

theory. Neither does Camic work to link Veblen's concepts of legal predation to what is probably their closest modern analogue, the doctrine of shareholder primacy. These tasks are left to the reader. Nonetheless, in these chaotic economic times it is not difficult to conjecture why Camic has chosen to write this particular biography. In providing a detailed history of Veblen's education, readers are now better positioned to understand the full breadth of this brilliant thinker who continues to inspire political economists today.

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Wendy A. Bach, *Prosecuting Poverty, Criminalizing Care* (Cambridge University Press, 2022), 300 pages.

“Lock 'em up, clean 'em up, and start over” (145). This is how a drug treatment coordinator in a court in East Tennessee sums up her approach to provisioning substance use services to poor Tennesseans. If someone needs treatment, the most expeditious route—often, the only route—is through the criminal legal system. First, the court administrator casts about for a criminal charge, hopefully a “little charge,” that the person can be arrested on. Then, once they are arrested, they can be brought to jail where they can detox, with no medical supervision and no medication to ease the detox. And finally, hopefully, the person can plead guilty and the coordinator can secure a bed in a treatment facility. If this process does not take the first time, they “start over.”

This treatment coordinator pithily captures the criminalization of care for poor people in the United States that lies at the center of Wendy Bach's remarkable book, *Prosecuting Poverty, Criminalizing Care*. In her book, Bach describes the effects of a short-lived Tennessee law that made it a crime for a woman to take illegal narcotics while pregnant if her child was harmed as a result. Bach examines court records, interviews system actors (including the care coordinator and remarkably open judges and lawyers), and explores the history of the opiate epidemic and of the courts designed to address it (among many other social problems). In the process, she demonstrates that criminalized care is reserved for poor people, while wealthy people can access care outside systems of punishment; that the idea of care is often illusory and closely linked to systems of punishment, if available at all; and that the linking of care and punishment corrupts the quality of care itself.

Bach's discussion of the role of courts in this scheme is particularly illuminating. As Bach discovers, despite the law's purported premise as a mechanism to provide care to poor women, most women prosecuted under the statute were never offered care (109). Instead, most women found themselves in low-level state courts, facing the same harsh penalties that people typically face for misdemeanor prosecutions: “bail, jail, probations, fines, fees, and sometimes more jail” (7). Just as noteworthy, they faced—and accepted—these penalties even when the charges against them were not legally sustainable (104). Bach shows us that the role of the courts here was not to provision care, nor was it to adjudicate cases or find out “what really happened” before meting out punishment—as we might instinctively

expect for a criminal court in an adversarial system. Instead, the court's goal is to manage poor people: to assess their ability to make countless court dates and pay ever-growing fees and fines, and to levy increasingly harsh punishments on those who cannot jump through these hoops (103). In the Kafkaesque landscape Bach describes, we hear echoes of Issa Kohler-Hausman's *Misdemeanorland*, where Kohler-Hausman described how lower-level criminal courts operate as a form of social control and surveillance, even when defendants have a clear legal defense.

A minority of the cases in Bach's account ended up in a drug treatment court—a so-called problem-solving court—where women were at least offered treatment. But here too, courts seem more interested in manageability than in meaningful treatment. Bach describes the drug court's model of “judicial probation”: women pled guilty up front and agreed to a sentence they would serve if they did not complete treatment, then were required to return to court once or twice a week and pay court fees running up to the thousands of dollars (159-60). For their failures, they faced expulsion from their treatment programs and incarceration; indeed, they risked harsher punishment by agreeing to go to drug court, an intentional design choice (161). This model of drug court fits with the broader schema of social problem-solving courts. Under the guise of “helping” litigants, courts force them to waive their rights, accept massive amounts of surveillance, and open up all areas of their lives to government scrutiny. This model is not limited to criminal courts: the problem-solving model is even more prevalent for family regulation (child welfare) cases, which many of the women Bach discusses also confronted. As I have written elsewhere, the problem-solving model in the family regulation system unites each branch of government in a project of surveillance that enforces a heavy expectation of compliance or cooperation on parents. When parents fail to “comply,” they risk their very relationships with their children. Rather than reducing any power imbalance between poor litigants and the government, the problem-solving model exacerbates it in both the criminal and family regulation systems—and does so while providing very little meaningful care (162). No matter the model of the court in question, it is motivated by the same carceral impulses.

Bach's case study can help us understand the fatal flaws of what David Garland has called “responsibilization” as a model of justice and as a model of care. The strategy of responsibilization punishes individuals for their “problems,” while failing to hold governments accountable for their role in creating the conditions that led to those problems. Poor women in Tennessee were unable to access care before the point of a crisis—their drug use during pregnancy—and then they were punished for their failure to access that care. Once they received care, it could hardly be conceived of as voluntary, and it was under the watchful eyes of government agents and mandated reporters—hardly a model for trust-based engagement (167). Yet, the women's inability to access any care in the first instance, and their struggles to benefit from the limited care eventually available to them, are cast as personal failings, rather than failings of society to offer poor people access to care through non-punitive systems and in a manner that does not require an admission of wrongdoing.

The law at the center of Bach's account may no longer be on the books, but its same logic can be seen throughout the criminal legal system—and the other systems of regulation and control that shape the lives of poor people in Tennessee and throughout the United States. As Bach concludes, ensuring that poor people have access to meaningful care absent the threat of individual punishment requires far more than the abandonment of a single ill-advised law. Rather, it requires a wholesale shifting of responsibility from individuals back to the government. We must hold the government itself to a

standard of care at a societal level, demanding that it support all families and provide all individuals access to care outside any system of control, criminalization, or punishment.

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