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## The society of anxiety

### Abstract

*Starting from the analysis of the meaning of health and illness, the work finds the social role of medicine as a transposition of the medicalization from clinical to the the social realm of existence. Discovering the medicalization of social life as one of the indicators of postmodern rationality entropy, the analysis focuses on the diffusion and fluid fear as a basic epochal experience of human existence in contemporary constellation world whose social shaping is named as the anxiety society.*

**Key words:** *health, illness, medicalization, the entropy of rationality, postmodernity, the future, experience, fear, anxiety society.*

### Introduction: The concept of health and disease

Health and disease are by origin and in basic philosophical concepts.<sup>2</sup> Translating these concepts to a much narrower field of medicine has carried all the essential features of reductionism. Habitual reduction is demonstrated through a fundamental shift in the meaning of concepts of health and disease. This re-

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<sup>2</sup> The first and the oldest understanding of health and disease as a model to explain the human body and its functions was philosophical equilibrium model that expressed a harmonious cosmic order of things. The individual was healthy if he was in homeostasis (ομοιόσταση) with the whole being (είναι) and sick if this balance was disturbed. The balance of the whole being as substantial (αρχή) and universally applicable (νόμος) mind and the order of things (Λόγος), was appearing on a number of levels: 1. Cosmic balance of a whole being as the balance of matter and spirit (φύση - Λόγος) 2. The balance of nature and the state (φύση / Λόγος - πόλις) 3. The balance between man and the state (άνθρωπος - πόλις) 4. The balance of body and soul (ψυχή - σώμα) and 5. The balance of the organs in the body (υγεία).

duction occurred as a result of substitution of paradigm, which means that the wider philosophical discourse was replaced with narrower medical discourse, and therefore only the meaning of health and illness in the domain of praxis was translated into the domain of pragma. The concept of praxis means a communicative rational (intersubjective) ratio which is typically without an interest and therefore is mediated with category of sense.<sup>3</sup> Within such a practical semantical orientation of health and disease (as well as other phenomena, states and processes) are the events that receive their final formulation of ideas from the standpoint of man himself. Therefore, health and disease appear as different types of experiences that get immanent meaning - given the role in the constitution of the person as an event, object and purpose. Health is emerging as a stable continuity of experience that leads to the constitution of personality and disease as a radical break in the continuity of experience that destroys personality.<sup>4</sup> Hence, health and disease are events of personality that their meaning and interpretation got in a way that has never been an instrumental (as a subject-object relationship), but as an intersubjective problem of meaning, purpose and object mediated by culture. Therefore, the culture as a realm of meaning emerges as the key to the social distribution of health and disease.<sup>5</sup> In contrast, the term Pragma means instrumental rational relationship that is permanently utilitarian, and therefore mediated by category of function. The phenomena of health and disease therefore within the pragmatic semantic orientation do not appear as events of a person, but as events of a system. As a function of identity, health and disease are becoming problems of role playing and status within the existing structure of power of the social system. Hence they are not the types of experience that get their meaning immanent from its role in the constitution of the person as an event, object and purpose, but as socially sanctioned, valid and legitimate status of the head of social roles that receive their meaning transcendent, as they are expressing the level of (dis)functionality of reproduction of the system as the final outcome of all possible goals and objectives. Therefore, within the pragmatic semantic orientation, health and illness occur as a social condition that manifests itself on several levels: work, consumption, social space and nature, from which derive consistently and systematic interventions (interventions of system) in this areas, which articulate phenomena (now statuses and roles) of health and disease as a function of maintaining the system.

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<sup>3</sup> In fact, when it comes to praxis-as a communicative rational principle of relating personality which is mediated by the category of sense (unlike pragma as instrumental-rational principle of relating identity that was mediated by the category of function), it is necessary to point out that the only interest of personality can occur only in the interest for the other person expressed in the form of an intersubjective we-relationship.

<sup>4</sup> Alfred Schütz, *Saggi sociologici*, Torino: Utet, 1979.

<sup>5</sup> Ellen E. Idler, *Salute, malattia e sociologia sanitaria*, Roma: Sapere, 1982.

Thus, as a result of habitual reduction, resulted a systemic reduction - as the concepts of health and illness have become narrower in scope and in function more pragmatic, it was followed by the social construction of these phenomena. Social constructionism of this kind arises as a result of establishing a medicine as a social practice, which itself represents a pragmatic expression of the needs of the social system that structurally and functionally articulate the phenomena of health and disease and thus normatively arranges practical social relations towards the imperatives and principles of the system. As the medicine occurs as the practise within the economic and political subsystems (and no longer cultural), so the medical discourse occurs as the part of the broader concept of power, from which it derives its authority that through the legal and social sanctions determines solely social validity of these phenomena. Proceeding from the principle of the ultimate functionality of the whole social system (Parsons), which is achieved through the binding constraints of social structure and its associated institutions and roles (Durkheim), the phenomena of health and disease are now defined as a social relationship that is socially standardized, sanctioned and regulated by structural categories and functional imperatives of the reproduction of the system. Thus, health becomes meaningful functional ability of individuals to participate in the distribution system of social roles and status, and thus to actively and positively act towards the imperatives of maintaining the given social order. As a result of binding and coercive character of social structure and its associated institutions and roles, the health as the feature of the system comes from institutions of the system that provide an adequate level of integration and cohesion. Hence, the weakening of the repressive power of the system leads to the devaluation of social health in the form of eruption of uncertainty, the willingness for perversion and decadence.<sup>6</sup> Weakening or absence of a cohesive and integrative functions of institutions causes divorces, alienation, psychosomatic disorders and suicides which are in conditions of adequate internalization and socialization absent.<sup>7</sup> Thus, the constraints character of institutions appears as a necessary factor in the internal social health, because the pressure of institutions, which are based on a long tradition, is effectively shaping the social behavior than rational principles. In that sense, social-anthropologically observed, the role of tradition and its institutional embodiment in the form of character is to reduce the openness to the world as a consequence of organic deficiency that wakes up willingness for animalistic features that the biological nature opened to man. She needs to tame a man, discipline, and educate him, thereby reducing

<sup>6</sup> Arnold Gelen, *The man*, Sarajevo: Veselin Masleša, 1974, p. 448.

<sup>7</sup> Emil Dirkem, *Suicide: a sociological study*, Beograd: BIGZ, 1997.

his potential opportunities and turning externally imposed forms of behavior to normal, automatic, unconscious and natural.<sup>8</sup>

As the social structure of the system is not a priori correspondent to the structure of individual activity, therefore, from this opposition of the individual action towards the social structure, occurs disease as an expression of dysfunctionality of individuals towards the whole social system because it prevents the individual from performing their positive social role<sup>9</sup>. From this basic, natural and constant opposition of individual and social action, consistently derives final determination of the social role of medicine - reproduction of individually normal as socially functional, and the control and sanction of individually pathological as socially dysfunctional. Performing the function of reproduction of normal, and control and sanctions of pathological as social that is socially dysfunctional, medicine as an expression of instrumental social rationality becomes a technique of social control, which contributes substantially to the reproduction of a given structure of the system and thus makes a vital contribution to the functioning of modern society.

At the same time, thus institutionalized medicine becomes the greatest enemy of the individual health, because it is as the instrumental social practice and technique of social control based on the imperative of the system rather than on the imperative of personality. Standardized by the category of function rather than the category of meaning, medicine as a social practice in general can not be ethically, but only socially responsible, since it draws its legitimacy from the authority, not the principle.<sup>10</sup> Starting from the socially constructed phenomena of health and disease as categories of a system rather than events and personal experiences, medical liability could only be expressed through social development strategy of systematic health management in the dimension of work as a strategy of the medicine of work, in the dimension of consumption as a strategy of pharmacology, pharmaceuticals and cosmetology, in the social space as a strategy of eugenics and social ecology in the area of nature as a strategy of biotechnology. By technology and industrialization of modern society it is provided the entry of medicine in the heart of the capital-based contemporary ideological production, allowed the general and binding transposition of medicalization as standard from clinical to social level of existence. Therefore, the development of a social medicine had the shape of extension of social areas that are subject to the

<sup>8</sup> Arnold Gelen, *The Same*.

<sup>9</sup> Talcott Parsons, *The Social System*, Glencoe: Free Press, 1951. Talcott Parsons, *Definition of Health and Illness in the Light of American Values and Structure*, in: *Patients, Physicians and illness*, Gartly Yago, New York: Free Press, 1972. Talcott Parsons, *The Sick Role and the Role of the Physician Reconsidered*, New York: Milbank Memorial Foundation Quarterly, no. 53, 1975.

<sup>10</sup> Mirko Štifanić, *Sociological approaches to health and illness*, Zagreb: Social Studies, Year 7, Number 6, 1998, p. 833/845.

imperatives of medical management. Always a wider and more intense medicalization of social relations is based on the inversion of means and goals of a type that Berdyaev observed,<sup>11</sup> and is interpreted as a “human ideal” of the increase of “balance” in the distribution of medical goods and services. However, it is this “human ideal” that will become a subtle indicator of the epoch implosion of the Western civilization.

### Fear as a rational disease

Replacement of health with increasing number of medical-pharmaceutical interventions, as the main driving force of modern medicine, will prove to be an indicator of the fact that modern civilization owes its suicidal potential to those same characteristics (instrumental rationality) from which it draws its size and its underlying epochal supremacy.<sup>12</sup> The modern age has, only when rationalism has emerged, promising introduced itself as a big emancipating step forward from the world of fear to the world of freedom. However, the time in which the science introduced us has not become the way of the exit. Five centuries later, the collapse of the modern will show that our time and the time before, are the times of fear.<sup>13</sup> But unlike the pre-modern fear, postmodern diffuse and fluid fear as a basic experience of human existence in contemporary constellation of the world, are the result of the reactive entropy of rationality with which the modern secularized the time and opened the future as a place of anxiety. While the structure of the ancient and medieval world was closed and their horizon organized by categories of fate and providence, the structure of the Modern World is permanently open and its horizon organized by principle of practice.<sup>14</sup> Opening the structure of the Modern World has started by the process of instrumental rationalization with which modern rationalism secularized theological

<sup>11</sup> As Berdyaev says: “There can not be technical goals of life, there may only be the technical means, and the aims of life lie still in another area, in the spirit. The means of life now very often replace the life goals; those means can take up so much space in the life of man, that the goals of life are finally and even completely disappearing from the consciousness of man. And in our technical era it is happening in the majestic scale. “And there Berdyaev, notes the paradox. Culture is born with the technique, it is not possible without it, but the final victory of the technique in the culture is symptom of its collapse. The victory of technique as a means of culture shows that the man as a goal has become an asset. View: Nikolaj Berdyaev, *Man and machine*, Proceedings of Works *Man and technique*, Zagreb: Matica Hrvatska, 1944, p. 116,

<sup>12</sup> Zigmund Bauman, *Fluid fear*, Novi Sad: Mediterranean Publishing, 2010, p. 91.

<sup>13</sup> Zigmund Bauman, *Fluid fear*, Novi Sad: Mediterranean Publishing, 2010, p. 10.

<sup>14</sup> Časlav Koprivica, *The Future of fear and hope*, Banja Luka: Art print, 2011, p. 21.

principles of history.<sup>15</sup> Opposing the ancient mentality of naturalistic and cyclical vision of the world and reinterpreting in secular terms the Judeo-Christian heritage, the Modern will find history as a substance (basic law and order of all things), and thus give to the idea of the history the ontological scope.<sup>16</sup> Appearing as a process of continuous and successive events, which implies a category of totality (Hegel) or the character of the teleological as immanent (Kant), modern rationalism will understand the history as the totality of time, or (towards the future) focused and purposeful process, intentional process which in itself is including and assuming the future as its constituent element.<sup>17</sup> However, that same, with the secularization revealed future, will appear as the idea of decay of now secular foundations of the Western civilization. While the weather in ancient and medieval structure of the world had a predetermined character, with the content and meaning-filled telos, the time structure in contemporary world has become open, emptied and homogeneous horizon which with human practice needs to be filled with meaning. Thus, the time has become history and future category of practice - dimension of human action and showing the human disposition of the world.<sup>18</sup> Hence, from the transformation of temporal habitus of Antiquity and the Middle Ages to the modern times teleological habitus, follows the transformation of a fear from a natural to the the historical phenomenon. Only secularization opens up the space for an indefinite fear<sup>19</sup>. While the future in the ancient and the medieval times was generally known because it was joining them from the absolute and transcendent cosmic and theological principles, the future of the new century is a radical novelty because it emerges from the secularized inherent principles of human practice. Therefore, the future of antiquity and the Middle Ages as a natural phenomenon could not become a source of unforeseen and therefore as such it could not be perceived as a source of threat and anxiety. On the contrary, when with the secularization of the time structure of the world has become open and the future primordial dimension of the human, it was created a theoretical possibility that fear appears as an immanent historical exposure of human to the consequences of his own actions. While pre-modern fear is natural and primal, the historical fear of the Modern will prove to be a “second fear” - social and cultural recycled fear which stems from the inherent limitations of the promised picture of the world. Such fear while changing people’s perception and expectations, and managing human

<sup>15</sup> See: Karl Levit, *World History and events of salvation*, Sarajevo. Svjetlost, 1990, p. 46.

<sup>16</sup> Đani Vatimo, *The end of the modern*, Zagreb: Matica hrvatska, 2000, str. 7.

<sup>17</sup> More to see: Nemanja Đukić, *The problem of objectivity in sociology of knowledge*, Banja Luka: The Association of Sociologists - Banja Luka, 2011.

<sup>18</sup> Časlav Koprivica, *The Future of fear and hope*, Art print, Banja Luka, 2011, p. 18.

<sup>19</sup> Časlav Koprivica, *The same* p. 22.

actions, appeared finally as an activator of the reservoir of the former repressed traumatic experiences. Hence, the diffuse fear of the future (of the world) of the new century appears as historically accumulated crippling collective anxiety before the implosion of civilization level of reality.<sup>20</sup> As modern civilization with development of technique as reified rationality mediated attitude towards life, in the terms of the collapse of civilization paradigm of instrumental rationality, medicalised technical life support systems are now emerging as the main causes of postmodern constellation of the fear. Thus, from the modern epochal failure to provide “healthy society” as the basis of a rational view of the world derived fear of the consequences of its own activities, resulted in equally unsuccessful strategies of rational prediction of relating to the future. The emergence of risk as a risk whose probability haughty spirit of reason believes it can rationally calculate, marks yet another covert project of medicalised experience impotence of rational prediction of relating to the future. In this real-life framework combat against risks as medicalised strategies of dealing with the future (strategies of diagnosis and therapeutics financial, nuclear, environmental, social, bio-chemical, security, medical, humanitarian and other risks), is growing and developing the ideological awareness of manipulation of atrophied sense of rationality in front of the challenges “of post-historical zugzwang” which to the modern world in a rational progressive degradation should offer another illusion of power - in this case the power of the emancipation of their own (ir)responsibility.

### **Society of anxiety**

Conceptually fear is a form of affective reaction to some traumatic experience.<sup>21</sup> In phylogenetic terms, the first traumatic experience is the trauma of a birth that occurs as an individual model for each subsequent fear.<sup>22</sup> During life, the individual comes into numerous conflicts with other individuals, the environment and the objects in it, that by preventing the realization of the vital needs of personalities create frustration and dissatisfaction. These conflicts, frustration and dissatisfaction that person successfully handles, have a positive psychological role because as developing and enhancing rational-explanatory potential of the ego corresponds to the development of protective disposition as a defense mechanism against external hazards that threaten the integrity of the person.<sup>23</sup> Therefore, fears that arise as a reaction to external danger, have a

<sup>20</sup> Zigmund Bauman, *Fluid fear* Mediterranean Publishing, Novi Sad, 2010, p. 22.

<sup>21</sup> Sigmund Frojd, *Autobiography. The new classes*, Novi Sad: Matica Srpska, 1981.

<sup>22</sup> Oto Rank, *The Trauma of Birth*, Dover Publications, 1994

<sup>23</sup> Sigmund Frojd, *Fear and Anxiety*, Beograd: Riznica, 2011.

real, positive and developmental character. However, those conflicts, frustration and dissatisfaction that person fails to solve, have a negative psychological role because suppressed and accumulated in the unconscious, form the reservoir of fear that under certain circumstances and stimuli can be (re)activated.<sup>24</sup> If the conflicts in which the person is, are so strong that a person is not capable of constructively overcoming traumatic excitation with real fear, the mechanism of repression that does not solve the conflict but it excludes it from the field of consciousness so that it is pushed into the unconscious, takes place. The mechanism of suppression could strengthen to the point that it starts to function automatically. After some time, automatically pushed content to the unconscious, or conflicts excluded from consciousness, accumulate their strength and their threatening potential, therefore they can easily again reach the mind and even easier if the defense forces of the person are weaker.<sup>25</sup> Thus, it becomes possible with altered role of social media<sup>26</sup> to manipulate the fear with high-evocation of repressed traumatic experiences which act as a trigger of reactivation and mobilization of the reservoir of fear. At one point, in any way caused reaction of fear frees and plays old traumatic experiences from the reservoir of fear, which performs demolition of protective disposition of ego and loss of rational behavior as limited functions of the ego.<sup>27</sup> The newly created trauma releases old traumatic experiences from the reservoir of fear which acting cumulatively directly redirect natural and straightforward process of implementation of libido, because of which the constantly emerging libidinally invested energy is no longer appearing as the sexual need, but it is converted into fear.<sup>28</sup> Developing by the direct conversion of libidinally invested energy, the current event of fear is converted into a permanent state of anxiety as the primary features and basic existential condition of disintegrating personality. As anxiety is vague fear, and general feeling of insecurity<sup>29</sup> its motivational potential as such does not exist anymore - a pathological fear of anxiety was acquitted of the real context and floats free and available for the mooring of any possibly a suitable content of representation imposed. Thus, dispersed fear any connection with the possible

<sup>24</sup> Oto Rank, *The Trauma of Birth*, Dover Publications, 1994

<sup>25</sup> Sigmund Frojd, *Fear and Anxiety*, Beograd: Riznica, 2011.

<sup>26</sup> In the traditional sense, the cultural function of the media is manifested as a symbolic power of discursive design of reality. However, in terms of global colonized (instrumental) culture comes to global colonization (instrumentation) of the Media: symbolic power as a cultural resource is transformed into a propaganda power as an ideological resource. Discursive creation of reality as a cultural power of the media, in conditions of globalization transforms into ideological activity of propaganda norms of social reality according to the parameters of ideologically constructed global future.

<sup>27</sup> Sigmund Frojd, *Fear and Anxiety*, Beograd: Riznica, 2011, p. 9, 36.

<sup>28</sup> Sigmund Frojd, *Introduction to Psychoanalysis. Neuroses*, Beograd: Kosmos, 1964

<sup>29</sup> Žan Delimo, *The fear in the West*, Novi Sad: 1987, p. 25.



structures can establish only through the symbolic relationship, because from the standpoint of an anxious personality it does not matter whether the danger really exists or not, but it is crucial that the individual is convinced that there is a danger that threatens from the outside world. As the body itself is the first and basic physical assumption by which one becomes aware of himself, so within the existential experience of anxiety in front of the postmodern openness of the future, now only body appears as the main and the narrowest object of emotional connections. As the last bastion of safety and certainty, only the one's body may appear as an object to which dispersed fear and attention can establish a symbolic relationship and thus offer their materialisation. Hence, the body appears primarily as an object of fear of anxiety, because as a basic feature of human beings that allows one to directly experience themselves, it represents the last and the only possible origin of the materialization of regressive and dispersed attention. Thus, the attention of anxiety narrows, focuses and personalizes into attention towards the body and the fear of anxiety is concretised in the fear of death and diseases of the body. Hence organized propaganda of manipulation by fear, which is the dominant factor in the structuring of the system of personal motivation of individuals, enables the attention, personal motivation, physical structure and ultimately social action of individuals and social groups to be organized around excessive fear for the body and (or) environment. Socio forced fear for the body produces anxiety as individual hypochondria, and the socially forced fear for the environment creates ecology as a collective hypochondria. As a result of a pathological fear for the body it is caused increased consumption of drugs and cosmetic products, and as a result of a pathological fear for environment appears an ecological as ideological consciousness. Therefore, the main social consequence of the ideology of healthy living as organized media popularization of medical problems, we can name the society of anxiety as the gathering of those social conditions that are characterized by a general feeling of insecurity and existential threat of individuals and social groups.

## **Conclusion**

Ideology of healthy life as propaganda popularizing of the health and environmental problems in the service of economic and ideological interests of certain subjects, is an instrument of social control in the sense that the organized propaganda manipulation of fear for the body and the environment with individuals and social groups develops an increased sensitivity to the issues of health and environment, which directly intensifies the evolution of health and environmental needs. Peaking the top of the system of values, health and envi-

ronmental concerns smoothly form consumer medical mentality, thus causing fundamental redefinition of individual and group motivation of citizens. Thus by the fear forced individual and collective social action is directed towards the increasing consumption of medicines, medical and environmental services, which eventually becomes very efficient instrument of the conservation of the modern consumer society. Simulating the problems of personal and collective health and producing personal and collective anxiety, the healthy living ideology transforms the motivational foundation of social action and establishes the society of anxiety as a fundamental medicalised experience of the postmodern existence. Producing the anxiety (the feeling of personal and collective health threat), unlimited social energy is directly transformed into fear, which establishes the quantity indefinite and inexhaustible resource that acts as a permanent disorganizational potential of individual and social consternation. Anxious individuals who form an anxious social groups become socially dysfunctional, because the media popularized fear of loss of personal and collective health reactivates previously established reservoir of fear and leads to blockage of ego functions, which manifests as a social-psychological regression of social acting on social behavior. By acting individuals become unable to work: social action as an independent, free and intentional social action transforms into the social behavior as psychological and biological provoked reaction conditioned by fear. Because of this, fundamental and constitutive role in social relations has no more a healthy person, but the identity of the consumer on the market of medical goods and services. Hence, the motivational matrix for the social removal is no longer the need of personality, but the imperatives of economic reproduction subsystems. By cutting the naturally expressed fear, that appears as an individual, group, and general social mobilizer and organizer that results in a coordinated and impregnated, political, social and economic action, the society of anxiety as a social experience of overall vulnerability does not contain common (individually and socially constructive) mobilizing potential but it is manifested only as a positive economic and social-pathological phenomenon.

Hence the ideology of healthy living is the most effective strategy of epochal medicalization of social life, because in the most consistent way reproduces the fear inherently embedded in a valid picture of the world.

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