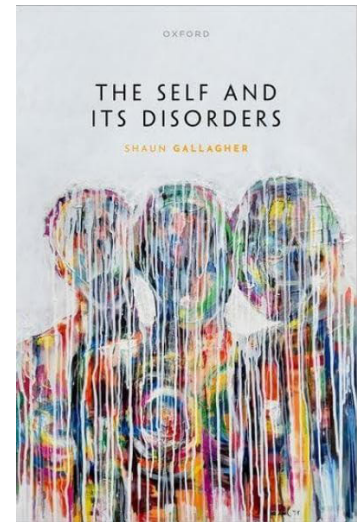


Enacting Order

Aleš Oblak • University Psychiatric Clinic Ljubljana, Slovenia • oblak/at/psih-klinika.si

> Abstract • In *The Self and Its Disorders*, Shaun Gallagher discusses the so-called pattern theory of self. It describes the self as an amalgam of processes, ranging from embodied, experiential to social. Gallagher outlines such a self-pattern as foundational for a non-reductionistic account of the self. He demonstrates the dynamics of the self by drawing on a large body of philosophical and empirical literature. The view of the self put forward by Gallagher mirrors constructivist views of selfhood (the self), which emphasize its active construction through engagement with its environment and personal history. It points out the role of self-narratives, which are definitionally constructed anew each time they are brought to mind. The monograph may prove essential in providing contemporary psychopathology with a comprehensive framework of how to think about psychiatric disorders by addressing some major methodological issues in the field.



Review of *The Self and Its Disorders*
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Introduction

« 1 » Shaun Gallagher's most recent monograph, *The Self and Its Disorders* (SD) is a rich text that addresses many approaches to understanding the idea of the self in psychiatry. I will look at the book from one particular vantage point: empirical research in psychopathology that draws on constructivist approaches.

Psychopathology, the integration problem, and self-disorders

« 2 » Psychiatry has developed through three main paradigms. The first focused on the content of psychiatric disorders and was rooted in the psychoanalytic tradition of Sigmund Freud, who sought the symbolic meaning of this content. The second, which began with the discovery of chlorpromazine, identified neurotransmitter dysfunction as the cause of psychiatric disorders and remains dominant today (Stahl 2021). The third, which is currently emerging, links psychiatric disorders to dysconnectivity in neurocognitive networks involving anatomically, functionally and temporally coupled patterns of brain activation that support cognition and behavior (Bressler 2008; Li et al. 2018; Ji et al. 2021).

It also attempts to address the observation that psychiatric disorders cannot be unproblematically reduced to lower levels of description. Simply put, there is a many-to-many mapping between symptoms and neurobiological mechanisms (Cuthbert & Insel 2013).

« 3 » Psychiatric disorders are significantly influenced by factors such as socioeconomic status, with poverty showing similar changes in a person's experience to depression (Erhard 2024). This leads to psychiatry's integration problem: creating a unified theory of all factors involved in the causes and maintenance of psychiatric disorders (for an overview of this issue, see Taylor, Williams & George

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2015). Solutions are typically a dimensional view of psychiatric symptoms and a pluralistic epistemology, including approaches such as the bio-psycho-social model (Borrell-Carrio 2004), the Research Domain Criteria (RDoC; Cuthbert & Insel 2013), the hierarchical taxonomy of psychopathology (Rodríguez-Seijas et al. 2023), and an enactive view of psychiatry (De Haan 2020).

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« 4 » Gallagher takes up the enactive view and uses self-disorders to illustrate its principles. Self-disorders entered psychiatry through the concept of ego pathologies, such as ego-dystonic thoughts. According to Mads Henriksen and colleagues (Henriksen, Raballo & Nordgaard 2021), systematic investigation began with the examination of anomalous self-experience (Parnas et al. 2005),

which focused on schizophrenia. Karl Jaspers's (1997) *General Psychopathology* analytically examines psychiatric processes and considers the self as a unified Gestalt only in the context of a person's life. This approach is reflected in modern texts such as *Sims' Symptoms in the Mind* (Oyeboode 2015). Given this background, SD is a valuable addition to contemporary psychopathology.

Constructivism and selfhood

« 5 » There is a long constructivist tradition of trying to analyze the self. Constructivist approaches have pointed out that

the self is not fixed. Rather, it amounts to a kind of becoming in which the self is continuously constructed. The continuously constructive nature of self is evident both within a specific individual event (e.g., we do not “accurately” remember events; the event that is being cognized is re-enacted; Riegler 2005), as well as on a broader, cultural level. For example, Jean-Louis Chrétien (2014) discusses how the ancients did not have a conception of the self as an insular entity. The other was always implicit in one’s experience, for example, a deity bringing about inspiration.

« 6 » Constructivist approaches further highlight the social role in the development and maintenance of the self (Foerster 1984). For example, Peter Gärdenfors (2008) emphasizes that second-order intersubjectivity is essential for the development of the self: we first recognize others as distinct agents and then conceive of them recognizing us as agents, thereby fostering our own self-reflection.

« 7 » Additionally, under constructivism, knowledge is formed through a constant active engagement with one’s lifeworld. Furthermore, the process of knowledge formation is subjected to a person’s reflection upon the process of knowledge formation itself. Through this active engagement, knowledge forms a part of the self (e.g., how the self in schizophrenia changes in light of technological developments; Škodlar, Dernovšek & Kocmur 2008). Phenomenologically, in Oblak et al. (2022), we have examined this in the case of psychosis. We presented the case of a young German woman who experienced a transient psychotic episode. When she handled artefacts related to her Jewish heritage (e.g., her grandfather’s ring), she felt herself to be the victim of prosecution during the Third Reich. The body of knowledge that was salient in her mind was the awareness that the Jewish population was being transported away to concentration camps. Conversely, when she handled her roommate’s medal displaying the West German *Bundesadler*, she felt herself to be an officer of the SS

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(clearly failing to make the appropriate historical association). The body of knowledge that was salient to her was the awareness of Germany’s geopolitical power. We can see similar dynamics play out in non-psychopathological contexts (e.g., a scientist believing in a deity). Constructed knowledge can be radically idiosyncratic and still allow for adaptive behavioral patterns. This holds for both intersubjective knowledge and our own reality constructions. That is, we can endorse

radically different systems of knowledge depending on the current constraints imposed on us, as the case described above illustrates, where the patient interacted with different types of knowledge.

« 8 » Finally, constructivism points out that the self is always embedded in a specific socio-historical context. As such, it is shaped by culture and folk psychology, as well as scientific ideas and technological progress. In *Rewriting the Souls*, for example, Ian Hacking (1998) discusses the social construction of dissociative identity disorder as specifically an American phenomenon. He grounds it in how psychologists discuss memory and personal identity, the Satanic Panic of the 1980s,¹ and the contemporary tendency towards deinstitutionalization of psychiatric disorders.

The self and its disorders

« 9 » In SD, Gallagher further develops the so-called pattern theory of self. He argues for a pluralistic, non-reductionist view of the self. According to this view, the self consists of an interrelated pattern of bodily, experiential, affective, social, narrative, and environmental processes. Crucially, such a

1 | The Satanic Panic refers to a period of moral panic that originated in the United States in the 1980s and in some form persists to this day. Moral panics refer to socially transmitted feelings of fear over some entity threatening a society’s core values. In the case of the Satanic Panic, these were related to fears of ritualistic abuse happening (primarily to children).

self-pattern is not merely an emergent amalgam of these processes. Rather, following the enactivist line, it is a “meshwork,” a dynamic Gestalt that recursively maintains its own organization. Gallagher then attempts to understand various alterations of the self – from psychopathologies, meditation and technological extensions to physical torture – as disturbances in these patterns of processes. In doing so, his approach is similar to the transdiagnostic tradition in psychopathology, in which psychiatric disorders are understood not as novel phenomena but as extreme deviations from otherwise adaptive human functioning (Graham & Stephens 1994; Brüne 2016).

« 10 » Gallagher goes on to argue that the self-pattern is resistant to perturbations (which is reminiscent of Humberto Maturana’s concept of structure-determined systems, but Gallagher makes no such reference). It persists as long as its elements remain sufficiently well connected. An entity can be said to be a “self” as long as it actively maintains a pattern of its organization over time. In other words, as long as the organization of the pattern as a whole remains stable, perturbations at the individual level will not break down

the dynamic Gestalt of the self. Nevertheless, the self-pattern is characterized by a certain degree of flexibility that allows it to adapt to changing circumstances, enabling an agent to maintain its own viability. Psychiatric disorders are therefore not only related to the collapse of the Gestalt, but to its rigidity as well.

« 11 » The pattern theory of self, as developed in SD, rejects reductionism, an epistemological move that can be seen as a general trend in recent frameworks of psychopathology (e.g., the notion of explanatory pluralism in RDoC; Cuthbert & Insel 2013). Gallagher writes,

“On a dynamical Gestalt view, for example, it’s not clear why we should think of sensorimotor processes as on a more basic, or lower level than cognitive or social processes (unless we have already made some reductionist assumptions, or have decided a priori that relations in the self-pattern have to be hierarchically arranged).” (SD: 74)

« 12 » Throughout the text, Gallagher addresses the existing or potential criticisms of this approach. At the beginning of Chapter 4, he writes: “[The pattern theory of self] has been criticized, however, for failing to account for the dynamic relationships between the elements of self-pattern” (SD: 91). He continues:

“[T]he self-pattern is not an additive collection of components, but a set of dynamically interrelated factors and processes arranged in a dynamic gestalt. Thus, an intervention that affects one factor can involve modulations in the other factors.” (SD: 96)

« 13 » Since Gallagher does not explicitly mention “constructivism” in SD, I want to emphasize that he presents a view of the self that is highly consistent with the constructivist positions I have outlined above. On a meta-scientific level, SD draws on an interdisciplinary body of knowledge, implicitly favoring epistemological pluralism, rather than seeking a reductionist level of explanation (either in neurobiology or phenomenology). Specifically, Gallagher posits that the self is a self-pattern whose elements can be explored by different disciplines and methods. Furthermore, Gallagher emphasizes that the self is an active process, shaped by a person’s engagement with their lifeworld as it is revealed to them in their experience. He provides novel empirical support for the idea that self-narratives are a mechanism by which the self is maintained, thereby expanding the current understanding of the narrative self. Additionally, SD centers on the role of a person’s context in their self-understanding. All of this has profound clinical implications, both for how we, as researchers, are attempting to understand psychopathology (e.g., as a disorder of meaning) and how, as clinicians, we can better understand our patients’ suffering.

Bringing order to the study of disorders

« 14 » I opened the review with a discussion of the three paradigms in psychiatric clinical practice and research. The ongoing paradigm shift faces a variety of conceptual and methodological issues that SD can address productively. In my view, the precise nature of the dynamic Gestalt of self-patterns as described in SD can be exemplified by the use of transcranial magnetic stimulation (TMS) in psychiatry. TMS is a technology that triggers neuronal responses in the cerebral cortex through the process of induction. We can use TMS in research by exciting or inhibiting specific brain regions, or we can use it clinically (in the form of repetitive TMS) to induce long-term changes in brain plasticity to treat treatment-resistant depression, obsessive-compulsive disorder and addictions (Higgins & George 2020). The treatment of addictions is of particular interest for the present topic. Recent studies have shown that cue exposure prior to treatment with TMS (e.g., contact with drug paraphernalia) activates the corresponding neural circuits and thus improves the therapeutic effect (Liu et al. 2020; Mehta et al. 2023). We therefore see that it is the totality of the pattern (environment, brain activity, neuromodulation) that accounts for the therapeutic effect, and not merely the intervention.

« 15 » Recently, there has been a trend, especially in phenomenological psychopathology, that emphasizes the importance of focusing on the totality of a person’s life in explaining their psychiatric disorders. Indeed, psychiatric disorders – and perhaps illness in general – affect a person’s life as a whole (Stanghellini & Mancini 2017). From the perspective of academic psychiatry, however, the focus on the person as a whole raises methodological problems. I will focus on

what I consider to be the two most pressing of these problems:

- There is the necessity of focusing on specific aspects of the person in repeated-measures studies (e.g., when evaluating the efficacy of medication); and
- Gallagher’s framework may allow us to identify relevant factors of the research set-up that may be omitted under current experimental paradigms.

« 16 » Relating to the first problem, in within-subject designs (e.g., before and after treatment), it is crucial to target a specific cognitive process rather than a broad measure (Jonaitis et al. 2019), especially when studying treatment-resistance mechanisms (Kim 2019). Hazel Morrison et al. (2019) emphasize that psychological experiments

aim to isolate particular aspects of the mind relevant to the study. As for the second problem, the heretofore unaddressed aspects of psychiatric experiments: SD, with its emphasis on self-patterns that are not absolute structures but can emerge dynamically under specific constraints, allows us to think about psychopathology in terms of its effects on a person as a whole, while conducting precise experiments. This is also reflected in the large body of empirical literature that Gallagher draws on to support his claims. However, this does not mean that we can proceed as usual when conducting experiments and use standard research designs. It is likely that for the experimental study of self-patterns, we need a mature field of “reflexive cognitive science” in which we examine how participation in an experiment, as a distinct socio-phenomenological context, affects the patterning of the processes that shape the self (e.g., Valenzuela Moguillansky, O’Regan & Petitmengin 2013; Černe & Kordeš 2023; Oblak et al. 2024).

« 17 » This point is crucial to solving an important problem in academic psychiatry today. As a medical specialty, psychiatry adheres to the research standards of the biomedical model, such as double-blind studies, because of their scientific validity and the established epistemology in medicine. However, this approach has its limitations. In

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microdosing psychedelics, for example, self-reports suggest benefits, but rigorous studies reveal confounding factors. The positive effects disappear when excluding participants with full-dose experiences or controlling for expectancies (Hartong & Van Emmerik 2023; Kaertner et al. 2021). Nonetheless, in psychiatry, even placebo interventions may be worth considering if they alleviate patient suffering.

«18» In our research on psilocybin microdosing,² we used Sanneke de Haan's (2020) personalized network approach to investigate the changes in participants' lifeworlds. We developed the idea of a critical pattern, referring to various aspects of a person's lifeworld interacting to elicit some high-level change (e.g., an improvement in depressive symptoms). We found that it is unclear whether it is psilocybin itself that effectuates change. It may be that the practice itself triggers a different attitude, a different pattern of sense-making. Or it may be that people check their lived experience in the morning to decide whether microdosing is beneficial. In any case, we find that the critical pattern (the psilocybin, mindfulness, interaction) is what is related to beneficial changes. Therefore, the conclusion of the biomedical study on the inefficiency of microdosing (Yanakieva et al. 2019) may be incomplete: the idea of self-patterns can help us understand how negative findings of the effects of microdosing may be, in part, related to differences in how participants make sense of their experience (i.e., how they construct self-narratives). In short, SD allows us to think about these issues in a way that is opening up a path forward in academic psychiatry that will be able to generate productive and testable hypotheses (which, as I have argued in Oblak 2022, has been lacking in enactivist approaches).

2| The preprint is available as: Oblak A., Hudnik L. K., Levačić A., Elersić K., Pregelj P. & Bon J. (2024) Salience, sensemaking, and setting in psilocybin microdosing: Methodological lessons and preliminary findings of a mixed method qualitative study. <https://doi.org/10.31219/osf.io/523n4>

Conclusion

«19» In recent years, much of enactivist thought has been reduced to oversimplified arguments, moving from a precise formulation of how cognition works to simple attempts to unify top-down and bottom-up theories. In their essay "Putting Down the Revolt," Russell Meyer and Nick Brancazio (2022) argue that enactivism is imprecisely defined and amounts to a natural philosophy of nature and not a research program. Gallagher's discussion in SD is therefore

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a welcome return to form. It shows that the revolt is still very much alive. Gallagher provides a precise and well-thought-out framework for thinking about mental disorders that is compatible with constructivist views of the self. More importantly, Gallagher's thinking is well informed by the methodological constraints of existing techniques in psychology, neuroscience, and even niche areas such as performance studies. He thus offers a compelling blueprint for a research psychiatrist on how to address some of the most pressing problems in academic psychiatry today.

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Aleš Oblak is a researcher at the University Psychiatric Clinic Ljubljana. His work focuses on integrating psychiatry and enactive cognitive science in order to better understand various psychiatric disorders as well as develop novel treatments for them. His past projects included investigating working memory, synesthesia, hallucinations, sense of presence, and emotion regulation. Currently, he is working towards refining the methodology for enactive cognitive science, primarily with the goal of identifying core symptoms in psychiatric disorders, which could guide personalized treatment using modern methods (e.g., transcranial magnetic stimulation, psychedelic therapy).

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