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MADNESS IS CIVILIZATION



Full Title: Madness Is Civilization: When the Diagnosis Was Social, 1948-1980

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Reviewer: George Tudorie

The title of Michael Staub's new book makes an obvious reference to what was rendered in English as *Madness and Civilization*, the title of the abridged translation of Foucault's *Folie et déraison*. While Foucault is not one of the central characters of Staub's book, the wordplay is not arbitrary. This too is a history of madness, or, to be precise, of how madness has been thought of in the recent American past, and of how its various conceptualizations radiated in the wider social context. Staub documents how, in the postwar decades, psychiatry became a fractured battlefield, and its proprietary jargon was redirected from a primarily medical horizon to a role of comprehensive socio-political analysis and criticism. He shows how a disputed concept of madness left a mark on the family conservatism of the '50s, on the liberation rhetoric of the '60s, and on the neocon backlash which sank flower power. In those decades, we are reminded, thinking about madness became – sometimes with good reason, sometimes without – a mandatory ritual and a model for reflecting on human nature and society. It is, I think, the chief merit of Staub's book that it contributes to understanding why that happened.

The focal point of Staub's study is the tumultuous 1960s, and the substance of his book consists in reflections on the debates about the nature, causes and cures of madness. It would be at best misleading, however, to say that the book is an argumentative account of what insanity might or might not be, or about the proper geography of its borders. The author is not in the business of telling us what counts or should count as sane or insane, though there are hints suggesting that he would not be unfriendly to social constructivist elucidations. What Staub offers is rather an explanation by amassing of textual evidence which introduces nuance and detail in the social constructivist accounts favored by others. Gradually, this illuminates why at a certain point in history, following a devastating war and under the threat of an even more disastrous confrontation, American (and generally Western) culture turned to the notion of madness as a vehicle of self-understanding and as a representation of what troubled it most. This is the central thread of the book.

Staub has written cultural history before, and the quality of the text is that expected from an experienced author. In two previous books, for example, he reevaluated the representations of disadvantaged groups in the 1930s (*Voices of Persuasion*), and the meandering evolution of Jewish liberalism in the US respectively (*Torn at the Roots*). The latter volume shares with the one discussed here a focus on the 1960s, and a captivating cadence. Impressively well researched, *Madness Is Civilization* might seem to privilege an informed audience, but, as with Staub's previous books, it will pose no serious difficulties to the general reader, especially to one inclined to follow thoroughly the abundant endnotes. The book was anticipated by a paper presented at the School of Social Science (Princeton) in 2008. That paper can be read here – the prospective reader will get the feel of the book, and a selection of its driving ideas.

Madness is Civilization is divided into two parts. The chapters in the first part are built on detailed, though fragmentary, discussions of some of the most influential intellectuals of the postwar period – among them: Adorno, Laing, Goffman, and Szasz. The second part focuses on the larger and more diffuse socio-political dimensions of the debates about madness, with a notable chapter on the feminist movement, and a final chapter on the undiscerning treatment the following decades had for the legacy of the 1960s.

The first chapter, "Society as Patient", traces the roots of how, at the end of World War II and throughout the 1950s, social conditions became prominent in accounting for both individual mental illness (e.g. schizophrenia) and group pathologies (e.g. racism). According to Staub, at least two kinds of forces drove this dynamic. On the one hand, *within* psychiatry there was a growing disenchantment with the stagnation of biological models and with their focus on classification. Moreover, psychoanalytic accounts, framed in a terminology more open to social interpretations, were gaining ground both in institutional psychiatry and in the general culture. On the other hand, the context generated by the war pushed to center stage a series of worries about the vulnerability of otherwise normal individuals to the malignant transformations induced by authoritarian politics. Context as opposed to brain functioning became central to the etiology of madness. As shown tragically by the popular successes of the Nazis, whole societies could be infected and rendered ill, collectively insane. Therefore, societies needed "early diagnosis and immunization; this was stringently clear especially for those who, like Adorno (and many other intellectual refugees in the social scientific and psychoanalytic circles), had personal

links with what happened in the Old World. Psychiatry became 'a science with a social mission' (p.14). It began to investigate the relations between social stressors (war, racism, urbanization) and mental illness, and also the factors that led to greater resilience (support networks, acceptance, love). It also began to incriminate detrimental social conditions for what it already saw as 'an unprecedented mental health crisis' (p.36).

The second chapter, "Enough to Drive Anybody Crazy", turns to a specific incarnation of the idea that mental illness was socially caused, the notion that it was the immediate society – one's family – which was at fault. This trend gained speed in academic circles in the 1950s and came to have a tremendous influence in the 1960s, when it became an integral part of various liberation discourses. R.D. Laing's exposure of the nuclear family as the paradigmatic repressive institution capable of conditioning children to insanity (p. 41) is an opportune pretext for discussing what was perhaps the most consequential element in the attack on the traditional family. Laing had seen sense in what his psychotic patients told him; he saw unloving parents, unresolved frustration passed over generations, a veil of silence disguised as organic harmony, and violence honored as natural hierarchy. If the family was on trial, what the mad told him counted not as symptom, but as testimony. And Laing, writing in the 1960s, was not alone. He had been anticipated by other influential intellectuals, like the psychoanalyst Frieda Fromm-Reichmann, or the anthropologist Gregory Bateson.

Unlike Freud, Fromm-Reichmann thought that therapeutic contact with schizophrenics was possible; they could be understood and this was essential for their treatment. She also introduced the unhappy term 'schizophrenogenic mother' in order to emphasize the developmental impact of bad parenting. Bateson used another significant piece of jargon – 'double bind' – in his attempt to reduce psychosis to a cumulative effect of contradictory (e.g. opposite verbal vs. nonverbal messages) communication practices within families. Such accounts, Staub shows, were instrumental to Laing's campaign against family life. Put together, they led to an image of mental illness as a kind of shadow rationality, a sound calculus based on flawed premises. Madness, then, came to surface as a course of action and a form of life which the subject *chose* (as anybody would have) because there were no better options. This was Laing's paradoxical survival – a person becoming 'dead, in order to remain alive' (p. 54).

It is in the context of discussing Laing's pervasive influence that Staub introduces some of the series of helpful critical nuances which are quite typical of this book. For example, he notes that the emerging consensus that biological psychiatry was a dead road was so strong that important developments, such as the introduction of the antipsychotic Thorazine in the mid-1950s, were taken to be peripheral events, immaterial to the discussion about the nature of madness. It is a matter of asking the right questions to discern when ideas – which otherwise can be productive – mutate into uncritical convictions. (It is not clear, on reflection, that e.g. asking obsessively what goes wrong in the families of psychotics as opposed to 'normal' families was anything else than itself a symptom of larger cultural currents.) This task of discernment is accomplished well by Staub.

In the third chapter, "Suffering from Contingencies", and continuing into the fourth, "The Therapeutic State", Staub enters deeper and more explicitly into a territory already announced in the Introduction as one of the main

themes of the book: the role of antipsychiatry in framing and voicing worries which had no privileged connection with mental illness. The main character of the third chapter is Ervin Goffman, while the fourth is centered on a more radical voice, Thomas Szasz. Goffman's attack on psychiatry was part of a comprehensive criticism of repressive ('total') institutions. Social order was maintained by the management of dissent. Psychiatry, Goffman argued in *Asylums*, had come to play precisely this role. Discussions of disease and treatment were beside the point since psychiatric patients were, for all intents and purposes, *prisoners*. The terms of Goffman's attack made it an obvious instrument for transforming the criticism of psychiatry and its institutions into a political issue. And in this regard Staub's analysis is illuminating indeed.

Staub's places Goffman in a context dominated by a kind of fear characteristic for the early years of the Cold War. Adding to the worries caused by the viral nature of Nazi propaganda, the experience of prisoners of war in Korea led to the prominence of the conception that, in the proper environment, people could be *brainwashed* – their minds and characters changed at will by ruthless manipulators armed with the weapons of almighty psychology. The brief critical history of the notion of brainwashing provided by Staub shows how what was essentially a right-wing phobia which saw in psychology/psychiatry a kind of Jewish – communist fifth column migrated to the rhetoric of the left, losing the connotation of communist threat, but retaining the theme of the malleability of the self and of menacing social control. What was a reaction to the perceived dissolution of (normative) authority became suspicion about all authority: state, family, or science:

Just as the origins of 1960s critiques of the nuclear family originally lay in remarkably normative Cold War-era preoccupations with "schizophrenogenic mothers," so too the widespread and distinctively left-leaning 1960s preoccupations with the insidious power of ideology and with the vulnerability of the self to malignant social forces can be traced back to right-wing hysteria over communist strategies for "mind control" and other forms of "coercive persuasion." (p. 70)

Goffman thought that total institutions had effects on the self, in part via the manner an individual's self-understanding was affected and prescribed by such contexts. While he considered that the nature of madness was social, not biological, an element of pathology was still present in his analysis. For Thomas Szasz, however, this kind of criticism was not sufficient. As Staub explains, Szasz went further and denied any role for the conceptual apparatus of psychiatry. The idea of mental illness was compromised, whatever its interpretation, 'as a category of human self-knowledge' (p. 114). For Szasz, this was especially visible if one considered the role psychiatrists were playing in legal matters. Instead of conserving individual responsibility and its complement, self-determination, laws were being corrupted by the element of sheer arbitrariness introduced by psychiatric evaluations and expert testimonies. With little attention to the paradox, Szasz rejected the notion of mental illness as *both* the ultimate refuge for those unwilling to take responsibility for their actions, and the ultimate tool of coercing those who rejected social norms. As in the case of Goffman, who ignored the improvements in the asylum system in his attempt to convey a certain "tone of life" (p. 80), Staub is careful to note the inconsistencies, ambiguities, and trans-ideological populism which emanates from Szasz's writings. But he also emphasizes how the issues Szasz was discussing with his characteristic vehemence, e.g. the notion that psychiatry was an instrument of social control, were in the air, and therefore (perceived as) important.

The second part of the book enlarges the scope of the analysis, focusing on the commerce between the intellectual debates surrounding psychiatry and the culture wars which were engulfing American society as a whole. Chapter five, "The Insanity Trip", explores this reciprocal relation mainly in the context of yet another conflict, the Vietnam War. The horrific images of My Lai became a leitmotiv of a counterculture who felt entitled to ask who was truly mad – those performing such acts, or the often derided peaceniks. Staub claims that without a 'seismic shift' (p.121) in mainstream imagination, countercultural discourse couldn't have been shaped by the ideas of Goffman or Szasz. Evidence that this had happened is given by the abundance of manifestations which aimed to show how what appeared to be individual madness was in fact manufactured by a sick society. If one thinks only of the cult status attained by films/adaptations such as Kubrick's *Clockwork Orange* (1971, based on Burgess's 1962 novel) or Forman's *One Flew Over the Cuckoo's Nest* (1975, based on Kesey's 1962 novel). Digging up the ambiguities and hesitations of the era is what Staub does best in this case too. For example, he points out that the rejection of drug-prescribing biological psychiatry cohabited with an enthusiasm for other drugs, especially hallucinogens such as LSD.

In the final two chapters of the book, Staub traces the decline of the radical criticism of the 1960's and the degeneration of antipsychiatry into something quite different, pop psychology. The sixth chapter, "Person Envy" (a reference to 'penis envy'), focuses on the criticism of traditional psychiatry emanating from the feminist movement, and its relation to the inflation of self-help literature which was already happening in the early 1970s. The latter, Staub shows, had a damaging impact on both feminism and the overall reputation of antipsychiatry. On the one hand, pop psychology obscured the fact that psychiatry and medicalization affected especially women. The depressed housewife or the rebel faced with 'diagnoses' such as 'angry woman syndrome' did not simply *happen* to be female. Pop psy was nonetheless gender blind. On the other hand, this literature was 'antipsychiatry for the masses' (p. 140), systematically devoid of the radical critical edge which had been the trademark of true antipsychiatry.

Staub's contextualized criticism of pop psy is helpful, but perhaps the idea that antipsychiatry already exposed itself to populist excesses is underexplored. It is true, however, that the populism inherent in, say, Szasz's dictums was quite different from the bland be-what-you-can-be recommendations which Staub targets. And the author is doubtlessly right that, in order to arrive at a balanced evaluation of feminist antipsychiatry, one has to locate the specific reasons feminists had to attack psychiatry and a culture which considered women psychologically compromised whenever they stepped outside prescribed gender roles. Pop psychology, though it shared the suspicion of treating social ills as medical defects, is not a proper vehicle for this task, since its success was related especially to *male* insecurity. Staub's study reaches its critical peak when it effectively accuses pop psy of playing an important role in bringing about the conservative backlash which followed the 1960s. Pop psy tamed and tainted what was, for better or worse, genuine criticism. Moreover, it provoked aversive reactions vis-à-vis what some took to be the excessive self-indulgence of all critical movements. Whereas, in fact,

... the rise of a wider culture of narcissism had little or nothing to do with either antipsychiatry or feminism, but rather with the efflorescence of pop psychology... (p. 165)

The final chapter of the book, “A Fashionable Kind of Slander”, documents the reactions against the critical movements of the 1960s and the attempts of leftist intellectuals and activists to salvage some of that legacy. Staub points to evolutions taking place both within and outside psychiatry. At the end of World War II, biological psychiatry was stagnating and psychodynamic accounts were becoming dominant. The reverse happened beginning with the 1970s. The third edition of the DSM, prepared in the late 1970s and published in 1980, institutionalized this change. This was not, however, the only force eroding antipsychiatry and the emphasis on societal ills in the explanation of madness. There was also the considerable right-wing reaction to what was perceived as a psychologization of everything. One commentator quoted by Staub went so far as to accuse the critics of psychiatry that they ‘would abolish the hospital only to make the whole world a hospital’ (p. 172).

Staub’s main effort in discussing the conservative counterattack which, by the 1980s, pushed antipsychiatry to cultural periphery is to reconstruct at least in part the various threads involved in this ideological battle. The picture favored by conservatives – that somehow antipsychiatry, feminism, or pop psy were parts of the same vicious animal – may be the default nowadays. What Staub offers is a much more ambiguous alternative, one in which topics often traverse, more or less transformed, the ideological divide. Not that the author is completely neutral about this divide, and not that he should be. Staub has a reserve of sympathy for antipsychiatry and what it stood for in the specific historical context of the postwar Western world. At least the latter is, I think, well-motivated. I share to a lesser degree his optimism, manifest in the Epilogue to *Madness Is Civilization*, that the picture of madness as a primarily social pathology is making a powerful comeback.

As it happens with good histories of ideas, Staub’s effort confirms that there is a lot to learn about a subject matter – madness in this case – by mapping the context and biography of the corresponding concept. It is less of a mystery, for example, why the medicalization of certain psychological traits or the relation between growing up and going mad trouble us today if we come to understand that such issues belong, in part, to an intellectual heritage. Exploring the cultural past is, in this sense, exploring our current way of thinking. Staub does that well.

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