

# Imprimis

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## The Worldview that Makes the Underclass

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Writer and Doctor

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*But a Whimper: The Politics & Culture of Decline*, *The New Vichy Syndrome: Why European Intellectuals Surrender to Barbarism*, and *Life at the Bottom: The Worldview that Makes the Underclass*.

*The following is adapted from a speech delivered on May 20, 2014, at a Hillsdale College National Leadership Seminar in Dearborn, Michigan.*

**I worked** for 15 years as a doctor and psychiatrist in a general hospital in a poor area of a British city and in the prison next door, where I was on duty one night in three. The really dangerous people were in the hospital, perhaps because of the presence in the prison next door of very large uniformed men who exerted a strangely calming effect on the prisoners. In the hospital, I personally examined many thousands of patients who had attempted suicide or at least made a suicidal gesture (not quite the same thing of course). They were overwhelmingly from poor homes, and each patient told me of the lives of the three, four, or five people closest to them—and I spoke to many of those people as well. I could not, of course, have spoken to so many people, and heard about so many others, without some general impressions forming themselves in my mind. One abiding impression was of the violence of their lives, particularly that between the sexes—largely the consequence of the fluidity of relations between the sexes—and also of the devastating effect of prevalent criminality upon the quality of daily existence.

Before I did this work, I had spent a number of years working as a doctor in Africa and in other places in the Third World. I also crossed Africa by public transport, such as it was, and consequently saw much of that continent from the bottom up. These experiences also helped me in my understanding of what I was later to see in England. As Dr. Johnson put it, all judgment is comparative; or as Kipling said, “What should they know of England who only England know?” Indeed, what should anyone know of anywhere, who only that place knows?

On my return to England, I used to visit the homes of poor people as part of my medical duties. Bear in mind that I had returned from some of the poorest countries in the world, where—in one case—a single hen’s egg represented luxury and the people wore the cast-off clothes of Europe that had been donated by charity. When I returned to England, I was naturally inclined to think of poverty in absolute rather than in relative terms—as people not having enough to eat, having to fetch water from three miles away, and so forth. But I soon ceased to think of it in that fashion.

In the course of my duties, I would often go to patients’ homes. Everyone lived in households with a shifting cast of members, rather than in families. If there was an adult male resident, he was generally a bird of passage with a residence of his own somewhere else. He came and went as his fancy took him. To ask a child who his father was had become an almost indelicate question. Sometimes the child would reply, “Do you mean my father at

the moment?” Others would simply shake their heads, being unwilling to talk about the monster who had begot them and whom they wished at all costs to forget.

I should mention a rather startling fact: By the time they are 15 or 16, twice as many children in Britain have a television as have a biological father living at home. The child may be father to the man, but the television is father to the child. Few homes were without televisions with screens as large as a cinema—sometimes more than one—and they were never turned off, so that I often felt I was examining someone in a cinema rather than in a house. But what was curious was that these homes often had no means of cooking a meal, or any evidence of a meal ever having been cooked beyond the use of a microwave, and no place at which a meal could have been eaten in a family fashion. The pattern of eating in such households was a kind of foraging in the refrigerator, as and when the mood took, with the food to be consumed sitting in front of one of

the giant television screens. Not surprisingly, the members of such households were often enormously fat.

Surveys have shown that a fifth of British children do not eat a meal more than once a week with another member of their household, and many homes do not have a dining table. Needless to say, this pattern is concentrated in the lower reaches of society, where so elementary but fundamental a means of socialization is now unknown. Here I should mention in passing that in my hospital, the illegitimacy rate of the children born in it, except for those of Indian-subcontinental descent,

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[Latin]: in the first place

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was approaching 100 percent.

It was in the prison that I first realized I should listen carefully, not only to what people said, but to the way that they said it. I noticed, for example, that murderers who had stabbed someone always said of the fatal moment that “the knife went in.” This was an interesting locution, because it implied that it was the knife that guided the hand rather than the hand that guided the knife. It is clear that this locution serves to absolve the culprit, at least in his own mind, from his responsibility for his act. It also seeks to persuade the listener that the culprit is not really guilty, that something other than his decisions led to the death of the victim. This was so even if the victim was a man against whom the perpetrator was known to have a serious grudge, and whom he sought out at the other side of the city having carried a knife with him.

The human mind is a subtle instrument, and something more than straightforward lying was going on here. The culprit both believed what he was saying and knew perfectly well at the same time that it was nonsense. No doubt this kind of bad faith is not unique to the type of people I encountered in the hospital and the prison. In Shakespeare’s *King Lear*, Edmund, the evil son of the Earl of Gloucester, says:

This is the excellent foppery of the world: that when we are sick in fortune—often the surfeit of our own behaviour—we make guilty of our disasters the sun, the moon, and the stars, as if we were villains on necessity; fools by heavenly compulsion; knaves, thieves, and treachers, by spherical predominance; drunkards, liars, and adulterers, by an enforced obedience of planetary influence; and all that we are evil in, by a divine thrusting on. An admirable evasion of whoremaster man, to lay his goatish disposition to the charge of a star!

In other words, it wasn’t me.

This passage points, I think, to an eternal and universal temptation of mankind to blame those of his misfortunes that are the natural and predictable consequence of his own choices on forces or circumstances that are external to him and outside his control. Is there any one of us who has never resorted to excuses about his circumstances when he has done wrong or made a bad decision? It is a universal human tendency. But in Britain, at any rate, an entire class of persons has been created that not only indulges in this tendency, but makes it their entire world outlook—and does so with official encouragement.

Let me take as an example the case of heroin addicts. In the 1950s, heroin addiction in Britain was confined to a very small number of people, principally in bohemian circles. It has since become a mass phenomenon, the numbers of addicts having increased perhaps two thousandfold, to something like 250,000 to 300,000. And with the statistically insignificant exception of members of the popular culture elite, heroin addiction is heavily concentrated in areas of the country such as the one in which I worked.

Heroin addiction has been presented by officialdom as a bona fide disease that strikes people like, shall we say, rheumatoid arthritis. In the United States, the National Institute on Drug Abuse defines addiction quite baldly as a chronic relapsing brain disease—and *nothing else*. I hesitate to say it, but this seems to me straightforwardly a lie, told to willing dupes in order to raise funds from the federal government.

Be that as it may, the impression has been assiduously created and peddled among the addicts that they are the helpless victims of something that is beyond their own control, which means that they need the technical assistance of what amounts to a substantial bureaucratic apparatus in order to overcome it. When heroin addicts just sentenced to imprisonment arrived, they said to me, “I would give up, doctor, if only I had the help.” What they meant by this was that they would give up heroin if some cure existed

## Hillsdale Journalism Alumni

Katherine Timpf, '10

### Columbia University to spend \$5.7 million in taxpayer funds on climate change games

*The following article by Hillsdale College alumna Katherine Timpf was published on May 26, 2014, at [campusreform.org](http://campusreform.org), a project of the Leadership Institute, where she works as a reporter. Reprinted by permission.*

Columbia University has received millions in taxpayer funds to create games depicting horrible scenarios that could come about as a result of climate change, including a series of mock voicemails of people screaming, gasping for air and being swept away by waves.

“If the tsunami doesn’t get us, the heat might,” a man says in a voicemail to his mother set in 2065. “I’m just calling to say I love you and I miss you and it might be the last time you hear my voice. Bye.”

Other callers include a man screaming as he is suddenly swallowed up by a giant tsunami and a woman desperately gasping for air because she is “Out of CO<sub>2</sub> credits.”

The National Science Foundation (NSF) issued Columbia a \$5.7 million grant for its PoLAR Climate Change Education project to use games to “engage adult learners and inform public understanding and response to climate change.”

“Games and game-like approaches motivate exploration and learning of complex material,” the grant description states.

The website featuring the fake voicemails, called Future Coast, was created in response to these guidelines.

Other predictions foretold in the voicemails include that all of the glaciers in the Sierra Nevada will be gone by 2038, and that most of the coasts and beaches will “have disappeared” by 2059.

In a voicemail set in 2020, a frustrated man tells his mother he can’t afford to attend Thanksgiving dinner because a family member spent all of his money on hurricane simulation booths which are now useless because “everyone has been in a gosh darn hurricane now.”

Columbia received the grant in September of 2012, and it expires in August 2017.

Neither Future Coast nor NSF responded to requests for comment from Campus Reform in time for publication.

that could be administered to them that would by itself, without any resolution on their part, change their behavior. In this desire they appeared sincere—but at the same time they knew that such a cure did not exist, nor would most of them have agreed to take it if it did exist.

In fact, the whole basis of the supposed treatment for their supposed disease is rooted in lies and misconceptions. For example, research has shown that most addicts spend at least 18 months taking heroin intermittently before they become addicted. Nor are they ignorant while they take it intermittently of heroin’s addictive properties. In other words, they show considerable determination in becoming

addicts: It is something, for whatever reason, that they *want* to become. It is something they *do*, rather than something that happens to them. Research has shown also that heroin addicts lead very busy lives one way or another—so busy, in fact, that there is no reason why they could not make an honest living if they so wished. Indeed, this has been known for a long time, for in the 1920s and 30s in America, morphine addicts for the most part made an honest living.

Withdrawal from opiates, the fearfulness of which, reiterated in film and book, is often given as one of the main reasons for not abandoning the habit, is in fact a pretty trivial condition, certainly by

comparison with illnesses which most of us have experienced, or by comparison with withdrawal from other drugs. I have never heard an alcoholic say, for example, that he fears to give up alcohol because of *delirium tremens*—a genuinely dangerous medical condition, unlike withdrawal from heroin. Research has shown that medical treatment is not necessary for heroin addicts to abandon their habit and that many thousands do so without any medical intervention whatsoever.

In Britain at least, heroin addicts do not become criminals because they are addicted (and can raise funds to buy their drugs only by crime); those who take heroin and indulge in criminal behavior have almost always indulged in extensive criminal behavior before they were ever addicted. Criminality is a better predictor of addiction than is addiction of criminality.

In other words, all the bases upon which heroin addiction is treated as if it is something that happens to people rather than something that people *do* are false, and easily shown to be false. This is so whatever the latest neuro-scientific research may supposedly show.

I have taken the example of heroin addiction as emblematic of what, with some trepidation, I may call the dialectical relationship between the worldview of those at the bottom of society and the complementary worldview of what one might call the salvationist bureaucracy of the government. In the old Soviet Union there was a joke in which the workers would say to the party bosses, “We pretend to work and you pretend to pay us.” In the case of the heroin addicts, they might say, “We pretend to be ill, and you pretend to cure us.”

One of the possible dangers or consequences of such a charade is that it creates a state of dishonest dependency on the part of the addicts. They wait for salvation as Estragon and Vladimir wait for Godot in Samuel Beckett’s play; they wait for something that will never arrive, and that at least in some part of their mind they *know* will never arrive—but that officialdom persists in

telling them will arrive someday.

Dishonest passivity and dependence combined with harmful activity becomes a pattern of life, and not just among drug addicts. I remember going into a single mother’s house one day. The house was owned by the local council; her rent was paid, and virtually everything that she owned, or that she and her children consumed, was paid for from public funds. I noticed that her back garden, which could have been pretty had she cared for it, was like a noxious rubbish heap. Why, I asked her, do you not clear it up for your children to play in? “I’ve asked the council many times to do it,” she replied. The council owned the property; it was therefore *its* duty to clear up the rubbish that she, the tenant, had allowed to accumulate there—and this despite what she knew to be the case, that the council would never do so! Better the rubbish should remain there than that she do what she considered to be the council’s duty. At the same time she knew perfectly well that she was capable of clearing the rubbish and had ample time to do so.

This is surely a very curious but destructive state of mind, and one that some politicians have unfortunately made it their interest to promote by promising secular salvation from relative poverty by means of redistribution. Whether by design or not, the state in England has smashed up all forms of social solidarity that are independent of it. This is not an English problem alone: In France the word *solidarité*, solidarity, has come to mean high taxation for redistribution by state officials to other parts of the population, which of course are neither grateful for the subventions nor find them sufficient to meet their dreams, and which are, in fact, partly responsible for their need for them in the first place. And not surprisingly, some of the money sticks to the hands of the redistributionist bureaucracy.

By a mixture of ideology and fiscal and social policies, the family has been systematically fractured and destroyed in England, at least in the lowest part of the society that, unfortunately, needs family solidarity the most. There are

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even, according to some researchers, fiscal and welfare incentives for parents at the lower economic reaches of society not to stay together.

Certainly the notions of dependence and independence have changed. I remember a population that was terrified of falling into dependence on the state, because such dependence, apart from being unpleasant in itself, signified personal failure and humiliation. But there has been an astonishing *gestalt* switch in my lifetime. Independence has now come to mean independence of the people to whom one is related and dependence on the state. Mothers would say to me that they were pleased to be independent, by which they meant independent of the fathers of their children—usually more than one—who in general were violent swine. Of course, the mothers knew them to be violent swine before they had children by them, but the question of whether a man would be a suitable father is no longer a question because there are no fathers: At best, though often also at

worst, there are only stepfathers. The state would provide. In the new dispensation the state, as well as television, is father to the child.

A small change in locution illustrates a change in the character and conceptions of a people. When I started out as a doctor in the mid-1970s, those who received state benefits would say, "I receive my check on Friday." Now people who receive such benefits say, "I get *paid* on Friday." This is an important change. To have said that they received their check on Friday was a neutral way of putting it; to say that they get *paid* on Friday is to imply that they are receiving money in return for something. But what can that something be, since they do not appear to do anything of economic value to anyone else? It can only be existence itself: They are being paid to continue to exist, existence itself being their work.

It has been said that the lamentable state of affairs I have described has been brought about by the decline, inevitable as we now see it, of the kind of industry

that once employed millions of unskilled workers, whose wages, though low by today's standards, were nevertheless sufficient to sustain a stable, though again by today's standards not rich, society. And I do not think that this view can be altogether dismissed. But it is far from the whole story. One of the curious features of England in the recent past is that it has consistently maintained very high levels of state-subsidized idleness while importing almost equivalent numbers of foreigners to do unskilled work.

Let me here interject something about the intellectual and moral corruption wrought by the state in recent years—and I don't know whether it applies to America. The governments of Britain, of both political parties, managed to lessen the official rate of unemployment by the simple expedient of shifting people from the ranks of the unemployed to the ranks of the sick. This happened on such a huge scale that, by 2006—a year of economic boom, remember—the British welfare state had achieved the remarkable feat of producing more invalids than the First World War. But it is known that the majority of those invalids had no real disease. This feat, then, could have been achieved only by the willing corruption of the unemployed themselves—relieved from the necessity to seek work and relieved to have a slightly higher subvention—but also of the doctors who provided them with official certificates that they knew to be bogus. And the government was only too happy, for propaganda purposes, to connive at such large-scale fraud. One begins to see what Confucius meant when he said, 2,500 years ago, that the first thing to do to restore a state to health was to rectify the names—in other words, to call things by their right names rather than by euphemisms.

There are three reasons that I can think of why we imported foreign labor to do unskilled work while maintaining large

numbers of unemployed people. The first is that we had destroyed all economic incentive for the latter to work. The second is that the foreigners were better in any case, because their character had not been rotted; they were often better educated—it is difficult to plumb the shallows of the British state educational system for children of the poorest homes—and had a much better work ethic. And the third was the rigidity of the housing market that made it so difficult for people to move around once they had been granted the local privilege of subsidized housing.

I will leave you with an anecdote. As Mao Tse-tung might have put it, one anecdote is worth a thousand abstractions.

I had been asked by the courts to examine a young woman, aged 18, who was accused of having attacked and injured her 90-year-old great-grandmother, with whom she lived, while under the influence of alcohol and cannabis. She had broken her great-grandmother's femur, but fortunately it did not prove fatal. (Incidentally, the homicide rate, it is said, would be five times higher than it is if we used the same medical techniques as were used in 1960.) I asked the young woman in the course of my examination whether her mother had ever been in trouble with the police.

"Yes," she replied.

"What for?" I asked.

"Well, she was on the social," she said—"on the social" in English argot means receiving welfare payments—"and she was working."

"What happened?" I asked.

"She had to stop working."

She said this as if it was so obvious that my question must be that of a mental defective. Work is for pocket money, the public dole is the means by which one lives.

That, ladies and gentlemen, is the view from the bottom, at least in Britain: but it is a view that has been inculcated and promoted from the top. ■



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