which have tended to employ Black women, and racist recruitment and selection for training in the new skills required is preventing proportionate representation of Black women in these areas. In short, what is bad for women is worse for Black women.

To conclude this section, it needs to be pointed out that the Black woman’s status as a worker is particularly important because we are more often heads of families, and have more dependants than our white counterparts. Black women are also more likely to have unemployed menfolk, and when this is not the case, Black male wage levels are low. The Black woman’s wage is therefore crucial to our communities, and changes to it affect all Black people.

We can conclude that the sexist and racist devaluation of Black female labour by Britain is not only historical but also a contemporary fact and that the situation, far from improving, appears to be deteriorating. In addition to this we have particular relations to the British state, firstly as workers to capital’s needs, and secondly to the legislative apparatus, particularly through immigration legislation which is used to mediate this relation and keep it on terms that do not include our interests as workers. Finally, the present strategies for coping with economic decline/crisis are particularly detrimental to Black women workers, in the NHS and offices, and presumably in the areas not covered here. The overall picture is suggested by the Black female unemployment rate being estimated at three times the national average. Given the manner in which unemployment figures omit married or cohabiting women, the figure is probably higher, and this would further increase the twice the national average given for Black unemployment. The pattern, however, is not simple or uniform, as the case of the NHS illustrates; it varies with skill level and qualification levels, and is affected by recruiting from different countries at different times and in different areas of work.

The Welfare State and Black Women

The welfare state’s primary purpose is the reproduction and maintenance of the nation’s labour force. Apart from being workers in it, Black women have a second relation to the welfare state; that of residents and therefore consumers. Discussion will focus on the National Health Service and the Department of Health and Social Security. In addition to the staff cutbacks and hospital closures currently in evidence, all aspects of the welfare state are being increasingly policed in ways that particularly affect Black people. These changes affect us as women disproportionately, because, in accordance with our roles as wives and mothers, sisters and aunts, we come into more frequent contact with all agencies in our own right, as well as in accompanying our relatives. In our reproductive capacity we have to attend family planning clinics, antenatal clinics and hospitals for deliveries and post-natal care. I shall argue that the quality of healthcare provided for us by the NHS is mediated by historically rooted racism and sexism.

Looking at earlier periods, we can see that our reproductive abilities have fundamentally influenced our relationship to British society. In earlier centuries, Black female sexuality and reproductive powers were commoditized like anything else, and were therefore the property of the slave-owning class. It can be argued historically that Black female reproductive powers have been controlled according to the needs of the
capitalist labour market. Black slave women, apart from being labourers themselves, also had the task of reproducing the Black labour force, particularly when legislation obstructed the wholesale importation, and particularly when because the life expectations of slaves were not very long. Angela Davis has elucidated this aspect of slavery for us (Davis 1981). Contrary to a sexist mythology that slave women had an 'easier time' as a result of their sex, rape was an additional form of punishment and coercion. 'Breeders' were compelled to reproduce as fast as biology would permit, but given none of the status or care associated with motherhood. Pregnant and mothering slave women had to work the fields and were subjected to the same maltreatment as everyone else.

A woman who gives offence in the field and is large in family way is compelled to lie down over a hole made to receive her corpulency, and is flogged with the whip or beat with the paddle, which has holes in it; and at every stroke comes a blister. One of my sisters was so severely punished in this way, that labour was brought on, and the child was born in the field. This very overseer, Mr Brooks, killed in this manner a girl named Mary. (quoted in Davis, 1981)

The racist myths about Black female sexual prowess undoubtedly developed and contributed to large scale sexual abuse; the proximity and intimacy that domestic slaves were forced to live in relation to their 'masters' would have facilitated regular and repeated abuse. In the nineteenth century, a certain J J Virey commented:

Negresses display no common proficiency in the art of exciting the passions and gaining an unlimited power over individuals of a different sex. Their African blood carries them into the greatest excesses. (J J Virey 1837 cited in Rogers 1945)

The limiting of Black female reproduction, in stark contrast to the slavery period, is a recent phenomenon. It would be unrealistic to divorce this from the world economic situation. The slump in western metropoles, and the continued under-development of our countries of origin agriculturally and economically, must be brought to bear on our reproductive relations with the British state, both here and abroad. One of Josué de Castro's central points is that starvation causes over-population, and not the reverse (de Castro 1973). It is the reverse assumption that underpins the western approach to family planning both here and abroad.

Contraception is one area of the NHS which has not been cut back. Pressure is put on Black women, particularly young, single ones to have abortions and both start and continue using the pill. Disturbing evidence about the long-acting contraceptive, depo-provera has provoked campaign action and protests from Black women, and even cries of 'genocide' from some quarters.

Childcare is another site at which our contemporary reproductive relation to the state must be considered. Inferior housing and financial situations, coupled with racist evaluation of Black homes and mothers, go some way to accounting for the high proportion of Black children in care. Financial difficulties and inadequate childcare facilities particularly affect the Black single mother. Recent legislation has further weakened the position of parents in relation to the social services and foster agencies. Unfamiliarity with the legal intricacies involved in retrieving children from the state agencies, and the racism of officials involved in disputes that arise, give cause for concern, as do the problems that arise out of transracial adoption and fostering in a racist society.

Among the West African community, the same difficulties in housing and employment, along with the pressures of study that originally brought many of us here, and the lack and expense of daycare facilities, lead many to have children privately fostered. There is evidence of an undesirable tendency of outside observers to over-
emphasize the role of 'West African culture' in this. Extended family systems purportedly make us prone to fostering out our children (Ellis 1978). West African mothers are fully aware that sending young children to English foster families or institutions is not the same thing as sending them to live with a close and trusted relative (which, in any case, occurs when they are older). The suggested remedy is, predictably, to leave them 'back home'. This short-sightedness overlooks basic facts about West Africans in London; first that it is the desire to have children that inspires parents to have them. Secondly, many still desire an English education for their children as well as themselves. Thirdly, many of us do not return to West Africa for a good many years, and fostering is generally a short term measure. Finally there is the fact that few West Africans have anticipated the actual level of hardship and hostility that is met here.

Goody's study on the delegation of parenting by Black families in the Caribbean, West Africa and London (Goody 1978) found the reasons given for fostering in the British context to be quite different from those in West Africa, where sophisticated systems of kinship obligations and ties are involved, which implies that the two phenomena are far from culturally equivalent.

Misperportrayals and misunderstandings compound the racism of social service officials, precipitating and sustaining the disputes over parental rights between the states or (usually English) foster parents, and real parents.

The psychiatric aspects of the welfare state are of particular concern to all Black people, given the fact that 40% of all Black people in NHS beds are there as psychiatric patients (Black patients and health workers group 1983). The historical relations of Black people to psychiatric medicine are relevant here. During slavery, for example, many were diagnosed as suffering from 'drametomania' (an incurable urge to run away) (Thomas and Sillen 1972). The subsequent pathologization of Black resistance has two notable ideological concomitants; first it discredits revolutionary or rebellious ideas and actions and secondly it conflates these with 'madness'. Today, as in the past, there are 'Black-specific' categories of mental illness: 'West Indian psychosis', while 'paranoia' and 'religious mania' feature strongly. 'Marital psychosis', purportedly occurring in young Asian women should be considered against the background of state intervention into Asian marital customs (see Trivedi, this issue). Littlewood and Lipsedge (1983) point out that the treatment of Black patients differs substantially from that received by white ones. Black people receive more physical treatments (electro convulsive therapy, oral and injected drugs), and at higher dosages (or numbers, in the case of ECT). We receive less nonphysical treatment (therapy, counselling etc), and are less likely to see consultants or other highly-qualified staff.

The pathologization of women also has historical roots. The burning of two million witches is regarded by many as the antecedent of modern psychiatry (Chesler 1972, Szasz 1970, Foucault 1965). Other research suggests that both clinical psychologists and psychiatrists tend to see 'adult women' as more pathological than 'adult men' (Broverman et al 1970). The epidemiology of depression shows women having higher rates (Brown and Harris 1981).

Objections are being raised about the large-scale over-prescription of tranquillisers and anti-depressants to women across the class scale from suburban housewives to young mothers living on vast housing estates in appalling conditions. For Black women, the evidence has not been systematically gathered together. (For Black American situation see Carrington, Aldridge, in Rodgers-Rose, Chesler 1972.) White cultural stereotypes about what constitutes 'normal' behaviour for women, combined with the tendency of mental health professionals to pathologize what they do not understand or are unfamiliar with, give cause for concern.

In relation to the rest of the state, we are witnessing a growing encroachment of
psychiatric expertise into the prisons and courtrooms. Magistrates more frequently demand psychiatric reports for Black defendants, especially if they have locks. Black people are disproportionately represented among the involuntary section of the persons receiving psychiatric treatment. Treatment may also be a condition of probation or eligibility for parole. The social services also utilize psychiatric reports in, for instance, child custody cases.

The Mental Health Act (1959 Review) allows the Home Office to deport any person receiving in-patient treatment if they do not have the right of abode (Section 90). The erosion of human rights that occurs once a person has been stigmatized psychiatrically is extensive. Sections 135 and 136 give the authorities the power to ‘enter premises’ or ‘remove a person from a public place’ to a ‘place of safety’ (which may be anywhere from a police cell to a hospital). Various other clauses provide for involuntary detention (sections 25, 26 and 29), and extension of this (section 30).

In the context of the growing corporatization of the state it seems that psychiatry plays a particular role, since psychiatric expertise can be and is being called upon by different organs of that state. The relation of psychiatry to Black women is mediated by the dimensions of race and gender, whose effects have been briefly mentioned above.

In the case of the DHSS, legislated sexual discrimination renders married or cohabiting women unentitled to claim, thus forcing dependence on men regardless of the financial basis of the relationship. Social security investigators interrogate and spy on women in an attempt to ascertain the sexual habits of female claimants. The racist stereotype of Black people as social security scroungers promotes these forms of harrassment. The current government has increased and intensified the policing of these services.

The recent Nationality Bill has given hospital staff the role of enforcers, since proof of citizenship is required before receiving healthcare. Questionnaires are presented at hospitals. It is Black people who are most often required to prove citizenship, in case they are ‘foreign’, and it is this that has has provoked the ‘No Pass Laws to Health’ campaigns. Hospital closures and staff cutbacks have put added and growing pressure on the NHS, which manifests in the attempts to restrict access as far as possible.

**Conclusion: The Erosion of Rights**

Many aspects of our relationship to the British State in its current state of flux have been omitted from this discussion. For example, the overtly coercive aspects of the state the police force, courts and prisons have not been adequately considered, although the growing policing of the welfare state was discussed. Policing in particular is going through drastic changes; the Police and Criminal Evidence Bill currently going through Parliament constitutes the most overt threat to civil rights in this country (see The National Campaign Against the Police Bill Bulletin 1983 and Christian, 1983).

However, even from this limited account several points emerge. Firstly, the complexity and multiplicity of our relations with the British State cannot escape comment. This is a result of our own historical and contemporary diversity as a group. It is also due to the numerical array and sophistication of the organs and agencies comprising what is loosely referred to as ‘the State’. The term is still useful, particularly in the light of the manner in which these are increasingly linking up with each other (increased corporatization), as exemplified by the discussion of the NHS implementation of Home Office immigration controls. During the 1981 uprisings, NHS hos-
pitals are reported to have turned casualties over to the police. The growing seepage of psychiatric expertise into the courts, schools and prisons suggests that psychiatry is playing a particular role in the corporatization process.

The economic crisis is being exploited by the government as a means to erode away the Welfare State, and with it the right to health, education, housing etc. These measures are specifically affecting Black women in the ways mentioned.

The right to earn a living is being seriously undermined by the high levels of unemployment resulting from economic decline and industrial atrophy. Strategies being employed ostensibly to remedy this are actually exacerbating the situation particularly for Black women, as we have seen in the cases of the welfare state and office technological innovation. In short the quantity and quality of work available to Black women, already severely limited by historical and contemporary racial and sexual division of the labour market, is deteriorating as a result of the economic situation, but being even further eroded by the present government's policies.

As Black women we can draw courage from the fact that these are merely contemporary manifestations of old phenomena. Historically we have found ways to survive and resist the forces of class, racial and sexual oppression. There is no reason why we should not do so today. We must continue to evolve new strategies, organize more cohesively and effectively. We must consolidate the benefits of centuries of experience in order to move ever forward.

Notes

1 See for example FOWAAD (1979 onwards), produced by OWAAD. OWAAD Conference Papers; SPEAK OUT, produced by the Brixton Black Women's Group; OUTWRITE, from number 1 March 1982; SPARE RIB numbers 101, 107, 110, 111, 123, 132.

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