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# Foucault's Change of Attitude Toward Psychology in 1953

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The common view of the development of Foucault's thought in the early years of his career<sup>1</sup> is informed by the following assumption: at the very outset, he had a favorable attitude towards psychology, so much so that he almost even fell prey to "the psychological temptation" of becoming a practitioner, but by the time of the composition of *Mental Illness and Personality (MIP)*, in 1953, this attitude had already undergone a substantive shift, Foucault having become highly critical the psychological sciences. The assumption is not false: Foucault did, at the outset of his career, pursue studies in psychology, work in a psychiatric hospital, express some degree of enthusiasm towards certain forms of psychology in his *Introduction to Binswanger's Dream and Existence (IBDE)*. And he did adopt a critical stance towards psychology in *MIP*. Yet while not false, this picture is inaccurate in two respects. First, Foucault's attitude towards psychology was ambivalent from the time of composition of *IBDE*. And second, the text of *MIP* is not as unambivalently critical of psychology as the assumption suggests.

Let me explain. In *IBDE*, Foucault is highly critical of the mainstream psychology of his time, and enthusiastically endorses existential analysis. Thus it can seem that the text is expressive of a favourable attitude towards psychology. But existential psychoanalysis was marginal even within psychoanalysis, itself a form of psychology both marginalized within the institutional scientific

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1. This period has received comparatively little attention. Macherey, Moreno-Pestaña and Paltrinieri's work on the subject, and the recent volume *Foucault à Münsterlingen*, are notable exceptions. See J.-F. Bert, E. Basso (eds.), *Foucault à Münsterlingen*, Paris, EHESS, 2015; P. Macherey, *Aux sources de L'histoire de la folie. Une rectification et ses limites*, *Critique*, 471/2, aug.-sept. 1986, p. 753-774; L. Paltrinieri, *De quelques sources de Maladie mentale et personnalité. Réflexologie pavlovienne et critique sociale*, in E. Basso, J.-F. Bert (eds.), *Foucault à Münsterlingen*, *op. cit.*, p. 197-217; L. Paltrinieri, *Philosophie, psychologie, histoire dans les années 50. Maladie mentale et personnalité comme analyseur*, in G. Bianco, *Fruteau de Laclos. L'angle mort des années 50*, Paris, Presses univesitaires de la Sorbonne, 2016, p. 169-191; J. L. M. Moreno Pestaña, *Convirtiéndose en Foucault: sociogénesis de un filósofo*, Madrid, Montesinos, 2006.

community<sup>2</sup> and rejected by the communist party<sup>3</sup>. Moreover, even Foucault's endorsement of existential analysis in that text involves a passing but profoundly important reservation: the acknowledgement that the explanations of existential analysis must ultimately be grounded on fundamental ontology, and the corresponding acknowledgement that, for that reason, a conceptual problem haunts the very possibility of such grounding<sup>4</sup>.

As for the case of *MIP*, the text is not as uniformly critical of psychology as is commonly assumed. Rather, it documents the tension within Foucault's then shifting views about psychology. While in "the frame" (i.e. the introductory segment, the second part and the conclusion) Foucault does indeed take a highly critical stance towards the psychology of his time, and while he suggests, in the last pages, that the "true psychology" must rid itself of psychologism<sup>5</sup>, the first part of the book, as well as one of the chapters of the second part (the final chapter VI) are in tension with that frame: they read as a history of the dialectical progress of psychology to an ever more complete and accurate understanding of mental illness.

These emendations to reception of Foucault's early attitude toward psychology might seem negligible, the kind of difference that makes no difference at all to our understanding of the early stages of his career. Yet it brings into view a host of questions concerning Foucault's first publications and, thereby, concerning the gestation of his lifelong intellectual project. For instance, once we realize that on the one hand, Foucault's attitude toward psychology was never unambivalent, but that his attitude towards existential analysis did undergo an important shift, and that on the other hand, this shift in his attitude to psychology took place *during* the composition of *MIP*, we may be less tempted to see the latter *only* as an "apologetic exposition of Pavlov's reflexology<sup>6</sup>" and treat it also as a document of the tension within Foucault's then changing approach towards psychology and mental illness. So we may move away from the idea that its interest is purely anecdotal, and that Foucault's later dissatisfaction with the book is indicative of the failure of his attempt to write, under Althusser's commission, a Marxist anti-psychologistic treatise à la *Politzer*, and see it instead as an important source for identifying both the

2. See M. Foucault, *La recherche scientifique et la psychologie*, in M. Foucault, *Dits et écrits*, t. I, Paris, Gallimard, 1994, p. 165-186.

3. See S. Moscovici, *La psychanalyse, son image, son public*, Paris, PUF, 1961, Ch. 14.

4. See M. Foucault, *Introduction*, in L. Binswanger, *Le rêve et l'existence* (trad. J. Verdeaux), Paris, Desclée de Brouwer, p. 9-128, p. 10-14.

5. M. Foucault, *Maladie mentale et personnalité*, Paris, PUF, 1954, p. 110.

6. D. Defert, *Chronologie*, in M. Foucault, *Dits et écrits*, t. I, *op. cit.*, p. 13-90, p. 23.

conceptual problems that preoccupied Foucault at the time, and some of the main sources that influenced him.

In the rest of this presentation I shall pursue the first of these lines of enquiry in some detail. In the first part, I will examine *IBDE* in order to identify Foucault's general attitude toward psychology at the time of its composition in 1952-1953<sup>7</sup>. Building on the results of that initial enquiry, and on certain aspects of *MIP*, in the second section of the paper I will pinpoint the aspects of Foucault's attitude toward psychology that seem to have shifted in the course of the composition of the text.

#### EXISTENTIAL ANALYSIS AS THE TRUE PSYCHOLOGY: THE CRITIQUE OF NATURALISTIC PSYCHOLOGY IN THE INTRODUCTION TO *BINSWANGER'S DREAM AND EXISTENCE*

Foucault's central aim in *IBDE* is to capitalize on Binswanger's work in order to show that mental illness is one of the fundamental possibilities of "human existence". His interest in this claim does not lie in the trivial idea that mental illness is a *human* possibility, but in the idea that it is a possibility of human *existence*, that it is a distinctively *existential possibility*. This idea situates what was then (and still is) commonly thought of as a distinctively psychological and empirical topic, mental illness, within the existentialist, phenomenological framework that Binswanger appropriated from Heidegger and that fascinated Foucault at the time<sup>8</sup>.

To say that mental illness is a possibility of human *existence* is to deny that it is merely a possibility of human *nature*. Binswanger's idea, endorsed by Foucault, is that contrary to what the psychiatrists of his (and our) time would say, mental illness is not merely a *natural-objective* phenomenon, but also an *existential* and hence an *irreducibly subjective* phenomenon, a phenomenon that cannot be understood without reference to the experience of the mentally ill individual, and which consists in the manifestation of "*that movement of existence that founds its historicity at the very moment in which it (i.e. existence) temporalizes itself*"<sup>9</sup>. Thus Foucault's central aim in *IBDE* is to show that contrary to the then standard psychiatric conception, mental illness is, on

7. D. Defert (*Chronologie, op. cit.*, p. 21), suggests the text was written in 1953, while Eribon suggests that the process began, and might have been completed, in 1952. See D. Eribon, *Foucault. 1926-1984*, Paris, Flammarion, 1991, p. 64-64.

8. See L. Binswanger, *Being-In-The-World: Selected Papers of Ludwig Binswanger*, New York, Basic books, 1963. See in particular, the chapter "*Heidegger's analytic of existence and its meaning for psychiatry*".

9. M. Foucault, *Introduction*, in L. Binswanger, *Le rêve et l'existence, op. cit.*, p. 9-128, p. 104.

the most fundamental level of description, not a natural or objective phenomenon but an existential and subjective one.

But what exactly is it to say, of mental illness, that it is fundamentally an existential phenomenon? The simplest way to put it is to say that for a French intellectual in the early fifties to characterize something (e.g. mental illness) as an existential phenomenon is to say that it can be understood in existential terms, read: Heideggerian terms. For Foucault to say that mental illness is an existential phenomenon is for him to say that the phenomenon of mental illness can be traced back to, understood and explained through the conceptual apparatus introduced by Heidegger in *Being and Time*<sup>10</sup>. Indeed, while admittedly a simplification, it is not inaccurate to say that the central thesis of Foucault's *IBDE* is that mental illness is the concrete, historical manifestation of an inauthentic existence, in the Heideggerian sense of the term:

Quand l'existence est vécue sur le mode de l'inauthenticité, elle ne devient pas à la manière de l'histoire. Elle se laisse absorber dans l'histoire intérieure de son délire ou encore sa durée s'épuise tout entière dans le devenir des choses ; elle s'abandonne à ce déterminisme objectif où s'aliène totalement sa liberté originare. Et, dans un cas comme dans l'autre, l'existence vient d'elle-même et de son propre mouvement s'inscrire dans ce déterminisme de la maladie<sup>11</sup>.

Foucault purports to show that the concept of mental illness belongs to *the order of existence* that is the object of existential analysis, rather than to *the objective order of nature* that is the object of psychiatric discourse. He thereby expresses a hostile attitude towards the approaches to psychology dominant at the time, and the conviction that the subject-matter of psychology calls for a different approach<sup>12</sup>:

[L]'existence vient d'elle-même et de son propre mouvement s'inscrire dans ce déterminisme de la maladie, où le psychiatre voit la vérification de son diagnostic, et par lequel il se croit justifié à considérer la maladie comme la chose inerte où se déroule ce processus selon son déterminisme interne. Le psychiatre oublie que c'est l'existence elle-même qui constitue cette histoire naturelle de la maladie comme forme inauthentique de son historicité, et ce qu'il décrit comme la réalité en soi de la maladie n'est qu'un instantané pris sur

10. See L. Binswanger, *Freud's Conception of Man in the Light of Anthropology*, *op. cit.*

11. M. Foucault, *Introduction*, in L. Binswanger, *Le rêve et l'existence*, *op. cit.*, p. 102-104.

12. See M. Foucault, *La recherche scientifique et la psychologie*, *op. cit.*

ce mouvement de l'existence qui fonde son historicité au moment même où elle se temporalise<sup>13</sup>.

Psychiatry cannot provide an appropriate understanding of mental illness. It misrepresents the latter by placing it on the natural objective register of deterministic processes. But it is only by tracing mental illness back to the existential register from which it springs that it can be adequately understood. And this is precisely the type of procedure deployed by Binswanger in *Dream and Existence* and further explored by Foucault in *IBDE*. Insofar as, from the existential analyst's perspective, such a procedure of tracing back mental illness to the existential register can alone yield a complete understanding of psychological phenomena, it has a privileged status. Existential psychology is, for the author of *IBDE*, the true psychology.

In sum, in *IBDE*, Foucault does not merely reject the approaches to psychology dominant at the time. His criticism of psychology goes in hand with the endorsement of a new and different kind of psychology, one that considers the experience of the mentally ill patient as an irreducible element of mental illness, and traces surface psychological phenomena back to the many configurations of the fundamental structures of human existence taken to lie at its source.

Yet begin noting that however much enthusiasm towards psychology is displayed in that first publication, Foucault's attitude towards psychology was not unambivalent. Among the main approaches to psychology (empirical psychology, classical Freudian psychoanalysis and, to a lesser extent, "Husserlian" phenomenological psychology) Foucault favors the rather marginal approach of existential analysis. And even this endorsement is qualified by the claim that the explanatory register of existential analysis is grounded on the more fundamental register of fundamental ontology, and by the passing but revealing discussion of the potential tension inherent in the idea of such a grounding.

### *The Common Explanatory Strategy of Existential Analysis and Scientific Psychology*

It is noteworthy that in *IBDE*, Foucault writes that existential analysis is "a form of analysis that designates itself as fundamental [my emphasis] relative to all concrete, objective and experimental knowledge<sup>14</sup>". Existential analysis is fundamental not only in the sense that it is indispensable for the study of mental illness. It is fundamental relative to scientific psychology, it grounds scientific psychology. This claim, which appears in the first section of *IBDE*, effectively prefigures Foucault's aforementioned criticism of psychiatry toward the end

13. M. Foucault, *Introduction, op. cit.*, p. 104.

14. *Ibid.*, p. 10.

of the article: that the psychiatrist forgets that what he takes to be the reality “in itself” of his object, mental illness, is but a fragment of the overall movement of an existence, and that understanding the origin and nature of mental illness thus requires tracing it back to the existential register on which mental illness is *grounded* and on which existential analysis unfolds.

It can be tempting to think that this reveals Foucault’s *full* rejection of the assumptions of scientific psychology, that it is expressive of a hostile attitude towards the idea of a natural scientific approach to psychological phenomena in general. There are indeed deep differences between the scientific psychologist’s and the existential analyst’s initial assumptions concerning the origin of psychological phenomena in general and of mental illness in particular: natural phenomena for the former, existential phenomena for the latter. But while such differences are by no means negligible, they are not to be overestimated. They are liable to render us blind to the fact that the scientific and existential analytic approaches to mental illness are informed by the *same explanatory strategy*. They both share the idea that the task of explaining psychological phenomena consists in tracing them back to certain phenomena that lie at their origin, phenomena which are ultimately rooted in what is most accurately thought of as “human essence”; both scientific psychology and existential analysis are informed by the assumption that there is an “essence” of human being (*homo natura* for the scientist, *Menschsein* for the existential analyst); both attempt to explain psychological phenomena in terms of that “essence”; both understand mental illness as a defective realization of “human essence”.

As we shall see, this is one of the central points over which Foucault’s attitude towards psychology was shifting at the time of the composition of *MIP*.

#### FROM PSYCHOLOGY TOWARD THE HISTORICAL ANALYSIS OF PSYCHOLOGY

In *IBDE* Foucault adopts a partially favorable attitude toward psychology and existential analysis: he writes from the perspective of a psychologist, of someone who is committed and believes that it is possible to understand mental phenomena and mental illness in terms of general truths about human being. Paradoxically, in the other texts that he wrote in 1953, *MIP* and *Psychology from 1850 to 1950*<sup>15</sup>, he adopted a substantively different attitude towards psychology and existential analysis. Thus he closes chapter V of *MIP* with the following claim:

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15. See D. Defert, *Chronologie, op. cit.*, p. 19, and D. Eribon, *Foucault, op. cit.*, p. 70 and 62 (resp.).

Certes, on peut situer la maladie mentale par rapport à la genèse humaine, par rapport à l'histoire psychologique et individuelle, par rapport aux formes d'existence. Mais on ne doit pas confondre ces divers aspects de la maladie avec ses origines réelles, si on ne veut pas avoir recours à des explications mythiques, comme l'évolution des structures psychologiques, ou la théorie des instincts, ou une anthropologie existentielle. En réalité, c'est dans l'histoire seulement que l'on peut découvrir les conditions de possibilité des structures psychologiques<sup>16</sup>.

The change in Foucault's attitude towards psychology is striking. The explanations of existential analysis, which he endorsed enthusiastically in *IBDE*, is now grouped among what in *MIP* he refers to as "mythical" accounts of mental illness<sup>17</sup>. This change stems in part from a shift in perspective: from a point of view internal to psychology, the point of view of the psychologist, to a point of view external to psychology, the point of view of the historian of psychology. That the necessity of operating this perspectival shift is one of the main preoccupations of Foucault at the time is also manifest in the concluding lines of *Psychology from 1850 to 1950*:

Mais l'interrogation fondamentale demeure. Nous avons montré, en débutant, que la psychologie « scientifique » est née des contradictions que l'homme rencontre dans sa pratique ; et que d'autre part, tout le développement de cette « science » a consisté en un lent abandon du « positivisme » qui l'alignait à l'origine sur les sciences de la nature. Cet abandon et l'analyse nouvelle des significations objectives ont-ils pu résoudre les contradictions qui l'ont motivée ? Il ne semble pas, puisque dans les formes actuelles de la psychologie on retrouve ces contradictions sous l'aspect d'une ambiguïté que l'on décrit comme coextensive à l'existence humaine. Ni l'effort vers la détermination d'une causalité statistique ni la réflexion anthropologique sur l'existence ne peuvent les dépasser réellement ; tout au plus peuvent-ils les esquiver, c'est-à-dire les retrouver finalement transposées et travesties. L'avenir de la psychologie n'est-il pas dès lors dans la prise au sérieux de ces contradictions, dont l'expérience a justement fait naître la psychologie ? Il n'y aurait dès lors de psychologie possible que par l'analyse des conditions d'existence de l'homme et par la reprise de ce qu'il y a de plus humain en l'homme, c'est-à-dire son histoire<sup>18</sup>.

16. M. Foucault, *Maladie mentale et personnalité*, Paris, PUF, 1954, p. 89-90.

17. See G. Politzer, *La crise de la psychologie contemporaine*, Paris, Éditions sociales, 1947.

18. M. Foucault, *La psychologie de 1850 à 1950*, in M. Foucault, *Dits et écrits*, t. I, *op. cit.*, p. 164-165.

Indeed, these passages from *MIP* and from *Psychology from 1850 to 1950* overlap on various themes recurrent within Foucault's writings about psychology at the time. Foucault's view at this stage is built around a conception of the traditional notion of mental illness as a failed attempt to capture, through "mythical explanations", what is in fact a historical phenomenon, one that, as such, can only be appropriately understood through historical analysis. Thus, *by the time he finished* writing *MIP* and *Psychology from 1850 to 1950* in 1953 Foucault seems to have substantively altered his original approach to and conception of mental illness. Yet interestingly, the manifest tension between different parts of *MIP* suggests that the shift in Foucault's attitude toward psychology took place in the course of the composition of the book.

### Foucault's Two Attitudes Towards Psychology and its History in *Mental Illness and Personality*

There are noticeable changes in Foucault's attitude towards mental illness within *MIP*. The book consists in a brief introductory section, an introductory first chapter, two parts, and a conclusion. Part one, entitled *The Psychological Dimensions of Mental Illness*, consists of chapters II to IV. Part II, entitled *The Real Conditions of Mental Illness*, consists of a brief introduction and chapters V and VI.

There is a stark contrast between Foucault's methodology and standpoint in what are two distinguishable "strands" of the book. The first strand, in which Foucault, as in *IBDE*, continues to adopt a perspective internal to psychology, consists in chapters II, III, and IV of the first part of the book, and of Chapter VI of the second part, dedicated to Pavlov's reflexology<sup>19</sup>. The second strand, where Foucault adopts a perspective external to and highly critical of psychology, corresponds to what I shall henceforth call *the frame* of the book: the introduction of the book, chapter I of the first part, the second part with the exception of chapter VI, and the conclusion of the book.

The enquiry carried out by Foucault in the first strand, throughout first part of *IBDE* and in chapter VI, is driven by the question of the origin of mental illness. Foucault's approach to this question is historical, but the history of the origin of mental illness is written from a standpoint *internal* to the psychological sciences: the standpoint of someone who regards the history of psychology as the history of the continuous and progressive movement of psychological theories towards ever more refined and comprehensive psychological truths. This, however, is not the standpoint operative in the second strand of the book,

19. See L. Paltrinieri, *De quelques sources de Maladie mentale et personnalité*, *op. cit.*



(what I have called its frame), where Foucault adopts an *external* standpoint towards the concept of mental illness and its history, a standpoint from which the very coherence of the concept of mental illness is called into question<sup>20</sup>, and where the psychological explanations of mental illness that were earnestly presented in the first part of the book come to be characterized as “mythical” explanations that fail to capture the real origins of mental illness, which ultimately lie in the incompatible demands imposed by society on the individual<sup>21</sup>.

Thus, in first part of the book, in chapters II through IV, Foucault follows the dialectical movement of the various answers that have been provided, from within psychology, to the question of the origin of mental illness. In chapter II, mental illness is approached from the naturalist perspective of developmental psychologists. From this standpoint, mental illness is conceived as a problem in the organic evolution (i.e. development) of the individual: in the course of the individual's development, the psychological functions of the well-developed adult are abolished and replaced by functions characteristic of individuals in prior stages of psychological development. Mental illness is in this manner conceived as regression to a prior stage of development. From this perspective, the possibility of mental illness is “virtually” present in the development of every individual.

In chapter III, which corresponds to a developmental theory enriched with the insights of Freudian psychoanalysis, mental illness is approached from the perspective of the history of the individual; it is regarded as a problem whose origin lies in the distinctively psychological history of the individual. From the perspective adopted in chapter III, the account offered in chapter II was incomplete in that regression to a prior stage of development, to which mental illness was reduced in that chapter, was presented as a natural phenomenon, and the question of what can bring about this phenomenon of regression in some individuals but not others, the question of what kind of morbid events trigger those reactive processes, was left unanswered. Mental illness was thus characterized as an ever present “virtuality” (i.e. latent possibility) in the life of any individual, but actual occurrences of mental illness in particular individuals remained unexplained. In chapter III, mental illness is no longer presented as an organic virtuality, but as the deliberate attempt on the part of the mentally ill patient to flee from the present<sup>22</sup>. In order to protect herself from a conflictual present, the patient replaces a conflictual experience of that present

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20. M. Foucault, *Maladie mentale et personnalité*, *op. cit.*, Introduction, Ch. 1.

21. *Ibid.*, Introduction to Part II, Ch. V, Conclusion.

22. *Ibid.*, p. 39.

by an aspect of her past experience that symbolically represents and solves the relevant conflict:

La maladie a pour contenu l'ensemble des réactions de fuite et de défense par lesquelles le malade répond à la situation dans laquelle il se trouve ; et c'est à partir de ce présent, de cette situation actuelle qu'il faut comprendre et donner sens aux régressions évolutives qui se font jour dans les conduites pathologiques ; la régression n'est pas seulement une virtualité de l'évolution, elle est une conséquence de l'histoire<sup>23</sup>.

Thus, if in chapter II, the history of the individual's *organic* development explained the *possibility* of mental illness, in chapter III, the psychological history of the individual's development is meant to explain how that possibility comes to be *actualized*.

Yet Foucault notes that much like the conception of mental illness in chapter II, the conception of mental illness described in chapter III also has its limitations. Mental illness is characterized as the result of a deliberate attempt on the part of the patient to flee away from a conflictual present. But Foucault observes that an experience of conflict does not always result in mental illness:

L'individu normal fait l'expérience de la contradiction, le malade fait une expérience contradictoire ; l'expérience de l'un s'œuvre sur la contradiction, celle de l'autre se ferme sur elle. En d'autres termes : conflit normal, ou ambiguïté de la situation ; conflit pathologique, ou ambivalence de l'expérience<sup>24</sup>.

Moreover, if fear is the *normal* reaction to an external danger, *anguish is the affective dimension of this internal contradiction*<sup>25</sup>. And while psychoanalysis has the resources to explain how mental illness arises in the case of any given individual, it does not explain why some cases of an experience of conflict issue in anguish while others do not. Thus a style of analysis that can account for the experience of anxiety and its emergence patterns is rendered necessary. Enter existential analysis:

[U]n nouveau style d'analyse s'impose : forme d'expérience qui déborde ses propres manifestations, l'angoisse ne peut jamais se laisser réduire par une analyse de type naturaliste [like the one presented in chapter II]; ancrée au cœur de l'histoire individuelle, pour lui donner, sous ses péripéties, une signification unique, elle ne peut

23. *Ibid.*, p. 44.

24. *Ibid.*, p. 48.

25. *Ibid.*

non plus être épuisée par une analyse de type historique [like the one presented in chapter III] ; mais l'histoire et la nature de l'homme ne peuvent être comprises que par référence à elle. Il faut se placer maintenant au centre de cette expérience [de l'angoisse] ; c'est seulement en la comprenant de l'intérieur qu'il sera possible de mettre en place dans l'univers morbide les structures naturelles constituées par l'évolution, et les mécanismes individuels cristallisés par l'histoire psychologique<sup>26</sup>.

Note that, just as he had in *IBDE*, Foucault is effectively suggesting that both human nature and the personal history of the individual can only be understood against the backdrop of the results of existential analysis. The conception of mental illness as the attempt to flee from a conflictual experience of the present, characteristic of Freudian psychoanalysis (as he describes it in the book) lacks the resources to explain why some such experiences turn into pathologies, and into pathological experiences of anguish, while others do not. The conception of mental illness presented in chapter IV is meant to address this issue by describing the experience of madness from the perspective of the mentally ill patient. The style of analysis is, in this case, phenomenological. The framework is that of existential analysis. The analysis reveals that the mentally ill patient abandons herself to the experience of a morbid world as a result of her incapacity to resolve the conflict of her present experience and to project herself into a future<sup>27</sup>.

In all, chapters II, III, and IV present a history of psychology meant to capture the dialectical progression of the psychological understanding of mental illness through three stages that correspond to three styles of analysis: the organic-naturalistic analysis that leads to a conception of mental illness as regression to a prior stage of development; the historical-psychological analysis that leads to a conception of mental illness as fleeing away from a present conflict into a past that provides a symbolic solution to that conflict; the phenomenological-anthropological analysis that leads to a conception of mental illness as abandonment to the experience of a morbid world as a result of the inability to resolve a conflictual experience of the real world and constitute one's experience as meaningful.

There is a sharp contrast between this dialectical historical perspective and the one perspective adopted throughout the framing sections of the book, throughout its second strand. While in this case, the driving question is still the question of the origin of mental illness, the answer to this question is no longer

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26. *Ibid.*, p. 53.

27. *Ibid.*, p. 68.

sought within the psychological sciences. The driving insight, presented in the introductory section of the second part of the book, is that mental pathology is an essentially historical phenomenon: “Un fait est devenu, depuis longtemps, le lieu commun de la sociologie et de la pathologie mentale : la maladie n’a sa réalité et sa valeur de maladie qu’à l’intérieur d’une culture qui la reconnaît comme telle<sup>28</sup>.” In light of this insight, the question of the origin of mental illness is displaced in a twofold sense. Displaced, first, in that its answer is no longer sought at the level of the individual: it is not sought in her organic development, in her psychological history, or in her experience of a morbid world. Its answer is now sought at the level of the culture that identifies certain forms of behaviour as symptomatic of mental illness, of the culture that confers upon a certain behavioral pattern the status of mental illness.

The question of the origin of mental illness is displaced also in this second, and more radical sense: Foucault’s enquiry into mental illness is no longer driven by the desire to understand mental illness, its causes, its origin. The main *object of enquiry* is now rather the culture within which a certain kind of behaviour is treated as a mental illness. The project is no longer that of finding out the conditions under which an individual can come to suffer from a given affliction the status of which as mental illness is taken for granted. Guided by the insight that what a culture regards as a mental illness is revelatory of the choices that it has made, the main goal of the second part of the book, as announced in its introductory section, becomes that of using mental illnesses as the means to understand the exclusionary choices operated by the culture that has conferred that status upon them. Thus, he concludes the introduction to the second part of the book as follows:

Les analyses de nos psychologues et de nos sociologues, qui font du malade un déviant et qui cherchent l’origine du morbide dans l’anormal, sont donc avant tout une projection de thèmes culturels. En réalité, une société s’exprime positivement dans les maladies mentales que manifestent ses membres ; et ceci, quel que soit le statut qu’elle donne à ces formes morbides : qu’elle les place au centre de sa vie religieuse comme c’est souvent le cas chez les primitifs, ou qu’elle cherche à les expatrier en les situant à l’extérieur de la vie sociale, comme le fait notre culture.

Deux questions se posent alors : comment notre culture en est-elle venue à donner à la maladie le sens de la déviation, et au malade un

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28. *Ibid.*, p. 71.

statut qui l'exclut? Et comment, malgré cela, notre société s'exprime-t-elle dans ces formes morbides où elle refuse de se reconnaître<sup>29</sup>?

Now, as I have noted, the final chapter of the book, chapter VI, marks a return to the project of the first strand, that of accounting for the origin of mental illness from a psychologist's perspective, through a psychological theory. The chapter is an attempt to explain why in the case of some individuals the demands imposed by society on the individual develop into instances of mental illness while other individuals are able to resolve such conflicts without falling mentally ill. And Foucault's strategy for addressing the question is to rely on Pavlovian reflexology. Thus the chapter effectively offers a psychologist's response to the question of the origin of mental illness, and the first strand of the book, the history of the dialectical progress of psychological accounts of mental illness, is weaved back into the book and seems to come into a full close.

This could seem to suggest that, by contrast to what I have been arguing, the two strands of the book are not at odds with each other, that they neatly complement each other. In the first part of the book, Foucault would have developed a history of the dialectical progress of psychological theory. The second part of the book would mark a transition, within the history of psychology itself, from an approach to psychology that focused exclusively on *The Psychological Dimensions of Mental Illness* (the title of the first part), to an enriched approach to psychology that also takes into account *The Real [i.e. Social] Conditions of Mental Illness*. Pavlovian reflexology, as the sole psychological theory capable of explaining how in the case of some individuals, mental illness originates as a response by those individuals to the contradictory demands that society imposes on them, would constitute the most advanced stage in the dialectical progress of the psychological sciences, and thus the final chapter of the history of that progress undertaken in the first part of the book. All in all, there would be no inconsistency between what I have been calling the two strands of *MIP*.

There is no doubt that that is the intended function of chapter VI within the overall architecture of the book. That, and of course, to borrow once again Defert's words, the ideologically bent "apologetic exposition" of Pavlov's reflexology. Yet the discussion of Pavlov does not settle the host of questions about the concept of mental illness, about its social origin, and about the potential of an enquiry into mental illness for shedding light on the society that grants it that status, questions explicitly raised by Foucault himself throughout the framing sections the book (i.e. Introduction, chapter I, the introduction of the second part, chapter V, and Conclusion).

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29. *Ibid.*, p. 75.

It is hard to overemphasize the depth of the shift in perspective beneath the apparent unity between these two strands of the book. That the explanations of existential analysis, which Foucault had praised both in *IBDE* and even a few pages before in the first part of *MIP*, are now described as *mythical* explanations is on its own indicative of a change of attitude within the book. But more importantly, the oscillating shifts in goals and approach that are observable within the text are inconsistent with the reading just sketched according to which its two strands are neatly interwoven. The problematization of the applicability of the concept of organic illness to the case of mental phenomena with which Foucault opens the book, and that he announced as one of its main goals, is at odds with the account of the origin of mental illness in terms of Pavlovian reflexology offered in Chapter VI, and with the choice of introducing the latter through a historical reconstruction of the dialectical *progress* of psychological discourse. Similarly, the two questions with which Foucault introduced the second part of the book, concerning the history of how “our culture” came to make the choice of excluding certain individuals as “mentally ill”, and of how it comes to express itself in such choices, are not settled by (and are arguably incompatible with) that Pavlovian account of mental illness.

The reason that I highlight the tension within *MIP* is not, needless to say, in order to pinpoint the weaknesses of a work that Foucault himself repudiated, and whose second, substantively revised edition he published only reluctantly. The significance of this tension, and of this phase of Foucault’s shift of attitude towards psychology for our purposes lies rather in that it marks the adoption, for the first time, of a critical distance (and one that is not simply reducible to an ideological critique à la Politzer) towards psychological explanations of psychological phenomena and, indeed, towards any discourse purporting to explain an alleged form of deficiency in a type of human being by reference to human nature: to its organic nature, to its psychological history, to its fundamental existential structures. For the first time, Foucault casts on the content of a theory of human being a regard of suspicion, asking not what the positive content of that discourse is, but what its exclusionary implications are, and subsequently asks what these exclusionary implications reveal about the society that chooses to regard them as rooted in human nature. Foucault’s guiding question is no longer what it was in *IBDE*: how mental illness is to be traced back to what is *most fundamentally human*, to the existential structures of Being-in-the-world. The question has now become, to insist: what does the collective choice that we have made to call such-and-such behavioural patterns instances of mental illness and to see mental-illness as a loss of the individual’s status as a free and autonomous subject tell us about ourselves, what does it tell us about the society that we live in, about the problems that it confronts?

### Synopsis: The Main Shifts in Foucault's Attitude Towards Psychology in 1953

The central features of the shift in Foucault's attitude toward psychology in 1953 can be understood in terms of the shift in Foucault's approach to psychology from the first to the second part of *MIP*.

In the first section, we saw that while Foucault was critical of scientific psychology even in *IBDE*, he initially subscribed to a conception of psychological discourse as (i) a discourse oriented towards a truth that is dictated by the nature of its objects alone, by the "essence" or "nature" of human being, and (ii) a discourse which, as a result, was to be evaluated in terms of the extent to which it adequately captured this truth. In this section, we've seen that by the time he finished writing *MIP*, one of the central principles at work in Foucault's approach to psychology is that psychological discourse has effects and is affected by phenomena that lie well outside the domain of the objects that constitute its subject-matter. If psychological discourse remains oriented toward psychological truths, Foucault's conception of what counts as psychological truth was substantively revised. On the revised conception, what counts as truth is not only determined by "purely psychological phenomena"—for there are no purely psychological phenomena that it would be possible to isolate from the cultural environment within which human psychology unfolds. The truth of psychological discourse is no longer regarded as dictated by the nature of its objects alone, by the "nature" or "essence" of human being. And this is not a result of what would be the naïve conviction that psychologists have failed to identify the "real truths" about human nature, or that what has been taken to be true psychological discourse has turned out to be false but will eventually, as the science progresses ever further, correspond to the truth. That, after all, was the form of Foucault's initial critique of scientific psychology in *IBDE*, and would not amount to a substantive shift in attitude towards the science as a whole, but only towards a particular set of theories and approaches within the science. The sense in which the truth of psychological discourse is no longer regarded as dictated by the nature of its object is rather that the "nature" of "the object of psychology", "normal", "healthy" personality, is come to be understood as essentially historical. Consequently, psychological discourse can be subjected to other standards than the descriptive adequacy of its claims. To the extent that it is partly determined by social-historical phenomena, and to the extent that it has extra-psychological social-historical implications, it can be evaluated in terms of its social and historical implications: it can be the object of a social-historical critique, and one, for that matter, that doesn't correspond directly to an ideological critique.

In other words, Foucault's change of attitude towards psychology in 1953 can be understood as a shift in his *object* of study, in the *question* that he sought to address, in the *goal* that answering this question was ultimately meant to achieve, and in the *method* employed in answering the question. At the end of 1953, Foucault's *object* of study no longer was mental illness as such, or the mentally ill individual, or human being in general, but the culture that assigns madness the status of mental illness; the *question* that Foucault sought to answer was no longer that of the origin of mental illness in the mentally ill individual, but its origin in the society that recognizes it as such; Foucault's ultimate *goal* in answering this question was no longer to understand the truth about mental illness, conceived as a truth about the mentally ill individual and more generally, as an internal possibility of human existence, it was to identify and understand the exclusionary choices operated by the culture that has granted madness the status of mental illness, and to identify the social cost of accepting the idea that there is a culture-independent truth about mental illness; the *method* was no longer that of writing an internal history of the sciences, but to write an external, critical history of the development in tandem of psychological theory, a series of practices regarding the treatment of the mentally ill, and a positive conception of "normal" or "healthy" human being. Foucault's change of attitude toward psychology was a change of attitude towards the origin and status of scientific *truths about human nature*, a change of attitude towards the origin of such truths, about their content, about implications, about their historicity. All these shifts in Foucault's attitude toward psychology can be traced to a single one: that there is no general concept of illness applicable both to organic and mental illness; that mental illness is not a purely natural phenomenon, not only in the sense that it is not purely organic, but also in the sense that contrary to one of the underlying assumptions of *IBDE*, it is not grounded in human nature "as such" but in its various concrete, historical forms.



Série Philosophie – ##  
Université Paris 1 Panthéon-Sorbonne

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# L'épistémologie historique

## Histoire et méthodes

sous la direction de  
JEAN-FRANÇOIS BRAUNSTEIN, IVAN MOYA DIEZ,  
MATTEO VAGELLI

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