

# Chapter 1

## The History of Unreason: Social Construction of Mental Illness

**Samuel Teague**

*Swinburne University, Australia*

**Peter Robinson**

*Swinburne University, Australia*

### **ABSTRACT**

*This chapter reflects on the importance of the historical narrative of mental illness, arguing that Western countries have sought new ways to confine the mentally ill in the post-asylum era, namely through the effects of stigma and medicalization. The walls are invisible, when once they were physical. The chapter outlines how health and illness can be understood as socially constructed illustrating how mental health has been constructed uniquely across cultures and over time. To understand this process more fully, it is necessary to consider the history of madness, a story of numerous social flashpoints. The trajectories of two primary mental health narratives are charted in this chapter. The authors argue that these narratives have played, and continue to play, an important role in the social construction of mental illness. These narratives are “confinement” and “individual responsibility.” Drawing on the work of Michel Foucault and Roy Porter, the authors describe how Western culture has come to consider the mentally ill as a distinct, abnormal other.*

### **INTRODUCTION**

In the years preceding the seventeenth century, the mentally ill were placed on boats, taken to foreign locations, and dumped there, and for European populations, this was the primary method for dealing with a portion of society considered abnormal (Foucault, 1967). Michel Foucault (1967) described this *Ship of Fools* as a vessel for those who had no real connection to time or place, for “as the madman sets sail for the other world, it is from the other world that he comes when he disembarks” (p. 8). This image of the mad as incongruous and lost on the high seas resonates in the imagination of the twenty-first century sociologist, because while the *Ship of Fools* no longer exists, the authors suspect that society’s perception of the mentally ill as both deviant and abnormal endures.

DOI: 10.4018/978-1-5225-7402-6.ch001

Even throughout the twentieth century, western civilization continued to perceive and construct mental illness as an abnormality. In the original 1952 edition of the Diagnostic and Statistical Manual of Mental Disorders (American Psychiatric Association, 1952), patients could be diagnosed under one or more of 106 conditions. In 1994, the DSM-IV contained nearly 300 disorders, an increase of close to 300% in just five decades (American Psychiatric Association, 1994). Peter Conrad (2007) included these statistics in his thesis on the problems inherent in modern medicalization, and used them to outline the modern trend within which human beings are increasingly defined as sick rather than healthy, and as abnormal rather than sane. Certainly, the introduction of Prozac in 1987 as a drug for the treatment of depression has signaled the dawn of a new era where antidepressant medication is used to treat “life problems” as well as serious illness (Conrad, 2007, p. 61). In this chapter, we show that from the *Ship of Fools* to the introduction of Prozac, western civilization has sought to understand and develop ways of controlling those being treated for mental illness.

This chapter details the history of mental illness, as portrayed by Roy Porter (1987; 2002), Michel Foucault (1967), Andrew Scull (2015), Erving Goffman (1959; 1963), and Peter Conrad (2007). The authors trace the trajectory of the principal narratives that have characterised this history, and outline how they persist and operate today. Scholars who have sought to interpret present media portrayals of the mentally ill have neglected an appreciation of the history of mental illness. An account of the history of mental illness is critical in interpreting the present socio-cultural media landscape. In constructing this detailed historical account, the chapter is divided into four parts.

The first introduces the notion that the lived experience of mental illness can be understood as socially constructed. Attention is given to the debate between essentialist and constructionist perspectives, and the authors outline how the two can be considered in unison. The section summarizes the biomedical approach to health for the purpose of detailing how social understandings of health and illness are constructed uniquely across cultures. The second section of this chapter describes the history of madness, and drawing predominantly on the work of Michel Foucault, the authors chart the trajectory of two primary mental health narratives which have played, and continue to play, an important role in the social construction of mental illness. These narratives are “confinement” and “individual responsibility”. In part three, this historical account continues, addressing the legacy of Sigmund Freud, the closing of asylums in the 1980s, and an account of the breadth and scope of modern medicalization. The chapter concludes with a focus on Australia’s mental health history from 1870 to the present.

## **BACKGROUND**

### **Mental Illness as Socially Constructed**

The experience of mental illness can be understood as socially constructed. By considering mental health from this standpoint, emphasis is placed on the importance of historical accounts, the mental health narratives that underpin these, and print media’s role in shaping public attitudes towards the mentally ill. It is the social constructionist standpoint that forms the foundation for this chapter. Questions around how mental illness can be understood have long been characterised by the philosophical debate between “constructionists” and “essentialists”. Greider and Garkovich (1994) argue that even the physical environment – a wheat field or savannah plain – can be understood as a socially constructed “symbolic landscape” (p. 1). They propose that a real estate developer, a farmer, and a hunter each perceive the

17 more pages are available in the full version of this document, which may be purchased using the "Add to Cart" button on the publisher's webpage:

[www.igi-global.com/chapter/the-history-of-unreason/213556](http://www.igi-global.com/chapter/the-history-of-unreason/213556)

## Related Content

---

**Social Functioning, Interpersonal Difficulties, Social Deficits, and Social Skills Training in ADHD**  
Vaishali S. Chaudhari (2021). *New Developments in Diagnosing, Assessing, and Treating ADHD* (pp. 196-210).

[www.irma-international.org/chapter/social-functioning-interpersonal-difficulties-social-deficits-and-social-skills-training-in-adhd/259304](http://www.irma-international.org/chapter/social-functioning-interpersonal-difficulties-social-deficits-and-social-skills-training-in-adhd/259304)

**Servant Leadership: School Counseling During the Pandemic**

Maritza Chaand Andrea Perez (2022). *Best Practices for Trauma-Informed School Counseling* (pp. 90-111).

[www.irma-international.org/chapter/servant-leadership/305568](http://www.irma-international.org/chapter/servant-leadership/305568)

**Outdoor Approaches for Smartphone Addiction**

Danielle McKain (2019). *Multifaceted Approach to Digital Addiction and Its Treatment* (pp. 292-308).

[www.irma-international.org/chapter/outdoor-approaches-for-smartphone-addiction/229205](http://www.irma-international.org/chapter/outdoor-approaches-for-smartphone-addiction/229205)

**Managing Stress and Overcoming Traumatic Workplace Betrayals**

Denise Gates (2023). *Perspectives on Stress and Wellness Management in Times of Crisis* (pp. 51-62).

[www.irma-international.org/chapter/managing-stress-and-overcoming-traumatic-workplace-betrayals/321218](http://www.irma-international.org/chapter/managing-stress-and-overcoming-traumatic-workplace-betrayals/321218)

**Coping With Compassion Fatigue Through Self-Care**

Trudi Pinnick Wolfe (2022). *Self-Care and Stress Management for Academic Well-Being* (pp. 102-123).

[www.irma-international.org/chapter/coping-with-compassion-fatigue-through-self-care/305948](http://www.irma-international.org/chapter/coping-with-compassion-fatigue-through-self-care/305948)