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HISTORICAL REMARKS ON VARIOUS WESTERN UNDERSTANDINGS ABOUT MADNESS

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ABSTRACT

This paper aims to promote an investigation in which contributions from the most diverse areas of knowledge, including history, the right to psychology and psychiatry, are of paramount importance, regarding the evolution of the concept of madness and the role the madman's social life along the trajectory of Western societies, seeking to clarify how the object of discourse now under analysis was treated at each historical moment, from the social, legal, political and health sciences point of view, until reach the scenario that is presently present, in which the questions related to the psychiatric reform and the antimanicomial fight, as well as those that refer to the autonomy of the subject that lives with some type of mental suffering, gets an increasing prominence.

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INTRODUCTION

Throughout the history of mankind, the phenomenon of madness has had many meanings. If it is currently treated from the point of view of mental or behavioral disorder, there was a time when it was not viewed from a medical or scientific point of view, but from a religious and supernatural point of view. It must be said, however, that something never ceased to exist in human societies concerning the figure of the madman: his social role, which changed according to the period experienced, so that sometimes took the place of the excluded, being on the fringes of society and at other times was considered fit to socialize with others. Thus, the purpose of the present reflection is precisely to make a brief analysis of the evolution of the madman's social role, as well as the conceptions that formed about madness, from Classical Antiquity to contemporaneity, highlighting the main characteristics of current thinking in each historical moment, as to the way in which the issues under consideration were viewed and understood by Western peoples. This is what will be done from the next topic.

Notes on madness in classical antiquity

In classical antiquity, madness was conceived from an essentially mythological point of view. This means that the prevailing idea at that time, at least initially, was that mental disorder would be caused by divine intervention.

According to Pessotti (1995), this was "a resource of divinity so that its designs or whims were not contrasted by the will of men." Thus, in the Socratic period (5th century BC), the madman was one who suffered not only from the whims of the gods, but also from a kind of vengeance perpetrated by these supernatural entities, in order to restore the broken order of man through your actions. Before that, around the ninth century BC is *Homer*, through his poetry, who brings the first concept of madness, according to which it is linked to the unreason, with the loss of conscious control of himself linked to the work of gods and other entities. It is in the interference of the gods on the thinking and action of men that behaviors that reveal disequilibrium, fearlessness and exacerbation are justified (VIECELI, 2014). In this sense, healing happens when the mortal character no longer wants to overcome or resemble the gods, when he no longer wants to escape his destiny, as well as rejoins the social model from which he has deviated. At this point, it is worth noting that since madness is seen as the result of supernatural intervention, there is no stigma or remorse for one who is struck by moments of foolishness. Thus, the supernatural intervention acts as a defensive mechanism, causing men irresponsibility and giving them serenity. The madman, therefore, was not ascribed responsibility for acts performed under the influence of the heavenly forces (Cherubini, 2006). Also in the Greek tragedies it was possible to find different meanings of what was then understood as "madness". Pessotti (1995) explains that the central idea of the tragic texts was the approximation

of the deviant behavior of man, especially the imbalance, the outburst and the exacerbation; to the causal chain of madness. What the ancient Greek tragedy presents as madness is, in fact, something manifold: these are different forms of deviation from lucidity through delirium and altered states in which trances, celebrations, and rituals took place (RIBAS, 2014). In this wake, Professor Iara Antunes de Souza (2018) reports that the authors of the time did not intend to present a theory of madness, but their characters presented different forms of it, such as melancholy, mania, paranoia and psychotic break (portrait of schizophrenia). For example, is the alternation of consciousness with the madness, the *Agamemnon* of Aeschylus, the character Cassandra expressed his madness sent by Apollo; that in Sophocles's *Ajax*, the goddess Athena shames the namesake hero by making him crazy; and finally, that in Euripides's *Heracles* and *Bacchantes*, madness is a good that comes from abroad, sent by a god (ARAÚJO, 2011).

It is Hippocrates who, opposing these dominant views, breaks with irrationality as the foundation of the disturbed mind model and elaborates a medical conceptualization of madness based on rationalist explanations that mental illnesses have natural causes. Demonic conceptions and explanations of madness are set aside. (OLIVEIRA, 2002). The madness is then linked to medicine and comes to be regarded as a disease, whose origin would be a physical problem, determined by the humidity of the brain. Thus, the treatment occurred by cleansing the body, removing the humidifying substances. On the other hand, in practical observation, the sick person was naturally healed over time. (SOUZA, 2018). Even in ancient Greece, one cannot fail to refer to Plato's conception of madness. In a particular passage in the "Phaedrus" dialogue, there is a speech attributed to Socrates in which the philosopher states that "madness comprises two species, one due to body ailments, the other from a divine inspiration that throws us out of the ordinary rules" (2000). This second sense of madness, that is to say, was not seen as something negative, but as a privilege, a divine gift. As Vasconcellos (2000) explains, Plato conceived four types of madness: divinatory, telepathic, poetic, and erotic, each of these follies having a divine origin, and corresponding to a kind of thinker, a kind of wise. Divinatory delirium gives birth to fortune tellers, from telepathic delirium appear priests, poetic delirium, as it could be, inspires poets and from erotic delirium is born the philosopher, the true sage. With erotic delirium, which Plato presents as a privilege over other kinds of delirium, it becomes possible to meet the sacred with the profane. To the Greek philosopher, "the madness inspired by the gods is - by its beauty - superior to the wisdom that men are the authors." (2000). Therefore, it can be concluded that, as the erotic delirium was thought by Plato, there is no radical opposition to the image of the philosopher. The friend of wisdom is one who, inspired by Aphrodite, is able to contemplate beyond what the eyes can see, the hands touch and the lips feel (VASCONCELLOS, 2000). On the Romans' conception of madness, on the other hand, it is considered that they were strongly influenced by Greek society, depending on the theories formulated by them for the elaboration of their philosophical and medical ideas about such phenomenon. Although there was, at the time, an association of madness with bacchanals and furies, within the framework of superstitious practices, much progress has been made regarding the study and care of the person affected by mental illness (OLIVEIRA, 2002). In addition, several authors interested in the subject were prominent in the period,

including Claudio Galeno, who was responsible for systematizing the doctrines of Hippocrates and revitalizing the theory of humors that he thought. In this sense:

Galen, in the second century AD, with the prestige of his authority, revitalized the humoral doctrine and stressed the importance of the four temperaments, according to the predominance of one of the four humors: bloody, phlegmatic, choleric (de cholé, bile), melancholic (de melanes, black + cholé, bile). Choleric, therefore, is the one who has the most yellow bile, and the melancholy one who has the most black bile. In this way, the notion of equilibrium and harmony of moods is transferred to people's behavior (Diepgen, 1932, p. 77). The terms "good mood", "bad mood", "humorous", "moody" are reminiscent of the concepts of *eucreasia* and *dyscreasia*. (REZENDE, 2009, p. 52).

Finally, it should be mentioned that it was the Romans who were responsible for giving rise to the curatela institute, intended for the administration of the goods and of the very person of those who were considered crazy, prodigal, or under the age of twenty-five (25). At that time there was no need for prior interdiction. According to Oliveira, "In a culture that is globally action-oriented, effective, and capable of controlling individually and collectively, the mentally ill was legally conditioned on his freedom to act and deemed incompetent in managing his personal and economic affairs." (2002). José Cretella Jr., in his "Course of Roman Law", preaches that to designate what today is called "crazy", the Romans used the expressions *furiosus* and *mentecaptus*. The first would be the madman who alternates periods of madness with periods of lucidity, and during the latter he would be able to practice the acts of civil life, while the *mentecapti* would be the permanent fools, without intervals of lucidity. (2007). In addition to the category of madmen, there was also the figure of the prodigal, that is, the one who squandered his wealth in such a way as to endanger the family patrimony, the ownership of which would pass to the heirs after his death. Prodigality was also a cause by which people could be subjected to curatella. However, the curatorship of the prodigals required the presence of two conditions: that the prodigal had children, and that the goods had a certain origin, namely that of paternal relatives (CRETELLA JÚNIOR, 2007). The genesis of the institute goes back to the Law of the Twelve Boards, which in item 8 of the fifth table, provided that if one became mad or prodigal and had no guardian, his person and his assets would be entrusted to the curate of the *agnados* and, if there were no *agnados*, to the *kind*. For this rule to be better understood, one must resort to the classic "The Old City" of Fustel de Coulanges, who brings the information that the *agnates* were blood relatives and that in addition to inbreeding, shared the cult of the same ancestors (2009). It should be noted that this kinship was exclusively masculine, considering that the woman, upon marrying, began to worship her husband's ancestors and, as such, had to abandon her father's ancestor worship, since the accumulation of religions was not possible (COULANGES, 2009). The gentiles, in turn, to whom the text of the law conferred legitimacy to assume the curatella of one who became mad or prodigal, were those who, despite being blood relatives, did not share the same domestic religion (COULANGES, 2009). Finally, there was a prediction in the Digestus that the curate of the *furiosus* would cover not only the care of his heritage, but also the care of the body and health of the curate. Thus, although the main legal concern of

the time was with the patrimony, it is perceived, in this legislation, an attempt to look at the madman's personal care (SOUZA, 2018). With the fall of the Western Roman Empire in the 5th century AD, antiquity gives way to the medieval period, in which it will be possible to identify a conception of madness essentially linked to the social values of the time, which in turn found their foundation in Christian religiosity.

Notes on madness in the middle ages

In the Middle Ages, the period between the 5th and 15th centuries AD, an entire imaginary organization was created around the precepts of Christianity. In this way, culture, aesthetics and social relations were closely related to Christianity (MATIAS, 2015). Thus, in Western medievality, madness is directly related to demonic possession and the notion of sin, relationships that, according to Isaiah Pessotti (1995), were used by the religious of the time in order to impose their conceptions and repress heresies. It's associated with madness to the devil, because

He, the devil, is the expression of all that is negative in consciousness, all that is abused and repressed. The Middle Ages seem to attribute to the Devil all the evil manifestations he found in himself. It was an exteriorization and an embodiment of the Christian conscience so that it could be repelled and fought. The presence of Satan served, during medieval times, to demonstrate the powers and control of divine and holy figures, as well as a dominion of the church over the minds and bodies of men of the western Middle Ages; It functioned as a social as well as a spiritual government, in which the Christian order was imposed on social moral precepts, governing interpersonal relations, and on spirituality affirming divine and church power as a great intercessor (MATAS, 2015).

As can be seen from reading the excerpt transcribed above, Christian doctrine served the exercise of social control over people, being the major reference for the exclusion of those who did not fit the standards prevailing in the medieval period. In this way, the poor, the mad, the incurable sick, the histrions, the prostitutes, the vagabonds, the bandits and criminals, the heretics, and some religious groups were placed on the fringes of the rest of society. Jews and the Moors (ROCK, 2011). The violence against the deleted was something so severe that in the Middle Ages as inform Jaqueline Andrade Pereira and Jose EANA Maria Scott (2017) saw the return of the practice common in the antiquity of sacrificing children born with deformed limbs, and the few children who survived grew up apart and ridiculed or scorned. Another very emblematic example of social exclusion in the Middle Ages is the figure of the leper, who, according to Oliveira (2002), was confined, outside the big cities to protect the population from contagion, according to severe segregation practices that most later would be applied to the mad. Such a policy of exclusion was, as in all other cases, justified by the Christian religion, which sees in the leper's existence a manifestation of God, indicating his wrath while marking his goodness, since the religious of the time preached that the The Lord would be giving the sinner great grace when he was punishing him for the evils practiced in this world. (FOUCAULT, 1972). Also the suffering caused by the

abandonment of the leper was seen as a way to achieve salvation, since

"... Hieratic witnesses of evil, obtain salvation in and through that very exclusion: a strange inversion that opposes that of merits and prayers, they are saved by the hand that does not reach out. The sinner who forsakes the leper at his door is by this gesture opening the doors of salvation to him. Abandonment is for him salvation, his exclusion offers him another form of communion" (FOUCAULT, 1972).

With the disappearance of leprosy, the segregationist structures to which the leper was subjected will remain for a long time to come. The space that was previously occupied by the lazy people will be occupied by other types of excluded, such as poor, vagabonds, carriers of venereal diseases, and the crazy, who will assume the role abandoned by the figure of the leper (FOUCAULT, 1972). So much so that during the period of the Great Admission, which will be dealt with in the Modern Age topic, many of the institutions in which the socially unwanted were collected functioned in places where they were formerly leprosaria. Thus, in short, the notion of madness present in medieval reprint and corrupt the mythological model of Ancient Greece, because here madness has an organization list view and is fixed as pathological, being attributed to demonic possession and its social stigmatization which, as seen, it was applied not only to fools, but also to other social groups considered undesirable (SOUZA, 2018). From 1453, with the Taking of Constantinople, the Middle Ages left the scene and the modern period began, during which it was possible to see some changes regarding the conception of madness, which is no longer something supernatural to be understood as a "process of unreason, as will be dealt with in the next topic.

The pontamentos on the folly I ity M oderna

The transition period between the Middle Ages and the Modern Age, around the 15th century, is marked by exclusionary rituals. The most significant of these is the *Crazy Ship*, a strange boat that slides along the calm Rhine rivers and the Flemish canals. These boats were responsible for carrying their insane cargo from one city to another. (FOUCAULT, p. 9, 1972). The madmen had a wandering existence at the time, and were torn from the city walls, not knowing for sure what their fate would be when entering the vessel. Once inside the ship, the madman

He is a prisoner in the midst of the freest, most open of roads: solidly chained to the infinite crossroads. It is the passenger par excellence, that is, the prisoner of passage. And the land to which it will land is not known, as it is not known, when it lands, from which land it comes, its only truth and its only homeland is that barren expanse between two lands that cannot belong to it. Is it this ritual that, by these values, is the origin of the long imaginary kinship that can be traced throughout the whole of western culture? Or, conversely, is this kinship that, from the night of time, demanded and then fixed the rite of boarding? One thing for sure is certain: water and madness will be linked for a long time in the dreams of the European man (FOUCAULT, 1972).

In the sixteenth century, madness still has its origin explained in the supernatural, so that, at the time, the folly of madness is read as a renunciation of the world, an abandonment to the dark will of God and an unknowable end (OLIVEIRA, 2002).

It was at this time that the birth of antidiabolic doctrine was born, within a work called “ *Compendio dell'arte essorcistica et possibilità delle mirabili, et stupende operationi delli demoni, et dei malefici*”, written by Menghi and originally published in 1578, which its main objective was the diffusion and defense of exorcism against the practices of treating madness that were considered quackery, within the perspective of an Ecclesiastical Medicine. The *Compendium*, however, was so widespread that exorcism was applied to treat other diseases that had nothing to do with madness, and the Church had to put the work in a state of suspension. (SOUZA, 2018, p. 50). The seventeenth century, in turn, brings a break with the conception of madness that attributes this phenomenon to a supernatural cause. Under the influence of modern rationalism, which has in Descartes one of its main exponents, society begins to see madness as a process of "unreason". We then move from a tragic view to a critical view of madness (QUEIROZ, 2009). This passage, however, did not happen at all, considering that

“The tragic and cosmic experience of madness has been masked by the exclusive privileges of a critical conscience. This is why the classical experience, and through it the modern experience of madness, cannot be regarded as a total figure, which would eventually come to its positive truth along this path; he is a fragmentary figure who abusively presents himself as exhaustive; It is a set unbalanced by all that it needs, that is, by all that hides it. Under the critical awareness of madness and its moral, or medical, philosophical forms, a muffled tragic consciousness was nonetheless vigilant (FOUCAULT, 1972).

The social transformations that occurred in the period, especially regarding the process of industrialization and urbanization, as well as the transition from the capitalist mode of production, in its commercial phase, to the industrial phase, contributed to the establishment of a scenario in which there was disorder and a serious economic crisis to take place, factors that forced several countries in Europe to develop policies in order to solve these problems (QUEIROZ, 2009). The policy adopted, however, was one of social exclusion, which is why the seventeenth century became known as the “century of great internments”. Those who were considered to be social misfits were placed in seclusion and taken to the general hospitals, institutions which were given the task of preventing "begging and idleness, as well as the sources of all disorder" (FOUCAULT, 1972). The General Hospital was then intended for “the poor and vagabonds of both sexes, of any quality of birth, valid or invalid, sick or convalescent, curable or incurable. All inserted in the same system and under the same intervention scope” (OLIVEIRA, 2002). Regarding these hospitals, whose objective is more segregationist and correctional than properly medical, asserts Foucault:

“[...] the General Hospital does not look like a simple refuge for those who old age, disease or illness prevent them from working; it will not simply look like a forced labor studio, but rather that of a moral institution charged with punishing, correcting a certain moral flaw

that does not deserve the men's court, but which could not be corrected only by the severity of penance. The General Hospital has an ethical status. It is from this moral burden that their directors are clothed and assigned to them the whole legal and material apparatus of repression. They have all the power of authority, direction, administration, police, jurisdiction, correction and punishment; and to carry out their task, they are made available to them pillories and shackles, prisons and strong cells.” (1972, p. 74).

As the purpose of the General Hospitals was to provide assistance to those who could not afford to support themselves and to sanitize the city while preserving the wealthiest from living with the marginalized, society closed its eyes to violence and ill-treatment. In these places, and naturally saw the segregation and exclusion of unwanted segments. However, over time, it was realized that these hospitals were losing their "assistance" purpose, considering that they were not successful in reducing poverty and fighting unemployment. Madness, in turn, continued to be the object of the elaboration of confinement techniques, considering that the social image of the madman, at that time, was associated with aggressiveness and dangerousness, which authorized the authorities of these hospitals to use the repression techniques mentioned elsewhere. (QUEIROZ, 2009).

Notes on the madness in contemporary times

Finally, at the end of the eighteenth century, when dominant thinking was directly influenced by the Industrial Revolution and the yearnings of the French Revolution, madness now has the status of mental illness and, as such, one realizes that it must be the object of observation and treatment. This time, once medicine is concerned with the phenomenon of madness, psychiatric hospitals acquire medical connotations. It is in this context that the psychiatric clinic emerges, strictly concerned with psychopathology (SOUZA, 2018). It should be noted here that during the triumph of the French Revolution, the Bicêtre, a hospital in the south of France that traditionally served as the confinement of those thought to be mad, remained an institution that indiscriminately housed the mentally ill and criminals of varying degrees of danger. What was common among them was that regardless of the degree of threat or cause that led to isolation, they were all kept in chains (MARCANTONIO, 2010). They remained that way until Phillipe Pinel, who is now considered the father of psychiatry, assumed leadership of the establishment in 28 Brumaire, Year III of the Revolutionary Calendar, and took a position contrary to the practices adopted in the asylum. The celebrated decision to dissuade the inmates (REQUION, 2016). In addition, the doctor also imposes on employees that the insane be treated like all other patients, wearing a straitjacket only when necessary, in situations where acute seizures would occur (MARCANTONIO, 2010). Author of the “ *Philosophical Medical Treatise on Mental Alienation*,” published in 1801 and republished in 1809, Pinel conceived madness as curable and always partial, contrasting the organicist model that had hitherto prevailed with the moral conception of madness. In his view, influenced by John Locke's moral conceptions, madness was the error of imagination or judgment manifested in the most diverse ways. Once adopting a broad concept of madness, Pinel preferred to refer to it as mental alienation. The alienist was the one who presented error, imbalance or disorder in the

imagination or judgment (SOUZA, 2018). Moreover, a fact deserves mention when talking about Phillipe Pinel. His conception of asylums contrasted with the notion presented by Michel Foucault about these places. The asylums were viewed by Pinel not as enclosed spaces of those who were socially undesirable, but as spaces destined for the cure of mental alienation, achieved through the so-called moral treatment. In moral treatment, the doctor should not intervene in the natural cycle of the disease, so it was necessary to let the patient's body surrender to its natural reaction. Only if there was a need should prescription drugs be used. Such a model of treatment, though curative, ultimately segregated the individual, who would need to be isolated in an institution that, according to Paul Bercherie (1989), "subjected the individual to severe and paternal discipline in a world entirely governed by medical law". All because, as Marcantonio (2010) explains, it was still inconceivable to the society of the time to keep an individual considered crazy, in which the total or partial absence of sociability was identified, in the same conviviality of the so-called "normal" people. With regard to the nineteenth century, in addition to the doctrine of Phillipe Pinel, it is necessary to mention his disciple and successor, Etienne Esquirol, who, among other contributions, participated in the preparation of the law of assistance to the insane of June 30, 1838., which had as one of its main effects the creation of public establishments to protect the insane, which they called *asylums*, as a result of their religious formation (Piccinini, 2002). Here, an observation is necessary. The nineteenth century was consecrated as the century of asylums, since in this period there were a gigantic number of people who were diagnosed with madness and were sent to *nursing homes*, which although they continued to shelter the socially excluded, such as the poor, vagabonds and prostitutes, began to have curative purpose (SOUZA, 2018).

In this context, Esquirol has just presented five reasons why the practice of internment should be maintained, namely: ensuring the personal safety of the insane and their relatives, releasing them from outside influences, overcoming their personal resistance, subjecting them to a regime doctor and impose on them new habits (MARCANTÔNIO, 2010). Finally, the twentieth century, against the previous century, which was marked by the high number of hospitalizations, is characterized by what is called antimanicomial struggle or antimanicomial movement. Mauricio Requião, in his work "Statute of People with Disabilities, Disabilities and Interdiction" (2016), makes an excellent observation by stating that "the origins of psychiatric reform had fuel in the growing realization, whether by doctors and workers of mental health, by patients, or by the community, of abuses in the asylum environment". Although found in Michel Foucault's studies on the subject of madness, the antimanicomial movement has Franco Basaglia as its main foundation. Basaglia was an Italian psychiatrist who promoted profound reforms in the mental health policy of his country with a view to humanizing the treatment of those in mental distress. The doctor's experiences in the psychiatric hospitals of Gorizia and Trieste led him to develop a whole theory about the closure of psychiatric institutions, according to which the treatment of the mentally ill person would be performed in the social environment in which he is inserted, through of a care network, ensuring, as far as possible, the freedom of the person and the patient's right to choose to receive care. These are some of the provisions brought by the Italian Law 180/78 (Basaglia Law), which is in force until the present day, and which, in an

attempt to ensure dignity to the person in mental distress, also provides for the creation of small structures., which provide privacy and autonomy in a welcoming climate, so that people who cannot live alone or with their family. (Souza, 2018).

Final considerations

Lüchmann and Rodrigues, when dealing with such movements, clarify that the asylum is the most complete translation of reduction, exclusion and social death, since "its walls hide physical and symbolic violence through a protective garb that excuses society and decontextualizes it. The socio-historical processes of the production and reproduction of madness" (2007). According to the authors referenced above, the break with the asylum model means much more than the end of the psychiatric hospital for the movement, because it takes as its starting point the deep criticism of the views and conceptions about this phenomenon. For them, "it means the opposition to the pathological negativity built on the observation favored by the segregation and articulator of notions and concepts such as incapacity, disability and inimputability. It also means targeting the city as the place of insertion; the possibility of occupation, production and sharing of the territory from an active and effective citizenship" (2007). Therefore, there is now a new approach in Western societies in terms of people in mental distress, who are no longer seen by a hygienist perspective that excludes the sick from community life, dragging the individual to out of the eyes of his peers and subjecting him to various types of violations of his fundamental rights and guarantees, and are now seen from a new perspective, more humanized and compatible with a society based on the values of freedom and dignity inherent in own human condition.

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