

# Medicalization of Mental Disorder in Contemporary Health Care; a Foucauldian Appraisal

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## Abstract

The main claim in this paper is how mental disorders or psychological problems are medicalized in modern healthcare, and how they can be interpreted in Foucauldian perspective. But before this, we need to understand the term medicalization, and how psychiatry is medicalizing normal behavioral aspects. There is no as such a clear cut or categorical demarcation between normal and abnormal, that at which level we call a mental condition as a disease or disorders. Mental health is a global and unique concept among other health conditions that is the over treatment or medicalization of mental conditions, even by psychiatrists or by the pharmaceutical industry, which is broadening its field by inventing new illness and creating markets for their products to sell. The harm done through the medicalization of mental issues becomes the concern of medical ethicists, philosophers and other social scientists. When the normal living conditions are considered as disorders where people are made patients and need medical treatment or medical intervention for those problems. However the other life problems are also medicalized, but in the case of mental health, the phenomena is more powerful and need more attention. However, there is a growing trend in psychiatric shyness, behavioral disorders, learning disabilities and so on are treated much more medically, and especially in case of children where normal behavior and bad habits are treated pathologically.

**Keywords:** Foucault, medicalization, mental illness, health, modern

## Introduction

Medicalization as a paradoxical and a key issue in modernity has been used through various disciplines such as social science, philosophy, and bioethics and so on, it is defined as a process where non-medical issues are defined as medical and needs medical intervention for their solution. While using Peter Conrad understanding of medicalization “defining a problem in medical terms, usually as an illness or disorder, or using a medical intervention to treat it”<sup>1</sup>. Although medicalization is a very broad term, presently medicalization has been discussed from different angles, feminists discussed medicalization from gender basis that how women body is medicalized in a different way than man’s body. We will understand here medicalization within the growing complexity of a health system, that how the medical profession dominated our lives. With the increase in scientific technology and the growing of modern state, the concept of medicalization also emerged. The power of physicians is increasing and the direct to consumers by pharmaceutical companies in enlarging globally and particularly in the west by the health care system. To put it in a different way;

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<sup>1</sup> Conrad, Peter. “The shifting engines of medicalization.” *Journal of health and social behavior* 46, no. 1 (2005): 3-14. p. 3

“some people are more medically made up than others – women more than men, the wealthy differently from the poor, children more than adults, and ... differently in different countries and regions of the world”.<sup>2</sup>

Medicalization is the process by which “normal human behaviour and experience being “re-badged” as medical condition”<sup>3</sup>. Ivan Illich<sup>4</sup> also argued that dependence more on medicine makes people passionate about health and finally leads to medicalization. Thus it makes people not responsible for their actions, as they become habitual and more dependent on it. Conrad and others have discussed the changing engines of medicalization, where the doctors and medical professionals have fewer roles to play in the process of medicalization, due to the growing of biomedicalization and with the increase in technoscientific medicine.<sup>5</sup> However many argued medicalization benefited huge population due to the modern techniques, that it is now possible to cure almost every disease, but this can be accepted if there is a logical reason that the quality of life is improved by medication then it is accepted as good. Thus medicalization is neither good nor bad but in between the too, that the medicine is only used for the betterment of life or it will cause less or no harm.

Medicalization thesis is labeling a condition as medical whether social or personal and requires therapeutic intervention for its solution. There is a huge collection of research articles and books published on medicalization, so it has been discussed from various angles, literally, medicalization means “to make medical”.<sup>6</sup> More generally the term is the critic of medications and describes that something is wrong. Peter Conrad also wrote that how badness is turned into sickness by the medicalization.<sup>7</sup> And he explains it as “defining behavior as a medical problem or illness and mandating or licensing the medical profession to provide some type of treatment for it.”<sup>8</sup> Thomas Szasz has defined medicalization from the psychiatric perspective that how the normal behavioral problems are medicalized. Medicalization as such can be seen when a deviant behavior or sin, crime, and other social events are defined in medical terminology, and another important aspect is when normal life events such as aging, baldness, pregnancy, childbirth and so on are defined as medical problems and needs medical intervention.<sup>9</sup> Presently various medical techniques or procedures are used to increase the functioning or growth of the human organs by growth regulatory hormones or by the use of therapies.

So broadly we can see medicalization “involves the turning of non-medical problems into medical ones”<sup>10</sup> Ivan Illich viewed this medical network, that we have been dominated by the growing medical profession

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<sup>2</sup> Rose, Nikolas. “Beyond medicalisation.” *The Lancet* 369, no. 9562 (2007): 700-702. p. 700

<sup>3</sup> Van Praag, Herman M. “Nosologomania: a disorder of psychiatry.” *The world journal of biological psychiatry* 1, no. 3 (2000): 151-158.

<sup>4</sup> Illich I. “Medical Nemesis.” London: Calder and Byers, 1975.

<sup>5</sup> Abraham, John. “Pharmaceuticalization of society in context: theoretical, empirical and health dimensions.” *Sociology* 44, no. 4 (2010): 603-622.

<sup>6</sup> Conrad, Peter. “Medicalization and social control.” *Annual review of Sociology* 18, no. 1 (1992): 209-232. p. 210

<sup>7</sup> Conrad, Peter, and Joseph W. Schneider. *Deviance and medicalization: From badness to sickness*. Temple University Press, 2010.

<sup>8</sup> Conrad, Peter. “The discovery of hyperkinesis: Notes on the medicalization of deviant behavior.” *Social problems* 23, no. 1 (1975): 12-21. p. 12

<sup>9</sup> Tiefer, Leonore. “The medicalization of impotence: Normalizing phallocentrism.” *Gender & Society* 8, no. 3 (1994): 363-377.

<sup>10</sup> Poitras, Geoffrey, and Lindsay Meredith. “Ethical transparency and economic medicalization.” *Journal of Business Ethics* 86, no. 3 (2009): 313-325. p. 315

which “is one of the threats to the real life of human beings”.<sup>11</sup> He argued that people believe that the quality of life is improved, due to the development in the medical science, but it is true the people are always been told by their doctors that the previous medicine or the treatment have damaged you, and you need to take treatment for that. My concern is how the modern medicine is grouping and diagnosing mental disorders or the how individuals are grouped in different categories of patients due to the various conditions. This particular drive is in the interest and power of medical profession to medicalized daily life activities and different behavioral conditions. Illich and Foucault viewed these phenomena as “that physician expanded the list of formal disease entities to grant themselves more social power and authority”<sup>12</sup>. The lens of medicalization is gazing to penetrate through the ordinary life activities, such as shyness was previously considered as normal, now millions of people are suffering from “social anxiety disorder.”<sup>13</sup> By this growing number globally pharmaceutical companies are enjoying to make drugs for various disorders and illnesses, but the percentage of disorders are enlarging and more people are diagnosed with disorders and need psychiatric treatments and even some are developing multiple disorders and demanding multiple medications.

A behavioral or physiological disorder is medicalized if the “patient’s depression is medicalized when he is told that the cause is a chemical imbalance in his brain.”<sup>14</sup> And your medication for its treatment, but today the trend is increased that more and more psychological disorders are medicalized. Medicalization since last forty years has accelerated that more mental disorders are treated medically. To understand the engines of medicalization it is important to examine the facts those are responsible for its cause; there are various agents that contribute to medicalization such as physicians or psychiatrists, pharmaceutical companies, multimedia, internet, development in biomedicine and so on. In contemporary society, people have more faith in biomedicine. Drug industries have more interest in market and psychiatrist fits in that to conceive more public towards psychiatry as a scientific, by bounding with pharmaceutical companies.<sup>15</sup> With the passage of time, drug companies are deeply involved in treating mental health and targeting more and more people especially the children. Pharmaceutical industries advertise their products and send message to common public that child disorders such as anxiety, moodiness, shyness, learning disabilities and other difficulties need medication. “The pharmaceutical industry and psychiatry mutually promote medicalization of behavioral disorders; their motives are based more on profit margins than on behavioral research.”<sup>16</sup> So the medicalization has broadened beyond the pharmaceutical industry and psychiatry, and has controlled social system that people cannot think beyond the medical paradigms that the behavioral problems are labeled as mental disorders. In contemporary health care, everything belongs to and is controlled by the domain of medicine, from breathing air; to clean drinking water and maintaining the hygiene are all medicalized.

### **Mental Illness and Medicalization**

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<sup>11</sup> Illich, Ivan. “The medicalization of life.” *Journal of medical ethics* 1, no. 2 (1975): 73-77. p. 73

<sup>12</sup> Sadler, John Z., Fabrice Jotterand, Simon Craddock Lee, and Stephen Inrig. “Can medicalization be good? Situating medicalization within bioethics.” *Theoretical medicine and bioethics* 30, no. 6 (2009): 411-425. p. 415

<sup>13</sup> Aho, Kevin. “Medicalizing mental health: A phenomenological alternative.” *Journal of Medical Humanities* 29, no. 4 (2008): 243-259. p. 247

<sup>14</sup> Wyatt, W. Joseph. “Medicalization of Depression, Anxiety, Schizophrenia, ADHD, Childhood Bipolar Disorder and Tantrums: Scientific Breakthrough, or Broad-Based Delusion?.” *Postępy Nauk Medycznych* (2012). p. 11

<sup>15</sup> Ibid. p. 16

<sup>16</sup> Ibid. p. 18

In global health care, mental orders are now medicalized in the same way as physical disorders and are considered as biological phenomena caused by the internal pathology of an individual. We are treating natural human problems medically that we are criticizing the natural order of phenomena, by trying to change our mood, habits, behaviors and our appearances.

“A mental disorder is conceptualized as a clinically significant behavioral or psychological syndrome or pattern that occurs in an individual and that is associated with present distress or disability....In addition, this syndrome or pattern must not be merely an expectable and culturally sanctioned response to a particular event, for example, the death of a loved one.”<sup>17</sup>

In western culture, the notion of madness as an illness was not so dominant in early societies. All types of abnormal behaviors are viewed as madness in every society. However, those societies which are more religious were interpreting madness as something spiritual being. Earlier it was obvious that madness is a medical problem, and even physician was not playing a dominating role in treating madness in earlier western societies. Generally, before the 17<sup>th</sup> century mad people have free existence and were roaming along the roadsides of towns and cities. It was only the responsibility of family members to hospitalize disturbed individuals. Criminal mad and dangerous persons were legally handled. Now mad people are separated from the other deviants, it was not done mainly to give them special treatment, but to protect other people to get infected. Foucault says “The presence of the mad [in the institutions] appears as an injustice [not for the mad] but for others”<sup>18</sup> this was one of the intense pictures in the treatment of madness, however during the end of the 17<sup>th</sup> century these physical boundaries were removed in French asylums to liberate mad people.

Though a more popular, unitary and dominant notion of mental illness was only developed at the end of the 18<sup>th</sup> century. But with the development in medical science and modernity, mad people were treated scientifically. It was possible by the medical knowledge that supported and tackled concept madness, and finally by the end of 18<sup>th</sup> -century madness became a dominant concept of mental illness.<sup>19</sup> Now madness are practiced by the physicians and are viewed as a biological disease, it was institutionalized and many people are measured as sick, and anything resembling with madness medical treatment is given to them. However, Foucault’s main claim of reducing madness to mental illness deprives it of other important social meanings. What Foucault has to say is that reason becomes the cause of social norm, and insanity is silenced and considered as the opposite of reason. Following Foucault;

“‘The Great Confinement’ of the eighteenth century, where madhouses were reserved for the insane, and treatment displayed an emphasis on taming and discipline, including a liberal use of violence and torture, the nineteenth century was to be governed by ‘Retreatstyle’ moral treatment, which mixed religious and social remedies with medical measures.”<sup>20</sup>

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<sup>17</sup> Aho, Kevin. “Medicalizing mental health: A phenomenological alternative.” *Journal of Medical Humanities* 29, no. 4 (2008): 243-259. p.246

<sup>18</sup> Conrad, Peter, and Joseph W. Schneider. *Deviance and medicalization: From badness to sickness*. Temple University Press, 2010. p. 184

<sup>19</sup> *Ibid.* p. 47

<sup>20</sup> Ryang, Sonia. “A critique of medicalisation: three instances.” *Anthropology & medicine* 24, no. 3 (2017): 248-260. p. 251

This is to say that humanizing mad took the turn of medicalization; however, the medicalization rests on society and its institutions. In present societies due to modernization, the technological and various types of changes took place that attracted more people towards biomedical treatment for minor physical and psychological problems.

### **Foucault and Medicalization**

From Foucault's notion of medical surveillance the medicine that controlled certain human conditions as well as the forms of behaviors and perceives them through the window of medical gaze. This can be better understood in case of childbirths, from last three decades all the births remained under medical surveillance. Foucault deployed the growing medical intervention and the use of medical technologies in human life processes. According to Foucault during 17<sup>th</sup> and 18<sup>th</sup> century there was a tremendous development in medical sciences, medical technology, and medical procedures. Diseases were more accurately diagnosed and localized exactly. By the end of the 18<sup>th</sup> century, various medical physicians and other experts have meticulously conveyed and classified their perceptions with regard to mental disorders. Neurosis as a term was first used by the Cullen to mean disease not conveyed by fever or confined pathology. During this period clinicians propagated and promoted the organic medical model of mental illness and the theory of medicalization advocates that a wide range of behaviors are defined as medical problems and illness. Medicalization classifies and defines mental phenomena, in a way it provides us the descriptions for the growth of mental illness and also specified ways of treatment. Mental asylums come in excess in Europe, generally near urban centers and restricted and kept madmen, beggars, and non-productive people of the society there. Foucault declares that;

“The lunatic asylum or psychiatric hospital is the result of a synthesis between the newly perceived need to cure the mad whom their family cannot afford to treat at home and the old need to protect society. But this synthesis of a space of cure and a space of exclusion is soon forgotten in its historical origin and becomes perceived as natural: the mad are now locked up *in order to be cured*.”<sup>21</sup>

According to Foucault madness represents an opposite of reason, and it was made silenced and invisible in the boundaries of the asylums. The mad were cut-off from the society as they are understood as to disrupt social rules and accepted as unreasoned, but in the 19<sup>th</sup> century, it was finally seen as mental illness. He claims that these new treatments, known as ‘moral treatments’ in fact were no less controlling than the earlier methods. These treatments in fact according to Foucault were made to repeated brutality till the design of punishment and judgment was adopted by the patients. So in Foucault's view involvement of medical conceptualization in madness was mainly as a means of the social effort of silencing and controlling madness. This attempt was made to maintain social order, as the madness innately has the power to threaten the social order. Against the medicalization of madness Foucault's main arguments are; that from the Enlightenment period to the Middle Ages, the reason was made the bearer for all social practices, cultures and, concepts. By removing the madmen from the daily life practices and curbing them into madhouses or asylums, and demoralizing unreason by transferring madness into mental illness. Foucault says;

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<sup>21</sup> Foucault, Michel. *History of madness*. Routledge, 2013.p. xviii

“The doctor’s intervention is not made by virtue of a medical skill or power that he possesses in himself and that would be justified by a body of objective knowledge. It is not as a scientist that *homo medicus* has authority in the asylum, but as wiseman.”<sup>22</sup>

Physicians have not any explanatory theory for curing madness, but they worked as guardian and gatekeepers for madness. Finally how the mental illness becomes a dominant concept. What we see, that psychiatry is medicalizing our behavior, ordinary feeling, stress and the daily strains of life. How the natural shyness is given the name ‘social anxiety disorder’ and is treated medically. Then they prescribe harmful medicine for those non-existing diseases, they are now expanding the medical field, to trace that no one is normal. While using Foucault’s understands that modernity is the emergence of technological cultural, human life problems need to be resolved nationally. Madness for Foucault is due to cultural changes. It is more related to our societal changes, the way how are they politically and economically structured. In our modern societies how the power maximizes the freedom of some individuals.

While following Foucault, who gave the historical perception of madness, that how in classical age the mad people were imprisoned, but that was not done as the field of medical practice, it works only as a social prohibition to separate mad from rest of people. Medical doctors took control of madness and their dominating power produces knowledge and practice that gave rise to modern psychiatry. Foucault says those perspectives such as the practice of psychiatrists, the asylum and the exclusion of mad from the society all are the practice of power and knowledge. And generally, that leads to the final goal of modern economic development of our culture. In this type of modern culture the beliefs, behavioral issues are not seen as spiritual or moral problems, but as technical problems that need to be examined and treated by the professionals and the trained experts. At present, the psychiatrist’s practices, pharmaceutical industry and modern culture all are responsible for the medicalization of mental health.

## Conclusion

Remembering Foucault’s notion that prisons effectively produced delinquents rather than socializes criminals,<sup>23</sup> modern lifestyle approach is not making individuals accept health lifestyle, modern culture makes an urgent need of medical intervention for minor health and behavioral issues. In consumer societies, contemporary health care makes individuals daily life activities from food to clothing all are controlled by the medical professionals. The dominating power of institutionalization directs everyday choices, practices and lifestyle feedings. Medicine for Foucault now delivers raw material for modern living standards, the form of behavior and human existence and defines what is normal and what is abnormal.

Thomas Szazas talks that mental illness does not exist there is only physical illness, mental illness is a myth. He says that in contemporary health care the intervention of medicalization and pharmaceutical companies have expanded their boundaries of the notion of mental disorders. The minor behavioral problems, emotions, bad habits all are now characterized as mental disorders by psychiatrists. However Foucault calls it a gradual shift from madness to psychiatric disorder, these are the cultural, social - political and economic constructions. Foucault says that the construction of this object, mental disorder

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<sup>22</sup> Foucault, M. *Madness and civilization: A history of insanity in the age of reason*. New York: Random House. 1965. p. 217

<sup>23</sup> Foucault, Michel. *Discipline and punish: The birth of the prison*. Vintage, 2012.

‘psychiatric pathology’ and disciplined bodies come in the language of medical knowledge at the end of 18<sup>th</sup> century. With dominated medical discourse behavioral problems are medicalized and discussed in medical language as mental illnesses. In modern world, psychiatric knowledge is becoming so powerful that every individual has some minor or major mental disorder,

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