

long have been over-invested in critiquing psychiatric institutions and portraying them as instruments of state repression.

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Dennis A. Doyle, *Psychiatry and Racial Liberalism in Harlem, 1936–1968* (Rochester, NY: University of Rochester Press, 2016), pp. 260, \$99, hardback, ISBN: 978-1-580-46492-5; \$24.99, ebook, ISBN: 978-1-782-04844-2.

Dennis Doyle's *Psychiatry and Racial Liberalism in Harlem, 1936–68* is a fascinating book about a small but influential cadre of New York health crusaders who fought to bring Harlem residents access to psychiatric care. Comprised of juvenile court justices, educators, civil rights activists and mental health professionals, this group challenged the mainstream medical belief that black Americans were immune to psychological trauma. They embraced a colour-blind model of psychiatric health that garnered the support of city officials and community leaders, enabling them to incorporate ground-breaking mental health programmes into Harlem's juvenile justice system, public schools, social services and medical institutions. But while their efforts led to innovative and effective therapeutic interventions, their colour-blind approach failed to account for the larger structural mechanisms at work in America's system of racial exclusion. Inadvertently, these well-intentioned reformers re-inscribed onto Harlem residents many of the same problematic narratives about black health and psychology that they intended to dismantle. Doyle's work explores this intrinsic paradox of colour-blind liberalism in psychiatric healthcare reform and offers compelling insights into the relationship between the construct of race, psychological universalism and what it means to be human.

Doyle's story begins with the work of Justine Wise Polier, a judge in New York's Domestic Relations Court appointed in the wake of the 1935 Harlem riot. Polier was the daughter of a founding member of the National Association for the Advancement of Colored People and became frustrated with the lack of psychiatric resources available to black children through the courts. At a time when psychiatric professionals viewed incest and sexual violence as normative facets of black family life, municipal courts were apt to assign juvenile rape victims to adult detention centres rather than psychiatric care facilities or foster homes. Polier was resolute in her belief that black children were vulnerable to emotional trauma and could benefit from psychiatric therapy. She framed delinquency as a public health crisis and spearheaded efforts to incorporate mental health evaluations and treatment programmes into the court's deliberative process. Polier recruited local educators and psychiatric professionals, such as Max Winsor and Viola Bernard, to develop programmes that would take the psychological complexities and emotional needs of black children into account. In 1940, this group formed a special Harlem unit of the Bureau of Child Guidance. They collected data on students at risk for delinquency in public institutions and implemented meaningful reforms in the Wiltwyck School for Boys, a prominent juvenile facility in New York. Crusaders also joined forces with local agents of the black freedom struggle, collaborating with the City-Wide Citizen's Committee for Harlem during the Second World War to contest discrimination in New York's children's services. Their efforts exposed disturbing levels of dysfunction and neglect, compelling a municipal ban on practices of racial exclusion and putting an end to venerable forms

of torture being used to discipline black children in these programmes. In 1965, their ongoing collaborations led to the creation of a psychiatric ward in Harlem Hospital and an innovative paraprofessional programme that created a pipeline for black mental health practitioners.

Their efforts successfully reduced racial disparities in psychiatric care. But these well-meaning crusaders could not avoid colour-blind liberalism's intrinsic pitfalls. In the courts, their humanitarian efforts garnered resentment from defendants who viewed their interventions as punitive forms of domination. In their psychiatric evaluations, mental health professionals relied heavily on therapeutic standards derived from research conducted on the white middle class. As a result, their evaluations often failed to account for the greater diversity of human psychology present in Harlem and they inadvertently re-encoded derogatory racial stereotypes onto members of Harlem's poor and working classes. Under the guise of class and gender differences, they labelled many of Harlem's women, families and children as 'broken', 'damaged' or 'pathological'. In one programme, developed at Harlem Hospital to treat postpartum psychosis, crusaders appeared to sanction a uniquely troubling form of discrimination. Intended to give impoverished women better control over their reproductive capabilities, this programme provided access to voluntary sterilisations. Although administered by Elizabeth Davis, a black psychiatrist who had long been committed to serving Harlem's mental health needs, it raised the ire of the community's radical activists, many of whom felt it suborned genocide. In these and other humanitarian endeavours, crusaders regularly failed to recognise the complicity of their work in long-standing traditions of discrimination.

Psychiatry and Racial Liberalism in Harlem is copiously researched, is nuanced in its historical analysis and offers a well-crafted narrative. Its somewhat pragmatic title may suggest the editorial team underestimated its greater significance. But Doyle's text is an essential contribution to a growing field of research on African Americans, race and the history of medicine. It is critical reading for anyone interested in the historic relationship between psychiatry, mental health disparities, mass incarceration and twentieth-century civil rights activism. It intersects well with the established works of Khalil Muhammad, Jonathan Metzler and Martha Biondi and is a seminal contribution to the emerging sub-field of historical research on black health in Harlem. Doyle's work complements studies by Tanya Hart and Jamie Wilson and is intimately tied with Gabriel Mendes' rich work on the Lafargue Clinic. Doyle also provides a timely contribution to the contemptuous discourse on healthcare reform in the United States, reminding us of the essential link between health and citizenship and the enduring impact of race on the understanding of what it means to be human.

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Holly Folk, *The Religion of Chiropractic: Populist Healing from the American Heartland* (Chapel Hill: University of North Carolina Press, 2017), pp. 351, \$34.95, paperback, ISBN: 978-1-4696-3279-7.

Some time ago a chiropractor-anthropologist who presently works as a chiropractor told me that when growing up with her father, a chiropractor, in her Seventh-day Adventist household, the main topics of conversation around the dinner table were religion and