

POWER AND MADNESS: A FOUCAULDIAN ANALYSIS OF INSTITUTIONAL CONTROL IN *SHUTTER ISLAND*

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Abstract

This study examines Michel Foucault's theories on power and madness through the film *Shutter Island*, focusing on how institutional control shapes perceptions of sanity and insanity. Using *Madness and Civilization* as a theoretical framework, the research explores how psychiatric institutions define and regulate madness, creating "docile bodies" through surveillance and discipline. The data source consists of selected scenes from *Shutter Island* that illustrate institutional control mechanisms. The study employs qualitative methods, including scene analysis and dialogue transcription, to uncover the film's depiction of power dynamics. The findings reveal that the institution on Shutter Island functions as both a physical and psychological prison, using isolation, sedation, and psychological manipulation to maintain authority over patients. The narrative critiques the normalization and pathologization of madness, demonstrating how compliance with institutional norms is rewarded while deviation is punished. Authority figures, particularly doctors, play a central role in shaping patients' realities, exposing the oppressive nature of psychiatric institutions disguised as therapeutic environments. This study offers a contemporary application of Foucault's theories, highlighting the ethical implications of power in mental health care.

Keywords: *Institutional Control, Sanity and Insanity, Madness and Civilization, Psychiatric Institutions, Mental Health Ethics*

1. INTRODUCTION

Michele Foucault work in *Madness and Civilization* critically analyzes how societies construct and manage the concepts of madness and sanity, focusing on institutional roles in enforcing social control (Foucault, 1965). In *Madness and Civilization*, Michel Foucault deconstructs how power operates through societal institutions to define and control madness. His framework of power and knowledge, as well as his examination of mental illness, highlights how those in authority such as doctors, psychiatrists, and administrators create systems that label individuals as "mad" or "sane," subsequently controlling their

bodies and minds. This analysis seeks to apply Foucault's theories to the film *Shutter Island*, exploring how institutional power structures are reinforced through regulating and observing madness. Nirmalawati (2022) underscores that this obedience is not natural but produced through systemic power forces, much like Foucault's concept of docile bodies in institutions.

Foucault's concepts of power and knowledge are inseparable. He argues that those who hold knowledge have the power to define truth, and this power manifests most visibly in societal institutions like prisons, hospitals, and mental asylums. Foucault's madness is

not simply a medical condition but a social construct that changes according to historical and political contexts. His work on institutional control (Foucault, 1965) illuminates how institutions enforce discipline through surveillance, establishing regimes that regulate individuals deemed insane. This resonates with (Garland, 2014) that contemporary societies employ various mechanisms to manage deviance and uphold social order, emphasizing how institutions create a framework of control that punishes and defines normalcy.

Foucault's analysis of the Panopticon a model of institutional surveillance applies directly to *Shutter Island*. According to Manokha (2018), Foucault's analysis of panopticism reveals how surveillance systems create self-regulating subjects, reinforcing power structures without the need for direct intervention. On the island, patients are under constant observation, reinforcing the power dynamics between doctors and patients. The institution on *Shutter Island* operates as a Panopticon, where surveillance is both visible and invisible. The patients know they are being watched but are never sure when or how. This creates a self-regulating mechanism, as the patients begin to conform to institutional expectations in the absence of direct intervention. The power of observation becomes internalized, and individuals alter their behavior to avoid punishment (Foucault, 1977). This disciplinary mechanism ensures that individuals conform to the institutional definitions of normality and deviance, ultimately shaping their identities as "mad" or "sane".

Furthermore, Foucault's concept of the docile body (Foucault, 1977) is central to this analysis. A docile body is controlled and manipulated by institutions to fit societal norms.

According to Roberts (2005), institutions such as psychiatric facilities produce "psychiatric subjects" through the internalization of surveillance and discipline, shaping individuals to conform to predefined categories of sanity and madness. The patients in *Shutter Island* are subjected to various forms of control, from physical restraint to psychological manipulation, to render them docile. As Foucault explains in *Discipline and Punish*, institutions create a regime of power that normalizes certain behaviors while punishing deviance (Foucault, 1977). In this sense, the institution operates not only to treat mental illness but also to produce compliant bodies that fit within its framework of power.

The institution on *Shutter Island* operates as a Panopticon, where surveillance is both visible and invisible. The patients know they are being watched but are never sure when or how. This creates a self-regulating mechanism, as the patients begin to conform to institutional expectations in the absence of direct intervention. The power of observation becomes internalized, and individuals alter their behavior to avoid punishment (Foucault, 1977). Foucault's theory of madness, especially as articulated in *Madness and Civilization*, provides a framework for understanding the power structures within mental health institutions. Foucault (1965) argues that society constructs madness to justify isolating individuals who deviate from the norm. This is reflected in *Shutter Island*, where the institution defines patients as insane and subsequently controls every aspect of their existence. The island itself acts as a microcosm of Foucault's "carceral archipelago," where discipline and punishment are exercised through constant surveillance (Foucault, 1977).

This paper argues that the institution itself, through its surveillance and control mechanisms, serves as a Foucauldian “apparatus of power” that defines, confines, and constructs madness in ways that reflect broader societal attitudes toward mental illness. By employing Foucault’s theory, this study not only deepens the critique of psychiatric institutions but also highlights the ethical implications of power dynamics within mental health care systems.

2. LITERATURE REVIEW

Unlike prior research, such as Alfina Dewi Fortuna and Endang Yuliani Rahayu's (2023) "Defense Mechanism on The Main Character of Shutter Island" and Sandra Meiri and Odeya Kohen Raz's (2021) "Dream and Fantasy in Shutter Island: Trauma, Historical Guilt, and Ethics", which primarily apply psychoanalytic frameworks to examine the protagonist’s psychological struggles, this study shifts the focus to Michel Foucault’s theory of power and knowledge. Specifically, it investigates how institutions construct and manipulate notions of sanity and insanity through mechanisms of surveillance, discipline, and normalization, leading to the creation of the "docile body" (Foucault, 1977). While previous studies, such as Shadi Jahandide and Zahroe Taebi's (2003) "The Study of Foucault's 'The Composition of Forces' in Shutter Island" and Behesti's (2009) "Foucauldian Docile Body in Dennis Lehane's Shutter Island", have explored general Foucauldian concepts like the composition of forces and institutional control, they have not fully examined how these power structures operate within the psychiatric institution depicted in Shutter Island. By applying Foucault’s theories from *Madness and Civilization* (1965) and *Discipline and*

Punish (1977), this study provides a detailed analysis of how surveillance, medical authority, and psychological manipulation shape patient behavior and reinforce institutional dominance. This approach allows for a more nuanced understanding of how Shutter Island serves as a critique of psychiatric institutions and their role in defining and controlling mental illness.

3. RESEARCH METHOD

This research employs a qualitative method in line with Creswell's guidelines, analyzing *Shutter Island* through a Foucauldian lens, focusing on power, madness, and institutional control. Qualitative approaches, as noted by Creswell (2014), enable an exploration of deeper meanings within narratives and their social contexts. The data collection involves systematically selecting key scenes relevant to the themes of surveillance and control, and capturing screenshots to illustrate institutional power dynamics, including psychological and physical manipulation. By integrating visual and textual elements, this study reveals how institutional power operates within the film's narrative. The analysis is conducted interpretively, exploring the meanings behind the symbols and narratives in the film, ultimately demonstrating that the institution in *Shutter Island* functions as a Panopticon, where surveillance is both physical and psychological.

4. RESULT AND DISCUSSION

The analysis of Shutter Island reveals several key findings regarding institutional power, surveillance, and control over patients within the film’s narrative. These aspects not only demonstrate how institutional authority dominates patients’ bodies but also shape their identities and perceptions of

reality. To provide a deeper interpretative foundation, this study incorporates Foucault's theoretical framework, offering critical insights into the power structures embedded within psychiatric institutions.

Through a textual examination, various visual and narrative elements in *Shutter Island* are analyzed to uncover how power dynamics, psychological manipulation, and the institutional setting. The exploration sheds light on the intersection of mental illness and authority, influencing both the characters and the audience's perception of the unfolding story. By doing so, this study contributes to a broader critique of psychiatric institutions and the ethical implications of power in health care.

4.1 Sueveillance and The Panopticon



Figure 1. Surveillance and the Panopticon from the Guards

The two figures above reflect the pervasive nature of surveillance, control, and the panopticon structure in the context of institutional power. In the first Picture of Figure 1 above, Teddy Daniels (who is Andrew Laeddis, a patient in the mental institution) stands alongside

Chuck (Dr. Sheehan, a psychiatrist), both visually framed by authority figures — guards in the background — symbolizing institutional surveillance and hidden power dynamics. Chuck's relaxed posture and authoritative demeanour signify his role as an agent of the institution, an overseer within the panopticon. Chuck embodies "*sanity*" and control, free from observation yet functioning as part of the apparatus that monitors and regulates those perceived as "*insane*." In contrast, Teddy's guarded presence and tense expression place him in the position of a panoptic subject, constantly under implicit and explicit surveillance.

In the second picture of Figure 1 above, the dynamic between Teddy and the woman further intensifies the panoptic theme. The woman, seated across from Teddy, is visibly adjusting herself, a clear indication of her awareness of being observed — not just by Teddy, but by the institutional mechanisms of power that permeate the scene. Her subtle movements reflect Foucault's concept of internalized surveillance, where the subject anticipates judgment and control, leading to self-regulation. The kitchen staff and guards in the background reinforce the omnipresence of surveillance, creating an atmosphere where every individual is both watched and unknowingly becomes part of the system that perpetuates control.

The woman's discomfort symbolizes the invisible yet powerful gaze of the panopticon, where subjects adapt their behaviour out of fear of being watched, even when the source of surveillance is not directly visible. Her anxiety reflects the broader institutional authority that dictates norms of "*sanity*" and "*insanity*," forcing individuals to conform to societal expectations of behaviour. Teddy, on the other hand,

embodies the subject under constant psychological scrutiny, unable to escape the panoptic structure that seeks to control his identity as a patient. Even in a seemingly casual interaction, Teddy and the woman exist in a state of mutual observation, where the institutional power surrounding them creates a hierarchy that dictates their roles and actions.

This dual-image analysis highlights Foucault's assertion that surveillance in modern institutions — such as mental asylums — does not merely monitor individuals but actively constructs and reinforces identities. The panopticon, in this case, operates both visibly (through guards and staff) and invisibly (through internalized self-surveillance), ensuring that subjects like Teddy and the woman are controlled and categorized. Surveillance, thus, functions as a tool to uphold institutional power, shaping individuals into controlled subjects while maintaining the distinction between the "*sane*" and the "*insane*."

4.2 Physical and Psychological Control



Figure 2. Patients under Physical and Psychological Control

Figure 2 The image above vividly captures the severe physical and psychological control imposed on the patients at Ashecliffe Hospital on Shutter Island. Confined within the institution's walls, the patients are stripped of their clothing and placed in small, enclosed spaces behind metal bars, which act as a physical boundary preventing any potential escape. This stark visual imagery underscores the total lack of autonomy and personal freedom the patients experience. The absence of clothing strips away their personal identity and dignity, reinforcing the idea that the institution does not merely control their bodies but seeks to erase their individuality, rendering them faceless and anonymous. The metal bars, which trap the patients in their confined environment, symbolize the physical boundaries imposed by the institution, reducing them to mere objects under constant surveillance. This rigid confinement highlights the totalitarian nature of the institution, where patients are not seen as individuals with rights but as bodies to be controlled, manipulated, and monitored. In this setting, the institution wields an overwhelming sense of power, enforcing conformity through physical domination. The patients, especially in their exposed state, serve as a visual reminder of how the institution imposes dominance, rendering them powerless and stripping them of their humanity.

The psychological toll of this physical control is evident in the emotional and mental degradation of the patients. Their exposed bodies amplify their vulnerability, and their confinement within the institution's walls speaks to their total lack of agency. This loss of physical freedom is coupled with deep psychological distress, as the patients live in a constant state of fear and uncertainty. George Noyce, one of the

patients, embodies this dual control as his vulnerable, shirtless figure intensifies his sense of exposure and helplessness. Trapped behind bars, Noyce's caged environment represents his complete loss of autonomy, both physically and mentally. Psychologically, the institution extends its control far beyond physical imprisonment. Noyce's fear of lobotomy illustrates the invasive nature of the psychological manipulation at play. His chilling statement, "*They're gonna cut into my brain,*" encapsulates the ultimate violation of personal autonomy—the surgical erasure of his mental faculties. Lobotomy becomes the ultimate tool of fear, a method by which the institution exerts power over the minds of its patients, stripping them of their thoughts, memories, and identities. This psychological control creates an atmosphere of paranoia and mistrust, as patients, like Noyce, live in constant fear of what the institution might do to them next.

Noyce's belief that he will undergo a lobotomy highlights the institution's manipulation and its ability to foster a climate of fear. The secrecy and lack of transparency within the asylum contribute to the sense of unease, further eroding any trust between the patients and their captors. The institution's power is rooted not just in physical control but in the manipulation of the mind, where fear and isolation force the patients to submit to their fate. The transformation of the lighthouse into a symbol of terror within Noyce's narrative underscores the psychological power of the institution. Traditionally seen as a place of guidance and hope, the lighthouse in Noyce's mind becomes a site of horror, representing the ultimate control over the mind and body. This inversion of the lighthouse's symbolism highlights the institution's ability to distort reality and manipulate the emotions of its patients,

further solidifying its psychological dominance.

On a deeper emotional level, Noyce's nakedness serves as a powerful metaphor for his vulnerability, both physically and psychologically. Stripped of his defenses, Noyce's exposed body reflects his complete submission to the institution's control. His nakedness symbolizes the totality of the institution's dominance, extending beyond physical confinement to encompass his entire sense of self. The lack of clothing represents the erasure of his personal identity, while his isolation in the confined space amplifies the emotional isolation that all patients experience within the institution. Without communication, transparency, or care, patients like Noyce are left to endure overwhelming psychological trauma alone, heightening their sense of powerlessness.

In this way, the image of the two figures above powerfully illustrates how Ashecliffe Hospital exerts both physical and psychological control over its patients. The physical confinement behind bars and the lack of personal agency reflects the institution's total dominance over the bodies of its inhabitants, while the fear of lobotomy and the pervasive psychological manipulation reveals the deeper, more insidious control exercised over their minds and emotions. The scene underscores Foucault's theory of institutions as spaces of surveillance and dominance, where control is not just physical but psychological, manipulating the very identity and autonomy of the individuals confined within. Noyce's vulnerability, paranoia, and helplessness serve as a stark representation of the institution's far-reaching power, which extends beyond the body to the mind and soul of every patient.

4.3 Normalization and Pathologization of Madness



Figure 3. Normalization and Pathological Patients

Figure 3 above the two images offer a striking representation of the normalization and pathologization of madness. In the first image, we see a chained patient performing routine tasks, such as working in a garden. This reflects the concept of normalization, where individuals deemed "*mad*" are guided into activities that align with societal norms and expectations. By participating in these tasks, the patient internalizes the institution's rules and begins to believe that compliance will help them be perceived as "*normal*." This shows how power operates subtly, influencing the patient to self-regulate their behaviour in ways that align with the institution's goals. On the other hand, the chains in the images vividly highlight the pathologization of madness. The institution treats "*madness*" as a condition that is not only abnormal but also dangerous, requiring strict surveillance and control. The chains symbolize the institution's view that such

individuals must be restrained, both physically and mentally, to protect society and maintain order. By chaining the patient, the institution enforces a clear distinction between "*normal*" and "*abnormal*," reinforcing the idea that those labelled as mad must be isolated and monitored to prevent their perceived disorder from disrupting societal norms.

These images reveal the dual process Foucault describes—normalizing madness by integrating individuals into controlled routines, while simultaneously pathologizing it through physical and symbolic mechanisms of restraint. The patient embodies this duality: they are both an object of institutional control and a participant in their own normalization. This dynamic demonstrates how institutions exercise power by shaping individuals' understanding of what is "*normal*" while marginalizing those who deviate from it. Through these images, we see how madness is both normalized as a manageable condition and pathologized as a state requiring constant institutional control.

4.4 Mechanism of Institutional Control



Figure 4. Lobotomy as Control Mechanism

Figure 4, Rachel Solando casually discusses the process of lobotomy, stating, "*Then go through the eye with an ice pick, pull out some nerve fibers. Makes the patients much more obedient.*"

obedient." This statement starkly illustrates the extreme measures employed by the institution to exert control over its patients. Rachel's portrayal transforms lobotomy—a brutal and dehumanizing practice—into a mere instrument for ensuring obedience. Her nonchalant demeanour underscores how the institution utilizes medical procedures not for healing, but for the sake of domination. According to her account, lobotomy strips individuals of their autonomy by specifically targeting nerve fibers within the brain. This procedure effectively erases the distinctiveness of the patients, rendering them compliant and manageable. The institution's ultimate aim is to convert individuals into submissive subjects.

Moreover, lobotomy symbolizes the suppression of any form of dissent. Those patients who fail to align with the institution's concept of "*sanity*" are often subjected to this procedure. By undermining their ability to engage in critical thinking or resist, the institution guarantees its control over them. This situation illustrates how institutional authority reshapes individuals to conform to a limited definition of normalcy, sacrificing their humanity in the process. Rachel's depiction of lobotomy serves as a representation of the most extreme form of control—eradicating a patient's capacity to resist or think independently. What is particularly disturbing is not merely the act of performing a lobotomy, but the underlying psychological manipulation that accompanies it. The institution wields this procedure as a punitive measure, reinforcing its dominance and instilling a sense of fear among patients. This further emphasizes that the institution is not interested in genuine healing, but rather in preserving order through coercive tactics, ultimately

transforming patients into passive entities.

4.5 Influence of Institutional Authority Figures



Figure 5. Authorities discuss about the Patients

In the scene shown in Figure 5, a group of men, including doctors and administrators, sits around a table discussing important institutional matters. This setting highlights the concentration of power within the psychiatric institution, emphasizing how patients are excluded from discussions that directly affect their lives and treatment. The men, dressed formally, represent the authority and hierarchy of the institution. The formal conference room, with its polished table and serious atmosphere, conveys a sense of order and control. Decisions made here are not just administrative but carry significant weight. However, this seriousness reveals a troubling truth: patients' well-being often takes a backseat to maintaining institutional order.

The absence of patients in these discussions is crucial. It shows their lack of agency in a system meant to care for them. By excluding patients, the institution creates a top-down model of care where patients are treated as subjects rather than active participants in their treatment. This reinforces the idea that authority figures possess knowledge and power over patients' lives. This scene can also be viewed through

Foucault's theories on power and surveillance. The men symbolize the panoptical gaze of the institution, where surveillance is about controlling not just patients but their narratives and experiences. By making decisions without patient input, these authority figures dictate what is deemed "normal" or "acceptable," often sidelining the voices of those they are supposed to help. This scene captures the significant influence of institutional authority figures in the psychiatric system. It reveals a structure that prioritizes institutional stability over patient autonomy, highlighting how power dynamics shape psychiatric care. Understanding the role of these authority figures is essential for critiquing institutional control and addressing the ethical issues in mental health treatment.

4.6 The Manipulation of Reality

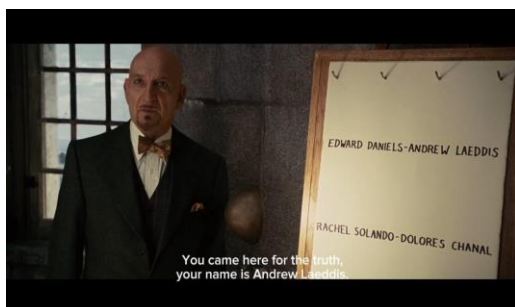


Figure 6. Dr. Cawley reveals Teddy's true identity

Figure 6, the confrontation between Dr. Cawley and Teddy Daniels (or Andrew Laeddis) is a key moment that shows how reality is manipulated within the institution. This scene highlights the complex relationship between identity, authority, and the psychological trauma that arises from facing uncomfortable truths. When Dr. Cawley tells Teddy he has come "for the truth," it challenges Teddy's self-view and reveals the manipulation at play. The board displaying "EDWARD DANIELS -

ANDREW LAEDDIS" symbolizes Teddy's true identity and the painful reality of his dissociative identity disorder, showing how the institution controls his narrative. This stark presentation forces Teddy to confront the fragmented self he has been avoiding, emphasizing themes of fragmentation and repression that institutional settings often bring to light.

Dr. Cawley, representing institutional authority, dictates how Teddy's story is told and how he should accept the truth. This manipulation breaks down Teddy's defences, forcing him to face his past. The psychological struggle he experiences reflects how the institution shapes individual realities, using manipulation as both a treatment method and a means of control over patients' self-understanding. The forced confrontation with truths Teddy may not be ready for illustrates the theme of reality distortion, as patients are often presented with narratives that challenge their beliefs about themselves. Ultimately, the moment between Dr. Cawley and Teddy captures the film's exploration of reality manipulation, showing how institutional power can distort perception and force individuals to confront difficult truths. The scene critiques psychiatric practices, highlighting the ethical dilemmas surrounding authority, identity, and the pursuit of truth. *Shutter Island* serves as a reminder of the fragile nature of reality and the profound impact that institutional forces can have on the human mind.

4.7 Confinement and Isolation



Figure 7. Overhead Short of Teddy Running to the lighthouse

Finally, Figure 7, depicting Teddy walking toward a distant lighthouse, serves as a strong visual metaphor within Foucault's theories on power, surveillance, and control. The barren landscape symbolizes Teddy's mental and emotional isolation as he struggles with his identity and trauma. The lighthouse represents both the search for truth and its unattainability, reflecting how institutions, especially psychiatric ones, control access to knowledge. In Foucault's view, institutions like *Shutter Island* are not just places for treatment but also surveillance and discipline. The lighthouse, surrounded by water, symbolizes the barriers Teddy faces in breaking free from the psychological control imposed by the institution. Like Foucault's Panopticon, it constantly watches and reinforces the limits of what Teddy can understand about himself.

The water around the lighthouse further emphasizes Teddy's confinement, echoing Foucault's idea that institutions control not only the body but also the mind. Teddy's journey to the lighthouse reflects his internal struggle, but the institution's power prevents him from reaching the truth about his identity. His search for clarity is manipulated by those in control, keeping him trapped in a cycle of confusion. The lighthouse is a metaphor for institutional control, symbolizing both hope and unreachable truth. Teddy's inability to

reach the lighthouse reflects his deeper entrapment within the psychiatric institution, where his identity and reality are shaped by those in power. the lighthouse in *Shutter Island* encapsulates the themes of confinement and isolation central to Foucault's critique of institutional power. It represents how control is maintained not just through physical imprisonment, but through the manipulation of identity and reality, trapping individuals in cycles of surveillance, dependency, and loss of autonomy. The film's narrative critiques these power dynamics, showing the profound effects of institutional control on the human mind and sense of self. This scene critiques how institutions govern the mind as much as the body, shaping individuals' understanding of themselves and their world.

5. CONCLUSION

This analysis of *Shutter Island* through a Foucauldian lens reveals the intricate dynamics of power and madness within institutional settings. By employing Michel Foucault's concepts of surveillance, normalization, and the docile body, the film is depicted as a critical commentary on psychiatric institutions and their methods of control. The findings illustrate how the institution operates as a Panopticon, where constant observation and manipulation shape the identities and behaviour of the patients. The authority figures, particularly the doctors, serve as instruments of power, dictating the definitions of sanity and madness while simultaneously reinforcing the institution's dominance. The mechanisms of physical and psychological control further highlight the vulnerability of the patients, who are subjected to isolation and manipulation, rendering them incapable of contesting their subjugation.

These findings emphasize the need for a deeper understanding of the institutional forces at play in mental health care. The film serves as a critique of the societal constructs surrounding mental illness, urging further examination of the ethical implications of institutional control. Future research could explore how contemporary psychiatric practices continue to reflect Foucauldian themes of power and discipline. Additionally, this study encourages a broader discourse on patient rights and the role of surveillance in modern mental health institutions to ensure that psychiatric care prioritizes ethical treatment over coercive control.

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