Confessions of a Modern, Disciplined Madwoman: Weber Reading my Diary

I clench my jaw when I sleep. I move my toes around in my shoes, touch-typing the same word or phrase over and over again on an imaginary keyboard on the soles of my boots. On bad days, during the worst periods, I experience what Jackie Orr accurately labels “heart-racing attacks of floating terror” which feels like being electrocuted with a unique, distilled form of terror. Other days, it’s less dramatic, but still, everywhere I go there is a voice in the back of my head asking: what if you have an attack here? Or there? What will you do? What will people think? Can you flee? And where can you flee to? I’m sometimes too nauseous to eat. My heart constantly hurts, like it’s clenched in a fist. I can’t sit still. Or I want to sleep all the time. I make lists of things that I repeat over and over again in my head. On a bad day, I get a terrible, dangerous thought in my head and repeat that over and over again, against my will. I have nightmares that I am institutionalized. This is my madness.

As a result of the Age of Enlightenment, empiricism, reason, and rationality were placed on pedestals, took over the arenas of science, technology and politics, and became defining features of modernity. Weber writes of this change where “everything, and especially those ‘imponderable’ and irrational emotional factors, are rationally calculated—in principle, at least, in the same manner as one calculates the yields of coal and iron deposits,” (Weber, 254). Understandings of mental health were one of the many victims of this rationalization regime. As a consequence, my madness is viewed as fitting into four distinct, contained categories of “disorder”—panic disorder, obsessive compulsive disorder, generalized anxiety disorder and mild depression. In order to become “better”—I take .5 milligrams of Lorazepam twice daily (with room for an extra .5 milligram pill on an especially panicky day), as well as 20 milligrams of Prozac and 150 milligrams of Wellbutrin once a day. This, in combination with one-hundred and ten minutes of psychotherapy a week, are supposed to “fix” me.

Illouz draws on Weber’s analysis of the rationalization and disenchantment representative of modernity in her book Why Love Hurts: A Sociological Explanation. She applies this analysis to compare our historical and contemporary understandings of love. She writes, “The result of this reduction of love to brain chemistry is to dispose of a mystical and spiritual view of love and to substitute for it a new form of biological
materialism,” (Illousz, 167). Similarly, the reduction of madness to brain chemistry disposes of a mystical and spiritual view of madness. In Shakespeare’s *Midsummer Night’s Dream*, Helena illustrates the historical understanding of love—where it is viewed mystically and spiritually. “Helena naturally expresses her love to her beloved in a way that would be interpreted today not only as a form of self-abasement but as a pathology. Shakespeare’s world, by contrast, is likely to have viewed this more benignly, as an ordinary manifestation of the ‘madness of love,’” (Illousz, 165). Shakespeare’s world, as well as the rest of the pre-Enlightenment Western world, had different notions of madness altogether. Madness was seen as much less containable, definable, and calculable. As a result, there was room for a more holistic, nuanced understanding of madness—one that was less focused on pathology, and included an understanding of the strengths, benefits, and wisdom that came along with the suffering. I have had to claim this pride for myself, in a world that tells me, and all other mad people, that we are broken and our “disorders” are only deficits in our lives.

And so I try to live in between both worlds—the hyper-rationalized and calculated world that Weber describes, and the prior world—grounded in tradition, religion, spirituality, and the incalculable. I view my disorders (which, yes, I consider disorders) as a blessing and a curse. My madness has brought me incalculable pain, fear, and suffering, but it has also helped me understand the complexities and nuances of my body and mind, shoved me into the present moment, when I so often drift off into the past or future, and allowed me to see the world in starkly different ways. It has made me a more intentional person, a more grateful person, and a more compassionate person. Modernity’s pill regimens and the Diagnostic of Statistical Manual of Mental Disorders diagnoses fail to account for this. At the same time, I am grateful for the medication that helps me get through the darkest patches and allows me to feel a little more like myself (whatever that means). And I am grateful for the diagnoses, and list of symptoms that come along with them, because having a name for the darkness makes it just a tiny bit less scary, and reminds me I am not alone.

At the present moment, along with the pills and the therapy, I have two main ways of controlling my madness—discipline and work. Weber describes discipline as “the consistently rationalized, methodically trained and exact execution of the received
order, in which all personal criticism is unconditionally suspended and the actor is unswervingly and exclusively set for carrying out the command.” (Weber, 253). In the chapter Reading the Slender Body, Bordo applies this analysis of discipline in society specifically to women’s bodies and minds. She argues that the societal ideal of a tight, contained body symbolizes a “body that is protected against eruption from within, whose internal processes are under control,” (Bordo, 190). When I read this, I realized that maybe there was more to my nightly gym visits than I had perceived. Since my most recent bout of acute madness began, I have been going to the gym everyday, sometimes twice a day. I knew I wasn’t going for my weight—I don’t care about losing weight—I was going for my madness, to try to burn off some of the adrenaline that was keeping my mind in flames. But I now recognize that in addition, I may have been going for my body—not to make it skinnier, but to make it tighter, to make it more contained, in the hopes that maybe that would make my madness more continued as well. This discipline of going to the gym at least once a day and running or swimming for at least 25 minutes is just one part of a rigid routine I have stuck to since the breakdown. Along with exercise, I make sure to sleep eight to ten hours a night, write down my dreams, drink no alcohol or caffeine, and journal every day—compulsively documenting both the daily occurrences in my life and wild fluctuations in my mind. The discipline society has engrained in me is illustrated in my exact execution of this routine, in order to carry out the societal command of being “normal” and the personal goal of being ok.

The other way I control my madness is through work. In “The Spirit of Capitalism,” Weber writes, “Man is dominated by the making of money, by acquisition as the ultimate purpose of his life. Economic acquisition is no longer subordinated to man as the means for the satisfaction of his material needs,” (Weber, 4). Despite my resistance, there was clearly some success in raising me as a good capitalist hard-working American—I’m always working, working for money that I don’t need right now, and that I won’t let myself spend, but that I want to acquire. I always want to see my bank account rising. The capitalist spirit in me has become especially apparent in this period of recovery, where I try to control my madness by making money for the sake of making money.
While Weber is helpful in analyzing the current situation I find myself in, Weber is also partially to blame. To put it simply, critical social theory contributes to my anxiety, panic, and depression. I know that isn’t really social theorists’ fault—it is the fault of those that make our societies unjust, inequitable, and violent—social theorists are just the bearers of the bad news. But the mindset they encourage—to question and analyze everything, and constantly zoom out from your micro moment to the macro framework of your community, your society, and your world—doesn’t exactly do positive things for my mental health. Weber wrote, “modernity is an ‘iron cage’.”

Reading this makes me feel panicky. A panickyness that is measured, rationalized, fit into tight categories, and prescribed certain milligrams of different chemicals—the same process of rationalization that allowed for the spirit of capitalism to take hold. Furthermore, the strategies I use to contain my madness illustrate the discipline that society has conditioned into me—that I am now able to exercise all by myself.