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From Phenomenological Psychopathology to Neurodiversity and Mad Pride: Reflections on Prejudice

Anthony Vincent Fernandez
Kent State University
University of Oxford

Phenomenologists have always been concerned with the problem of prejudice. However, to appreciate this problem, we need to understand how the phenomenological notion of prejudice differs from our everyday use of the term. Hans-Georg Gadamer defines prejudices as pre-judgments, presuppositions that shape our experience. As he puts it, “Prejudices are biases of our openness to the world. They are simply conditions whereby we experience something – whereby what we encounter says something to us” (Gadamer 2008, 9). When we characterize prejudices in this way—as “simply conditions whereby we experience something”—they seem benign. But once we understand that every experience is biased or prejudiced in some way, we realize that we may experience things not as they are, but as we already believe them to be. To achieve a genuine understanding of perception, or embodiment, or even human existence as such, we need to critically evaluate our own prejudices in order to think outside the conceptual frameworks that shape our present understanding (Fernandez 2017).

In light of phenomenology’s longstanding concern with prejudice, it should come as no surprise that this same concern is found across many branches of applied phenomenology, including the interdisciplinary field of phenomenological psychopathology. In his founding article, “The Phenomenological Approach in Psychopathology,” Karl Jaspers says,

When we were children, we first drew things as we imagined them, not as we saw them; so as psychologists and psychopathologists we go through a stage where we form our own ideas, in one way or another, of psychic events, and only later acquire an unprejudiced direct grasp of these events as they really are. And so this phenomenological attitude is to be acquired only by ever-repeated effort and by the ever renewed overcoming of prejudice. (Jaspers 1968, 1316)

We all have an idea of what we mean when we use concepts like ‘depressed mood,’ ‘attention deficit,’ ‘delusion,’ or ‘hallucination’. But, if pressed, would we be able to describe any of these phenomena in detail? Do we really understand what it’s like to find oneself in the midst of a delusion or enveloped in a depressed mood? And, if not, can we claim a genuine understanding of these concepts?

This is precisely the challenge that phenomenological psychopathologists take on: The best work in this field takes up a phenomenon that we think we’re familiar with, reveals the confusions that cloud our current understanding, and provides a more nuanced characterization based on analyses of first-person reports. If we assume that we already know what we mean when we use concepts like ‘delusion’ or ‘depressed mood’, then we’ll fail to make any progress toward a genuine understanding of these conditions. The phenomenological attitude that Jaspers refers to is, first and foremost, a critical orientation toward the everyday, scientific, and even philosophical prejudices that so easily convince us that we know more than we do. Phenomenology is as much about unlearning what we thought we knew as it is about the generation of new knowledge. These new characterizations produced by phenomenological psychopathologists are still subject to revision and refinement in light of new evidence and novel interpretations of existing data. But, by unmooring us from our existing prejudices and assumptions, they have the potential to provide new insights into the experiences they investigate.

How widely has this critical orientation been applied within the field of phenomenological psychopathology? Within this field, the phenomenological attitude is most commonly used to critically reflect upon our assumptions about specific signs and symptoms. But phenomenologists have also questioned the legitimacy of current diagnostic categories (Ratcliffe 2015), challenged the naturalistic assumptions of contemporary psychiatry (Fuchs 2017), criticized the check-list diagnostic methods of the DSM’s operational approach

(Parnas and Bovet 2015), and proposed alternative approaches to psychiatric research and classification (Fernandez 2019; Nelson, McGorry, and Fernandez Forthcoming).

However, there's another prejudice—deeply rooted in psychiatry—to which phenomenologists have paid remarkably little attention (although R. D. Laing is a notable exception). We might call this the prejudice of pathology or, perhaps, the prejudice of disorder. The very word—“psychopathology”—refers to the study of the suffering psyche. And this characterization is borne out in the majority of classical and contemporary work in phenomenological psychopathology, which doesn't shy away from characterizing the conditions it studies as forms of suffering, distress, or, simply, illness. On the one hand, because psychopathology is a subfield of psychiatry, these characterizations should come as no surprise. On the other hand, one may reasonably hope that phenomenologists take a more critical, questioning stance toward these characterizations.

But this isn't a stance that we need to devise all on our own. Proponents of a variety of political currents—most notably the neurodiversity movement and the mad pride movement—have done the difficult work of criticizing, questioning, and unlearning what so many of us presume without a second thought. Of course, not all of their concerns will be of immediate interest to phenomenologists. But many of their questions are, at root, philosophical. And some of these have immediate methodological implications. As phenomenologists, we ought to be concerned if our prejudices lead us astray of the phenomena that we hope to understand. If these movements help us identify, articulate, and suspend these prejudices, that we ought to embrace them.

One might object to this proposal by arguing that these movements, being first and foremost political, do not provide well-formulated philosophical theories or conceptualizations. But this is hardly the case. Philosophers have recently examined the discourse of both the neurodiversity movement and the mad pride movement, extracting and

articulating their philosophical and theoretical positions (Chapman 2019b; 2020; Rashed 2019). Moreover, movements such as disability pride have already shaped the philosophy of disability (Barnes 2016), and we're beginning to see similar influences in the philosophy of neurodiversity (Chapman 2019a). Drawing on the positions outlined in these works, there are two key directions that should be of immediate interest to phenomenologists: First, they push us to conceptualize conditions, or ways of being, in terms of diversity or difference, rather than disorder. Second, they stress how diagnostic labels are, in many cases, taken up as identities. The first direction should motivate phenomenologists to ask questions such as, "How does the presumption of suffering shape how we interpret first-person reports of experience?" and "Have we neglected important aspects of conditions because we've already conceptualized them as inherently negative or undesirable?" The second direction, on the role of identity, should motivate phenomenologists to ask questions such as, "What does it mean to take autism or schizophrenia not as a diagnosis, but as a social identity?" and "How does the shift from an illness narrative to an identity narrative modify experiences of self, others, and environment?"

As Jaspers reminds us, the task of overcoming prejudice requires ongoing effort. Prejudices are often so ingrained in our ways of thinking and experiencing that they go entirely unnoticed. If we are genuinely committed to identifying, assessing, and suspending our prejudices, then we ought to listen to those most affected by them. Their critical analyses may allow us to see things in a way that we haven't seen them before. And it's precisely this new way of seeing that may lead to conceptual and theoretical breakthroughs in understanding.

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