Index

Abdominal Aortic Aneurysm screening service (AAA screening service), 115 Additional support needs, 57, 60-62, 63-71 reality of, 75 Advanced nurse-practitioner, 91 - 93Alliance, 12–13 Amphetamine, 102 Apparatus, 15–16 of alliance, 17-18 analysing, 17-18 as analytical focus, 13–14 of education, 41-42 function, 16-17 as a topology, 35 of truth, 11–13 Archaeology, 21-22 'Attachment' discourse, 81 Attention deficit hyperactivity disorder (ADHD), 1, 68-71, 75-76, 80-81, 83, 91, 115, 121 assessment, 101 child, 93 combining ethnography and Foucault to investigating, 125 - 127constructing problem, 79–81 creating everyday practice, 96-98 diagnostic process, 27–28 discontinuity of practice, 84-85 diverse logics of problematisation, 81-84

frequency of appearance, 6, 7 functioning of ADHD knowledge and treatment, 114-116 layering, 79-80 machine, 87, 91–92, 93, 97 - 98, 102problematising ADHD diagnoses, 7 psychological truth, 3 rise of, 5-7risk, 92 shifting procedures, 85-88 symptoms, 1-2'truthing' ADHD through psychiatric research, 3-5'working backwards' process, 80 - 81see also Methodological plan Authorities of delimitation, 23 Autism Spectrum Disorder (ASD), 73-75, 129-130 Autistic traits, 129-130

Better Schools and Working Together: Education and Training, 43–44 Biological aetiology, 4–5 Biological defects, 58 Biomedical logic, 86 Black Report, The, 96 'Boolean' technique, 32 Bretton Woods agreement, 40 Bureaucratic and domestic machinery, 13–14, 32–33 Child and Adolescent Mental Health Service (CAMHS), 6, 15, 27-28, 29-30, 79, 91, 92, 115, 116 comparing CAMHS practice with official knowledge, 84 - 85management structure, 30 professionals, 30-31 service, 27-28, 34 service specification, 91 team meetings with membership, 31 Children and Young People (Scotland) Act (2014), 97 Clinical judgement, 92 to streamlined assessment, 85 - 88Competency-based career framework (KSF), 94 Complex inequality, 54 Complex needs, inclusion of, 59 - 61Concrete constellations, 126–127 Conners' rating scales, 88, 92–93 Contemporary psychiatric power, functioning of, 106-107 Contemporary transdisciplinary ethnographic research, 125 - 126Correlations, system of, 35 Critical theory-driven ethnographic approach, 33 Critical ethnography, 27-32 'Critique of International Consensus Statement on ADHD', 123 Curriculum Guidance 8: Education for Citizenship, 43

Defined Daily Doses (DDD), 5 Deindustrialisation, 40–42, 47–50

social exclusion as problematisation of the effects of, 53 Delinquent child, problematisation of, 11 Developmental psychopathology, 84 - 85Dextroamphetamine, 102 Diagnostic and Statistical Manual of Mental Disorders, 111 - 112Disability changing category of, 56-57 new technology of, 57-59 Disciplinary power, 102-104 elaborating the functioning of, 102 - 104Discipline and governmentality, 10 - 11Discipline and Punish (Foucault), 11, 12, 104, 105 Discourse, 8-10 of active citizen, 43 of clinical psychology, 23 Foucault's concept, 10–11 Discursive practices, 21 Dispositif, 16 Disruptive Behaviour Disorders, 130 Division, 71-76 Dopamine, 130-131 Dysfunctional neural circuitry, 121

Education, 53 changing category of disability, 56–57 young person shaping through inclusion, 55–56 Education (Additional Support for Learning) (Scotland) Act (2004), 57, 60–61, 66 Education (Scotland) Act (1945, 1981), 57-58, 60 Educational psychology, 77 Education Reform Act (1988), 42 - 43Embodied objectivity, 134 Emotion 'dysregulation', 82 Encouraging Citizenship, 43 Enterprise Zones, 45 Enunciative function, 22-23 'Epiphenomena' subjects, 125 - 126Extremities of power, 25–26, 31-32, 124-125 Family as 'hinge' in psychiatric power functioning, 107 - 108Fatal unclutteredness, 129 Finance Act (1980), 45 Floating population, 13 Formal psychiatric knowledge, 102 Formulaic approach, 87 Foucauldian concept of power, 24 Foucauldian conceptualisation, 95-96 Foucauldian governmentality studies, 95-96 Foucauldian scholarship, 125-126 Foucauldian-inspired ethnographic 'case study', 27 apparatus as a topology, 35 applying rhizomatic logic/ offering topological account, 32-35 critical ethnography, 27-32 Full employment, 38 Functional overdetermination, 12-13, 17-18

Functioning of contemporary psychiatric power, 106-107 Genealogy, 21–22 Google Books Ngram Viewer, 6 Governance neoliberalism as, 93–94 of young people, 134 Governmental practices, 33 Governmentality, 10-13, 101 - 102Grids of specification, 23-24 'Handicapped' category, 58, 59 Health Divide, The, 96 History of Sexuality, 11, 12, 14, 17 - 18Illness, 83-84 Impaired emotion regulation, 82 Impaired emotional availability, 81 - 82Incentives, 45-46 Inclusion, official procedures of, 63 avoiding inscription of 'severity' as 'real' difference, 76-77 'witches brew' of actual practice, 71-76 Inclusive education, 128-129 Inequality, 47, 128 Infinitesimal mechanisms, 25–26 Information Services Division (ISD), 5 Insecure anxious attachment, 82 Interconnected economic system, 40 - 41'International Consensus Statement on ADHD', 123 International Narcotics Control Board (INCB), 5 Invisible machinery, 14

Journal of Orthopsychiatry, 4 Knowledge, 8-10, 16, 17 objects and agents of, 133 partiality, 132-133 'psy' knowledges, 4, 11 Labour and Conservative political party archives, 32 Labour market, 38 Layering, 34-35, 79-80 Le dispositif, 16-17 Learning, 44 Leper colony, 105 Life-long learning, 44-45 Lines of flight, 36 Local Government Planning and Land Act (1980), 45 Mainstream school, 56–59 Malleability of reality, 126 'Margaret Thatcher Foundation, The', 32 Marginalisation of young people, 50 Marshall plan, 40 Medical authority, 115 Medical examination as 'ritual of 'truth', 101-102 Medical services, 115 Medically induced docility, 102 - 104Medication review, 101, 102, 130 - 131actual functioning of psychiatric panopticism, 104 - 105elaborating the functioning of disciplinary power, 102 - 104extending beyond confines of the 'review', 108-111

family as 'hinge' in functioning of psychiatric power, 107 - 108functioning of ADHD knowledge and treatment, 114-116 functioning of contemporary psychiatric power, 106-107 invoking biomedical authority, 112-114 medical examination as 'ritual of 'truth', 101-102 systematisation of psychiatric statements, 111-112 Methodological plan, 15 apparatus, 15-17 apparatus and social reality, analysis of, 17-18 methods for application of theory, 18-25 See also Attention deficit hyperactivity disorder (ADHD) Methylphenidate, 5, 83-84, 102, 130 - 131Micro-level examination. problematising ADHD through, 123 combining ethnography and Foucault to investigating ADHD, 125–127 keeping the account moving and unfinished, 129-133 revealing disreputable origins and unpalatable functions, 127 - 129Milling, 38 Modernisation, material effects of, 41 - 42Modernising agenda, 94-95, 96 'Movement', 132 Multiple deprivation, 54

National certificate, 44 National Curriculum, 42–43 National Health Service (NHS), 15, 94-95, 97 management structure, 30 National Programme for Improving Mental Health and Wellbeing, 96-97 National Services Scotland, 5 Neoliberalism, 39 as governance, 93–94 in Scottish apparatus of health, 94 - 96Neurodevelopmental disorders, 97-98, 130 Neurological dysfunction, 130 New Right flagship, 45-46, 47 rationalities, 39-40, 42 New Training Initiative: A Consultative Document, A, 43 - 44New Training Initiative: A Programme for Action, A, 43 - 44Normalisation, 71–76 Nurse prescribing/prescriber, 91, 93 - 94Nursing, 91 expanding authority of, 91–93 'Nurture group' intervention, 72 - 73

Objective science, 123–124 Objective vision, 134 Objects of thought, 124 Official communications, 28 Organicity of hyperkinesis, 4

Paralysis, 133 Parent-child relationship, 81–82 Parenting, 82–83, 130 Partiality of knowledge, 132-133 Plasticity of reality, 126 Political Parties and Parliamentary Archives Group, The, 32 Politico-economic rationalities. 39 New Right politico-economic rationalities, 42, 45 Position dysfunction, 83-84 Post-Foucauldian scholarship, 125 - 126Post-industrial society, 47 increasing requirement for education without jobs, 47 - 49material effects of, 47-50 requirements of 'new' citizen of, 40 - 41social exclusion and marginalisation of young people, 50 Poverty, 37, 42-43, 54, 128 Powellism, 40 Power, 8-10, 16, 17 configuration, 10 Foucault's concept, 10–11 Practical texts, 29-30 Problematic behaviours, 83, 84, 85-86 Problematisation, 7, 11, 20, 35-36, 44, 87 diverse logics of, 81-84 social exclusion as, 53 Problematising moments, 20-21 'Psy-complex' reality-versions, 2 'Psy' knowledges, 4, 11 Psychiatric judgements, 4 Psychiatric knowledge, 71-77, 88, 102 Psychiatric panopticism, actual functioning of, 104-105

Psychiatric Power (Foucault), 16-17, 104, 106-107 Psychiatric power, functioning of family as 'hinge' in, 107–108 Psychological attributes, 82–83 'Psychopath', 4 Psychostimulants, 15, 83-84, 93, 102-104, 131-132 'Public health' strategy, 95 Reality-versions, 2 'Reforms', 42-43 Revised Tanner-Whitehouse questionnaire, 88 Rhetorical objectivity, 93 Rhizomatic logic/offering topological account, 32-35 Ridley report, 40 "Rules of formation of discursive objects", 23, 24 Safe, Healthy, Achieving, Nurtured, Active, Respected, Responsible, Included (SHANARRI), 97 School-based disability, 57 School-based problems knowledge for understanding, 66 - 68Scottish apparatus of education, 42-44 of health, 94-96 Scottish devolution, 54–55 Self-care, 96 Self-regulation, 84, 117–119 'Selsdon' agenda, 40 Severity, avoiding inscription of, 76 - 77Sexuality, 12–13, 20 problematisation of, 11 Shifting procedures, 85-88 SMARTS programme, 130 'Snowball' approach, 31

Social exclusion, 54–55, 60, 127 as problematisation of deindustrialisation effects, 53 of young people, 50 Social Exclusion Unit (SEU), 54 Social inclusion, 53 emergence of, 54–55 expanding continuum of need, 59 - 61young person shaping through inclusion, 55-56 Social practice of ADHD diagnosis and treatment, 27 Social reality analysis, 17-18 Special education needs, 60–61 'Staged/tiered' approach, 66 'Standard grade', 44 Standards in Scotland's Schools etc. Act (2000), 60 Statements, 18, 19–20, 22 - 23, 80Strategic elaboration, 12–13, 17 - 18Strategic Management Group, 29 Subjective reassemblage, 126 Subjectivities, 24-25, 126 'Super-duper' parents, 130 Surfaces of emergence, 23 Synecdoches, 32 Systematisation of psychiatric statements, 111-112

Technologies of power and self, 24 'Third-Way' politics, 53, 54 *Thousand Plateaus: Capitalism and Schizophrenia, A*, 35 Topological account, 35–36 applying rhizomatic logic/ offering, 32–35 'Truthing' of 'hyperkinesis', 4–5 Truths, 10–11 apparatus of, 11–13 medical examination as 'ritual of 'truth', 101–102 psychological, 3 Two-stage process, 20

'Underlying abnormality', 75–76, 77 Unemployment, 38, 50, 128 Unforeseen effects, 17–18 Utopian duplication, 121–122

Vita: Life in a Zone of Social Abandonment, 13–14, 32–33 Vocational training, 43–45, 50 Warnock report, 57–58, 59, 60 Watson's analysis, 76–77 Wellbeing agenda, 93–94

function of, in Scottish apparatus of health, 94–96 improvement strategies, 95 'Witches brew' of actual practice, 71–76 Working backwards' process, 80-81

Young person/people, 37, 39–40, 101 - 102apparatus of education, 41-42 changing fortunes of region, 37 - 38creating new background for active, 44-45 differing dimensions of Scottish apparatus of education, 42 - 44'New Right' rationalities, 39 - 40requirements of 'new' citizen of post-industrial society, 40 - 41shaping, through inclusion, 55 - 56social exclusion and marginalisation of, 50 Youth Training Schemes (YTS), 38, 50

Zombie effect, 130-131