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## Experience in a New Key

Sanna Tirkkonen\*

# What Is Experience? Foucauldian Perspectives

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**Abstract:** Michel Foucault's (1926–1984) thought is widely used in the humanities and social sciences for investigating experiences of madness, illness, marginalization and social conflicts. However, the meaning of the word “experience” is not always clearly defined, and the French word *expérience* has a whole variety of meanings. In this article I explicate Foucault's most relevant concepts of experience and their theoretical functions. He refers to experience throughout his career, especially in his early texts on existential psychiatry from the 1950s and 1960s and in his late work from the 1980s. Texts such as *Mental Illness and Psychology* and *Dire vrai sur soi-même* have received less attention than Foucault's most famous books, but they show that references to experience form significant theoretical and thematic links between his earlier investigations of mental distress and his late work on ethics. When Foucault reorganizes his work in the 1980s, he looks back to his early work in his search for a new concept of experience. I argue that in these contexts, experience cannot be understood as an outcome of activity that organizes perceptions and leads to objective knowledge, but experiences are not defined as events produced by discourses, either. I demonstrate in this article how Foucault uses the concept of experience to structure his research on ethical subjectivity and cultural practices of care. At the same time the article questions some standard interpretations of his work.

**Keywords:** Michel Foucault; mental illness; contradictory experience; forms of experience; exclusion; normalization; conduct; subjectivity; care of the self; culture of the self

**experience** /ɪkˈspɪəriəns/

*noun*

- Practical contact with and observation of facts or events.
- The knowledge or skill acquired by a period of practical experience of something, especially that gained in a particular profession.
- An event or occurrence which leaves an impression on someone.

*verb*

- Encounter or undergo (an event or occurrence)
- Feel (an emotion or sensation)

Oxford Dictionary

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# 1 Introduction

Michel Foucault's (1926–1984) thought has played a central role in the debate on the status of experience in qualitative research in the empirical sciences. Experiences of madness, illness, marginalization, wars and social conflicts have been investigated from Foucauldian perspectives, even though his notions of experience are rarely defined. The so-called “experiential turn” in the 1990s challenged traditional history writing, and Foucault's analyses of the different mechanisms of power facilitated the formulation of theoretical frameworks for investigating microhistories. The emphasis on personal experiences and everyday lives questioned the historical narratives that focused merely on wars and other large-scale events. In this debate Foucauldian ideas were launched also to *reject* individual experience as valid evidence or as a legitimate source of historical knowledge.<sup>1</sup> The argument was that researchers should question how personal experiences are constituted in the first place, as it is problematic to claim that singular experiences would represent the experiences of different minority groups.<sup>2</sup> Experiences in this context were merely understood as linguistic events produced by discourses. It is not uncommon to interpret Foucault's thought as profoundly anti-experiential and anti-subjectivist.<sup>3</sup>

However, this view is highly problematic. Foucault refers to experience throughout his work, especially in his early texts on psychiatry and psychology from the 1950s and 1960s and in his late work from the 1980s. The French word *expérience* has a whole variety of meanings. It refers to knowledge, expertise, experiment, attempt, practice, and even to taste. Foucault uses it in most of these senses. At times he operates with a concept that demarcates a field of scientific knowledge (e.g. *expérience psychologique*, *expérience médicale*), and on some occasions it means a horizon against which perceptions stand out (*expérience fondamentale*). In his late interviews he describes experiences as events that come and go, and which do not fall into divisions between fact and fiction. Sometimes he speaks about transformative experiences as events after which one cannot be the same as before. At times, the notion also connotes creative exploration: “experience” implies possibilities of experimenting and trying out (Lat. *experiri*).

It is one thing, however, to refer to experience as a word and another thing to use it as a concept, as a theoretical tool. Foucault's concepts might not always be clearly defined, but they do have important theoretical functions. Clarifying what is meant by experience is crucial if one wants to understand his arguments but also if the aim is to use his work as a theoretical framework in the empirical sciences.

It has been claimed that Foucault operates with two contradictory concepts of experience: first, the “objective” structures of experience that condition the ways in which subjects perceive themselves; and second, the “subjective” notion of experience that implies the possibility of reflecting on and questioning the objective structures.<sup>4</sup> But in fact he uses many different concepts of experience, such as “lived experience”, “background experience”, “contradictory experience”, “transformative experience”, “forms of experience”, “fields of experience”, “limit-experience” and “experience of the self”. These different concepts include intersubjective and personal, societal and political, spatial, abstract, and very concrete features depending on their meanings and contexts of usage. None of Foucault's texts alone allows a comprehensive grasp of his

<sup>1</sup> Scott, “The Evidence,” 777; 780.

<sup>2</sup> *Ibid.*, 782. Foucault's thought has also been used in this debate for defending the investigation of personal, marginalized experiences that have not been heard. Johanna Oksala argues that it is problematic to presuppose that singular experiences would constitute identity categories, or that one would be motivated to fight against injustice only if one had a personal experience of it (Oksala, “In Defence,” 390; 396). In her view, the ways in which phenomena are conceptualized should always be reassessed and questioned in the light of experiences which may be new or may not fit in the current explanatory schema (*ibid.*, 396; 399).

<sup>3</sup> McNay, “The Politics,” 62.

<sup>4</sup> Han, *L'ontologie*, 249–257. Others who have analyzed Foucault's concepts of experience include Timothy O'Leary, who positions his book *Foucault and Fiction: The Experience Book* (2009) within literary studies, and Martin Jay who investigates Foucault's concept of limit-experience (see “The Limits”). Gary Gutting's article, “Foucault's Philosophy of Experience” (2002) is a short introduction to the theme; Thomas Flynn analyses “experience” in a specific, phenomenological context (see “Foucault on Experience”); Thomas Lemke discusses Foucault's concepts of experience in the light of his late critical philosophy (see “Critique and Experience”); Elisabetta Basso touches upon the theme in the context of his early essays on psychiatry (see “On Historicity”); and Johanna Oksala construes an ontological conception of experience in the context of feminist philosophy (see *Feminist Experiences*).

philosophy of experience, because his works do not form a system, but his thought is not sporadic, inconsistent, discontinuous or unsystematic either. References to experience form significant theoretical and thematic links between his earlier investigations of medical, especially psychiatric, knowledge and his late work on ethics. In his early texts Foucault focuses on experiences of mental distress and their conditions, investigates the margins of society, and at the same time seeks ways to speak about experiences in their own terms. When he reorganizes his work in the 1980s, he looks back to his early work in his search for a new concept of experience.

In this article I map out and explicate Foucault's most significant concepts of experience.<sup>5</sup> In some of his books experience is used as a spatial abstraction that emphasizes the social context of knowledge formation, but, more importantly, in his early and late works the aim is to combine the subjective and objective aspects of experience. It is more common to view Foucault as someone who is interested in different mechanisms of power that condition the ways in which subjects can perceive themselves. However, in the case of mental distress the Foucauldian framework facilitates an analysis of situated human beings who are affected by their social circumstances and who at the same time structure their world and give meaning to it in unique ways. I argue that Foucault does not reduce experiences of madness, illness, health or care of the self to the private experiences of individual subjects or to discursive formations, but conceives of experiences mostly as intersubjective, social and political processes people go through, reflect upon and relate to. In the last sections of this article I explicate how he uses the concept to structure his work on ethics and his investigation of cultural practices that encourage subjects to focus on and take care of themselves. I show that a Foucauldian investigation of dietary instructions, physical and mental exercises and recommendations to keep oneself in good health should include an analysis of relationships, knowledge and values that sustain the so-called culture of the self, but one should also pay attention to the ways in which subjects are present to themselves and seek new forms of subjectivity.

## 2 Experiencing and Contradictory Experience in Foucault's Early Essays

Foucault's early text *Mental Illness and Psychology*<sup>6</sup> has received less attention than Foucault's more famous works, because the theoretical framework of existential psychiatry has been viewed as a false start to his career that he subsequently rejects. The book consists of two parts and two parallel conceptual frameworks: existential psychiatry (or phenomenological anthropology) and social history. In the context of existential psychiatry, Foucault purports to discuss *experiencing* from the first-person perspective without reducing it to the third-person perspective of scientific knowledge. Ludwig Binswanger's phenomenological anthropology offers him a methodological and conceptual alternative to medical discourses on mental illness. Anthropology in this context refers to the question "What is it like to be a human being"? Foucault argues that organic medicine cannot respond to questions concerning how patients structure their own world and give meaning to it and to their past, but these are the questions that existential anthropology investigates.<sup>7</sup> Binswanger develops a method for treating patients as subjects of experiencing, and he combines the anthropological approach with an investigation of the ontological structures of existence—such as temporality, spatiality, sociality and corporality—as they are manifest in experience.<sup>8</sup>

Regardless of the focus on the first-person perspective, the theoretical framework for analyzing personal experiences is profoundly intersubjective. Binswanger's existential psychiatry provides tools that enhance understanding of patients as relational and situated beings. At the same time, he understands the *ways* in which patients give meaning to their lives, and to events they encounter, as deeply personal. He uses the

<sup>5</sup> Here I focus on concepts that are theoretically most significant. For more detailed discussion on notions such as "transformative experience" and "limit-experience", see Tirkkonen, *Experience* and O'Leary, *Foucault and Fiction*.

<sup>6</sup> Foucault wrote *Maladie mentale et personnalité* in 1954, and *Mental Illness and Psychology* (1964) is a rewritten and restructured version of his first book.

<sup>7</sup> Foucault, *Mental Illness*, 44–46.

<sup>8</sup> Binswanger, "Dream," 84.

term *the existential a priori* for the conditions of personal experience, including the past events the person has gone through and their respective social contexts, which affect the ways in which people respond to situations. Foucault understands experiences of mental distress as altered ways of relating to others, and he believes that the awareness of one's own state of being becomes manifest and expressed in these relations.<sup>9</sup>

The concept *background experience* (*expérience fondamentale*) in his early texts means the horizon against which perceptions stand out in specific ways.<sup>10</sup> Directing oneself towards the world always presupposes a context, a background understanding, even though one does not consciously reflect upon it.<sup>11</sup> This does not mean, however, that patients would be ignorant and unaware of what is happening to them. Theoretical distance from one's own situation might be lacking, but as meanings of these experiences are always given in a unique way, the authority of the experience is reserved for the subject.

In the second part of *Mental Illness and Psychology* Foucault portrays historical and cultural ways of understanding and dealing with mental distress. The notion of experience is used for drawing attention to the conflicts that people face in their social environments. He calls for a philosophical analysis that investigates not only *the existential a priori* but also the historical conditions of possible experience (*the historical a priori*) and the possibilities of experiencing oneself as “mad”, “ill” or “disordered”. In other words, whatever the symptoms are in reality, only cultural systems of classification make it possible to experience a set of symptoms precisely as “schizophrenia”, “hysteria” or “ADHD”, for example. When Foucault defines *the historical a priori* in *The Order of Things*, he refers to “the totality of experience” which is delineated in a specific way:

This a priori is what, in a given period, delimits in *the totality of experience* a field of knowledge, defines the mode of being of the objects that appear in that field, provides man's everyday perception with theoretical powers, and defines the conditions in which he can sustain a discourse about things that is recognized to be true.[new footnote: Foucault, *The Order of Things*, 158; italics mine.]

In other words, *the historical a priori* is a concept for the conditions that determine the ways in which objects of knowledge can exist, how they can be known, and how the subjects can speak about them in a certain context.

However, in the early essays on psychology and mental illness, Foucault's aim is to combine the subjective and objective aspects of experience and to explain how social structures and contradictions influence personal experiences and turn into pathological reactions. In both *Mental Illness and Psychology* and its earlier version *Maladie mentale et personnalité* he uses the concept of contradictory experience to draw attention to social conflicts that affect mental well-being. Contradictory experiences are gone through by individuals, but they can be recognized as phenomena of social injustice, including economic exploitation, imposed competition, colonialism, imperialist wars and class struggles.<sup>12</sup> Foucault insists that it is perfectly common to experience these conflicts as contradictions that disturb the subject's affective life

<sup>9</sup> Foucault, *Mental Illness*, 46–47.

<sup>10</sup> Foucault refers to *expérience fondamentale* in his late work in a different sense, and it is not always clear if the concept can be translated as a background. In his late articles and interviews he refers to phenomena such as madness, illness, suffering, death, desire and sexuality as fundamental experiences that are described as unique and incomparable, profound experiences to subjects who go them through (Foucault, *Dits II*, 877; 954; 966–967).

<sup>11</sup> Dreyfus, “Foreword”, xviii. Dreyfus provides a Heideggerian reading of Foucault's *Mental Illness and Psychology*, explaining that in familiar surroundings, one instantly knows how to operate with objects and entities without paying attention to or questioning the ways in which they embody an understanding of the meaning of being. In other words, language, tools and institutions of the concrete environment embody the ways in which background contexts respond to the question of “what it means to be” (ibid.). Foucault does not thematize or address the question of Being in this Heideggerian sense, but he focuses his inquiry on actual statements and expressions, concrete techniques, practices and architectural arrangements. This emphasis on concrete statements and material arrangements represents a strong philosophical commitment: the idea is that concrete phenomena such as bodily expressions, daily routines and spatial orchestrations embody a comprehensive background understanding of the world.

<sup>12</sup> Foucault, *Maladie mentale*, 86; *Mental Illness*, 82. Marx refers to contradiction when he characterizes the tension between co-existing, opposing poles that have conflicting interests in society. On Marx's use of contradiction see Crocker, “Marx's Use”; Suchting, “Marx, Hegel.”

and stability from the outside.<sup>13</sup> The point is that contradictions do not take place only on the general societal level. Human beings find them within themselves and try to reflect on and cope with them.<sup>14</sup> Pathological experiences are different in the sense that “where the normal individual experiences contradiction, the ill person undergoes a contradictory experience; the experience of the first opens onto contradiction, that of the second closes itself against it”.<sup>15</sup> A person who experiences internal contradiction, may be someone who wants to live and to die at the same time, for example. Without hesitating to use psychoanalytical vocabulary, Foucault argues that people use different defense mechanisms in coping with external and internal conflicts, but they may not succeed in controlling the reactions, in which case the contradiction between the social and the existential conditions (e.g. personal history) becomes overwhelming.<sup>16</sup>

In sum, in the early essays the notion of experience refers to patients’ first-person perspective of experience (hallucination, delusion, experience of the body), *and* to social phenomena, including internalized social conflicts and cultural ways of explaining mental distress. Even if Foucault makes a clear distinction between the frameworks of existential analysis and social history, they are complementary rather than conflicting perspectives of experience. He will later change many of the views he introduces in his early essays, which affects the ways in which the concept of experience is used in his work.

### 3 Forms of Experience and Limit-Experience in *History of Madness*

In *History of Madness*, as in the second part of *Mental Illness and Psychology*, Foucault investigates how certain phenomena labeled as “madness” were understood before they were classified and defined in medical terminology.<sup>17</sup> He presents a narrative of the constitution of the cultural category of madness and the process in which the objects of medical, psychiatric knowledge become separated from other phenomena such as poverty and criminality. He does not investigate madness as an unchanging object but as different, heterogenous bodies of knowledge—possible ways of experiencing madness within a culture.<sup>18</sup>

The concept of experience plays a significant theoretical role in *History of Madness*. He operates mostly with an objective concept of experience and states clearly that he is investigating the experience of madness and the structures of this experience.<sup>19</sup> By referring to experience, Foucault formulates a method that rejects the idea of the dialectical progress of history. Distancing himself from dialectical thinking, he purports to investigate historical and social “forms of experience” (*mode d’expérience*). In other words, the point of emphasizing different forms of experience is to contrast their diversity with the Hegelian idea of history as dialectical progress:

What matters here is to remove all chronology and historical succession from the perspective of ‘progress’, to reveal in the history of an experience, a movement in its own right, uncluttered by a teleology of knowledge [...] The aim here is to uncover the design and structures of experience of madness [...] That experience is neither progress nor a step backward in relation to any other.<sup>20</sup>

The concept of experience in this context is a spatial abstraction which refers to a field in which madness amongst other phenomena and objects of knowledge may be known, felt, seen and distinguished in specific ways. Foucault uses terms such as “classical experience of madness”, “experience of medicine”, “experience of psychoanalysis” and “Western experience”. “The Experience of Unreason” delineates the field in which the poor, the criminal, prostitutes and the mad are included in the same, broad category and confined in asylums in the 17<sup>th</sup> century. “The experience of madness” is used in contexts in which madness is separated from other forms of unreason and the term “the pathological experience” in contexts in which madness is defined in medical terms.

<sup>13</sup> Foucault, *Mental Illness*, 39.

<sup>14</sup> Foucault, *Dits I*, 150.

<sup>15</sup> Ibid.

<sup>16</sup> Foucault, *Maladie mentale*, 102.

<sup>17</sup> Foucault, *History*, xxxii.

<sup>18</sup> Foucault, *Le gouvernement*, 5.

<sup>19</sup> Foucault, *History*, xxxii–xxxiv; 122.

<sup>20</sup> Ibid., 122.



In *History of Madness* the focus is especially on the social and intellectual exclusion of madness. Foucault asks how mental illnesses become deviances that are excluded in society, and how society understands mental disorders as otherness and refuses to recognize itself in them.<sup>21</sup> He discusses madness and dream experiences as forms of *limit-experience* that are subject to intellectual exclusion when philosophical discourses distinguish them from reason. In one of the late interviews from 1980 he characterizes limit-experiences also as domains or forms of life that are concretely pushed to the margins of society, such as suffering, poverty and criminality.<sup>22</sup> He describes the formation of limits as “obscure gestures, necessarily forgotten as soon as they are accomplished, through which a culture rejects something for which it will be the Exterior”.<sup>23</sup> The idea is that at the same time as limit-experiences are excluded, they embody cultural values that support the very gestures of exclusion.<sup>24</sup> In other words, limit-experiences carry the values of a culture in them and in that sense imply and maintain the continuity of its own, official history.

It is quite commonly claimed that Foucault overlooks individual experience altogether in *History of Madness*.<sup>25</sup> However, as indicated above, rather than completely rejecting the personal-experience perspective, Foucault asks how historical conditions delimit the ways in which it is possible to experience phenomena such as madness, illness, abnormality, normality or health in specific ways.<sup>26</sup> One of his main arguments is that psychiatric knowledge reduces madness to silence, in other words to a form of suffering that cannot speak for itself. This exposes continuities between *History of Madness* and the two early essays on psychiatry and psychology in which the ultimate aim is to give personal experiences a voice of their own.

## 4 The Illusion of Objective Experience

Foucault operates less frequently with the concepts of experience in his middle career from the late 1960s to the mid-1970s, but the word occurs here and there, especially when he discusses psychiatric practices and processes of normalization.<sup>27</sup> He uses the expression “normalizing experience” in his articles and

<sup>21</sup> Foucault, *Mental Illness*, 63.

<sup>22</sup> Foucault, *Dits II*, 886; 1044. In the late articles and interviews Foucault discusses limit-experience also as experiments that question the current conceptions of the boundaries of possible experience. Limit-experiences in this context mean strong, almost unlivable personal experiences (Foucault, *Dits II*, 642–643; 862; 868; 886).

<sup>23</sup> Foucault, *History*, xxix.

<sup>24</sup> *Ibid.*

<sup>25</sup> The first, shortened English translation of the book was published in the series *Studies in Existentialism and Phenomenology* that is associated with R. D. Laing, one of the prominent figures in the anti-psychiatric movement. The preface was written by David Cooper, who invented the term “anti-psychiatry”, and *Madness and Civilization* has been associated with this movement (Hoeller, “Editor’s Foreword,” 7). The anti-psychiatric movement of the 1960s and 1970s emphasized the socio-political and cultural aspects of mental disorders. During the translation process the title of the book was changed from *History of Madness* to *Madness and Civilization* (1964). Whereas the original title makes a distinction between madness and unreason (*folie et déraison*), the title of the translated version frames the book in a new way and stresses the distinction between madness and society. Thus, many later philosophies of madness and histories of psychiatry emphasize aspects of power, the discursive formation of knowledge and social constructivism in their interpretations of Foucault’s thought.

<sup>26</sup> Foucault, *Dits II*, 372–373.

<sup>27</sup> Foucault also refers to experience in a less theoretical way when he articulates his standpoint as an activist and discusses possible ways of restricting the excessive use of power. For example he describes the problems with the popular courts in Mao’s China and criticizes the use of the expression “the experience of the masses”, meaning practices in which the verdict is formulated on the basis of individual opinions (Foucault, *Dits I*, 1213–1214; 1218). However, experience has a more positive meaning when Foucault distinguishes “political experience” from political parties, ideologies and theoretical technicalities. He contrasts “experience” with utopia and encourages people to experiment (*expérience*) with new types of communalities and individualities, even though he is skeptical of projects that presuppose or promote the idea that society is a totality (*ensemble de la société*) (*ibid.*, 1102–1103). Political experience is thus connected to direct, physical engagement characterized as an “existential act” and “moral energy” (Foucault, *Dits II*, 898). Referring to actions that should be taken to improve the prisons, he defends individual experiences and argues that they should be “transformed into collective knowledge” (*savoir collectif*) (Foucault, *Dits I*, 1046). The formation of collective knowledge involves turning experiences of isolated revolt into coordinated practice so that different groups that do not tolerate the situation could come together (*ibid.*, 1044). Moreover, he claims that people tend not to demand political explanations or seek political solutions to their experiences of madness, abnormality or illness, even if political initiatives strongly influence the formation of these experiences (Foucault, *Ethics*, 114).

interviews from the mid-1970s to characterize the features of a “normalizing society” that operates by means of certain mechanisms of control.<sup>28</sup> He states on several occasions that “discipline normalizes”, by which he means that disciplinary institutions aim at changing, correcting and educating individuals by means of regulated practices and internalized techniques. The aim of disciplinary institutions, in his view, is to correct *potentialities*, the potential behavior of the individuals, instead of rectifying their actual behavior.<sup>29</sup> Foucault is concerned with the tendency to perceive human behavior and desires through the lens of pathology.<sup>30</sup>

The view that Foucault would be an anti-experientalist thinker stems from his references to experience in this period. Explaining his archaeological project in 1968 he refers to “illusion of experience” (*illusion de l'expérience*) as a presupposition that things spontaneously constitute fields of knowledge that submit themselves to sciences for discovery and explanation.<sup>31</sup> He is well-known for arguing that different sciences define ways in which it is possible to observe their objects, and the subjects and objects of knowledge are simultaneously formed by the scientific practice. Human beings, for example, do not disclose themselves to the observing gaze in some natural manner. Instead, they become observable as “human beings” or “individuals” in the scientific process. In *The Birth of the Clinic* he investigates the constitution of the observing subject in medicine and the formation of the clinical gaze—the ways in which doctors perceive their patients. He questions the (Kantian) objectivistic notion of experience which presupposes that an act of perceiving could somehow lead to knowledge.<sup>32</sup> He defines the clinic not only as a concrete space or institution but as one of the normative structures and types of medical knowledge that implies articulated ways of using the senses—seeing, touching, hearing—and ways of orienting oneself in the concrete, carefully designed space. In other words, as a normative system “clinical experience” refers to the possibilities of knowing, speaking and perceiving objects in specific ways—that which *can* be perceived, known and said about the objects of knowledge, the patients, in a clinical context.

Foucault also uses the word “experience” in a less positive sense in an interview from 1974, stating that when philosophers claim to be speaking about experience in general they are, in fact, speaking of something very particular.<sup>33</sup> He is undoubtedly referring to phenomenological descriptions of lived experience, as he continues that there is no philosophical discourse without an object that is formed by that discourse, and regardless of whether the object is experience, being, time or whatever, it is discussed in a codified manner that is already something other than an immediate, personal experience.<sup>34</sup>

## 5 The Field of Experience Combines the Axes of Knowledge, Government and Ethics

In his late work from the 1980s Foucault understands the experiencing subject in a much more active way than in his texts on disciplinary power. In the Collège de France lecture series from the mid-1970s onward a reader recognizes a shift from institutions to the everyday experience of subjects who perceive themselves as free beings.<sup>35</sup> In *Abnormal* and *The Psychiatric Power* Foucault investigates how the vocabulary of psychiatry extends to explain the everyday experience and conduct of individuals irrespective of sickness

<sup>28</sup> Foucault, *Power*, 255; *Dits I*, 1322; *Dits II*, 188.

<sup>29</sup> Foucault, *Power*, 57.

<sup>30</sup> Foucault, *Dits II*, 188–189.

<sup>31</sup> Foucault, *Dits I*, 757.

<sup>32</sup> Foucault's critique is targeted at Kant who defines experience (*Erfahrung*) as empirical knowledge, and in a much more theoretical way as “knowledge of objects of sense”, meaning knowledge that involves sense perception (Kant, *Anthropology*, 22). As experience is strongly associated with knowledge it is distinguished from mere sensations, intuitions and feelings. However, at times Foucault refers to experience in a similar way in *The Birth of the Clinic* without defining the concept clearly (Foucault, *The Birth*, 55).

<sup>33</sup> Foucault, *Dits I*, 1390.

<sup>34</sup> One should note that Foucault's views on phenomenology are sometimes problematic. He understands “lived experience” as something immediate and intimate to the individual (Foucault, *Dits II*, 372), but it is not the standard definition of the term in phenomenology. Lived experience should rather be understood as experience that someone *lives through*. In this sense subjectivity, not immediacy, defines lived experience in phenomenology.

<sup>35</sup> Foucault, *Abnormal*, 134; *Security*, 118–120.



or the hospital context.<sup>36</sup> The shift of focus is motivated by his analysis of contemporary society. When Foucault comments on the general elections of 1978 in an interview, he makes a remark that the whole political debate revolves around the topics of life and health.<sup>37</sup> In his view a democratic system is perverted when it claims to support equality and welfare but at the same time produces marginalization as the effect of ill-placed and unnecessary moralism that focuses on subjects' life choices. The problem is that one must either be fully integrated and accept "normal" and conservative ways of being, right diets and ways of sustaining mental health, or one becomes marginalized and excluded.<sup>38</sup>

In the 1977-78 lecture series *Security, Territory, Population*, the theoretical shift from institutions to the everyday experiences of free subjects takes place when Foucault defines the concept of governmentality.<sup>39</sup> Governmentality is defined as the intersection of techniques that are used for governing others and techniques through which one governs oneself.<sup>40</sup> He focuses on the practices that subjects accept and adopt voluntarily but also modify. If the question in his earlier work concerns how people could understand themselves as "mad" and how they were governed, in his late work he investigates the ways in which people govern themselves and become those who govern others. In other words, in this context he uses the concept of experience to connect these different aspects of governing:

In the case of madness, I tried to connect experience of the self as someone mad with the constitution of mental illness, psychiatric practices and the asylum. Here I would like to show how self-government is integrated to the practices of governing others. These are, in short, two opposite paths to the same question: how the type of "experience" is formed, *experience in which the relationship with the self and the relationship with others are linked.*<sup>41</sup>

In the late 1970s and early 1980s Foucault develops concepts— such as *conduct*, *governing* and *care*—that presuppose the aspect of freedom rather than straightforward domination. Implicit in all these concepts, in addition to the notion of guiding someone's behavior and being guided, is the idea of allowing oneself to be guided and doing the guiding oneself. All these concepts imply the ethical aspect of guiding one's own behavior, and thus presuppose subjects who are free. Inherent in their freedom, however, is the need for continuous work on processing their relationships with themselves and with others.

Foucault uses the concepts of governing and conducting in a rather similar way, at times interchangeably.<sup>42</sup> The concept of governing in the 17th-century context as defined in *Security, Territory, Population* includes the aspects of nurturing, benevolent instructions for behavior and prescriptions for diet, daily interaction and processes of exchange between individuals.<sup>43</sup> He defines governing as the "guidance of behavior and individual will" without commanding or exercising force.<sup>44</sup> Conducting is described in a rather similar way as leading others *and* the self in the "open field of possibilities".<sup>45</sup> Arnold Davidson suggests that when Foucault uses the word *conduct* he is trying to find an equivalent expression to the Greek notion of *oikonomia psychon*, the economics of the soul.<sup>46</sup> The concept covers the activity of conducting (*conduire*), the ways in which one conducts oneself (*se conduit*), lets oneself be conducted (*se laisse conduire*) and is conducted, as well as actual behavior as the effect of conducting.<sup>47</sup>

These transitions require a new definition of experience that would reintroduce the perspective of the subject into the analysis and would not overlook the processes of governing and knowledge formation in practices of care.

<sup>36</sup> Foucault, *Abnormal*, 110; 132; 163; *Psychiatric*, 203.

<sup>37</sup> Foucault, *Dits II*, 1200.

<sup>38</sup> *Ibid.*, 1188.

<sup>39</sup> Foucault, *Security*, 121–122.

<sup>40</sup> Foucault, *Ethics*, 225; *About the Beginning*, 204; *Dits II*, 1033.

<sup>41</sup> Foucault, *Dits II*, 1033, italics mine.

<sup>42</sup> Foucault, *Security*, 193; *Dits II*, 1539; *Critique*, 29.

<sup>43</sup> Foucault, *Security*, 122.

<sup>44</sup> Foucault, *Security*, 116; *Critique*, 26.

<sup>45</sup> Foucault, *Power*, 341.

<sup>46</sup> *Ibid.*; Davidson, "In Praise," 26.

<sup>47</sup> Foucault, *Security*, 193.

When Foucault reorganizes his research in the 1980s and characterizes it as the history of subjectivity, he looks back to his early project on psychiatry and redefines his entire work as an investigation of experience.<sup>48</sup> He states that the notion of experience in his early work is left theoretically weak and used too fluidly (*flottante*), and he describes the relationship between his early and his late works as follows:

To study forms of experience...—in their history—is an idea that originated with an earlier project, in which I made use of the methods of existential analysis in the field of psychiatry and in the domain of “mental illness”. For two reasons, not unrelated to each other, this project left me unsatisfied: its theoretical weakness in elaborating the notion of experience, and its ambiguous link with a psychiatric practice which it simultaneously ignored and took for granted.<sup>49</sup>

In this citation Foucault expresses the need to seek another way to define experience in his later work. When he explains what the new study involves he also refers to the institutionalized practices of psychiatry and states that they could not have existed without the integration of scientific knowledge with political decisions and suitable ethical attitudes.<sup>50</sup>

In his writing from 1981 onward Foucault organizes his study according to a tripartite concept of experience, or the “field of experience” (*champ d’expérience*) in which “domains of knowledge”, “types of normativity” and “forms of subjectivity” intersect.<sup>51</sup> These different elements that constitute the field of experience are not structures, capacities or categories of the mind in the Kantian sense but historical conditions that are constantly changing. Although each aspect of experience may be emphasized and highlighted in turn, none of them should be understood as being independent of or separate from the other two. The aim is to explicate the ways in which the ethics of the self, knowledge formation and governing are related, and how changes in one element also affect the others.<sup>52</sup>

In *The Hermeneutics of the Subject* and last three parts of *The History of Sexuality*, Foucault then positions his work as an investigation of the history of subjectivity or of the “experience of the self” in specific cultural contexts. As argued above, he connects this self-experience closely to the question of governing: in his view, political analysis should address the points at which techniques of domination transform into processes in which individuals submit themselves to their own actions.<sup>53</sup>

## 6 Experience of the Self

Foucault’s tripartite concept of experience structures his late work and clarifies the main features of his ethics. By ethics he means the processes and ways in which subjects perceive, observe, understand and form a relationship with themselves and with others. He explains in the second volume of *The History of Sexuality* that it is not sufficient in the investigation of ethics only to demarcate the broad field that conditions possible experience because one needs to ask what happens in the relation to the self when people judge their own behavior, regret, feel remorse or punish themselves.<sup>54</sup> Foucault argues that the ancient Greeks were not worried about normality, or whether some form of behavior was normal. Instead of formulating a set of moral codes (morals refer to certain behavioral codes, prohibitions and sets of values), the ideals of

<sup>48</sup> Foucault, *Le gouvernement*, 5; “Preface,” 334.

<sup>49</sup> Foucault, “Preface,” 334.

<sup>50</sup> Foucault, *Ethics*, 116.

<sup>51</sup> Foucault, *The Use*, 4. There are, in fact, several variations of this tripartite concept of experience in his work. He explains in “Polemics, Politics, and Problematizations” that the field of experience consists of “a game of truth, relations of power, and forms of relation to oneself and to others” (Foucault, *Ethics*, 117). Similarly, in “What is Enlightenment?” he encourages his readers to ask how we are constituted as 1) the subjects of knowledge, 2) subjects who use or submit to power relations and 3) subjects who reflect on our own actions as moral beings (*ibid.*, 318). In *The Government of Self and Others*, in turn, Foucault frames his study as an investigation into “the present field of possible experiences”, which entails analyzing “forms of veridiction”, “procedures of governmentality” and “pragmatics of the self” (Foucault, *Le gouvernement*, 5; 22). In other words, he specifies each element of the knowledge-government-self matrix depending on the context.

<sup>52</sup> Foucault, *Dits II*, 1415–1416; 1516.

<sup>53</sup> Foucault, *About the Beginning*, 203–204; *Dits II*, 1604.

<sup>54</sup> Foucault, *L’usage*, 13.

ethical conduct are closer to the recommendations of dietary routines and regulation of health: moderation, the right proportions, the right timing and avoiding excess.<sup>55</sup> He is interested in therapeutic guidance that aims at self-transformation and encourages subjects to focus on the self, turn the gaze towards the self, withdraw to the self, renounce the self, listen to the self, heal the self, purify, prepare and find that self.<sup>56</sup>

It is a commonly held view that Foucault does not develop a theory of the subject, and it is true that rather than asking the ontological question what the subject *is*, he asks what subjects *do* to themselves and what are the *stakes* of taking care of the self.<sup>57</sup> Instead of giving instructions on how to access happiness, freedom, well-being, harmony, or whatever the objectives of self-care appear to be, the question is how subjects constitute themselves as the subjects of their own behavior, make themselves act in a specific manner and modify themselves using various techniques. The techniques may include dietetic practices, physical and mental exercises and spiritual counselling.<sup>58</sup>

One should note, however, that these techniques are not presented only as historical curiosities but tied to Foucault's theoretical commitments. Even if he compares different ways of experiencing oneself as a subject, he uses concepts such as *subjectivity*, *subject* and *the self* in specific meanings that should be explicated. When he explains that he is investigating the history of subjectivity, subjectivity means the *way* in which subjects experience themselves. As the subject of ethics, for example, one might experience oneself as blameworthy, liable, sinful, pure, guilty, virtuous, responsible or respectable depending on the moral paradigm. *The self* in this context is a concept for the *relation* the subject has with itself. In *Dire vrai sur soi-même* the concept is defined as follows:

the self is nothing less and nothing more than the relation we have with ourselves. [...] That relation is, in any case, always the object, the theme, the base and the aim of a technology, technical conduct.<sup>59</sup>

This is, in fact, a strong philosophical claim: the self is not a substance, a thing or an object, not even a narrative, but a relation which is formed by practical involvement. The type of experience of the self that Foucault articulates is associated with activity. *The subject*, in turn, is defined as the (somewhat) stable point from which the self is worked upon. In other words, the subject should be understood as a position and a situation from which the relationship with the self is formed.

The imperative to take care of the self is integral to the whole Socratic tradition, but Foucault is particularly interested in Stoic philosophy because the practices of care are intensified. The main claim of the third volume of *The History of Sexuality, The Care of the Self*, is that stricter moral codes in the first two centuries AD did not lead to severe sanctions or lists of forbidden actions but to advice to respect, take care of and pay closer attention to oneself.<sup>60</sup> Most importantly, Foucault claims that the Stoics *pathologize* care of the self—it is compared to healing and therapy and described in medical terms. Epictetus (55–135 AD) and Seneca (4–65 AD) compare the practices of care to curing and healing, carrying out amputations and finding blisters and boils, and they portray students of philosophy as patients who suffer from aches as if they had “dislocated joints”.<sup>61</sup> The idea is to learn to recognize oneself as someone sick and incomplete, ignorant and imperfect. Foucault calls the context in which the relationship with the self is intensified as “a new experience of the self”.<sup>62</sup>

<sup>55</sup> Foucault, *Dits II*, 1435.

<sup>56</sup> Foucault, *L'herméneutique*, 46; 151; 172; 207–208; 466.

<sup>57</sup> Lorenzini, “Foucault, Regimes”; Revel, “Between Politics”.

<sup>58</sup> Foucault *L'usage*, 12; *About the Beginning*, 202–203. Besides techniques, the ethical work on the self includes asking which parts of oneself one understands to be the most important *material* for ethical modification and evaluation—do ethical judgments concern feelings, actions, intentions, motivations or desires, for example (Foucault, *L'usage*, 33)? Ethical work also involves asking, what is the *form* of moral obligation: is it connected to following a divine law, a tradition, a community, reason or a feeling? Modifying oneself as the subject of one's own moral actions also implies choosing the mode of being that corresponds to a more general objective (*telos*): is the aim to become free, a master of the self, pure, or perhaps respectful, faithful or reliable?

<sup>59</sup> Foucault, *Dire*, 285, my translation.

<sup>60</sup> Foucault, *Le souci*, 55.

<sup>61</sup> Seneca, *Of Peace*, II; Epictetus, *Enchiridion*, §29; Foucault, *L'herméneutique*, 96; 320; 477; *Le souci*, 71; 73; *Dire*, 56.

<sup>62</sup> Foucault, *Ethics*, 232–233.

## 7 Care of the Self as a Form of Experience

Foucault's late work has been accused of extreme individualism because of the focus on the self and therefore overlooked by political theorists, but it is rather obvious that the different, codified practices of care and self-governance presuppose the whole cultural world and a political context. Foucault shows in his detailed analyses of Plato's dialogues that the practices of care-taking, dietetic regulation and self-modification are an essential part of the education of political leaders and thus connected to the use of power. As Gilles Deleuze puts it, techniques of the self form "a fold of force" within the subject without losing their efficacy during the process.<sup>63</sup>

Foucault also characterizes care of the self in a more general way as a form of *conduct* that governs and modifies the way of being (*ēthos*) of the subject: care of the self implies not only taking care of oneself but also taking care of others, letting oneself be taken care of and the actual practices of care.<sup>64</sup> In Stoic philosophy, and also for example in Plato's *Laches*, the recommendations to pay attention to the self concern all age groups and cover the entire spectrum of daily life.<sup>65</sup> The practices imply a whole variety of relationships from pedagogy and counselling to spiritual direction and life guidance that support the self-culture.<sup>66</sup>

In texts such as *Dire vrai sur soi-même*, *The Care of the Self* and *The Hermeneutics of the Subject* Foucault analyses care of the self as a "form of experience" (*mode d'expérience*). In the context of the history of subjectivity this means the historical and cultural conditions—Greek, Hellenistic and Christian—that facilitate the perceiving of oneself in specific ways.<sup>67</sup> The argument is that the history of hermeneutic labor on the self is not systematized as a set of doctrines but occurs as "conveyed and diffused through Western culture by multiple channels; it is gradually integrated into the models of experience", which means that the attitudes to caretaking that are integrated into personal experiences are not imposed from any one direction that could be easily recognized and specified.<sup>68</sup> He describes care of the self by referring explicitly to experience:

a practice that has its institutions, rules and methods; it is also a form [*mode*] of experience, an individual experience, but it is also a kind of collective experience with its means and forms of expression. In short, I would say that the care of the self is affirmed in experience as a confirmed value; it takes the form of regulated practices; it opens up a field of personal experience and collective expression; and that is why I think we can legitimately talk about a "culture of the self".<sup>69</sup>

The idea is that the practices of care of the self are collectively formed but personally lived through, interpreted and felt, and it may be difficult to distinguish what is spontaneous and original in the ways in which we perceive ourselves.<sup>70</sup> In other words, practices of care are at the same time personal, modes of being present in oneself, and a more general form of knowledge that concerns self-transformation.<sup>71</sup>

<sup>63</sup> Deleuze, *Foucault*, 108.

<sup>64</sup> Foucault, *The Use*, 26.

<sup>65</sup> Foucault, *Le souci*, 85; *Le courage*, 135; 146.

<sup>66</sup> Foucault's notion of care stresses the aspects of relationality and practical engagement with the world. Heidegger argues similarly in *Being and Time* that Being-in-the-world is best characterized as care (*Sorge*), which as a concept concerns practical involvement and ways of encountering the world in everyday existence. Care is not a concept that connotes solitary attitudes. Heidegger's *Sorge* is a concept for pre-ethical, "ontological involvement", which means that before one can make ethical choices one is always already situated in and involved with a world that is meaningful and matters in certain ways (Nichols, *World*, 170). There are also significant differences in Foucault and Heidegger's concepts of care. The most obvious of these is that Foucault's discussion is not ontological, as he investigates explicit statements on the care of the self. Second, he does not focus on everyday involvement with objects, but rather asks how subjects form relationships with themselves and with one another. Third, Heidegger distinguishes care as a mode of encountering from scientific observation, whereas Foucault investigates how practices of care of the self are turned into a kind of science by the Stoics (Foucault, *Le souci*, 44–45).

<sup>67</sup> Foucault, *L'herméneutique*, 172–173.

<sup>68</sup> Foucault, *Dire*, 29; *Dits II*, 1603.

<sup>69</sup> Foucault, *Dire*, 78.

<sup>70</sup> *Ibid.*, 28; 78; *Dits II*, 1603.

<sup>71</sup> Foucault, *Les aveux*, 50.

One could, Foucault argues, speak of “a self-culture” when the recommendations to take care of the self have institutional support, and when they have been absorbed into general attitudes concerning ways of being and patterns of behavior.<sup>72</sup> This definition suggests that even if he locates practices of care in specific cultural contexts, the conditions that define a self-culture can be met regardless of the historical era. The conditions are listed as follows:

1. Culture comprises a set of values with a required minimum of exchange, coordination and hierarchy between them.
2. Individuals embrace certain practices and norms in order to have access to these values. Subjects need to commit themselves to these values with their lives, and to make sacrifices to achieve a way of being that is in line with them.
3. The values of a culture are presented as universals, even if only some individuals have access to them.
4. Achieving the values of a culture involves mastering regular techniques in daily life. The techniques are always connected to the field of knowledge and conceptual systems, and as they are strengthened, transmitted and taught they are also changed.<sup>73</sup>

In short, Foucault identifies interaction between shared values as a prerequisite of a self-culture and, as shown, he includes concrete exercises and techniques in his definition. When he states that he is forming a history of the care of the self as a form of experience and “as a technique elaborating and transforming that experience”, he clearly means that the cultural field that allows one to experience oneself in specific ways is contingent and modifiable.<sup>74</sup> In addition he is also very explicit about the exclusiveness of self-cultures, and in this way he continues the discussion of different forms of exclusion initiated in *History of Madness*.

The socio-political context of Foucault’s analysis and the aspect of exclusion clarify further why the elements of power and governing are included in his tripartite concept of experience that structures his investigation of the culture of the self. On several occasions, he emphasizes the aspect of ethical differentiation (*la différenciation éthique*), the production of differences between those who know the codes of care-taking and those who do not.<sup>75</sup> Even if care of the self was a social practice in the golden age of self-culture, it meant something real only to a limited number of people who could live according to their ideals, and only certain individuals (e.g. Greek aristocratic men, Stoic philosophers) “could accede to the full and complete status of subject through the practice of the self”.<sup>76</sup> The Stoics make a clear distinction between philosophers and the “common people”, and their exercises of hunger and poverty, in which one sleeps in an uncomfortable bed, wears coarse clothes, eats low-quality bread and mixes with the common crowd, hardly make sense to anyone who actually is hungry and poor and does not have the possibility of returning to a wealthy and comfortable life after the experiment.<sup>77</sup>

In *The Hermeneutics of the Subject* Foucault makes a distinction between two forms of exclusion. First, one can be marginalized in a society or excluded from a group of people, such as from a religious movement. Second, social and economic forms of exclusion imply *unequal possibilities for using time as well as unequal access to the necessary means* for carrying out daily activities.<sup>78</sup> The point is that one should aim at recognizing the forms of exclusion even if they are not necessarily manifested in the explicit requirements of inclusion.<sup>79</sup> He explains in “The Subject and Power” that investigating the system of differentiations includes identifying legal or traditional differences in status and privileges; economic differences in the appropriation of wealth and property; space differences in production processes; linguistic or cultural differences; differences in know-how and skills, etc.<sup>80</sup>

<sup>72</sup> Foucault, *Dire*, 29.

<sup>73</sup> Foucault, *L’herméneutique*, 172–173.

<sup>74</sup> Foucault, *Ethics*, 88.

<sup>75</sup> Foucault, *L’herméneutique*, 122; *Le souci*, 59; *Le courage*, 63.

<sup>76</sup> Foucault, *Hermeneutics*, 127; *Le souci*, 59.

<sup>77</sup> Foucault, *Le souci*, 76–77; Epictetus, *Enchiridion*, § 33.

<sup>78</sup> Foucault, *L’herméneutique*, 122.

<sup>79</sup> *Ibid.*, 116.

<sup>80</sup> Foucault, *Dits II*, 1058.



The study of care of the self focuses especially on the differences in know-how and skills, but in practice the production and realization of these differences (economic differences, status and cultural distinctions, access to education) overlap.

Even though Foucault continues to verbalize different, subtle forms of exclusion, and does not simply recommend that people should adopt specific types of techniques and focus intensively on the self, he does not completely reject practices of the self either. One should, in fact, distinguish different functions of care-taking in ancient Stoic practices and understand why they seem so appealing. First, care of the self has a *therapeutic function* of healing the soul, bodily imbalances and errors of thought. Second, rather than discovering the structure of the soul the point is to *equip* and arm the soul with truth so that it would be at hand whenever needed.<sup>81</sup> Foucault emphasizes that for the Stoics the objective is not simply to assimilate the techniques and their discourses into ways of being. The techniques of the self are intended to control the ways in which one integrates discourses of truth into oneself and changes oneself because of them.<sup>82</sup> Exercising, then, is not about blindly adopting truths, but constantly testing them, contesting oneself and asking to what extent one is the subject of one's ethical convictions.<sup>83</sup>

Third, care of the self has a *critical function* in that the exercises allow one to get rid of the detrimental habits, beliefs and opinions acquired as a result of educational or parenting shortcomings and failures.<sup>84</sup> In other words, the promise of care-taking is to provide the means of getting rid of beliefs and attitudes adopted in childhood that are no longer needed. The idea is that, in ideal cases, care serves to manage the space of relationships in a non-authoritarian manner, thereby to facilitate the building up of a city that functions well. Foucault even claims that the practices of care aim at limiting and controlling the excessive use of power because they imply the objective of conducting oneself in a good way in one's relationships with others, and subjects who take care of themselves are difficult to manipulate.<sup>85</sup> This means that taking proper care of oneself does not require turning completely toward one's internal world and failing to form caring relationships – on the contrary.<sup>86</sup>

## 8 Conclusions

I have explicated the different meanings of Foucault's concepts of experience and their theoretical functions. As different concepts facilitate different types of analysis, there is no need to decide whether to emphasize the personal, cultural or discursive aspects of experience. Foucault often refers to experience as a spatial abstraction that demarcates a field of knowledge, but in his late work he develops a concept that includes the first-person perspective of experience without overlooking the societal, cultural and political conditions of the subject's self-understanding. Experience thus cannot be understood in this context only in the most traditional, subjectivistic sense, or as the outcome of activity that organizes perceptions and leads to objective knowledge, and it is not merely an event produced by discourses.

Foucault operates with different concepts of experience throughout his work, especially in his early and late texts that deal with mental distress and health, exclusion of madness, medical knowledge and cultures of care. In *Mental Illness and Psychology* Foucault makes a distinction between two parallel theoretical frameworks: existential psychiatry (or phenomenological anthropology) and social history. Phenomenological anthropology provides him with an alternative way of discussing mental disorders from the first-person perspective. He does not reduce mental illnesses to individuals and their symptoms, but he does not reduce personal experiences to cultural, discursive practices either, as is often claimed. The theoretical framework is profoundly intersubjective, and mental distress is understood as an altered way of relating to others. In the context of social history, Foucault uses the notion "contradictory experience" to

<sup>81</sup> Foucault, *Dire*, 56–57; *Ethics*, 102; *L'herméneutique*, 481.

<sup>82</sup> Foucault, *Dire*, 124.

<sup>83</sup> Foucault, *L'herméneutique*, 444.

<sup>84</sup> *Ibid.*, 476–477.

<sup>85</sup> Foucault, *Dits II*, 1535.

<sup>86</sup> *Ibid.*, 1533–1534.



articulate the societal aspects of mental distress, such as concrete forms of exclusion, economic injustice and exploitation. He continues his investigation into mental illness on the path of social history in *History of Madness*, focusing especially on the topic of exclusion—the intellectual exclusion of madness from the realm of reason and also the processes through which madness is subject to social isolation. Foucault positions *History of Madness* as an investigation of different “forms of experience”—such as “the experience of madness” and “medical experience”—that indicate different, historically delineated normative systems.

In his late work Foucault combines the (micro) perspective of subjective experience with the externalist, objective analysis of experience, introducing a tripartite concept, “the field of experience”, in which the aspects of governing, knowledge formation and the aspect of the subject’s self-relation intersect. When care of the self is defined as “a form of experience”, he is analyzing the ways in which *the self* may be experienced in different cultural contexts. “Experience of the self” is then understood both as a personal experience and a collective, culturally codified phenomenon that implies a whole variety of relationships, shared forms of knowledge and practices of guidance and self-care.<sup>87</sup>

Political theorists tend to overlook Foucault’s late work as a personal crusade that deals with allegedly private issues such as sexuality and ascetic exercise, but his investigation into “experiences of the self” should be understood as a critical study of cultural practices, political discourses, activities and techniques through which one forms a relationship with oneself and with others. The contemporary context that he has in mind is a democratic society in which political discussions revolve around health and subjects who are encouraged to govern themselves. Concepts such as governing, conducting and care are also highly relevant when investigating subtle, productive rather than repressive forms of power in practices of healing and care, or in small pedagogical communities and collectivities that seek well-being and tend to be based on goodwill, benevolence and free choice.

The implicit aim of Foucault’s works is, however, to theorize in a way that facilitates establishing a distance from difficult personal experiences and excessive self-observation and seeing them in a new light. The starting point of ethics and all ethical work on the self requires having an adequate picture of the conditions of subjectivity and one’s own situated way of being.<sup>88</sup> The conditions of possible experience should not then be understood simply as constraints but as the beginning of a process in which one’s mode of being and the world are transformed.<sup>89</sup> When all the key concepts in Foucault’s late work are intersubjective and focused on activity—implying the guiding of oneself and others, being guided and letting oneself be guided by others—the subject’s freedom and the concrete, genuine and positive possibilities of acting upon this freedom lie in the ways in which these relations are formed.

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<sup>87</sup> Ibid., 1533-1534.

<sup>88</sup> Nichols, *World*, 6-8.

<sup>89</sup> Ibid., 7.

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