

Reading About . . .

Philosophy and Psychiatry

by B. A. Farrell

Like any other subject, psychiatry raises what are known as philosophical issues. The particular ones it raises are difficult to deal with; and it is only in comparatively recent years that serious attention has been given to them. They are difficult because anyone trying to deal with them has to know his way round psychiatry, and also has to have the skills needed to handle the conceptual and meta-psychiatric problems involved. A training in these philosophical skills does not form part of the professional education of doctors and psychiatrists; and, on the other hand, professional philosophers, in general, do not have a psychiatric training, or anything close to it, and hence are out of touch with the subject. It is not surprising, therefore, that philosophical questions generated by psychiatry should have been the subject of considerable neglect. Nor is it surprising that, when they have been attended to in the past, the results of that attention are apt to be somewhat disappointing. Happily, however, the medical and philosophical professions have both become aware in recent years of the difficulty, and the position seems to be changing for the better. Perhaps the single most beneficial step that could be taken would be for the medical curriculum to be amended so as to encourage, or require, medical students at some stage to come to grips with the philosophical issues that beset their subject.

When the medical student starts on his psychiatric rounds, the first set of issues that will probably confront him are those of diagnosis and classification. Unfortunately, the issues produced by classificatory work in science in general have been widely overlooked in recent times—partly, no doubt, because, in the scientific community itself, work in systematics is low in the pecking order, and hence has been neglected by philosophers of science. A book which does deal with some of the relevant issues is one by C. G. Hempel (1965). Chapter 6 is entitled 'Fundamentals of Taxonomy'; and in it Hempel is specifically concerned with mental disorders. The medical student will also find other chapters well worth his attention. For example, Chapter 5, 'A Logical Appraisal of Operationalism', and Chapter 12, in different parts of which

Hempel shows, in effect, how explanation and prediction in psychiatry differ from, and yet resemble, those in natural science.

What the student learns to diagnose and classify are psychological, or mental, disorders. These form the subject matter of his enquiry and practice. He can be recommended to F. Kräupl Taylor (1979) for an enlightening and philosophically sensitive book by a psychiatrist. Two valuable articles by philosophers are C. Boorse (1975), and J. Margolis (1976). The student may also obtain some help from an article by B. A. Farrell (1979).

Though the psychiatrist is concerned with psychological disorders, it is a striking fact that he seems, in general to lack an appreciation of the point of view of the psychologist, and therefore of the *sort* of contribution he has to offer to the understanding of mental function and dysfunctioning. One single very good reference that will help to fill this gap is a study by J. A. Gray (1971).

On medical ethics, the student will find it worth while to consult S. F. Spicker and H. T. Engelhardt (1977). This volume contains an article by R. M. Hare, in which he explains what, in his view, a moral philosopher can do to help in this field. He argues that it is for the best that doctors should preserve their utilitarian attitude in dealing with moral questions.

The one part of the field to which philosophers have paid considerable attention in the past is psychoanalysis. Here their attention has been largely directed to a few analytic concepts, more especially, perhaps, to unconscious motives, and not to methods and evidence.

T. R. Miles (1966) argues that analysts, and everyone else, can get on perfectly well without the psychic apparatus of analytic theory. D. F. Pears (1974) sets about dissolving paradoxes that have been found, especially by Sartre, in the concepts of unconscious desires and plans. Psychiatrists will find that this book contains an interesting collection of papers, which collectively present a pro-Freudian stance. Little attention seems to have been paid by philosophers to unconscious motives and the unconscious as 'scien-

tific constructs'—that is, as notions in a psychological model which refer to unobservables. Since this is plainly one way in which Freud wanted these notions to function, it is a pity that insufficient attention has been given to this way of regarding them.

The *locus classicus* of the criticism that psychoanalysis is scientifically unrespectable is to be found in E. Nagel (1959). M. Sherwood (1969) tries to show that the explanatory work of the analyst is a reasonable exercise. N. M. Cheshire (1975) elucidates and defends psychodynamic interpretation. An attempt to assess the general status of psychoanalysis at the present time is made by B. A. Farrell (1981).

Psychiatrists find themselves unavoidably involved in a whole nest of philosophical issues about body-mind interaction, individual responsibility for one's actions, and the like. On body-mind problems the student will learn much from K. V. Wilkes (1978), and also from E. Wilson (1979). This last work goes on to deal expressly with issues that force themselves upon the attention of the working psychiatrist—such as free will, and the nature of criminal behaviour. For anyone interested in reductionism in psychology and in the precise interrelations between the language of psychologists and that of neurophysiologists, and their colleagues, Austen Clark's (1980) study will be a valuable guide.

In general, it is worthwhile for psychiatrists to keep an eye on the *Journal of Medicine and Philosophy*, remembering when they do so that this journal seems at present to be a product, largely, of medical culture in the United States.

It is just as well that psychiatrists should also bear in mind the well known point that the contributions of philosophers are essentially debatable. So I do not offer these references as being, or containing, authoritative or definitive pronouncements. I offer them in

the hope that they will help a little to guide psychiatrists through parts of the conceptual maze in which their subject is embedded.

References

- BOORSE, C. (1975) On the distinction between disease and illness. *Philosophy and Public Affairs*. Fall.
- CHESHIRE, N. M. (1975) *The Nature of Psychodynamic Interpretation*. Chichester: John Wiley.
- CLARK, AUSTEN (1980) *Psychological Models and Neural Mechanisms*. Oxford: Clarendon Press.
- FARRELL, B. A. (1981) *The Standing of Psychoanalysis*. Oxford University Press.
- (1979) Mental illness: a conceptual analysis. *Psychological Medicine*, 9, 21–35.
- GRAY, J. A. (1971) *The Psychology of Fear and Stress*. London: Weidenfeld and Nicolson.
- HARE, R. M. (1977) Medical ethics: Can the moral philosopher help? In *Philosophical Medical Ethics: Its Nature and Significance*. (Eds. S. F. Spicker and H. T. Engelhardt). Dordrecht: Reidel Press.
- HEMPEL, C. G. (1965) *Aspects of Scientific Explanation*. New York: Free Press.
- KRÄUPL TAYLOR, F. (1979) *The Concepts of Illness, Disease and Morbus*. Cambridge University Press.
- MARGOLIS, J. (1976) The concept of disease. *The Journal of Medicine and Philosophy*, 1 (3), 238–55.
- MILES, T. R. (1966) *Eliminating the Unconscious*. Oxford: Pergamon.
- NAGEL, E. (1959) Methodological issues in psychoanalytic theory. In *Psychoanalysis, Scientific Method and Philosophy*. (Ed. S. Hook). New York University Press.
- PEARS, D. F. (1974) Freud, Sartre and Self-Deception. In *Freud* (Ed. R. Wollheim). New York: Anchor Books.
- SHERWOOD, M. (1969) *The Logic of Explanation in Psychoanalysis*. New York and London: Academic Press.
- WILKES, K. V. (1978) *Physicalism*. Henley-on-Thames: Routledge and Kegan Paul.
- WILSON, E. (1979) *The Mental as Physical*. London, Boston and Henley: Routledge and Kegan Paul.

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