

# Contents

Detailed Contents *vii*

Acknowledgements for Readings *xv*

List of Reading Guides *xxi*

Preface: A Proactive Textbook *xxv*

Foreword (from the voluntary sector)

Lord Victor Adebowale *xxvii*

Foreword (from clinical practice)

Professor Ahmed Okasha *xxix*

Foreword (from philosophy) Baroness Warnock *xxxii*

## Introduction

1 'Progress in Five Parts' *xxxv*

### PART I

## Core concepts in philosophy and mental health

Introduction to Part I *2*

2 Philosophical Problems in Mental Health Practice and Research *3*

3 Experiences Good and Bad: An Introduction To Psychopathology, Classification, and Diagnosis for Philosophers (co-author: Richard Gipps) *31*

4 Philosophical Methods in Mental Health Practice and Research (co-author: Matthew Philpott) *60*

5 Arguments Good and Bad: An Introduction to Philosophical Logic for Practitioners (Appendix: Paul Sturdee) *90*

6 Philosophical Outputs in Mental Health Practice and Research *111*

### PART II

## A philosophical history of psychopathology

Introduction to Part II *140*

7 A Brief History of Mental Disorder *143*

8 Karl Jaspers and General Psychopathology (Co-author: Chris Walker) *160*

9 Phenomenology and Psychopathology (Co-author: Ian Lyne) *180*

10 Psychopathology and the "Methodenstreit" (Co-author: Ian Lyne) *211*

### PART III

## Philosophy of science and mental health

Introduction to Part III *240*

11 Psychoanalysis: An Introduction to the Philosophy of Science (Co-author: Paul Sturdee) *243*

12 Psychopathology and the Theory Dependence of Data *288*

- 13 Natural Classifications, Realism, and Psychiatric Science** 316
- 14 Diagnosis, Explanation, and Tacit Knowledge** 384
- 15 Causes, Laws, and Reasons in Psychiatric Aetiology** 406
- 16 Knowledge, Research, and Evidence-Based Medicine** 433
- PART IV**  
**Values, ethics, and mental health**  
 Introduction to Part IV 468
- 17 Tools of the Trade: An Introduction to Psychiatric Ethics** 469
- 18 From Bioethics to Values-Based Practice** 498
- 19 It's the Law! Rationality and Consent as a Case Study in Values and Mental Health Law (Co-author: Mark Bratton)** 539
- 20 Values in Psychiatric Diagnosis** 564
- 21 From Bioethics to Values-Based Practice in Psychiatric Diagnosis** 585
- PART V**  
**Philosophy of mind and mental health**  
 Introduction to Part V 610
- 22 Mind, Brain, and Mental Illness: An Introduction to the Philosophy of Mind (Co-author: Paul Sturdee)** 613
- 23 The Mind–Body Problem and Mental Health, a Philosophical Update** 641
- 24 Reasons and the content of mental states: Part 1 Reductionist Theories** 667
- 25 Reasons and the content of mental states: Part 2 Antireductionism and discursive psychology** 686
- 26 Agency, Causation, and Freedom** 716
- 27 Knowledge of other minds** 737
- 28 Personal identity and schizophrenia** 758
- CONCLUSION**
- 29 Histories of the Future: (Co-author: Paul Hoff)** 778
- Key Learning Points** 781
- Cumulative list of References** 809
- Readings** 2.1, 6.4, 13.14, 26.3, 27.2
- Name Index** 859
- Subject Index** 864

# Detailed Contents

**Detailed contents** *vii*

**Acknowledgements** *xv*

**List of Reading Guides** *xxi*

**Preface: A Proactive Textbook** *xxv*

**Foreword (from the voluntary sector)**

**Lord Victor Adebowale** *xxvii*

**Foreword (from clinical practice)**

**Professor Ahmed Okasha** *xxix*

**Foreword (from philosophy) Baroness Warnock** *xxxii*

## INTRODUCTION

**1 Progress in five parts** *xxxv*

## PART I

### Core concepts in philosophy and mental health

Introduction to Part I *2*

**2 Philosophical problems in mental health practice and research** *3*

Session 1 What is philosophy? What is psychiatry? *4*

Points arising: empirical and conceptual *5*

The scope of philosophy and mental health *6*

Session 2 Fact, value, and the concept of mental disorder *7*

A conceptual map of mental disorder *7*

Four features of the map of mental disorder *10*

The four features and the philosophical problem of mental disorder *13*

Session 3 Antipsychiatry and the debate about mental illness *14*

Thomas Szasz, philosophy, and antipsychiatry *14*

Szasz' core argument *15*

Antipsychiatry and the map of mental disorders *16*

Antipsychiatry and psychiatry today *17*

Session 4 The medical model (and beyond) *18*

R.E. Kendell, philosophy, and pro-psychiatry *18*

Kendell and Szasz: the same or different? *19*

The debate was about bodily illness not mental illness *20*

Where do we go from here? *21*

Conclusions *21*

Reading guide *21*

References *26*

**3 Experiences good and bad: an introduction to psychopathology, classification, and diagnosis for philosophers** *31*

Session 1 Diagnosis in medicine and psychiatry *33*

The purposes of diagnosis *33*

Differences between diagnosis in bodily medicine and psychiatry *33*

Reasons for the differences: a negative and a positive view *34*

Session 2 Descriptive psychopathology *36*

Psychological symptoms *37*

Insight *45*

Bodily symptoms and signs *45*

Psychological signs *46*

Session 3 Categories of mental disorder	46
Main categories of adult mental disorders	46
Personality disorder	49
Stress-induced disorder	49
Disorders of childhood and adolescence	49
Summary of psychiatric diagnosis: from symptoms to diagnostic categories	49
Conclusions: to diagnose or not to diagnose?	50
Reading guide	51
References	53

#### 4 Philosophical methods in mental health practice and research 60

Session 1 Better definitions: philosophy as 'an unusually stubborn effort of think clearly'	61
How to define 'chair'	61
Four kinds of difficulty with defining 'chair'	62
Seven different ways of defining your terms	65
Definitions and the illusion of understanding	67
Session 2 Use and definition: J.L. Austin and the Linguistic Analytic (Oxford) move in philosophy	67
From definition to use	68
Use of concepts as a guide to their meaning (philosophical fieldwork)	70
Modest claims for philosophical fieldwork	71
Who wears the trousers?	72
Session 3 Illness and disease: definition and ordinary usage	73
Boorse on the distinction between illness and disease	73
Boorse's value-free definition of disease	75
Boorse's value-laden use of disease	75
Session 4 Anglo-American and Continental philosophy	76
The split between Anglo-American and Continental philosophy	76
Three kinds of Continental philosophy	77
Phenomenology, existentialism, and hermeneutics	78
Continental and Anglo-American philosophy: a new partnership	81
Conclusions: philosophy, science, and mental health	80
Reading guide	83
References	85

#### 5 Arguments good and bad: an introduction to philosophical logic for practitioners 90

Session 1 An introduction to deductive reasoning and formal logic	92
Logical validity, truth, and soundness in syllogisms	92
Propositional logic: the logic of simple connectives	95

Assessing validity with truth tables	97
The language of predicate logic	97
Session 2 An introduction to the philosophy of logic: what underpins deductive logic?	98
Can one ever reach a conclusion?	100
In what sense is the conclusion of an argument contained in its premisses?	101
Session 3 Implication and entailment	105
Appendix Some of the more common forms of invalid argument	107
Reading guide	109
References	110

#### 6 Philosophical outputs in mental health practice and research 111

Session 1 'I wonder if this headache is mine?'	112
The self-evident and the practical	112
Philosophers manic ...	114
... and philosophers depressive	116
A more complete view	118
Session 2 Adding value to fact	119
Agreeing and disagreeing about values	120
R.M. Hare on descriptive and evaluative meaning	120
Back to the debate about mental illness	122
A watershed of understanding	123
Session 3 Adding illness to disease	124
Medical and other values	124
A medical model by logical reduction of illness to disease?	125
A medical model by causal reduction of illness to disease?	126
Illness defines disease	128
Session 4 Adding action to function	128
A logical geography of illness	129
Illness and failures of 'ordinary doing'	129
Two objections	131
Back to the map of mental illness	132
Conclusions: a full-field model and a two-way exchange	134
Reading guide	134
References	136

#### PART II

### A philosophical history of psychopathology

Introduction to Part II 140

#### 7 A brief history of mental disorder 143

Session 1 Introduction and overview	144
Facts and fictions	144

- A history of mental disorder in twenty minutes 146
- Session 2 The main historical periods 147
- The Classical period 147
  - The Middle Ages and beyond 149
  - Psychiatry's two biological phases 152
- Conclusions: possible futures 156
- Reading guide 157
- References 158
- 8 Karl Jaspers and General Psychopathology 160**
- Session 1 The clinical context of Jaspers' thought 162
- Seven stories of psychopathology 162
  - Jaspers' four key distinctions 164
- Session 2 Karl Jaspers the man 166
- Early influences 166
  - General Psychopathology 167
  - After General Psychopathology 168
- Session 3 Causal and meaningful connections 169
- Causes/explanations; and meanings/understanding 169
  - Static understanding and genetic understanding 169
- Session 4 Phenomenology 170
- Objective and subjective 171
  - Form and content 172
- Conclusions: the seven stories and Jaspers' four key distinctions 174
- Reading guide 175
- References 176
- 9 Phenomenology and psychopathology 180**
- Session 1 Jaspers' phenomenological approach to psychopathology 181
- Mental states and Husserl's phenomenology 182
  - Five questions about Jaspers' phenomenology 183
- Session 2 The background to Husserl's phenomenology 191
- Husserl: early work in mathematics 192
  - To psychologize or not to psychologize? 194
- Session 3 Husserl's conception of phenomenology 197
- Seven questions about Husserl's phenomenology 198
  - Five key concepts in Husserl's *Logical Investigations* 202
  - Husserl's later transcendental phenomenology (the attempt to get out of the box) 203
- Session 4 Assessment of Husserl's influence on Jaspers 204
- Five differences between Husserl's phenomenology and Jaspers' 204
  - Signs of influence of Husserl on Jaspers 205
  - The debate continues 205
- Session 5 Conclusions: the contemporary relevance of the phenomenological tradition in psychiatry 206
- Reading guide 208
- References 209
- 10 Psychopathology and the 'Methodenstreit' 211**
- Session 1 Understanding, explanation, and the *Methodenstreit* 213
- Terms of art and everyday terms 213
  - The start of the *Methodenstreit* 215
- Session 2 Understanding and explanation in Jaspers' psychopathology 217
- Understanding and its close cognates 218
  - Meaningful connections 223
  - The place of values 228
- Session 3 Conclusions: Jaspers, the *Methodenstreit*, and psychiatry today 233
- Reading guide 235
- References 236
- PART III**
- Philosophy of science and mental health**
- Introduction to Part III 240
- 11 Psychoanalysis: an introduction to the philosophy of science 243**
- Session 1 Science: What is it and what's the problem? 245
- An Austinian approach to the nature of science 245
  - Describing the logical geography of science 245
  - A traditional model of scientific practice 247
- Session 2 Psychiatry as science 249
- The traditional model of science in a classic psychiatric textbook 249
  - Three responses to the complexity of science in psychiatry 253
- Session 3 Scientific psychiatry and the case of psychoanalysis 254
- The philosophy of science suggested by Freud's psychiatry 254
  - Stage 1 of the traditional model of science: data collection 258
  - Stage 2A of the traditional model of science: theory building-defining patterns 260
  - Stage 2B of the traditional model of science: theory building-causal explanatory theories 262
- Session 4 Theory testing and the progress of knowledge 265
- Stage 3 of the traditional model of science: theory testing 265
  - Stage 4 of the traditional model of science: scientific progress 268

Session 5 Psychoanalysis without science 271  
 Psychoanalysis and the hermeneutic reconstruction 272  
 Psychoanalysis as a failed science 276  
 Psychoanalysis as an extension of folk psychology 280  
 Conclusions 282  
 Conclusions: a science fit for psychiatry 283  
 Reading guide 284  
 References 285

**12 Psychopathology and the theory dependence of data 288**

Session 1 The theory dependence of everyday observations and psychopathology 290  
 A practical exercise on the theory dependence of observation 290  
 The theory dependence of observation and the PSE 291  
 Session 2 An empiricist model of scientific theory 294  
 Logical Empiricism and the Vienna Circle 294  
 The two languages model of Logical Empiricism 295  
 Two languages and mental health 296  
 Session 3 Arguments for the theory dependence of observation statements 297  
 Duhem's argument: observations are made in theoretical terms 298  
 Churchland's argument: translation of observation statements implicates theory 299  
 Hesse's argument: any division of theory and observation is itself theory relative 301  
 Session 4 Arguments for the theory dependence of the content of the process or experience of observation 303  
 Card sorting: fallible but correctable perceptions 304  
 The duck-rabbit figure undermines an intuitive but misguided model of perception 304  
 More general considerations of the role of experience suggest that it is conceptually structured 308  
 Session 5 The consequences for observation in psychiatry and in physics 310  
 Reading guide 313  
 References 314

**13 Natural classifications, realism, and psychiatric science 316**

Session 1 Hempel and two new agendas for psychiatric classifications 320  
 The first new agenda—a conceptional research agenda for DSM-V 320  
 Hempel and the origins of ICD and DSM 324  
 Hempel and the missing link to ICD and DSM 330  
 The second new agenda—a conceptional research agenda for ICD-9 333  
 Operationalism, reliability, validity, and a first look at what lies ahead 336  
 Conclusions: from logical empiricist to post-logical empiricist philosophy of science 340

Session 2 Values, natural classifications, and the Absolute Conception 341  
 Hempel, Crispin Wright, and Szasz on values and science 342  
 Bernard Williams and the Absolute Conception versus John McDowell 347  
 Conclusions to the session: no knock-down argument 351  
 Session 3 Scientific realism in physics 352  
 Logical Empiricism and Constructive Empiricism 352  
 Constructive Empiricism—a current form of scientific antirealism 353  
 Three current scientific realist defences against the antirealism of Constructive Empiricism 356  
 Cartwright's attack on the validity of scientific laws 357  
 The natural ontological attitude: assessing scientific validity from the inside? 361  
 Session 4 The Third New Agenda—an Agenda modelled on the philosophy of physics 364  
 The third agenda—an agenda for an extended family of classifications 365  
 Resources 374  
 Next steps 375  
 Conclusions: being about what science is about 376  
 Reading guide 378  
 References 379

**14 Diagnosis, explanation, and tacit knowledge 384**

Session 1 The Deductive-Nomological model of explanation 386  
 Diagnostic explanation: descriptive and causal 386  
 Hempel's formal models of explanation 386  
 Objections to Hempel's model 389  
 Session 2 A causal model of explanation 391  
 Van Fraassen's emphasis on the context of explanation 395  
 Session 3 Clinical skills and tacit knowledge 396  
 An empirical investigation of the role of tacit knowledge in applied physics 397  
 The central role of tacit knowledge in Kuhn's account of science 399  
 A conceptual argument for the essential contribution of tacit knowledge 400  
 Session 4 Tacit knowledge, diagnosis, and a possible link to phenomenology? 402  
 Reading guide 403  
 References 404

**15 Causes, laws, and reasons in psychiatric aetiology 406**

Session 1 An introduction to philosophical accounts of causation 409  
 Causal reasoning in medicine 410  
 The history of the modern philosophy of causation: David Hume 410

The analysis of causal claims 412

The analysis of laws of nature 415

Session 2 A probabilistic view of causation? 418

The connection between causes and laws remains 421

Session 3 The realm of law and the space of reasons 423

McDowell's (1994) account of the distinction between the space of reasons and the realm of law 423

Winch's account of the difference between the natural and social sciences 426

An opposing view: Bolton's claim that meaning is encoded in neural processes 428

Reasons and causes in psychiatric research: George Brown's approach 429

Reading guide 430

References 431

## 16 Knowledge, research, and evidence-based medicine 433

Session 1 Evidence-based medicine, Hume, and the problem of induction 435

The origins of the problem of induction: David Hume 436

Session 2 Philosophy of science responses to the problem of induction 440

Falsificationism 440

Kuhn's account of the history of science 445

The sociology of science 447

Session 3 Epistemological responses to the problem of induction 449

Mellor's diagnosis of the problem of induction 449

McDowell's diagnosis of the problem of induction 452

Wittgenstein's picture of the inherited background to knowledge claims 455

Session 4 Evidence-based medicine and clinical trials 457

Reading guide 462

References 463

Conclusions to Part III 465

## PART IV

### Values, ethics, and mental health

Introduction to Part IV 468

## 17 Tools of the trade: an introduction to psychiatric ethics 469

Session 1 Ethical and conceptual issues in psychiatry: aims and objectives 470

Getting started: the story of Mr AB 470

A role for philosophy? 472

Ethics training and ethical practice 477

Session 2 Conceptual difficulties and mental health ethics 479

Neglect of conceptual difficulties 479

Example 1: consent, capacity, and delusion 480

Example 2: confidentiality and the concept of mental disorder 482

Session 3 Conceptual difficulties and mental health law 483

Philosophical fieldwork 483

Interpretation: (1) too much law, and too little 486

Interpretation: (2) law plus seriousness 488

Conclusions: seven reasons for the neglect of mental health by bioethics 492

Reading guide 493

References 495

## 18 From bioethics to Values-Based Practice 498

Session 1 Bioethics and health care 499

Bioethics: origins, aims, and outcomes 499

Codes, concepts, and clinical practice skills 502

Principles, casuistry, and perspectives 506

Session 2 Bioethics and mental health 509

Four principles (top-down reasoning) 509

Casuistry (case-based reasoning) 512

Perspectives 512

Session 3 Philosophical ethical theory 514

Substantive ethical theories: deontology and consequentialism 514

Analytic ethical theory 516

Analytic ethics: from theory into practice 518

Session 4 Values-Based Practice 519

1) Ethics, values, and mental health 520

2) Values-Based Practice and evidence-based practice 522

3) Values-Based Practice and new models of service delivery 523

4) Values-Based Practice and clinical practice skills 526

6) Values-Based Practice, Evidence-Based practice, and a new alliance between users and providers in health-care decision-making 528

Conclusions: combining law and ethics with Values-Based Practice 530

Useful websites 531

Reading guide 531

References 533

## 19 It's the law! Rationality and consent as a case study in values and mental health law 539

Session 1 The legal basis of consent 541

The moral and cultural tradition 541

Legal frameworks 542

Legal competence to consent 544

Session 2 Capacity, information, and causes of action 547

Capacity and rationality 547

Information 549

Session 3 Consent, voluntariness, and best interests 554

Enforced Caesareans 554

- A generic incapacity act? 555
  - Rational suicide, psychiatric euthanasia, and best interests 556
  - Conclusions: diagnostic values in law and medicine 558
  - Reading guide 559
  - References 560
- 20 Values in psychiatric diagnosis 564**
- Session 1 The central place of values in psychiatric diagnosis: the case of Simon 567
    - The case of Simon 567
    - Simon: the ICD diagnosis 568
    - Simon: the DSM diagnosis 569
    - Values and Simon's diagnosis 570
  - Session 2 Generalization: the pervasiveness and importance of values in psychiatric diagnosis 571
    - The pervasiveness of values in psychiatric diagnosis 572
    - The importance of values in psychiatric diagnosis 574
  - Session 3 Bioethics and values in psychiatric diagnosis 578
    - A list of positives 579
    - A list of negatives 580
  - Conclusions: new tools from Values-Based Practice? 582
  - Reading guide 582
  - References 583
- 21 From bioethics to Values-Based Practice in psychiatric diagnosis 585**
- Session 1 Philosophy, values, and psychiatric diagnosis 586
    - A brief review of Part I 586
    - The best of bioethics? 587
  - Session 2 From fact-only to fact+value model of psychiatric diagnosis 588
    - The fact-only medical model: converting positives into negatives 588
    - Reich's negative view of Soviet psychiatric science 590
    - Adding value to fact 591
  - Session 3 Reversing Reich 592
    - Reich's argument applied to bodily medicine 592
    - Reich, right or wrong? 593
    - Adding values to science in psychiatric diagnosis 594
  - Session 4 Practical applications: Values-Based Practice and psychiatric diagnosis 597
    - Values-based diagnosis in clinical work 597
    - Values-based diagnosis in research 599
    - Futures perfect and imperfect in psychiatric diagnosis 600
  - Session 5 Conclusions: values-based diagnostic assessment and user empowerment 601
  - Reading guide 602
  - References 605

**PART V****Philosophy of mind and mental health**

Introduction to Part V 610

**22 Mind, brain, and mental illness: an introduction to the philosophy of mind 613**

- Session 1 The mind–body problem in ordinary use 614
- Session 2 The mind–body problem: the case of 'Mrs Lazy' 619
  - The origins of the philosophical problem of mind and body 620
  - Mind, body and a 'full-field' model of mental disorder 623
- Session 3 The mind–body problem: from ordinary use to philosophy 625
- Session 4 A modern response to the Cartesian problem 633
- Reading guide 637
- References 638

**23 The mind–body problem and mental health, a philosophical update 641**

- Session 1 The mind–body problem in clinical neuropsychiatry 642
- Session 2 Functionalism accounts of the mind 644
  - Introducing functionalism 644
  - Can functionalism capture the experiential quality of mental states? 645
  - Can functionalism capture the rational character of mental states? 647
- Session 3 Davidson's Anomalous Monism 649
  - Supervenience 649
- Session 4 Arguments against mind–body identity theories 654
  - The background to Kripke's argument 654
  - The argument against mind–body identity theories 656
  - Responses to Kripke's argument 657
  - What is the alternative to the *identity* of mind and brain? 658
- Session 5 Is there any reason to believe in supervenience? 660
  - An argument for supervenience 661
  - A counter-argument 662
  - So what is the relation of mind and body? 663
- Reading guide 664
- References 665

**24 Reasons and the content of mental states: 1. reductionist theories 667**

- Session 1 Aphasia, deficit studies, modularity, and meaning in cognitive psychiatry 668
- Session 2 Preliminaries to a philosophical account of content 670
  - Fodor's account of mental states 672
- Session 3 Naturalized or reductionist accounts of content 673

- Fodor's representational theory of mind 676
- Session 4 Descriptive causal accounts of content 678
- Objections to Fodor's theory 679
- Session 5 Teleological causal accounts of content 680
- Reading guide 684
- References 684
- 25 Reasons and the content of mental states:**
- 2. Antireductionism and discursive psychology 686**
- Session 1 The discursive alternative 688
- Session 2 Wittgensteinian approaches to mental content 690
- Saul Kripke's interpretation of Wittgenstein 690
- Crispin Wright's interpretation of Wittgenstein 692
- John McDowell's interpretation of Wittgenstein 694
- Session 3 Dennett and the Intentional Stance 696
- Dennett's bald claim modified 697
- Session 4 Davidson and Radical Interpretation 700
- An objection to Davidson's account? 705
- Session 5 Singular thought and the division between mind and world 707
- Session 6 Discursive psychology and Alzheimer's disease 711
- Reading guide 714
- References 714
- 26 Agency, causation, and freedom 716**
- Session 1 Agency, freedom, and neuropsychiatry 718
- The second strand of Spence's argument 719
- Session 2 Agency and volitions 720
- Ryle's critique of the Myth of Volitions 720
- Melden's non-causal account of action 722
- Session 3 Arguments for a causal theory of mind 724
- Session 4 Event causation, agent causation, and irrationality 727
- Session 5 A non-causal account of agency? 731
- Session 6 Freedom and determinacy 732
- Reading guide 735
- References 735

- 27 Knowledge of other minds 737**
- Session 1 An historical starting point: Cartesian theatres and the argument from analogy 739
- The origin of the Problem of Other Minds 739
- An attempt to solve the Problem of Other Minds 741
- Session 2 Introduction to the 'theory-theory' approach 743
- Session 3 Simulation theory 746
- Session 4 The current state of the debate: evidence from autism 750
- Session 5 Rationality and direct access to mental states 753
- Reading guide 756
- References 757
- 28 Personal identity and schizophrenia 758**
- Session 1 Personal identity: evidence and constitution 759
- Session 2 Four kinds of identity antirealism 761
- Session 3 Identity and mental illness 764
- Session 4 Theories of personal identity 766
- Session 5 Identity and mental illness again 768
- Reading guide 772
- References 774
- Conclusions to Part V 777

## CONCLUSION

### 29 Histories of the future 778

#### Key learning points 781

#### References 809

#### Readings 2.1, 6.4, 13.14, 26.3, 27.2

#### Name Index 859

#### Subject Index 864