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## Book Reviews

**Andrew Scull, *Madness in Civilization: A Cultural History of Insanity from the Bible to Freud from the Madhouse to Modern Medicine*. Princeton University Press, 2015.**

Reviewed by Michael Palencia-Roth

In the concluding sentence of this long and impressive book, Andrew Scull writes: “[Madness] remains a fundamental puzzle, a reproach to reason, inescapably part and parcel of civilization itself” (411). He wants to leave us with this fundamental truth: the question of madness is inextricable from the question of civilization. In two previous works, *Museums of Madness* (Penguin Books, 1979) and *The Most Solitary of Afflictions: Madness and Society in Britain, 1700-1900* (Yale UP, 1993), Scull’s frame of reference was “societal.” In *Madness and Civilization*, his frame of reference has expanded to an inquiry into that largest collectivity that is the *raison d’être* of the ISCS: “civilization”.

*Madness in Civilization* mines Scull’s *Madhouse* (Yale UP, 2005), *The Insanity of Place, the Place of Insanity* (Routledge, 2006), and *Masters of Bedlam* (Princeton UP, 2014). In the preface to the second edition of his 1977 book entitled *Decarceration* (Rutgers, 1984), Scull writes of his own work as a scholar: “I hope it is not immodest to suggest that the republication of the original text is testimony to the continuing impact of my attempt to develop a historically informed macrosociological perspective on the structure of social control in contemporary England and the United States.” Writing today, Scull might substitute for “macrosociological” the word “civilizational”.

*Madness in Civilization* is therefore a kind of *omnium gatherum* that brings together all his previous work and thought on the subject and also provides a scholarly testament to the “continuing impact” of his life’s work. Scull habitually mines previous work and even repeats certain chapters in successive books. For example, a chapter entitled “The Rise of the Asylum” from *Museums of Madness* (pp. 13-48) is repeated, with that title, in *The Most Solitary of Afflictions*, and then expanded upon (pp. 1-45). Some of the language, details, and paragraphs from this and other chapters are distributed through *Madness in Civilization*. All of that makes an evaluation of *Madness in Civilization* difficult.

Other scholars have written on madness and mental illness from broadly historical and societal perspectives. Consider, for example, the co-authored book by Franz G. Alexander and Sheldon T. Selesnick, *The History of Psychiatry: An Evaluation of Psychiatric Thought and Practice from Prehistoric Times to the Present*; E.R. Dodds, *The Greeks and the Irrational*; Roy Porter's books, including *A Social History of Madness and Madness: A Brief History*; *The Routledge History of Madness and Mental Health*, edited by Greg Eghigian; Petteri Pietikäinen, *Madness: A History*; and of course Michel Foucault, *Madness and Civilization*, which is the abridged translated version (1965) of his massive *Folie et Dérailson: Histoire de la folie à l'âge classique* (1961). *Folie et Dérailson* was translated into English as *History of Madness* in 2006 and 2009. But Scull is more comprehensive and more wide-ranging on this subject than any other writer I have come across. Even Foucault's *History of Madness*, longer (by more than 200 pages) than Scull's *Madness in Civilization*, covers a briefer time period and has a more limited geographical scope.

Much of the work in the comparative history of civilizations has to do with such large and often rather abstract issues as state systems, symbolic systems, comparative religions, migrations, urbanism, economics, world-system theory, trade networks, urbanization, imperialism, industrialization, war and peace, and the like. Much attention has also been paid to the conception of "civilization" itself and the taxonomy of civilizations (how many there are, and where). Seldom is work in comparative civilizations reduced to the self, in particular to the mind and its illnesses, in relation to the society or civilization in which it is embedded. Scull's reduction focuses attention on a very specific problem and the threats it presented historically, and continues to present, to social order. The topic and Scull's treatment of it lead to a number of questions. "What do we mean by 'madness and what is its relationship to 'civilization'?" "Do the theory and treatment of madness belong to 'the civilizing process'?" "What causes insanity?" "What is the proper response to madness?" "What are the effects of madness, if left untreated?" "What is the opposite of madness?" "Does the very notion of 'civilization' – which includes the desire to be 'civilized' – require the isolation of the 'insane'?" Many other questions could be asked.

*Madness in Civilization* is divided into twelve substantial chapters: Confronting Madness (10-15); Madness in the Ancient World (16-48); The Darkness and the Dawn (48-85); Melancholie and Madnesse (86-121); Madhouses and Mad-Doctors (122-161); Nerves and Nervousness (162-187); The Great Confinement (188-223); Degeneration and Despair (224-267); the Demi-fous (268-289); Desperate Remedies (290-321); A Meaningful Interlude (322-357); A Psychiatric Revolution? (358-411). The chapter titles signal their contents and announce Scull's broadly chronological approach to the subject.

He distinguishes his subject from the history of psychiatry (which is a modern term invented in 19th-century Germany) because ‘madness’ has always existed in all societies; it is part of the history of humankind. He puts it this way: “Madness and its cognates – insanity, lunacy, frenzy, mania, melancholia, hysteria and the like – were terms in general usage” (12) throughout history and Scull’s particular interest is in “the encounter between madness and civilization over more than two millennia” (12).

As Scull progresses through the history of madness, his scope becomes increasingly secular. It also narrows from “madness in civilization” to “madness in society”. One might say, therefore, that as Scull approaches modernity, his analysis becomes less “civilizational” and more “societal”. This is in part because he is tracking a movement, and in part because he becomes increasingly interested in medical issues per se. He begins in the ancient (western) world, in Palestine, Greece and Rome, with a nod to Imperial China (the Qin and Han Dynasties, 221 BCE to 220 CE) (36-47). Then he moves to early Christian culture and the rise of Islam as he focuses on the European Middle Ages. The references to Islam and madness are relatively brief. Though Islam is dropped from consideration in the early modern period and beyond, what is important here, to my mind, is that Scull recognizes Islam’s positive influence on the development of medieval Christian institutions for the insane, especially in Spain (85).

In the earlier centuries of western history, up through the European Middle Ages, madness was viewed primarily through a religious lens. For example, the Greeks viewed epilepsy as a “sacred disease” (26) and said of madness, as a quotation mistakenly attributed to Euripides suggests, that “those whom the gods would destroy they first make mad”. But Euripides himself actually gives a more psychological interpretation of madness when he describes how Medea, driven mad by her husband Jason’s infidelity, kills her own children. In addition, the followers of Hippocrates (460-357 BCE), in discarding religious explanations for the origin of madness and emphasizing more physical origins in the body (this became the humoral theory of illness), set the stage for the competing religious and secular interpretations of madness throughout western history. The Romans continued in a similar vein. Both cultures “bequeathed,” says, Scull, “both natural and supernatural accounts of the ravages of madness to subsequent generations. Doctors and priests offered comfort and solace in different ways” (35).

In emphasizing “supernatural accounts,” Christianity followed Hebrew tradition (for instance the idea of the inspired prophet). Medieval Christianity is full of stories of “divine madness” and the “raptures of Christian visionaries and saints” (36). A contrary interpretation of the origin of madness also was prevalent: madness as demonic possession, a view that predominated in Christianity in early modern European history.

These weren't the only views on madness, however, and in the early modern period, as well as into the 19<sup>th</sup> century, madness also became something of a fashionable illness in the guise of depression and especially melancholy, even to the point of being associated with genius and creativity. Madness increasingly became part of the history of art and literature, from Albrecht Dürer's *Melancholia I* (1514) to Ariosto's *Orlando furioso* (1532), Shakespeare's *King Lear* (circa 1608), Cervantes' *Don Quijote de la Mancha* (1615), and Robert Burton's *The Anatomy of Melancholy* (1652), to mention but a few titles.

Present throughout Scull's work is a binary view of the history of madness in civilization. Madness is either religious or secular in origin. It is physical, originating in the body (this is the humoral theory of madness which Dürer, for example, relied on), or it is spiritual, originating in the psyche or soul. It is biological, originating in the brain, or it is mental and thus accessible through psychoanalysis. The binary view is even present in the term "schizophrenia" or "split mind." Whichever half of the binary one believed to be the origin of madness determined, in part, the treatment of the person believed to be insane. The belief in demonic possession as the cause of madness led to practices like exorcism and witch-burning. Belief in supernatural causes, left unexplained or not directly attributed to Satan, led to more benign treatments such as housing the insane in charitable institutions supported by the Church. The conviction that the insane were dangerous and needed to be isolated from society led to the creation of asylums. Scull details the establishment of such institutions in the English-speaking world, the most famous of which was the Bethlehem Hospital, founded as a religious charity outside London in 1247 and the antecedent of the more "secular" hospital known as "Bedlam". The separation of the insane from society is Michel Foucault's principal focus in *Madness and Civilization* and *History of Madness*. As did Foucault, Scull calls this development "The Great Confinement" (188-223), which for him began in a definitive way in the 18<sup>th</sup> and 19<sup>th</sup> centuries and has continued into the present. For Foucault, in *History of Madness* (48), the "Great Confinement" began in Paris in 1656 with the royal decree which set up the Hôpital Général. For both Foucault and Scull, the "Great Confinement" accelerated the development of a more secular and, in some ways, a more inhumane treatment of madness.

That more inhumane treatment is linked, sadly, to the predominance of the view of madness as a societal problem and a medical issue. The history of madness in the modern era becomes increasingly the history of psychiatry, whether through the treatment of hypochondria, hysteria and other nervous disorders, or the application of psychoanalysis to a patient's dreams in the treatment of neuroses. 19<sup>th</sup> and 20<sup>th</sup>-century remedies for madness have included the inducement of fevers and malaria (300ff), the application of electrical shocks (308ff), sensory deprivation, a particularly brutal surgery known as transorbital lobotomy (316), and, most recently and most prevalently, the use of psychotropic drugs.

In sum, the view of madness has evolved from a disease of the soul or psyche to a disease of the mind and, in the case of psychiatry and pharmacology, a disease of the brain.

The treatment of the mentally ill has increasingly relied upon the pharmaceutical industry. “Anti-psychotics and anti-depressants,” writes Scull, “are among the most profitable of all drugs sold on the planet” (402). More recently, it has been suggested that the cause of madness can be even more precisely determined. Though Scull does not dwell on this fact, research has shown that in at least 70% of cases there is a genetic component to a disease like schizophrenia, though a direct causal link between a gene or particular set of genes and the disease has not been proven. The status of research in this field is summarized by Courtney Humphries in his essay on “Probing Psychoses” in the July-August issue (2017) of *Harvard Magazine*. The new neuro-scientific genetic approach is at odds with traditional interpretations of mental illness in the West, “from the Bible to Freud,” as Scull’s subtitle puts it, which sees it as coming from the psyche or soul of the person.

Scull is generally dismissive of Foucault’s work, but he shares with him the view that institutions or asylums for the insane historically have mostly been punitive in nature. For both men, the treatment of the insane is a moral issue that says a great deal about the society in which diagnosis and treatment take place. The issue is moral because throughout history, Scull says, it is the society itself which must bear some responsibility for the mental illness of individuals within it. Indeed, after more than 400 pages of detailed history, of example after example and story after story, Scull suggests that despite all the attempts by shamans, healers, medical doctors, psychologists, psychiatrists, and neuroscientists, we have not progressed as a society as much as we should have. “Modern psychiatry and its potions notwithstanding,” writes Scull, “one of the more sobering realities about serious mental illness in the twenty-first century is that its sufferers not only die at a much younger age on average than the rest of us (as much as twenty-five years sooner), but also that the incidence of serious illness and mortality in this population has accelerated in recent decades. On this most basic of levels we seem to be regressing” (406). In sum, after more than two millennia, we still have not been able to solve the mystery of the causes of madness and its most effective and humane treatment. Where do the roots of this mystery lie? The roots lie somewhere, Scull says, “in the murky mix of biology and the social” (411). This is not an optimistic conclusion, but it is probably the most appropriate one.

I believe the praise for this book to be largely deserved. “A work of heroic scholarship,” says Elaine Showalter of Princeton University. “Brilliant, provocative and hugely entertaining,” says Dirk Wittenborn, author of *Pharmakon*. “A wonderful book, fascinating and beautifully written,” says Sylvia Nasar, author of *A Beautiful Mind*. “There is no other volume comparable to this in scope,” says David Healy, author of *Pharmageddon*. “Mr. Scull’s tone is elegant, his scholarship immaculate. The story he tells is riveting,” writes Joanna Bourke in *The Wall Street Journal* (April 2015). What all these comments gloss over is the following. What distinguishes *Madness in Civilization* and makes it more than ordinarily significant is the civilizational perspective. It is there where Scull, in my view, is most illuminating and suggestive.