

CAN THE MENTALLY ILL BE AUTONOMOUS?

John Wettersten

Introduction I: Mental illness and autonomy

Thomas S. Szasz has courageously and brilliantly criticized all contemporary theories of mental illness for their bogus credentials and denial of moral autonomy. A foundation of this attack is the thesis that psychologists have cast under the rubric of the mentally ill anything from people not liked by corporations, to any deviant person, to people maltreated by courts as a means of control analogous to methods of other periods such as the persecution of witches. Szasz thesis that the notion of mental illness is bogus is buttressed by social analysis of its use and his analysis of the confusions in the concept. His thesis that its use often conflicts with our notions of responsibility and individuality is amply demonstrated by institutional analyses of the presuppositions of its use. The upshot is clear: psychiatry provides a self-serving endorsement of damaging social convention with a bogus, yet allegedly scientific, theory.

The reaction to Szasz' assault has been mainly of two sorts. On the one hand traditionally inclined psychologists have defended the notions attacked by Szasz and some have wished to punish him for daring to launch such an attack. On the other hand, a wider audience has responded enthusiastically to Szasz. For them, the psychiatric establishment is, indeed, all too often merely established. The second reaction found its highest expression in the psychology of R.D. Laing who says the establishment people are crazier than the crazy: Laing is popularly associated with Szasz, yet Szasz attacks him. These attitudes are not however, the center of this discussion. On the contrary I contend that these two reactions tend to overlook a third and important type of reaction. This third reaction is to endorse Szasz' attack on the traditional notion of mental illness as both confused and an improper denial of moral responsibility while rejecting his thesis that there is no such thing as mental illness. This third response is important because Szasz' attack on the

establishment, though powerful, has little effect. The reason for this is, I conjecture, that Szasz' attack appears too strong. Since he contends that there is no mental illness at all he seems irresponsible. He fails to explain real difficulties and differences between at least some people normally classified as mentally ill and those not so classified.

Is Szasz' theory too easy? Does he explain away too much? Is there an alternative which can account for both mental illness and autonomy which we may better use to reform the psychiatric establishment? In order to provide a preliminary discussion of these questions aimed at analyzing the difficulties we face in trying to find an adequate stance towards persons as both "mentally ill" and autonomous, a stance which recognizes both their difficulties and their autonomy, I will argue that Szasz' theory does now appear too easy, and that the attempt by Yehuda Fried and Joseph Agassi, who seek to do better, has a seemingly inadequate explanation of the rationality - hence autonomy - of the mentally ill.

My rationale for discussing the view of Szasz and the view of Fried and Agassi together is that if we now analyze theories of mental illness with the added desideratum that theories of mental illness should also account for autonomy, Szasz' work may lead to new and improved ideas of mental illness which recognize the need for the attribution of responsibility to the mental patient. This may be so even if his theory is false. One of the few responses to Szasz' work which is both appreciative of his critique of theories of mental illness and dissenting from his own theory of the phenomena known as mental illness is that of Yehuda Fried and Joseph Agassi. Fried and Agassi are appreciative in their endorsement of Szasz' critique of the traditional notions of mental illness and in their shared concern for retaining ideas of responsibility, autonomy and a liberal, i.e. open, society. Yet they are also critical: in their view Szasz throws out too much when he rejects all theories of mental illness. Fried and Agassi believe that we do know that there is a difference between well and unwell people whatever that difference may be. Fried and Agassi wish to use Szasz' analysis not as cause to reject all theories of mental illness but rather as a source of new desiderata for mental illness: a theory must recognize the moral dimension - even autonomy of the individual. Fried and Agassi thus pursue an old problem: how can we distinguish in a better way the mentally ill? They add a new desideratum for a solution which stems from Szasz' work. They pose their problem for the paranoid in specific as a type of ideal case of mental illness. They ask, how is it that we can intuitively distinguish

the paranoid from the sane when the paranoid exhibits the highest degree of rationality, i.e. consistency and coherence, given traditional views? This problem may be posed without the question of autonomy. Agassi and Fried go further however. The coherence and consistency of the paranoid views combined with "incoherence" of action are used by them to raise in a sharp way the question of the autonomy of the individual.

If Szasz is right, i.e., if any theory of mental illness must deny the autonomy of individuals, then we face the danger, even the inevitability, that the use of this theory will lead to abuse. Fried and Agassi argue that we may deem someone mentally ill yet still autonomous. We may thus avoid abuse provided we recognize the responsibility and right of mentally ill patients to be that way. Hence, on the major moral point that we must recognize the autonomy of all individuals there is a complete agreement between Fried and Agassi and Szasz. There is disagreement however on whether there is mental illness, on the proper evaluation of some psychological phenomena and perhaps also on the facts of the autonomy of some persons. Is Szasz' theory correct in denying all mental illness? Can Fried and Agassi account for both mental illness and autonomy in the same person?

Introduction II. The range of the controversy.

Szasz, Fried and Agassi have a further useful dimension which renders their theories of some special interest and appropriate competitors. This feature is their integration of theories of reason, morality and psychology. Szasz, Fried and Agassi are of course not the only to do so. Charcot, Freud, Ey, Laing, Erikson and many others have multidimensional theories. Yet the work of Szasz and Fried and Agassi are especially noteworthy because they not only consciously, articulately and successfully work on various levels but further, they use the task of integrating the research at various levels as a technique of improving theories at all levels. This seems a minimal requirement for the attempt to integrate theories of mental illness with theories of autonomy.

Szasz, on the one hand, and Fried and Agassi, on the other hand, have explicit theories of rationality, of society, of psychology and of empirical matters which can be contrasted and used to solve both psychological and moral problems in an integrated way. Now the traditional view of science is that science should be restricted to merely empirical observations

and empirical theories. It may thus appear that introducing various levels to the discussion can only complicate matters. Alternative frameworks can pose great difficulty in posing empirical tests. But when these frameworks are inarticulate the problem of posing crucial experiments between them is all but insoluble. The articulation of frameworks at various levels enables us to pose alternatives which may be testable. Since alternative frameworks are common and articulation of them is not, Szasz and Fried and Agassi have an edge.

In order to set up the disagreement between Szasz and Fried and Agassi concerning mental illness and autonomy it is useful, perhaps necessary, to place these disagreements in the context of the competing frameworks or approaches which are employed by the two contenders. As already explained, a crucial feature of the two theories of Szasz and Fried and Agassi is the integration of the theories to encompass various levels and aspects of their thought. I wish to use this feature to analyze the conflict between the two theories. In the next two sections I will therefore present the two theories, each as an integrated view encompassing various levels. In each section I will discuss first, the respective broad theory of how to study human thought - a theory of rationality if you will - second, the respective social theory which is developed within the framework of this theory of rationality and last, the respective psychological theory which is developed in the context of the two foregoing aspects. In Sections III-V I will critically appraise the frameworks as views of rationality, the ability of the frameworks to generate psychological theories of mental illness and autonomy and finally the ability to test these theories.

My conclusion is pessimistic. Szasz' theory seems to fail in the expected way: it explains away too much. Fried and Agassi do not do this, yet their explanation of the autonomy and rationality of the mentally ill is quite weak. The dilemma seems to require for a solution still better theories of partial rationality and autonomy.

Section I. Szasz' program

Szasz' primary technique is to analyze the use of language. He starts from the conjecture that if we wish to understand social or psychological phenomena, if we wish to understand man's behaviour, we should analyze the social situations in which he acts - either as sociology or psychology - with analyses of the language(s) used and with game-theoretic models. In so doing we

can analyze both how language is used and the purposes that the use of this language serves.

Let me elaborate and explain further Szasz' approach by turning to the second (sociological) and third (psychological) parts of his program. This will enable me to provide illustrations of the broad program. The major illustration of Szasz' use of analysis of the meaning and use of language to develop a social theory occurs in his comparison of the social rules of the theory and practice of witch hunting on the one hand and the theory and practice of treatment of the mentally ill on the other hand. In this analysis Szasz puts aside the attempt to discuss the truth or falsity of either the theory of witchcraft or the theory of mental illness. Instead he analyses how these theories are used and deems this to be simultaneously an analysis of their import and their social use. He can explain the import of the term "witch" or "mentally ill person" by analyzing the social position of those who are deemed witches and mentally ill. In doing so he hopes to explain how these terms are presumed to apply to people with special, often dangerous evil powers, or people with special, often dangerous or troublesome defects, when in reality they are used merely to refer to deviants. This analysis of the social import of the use of these terms as designating deviants presumes that the terms are not used for stated purposes. So what are the real purposes? Szasz' answer is that they are used for repression of deviants and pursuit of power, influence and money by professions. We thus have an example of how Szasz' analysis uncovers both true meaning of theories and the purposes to which they are put.

This same analytic approach is used in Szasz' development of psychological theory. Szasz denies that there are persons who are mentally ill. Yet he must concede that people deemed mentally ill are often peculiar. In order to understand this peculiarity, to help people who wish to change by setting the peculiarity aside, and thus to provide an alternative to the theory of mental illness, Szasz needs a theory of this peculiarity. He again uses analysis to shape his program. He makes the conjecture that what distinguishes "psychotic" and "neurotic" people is their use of language. Their use of language, he points out, is highly unique. The psychotic has a very abstract and developed language. The neurotic's language is highly specific or concrete. Now these languages, Szasz suggests, can be analyzed with the same methods he uses to analyze the theories of mental illness and witchcraft. We can analyze the use of terms in these languages and understand thereby their true import and the uses to which they are put - often with game theoretic models. Thus

we can analyze the neurotic's concrete language and the psychotic's abstract language as attempts to obtain normal human goals such as recognition or affection and we can analyze and understand the way in which people set about to achieve these goals, even though we deem them odd or deviant.

Now this overall program of analysis - linguistic, social, and psychological - provides Szasz with the foundation for his theory that all men may be presumed autonomous agents. We may presume that all actions have an underlying strategy and that all men have the capacity and right to choose their own strategy, to choose their own language, their own means of communicating and their own social interactions. Nevertheless, we can analyze these strategies and teach people alternatives if they wish to change their aims or if they find the methods they use to pursue their aims, for any reason, defective.

Section II. The Fried-Agassi-program

Fried and Agassi have a single perspective which they bring to bear on metaphysics, methodology, sociology and, most importantly for this discussion, psychology. This perspective is a response to one problem which appears at each level in various forms. This problem is a problem of rationality and unity; criticism and diversity. It is, in my own formulation: how can we allow for both diversity and rationality? The problem is pressing because we want to avoid dogmatism and unwarranted unity on the one hand while maintaining on the other hand some standards which are still sufficiently restrictive so as not to endorse all views. We need some restrictions even tentative ones to provide for a search for truth. At each level Fried and Agassi analyse the traditional views from this perspective.

Traditional views of science from the 17th century - most importantly Bacon - to Einstein have deemed rationality only successful and proper when unity has been achieved. Thus we must have a unified metaphysic and method. Society must be organic and even conformist and personality integrated. This demand for unity can only be sustained, however, if reason is sufficiently powerful to achieve the truth. Recent developments show that reason is not so powerful. As a result unity has been sought without rational foundation. We thus have methodological and metaphysical theories of commitment. Those theories advocate social, intellectual and personal integration without the power to rationally determine the integrating principle. This leads to arbitrary metaphysics and loss of methodological unity.

Metaphysics is arbitrary because we simply choose our ultimate commitments. Unity of method is lost because method is relative to societies. The two combined lead to a closed society with authoritative yet arbitrary rules. Such a view of limited rationality appears to give up too much in limiting rationality and can easily lead to excessive demands for conformity. In psychology it would seem to lead to the view that any integration is valuable - even the paranoid's. These problems can be solved or mitigated at each level by new views of rationality which seek criticism and diversity while maintaining the search for truth. Metaphysical principles may be multiplied and critically appraised even while used to integrate thought; method may be changed, improved in a bootstrap fashion; society may be pluralistic and open in allowing for diversity, yet unified to a degree by rational disagreements; and personality or psychological theory may be improved by recognizing normality as growth and use of criticism. Mental illness may be interpreted as blocks of such procedures even when integration is obtained.

Fried and Agassi have thus employed a new view of reason to present in a new perspective metaphysics, methodology, sociology, and psychology. Furthermore the primary task of developing a new theory of paranoia in particular and mental illness in general is furthered by this analysis. This occurs because theories of mental illness, especially theories of paranoia, presume views of rationality which cause difficulties for both the theory of the paranoid from a purely psychological point of view but also difficulties from the point of view of the paranoid's place in society. Let me explain by discussing the three levels off methodology and metaphysics, society, and psychology.

At the more abstract level of methodology and metaphysics a central problem is: how can we be rational? Now rationality has traditionally required and been identified by unity and system. This has created problems when unity and system are harmful. In this case we have a problem directly analogous to that facing the theorist of paranoia, i.e. why is someone so rational yet so poorly off? This problem has found a new solution at the most abstract level by a new characterization of rationality which deems rationality to be characterized by a critical attitude. This attitude seeks to uncover mistakes, and may even create disunity, in order to seek advance. This theory explains the defects of what was traditionally deemed to be the *sine qua non* of rationality, i.e. it explains unity as often too restrictive and dogmatic. Claims for systematic truth are inflated, yet rationality is still deemed possible since reason can uncover mistakes. A similar problem of too high demands for unity has occurred in

social theory. If we want a good society, it has been thought we should have a society, based on truth alone. Such a theory of society could justify great demands for conformity since to conform is merely to adhere to the truth. Yet all such theories lead to damage when applied: repression of individuals and suppression of truth result. This can be explained in the same way: unity is too restrictive and claims for truth are inflated.

Now this traditional social theory deems the nonconformist to be irrational. Yet, by its own lights it also deems some nonconformists, e.g. paranoids, quite rational. And furthermore we may ask where we place collective "paranoia" in which conformity and rational unity are combined with great oddity. These problems are solved by Fried and Agassi by employing the new view of rationality. Mere conformity is not rationality, nor is mere coherence, as in the case of the paranoid. Thus the problem of the group paranoia dissolves or is transformed as well: mere oddity or coherence does not signify. Rather new standards of criticism do. We may now appraise rationality as the openness to criticism and irrationality as dogmatism. Finally we come to psychology. Traditionally theories of mental illness while not necessarily being theories of the breakdown of rationality had to explain the breakdown of rationality. In the case of the paranoid they failed to do this since an exceedingly high degree of rationality was even symptomatic of the disease. This high degree of rationality is a high degree of unity and systemicity. Now, however, we may view this unity and systemicity as not itself irrational but as a product in the paranoid of his irrationality, i.e. his inability to see criticism which he, by any normal standard, may be expected to. Thus the very factor which on traditional views emphasized his rationality now, in accord with traditional views of his psychology, explain this factor as too restrictive and dogmatic - as irrational. In this way the new theory of rationality is used at each level and all levels together to achieve a new view of the paranoid and his relation to society and his place among rational men.

Section III. Frameworks

Both Szasz and Fried and Agassi are remarkable in their use of explicit frameworks. Furthermore these frameworks come to solve at least one common problem: how can we study thought? This fact provides us with a tool for their appraisal and for viewing them as alternative approaches to one problem which can be evaluated vis a vis each other. Szasz' solution to the problem

(how can we study thought?) is analysis of the use of terms, both linguistically and socially. Such an analysis will enable us to see the true meaning and use of the actual social and intellectual interaction which occurs thereby uncovering a true description of it. I have already presented this view with examples. Now I shall criticize it.

This theory of Szasz is, by his own acknowledgment, indebted to the work of language analysts, those 20th century philosophers of Oxford and Cambridge who hold that philosophical problems can be solved or dissolved by analysis of the meaning (use) of terms. Szasz theory is not identical to the views of these philosophers, but it suffers from a well known defect of this approach to philosophy. This defect is that, in so far as it is analysis, it is merely descriptive. It cannot even consider the theories it analyses from the point of view of truth. (The most important and famous critique of this philosophy is Ernest Gellner's *Words and Things*). In so far as it is analysis it tends, as the language analysts did, to accept everything - at least for the time being. (For John Austen, at least, the time being had no end in sight). On the other hand, it can also be used, as Szasz does, to explain any theory or action away as mere appearance whose real social interaction is only revealed by deeper analysis. Now either posture is clearly mistaken. If we explain everything away, if, for example we turn Szasz' own method on Szasz' theory, we could explain away autonomy as well as mental illness. If, on the other hand, we accept everything as it is, we accept both autonomy and mental illness. It seems that neither posture will do. We need a theory of when and how we can explain away theories. How can we tell, for example, that merely because a theory of mental illness is used as a tool of repression it is also not only false but spurious or bogus. Here I can find in Szasz no standard for appraising discussions from the point of view of explaining away. Yet he does explain things away as a standard approach. He requires, it seems to me, a theory of when we may explain away theories and when we may view theories as objects of legitimate intellectual appraisal, as true or false. This weakness carries through to both his social analysis and his psychological theory as I will explain below.

Fried and Agassi do somewhat better on this point. They do have a theory which allows them to study thought as rational - not merely to endorse some theory on the one hand or explain away some theory on the other hand. This is so because the theory of rationality employed by Fried and Agassi can explain the difference between the proper and the improper functioning of rationality. This theory is an offshoot of the philosophy of

science of Karl Popper and the theory of rationality of William Warren Bartley III. Joseph Agassi has developed his own theory though I shall not pursue the details here. Rather, I will restrict myself to the minimum needed for the current discussion.

Following Popper, Bartley, Agassi and others have adopted the theory that rationality is not characterized by the use of evidence in favor of some theory but rather by openness to criticism. Rationality is best characterized by the use of contrary evidence to find errors in theories. This broad perspective on rationality enables these theorists to form new views of good and bad thought which are far superior to traditional views. This is so because traditional views of rationality sought justification, yet, since there was no adequate theory of justification these theories could not demarcate rationality well. The paranoid is an instance of such a failure.

Now, on the new theory, we may demarcate theories and/or individuals on the basis of their response to criticism: the more open the response, the higher degree of rationality that is present. Now this new conception and means of appraisal is by no means unproblematic but it does provide means of demarcation which are far simpler than on the other view. We may at least fault individuals or persons for poor rationality by showing that their response to criticism is deficient.

This enables Fried and Agassi to study thought from a new perspective. They are not concerned with justification or with social use. Rather they focus on criticism and rate theories, societies and individuals from the point of view of rationality as poor when they respond poorly to criticism. Fried and Agassi thus have a theory that enables them to explain away some thought as bogus or even a thought process as a sign of mental illness without explaining all thought away as bogus, relative or mere language games.

Section IV. Fruitfulness of frameworks

Szasz and Fried and Agassi have developed psychological theories which fit their broad frameworks. Fried and Agassi have done this explicitly, using the developments in the theory of rationality as a key to the development of their theory of paranoia. Szasz also uses his framework though not so explicitly. He employs it by developing a psychological theory as a theory of language use.

Each approach has been successful, in my opinion, in generating interesting psychological theories. These theories have

been presented above. The only task that remains to be accomplished in this section, then, is to explain how the theories fit the frameworks. The purpose of conducting this task is to explain how the virtues or defects of the frameworks are transmitted to the psychological theory.

There is one aspect of each framework, properly carried through in each psychological theory, which I would like to mention here. This is the view of rationality carried through by each. On Szasz' theory the view that persons are rational and their rationality may be analyzed by their use (rather than content) of language is carried through from the broad social analyses to the psychological theory. For Fried and Agassi the view that rationality is openness to criticism is carried through to the psychological level by deeming psychological defects as particular types of fixations or failures of rationality.

Now let me go through once more, in more detail, though still briefly, to explain the unity of framework and psychological theory of each view. Szasz' major works analyze the use of concepts such as witchcraft or mental illness. In these analyses Szasz attributes rationale and even meaning to theories on the basis of their use. He presumes in these analyses that the persons using them are rational agents seeking to accomplish certain goals. We can see the nature of their views, attitudes, etc. by seeing the way in which they use theories, terms of ideas.

These analyses presume, on the one hand, that theories cannot be merely taken at face value. They may embody confusion or distortions or obvious errors. In this sense they may lack all rationality. Yet we may still presume that persons employing such theories are rational. We may use such a presumption to uncover the underlying rationality of the individual. This may be done by seeing the use he makes of his theories. For example, we may ask, what can he accomplish by employing bogus theories? When we conduct such analyses we see an underlying rationality which is not articulated but employed in social interaction.

In this fashion, then, Szasz may view persons now commonly described as mentally ill as persons who merely choose to use peculiar languages. In doing this they do not differ from people of a different age who spoke of witches or psychiatrists who speak of mental illness. We can understand these people in the same way. We can understand the use of their peculiar languages and thereby uncover the underlying rationality of these people. This is not to say we need endorse their language. Rather it provides a basis for communication: we now discuss

whether such use is a fortuitous or ineffective way of pursuing goals. We may also discuss alternatives and improvements which would allow for increased education of persons in the use of languages. This education may replace therapy, maintain a theory of help, recognize rationality and autonomy in all people, and repudiate the idea of mental illness.

Fried and Agassi, on the other hand, are quite explicit in their hope of employing a theory of rationality, perhaps I should say irrationality, to develop a new theory of mental illness. Their view is that mental illness is fixations of various sorts. They claim one primary virtue of their theory: that they can demarcate in adequate ways good from bad thinking; mental health and mental illness in ways which other theorists cannot.

Section V. Empirical questions

Let me summarize the difference. Szasz deems all persons to be both rational and autonomous. He explains away the appearance of irrationality and loss of autonomy as due to peculiar language use which accomplish inarticulated aims in unrevealed ways. Analysis may reveal these; therapy as re-education may improve techniques, especially language use. Fried and Agassi view some persons as more rational, some as less rational, some irrationality is mental illness and some mentally ill people are autonomous. Mentally ill individuals on Fried and Agassi's view suffer from peculiar types of irrationality. Some may have the capacity to decide to abandon their irrationality. These are autonomous. Others do not have this capacity.

Now we have four differences between Szasz and Fried and Agassi. First, may all persons be analysed to reveal them as rational, as Szasz claims, or are some, in fact, irrational? Secondly, may we distinguish, as a matter of fact, those individuals who are autonomous from those who are not? Thirdly, may we distinguish mentally ill from well individuals? Fourthly, Fried and Agassi agree that if there is mental illness it involves or is characterized by loss of rationality. Can we, as Fried's and Agassi's theory requires, separate autonomy and rationality? May we have some individual who is mentally ill, therefore irrational and yet autonomous as Fried-Agassi claim? Having now laid out these differences between Szasz and Fried-Agassi we come to the question: can we devise crucial empirical tests of the competing theories?

Possibilities of refuting Szasz' theory lie in two types of cases which may turn out to be identical: instances of loss of ration-

ality and loss of autonomy. Now there are many cases of apparent lack of both rationality and autonomy in various types of mental illness. Following Freud Szasz' own study emphasizes hysteria and even this may be deemed a case of partial loss of both rationality and autonomy. Yet Szasz deems this case easily explained: the apparent irrationality is merely rational ways of obtaining inarticulated goals in an unstated framework. These goals and framework can be elucidated by analysis.

If one accepted this Szaszian reply, one natural course would be to seek examples of more severely hampered individuals leading to catatonics or severe schizophrenia or paranoia. Szasz may of course employ here the same program of explaining even severely deviant individuals as merely using somewhat odd means for obtaining their goals. Their refusal to abandon such means is merely their own autonomous even rational choice. Now as long as we accept Szasz' framework I see no way of finding a refutation since, as I explained above, he has no criterion to distinguish irrational from rational individuals. We need to construct them.

We can follow the same course if we ask whether such deviant people are autonomous. Since we can attribute underlying rationality to any deviant we can also attribute autonomy to the selection and operation of any mode of action. Indeed, the person's deviance may be taken as a sign of autonomy. We begin to approach Ey's view of mental illness as misplaced autonomy or Laing's view of the mentally ill as superior.

If we switch now, and apply Fried and Agassi's view of rationality to the same cases we may easily find cases of at least a high degree of irrationality. This is so since in these cases we find refusal to learn or to change one's mind, i.e. we find blocks or fixations which are one sign of loss of rationality. We may ask whether this loss of rationality entails loss of autonomy since the individual apparently can no longer choose alternatives or refrain from employing the particular framework he is fixated in. Yet if we allow autonomy here, we would be forced back to Szasz' view of such irrationality as mere appearance. Surprisingly, Fried and Agassi contend that mentally ill people may indeed choose to be that way and choose to change. Apparently we can test this conjecture: we can see if individuals who are mentally ill by their criteria do behave, in spite of their mental illness rationally and autonomously. But I do not know if such a case refutes their analysis of mental illness as a malfunction of reason, corroborates their view of mentally ill people as autonomous or both. This is not all Fried and Agassi claim. They also say that some individuals lose their rationality and autonomy.

Now this two sided view is reconciled by a theory that there is a grace period. A fixation may be rejected while it is young. But if it is retained it becomes virtually complete. Thus, the apparent conflict is resolved merely by a theory of transition and the whole theory of mentally ill people as autonomous applies only for a specific (perhaps short) period of time.

This hypothesis raises some difficulties. First, there are empirical matters. How can we test the grace period hypothesis? It does not appear we could assign even approximate time limits without immediate refutations. I do not know how cases run but it seems certain that many people properly deemed mentally ill on Fried and Agassi's theory will recover after long periods of illness.

These can be easily accounted for but insofar as we do so, we lessen our ability to test. In fact we do not have a theory of the rationality and autonomy of people with blocks and fixations since these are those very people who lack such rationality and autonomy. We come either to a theory somewhat like Szasz' in which fixations are for a time not fixations but merely rational strategy or we have no theory at all. Neither will do since in the former case removed fixations are not proper fixations and in the latter the nature of the rationality and/or autonomy which breaks fixations is not explained.

We may conclude our discussion of the possibility and character of some possible empirical tests of these two alternatives with the following appraisal. It seems that Szasz' program can be used to explain, rather explain away, any deviance as quite independent of either loss of rationality or autonomy by the deviant persons. Prima facie this seems a success since Szasz avoids refutations. Yet it does not appear so, since we explain away too much. If we attribute rationality to deviants, we fail to offer any enlightening, if not to say satisfactory, explanation of this deviance. The program appears too easy.

On the other hand, the program of Fried and of Agassi does offer an explanation of the peculiar nature of some deviance which is especially damaging. They do offer a plausible demarcation of mental illness which takes into account some of the problems they posed, especially, the paradoxes of paranoia. This explanation, it is asserted, allows for the attribution of autonomy if not rationality for a period of time. Yet it seems to fail to account for this capacity of the mentally ill to choose to be or not to be mentally ill, or to explain their capacity to change. Thus each program has some difficulty.

Yet each has explanatory power. Together we may perhaps see more adequately the desiderata which now need to be met for an

adequate theory of some deviant or mentally ill people. In particular we have a new paradox. Some deviant or mentally ill persons seem both irrational and without autonomy as well as rational and autonomous. There are various ways of approaching the problem, for example, as a vacillation. Yet this is unexplained except by an underlying rationality - and this seems too strong a theory. Perhaps we have merely reached a limit to human rationality and also to the capacity of humans to understand humans, but even then we may perhaps seek to understand more fully these limits. More hopeful perhaps is to seek better theories of partial rationality and autonomy which can account for both a degree of mental illness on the one hand, and rationality and autonomy on the other in a unified way.

Universität Mannheim

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