

## BOOK EXTRACT

***Psychiatric Power: Lectures at the Collège de France, 1973-1974.*** Ed. Jacques Lagrange, trans. Graham Burchell, intro. Arnold I. Davidson, (London: Palgrave, Macmillan 2006). Extract from Chapter One, 7 November 1973.

### Michel Foucault

The topic I propose to present this year, psychiatric power, is slightly, but not completely, different from the topics I have spoken to you about over the last two years. I will begin by trying to describe a kind of fictional scene in the following familiar, recognizable setting:

I would like these homes to be built in sacred forests, in steep and isolated spots, in the midst of great disorder, like at the Grande-Chartreuse, etcetera. Also, before the newcomer arrives at his destination, it would be a good idea if he were to be brought down by machines, be taken through ever new and more amazing places, and if the officials of these places were to wear distinctive costumes. The romantic is suitable here, and I have often said to myself that we could make use of those old castles built over caverns that pass through a hill and open out onto a pleasant little valley... Phantasmagoria and other resources of physics, music, water, flashes of lightning, thunder, etcetera would be used in turn and, very likely, not without some success on the common man.<sup>1</sup>

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- 1 François Emmanuel Fodéré (1764-1835), *Traité du délire, appliqué à la médecine, à la morale et à la législation* (Paris: Croullebois, 1817), Vol. 2, section VI, ch. 2: "Plan et distribution d'un hospice pour la guérison des aliénés," p. 215.
  - 2 Donatien Alphonse François de Sade (1740-1814), *Les Cent vingt Journées de Sodome, ou l'École du libertinage* (1785), in *Œuvres complètes* (Paris: Jean-Jacques Pauvert, 1967), vol. 26; English translation in Marquis de Sade, *The 120 days of Sodom and Other Writings*, trans. Austryn Wainhouse and Richard Seaver (New York: Grove Press, 1966).
  - 3 Joseph Michel Antoine Servan (1737-1807), *Discours sur l'administration de la justice criminelle, delivered by Monsieur Servan* (Geneva: 1767), p. 35: "The unshakeable basis of the most solid empires is founded on the soft fibers of the brain." (Republished in C. Beccaria, *Traité des délits et des peines*, trans. P.J. Dufey [Paris: Dulibon, 1821]).

This is not the castle of *Cent Vingt Journées*.<sup>2</sup> It is a castle in which many more, an almost infinite number of days will be passed; it is Fodéré's description, in 1817, of an ideal asylum. What will take place in this setting? Well, of course, order reigns, the law, and power reigns. Here, in this castle protected by this romantic, alpine setting, which is only accessible by means of complicated machines, and whose very appearance must amaze the common man, an order reigns in the simple sense of a never ending, permanent regulation of time, activities, and actions; an order which surrounds, penetrates, and works on bodies, applies itself to their surfaces, but which equally imprints itself on the nerves and what someone called "the soft fibers of the brain."<sup>3</sup> An order, therefore, for which bodies are only surfaces to be penetrated and volumes to be worked on, an order which is like a great nervure of prescriptions, such that bodies are invaded and run through by order. "One should not be greatly surprised," Pinel writes, "at the great importance I attach to maintaining calm and order in a home for the insane, and to the physical and moral qualities that such supervision requires, since this is one of the fundamental bases of the treatment of mania, and without it we will obtain neither exact observations nor a permanent cure, however we insist on the most highly praised medicaments."<sup>4</sup> That is to say, you can see that a certain degree of order, a degree discipline, and regularity, reaching inside the body, are necessary for two things.

On the one hand, they are necessary for the very constitution of medical knowledge, since exact observation is not possible without this discipline, without this order, without this prescriptive schema of regularities. The condition of the medical gaze (*regard médicale*), of its neutrality, and the possibility of its gaining access to the object, in short, the effective condition of possibility of the relationship of objectivity, which is constitutive of medical knowledge and the criterion of its validity, is a relationship of order, a distribution of time, space, and individuals. In actual fact, and I will come back to this elsewhere, we cannot even say of "individuals"; let's just say a certain distribution of bodies, actions, behavior, and of discourses. It is in this well ordered dispersion that we find the field on the basis of which something like the relationship of the medical gaze to its object, the relationship of

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4 Philippe Pinel (1745-1826), *Traité médico-philosophique sur l'aliénation mentale, ou la Manie* (Paris: Richard, Caille and Ravier, Year 9/1801), section II, "Traitement moral des aliénés," § xxiii: "Nécessité d'entretenir un ordre constant dans les hospices des aliénés," pp. 95-96; abridged English translation of original, 1801 edition [omitting Pinel's introduction and material added in longer French 1809 edition; G.B.], *A Treatise on Insanity*, trans. B.B. Davis (New York: Hafner, 1962), section II: "The Moral Treatment of Insanity"; "The necessity of maintaining constant order in lunatic asylums, and of studying the varieties of character exhibited by the patients," p. 99.

objectivity, is possible—a relationship which appears as the effect of the first dispersion constituted by the disciplinary order. Secondly, this disciplinary order, which appears in Pinel's text as the condition for exact observation, is at the same time the condition for permanent cure. That is to say, the therapeutic process itself, the transformation on the basis of which someone who is considered to be ill ceases to be so, can only be produced within this regulated distribution of power. The condition, therefore, of the relationship to the object and of the objectivity of medical knowledge, and the condition of the therapeutic process, are the same: disciplinary order. But this kind of immanent order, which covers the entire space of the asylum, is in reality thoroughly permeated and entirely sustained by a dissymmetry that attaches it imperiously to a single authority which is both internal to the asylum and the point from which the disciplinary distribution and dispersion of time, bodies, actions, and behavior, is determined. This authority within the asylum is, at the same time, endowed with unlimited power, which nothing must or can resist. This inaccessible authority without symmetry or reciprocity, which thus functions as the source of power, as the factor of the order's essential dissymmetry, and which determines that this order always derives from a non reciprocal relationship of power, is obviously medical authority, which, as you will see, functions as power well before it functions as knowledge. Because, what is the doctor? Well, there he is, the one who appears when the patient has been brought to the asylum by these surprising machines I was just talking about. I know that this is all a fictional description, in the sense that I have not constructed it on the basis of texts coming from a single psychiatrist; if I had used only the texts of a single psychiatrist, the demonstration would not be valid. I have used Fodéré's *Traité du délire*, Pinel's *Traité médico-philosophique* on mania, Esquirol's collected articles in *Des maladies mentales*,<sup>5</sup> and Haslam.<sup>6</sup> So, how then does this authority without

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5 Jean Étienne Dominique Esquirol (1772-1807), *Des maladies mentales considérées sous les rapports médical, hygiénique et médico-légal*, 2 volumes (Paris: J.-B. Baillière, 1838). Abridged English translation and with additions by the translator, *Mental Madness: A Treatise on Insanity*, trans. E.K. Hunt (Philadelphia: Lea and Blanchard, 1845) [Hunt says, p. vi: "All that portion of this Treatise, relating properly to insanity, has been published entire; the remainder, referring, for the most part, to the statistics and hygiene of establishments for the insane, together with the medico-legal relations of the subject, have been omitted"; G.B.].

6 John Haslam (1764-1844), *Observations on Insanity, with Practical Remarks on the Disease, and an Account of the Morbid Appearances of Dissection* (London: Rivington, 1798), republished in an expanded edition under the title, *Madness and Melancholy* (London: J. Callow, 1809); and, *Considerations on the Moral Management of Insane Persons* (London: R. Hunter, 1817).

7 J.E.D. Esquirol, *Des établissements consacrés aux aliénés en France, et des moyens d'améliorer le sort de ces infortunés* (Report to the Minister of the Interior, September 1818), printed by Mme. Huzard, 1819. Reprinted in *Des maladies mentales*, vol. 2, pp. 399-431.

symmetry or limit, which permeates and drives the universal order of the asylum, appear? This is how it appears in Fodéré's text, *Traité du délire* from 1817, that is at that great, prolific moment in the proto-history of eighteenth century psychiatry—Esquirol's great text appears in 1818<sup>7</sup>—the moment when psychiatric knowledge is both inserted within the medical field and assumes its autonomy as a specialty.

Generally speaking, perhaps one of the first conditions of success in our profession is a fine, that is to say noble and manly physique; it is especially indispensable for impressing the mad. Dark hair, or hair whitened by age, lively eyes, a proud bearing, limbs and chest announcing strength and health, prominent features, and a strong and expressive voice are the forms that generally have a great effect on individuals who think they are superior to everyone else. The mind undoubtedly regulates the body, but this is not apparent to begin with and external forms are needed to lead the multitude.<sup>8</sup>

So, as you can see, the figure himself must function at first sight. But, in this first sight, which is the basis on which the psychiatric relationship is built, the doctor is essentially a body, and more exactly he is a quite particular physique, a characterization, a morphology, in which there are the full muscles, the broad chest, the color of the hair, and so on. And this physical presence, with these qualities, which functions as the clause of absolute dissymmetry in the regular order of the asylum, is what determines that the asylum is not, as the psycho-sociologists would say, a rule governed institution; in reality it is a field polarized in terms of an essential dissymmetry of power, which thus assumes its form, its figure, and its physical inscription in the doctor's body itself. But, of course, the doctor's power is not the only power exercised, for in the asylum, as everywhere else, power is never something that someone possesses, any more than it is something that emanates from someone. Power does not belong to anyone or even to a group; there is only power because there is dispersion, relays, networks, reciprocal supports, differences of potential, discrepancies, etcetera. It is in this system of differences, which have to be analyzed, that power can start to function.

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8 F.E. Fodéré, *Traité du délire*, vol. 2, section 6, ch. 3, "Du choix des administrateurs, des médecins, des employés et des servants," pp. 230-231.