

*Madness and Civilization: A History of Insanity in the Age of Reason*¹

Stultifera Navis [Ship of Fools]

From the High Middle Ages to the end of the Crusades, leprosariums had multiplied in number in Europe, possibly numbering as high as 19,000. The disappearance is not the result of medicine, but rather what Foucault calls the “spontaneous result of segregation and...consequence of the break with the Eastern sources of infection” (6). But a stigma persisted along with the values and images attached to the figure of the leper. As a result, leprosy disappeared due to *exclusion*. The stigma was re-interpreted by Christians at the time in such a way that leprosy was seen as both sign of the anger and grace of God. While the infected may be damned, the clean were to be merciful that they too were not infected. According to the example, “My friend (directed to the leper from the ritual of the Church of Vienne), it pleaseth Our Lord that thou shouldst be infected with this malady, and thou has great grace at the hands of Our Lord that he desireth to punish thee for thy iniquities in this world” (6). And when the leper is withdrawn from the church (presumably, *with force*), the priest continues “...howsoever thou mayest be apart from the Church and the company of the Sound, yet art thou not from the grace of God” (6). But nonetheless, abandonment is *salvation*. While the leper may have disappeared, the former institutions remained along with the formula of exclusion, but the subject now would become “poor vagabonds, criminals, and “deranged minds”.

These individuals would become passengers of the “ship of fools”, which is described as a strange drunken boat. The passengers of the this ship faced a discomfoting reality: they (now the excluded) would be taken away and left to wander, albeit aimlessly, without care or concern from anyone. The only concern being their exclusion became permanent. Foucault admits that he does not understand this custom. “One might suppose it was a general means of extradition by which municipalities send wandering madmen out of their own jurisdiction” (9). Previously, “certain madmen, even before special houses were built for them, were admitted to hospital and cared for” (9). Even the most insane, were detained and cared for and not invariably expelled. But, perhaps water purifies, yet therein lies a significant paradox: for the “sane man, water offers the freest route of travel, but conversely, the “insane” is bound with great uncertainty journeying the free crossroads.

During the period, madness became classified among the hierarchy of vices. But, madness and folly (used interchangeably) would become the most significant of all human weakness. While leprosy was the figment of the past, folly had become the next focus for exclusion, but not necessarily enclosure anymore. In the

¹ Foucault, Michel. 1965. *Madness and Civilization: A History of Insanity in the Age of Reason*. New York: Vintage Books.

thirteenth century, madness/folly is seen as this dangerous and uncertain quality. During the renaissance, this previous fear is replaced by a more passionate interpretation. Instead of being a damned disease, such as leprosy, folly is seen as inherent to human nature. As Foucault quotes from Erasmus, "There is no madness but that which is in every man, since it is man who constitutes madness in the attachment he bears for himself and by the illusions he entertains" (26). Mental illness is now seen as a flaw and fault, but not the fault of the individual, but perhaps just "bad luck".

"But a new enterprise was being undertaken that would abolish the tragic experience of madness in a critical consciousness" [by examining figures found in *Don Quixote* and *King Lear*:

1. Madness by Romantic Identification -- the confused communication between fantastic invention and fascinations of delirium.
2. Madness of Vain Presumption -- the imaginary relation one maintains with himself
3. Madness of Just Punishment -- delirium is proof of someone's guilt. (Note that Foucault uses the example of Lady Macbeth, but perhaps Oedipus the King is a better example. For example, Oedipus' self punishment is much more severe than any punishment that could be received from another human.)
4. Madness of Desperate Passion -- as long as an object of focus, mad love is more than madness; left to itself, it pursues itself in the void of delirium. That is to say, with no love, madness brings madness.

"The classical experience of madness is born. The great threat that dawned on the horizon of the fifteenth century subsides...forms remain, now transparent and docile" (35). Accordingly, madness has ceased to be —at the limits of the world, of man and death—and eschatological figure" (35). Darkness has disappeared and madness, will not be feared to the same extent as leprosy. Instead of the ship of fools, the institution of hospital will develop in its place. And there is no more tragic threat.

The Great Confinement

If the renaissance age liberated madness, the classical age silenced it through confinement. Instead of solely focusing on folly, the new focus of confinement would be the vagabonds: the poor, the unemployed, prisoners, and of course, the insane. Foucault, with great explication, describes the 1656 decree that created the Hôpital Général in Paris, which doubtless was a unique institution. The Hôpital was meant to accept, lodge, and feed those who presented themselves or those sent by royal or judicial authority. The care of the Hôpital was left to a group of directors, who had authority and exercise power over not only the compound, but *throughout the city of Paris over all those who came under their jurisdiction*. "They have all power of authority, of direction, or administration, of commerce, of police, of jurisdiction, of correction and punishment over all the poor of Paris, both within and

without the Hôpital Général” (40). However, from the very start, the Hôpital is not a medical institution, but rather a semi-judicial structure that encompassed the already existing constituted power of government. At their disposal, the directors had a combination of stakes, irons, prisons, and dungeons along with the unquestioned authority— without any concern (*ever*) of appeal or due process from anyone— to exercise at their total discretion punishment. Foucault calls this, “A quasi-absolute sovereignty, jurisdiction without appeal, a writ of execution against which nothing can prevail—the Hôpital Général is a strange power that the King establishes between the police and the courts, at the limits of the law: a third order of repression” (40). The origin of this project was for a “Grand Bureau” to oversee the project, which was a combination of high-ranking government officials.² But this bureau had no more than a deliberative role. “The actual administration and the real responsibilities were entrusted to agent recruited by co-optation” (41). This group made of the “best families of the bourgeoisie...they brought to their administration disinterested views and pure intentions” (41). This creation became a model and was further spread through France by edict from the King and even became so popular that the Catholic Church followed suit in its reforming its own hospital institutions to mirror. This institution spread to Germany and England and further to other parts of Europe. Before some degree of government sanction or permit was required, but year later the individuals (Foucault calls it “private enterprise”) were allowed to open hospital or house of correction. What became reality, was that significant numbers became confined almost overnight and excluded even more from society than the leper. A pair of royal edicts from 1532 & 1534, required for beggars to be chained in pairs and were made to work in the sewers of the city and later required poor scholars and indigents to leave the city. Another set of edicts, called for beggars to be whipped publicly, branded, shorn, then driven from the city. A 1607 edict established archers to protect city gates from entry by indigents. But with the Hôpital Général, came the first “measure of confinement: the unemployed person was no longer driven away or punished; he was taken in charge, at the expense of the nation but at the cost of individual liberty” (48). The prisoner had the right to be fed, but in turn must accept (forcibly) the physical and moral constraint of confinement.

Foucault describes a “cycle” regarding a correlation between the number of those confined and the severity of economic crisis. During significant economic downturn (Foucault mentions the crisis of the Spanish economy), when the number of poor (that’s the unemployed, the idle, the vagabonds) increases, so does the population confined. Effectively, during crisis confinement exists as mechanism to keep order. Outside the period of crisis, the idea of “giving work to those who had been confined and thus making them contribute to the prosperity of all” (51).

² The “Grand Bureau” consisted of the President of the Parlement, Procurator General, Archbishop of Paris, President of the Court of Assistance, President of the Court of the Exchequer, Chief of Police, and Provost of the Merchants. (41).

Arguably, this also serves as a mechanism to maintain order: (1) During periods of strong economic condition, an abundance of employment creates cheap labor and conversely, during hardship (2) “reabsorption of the idle” prevents labor uprisings. What becomes prevalent is the shift in purpose of the Hôpital’s intent, if initially it was intended to suppress and detain beggary, vagabondage, and folly, its role later evolved into not only controlling the aforementioned, but further controlling unemployment and idleness by pairing an internee with occupation. The whole purpose of the institution is the thwarting and elimination the idea of *idleness*, especially since it was graded as the “mother of all evils”. Perhaps the lesson to be learned, was “honest toil leads to earning sustenance” (53).

“The classical age used confinement in the manner of a double role: to reabsorb unemployment, or at least eliminate its most visible social effects, and to control costs when they seemed likely to become too high; to act alternately on the manpower market and on the cost of production” (54). It was not a law of nature, which forced man to work, but the effect *forced labor*. The idea of idleness and sloth leads to the creation of forced labor. As a result, the traditional understanding madness changes from the deranged passenger on the ship of fools whose destination is unknown, to the forced laborer, whose fate is maximum utility. Also, the poor are no longer the victim of scarcity of commodities or unemployment, but “the weakening of discipline and the relaxation of morals” (59). At the very heart of all of this undesirability is the Hôpital and its directorate, that has the absolute and unquestioned authority to correct and punish, to reform without any question or redress.

The Insane

The confinement movement brought an entire population under the jurisdiction of the Hôpital, specifically one tenth of all arrests in Paris concern “the insane, demented men, individuals of wandering mind, and persons who have become completely mad” (65). Initially, confinement serves as a mechanism to avoid scandal. In the Renaissance period, madness and unreason were present everywhere and allowed to exist freely. Conversely, in the classical period, madness was seen as an “animalistic” spectacle (most often through bars or apparatus), which Foucault credits to have originated in the Middle Ages. Madness has become something to look at, to gaze upon, such as the long suppressed animal nature of humans (that is the *savage beast*).

Two examples are given to develop the idea of the spectacle. First, at the Hospital of Bethlehem (the English equivalent of the Hôpital Général) a show of lunatics, costing one penny to attend, was conducted each Sunday. The annual review of these exhibitions indicates earning of “almost four hundred pounds; which suggests the astonishingly high number of 96,000 visits a year” (68). Second, at Bicêtre, madmen were shown like curious animals to anyone willing to pay a coin to observe, sort of like a circus show. The objective has now become to confine unreason, but to display madness. According to Foucault, “a strange contradiction

[developed]: the classical age enveloped madness in a total experience of unreason; it reabsorbed its particular forms, which the Middle Ages and the Renaissance had clearly individualized into a general apprehension in which madness consorted indiscriminately with all the forms of unreason” (70).

Further developing the view of the spectacle, Foucault offers a group of shocking examples of those confined and deemed as most dangerous:

1. The unfortunate housed at Bicêtre, who slept entirely upon straw; never able to enjoy sleep.
2. Those housed at La Salpêtrière, who fought rats during the winter time when water from the Seine rose.
3. At Bethnal Green, a woman was placed in a pigsty with feet and fists bound, covered only by a blanket.
4. The complicated system at Bethlehem that allowed a madman to be lead around on a leash with rings around his neck. He lived this way for 12 years.
5. The individuals who lived in cages raised about 15 centimeters from the ground, inside of which they ate and defecated.

The mad are no longer treated as human beings, but rather have undergone an animal metamorphosis into wild beasts and must be treated accordingly. Continuing with the examples, Foucault describes the “ability of the insane to endure, like animals, the worst inclemencies”, such as the women living in 18 degree temperature totally naked and without cover and the madman who in 16 degrees below freezing tolerated no blanket and would bathe in ice and snow with “delectation” (75). Another example describes a farmer’s method of requiring the mad to perform exhaustive labor and then beating them unless absolute obedience was received.

Nonetheless, the initial idea of avoid scandal has drastically morphed into a great brutality, by which man has sought to tame the animalistic tendencies of itself. These strange practices are meant to create discipline, reduce animality, while teaching the lesson of Redemption. “Christ did not merely choose to be surrounded by lunatics; he himself chose to pass in their eyes for a madman, this experiencing, in his incarnation, all the sufferings of human misfortune” (80). That is to reason that while madness may be the ultimate low-point for man, but if God experienced it and survived, then so too can the human and nothing is so desolate that it cannot be redeemed and saved. As a result, the incarnation of beast inside of man, is best tamed by God’s example of divine mercy and universal forgiveness (or at least that’s the reasoning of the church).

Passion and Delirium

In complex fashion, Foucault develops the relationship between madness and delirium. He often uses the word “melancholia”, which I interpret to mean depression. “Before Descartes, passion continued to be the meeting ground of body and soul” (86). That is a saying that passions cause certain *movements* (convulsions, movement of the body uncontrollably) that render the body completely useless, creating the image of that person being *mad*. As a result, passions cause madness. “The moralists of the Greco-Latin tradition had found [the link between passion and delirium] it just that madness be passion’s chastisement; and it to be more certain that this was the case, they chose to define madness as a temporary and attenuated madness” (89). Instead of being linked closely, madness is just a consequence of passion; and there is no complex unity of body and soul. Perhaps, madness is provoked by intense emotion that can result in the body being out of control (ie: when one becomes angry, speech is slugged, the brain is slow to respond, and the animalistic tendency of fight or flight is evoked).

Regardless of the presumed cause of madness or the correlation between passion and delirium; the inability to control passions results in madness. “The distraction of our mind is the result of our blind surrender to our desires, our incapacity to control or to moderate our passions” (85). Doubtless, madness is the worst of all maladies. Improperly managing passions can result in troublesome experiences such as: the person who overeats (to the point of vomiting) or conversely the one who starves, the drunkard who chases another drink, the person who cannot be away from their mobile phone for more than 10 seconds. These *passions* are the cause of madness.

The biggest enemy, perhaps, in the control of passion is the mind. During periods of wakefulness, the differences between the sane and the insane are quite clear. The insane were bound of delirious speech, convulsions; all linked to the movement of the body. That is to say, the sane do not behave like the insane and vice versa. This separation becomes blurred in sleep. “In the first movements when one falls asleep, the vapors which rise in the body and ascend to the head are many, turbulent, and dense” (102). This darkness does not stimulate the brain, but only movements. Arguably, this can be seen as the initial restlessness that result when one first attempts sleep. However, when these vapors calm and agitation disappears, “the sleeper begins to see things still more clearly; in the transparency of the henceforth limpid vapors (breathing), recollections of the day before reappear in accordance with reality; such images are the most transposed...”(102). There are commonalities, regardless of madness: the madman and the sane man both, Foucault argues, have the same initial sleep experience, they are both slightly uneasy, their bodies are trying to adjust, and eventually when they do, sleep is possible. The mechanisms are the same, the movement of the body and breathing is the same, but the difference is the truth of dreams. Rightfully so, during the occurrence of dreaming, anything is possible: the fat can be thin, the man can have the woman he wants, the scorned can be popular, the troubled can be at rest, the mad can be sane. Foucault makes two strong arguments are the concept of dream:

(1) Dreams emerge no differently from the sane and the insane and (2) the notion of the waking state is the only differentiation between the madman and sleepers. That is to say, there is no insanity in the dream.

Aspects of Madness

Foucault does not wish to write a history of illness, but rather “show the specific faces by which madness was recognized in classical thought” (117). The concentration therein is: (1) Mania and Melancholia and (2) Hysteria and Hypochondria.

I. Mania and Melancholia

Melancholia is a “madness without fever or frenzy, accompanied by fear and sadness” (121). Melancholia is the result of a causal system, best explained by humorism.

Melancholia causes an individual to think of themselves as beasts (hearing voices and acting upon them), fearing death as the result of fragility, excessive guilt causing them to tremble when they see someone else (paranoia). Although the afflictions exist within a person, they are most often prudent and sensible. The movement of qualities (biles) within the body resulted in a causality; movement of these qualities immediately affected the body and the soul, blending caused certain flaws (cold/dry causes melancholia), certain flaws are the result of reversals and contradictions, or simply by accident.

In the eighteenth century, the idea of melancholia is opposed with mania. Foucault cites Willis, “the mind of the melancholic is entirely occupied with reflection, so that his imagination remained at leisure and in repose; the maniac’s imagination...is occupied by a perpetual flux of impetuous thoughts” (125). The maniac is consumed by audacity and fury and truth in thought is impossible to develop. Regardless of the movement of mania through a person, animalistic spirits are quite particular. While the melancholic may avoid stimuli (ie: contact with others), the maniac vibrates to any and all stimuli. Arguably, the problem with mania is the notion that to the maniac, objects in the present do not appear to the sufferer as they do in reality. Foucault argues this is the cause for the mad to “fear neither heat nor cold, tear off their clothes, sleep naked in the dead of winter without feeling the cold” (127).

I. Hysteria and Hypochondria

Immediately, Foucault finds two problems with hysteria and hypochondria:

(1) To what degree is it legitimate to treat them as mental diseases, or at least forms of madness? and (2) Are we entitled to treat them together, as if they constituted a virtual couple, similar to that formed quite early by mania and melancholia?" (136). Hysteria and hypochondria were not initially linked, but were rather misunderstood, specifically because they were misunderstood. In hysteria, the individual perceives that overheated spirits are subject to reciprocal pressure and creates the impression that they are exploding provoking irregular and movements creating the illusion of hysterical convulsions. In the other, the spirit becomes irritated because of a matter that is hostile and inappropriate to them; they then provoke disturbances and irritation in the sensitive fibers.

First, these afflictions were seems to be symptoms of the same illness. It was not until the end of the eighteenth century that these afflictions were acknowledged to be a mental disease. For quite some time, there was no place in the quality of humorism for hysteria or hypochondria. If a physician was unable to properly diagnose a person (especially a female), the generalized notion of hysteria was given, mostly resulting from a poor diagnosis. For example, Foucault cites Lange, "hysteria is a product of fermentation, quite precisely of the fermentation "of salts, sent into different parts of the body," within the humors that are located there" (142). Another example credits hysteria to the presence of acid reaction or acid rawness in the stomach, which in turn, corrupts blood. From discourse, the two afflicts continue to seek a place, until the liberation of hysteria from the unknown by Charles de Pois and Willis. Pois argued, that hysteria came from the base of the skull following an accumulation of fluids: "Just as a river results from the confluence of a quantity of smaller vessels which join to form it, so the sinuses that are on the surface of the brain terminate in the posterior part of the head amass the liquid because of the head's inclined position" (144). Willis continues, about hysteria, "It is especially from affections of the brain and nervous system 'that all the derangements and irregularities which obtain in the movement of the blood during the illness drive" (144). Still, at this point, the brain was not concretely acknowledged as the source of hysteria, but at least there was a new possible explanation instead of the previous "womb shifting". The explanations for womb shifting are quite *curious*. For example, one explanation draws parallel between hysteria and hypochondria resulting from menstrual flow and hemorrhoids. Another explanation credits both to irregularities in the stomach, intestines, blood; all causing stagnation in the humors. The acknowledgement of hysteria and hypochondria, to Foucault, marks an important change in the interpretation. As a result, identification with the brain gives madness a new content of guilt, moral sanction, and just punishment "which was not at all part of the classical experience" (158).

Doctors and Patients

"The therapeutics of madness did not function in the hospital, whose chief concern was to sever or to correct" (159). But in the non-hospital domain, treatment

continued, not focusing on correcting the soul, but rather correcting the entire individual, “his nervous fibers as well as the course of his imagination” (159). The madman’s disease and visible through the body and several methods of resolution were created:

1. Consolidation: Find the weakness in the body and treat it. The treatments included the use of odors, pleasant and foul, walks in pleasant places, and even music. The objective was to return the body to its natural situation.

2. Purification: Find what is tainted within the body and purify it. The treatments included blood transfusions, specifically drawing blood from a calf’s femoral artery and injecting into someone with amorous melancholia. Also, there was an attack on fermentation, which was treated with the use and consumption of soap. In an odd example, mad men were plunged into vinegar and further had hands and feet soaked in vinegar for longer periods of time.

3. Immersion: Purify the body and create a “second birth” or “re-birth”. The treatment of immersion had developed during the Middle Ages, specifically plunging a maniac into water several times, “until he had lost his strength and forgotten his fury” (167). This practice was continued by Van Helmont “who began to plunge the insane indiscriminately into the sea or into fresh water” without concern for life (168). The single objective being to shock the individual back to reality. This practice continued in asylums (Foucault lists Charenton), where the insane man was fastened to an armchair, placed beneath a reservoir of cold water that poured directly on his forehead. The other tactic from the asylum, called a surprise bath, “the sufferer came down the corridors to the ground floor, and arrived in a square vaulted room, in which a pool had been constructed; he was pushed over backwards and into the water” (172). Such violent techniques assured the “re-birth of a baptism”.

4. Regulation of movement: Restoring to the mind and spirit, the mobility that is essential to life. Treatment included walking and running (taken from the ancients), horseback riding, dancing, and sea voyages. All of these are meant to expose the body to pleasant vapors.

Next, Foucault focuses on the treatment of psychological diseases:

1. Awakening: “Since delirium is the dream of waking person, those who are delirious must be torn from this quasi-sleep, recalled from their waking dream and its images to an authentic awakening” (184). One example explains in a city hospital, a significant series of convulsion had broken out and prescribed medicine had not been effective. In response, stoves filled with burning coals be brought, and that iron hooks heated inside them, and the arm of men or women suffering

convulsions were burned to the bone. Willis thought a better effective method was to teach imbeciles “wisdom from an attentive and devoted master”. From this wisdom, come truth and a well-ordered existence.

2. Theatrical Representation: In opposition of being awake, therapeutic operation functions entirely within the space of the imagination, sort of like *theater*. For example, Foucault cites an exercise by Lusitanus attempted to cure someone who felt damned on earth due to the unforgiveable amount of sins. “In the impossibility of convincing him by reasonable arguments that he could be saved, his physicians accepted his delirium and caused an “angel” dressed in white, with a sword in hand to appear and after exhortation this delusive vision announced that his sins had been remitted” (188).

3. Return of the Immediate: Instead of using theater, this method attempts to suppress the illusion of madness. That is to say, that if madness is an illusion, by elimination of the illusion, madness is too eliminated. For example, for Bernadin de Saint-Pierre who had a strange disease that caused him to see two suns (like Oedipus), he resorted to manual labor. “It was to Jean-Jacques Rousseau that I owed my return to health. I had read, in his immortal writings, among other natural truths, that man is made to work, not to mediate. Until the time I had exercised my soul and rested my body; I changed my ways; I exercised my body and rested my soul” (192).

The Great Fear

It was no secret that within the realm of confinement existed a great fear of the unknown. “People once afraid were still afraid of being confined; at the end of the eighteenth century, Sade was still haunted by the “black men” who lay in wait to put him away” (202). A great anxiety about a contagion developed, especially considering that the mad and criminals had been confined within the same places where lepers were once held. The evil that men had attempted to exclude by confinement reappeared, almost fermenting in closed spaces. First, the air around Bicêtre was seen as tainted with maleficent vapors, which would expose entire cities with rottenness and taint. This generated a fear so great that the citizenry nearby wanted to burn the entire complex, but was blamed on poor sanitary conditions. The effort at this time was not to suppress houses of confinement, but to eliminate new evil. The second half of the eighteenth century sought to reduce contamination by destroying impurities and vapors, elimination fermentation, and stopping the spread of contagion. “The ideal was an asylum which, while preserving its essential functions, would be so organized that the evil could vegetate there without ever spreading; an asylum where unreason would be entirely contained and offered as a spectacle, without threatening the spectators; where it would have all the powers of example and none of the risks of contagion” (207).

Foucault uses Montesquieu's example of suicide, as the result or "penalty of the liberty that reigns there [England]...and of the wealth universally enjoyed. Freedom of conscience entails more dangers than authority and despotism" (213). Adding to the complex issues is religion. Religion creates a great anxiety about salvation and the resulting doubt leads to melancholia. The effort to purify the facility of confinement was in response to a festering evil that develops, for example in Sade's 120 days in Sodom". At this point, madness has evolved into something entirely corrupt and evil, while the methods of confinement have not changed to keep up. In a way, free thinking lead not to enlightenment, but to further corruption.

The New Division

Before confinement became the widespread solution to the question of how to handle and manage the "undesirable populations", "no one blushed to put the insane in prison" (221). As the confinement movement proliferated, there are few prisons in existence without "unfortunates" chained besides criminals. As a result, both the insane and the criminal were detained together along with the poor, the old, and the truly demented. Foucault labels this phenomenon as the place "where the eye of humanity never penetrates" (221). The age of positivism claims to have been the first to call for an end to the confinement era, but previous efforts had developed at least twenty five years before. Despite the efforts to end confinement, frustration did develop because the mad were treated no differently than state prisoner. In an example, as punishment for epileptics and other madmen, they were housed with the poor and criminals. So what effectively happens, is no distinction between the criminal and the insane. If anything, the criminal and poor are punished by being forced to live with the mad. Foucault cites Mirabeau, who argues the opposite. The criminals are not being punished, but the mad are being punished by being exposed or corrupted by those libertines, ruined old men, rascals, and state prisoners, who in their youth spent time in wildness, and in turn actually lead the mad into a life of similar corruption. Further, "it is all too true that those who have lost the use of reason must be hidden from society" (227). That is to say, that the criminal should be hidden and the mad should be treated elsewhere, such as granted freedom to live and labor. Specifically, Foucault cites Michelet who argues: "(1) Prison causes alienation and *makes men mad*, (2) Confinement breeds evil, especially the "poisonous writing of de Sade, and (3) the criminal is released, but never the mad" (228).

The crisis of poverty, leads to a different interpretation. The original idea that poverty was the result of a man's sloth was abandoned and replaced as an economic phenomenon. Poverty was the result of scarcity of commodities and money, as linked to the state of commerce, agriculture, and industry. Also, there was population, "not a passive element subject to the fluctuation of wealth, since it is a man's labor which creates—or at least transmits, shifts, and multiplies—wealth" (231). Arguably, confinement became an anti-economic event, especially

since it confined a necessary labor force. It was thought that money budgeted to run the institutions of confinement actually increased poverty. Foucault adds, “to utilize the poor, vagabonds, exiles, and émigrés of all kinds, was one of the secrets of wealth” (232).

What develops during the eighteenth century is the notion that confinement is no longer necessary. The first step toward ending confinement develops with the “Declaration of the Right of Man”, which prevented unjust detainment except when supported by evidence, by formal accusation, and within the confines of the law. Foucault argues that this act, formally ends the era of confinement, but the problem of the still confined exists. Essentially between the 12th and 16th of March 1790, “in a space of six weeks...all persons detained...so long as they are not convicted...under arrest...or not charged with major crimes, or confined by reason of madness, *will be set at liberty*” (236). Those deemed to have dementia are interrogated and either released or sent to a hospital specifically suited to treat the disorder. The problem developed that no such hospital existed, and the fall back became to either release the mad to their family (to which they were forced to care for them) or sent to Bicêtre. The “new division” that comes about is the segregation of the criminal from the mad, not out of humanitarianism, but because madness could not be situated.

The Birth of the Asylum

Foucault begins by describing the “happy era”, whereby madness is finally recognized and treated according to a truth to which had too long remained blind. Two examples are given as alternatives to confinement:

(1) The York Retreat (created by Tuke), began as a Quaker farming institution, was not the “idea of a prison that it suggests, but rather that of a large farm; it is surrounded by a great, walled garden” (242). There are no bars or grills on the windows. The setting described as being in the midst of a “smiling and fertile countryside” (242).

(2) The once centralized Bicêtre is liberated (the resulting asylum is created by Pinel). The remaining mad were thought to be the victim of madness resulting from the deprivation of air and liberty. Given the prior detail of severe conditions, this could be seen as the modern day closing of Abu Ghraib.

Tuke, being a Quaker, incorporates the idea of religion into his “rehabilitation”. Religion creates this idea of a “moral standard” that is eternally sane and cannot be corrupted with insanity. According to Foucault, “Tuke created an asylum where he substituted for the free terror madness the stifling anguish of responsibility; fear no longer reigned on the other side of the prison gates, it now raged under the seal of conscience” (247). The madman for the first time has now been taught the emotion of “guilt” and must work to eliminate it. Work in this model was meant to eliminate dangerous liberty and built one’s esteem, ultimately

creating and earning a “moral responsibility” to himself and society. The interesting occurrence that is unmentioned is the idea of “restraint”. Whereas in confinement, the mad is physically restrained, in the asylum, the madman is “self-restrained”. Perhaps, adding to the belief in responsibility. Also, this model creates the figure of authority, that is someone who tells the mad how he *should behave*. “The absence of constraint in the nineteenth-century asylum is not unreason liberated, but madness long since mastered” (252). Although great emphasis was placed on the idea of “family”, it actually was an auspice for subjugation or domination. For the sane was of a juridical minority and had the ability to punish or “deprive earned liberty” from the madman, effectively pairing domination and destination. The objective is simple: religious segregation for the purpose of moral purification.

Pinel, conversely, minimizes the idea of religion, and thinks its purposes is best as a “medical object” (255). Foucault cites Pinel as mentioning, “Catholicism frequently provokes madness...and delirious beliefs, entertains hallucinations, leads men to despair and to melancholia (255). It is also mentioned that it should not be seen as odd if priests and monks are found within the mad population. That is to say, that religion was the cause of madness in certain individuals. Instead of celebrating the iconography of religion, the moral content is most relevant, after it has been filtered. That is to use religion as an instrument to establish moral truth. “The operation of Pinel was much more complex: to effect moral synthesis, assuring an ethnical community between the world of madness and the world of reason, but by practicing a social segregation that would guarantee bourgeois morality...imposed as a law upon all forms of insanity” (259). The commonality between these two models is the idea of “observation”. For the first time, madness is able to see it self, and by being able to observe madness among other madmen, the true notion of absurdity is realized and quelled.