A Functionalist Approach to the Concept of ‘Delusion’

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Delusions are key symptoms of many severe types of mental disorders. Even though the empirical research made considerable progress towards etiological and reductive accounts of delusions, an adequate theoretical definition of this concept is still to be offered. This contribution aims to use the theoretical tools of analytic philosophy of mind in order to provide a functional definition of the concept of ‘Delusion’, and to show how this definition may be used to set up a sub-type classification of delusions.

Starting from a critical evaluation of the DSM-IV definition of delusions, we shape a positive account of what delusions are from a functional point of view. According to this analysis, the criteria of i) falsehood, ii) inadequacy with the beliefs spread within the surrounding social community, iii) firm sustainment and iv) that delusions are about the external reality, are inadequate because they describe unnecessary conditions for delusionality. In fact, the content of delusions and its epistemic relations to the world and to the beliefs of others are inadequate to define delusions.

We argue that from a functionalist point of view (see Soom, Sachse, & Esfeld, 2010, for a methodological analysis of functionalism), delusions are essentially characterized by an asymmetrical inferential profile, which explains their immunity to revision in the absence of medication. Accordingly, delusions might impact on other beliefs of the patient, whereas they are not inferentially affected by the latters. This view is supported by arguments according to which delusions do impact on other beliefs, that normal beliefs are revisable and that assuming that delusions stand on a continuum with normal beliefs leads to intractable theoretical difficulties.

Building on from the above functional definition, we consider etiological and reductive accounts of delusions. According to the latter, there are two factors at play here: (a) tokening a problematic belief while (b) preventing rejection of this belief in spite of its inconsistency with evidence (Coltheart, Langdon, & McKay, 2011). In turn, this suggests that all delusions share a specific inferential profile and that the specific etiology of different delusions might contribute to individuation of (functional) sub-types of delusions. An empirically informed taxonomy of delusions might be established on that basis.

References