

8-2022

## The Social Ontology of Psychiatry: Psychiatric Diagnosis as an Ontogenetic, Interpellative Speech Act

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The Social Ontology of Psychiatry:  
Psychiatric Diagnosis as an Ontogenetic, Interpellative Speech Act

A thesis submitted in partial fulfillment  
of the requirements for the degree of  
Master of Arts in Philosophy

by

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University of Arkansas  
Bachelor of Arts in Philosophy, 2016

August 2022  
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This thesis is approved for recommendation to the Graduate Council.

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## **Abstract**

Psychiatry is the study, evaluation, and treatment of mental disorders – disorders that affect the behavior and cognition of individuals and which are associated with underlying dysfunctions in the brain and nervous system. Though psychiatry is a medical and scientific discipline, it also takes place within a social context that modifies its effects, particularly in its application of diagnostic categories to individuals. In this thesis, I argue that, because of this context, psychiatric diagnosis can be modeled as an ontogenetic, interpellative speech act. A speech act is an utterance or sign that constitutes an action through its performance, called an illocution. In psychiatric diagnosis, this illocution is ontogenesis, or the instantiation of an individual as a member of a social kind. Because of how this kind is embedded in a social structure, this ontogenetic illocution also results in the perlocutionary effect of interpellation, where a person is signaled, or “hailed,” to behave in ways considered appropriate to that diagnosis and the social kind and role associated with it. I will offer an overview of the concepts required for this model, including social structure, social kinds, social positions and roles, and social practices. I will also analyze ontogenesis, phylogenesis, and interpellation, offering felicity conditions for interpellation and for the type of ontogenetic speech act that psychiatric diagnosis exemplifies – authoritative ontogenetic speech acts. I will demonstrate how psychiatric diagnosis meets these felicity conditions so that it can be effectively modeled as an ontogenetic, interpellative speech act. Finally, I will consider a case where ontogenesis and interpellation in psychiatric diagnosis leads to unjust conditions through a background ideology of ableism – namely, autocalypse and autistic filicide, or the denial of autistic agency and the murder of autistic persons by their families and caretakers.

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## Ch. 1: Introduction & Overview

My parents first took me to be evaluated for autism when I was a child. At that time, the doctor refused to diagnose me, citing the (false) adage that “everyone is autistic these days.” I, therefore, did not have an ASD (autism spectrum disorder) diagnosis until years later, when a psychologist administered a battery of tests, revealing a collection of associated characteristics. Years after being told there was no use in a diagnosis, I was diagnosed with ASD. What was the function of this diagnosis and why might one clinician refuse a diagnosis while another carries it out? What is the effect of being diagnosed versus not being diagnosed? More particularly, what are the *social* effects of diagnosis, and how does it modify behavior? In this thesis, I will argue that psychiatric diagnosis can be understood as a speech act whose illocutionary force is ontogenesis and a perlocutionary effect of which is interpellation. By this, I mean that psychiatric diagnosis (1) constitutes an illocution through its performance, (2) instantiates a target as an instance of a social kind (ontogenesis), and (3) causes the target or appropriate interlocutors to treat the target in ways considered appropriate to that social kind (interpellation). To begin, in this chapter I will provide an overview of my theory of psychiatric diagnosis. I will start with an overview of psychiatric models and practices of diagnosis before moving on to an analysis of requisite concepts including social structure, social role, and social kinds. I will then discuss the related concepts of ideology, ontogenesis, phylogenesis, and interpellation. Finally, I will provide a short overview of my model of psychiatric diagnosis as ontogenesis and interpellation, providing the groundwork for a more detailed exposition in later chapters.

## Models of Psychiatry and Diagnosis

I will begin by analyzing the most common models of psychiatric diagnosis. I will not be arguing which model is best or whether the existing models are adequate. Instead, I will use these models as a background for understanding the clinical practices of psychiatrists.

Psychiatry is a medical discipline that identifies, analyzes, and treats mental disorders, where a mental disorder is "...a syndrome characterized by clinically significant disturbances in an individual's cognition, emotion regulation, or behavior that reflects a dysfunction in the psychological, biological, or developmental processes underlying mental function."<sup>1</sup> Mental disorders are characterized by symptom clusters that are bound together in ways that reflect underlying anatomical dysfunctions.<sup>2</sup> The nature of this dysfunction may not be specified, though it is typically assumed to be in a corresponding bodily system, such as the brain.<sup>3</sup> For instance, though major depressive disorder (MDD) is characterized by a set of symptoms, these symptoms are presumed to correspond to a dysfunction in the brain, such as serotonin production dysregulation.<sup>4</sup> MDD can be diagnosed solely on the presence of symptoms, however, without the underlying dysfunction being investigated or determined.<sup>5</sup>

The above definition, derived from the *Diagnostic and Statistical Manual, 5<sup>th</sup> Edition* (*DSM-V*), is purposefully broad, as it covers a wide range of mental disorders, including mood disorders, psychotic disorders, personality disorders, and neurodevelopmental disabilities, among others. Though these disorders share little in common they are subject to the same process of

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<sup>1</sup> American Psychiatric Association, *Diagnostic and Statistical Manual of Mental Disorders, 5<sup>th</sup> Edition* (Washington, DC: American Psychiatric Publishing, 2013), 20

<sup>2</sup> Ibid.

<sup>3</sup> K. Black, "Psychiatry and the Medical Model" in *Adult Psychiatry, 2<sup>nd</sup> Edition*, ed. by E. Rubin & C. Zorumski (Malden, MA: Blackwell, 2005), 3-15.

<sup>4</sup> Pauline Belujon & Anthony Grace, "Dopamine System Regulation in Major Depressive Disorders," *International Journal of Neuropsychopharmacology* 20 (December 2017), no. 12: 1036-1046

<sup>5</sup> APA, *Diagnostic and Statistical Manual of Mental Disorders, 5<sup>th</sup> Edition*, 160-168

diagnosis. These disorders are divided from other medical disorders through their presumed common origination in bodily systems associated with mental functioning and processes, such as the brain and nervous system, though some symptoms arising from these disorders may be non-mental in nature.<sup>6</sup> Mental disorders are also typically marked by difficulties in performing life activities and must not be better explained as a conventional, culturally appropriate response to loss or a common life stressor, nor as individual deviance or a non-pathological conflict between the behavior of an individual and the expectations of society.<sup>7</sup> Mental disorders must also meet three conditions of validation, which determine whether a mental disorder is present, including (i) antecedent validation, such as "...similar genetic markers, family traits, temperament, and environmental exposure...", (ii) concurrent validation, such as "...similar neural substrates, biomarkers, emotional and cognitive processing, and symptom similarity...", and (iii) predictive validation, such as "...similar clinical course and treatment response."<sup>8</sup> These standards guarantee the similarity between new diagnoses and prior diagnoses of the same kind.

The above conditions form the model of psychiatric diagnosis used in the *DSM-V* and which is used by most psychiatrists in the US. This model is an extension of earlier models, such as that of Emil Kraepelin, a nineteenth-century psychiatrist who argued that mental disorders represent sets of identifiable, co-occurring symptoms that follow similar paths of development.<sup>9</sup><sup>10</sup> Kraepelin's model was later codified in twentieth century psychiatric practice through debates between etiologists, who sought to identify the anatomical origins of mental

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<sup>6</sup> Ibid., 20

<sup>7</sup> Ibid.

<sup>8</sup> Ibid.

<sup>9</sup> K.S. Kendler & A. Jablensky, "Kraepelin's Concept of Psychiatry Illness," *Psychological Medicine* 41 (June 2011), no. 6: 1119-1126.

<sup>10</sup> Paul Hoff, "The Kraepelinian Tradition," *Dialogues in Clinical Neuroscience* 17 (March 2015), no. 1: 31-41.



disorders, and descriptivists, who focused on external symptomology.<sup>11</sup> The philosopher Carl Hempel and psychiatrist Aubrey Lewis influenced the move towards descriptivism and away from etiology, with Lewis being instrumental in formulating the glossary of the ICD-8, codifying the language of psychiatric diagnosis for a large part of the world.<sup>12</sup> The *DSM* model of diagnosis is descriptivist in that it categorizes mental disorders on the basis of symptom clusters; however, it includes influence from the etiologists in connecting these symptoms to an underlying anatomical dysfunction, whether this dysfunction is known or not.

The division between descriptivists and etiologists has been superseded in recent literature by the minimal and strong interpretations of the medical model of psychiatry.<sup>13</sup> The medical model of psychiatry states that psychiatric diagnosis is like other forms of medical diagnosis in that it occurs through the observation of external patterns that correlate to pathologies in a bodily system.<sup>14</sup> In this model, a patient's external characteristics correlate to an underlying pathology. We can see how this operates in different fields through the examples of a pulmonologist diagnosing asthma and a psychiatrist diagnosing schizophrenia. A pulmonologist diagnoses asthma by identifying external symptoms, such as difficulty breathing and inflammation of lung airways, which are associated with the diagnostic category of "asthma."<sup>15</sup> Being diagnosed with asthma implicates that there is a dysfunction in the patient's lungs that is the causal source of these symptoms. This causal source may differentially include inflammation caused by excessive smoking and/or the presence and expression of genes associated with lung

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<sup>11</sup> K.W.M. Fulford, et al., "The Next Hundred Years: Watching Our Ps and Qs," in *The Oxford Handbook of Philosophy of Psychiatry*, ed. by K.W.M. Fulford, et al. (Oxford, UK: Oxford University Press, 2013), 6-7.

<sup>12</sup> *Ibid.*, 8-9.

<sup>13</sup> Dominic Murphy, "Philosophy of Psychiatry," *The Stanford Encyclopedia of Philosophy* (Fall 2020 Edition), Edward Zalta (ed.), URL = <https://plato.stanford.edu/archives/fall2020/entries/psychiatry/>,

<sup>14</sup> K. Black, "Psychiatry and the Medical Model," 3-15.

<sup>15</sup> Center for Disease Control & Prevention, "Asthma," Center for Disease Control and Prevention, revised on September 6, 2019, <https://www.cdc.gov/asthma/faqs.htm>

dysfunction.<sup>16</sup> In the case of the psychiatrist, schizophrenia is diagnosed through identifying symptoms including audio-visual hallucinations and/or delusions that are externalized through the testimony and behavior of the patient.<sup>17</sup> These symptoms indicate an underlying dysfunction in a bodily system associated with schizophrenia – likely the brain. What is notable about schizophrenia, however, is that though there is an agreement that such a dysfunction exists, there is no consensus on what that dysfunction is.<sup>18,19</sup> A schizophrenia diagnosis, therefore, does not point to any specific bodily dysfunction, nor to a set of candidate causes, but to an as-yet-unknown pathology. In both the pulmonologist and psychiatrist cases, the diagnostician assumes there is an underlying dysfunction in a bodily system that causally grounds the symptoms of the disease; however, in psychiatry, this dysfunction may be opaquer than in other disciplines. What matters in psychiatry is not the identification of an anatomical cause, but a causal story that grounds the symptoms characteristic of a disease in an assumed dysfunction, without the necessity of determining or detailing this dysfunction.

There are two competing interpretations for the medical model in psychiatry. According to the minimal interpretation, psychiatric diagnostic categories are descriptions of external symptoms and behaviors that do not require identification of the causally linked anatomical dysfunction.<sup>20</sup> The minimal interpretation is commonly used by philosophers of psychiatry and closely approximates the diagnostic system used in the *DSM*.<sup>21</sup> As this is an interpretation of the medical model, it does assume there is an underlying dysfunction that causally grounds the

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<sup>16</sup> Ibid.

<sup>17</sup> APA, *Diagnostic and Statistical Manual of Mental Disorders, 5<sup>th</sup> Edition*, 99-105

<sup>18</sup> T.J. Crow, “Molecular Pathology of Schizophrenia: More Than One Disease Process?” *British Medical Journal* (Jan. 1980), no. 280: 66-68

<sup>19</sup> Nancy Andreasen, “Understanding the Causes of Schizophrenia,” *The New England Journal of Medicine* (Feb. 1999): 645-7

<sup>20</sup> Dominic Murphy, “Philosophy of Psychiatry”

<sup>21</sup> Paul McHugh & Philip Slavney, *The Perspectives of Psychiatry* (Baltimore, MD: Johns Hopkins University Press, 1998), 302

external symptoms of the disease, but it does not assume this dysfunction needs to be specified for diagnoses to be clinically valid. External symptoms indicate the dysfunction, but the treatment of symptoms is adequate for the treatment of the disease.

Though the *DSM* and most major psychiatric organizations support a model of diagnosis like the minimal interpretation, a sub-set of the field advocates for a strong interpretation of the medical model. According to the strong interpretation, clinicians must identify the anatomical dysfunction associated with a diagnosis and orient diagnostic systems around these identified pathologies.<sup>22</sup> Though this model is not common in psychiatric practice, it forms the basis of a movement to reform psychiatric diagnosis so that it conforms to models in other medical fields, where anatomical dysfunctions may be more readily identifiable and where identification may be a prerequisite to diagnosis.<sup>23</sup> Advocates of this interpretation argue that such reforms would benefit psychiatry through grounding psychiatric categories in identifiable anatomical processes, rather than symptom clusters. For instance, if the cause of schizophrenia can be identified as a dysfunction in the brain, then this supports the coherence of the diagnosis and orients therapeutic interventions toward the treatment of the dysfunction, rather than of disparate symptoms.

However, the strong interpretation, at least in its current form, suffers from weaknesses that make the minimal interpretation more efficient for psychiatric practice. Unlike many diagnostic categories in other fields, it is not clear what pathogenic processes underlie many psychiatric diagnoses, like major depressive disorder or schizophrenia, which may manifest through multiple processes or whose common cause is opaque. There is no identified cause for schizophrenia, for instance, with genetic and environmental risk factors, such as the high genetic heritability of the disease and the influence of adverse childhood experiences (ACEs) playing a

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<sup>22</sup> Nancy Andreasen, *Brave New Brain* (New York City, NY: Oxford University Press, 2001), 172-6.

<sup>23</sup> Dominic Murphy, "Philosophy of Psychiatry"

large role but no corresponding anatomical dysfunction being determined.<sup>24</sup> Instead, schizophrenia is diagnosed based on the presence of two or more symptoms over a one-month period, including delusions, audiovisual hallucinations, disorganized speech, catatonic or disorganized behavior, and/or negative symptoms such as affective flattening.<sup>25</sup> Only two out of five of these symptoms need to be present to justify a diagnosis and it is, therefore, possible for two people with schizophrenia to share no external symptoms. However, diagnoses of schizophrenia are still useful for determining treatment, with medications such as atypical antipsychotics showing effectiveness.<sup>26</sup> The lack of an identifiable cause does not minimize the clinical applicability of the diagnosis.

The strong interpretation also has difficulty making sense of disorders such as generalized anxiety disorder (GAD) that can be multiply realized through different pathogenic processes. Persons with GAD may share common symptoms, with the *DSM-V* requiring the presence of excessive anxiety and worry associated with at least three out of the symptoms of restlessness, fatigue, difficulty concentrating, irritability, muscle tension, or a disturbance in sleep.<sup>27</sup> However, there is no guarantee that these different cases of GAD will share the same causal origin. This is because GAD is associated with multiple potential dysfunctions, including genetic transmission and/or changes to the amygdala.<sup>28</sup> This lack of a common cause implies that either the string interpretation is not adequate for capturing GAD or that GAD is not a legitimate medical disorder. However, the latter seems unlikely given that GAD is useful in clinical practice, with classes of medications that are useful in treatment being identified based on the

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<sup>24</sup> Nancy Andreasen, "Understanding the Causes of Schizophrenia," 645-7.

<sup>25</sup> APA, *Diagnostic and Statistical Manual of Mental Disorders, 5<sup>th</sup> Edition*, 99-105.

<sup>26</sup> John Geddes, et al., "Atypical Antipsychotics in the Treatment of Schizophrenia: Systematic Overview and Meta-Regression Analysis," *British Medical Journal* (Dec. 2, 2000), no. 321: 1371-1376.

<sup>27</sup> APA, *Diagnostic and Statistical Manual of Mental Disorders, 5<sup>th</sup> Edition*, 222

<sup>28</sup> William Kehoe, "Generalized Anxiety Disorder," *Neurologic/Psychiatric Care* 2 (2017): 7-27.

diagnosis. Since this is the case, the burden of proof seems to be on those who support the strong interpretation to justify a radical revision of psychiatric categories. For the sake of this paper, I will therefore assume the minimal interpretation as a basis for understanding psychiatric diagnosis. Though this may not be the best model available, it is the one that is prevalent in psychiatric practice, and which is assumed by most psychiatrists and psychiatric researchers.

### **Social Structures, Social Roles, & Social Kinds**

To elaborate a model of psychiatric diagnosis as ontogenesis and interpellation, we need to consider not only its clinical and institutional context but also the social context in which it is embedded. In this section, I will analyze those concepts that are integral to defining this social context: social structure, social roles, and social kinds.

A social structure refers to a network of individuals, groups, institutions, objects, and practices that are defined by their relationships to one another and which explanatorily grounds our understanding of social behavior in a context.<sup>29,30</sup> Social structures are composed of nodes, which are positions that a person, object, group, or institution can hold within the structure, and which is defined by the relations that exist between that node and others.<sup>31</sup> Who or what holds a position is malleable and changes over time – someone who holds a position at one time does not necessarily hold that position at another and different processes and events can modify who or what inhabits a node. What matters for holding a position in a node is that the entity is believed by other agents in the social structure to hold the appropriate relationships to other nodes and to entities which inhabit those nodes.<sup>32</sup>

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<sup>29</sup> Sally Haslanger, “How to Change a Social Structure,” Forthcoming in *Normative Philosophy*, ed. by Ruth Chang & Amia Srinivasan (Oxford, UK: Oxford University Press), 3

<sup>30</sup> Sally Haslanger, “What is a (Social) Structural Explanation?” *Philosophical Studies* 173 (2016), no. 1: 119

<sup>31</sup> Ibid.

<sup>32</sup> Ibid.

The nuclear, cis-heterosexual family offers an example of such a structure. Within the nuclear family there are multiple positions that one can inhabit – for instance, “wife,” “husband,” “father,” “mother,” “child,” etc. One can inhabit multiple positions at once depending on how their relationships overlap, such as a person being both a “wife” and a “mother” through their combined relationships to their spouse and children. An individual who inhabits the “wife” node has a relation to the person inhabiting the “husband” node, with the “wife” position being defined by its contextual relationship to the “husband” node and vice-versa. Likewise, the “mother” or “father” node is defined by its relationship to both the other spouse (if present) and to the person inhabiting the “child” node. Though there is also a biological definition for parenthood, and this biological definition is commonly connected to who inhabits these positions, the definition of these nodes within a social structure is defined by their relationship to other persons inhabiting other positions.

These positions matter because the way one is positioned in a social structure affects the actions they are permitted, prescribed, or prohibited to perform. A person is permitted to perform an action if their position within a social structure makes that action intelligible to others (i.e., it is an act that can be explained in conjunction with the behavioral assumptions tied to a person in that position) and which is accepted as an appropriate action for someone in that position to make. This same person is prohibited to perform an action whenever their position makes that action inappropriate and/or unintelligible and they are prescribed an action whenever not performing an action in a relevant context results in physical or social disapproval or punishment. What permits, prohibits, or prescribes an action to a person depends on the node that they inhabit and the relationships that they hold with other entities inhabiting other nodes.

For instance, when someone inhabits the “mother” node, they are permitted to engage in behaviors that are inessential to that position, while also being required to act in prescribed ways toward the person positioned in the “child” node (with social and legal consequences being applied to those who perform or do not perform these actions) and being prohibited (or strongly discouraged) from acting in ways that are non-typical for someone in that position or which would modify the relationship between the person in the “mother” node and the person in the “child” node. What behaviors are permitted, prohibited, or prescribed differ between the person in the “mother” node and the person in the “father” node, even with some overlap, as the two positions are distinct in their relationships and expectations. These distinctions may be innocuous but can also result in unjust imbalances between persons in these positions, creating a basis for systemic oppression or the limitation of individual freedom. Social structures are highly diverse and can vary in size from societies to families to groups of friends. What matters in each case is that there is a network of positions defined by their relationship to one another, which results in a set of permissions, prohibitions, and prescriptions for those inhabiting each node. These relations may change over time and can be the subject of ethical conflict, struggle, and reform, as changes in the nodes of a social structure commonly correspond to changes in the relative power that each person holds within that structure.

It is this set of permissions, prohibitions, and prescriptions that form the basis of a person’s social role. Whereas one’s nodal position in a social structure defines their micro-contextual relationship to other persons and institutions, one’s social role is the macro-contextual pattern of relationships that the person is grouped in along with others. A social role is the set of permissions, prohibitions, and prescriptions that attach to persons across a pattern of similar positions in a social structure, such that whether this set applies to a person is dependent on

whether they inhabit a position that is perceived as being part of that pattern.<sup>33</sup> The node “mother,” for instance, describes the micro-contextual position that a person inhabits through holding certain relationships to people inhabiting the “child” node, but it also fits into a larger pattern of persons in the social structure who have similar positions and relationships. It is this pattern and the set of prescriptions, prohibitions, and permissions associated with the pattern that ground a social role.

Sometimes these roles are rigid and pre-determined – for instance, “doctor” is a pattern of positions in a social structure that has an associated set of permissions, prohibitions, and prescriptions; however, many of these are explicitly determined by legal and institutional requirements. Therefore, though “doctor” is a social role, it is also codified by the relationship of the doctor to authoritative social organizations, such as the state. Other roles, however, are not rigidly determined by institutions but instead arise through the repetition and reproduction of relationships and their associated behaviors over time. For instance, most permissions, prescriptions, and prohibitions attached to persons in the “mother” role are not decided by the state but are instead a result of the reproduction of patriarchal norms that have solidified over time. An example of this can be seen in how the social roles of women changed in the birth of European capitalism, as discussed by Silvia Federici in *Caliban and the Witch*. As Federici states, in the wake of the Black Death in Europe, the social roles of women changed as the drop in population changed employment and market practices and consolidated the newly arising merchant household.<sup>34</sup> These changes in the economy and changes in population results in

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<sup>33</sup> This definition is derived from Alice Eagly & Wendy Wood, “Social Role Theory,” in *Handbook of Theories of Social Psychology*, Vol. 2, ed. by Paul van Lange, Arie Kruglanski, & E. Tory Higgins (London, UK: SAGE Publications, 2012): 458-472, modified to fit the above model of a social structure.

<sup>34</sup> Silvia Federici, *Caliban and the Witch: Women, the Body, and Primitive Accumulation* (New York City, NY: Autonomedia, 2004), 61-132.



changes to the behavioral expectations attached to women, resulting in a shift away from older feudal conceptions of motherhood and the home towards the modern nuclear family. The behaviors associated with social roles thus shift as the social structures they are embedded in change in response to historical circumstances and pressure.<sup>35</sup>

This brings us to the final concept that needs to be considered for an analysis of social context – social kinds. A kind is a category to which an entity can belong that populates the type of entities recognized in a context and which can be used in explanations of phenomena in that context.<sup>36</sup> More formally, a kind is a partition in the logical space of a sphere of discourse, whether this is the world as a whole or a sub-set of the world such as a social context, which then can then allow for more or less fine-grained explanations of phenomena in that sphere.<sup>37</sup> These partitions are typically determined by what is considered fundamental in a sphere, and therefore grounds other categories of entities, or what is useful in explanations in that domain. For instance, one may refer to the kind “electron” in explanations in physics or to the kind “money” in economics. What kinds are most relevant to the domain depends on the explanations required in that domain, which in turn depends on the phenomena to be explained.

Considering this, we can divide kinds into two types: natural kinds and social kinds. A kind is natural when it is a partition of the world that features in explanations relevant to the natural sciences and/or to processes that are independent of human cognition.<sup>38</sup> A kind is social, then, if it is a partition of the world that features in explanations relevant to the social sciences

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<sup>35</sup> Ibid.

<sup>36</sup> Ásta, “Social Kinds,” in *The Routledge Handbook of Collective Intentionality*, ed. by Marija Jankovic & Kirk Ludwig (London, UK: Routledge Press, 2018): 290-299

<sup>37</sup> Sally Haslanger, “Going On, Not in the Same Way,” in *Conceptual Engineering and Conceptual Ethics*, ed. by Alexis Burgess, Herman Cappelen, & David Plunkett (Oxford, UK: Oxford University Press, 2020), 239-241.

<sup>38</sup> Alexander Bird & Emma Tobin, “Natural Kinds,” *The Stanford Encyclopedia of Philosophy* (Spring 2018 Edition), Edward Zalta (ed.), URL = <https://plato.stanford.edu/archives/spr2018/entries/natural-kinds/>

and/or to processes that are grounded in human cognition and cooperative behavior.<sup>39</sup> The disjunction in each definition allows for multiple interpretations of the relationship of ontology to human cognition. If it is the case that there is an efficacious divide between the parts of our ontology that are mind-independent and those that are mind-dependent, then this disjunction can capture that fundamental ontological division. However, if it is the case that there is no effective way to differentiate between mind-dependent and mind-independent parts of our ontology, then we can still capture the relevancy of the natural vs. social distinction through reference to the function of these kinds in the explanations of natural and social science.

An example of the distinction between social and natural kinds is that between “electrons” as a natural kind and “money” as a social kind. The kind “electron” is a partition in the world that is useful in explanations occurring in the natural sciences, particularly in physics and chemistry. “Electron” as a kind has significant explanatory power in questions pertaining to physics and chemistry and those describing phenomena in these fields would lose a significant tool for explanation without this partition. Meanwhile, “money” is a social kind because it is dependent on the social activity of human beings and functions in social scientific explanations, particularly in economics. “Money” as a kind has significant explanatory power in questions pertaining to economics and it would be significantly more difficult to explain the phenomena of exchange without it.<sup>40</sup>

Social kinds are useful in explaining social roles and positions, as roles, and by extension, the positions that make up those roles may constitute a social kind insofar as they are explanatorily adequate for explanations of phenomena in a social structure and/or to social

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<sup>39</sup> Ásta, “Social Kinds,” 290-99.

<sup>40</sup> For a discussion of money as a social kind, see *The Construction of Social Reality* by John Searle.

scientific explanations in general.<sup>41</sup> For instance, though on some level we can describe what it means to be a mother in a particular instance without reference to the social kind of “mother,” this answer is less explanatorily robust for a large set of phenomena involving mothers than an explanation involving the social kind. Using the kind allows us to explain the behavior of those considered mothers, and the behaviors of other *toward* those considered mothers, through reference to the role that they inhabit and the relationships that they have in virtue of their position within a social structure. It would be more difficult to explain the connections between these phenomena without reference to the social kind, which adds justification to the use of the partition in explanations.<sup>42,43</sup>

Positions in a social structure and the roles that they are a part of can therefore constitute social kinds whenever reference to them is useful for providing explanations involving the social world and/or the social sciences.<sup>44</sup> Whenever a person inhabits the role of “mother,” they are both positioned within a social structure in a way that is defined by their relationship to other persons – particularly those inhabiting the “child” node – and are part of a social role constituted out of a pattern of such positions that exists within the social structure that they exist in. Through being part of this role, they are subject to permissions, prohibitions, and prescriptions that restrict and expand the behavior available to them and which can be used in explanations of their

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<sup>41</sup> Sally Haslanger, “What is a (Social) Structural Explanation?” 119.

<sup>42</sup> Note that explanatory adequacy doesn’t necessarily equate to ethical adequacy. It may be the case that referring to a social role is important for explanations of phenomena in a social context, but that we also want to revise or abolish that kind through ethical and political action. For example, it would have been difficult to explain a large set of phenomena in medieval Europe without reference to the social kind of “monarch,” but this does not ethically justify the existence of monarchs. The question of explanatory justification is distinct from the question of ethical justification.

<sup>43</sup> It should also be noted that this definition of kinds does not require a stance on whether these categories exist outside of their role in explanations, or whether such a distinction is needed. Though there is a rich history of debates and discussions on the reality of kinds both in their natural and social forms, I am not making either a realist or anti-realist argument in this thesis. Instead, I only claim that these kinds represent useful partition in our language and in the entities available to us and are efficient for explanations in certain domains

<sup>44</sup> Sally Haslanger, “What is a (Social) Structural Explanation?” 119.

behavior and responses to their behavior. It is therefore possible for all three of these concepts – social structures, social roles, and social kinds – to overlap, representing distinct dimensions of how an individual can inhabit and be affected by a social context.

### **Ontogenesis & Phylogenesis**

Now that I have defined social structure, social role, and social kind, we can discuss the concepts of ontogenesis and phylogenesis, which will be central to my model of psychiatric diagnosis. Ontogenesis and phylogenesis are both concepts from developmental and evolutionary biology. Ontogenesis refers to the development and origination of an organism, including the development of its biological characteristics from fertilization until adulthood.<sup>45</sup> Phylogenesis, meanwhile, refers to how an evolutionary clade, or a collection of organisms grouped by a common ancestor, develops and is individuated.<sup>46</sup>

These concepts can be analogically applied to social kinds and social roles.<sup>47</sup> In this context, ontogenesis is the process by which an individual comes to be identified as part of a social kind and/or social role, while phylogenesis is the process by which that kind and/or role comes about. An example of ontogenesis regarding social kinds and roles is sex assignment. Whenever an infant is born, a doctor uses its secondary sex characteristics to assign it a binary sex: male or female. Through sex assignment, the infant is placed in a social position – namely, being positioned as a “boy” or a “girl” in relation to their family and community. Inhabiting this position results in the individual being part of a pattern of similar gendered positions that correspond to a social role for that gender, including a set of associated permissions,

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<sup>45</sup> Stephen Jay Gould, *Ontogeny and Phylogeny* (Boston, MA: Belknap Press, 1985), 1-12.

<sup>46</sup> Ibid.

<sup>47</sup> For general philosophical applications of ontogeny and phylogeny, see Alan Love, “Explaining the Ontogeny of Form: Philosophical Issues,” in *A Companion to the Philosophy of Biology*, ed. by Sarkar Sahotra & Anya Plutynski (Hoboken, NJ: Blackwell Publishing, 2007): 223-247 and Joel Velasco, “Philosophy and Phylogenetics,” *Philosophy Compass* 8 (Oct. 2013), no. 10: 990-998.

prohibitions, and prescriptions that govern the behavior of persons identified as that gender. This is not a result of the intentions of the doctor, nor even of the family or community, but instead a structural result of the context in which the assignment takes place. Sex assignment is therefore an example of ontogenesis because it involves instantiating an individual as part of a social kind and social role.<sup>48</sup>

An example of phylogenesis for social kinds and roles, then, is the development of categories of disability such as autism. The biological characteristics associated with autism pre-exist the diagnosis itself, which developed in the early twentieth century through the works of clinicians such as Leo Kanner and Hans Asperger.<sup>49</sup> The development of autism as a clinical category was simultaneously the development of the social kind “autism,” as it places these previously-existing behaviors and characteristics in the context of a category that could be used in explanations and which thereby affected the behavior of both those identified as autistic and others who determined their treatment of the individual based on this identification.<sup>50</sup> Though the biological and behavioral characteristics existed prior to the origination of the kind, the kind could then be used in explanations of present, past, and future phenomena and modified the positions and roles to which one could belong. Because of this, the development of autism as a clinical category was a phylogenetic process. Once autism had developed as a kind and role, it opened the possibility for ontogenetic processes that instantiated persons as member of the kind and role. Ontogenesis requires phylogenesis as a prerequisite – a social kind and role must exist for a person to be instantiated as, and without the phylogenetic processes preceding an

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<sup>48</sup> A more in-depth discussion of gender as a social kind and its relation to sex assigned at birth can be found in Elizabeth Barnes, “Gender and Gender Terms,” *Nous* 54 (March 2019), no. 3: 704-730 and Robin Dembroff, “Real Talk on the Metaphysics of Gender,” *Philosophical Topics* 46 (Fall 2018), no. 2: 21-50.

<sup>49</sup> Stuart Murray, *Autism* (London, UK: Routledge Press, 2011), 45-52.

<sup>50</sup> For further discussion of this process in the context of looping kinds, see Ian Hacking, “Making Up People,” *London Review of Books* 28 (Aug. 2006), no. 16, accessed at: <https://www.lrb.co.uk/the-paper/v28/n16/ian-hacking/making-up-people>

ontogenetic act, there is no kind or role available. Later in this chapter and in this thesis, I will argue that the institutional processes that govern diagnostic taxonomy are phylogenetic processes, which then make possible the ontogenetic act of psychiatric diagnosis.

### **Interpellation & Ideology**

The dynamic of ontogenesis and phylogenesis allows for the development of the next two phenomena necessary for understanding psychiatric diagnosis: interpellation and ideology.

Interpellation is a concept derived from Louis Althusser, where a person is “hailed” into a social role and thereby acts in accordance with the expectations of that social role.<sup>51</sup> “Hailing” is an act by which an individual comes to recognize themselves as positioned in the social structure in a way associated with a social role. Recognition, in this context, is the process by which an individual comes to increase the salience of their belief that they inhabit a social role, either through (a) a belief that they belong to the social kind associated with that role, or (b) believing that their membership in this social kind is a significant part of others’ concept of them.<sup>52</sup>

Through recognition, a person’s membership in a social kind and role becomes a more salient part of the person’s self-concept, which then increases that belief’s guiding influence on their behavior. Through this belief’s influence on the person during the act of hailing, the person then acts in accordance with what is expected of their social role in a context.<sup>53</sup>

The classic example of interpellation, discussed by Althusser, is a police officer yelling “hey, you!” or “stop!” at a citizen, while another example, discussed by Quill Kukla, is a teacher

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<sup>51</sup> Louis Althusser, “Ideology and Ideological State Apparatuses,” in *Lenin and Philosophy and Other Essays* (New York City, NY: Monthly Review Press, 2001), 174

<sup>52</sup> The concept of recognition is derived from Hegelian philosophy. The original exposition of the concept can be found in *Phenomenology of Spirit* by Georg Hegel, though it is found in a more contemporary, analytic vein in *The Spirit of Trust* by Robert Brandom.

<sup>53</sup> Louis Althusser, “Ideology and Ideological State Apparatuses,” 174.

calling roll in a classroom.<sup>54</sup> In the former, the utterance of the cop brings to salience the role of the citizen and their relationship to the authority of the officer, so that they behave “appropriately” in relation to that authority. Likewise, in the case of the teacher, the act of calling roll brings to salience the role of the student and their relationship to the authority of the teacher. In both cases, the targets of interpellation are already part of the social role being brought to salience – the person being hailed by the officer is already a citizen, or at least positioned as subject to the authority of the officer, while the person is being hailed through the roll call is already a student. However, through interpellation, the salience of that role is increased, causing the target to act in ways that meet the behavioral expectations of that role. The person hailed by the police officer will stop because they recognize themselves as someone subject to the authority of the cop, while the student will state “here!” and behave in ways appropriate to being a student because they recognize themselves as inhabiting the role of student and being subject to the authority of the teacher. The prior existence of the social role – and the instantiation of the individual as part of that role – establishes the conditions for the person to be interpellated into that role.

This process depends not only on the existence of a social role but also on an ideological background that gives authority to the individual or institution that interpellates someone into their role and which provides explanatory justification for their role and expected behavior.<sup>55</sup> To understand what ideology is and how it functions, we must first understand the Marxist background Althusser is working from. Karl Marx argued there is a distinction between (1) the economic base, including the forces of production such as labor-power, machinery, and natural

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<sup>54</sup> The example of the police officer is found in Louis Althusser, “Ideology and Ideological State Apparatuses” while the teacher example is found in Quill Kukla, “Slurs, Interpellation, and Ideology,” *The Southern Journal of Philosophy* 56 (2018), spindle supplement: 7-32.

<sup>55</sup> Louis Althusser, “Ideology and Ideological State Apparatuses,” 142-146.

resources, and the relations of production such as the relationship between laborers and the owners of capital, and (2) the superstructure, which includes the law, state, social institutions, religion, and other cultural factors.<sup>56</sup> In this relationship, the economic base is primary, being what grounds and causally determines the superstructure, rather than vice-versa, though the superstructure still influences the development of the base.<sup>57</sup> A change in the economic base – primarily driven by the forces of production, which in their growth exceed the ability of the relations of production to sustain their development – creates a change in the superstructure that in turn regulates and reproduces the economic base. An example of this is the development of trains as a force of production. Whenever trains were developed as a mode of transportation, they demanded the construction of rail lines to facilitate them.<sup>58</sup> This meant a change not only in the relations of production – the ownership of land corresponding to a change in the ownership of labor-power – but also a change in the law, which is a part of the superstructure. Because the building of trains required large-scale access to land, the law changed to accommodate this need, giving the right of eminent domain to rail companies so they could claim land they did not have prior ownership of.<sup>59</sup> This demonstrates how a change in the forces of production resulted in a change in the legal superstructure. Many of the effects of the economic base on the superstructure, however, are more subtle.

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<sup>56</sup> Karl Marx, “Marx on the History of His Opinions – Preface from *A Contribution to the Critique of Political Economy*,” in *The Marx-Engels Reader*, ed. by Robert Tucker (New York City, NY: W.W. Norton & Co., 1978), 4-5.

<sup>57</sup> The notion of the primacy of the economic base is systematically developed in G.A. Cohen, *Karl Marx’s Theory of History* (Princeton, NJ: Princeton University Press, 2000).

<sup>58</sup> Errol Meidinger, “The ‘Public Uses’ of Eminent Domain: History and Policy,” *Environmental Law* 11 (Spring 1981), no. 3: 1-66.

<sup>59</sup> *Ibid.*



Ideology, according to most Marxists, is part of the superstructure, being a secondary causal result of the economic base.<sup>60</sup> Ideology is the framework of beliefs that guide interactions in a social structure, with those beliefs providing explanations for one's social position, social role, and corresponding behavioral expectations.<sup>61</sup> Ideology is not necessarily a set of false beliefs, but instead beliefs about who has which position in a social structure and the beliefs that guarantee the reproduction of those positions over time.<sup>62</sup> For example, in a society that includes the authority of a priesthood, ideological beliefs include not only those that determine who is a priest and how one becomes a priest, but also those that guarantee the authority of priests and their ability to perpetuate this authority. Going back to the example of the police officer and the teacher in interpellation, ideology includes the set of beliefs that reinforce the authority of both the officer and the teacher, that determine who holds these positions and how one comes to gain these positions, and what acts they can accomplish through their authority, such as what behavior they are hailed into through interpellation. These ideological beliefs reinforce the authority of the person who performs the interpellative act and allows the target to recognize that they are subject to this authority and are the target of the act. Without this ideological background, there is nothing that guarantees the target of the utterance will recognize that they are subject to the authority of the speaker and therefore that they must perform the behavioral expectations associated with their social role.

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<sup>60</sup> This conception of ideology is originally found in *The German Ideology* by Karl Marx & Friedrich Engels but was further developed by Louis Althusser in *Lenin and Philosophy and Other Essays*.

<sup>61</sup> Sally Haslanger, *Ideology in Practice: What Does Ideology Do? (The Aquinas Lecture, 2021)* (Milwaukee, WI: Marquette University Press, 2021), 2.

<sup>62</sup> Whether or not ideologies must include false beliefs is debated, as discussed in Sally Haslanger, *Ideology in Practice*. However, as indicated by Althusser in "Ideology and Ideological State Apparatuses," it is not a requirement of ideology in Marxist thought that ideological beliefs be false – instead, what matters is that they function to reproduce social positions (or, in Althusser's original formulation, the relations of production). Though I do not consider this thesis a Marxist project, in utilizing Althusser's concept of interpellation, I also incorporate his neutral conception of ideology.

Interpellation and ontogenesis are closely related in that ontogenesis is required for interpellation and interpellation reinforces and reproduces ontogenesis through repeating acts that increase the salience of an individual's social role. This can be seen by returning to the case of sex assignment. As stated above, sex assignment is an ontogenetic process. This process, however, also allows for interpellation later in life. For instance, bathroom signs act as non-spoken interpellative acts, where the authoritative "speaker" of the act is both the owner of the bathroom and the contextual authority of the business owner and state to enforce gendered bathroom divisions.<sup>63</sup> Gendered bathroom signs are interpellative because they hail people into recognizing their social position and role as being one of two binary genders (or as being atypical of both), causing the individual to go into the bathroom associated with that position and role. Even those who consider themselves outside the gender binary can be interpellated to recognize their atypical status through the sign, bringing to salience their inability to meet the aesthetic or behavioral expectations of the available social roles, likely causing distress or a lack of safe ways to act. This can only occur given the background context of sex assignment – sex assignment results in ontogenesis, allowing for interpellative acts that bring to salience the initial assignment. These concepts of ontogenesis and interpellation are therefore dependent on one another, which will become clear as we further analyze psychiatric diagnosis.

### **Modeling Psychiatric Diagnosis**

I will now offer a theory of psychiatric diagnosis as ontogenesis and interpellation – more precisely, a speech act that illocutionarily instantiates its target as a member of a social kind and a corresponding social role and which perlocutionarily interpellates its target into the behavior associated with that social role.

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<sup>63</sup> Quill Kukla, "Slurs, Interpellation, and Ideology," 15-16.

First, I should note that I do not intend for this model to replace the other functions of psychiatric diagnosis. The intended function of diagnosis is to utilize external symptoms to identify a syndrome, correlated to a known or unknown underlying dysfunction in a bodily system, to then determine the appropriate treatment. Psychiatric diagnosis operating as ontogenesis and interpellation does not undermine this intended function and the two are not in conflict. It is both the case that psychiatrists seek to use diagnosis to treat patients (and that they are successful in doing so) and that the unintended consequence of this diagnosis is ontogenesis and interpellation. The latter is not a result of the intentions of the clinician, but of the social context in which the diagnosis takes place. In stating this, I am assuming an externalist understanding of speech acts, whereby the success of a speech act is determined by external felicity conditions, rather than the intentions of the speaker. I am also assuming that multiple illocutions can result from the same locution so that the intended descriptive speech act of the psychiatrist can succeed simultaneously with the unintended ontogenetic speech act.

It should also be noted, given the nature of psychiatric diagnosis, that the kind to which a person is assigned may be both a natural and social kind.<sup>64</sup> A diagnosis may reflect a partition in the function of the body that is natural, rather than social; however, it is also social insofar diagnosis places the patient in a social kind and role that is recognized by others outside of the doctor-patient relationship, modifying not only the behavior of the patient but also their treatment by others. Someone who has been identified as having a psychiatric illness is treated differently than someone who has not been so identified and is placed in a relationship to others that they would not have had prior to the diagnosis, forming the basis of their new social position

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<sup>64</sup> In this chapter I will not make a claim as to whether these natural and social kinds are fully separate or whether they constitute a combined natural-social kind. However, the interpellative, ontogenetic process of psychiatric diagnosis applies in both cases.

and social role. This makes psychiatric diagnosis an ontogenetic act. For example, though someone who has autistic characteristics may have been treated differently prior to diagnosis because of others identifying these traits consciously or unconsciously as being indicative of neurological difference, it is the act of diagnosis that places the person in an ideologically justified relationship to clinicians, caretakers, and institutions and which thereby results in a new set of permissions, prohibitions, and prescriptions for their future behavior. Therefore, being subject to an ASD diagnosis is an ontogenetic act, not only describing the developmental disability that they exemplify, but also placing them in a social position and role and modifying the behavioral expectations attached to them.

Psychiatric diagnosis is not only ontogenetic, but also interpellative – it hails the diagnosed person into recognizing their social role and causes them to act in accordance with the behavioral expectations of that role. This is accomplished through ideological beliefs that justify this authority and the reinforcement of this authority through both state regulation and social pressure. Once a person recognizes that they are subject to the diagnosis given by the psychiatrist, they can then incorporate this identification into their self-concept, including both their membership in the corresponding social kind and the behavioral expectations attached to that kind through its associated social role. This creates the grounds for them to be interpellated into behavior appropriate to that kind and role. This may also be accomplished, however, through appropriate interlocutors rather than the patient themselves. In cases where the patient is either unable to recognize the validity of the diagnosis, or where they consciously reject it, it is still possible that others are aware of the diagnosis, consider it valid, and incorporate it into their self-concept of the diagnosed individual, modifying their treatment of them. What matters in either case is that the psychiatric diagnosis has the illocutionary effect of instantiating the patient

as a member of a social kind and role, modifying the patient's behavior and/or others' behavior toward them, and the perlocutionary effect of allowing for later acts of interpellation.

We can again take the example of someone diagnosed with ASD. In most cases, a person who diagnosed with ASD will recognize they are subject to the authority of the clinician, at least insofar as they believe that others will consider it a valid diagnosis and thereby modify their treatment of them. This is reinforced through ideological beliefs that justify the authority of the clinician and the behavioral expectations attached to autistic persons.<sup>65</sup> In cases where a person is diagnosed with autism but does not themselves recognize the validity of the diagnosis, whether through conscious rejection or cognitive differences that make such recognition impossible, interlocutors such as family and caretakers may know of the diagnosis and consider it valid, thereby modifying their treatment of the diagnosed individual and effectively placing them in the corresponding social position, kind, and role even without their knowledge or assent. In the former case, the patient themselves may then be interpellated into acting in ways appropriate to a person with autism, such as treating clinicians and caretakers in authority-granting ways. In the latter case, though the patient themselves may not be the subject of interpellation, the appropriate interlocutors can be.<sup>66</sup>

Psychiatric diagnosis is therefore both ontogenetic and interpellative. In the next chapter, I will defend the argument that psychiatric diagnosis constitutes a speech act – particularly, a verdictive or declarative. Then, in later chapters, I will expand on the concepts of social kinds, social roles, and social structures, provide a developed theory of psychiatric diagnosis as

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<sup>65</sup> Note that this can occur even if the patient does not agree that persons with autism *should* be treated in ways associated with their social role. What matters instead is the recognition that others will attach those expectations to them and that they are thereby incentivized to act in ways that are distinct from non-autistic persons.

<sup>66</sup> The potentially results of such interpellation will be discussed in chapter five of this thesis.

illocutionarily ontogenetic and perlocutionarily interpellative, and finally examine a case where such ontogenesis and interpellation can result in injustice and oppression.

## **Ch. 2: Psychiatric Diagnosis as a Speech Act**

I will now defend the contention that psychiatric diagnosis constitutes a kind of speech act. A speech act is a sign or utterance that constitutes an action through its use, such as asserting, testifying, promising, commanding, questioning, declaring, etc. I will argue in this chapter that psychiatric diagnosis can be understood as either a verdictive or a Searlian declarative, with their providing the grounds for it to be an ontogenetic, interpellative speech act. A verdictive occurs whenever a speaker renders a decision on an unresolved question or event and a Searlian declarative is where a speaker instantiates a state of affairs through declaring it so. I will also argue that in psychiatric diagnosis, ontogenesis can best be understood as part of the illocutionary force of the utterance, while interpellation is a perlocutionary effect. To demonstrate these points, I will first analyze the model of speech acts offered by J.L. Austin and John Searle, including differences between locutionary, illocutionary, and perlocutionary acts, the felicity or satisfaction conditions that each philosopher offers, and the differing taxonomies of the two authors. I will then defend the thesis that psychiatric diagnosis is a speech act through demonstrating how it meets the requirements dictated by Austin and Searle. Finally, I will place psychiatric diagnosis in Searle's and Vanderveken's taxonomy of speech acts, showing how ontogenesis and interpellation can be understood through the different dimensions of this taxonomy.

### **What Are Speech Acts?**

I will begin by defining what a speech act is. A speech act is any sign or utterance – verbal, written, gestural, or silent – through which a speaker performs an action. Some speech acts are explicit performances, such as in the promise performed in “I promise to pay you back

next Wednesday,” which commits the speaker to future action.<sup>67</sup> However, this explicit formation is not required, and a speech act may be performed through any utterance or sign so long as a convention exists to constitute the act and is mutually identifiable by partners to the act. To understand why this is the case, and how speech acts are constituted, we must first look at the theories of J.L. Austin and John Searle.

J.L. Austin divides speech acts into three parts: (1) the locutionary act, (2) the illocutionary act, and (3) the perlocutionary act. The locutionary act is the utterance or signs that acts as the medium for the act.<sup>68</sup> For instance, if a person states, “I will pay you back on Wednesday,” the locutionary act is the lexical item, “I will pay you back on Wednesday,” or the collected sounds that correspond to this lexical item. A locution may also be performed through written signs, gestures, or any other medium that carries meaning. What matters for the locutionary act is that it is in a form that is intelligible to the target, meaning that it is grammatically well-formed, occurs in a language known to the target, and occurs in a context that is appropriate and is conventionally associated with the speech act. The illocutionary act is the action performed through the locution, such as asserting, betting, apologizing, questioning, etc.<sup>69</sup> When someone says, “I will pay you back on Wednesday,” the illocutionary act is that of promising, or committing the speaker to a future behavior. This may also be called the illocutionary force of the act. The perlocutionary act, then, is the effect(s) produced by the utterance that are not constituted by the utterance itself.<sup>70</sup> For example, in stating, “I will pay you back on Wednesday,” the speaker may produce multiple perlocutionary effects such as producing a mental state in the hearer or causing the hearer to forego punitive behavior. The

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<sup>67</sup> J.L. Austin, *How to Do Things with Words* (Cambridge, MA: Harvard University Press, 1975), 61-2.

<sup>68</sup> *Ibid.*, 94.

<sup>69</sup> *Ibid.*, 98.

<sup>70</sup> *Ibid.*, 102.



target accepting the promise and leaving to come back on Wednesday to collect the debt are likely intended perlocutionary effects of the utterance.

Austin also provides felicity conditions for the illocutionary force of a speech act to succeed and established a limited taxonomy of speech acts. Felicity here refers to whether a speaker succeeds in performing an illocution. For example, a felicitous utterance of, “I will pay you back on Wednesday,” constitutes a promise, but an infelicitous use of the utterance will either not constitute a promise at all or will only be partially or insincerely performed. According to John Searle, the action the speaker seeks to perform through the utterance is the illocutionary aim of the speech act.<sup>71</sup> Therefore, a speech act is uttered felicitously only if its illocutionary aim is met. According to Austin, there are two types of infelicity: (1) misfires and (2) abuses. A misfire occurs whenever the requisite conditions do not obtain for successfully performing an illocutionary act.<sup>72</sup> These conditions may include the proper locution being used, the speaker having the requisite authority, and/or the hearer having the requisite relationship to the speaker. In misfires, no illocutionary act is performed at all. So, for example, if an attempt to promise misfires, then no promise has been made and there will be no expectation on the part of an interlocutor of a promise being kept. However, in abuse, the illocutionary act is performed, but without the speaker having the requisite mental state to follow through with the act, such as in making an insincere promise.<sup>73</sup> What this mental state must be, or whether there is a requisite mental state at all, depends on the illocution being attempted. In the case of abuse, the illocutionary act is performed, but it is unable to be completed and there is no sincere intention on the part of the speaker to fulfill the behavioral requirements of the act. In the case of someone

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<sup>71</sup> John Searle, “A Taxonomy of Illocutionary Acts,” in *Language, Mind, and Knowledge*, ed. by Keith Gunderson (Minneapolis, MN: University of Minnesota Press, 1975), 346.

<sup>72</sup> J.L. Austin, *How to Do Things with Words*, 16.

<sup>73</sup> Ibid.

saying, “I will pay you back on Wednesday,” for example, a misfire might occur if the speaker does not owe anything to the hearer, meaning that no intelligible promise has been made and there is no expectation on the part of the hearer of the speaker undertaking later actions. However, if the speaker does owe money to the target, but states, “I will pay you back on Wednesday” insincerely, then there is abuse – a promise is made but there is no intention on the part of the speaker to fulfill their part of the illocution.

Austin’s taxonomy distinguishes between five kinds of illocutionary acts: (1) verdictives, (2) exercitives, (3) behabitives, (4) commissives, and (5) expositives. I will focus on verdictives here, as I will argue in this chapter that diagnosis can be understood as a verdictive. In Austin’s taxonomy, verdictives refer to those speech acts where the speaker renders a decision on an uncertain question or event.<sup>74</sup> For example, if a judge finds a defendant guilty in court, they utter a verdictive, which provides a verdict, or decision, on the guilt or innocence of the target. The felicity conditions in this case will govern whether there is an appropriate question or event that must be decided on by a relevant authority, whether the speaker has the requisite authority to make such a verdict, and whether the context is appropriate for the act to be intelligible to interlocutors.

John Searle’s model of speech acts is similar to Austin’s, but his taxonomy is distinct. Searle offers two taxonomies of speech acts, one in “A Taxonomy of Illocutionary Acts” and another with Daniel Vanderveken in *Foundations of Illocutionary Logic*. In “A Taxonomy of Illocutionary Acts,” Searle divides speech acts into (1) representatives, (2) directives, (3) commissives, (4) expressives, and (5) declaratives. Each of these is defined using direction of fit,

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<sup>74</sup> Ibid., 153.

which Searle takes from G.E.M. Anscombe.<sup>75</sup> According to Searle, utterances can have either a word-to-world or world-to-word direction of fit.<sup>76</sup> In word-to-world direction of fit, the utterance conforms to a pre-existing state of the world.<sup>77</sup> In world-to-word direction of fit, however, the utterance modifies the world to bring it in line with the proposition or illocution performed by the utterance.<sup>78</sup>

I will use direction of fit to analyze Searlian declaratives, which I contend best fits psychiatric diagnosis in Searle's taxonomy. Declaratives have both world-to-word and word-to-world direction of fit.<sup>79</sup> Declaratives bring the proposition being expressed and the external world into alignment so that the proposition reflects the world and the world the proposition. Declaratives do this by bringing about a state of affairs.<sup>80</sup> For example, as Searle notes, when an employee states, "I resign," they cause a state of affairs to obtain in the world – it becomes a fact that they have resigned and therefore do not have employment. This means that the world is changed to conform to the proposition expressed by the utterance, and, through this change, the proposition expresses a true fact about the world.<sup>81</sup>

Searle and Vanderveken's later taxonomy introduces a septuple of characteristics to distinguish different kinds of speech acts. This septuple includes (1) the illocutionary point, (2) the degree of strength of the illocutionary point, (3) the mode of achievement, (4) the propositional content conditions, (5) the preparatory conditions, (6) the sincerity conditions, and (7) the degree of strength of the sincerity conditions. Rather than being defined by direction of

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<sup>75</sup> Anscombe did not use the term "direction of fit." However, the concept originates in her work and Searle uses an example from G.E.M. Anscombe, *Intention* (Cambridge, MA: Harvard University Press, 2000) to defend his view.

<sup>76</sup> John Searle, "A Taxonomy of Illocutionary Acts," 346-7.

<sup>77</sup> Ibid.

<sup>78</sup> Ibid.

<sup>79</sup> Ibid.

<sup>80</sup> Ibid., 358.

<sup>81</sup> Ibid.

fit, each class of speech acts is differentiated by their septuple of characteristics, with two speech acts overlapping only if they share the same septuple.<sup>82</sup> The illocutionary point of a speech act, as discussed earlier, is the act the speech act is deployed to perform, such as promising or making a wager.<sup>83</sup> The degree of strength of the illocutionary point is the intensity or force with which the action is accomplished, adding degrees of emphasis that modify the illocutionary point.<sup>84</sup> For example, a request and a command both have the illocutionary point of directing the behavior of a target, but a command has a higher degree of strength than a request and is therefore performed with more force or emphasis. The mode of achievement is a felicity condition for how an act must be performed to constitute the given action, such as requiring the assertion of authority.<sup>85</sup> Propositional content conditions determine what the proposition must express for the illocutionary point to succeed, such as a promise requiring the expression of a commitment to perform a future behavior.<sup>86</sup> Preparatory conditions are the requirements for an illocution to not misfire.<sup>87</sup> For example, anyone may utter the words, “I hereby pronounce you husband and wife,” but this utterance does not have the illocutionary force of instantiating a marriage unless the speaker has the requisite authority to do, such as being a licensed minister or judge. Finally, sincerity conditions are the mental states that must obtain in the speaker for the illocution to succeed, such as having the intention to pay someone back in the case of, “I will pay you back on Wednesday,” with the degree of strength of the sincerity condition being the intensity or force associated with the mental state.<sup>88</sup> According to Searle and Vanderveken, we

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<sup>82</sup> John Searle & Daniel Vanderveken, *Foundations of Illocutionary Logic* (Cambridge, MA: Cambridge University Press, 1979), 14.

<sup>83</sup> Ibid.

<sup>84</sup> Ibid., 15.

<sup>85</sup> Ibid.

<sup>86</sup> Ibid., 16.

<sup>87</sup> Ibid., 17.

<sup>88</sup> Ibid., 18.

can construct a taxonomy of speech acts based on these characteristics. In what follows, I will use both Austin's and Searle's taxonomies to describe psychiatric diagnosis, considering it as either an Austinian verdictive or a Searlian declarative. I will also consider how it can be modeled under Searle and Vanderveken's septuple system.

### **Diagnosis as a Speech Act**

I will now use the above analysis of speech acts to defend a view of psychiatric diagnosis as a speech act. In doing so, I will argue that diagnosis can be understood either as an Austinian verdictive or a Searlian declarative. Each of these can potentially be described in terms of ontogenesis and interpellation, where ontogenesis is part of the illocutionary force and interpellation is a perlocutionary effect.

I will start by analyzing psychiatric diagnosis as a verdictive. As stated earlier, a verdictive is a speech act where the speaker provides a decision, or renders a verdict, on an unresolved question or event, such as in determining the guilt or innocence of a defendant in a trial.<sup>89</sup> In the case of psychiatric diagnosis, the unresolved question is what condition a patient's symptoms indicate. Prior to diagnosis, the resolution to this question is unknown. However, through diagnosis, the clinician uses their authority to render a verdict on the patient's condition, identifying the symptoms of the patient as indicative of a given pathology. This instantiates the patient as an instance of the kind that corresponds to this pathology. Like in the judge case, where the authority of the judge allows them to render a verdict on whether a defendant is guilty based on the facts of the case, the authority of the clinician in diagnosis allows them to render a verdict on the pathology based on the symptoms of the patient. This verdict is simultaneously an act of ontogenesis as, through deciding on the pathology exemplified by the patient, the clinician

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<sup>89</sup> J.L. Austin, *How to Do Things with Words*, 153.

also instantiates the patient as part of the associated social kind. To see this, we can consider the case of a person coming to a psychiatrist with symptoms of lethargy, reduced mood, and trouble sleeping. The clinician considers these symptoms and uses tools to determine the facts surrounding the patient's condition. After determining these facts, the clinician then renders a decision on what pathology the symptoms correspond to, such as major depressive disorder (MDD). The symptoms therefore offer a problem to the clinician which the diagnosis resolves. Notably, unlike in the case of an exercitive, the speaker can be wrong in their verdict. For instance, it is possible for a diagnosis to be revised by a further diagnosis if the latter diagnosis meets the same felicity conditions as the prior act and better fits the symptoms displayed by the patient. A person may be diagnosed with MDD at time  $t_1$  but be diagnosed with bipolar II disorder at time  $t_2$  based on the same symptoms and there is a relevant sense in which the latter diagnosis may be more accurate than the former diagnosis. If the latter diagnosis better approximates the symptoms of the patient, then it can be assumed that the earlier clinician, though they provided a legitimate verdict, were wrong in their decision.

We can also understand psychiatric diagnosis as a Searlian declarative, however. A Searlian declarative is a speech act that instantiates a state of affairs in the world. A Searlian declarative has both world-to-word and word-to-world fit in that the utterance causes the world to conform to the proposition expressed by the utterance, while the proposition is also modified to conform to the facts of the world.<sup>90</sup> The example I used earlier for this is an employee stating "I resign" to their employer. This is a declarative because it instantiates a state of affairs – it renders the employee's employment void. Because of this, the world is made to conform to the resignation and the resignation comes to correspond to the state of the world. Psychiatric

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<sup>90</sup> John Searle, "A Taxonomy of Illocutionary Acts," 358.

diagnosis can be understood as a Searlian declaration insofar as it instantiates a patient as an instance of a diagnosis. Whenever a person is diagnosed with autism spectrum disorder (ASD), for instance, the speaker of the utterance directly instantiates them as a member of the social kind that their diagnosis corresponds to. Though we may accept that there is a sense in which a person prior to diagnosis has ASD, it is the diagnosis that constitutes them as part of the kind associated with ASD. Likewise, in the prior case of the individual coming to a clinic with lethargy, reduced mood, and trouble sleeping, the clinician's diagnosis of major depressive disorder may be understood instead as instantiating the patient as an instance of the kind "major depression," with the fact of this membership being constituted by the utterance itself.

The relevant distinction here between diagnosis as a verdictive and diagnosis as a Searlian declarative is whether a pre-existing fact is being decided on by the speaker, and therefore whether a speaker can be mistaken in making a declaration. In the case of the verdictive, there is a fact of the matter that is currently unresolved, but which is resolved by the verdict rendered by the speaker. This allows the possibility that such verdicts may be mistaken, insofar as their verdict does not conform to the facts of the matter. So, if someone is diagnosed with major depression at time  $t_1$ , but diagnosed as bipolar at time  $t_2$ , then there is a relevant sense in which the diagnosis at  $t_2$  may be more accurate than the diagnosis at  $t_1$ . In the former case, the diagnosis may not adequately conform to the facts of the matter, determined by the symptoms presented by the patient. If the patient presents symptoms more in line with bipolar disorder than major depression, it is a fact that the patient's symptoms conform more to bipolar than major depression and that the clinician at  $t_1$  is mistaken as to the social kind the target belongs to. However, in the case of a Searlian declarative, a state of affairs is instantiated by the speaker, rather than the characteristics of an undecided but pre-existing state of affairs being fallibly

determined by the speaker. In the case where a diagnosis is understood as a Searlian declarative, a clinician diagnosing a target as having major depression instantiates the fact that the target has the diagnosis of major depression. By making the declaration that the target has major depression, it becomes a fact that the target is diagnosed with major depression. Verdictives track decisions rendered on the facts of a case, while Searlian declaratives instantiate the fact of a target's kind membership.

Now that I've considered how psychiatric diagnosis might be understood as both a verdictive and a declarative, I want to analyze how ontogenesis and interpellation can be explained as illocutionary and perlocutionary, respectively. As stated earlier, in the act of psychiatric diagnosis, ontogenesis is part of the illocutionary force of the act, while interpellation is perlocutionary. This is because ontogenesis is the act constituted by the utterance itself, while interpellation is the effect of that utterance on the target. Notably, this perlocutionary effect may not be an intended part of the speech act by the clinician. Though the clinician does seek to categorize the symptoms offered by the patient, and therefore does intentionally participate at least to some degree in ontogenesis, no intention is required on the part of the clinician for the act to result in interpellation. It is ontogenesis that is constituted by the utterance, but it is interpellation that is later produced by it.

Since ontogenesis can be understood as the illocutionary force of a diagnostic act, it is also subject to the different preparatory conditions that constitute the felicity or infelicity of the act. For instance, a speaker meets the preparatory conditions for diagnosis if and only if they have the requisite illocutionary authority, such as professional licensure. Interpellation does not require this authority insofar as the target recognizes themselves as an instance of a kind and therefore as being subject to the expectations associated with that kind. However, interpellation



is a perlocutionary effect of ontogenesis because interpellation occurs after the illocution, with ontogenesis instantiating a state of affairs that makes this effect possible. Interpellation can only occur in the case where the target recognizes themselves as being subject to interpellation, and therefore there must first be a recognized act of ontogenesis for the perlocutionary effect of interpellation to succeed. Psychiatric diagnosis has the illocutionary force of instantiating its target as a member of a social kind, and therefore allows and directly inspires the target to recognize themselves as being part of that kind and so be interpellated.

We may also understand this distinction between the illocutionary force of ontogenesis and the perlocutionary effect of interpellation through the conversational scoreboard and common ground. The conversational scoreboard of a language game records the illocutions that are made within a game, while the common ground includes all propositions shared by interlocuters in the game.<sup>91</sup><sup>92</sup> Ontogenesis is a precondition for interpellation, in the sense that the target of interpellation must recognize that it is part of the common ground that they are a member of the social kind that is hailed by the interpellative utterance. For example, for a target to recognize that they are expected to act according to the behavioral expectations of someone diagnosed with ASD, then it must first be the case that their diagnosis with ASD is part of the common ground of the context in which interpellation is taking place. Interpellation does not involve a change in the common ground but is instead a psychological and behavioral result of the common ground being available to the target. Ontogenesis may also be understood in terms of the common ground, insofar as ontogenesis adds the proposition “ $x$  is an instance of  $K$ ” to the common ground, where  $x$  is a target and  $K$  is a diagnostic kind. Interpellation can then result from this addition because it allows the target to both recognize themselves as an instance of  $K$

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<sup>91</sup> David Lewis, “Scorekeeping in a Language Game,” *Journal of Philosophical Logic* 8 (1979), no. 1: 345.

<sup>92</sup> Robert Stalnaker, “Common Ground,” *Linguistics and Philosophy* 25 (2002), no. 5-6: 701.

and to recognize that others also identify them as *K*, modifying their behavior to meet the expectations associated with *K*. This process can be understood as occurring in these steps: (1) the patient, *P*, exhibits symptoms, *S*, (2) the clinician, *C*, recognizes that *S* is best described as a sub-set of symptoms associated with a given psychiatric kind *K*, (3) the clinician diagnoses *P* as *K*, instantiating *P* as an instance of *K*, (4) *P* recognizes this diagnosis as legitimate and so introduces the proposition “*P* is a member of *K*” into the common ground of the conversation, (5) *P* recognizes that there is a set of behavioral expectations, *B*, in the common ground that are expected of any member of *K*, and (6) since *P* recognizes themselves as *K*, *P* modifies their behavior to conform to *B*. In this case, (1)-(4) describe the illocutionary force of diagnosis as ontogenesis, while (4)-(6) describe the perlocutionary effect of diagnosis as interpellation. Step (4) is shared between the illocutionary force and the perlocutionary effect, as it functions in both processes.

We can see this in the example of autism spectrum disorder. If a psychiatrist diagnoses someone with ASD, then at minimum the clinician must be committed to the proposition that the target is an example, or instance, of a person with ASD. This proposition is then added to the common ground and is theoretically shared by all interlocutors in the language game. The speaker themselves does not need to be committed to the patient being part of any social role or agree to any expectations associated with that role for interpellation to be a perlocutionary result. This is because the diagnosis conventionally links the person so diagnosed with certain expectations, which the patient can recognize as now applying to them. The ontogenetic act of instantiating someone as an instance of a person with ASD only has the effect of marking the target as having ASD and commits the speaker to the proposition that the target is an instance of that kind. However, the perlocutionary effect of interpellation associated with diagnosis arises

not from the intentions or commitments of the clinician, but the individual and social associations that the target has with that kind, and what expectations the target recognizes that other persons in their society have of members of that kind.

### **The Illocutionary Logic of Psychiatric Diagnosis**

I will now defend the thesis that psychiatric diagnosis constitutes a speech act through the septuple system offered by John Searle and Daniel Vanderveken. In doing this, I will focus on (1), (3)-(4) and (6) of Searle and Vanderveken's septuple, namely, the illocutionary point, the mode of achievement, the propositional content conditions, and the sincerity conditions. Though there may be unique degrees of strength for psychiatric diagnosis, this possibility will not be analyzed in this chapter. Likewise, I will not analyze the preparatory conditions in this chapter as many of the requirements for a psychiatric diagnosis to not misfire are equivalent to the requirements described by the mode of achievement, propositional content conditions, and sincerity conditions.

First, we can understand the illocutionary point of a diagnostic speech act as categorizing a patient as exhibiting a psychiatric condition for the sake of therapeutic intervention. The psychiatric profession is organized around the *Diagnostic and Statistical Manual*, which provides a taxonomy of different psychiatric conditions to which the symptoms of patients may conform. The function of a psychiatrist is to use this taxonomy to determine what therapeutic intervention is most appropriate to the symptoms exhibited by the patient, using the *DSM* to connect these symptoms to a diagnostic category that indicates the applicability of these interventions. This indicates the illocutionary point of psychiatric diagnosis – what action a speaker intends to perform through diagnosis. Since the function of a diagnostic category is to

indicate what therapeutic interventions are most appropriate for a set of symptoms, the illocutionary point of diagnosis is the categorization of the patient according to their symptoms.

The mode of achievement is therefore determined by the legal and institutional restrictions placed on psychiatric diagnosis, as it affects the authority of the clinician to treat the patient. For a clinician to make a psychiatric diagnosis, they must have the requisite authority gained through clinical licensure, the requirements of which are determined (in the United States) by the American Board of Psychiatry and Neurology, in conjunction with legal restrictions prescribed by the state. The function of these requirements is to regulate who has the authority to make psychiatric diagnoses. Because of this, relevant social institutions like the law and medical establishments will not recognize diagnoses as legitimate if they do not meet these conditions. Any psychiatric diagnosis that does not meet this mode of achievement therefore fails to meet its felicity conditions and the speaker fails in making a diagnosis.

The *DSM* then governs the propositional content conditions of psychiatric diagnosis because it restricts what categories are available to the clinician to legitimately diagnose a patient with. Whenever a clinician makes a diagnosis, they express a proposition equivalent to “the patient, *P*, exhibits a set of symptoms, *S*, best categorized as an instance of the diagnostic kind, *D*.” In this proposition, the legitimacy of any given *S* or *D* in meeting the content conditions for diagnosis is restricted by the *DSM*. *D* must correspond to a given diagnostic kind within the set of available kinds provided by the *DSM* and *S* must both (a) correspond to the set of symptoms exhibited by *P* and (b) at minimum correspond to a sub-set of the symptoms associated with *D* in the *DSM*. So, for instance, for a clinician to succeed in diagnosing a patient with ASD, it must be the case that (a) ASD is within the available diagnostic kinds in the *DSM*, (b) the patient must exhibit certain symptoms, and (c) these symptoms must correspond to a sub-set of the symptoms

listed as possibilities for ASD in the *DSM*. Without meeting these conditions, the utterance of the clinician does not have the appropriate propositional content to count as a psychiatric diagnosis.

A final dimension in Searle and Vanderveken's septuple that psychiatric diagnosis differs from other speech acts along is in its sincerity conditions. The sincerity conditions of psychiatric diagnosis are determined by the illocutionary point of the speech act – namely, the mental state the speaker must have to make a successful diagnosis is governed by what must obtain for diagnosis to be used for treatment. A clinician must intend to make therapeutic interventions appropriate to the patient's diagnostic kind. Without this intention, the illocutionary point of diagnosis cannot obtain, as there are no interventions being taken because of the diagnosis, and therefore the patient is not *treated as* being diagnosed. This is not a restriction on whether the clinician *believes* the patient to exhibit symptoms of the diagnosis, nor on whether the clinician goes through with treating the patient. All that is required is that the clinician is making this diagnosis with the intention that this result in therapeutic interventions appropriate to the diagnostic kind of the patient. For instance, for a psychiatrist to successfully diagnose a patient with bipolar disorder, the mental state of the doctor must be that they intend to treat the patient with interventions appropriate to bipolar disorder, such as mood stabilizers. Without this intention, there is no clinical function to the diagnosis and so the utterance does not meet the illocutionary point of diagnosis, as the speaker does not intend to perform actions appropriate to the role of a psychiatrist. Even if the speaker has doubts about the validity of the diagnosis or they do not ultimately make interventions appropriate to bipolar disorder, the diagnosis succeeds because it was made with the intention to fulfill the illocutionary point of diagnosis as a speech act.

Through these characteristics, we can understand psychiatric diagnosis as a unique speech act, which differs from other speech acts along many dimensions. In future chapters, these conditions will be important in explaining the social ontological effects of diagnosis, as the requirements for diagnosis as a speech act are tied to the metaphysical results of the utterance and its ontological context.

### **Conclusion**

I have now provided adequate grounds for the claim that psychiatric diagnosis is a speech act that can be understood in terms of either an Austinian verdictive or a Searlian declarative. Likewise, I have shown that ontogenesis is part of its illocutionary force, and that interpellation is a perlocutionary effect. I have also demonstrated, using Searle and Vanderveken's illocutionary logic, that diagnosis constitutes a unique speech act along different dimensions. In subsequent chapters, I will use this foundation to move from philosophy of language to social ontology, focusing on how acts of diagnosis contribute to the construction and reproduction of social categories.

### **Ch. 3: Social Context & Ideology**

Ontogenesis and interpellation are only possible given a social context that (1) provides a taxonomy of social kinds to which individuals may belong, (2) governs the behavior and treatment of those kinds through implicit or explicit norms or rules, and (3) makes it possible to recognize that one has been assigned a kind and that one is governed by the norms associated with that kind. This is a result of the definitions I have offered for ontogenesis and interpellation. Because ontogenesis is defined as the instantiation of a target as a member of a social kind, there must be a taxonomy of social kinds to which a target can belong. Likewise, since interpellation means hailing a member of a social kind into norms and behavior associated with that kind, there must be a connection between kind membership and behavior, and the identification of members of a social kind must be public enough to allow for those members to recognize themselves as members. Because of these conditions, before analyzing ontogenesis and interpellation directly, I will now analyze the social context that allows ontogenesis and interpellation to function. In doing this, I will discuss the concepts of social structure, social practices, social roles, social kinds, and ideology.

#### **Social Structure, Social Practices, & Social Kinds**

In considering the three preconditions for ontogenesis and interpellation listed above – that there must be a social context that (1) provides a taxonomy of social kinds, (2) regulates the behavior associated with those kinds, and (3) makes possible recognition of one’s membership in a kind, I must first consider the elements of a social context, namely, (a) a social structure, (b) social practices, and (c) social kinds. In defining these terms, I will primarily be drawing on the work of Sally Haslanger, who argues that social structures are constituted by networks of social

practices, which form as responses to coordination problems involving valued or disvalued societal resources, and that social kinds are to be understood in the context of these structures.

I will first analyze social structures in terms of social practices. In a general sense, a social structure can be understood as the totality of social relations and institutions that are a part of a given society.<sup>93</sup> However, this definition provides us little in terms of how these structures are formed, what they are constituted out of, or how they function. Instead, I will utilize the definition of a social structure offered by Haslanger. According to Haslanger, a social structure is a network of relations between individuals, groups, and institutions, constituted out of social practices that orient these groups to one another and to the resources available in society, and which both enables and constrains the actions of individuals and groups.<sup>94</sup> What matters most here for this definition is the role of social practices and how these practices fix individuals and groups into social networks as nodes oriented towards one another by these practices, with these nodes being constructed through coordination problems around valued and disvalued resources and being defined through their relationships to other nodes.

Haslanger states that social practices "...are sites where autonomy is exercised, but also constrained, where goods are created and shared (or not)..."<sup>95</sup> More specifically, Haslanger characterizes social practices in terms of three traits: (1) that "[p]ractices are a site of socially organized agency... where individual agency is enabled and constrained by social factors...", (2) that "[p]ractices produce, distribute, and organize, things taken to have... value... [or] disvalue... call[ed]... resources...", and (3) that "[p]ractices are, in some sense, 'up to us,' so are

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<sup>93</sup> As I will discuss later in the section on ideology, this definition of a social structure is derived from Antonio Gramsci and Georges Sorel's notions of a "historic bloc," meaning the totality of social relations that make up a society in a given historical period.

<sup>94</sup> Sally Haslanger, *Ideology in Practice*, 61.

<sup>95</sup> Sally Haslanger, "What is a Social Practice?" *Royal Institute of Philosophy Supplement*, no. 82 (2018), 232.



a potential site for social change.”<sup>96</sup> In simpler terms, a social structure is the network of relations constituted by the interconnected social practices of a given society, where these social practices (1) enable and constrain individual and group agency, (2) regulate socially coordinated action around valued or disvalued resources, and (3) operate as sites of transformative praxis.

According to Haslanger, it is this network of social practices that makes individual and group agency possible, and which allows for certain social behaviors to be intelligible. For instance, Haslanger argues that certain speech acts can only succeed given the requisite social practice.<sup>97</sup> Saying “I do” does not constitute an act of marriage, for instance, except insofar as the utterance is embedded in a social practice that makes it intelligible, and which therefore enables the social behavior of marrying someone. This is closely connected to the account of speech acts offered by J.L. Austin and John Searle, which depend on the prior existence of a convention associated with the act, and with David Lewis’ theory of conventions as systems of behavior or signs that enable the resolution of coordination problems.<sup>98</sup>

These social practices are also like the concept of language games offered by Ludwig Wittgenstein, in that they offer a grammar of intelligibility for social behavior and signification.<sup>99</sup> In the next section of this chapter, I will discuss how this intelligibility is partly constituted by the ideological process of reproducing social positions; however, even prior to this ideological dimension, social practices involve a shared grammar for social behavior. Whenever a person states, “I do” and instantiates a marriage with someone else, this is intelligible given not only the behavioral rules established by social practices regarding the resource of marriage, but it also provides significance to that behavior so that one can intelligibly understand what practice

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<sup>96</sup> Ibid.

<sup>97</sup> Ibid., 234.

<sup>98</sup> David Lewis, *Convention: A Philosophical Study* (Hoboken, NJ: Blackwell, 2002), 76.

<sup>99</sup> Sally Haslanger, “What is a Social Practice?”, 234.

they are enacting and what their position within that practice is. This is shaped by what Haslanger terms a cultural *technē*, "...a cluste[r] of concepts, background assumptions, norms, heuristics, scripts, metaphors, (and so on) that enable us to interpret and organize information and coordinate action, thought, and affect..."<sup>100</sup> Regarding social practices, this *technē* also offers a *practice schema*, or a cluster of concepts, assumptions, scripts, etc. that make intelligible a given social practice and which, therefore, regulate behavior within that practice.<sup>101</sup>

I will now consider how social practices and social structures help constitute social kinds. This is important for both ontogenesis and interpellation as it provides the taxonomic basis for membership in social kinds and for targets to recognize themselves as members of those kinds. A kind, in the most general sense, is a partition in logical space.<sup>102</sup> This means that it provides a conceptual distinction between the types of entities in a domain. For instance, the kind "dog" partitions the entities available to us so that we can identify that set of entities which meet the membership conditions of being a "dog" and provide explanations for phenomena in terms of that entity and its characteristics. This partition therefore allows us to provide explanations, to provide reasons for behavior, and to determine the appropriate treatment of members of a kind. Without the partition of "dog," for instance, we cannot group members of the kind together and, therefore, cannot identify members of the kind. If I cannot identify members of the kind, then we also cannot use the kind to explain phenomena or to coordinate individual and group behavior.

Kinds can be divided into natural and social sub-types. The distinction between these categories is found in (1) the types of facts that constitute the partition, (2) the role of the kind in

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<sup>100</sup> Sally Haslanger, *Ideology in Practice*, 62-3.

<sup>101</sup> *Ibid.*, 234.

<sup>102</sup> For a discussion of this view of social kinds, see "How Not to Change the Subject" by Sally Haslanger in *Shifting Concepts: The Philosophy and Psychology of Conceptual Variability* and "Belief as Question Sensitive" by Seth Yalcin.

our explanations, and (3) how the kind features in our practices.<sup>103</sup> A natural kind is one where (a) the characteristics used in partitioning the kind from other kinds are not dependent on human social behavior or cognition, (b) the kind features primarily in explanations of natural science or of those parts of the world that do not depend on human behavior or cognition, and (c) the kind features primarily in practices identified with the natural sciences, such as experimentation and research. For example, an electron is considered a natural kind because (a) in identifying membership in the kind “electron” we refer to those characteristics that are not dependent on our behavior or cognition, such as the charge of particles, (b) electrons are primarily used in offering physical explanations of natural phenomena, and (c) electrons are primarily used in practices related to natural science, such as laboratory methods, scientific reasoning, and physics education.

A social kind, however, is a partition in logical space where (a) the characteristics used in the partition are those that depend on human social behavior, cognition, or organization, (b) the kind features primarily in explanations of the social world or in the social sciences, and (c) the kind features primarily in social practices of the type discussed previously (that is, those that involve the coordination of human behavior regarding problems pertaining to production, reproduction, and distribution of valued or disvalued resources). The kind “money” is a social kind because (a) money is identified through characteristics that are dependent on human behavior and cognition such as a commodity’s role in market exchange, (b) money features primarily in explanations of human economic behavior, and (c) money features primarily in social practices of production, reproduction, and distribution.

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<sup>103</sup> For a further discussion of social kinds and their relation to natural kinds, see “What Are We Talking About? The Semantics and Politics of Social Kinds” in *Resisting Reality* by Sally Haslanger.

It should be noted that a large sub-set of kinds are *both* natural and social, depending on the context in which the kind is deployed. Though we may, generally, be able to distinguish whether a kind is primarily natural or social, natural kinds can be utilized in the coordination of social behavior and social kinds can affect practices related to the natural sciences. For instance, “dog” can be considered both a natural and social kind depending on if we are deploying it (a) to explain biological membership in a species or (b) to coordinate human behavior that involves dogs, such as owning pets. Likewise, because social structures involve the use and modification of parts of the natural world, certain natural kinds also feature prominently in social practices or may be recognized as a resource in those practices. For example, “water” may primarily be understood as a natural kind, in that it represents a partition in logical space that is determined by natural properties (the presence of the H<sub>2</sub>O molecule) and in explanations related to the natural world. However, water is also a resource that is valued in social practices and which human behavior is coordinated around. We form social practices around water to coordinate its production and distribution, tying the natural kind to social properties such as being a “drink” or a commodity.<sup>104</sup>

In terms of social practices and the operations of a social structure, kinds matter insofar as (1) they function as valued or disvalued resources, (2) they function as kinds to which individuals or groups can belong, and which therefore govern individual and group behavior, and (3) they function to ground ideological assumptions or to constitute the ideological grammar of social roles and practices. In the next chapter, I will discuss how social kinds are operative in

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<sup>104</sup> It’s worth noting that “drink” can also be understood both as a natural kind and a social kind. Whether or not a liquid is “drinkable” depends on (1) the chemical properties of the liquid, and (2) the digestive system of human beings. However, whether something is a “drink” also depends on how the liquid is situated in practices related to drinking, such as the designation of types of drinks, the production and distribution of the liquid, or in market processes. Something might be “drinkable” in the sense described by the natural kind, but not figure as a “drink” in social practices.

both ontogenesis and interpellation. To be the target of an ontogenetic speech act, such as psychiatric diagnosis, is to be instantiated as a member of a social kind.<sup>105</sup> To be the target of interpellation, then, one must recognize themselves as being a member of the social kind being hailed by the act of interpellation and must recognize that membership in this social kind is associated with social norms and behavioral expectations.

### **Ideology & Power**

Now that I have offered an account of social structures, social practices, and social kinds, I will move to an explanation of ideology and power, which are processes by which norms and behavior within a social structure are regulated. In offering my own view of ideology, I will be drawing on the works of Sally Haslanger, Karl Marx, Antonio Gramsci, and Louis Althusser. The position I take here is one strongly influenced by structuralist Marxism and critical theory, particularly in their emphasis on the reproduction of social hierarchies and how ideology arises from the contours of social structures. However, my theory is distinct from orthodox Marxist conceptions of ideology in (1) denying that it is a form of false consciousness, (2) denying that there is the possibility of a post-ideological society, and (3) denying that ideology is necessarily deceptive or unjust.<sup>106</sup> This should not be taken as a defense of current ideological structures – which I generally decry as unjust – but as part of a descriptive, rather than pejorative, account of ideology, which I will detail in the next paragraph.

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<sup>105</sup> Note that the primary kinds involved here are social because of their being embedded in social practices of ontogenesis. However, many of these kinds can be considered as both natural and social. Many disabilities, for instance, are both natural in that they represent a partition in how we represent human anatomy and social in that they figure in our social practices and help coordinate human social behavior.

<sup>106</sup> When I say “orthodox Marxism” here, I am referring to the mainstream of Marxist philosophy that seeks to approximate the original doctrines of Karl Marx and Friedrich Engels. I am not referring to the philosophy of the Second International, known as “Orthodox Marxism,” which emphasized economic determinism.

Sally Haslanger distinguishes between (1) descriptive and (2) pejorative views of ideology.<sup>107</sup> Descriptive views of ideology seek only to explain how ideology functions and is reproduced. Typically, descriptive views are like the position taken by Clifford Geertz in *Interpretation of Cultures* – ideology is a symbol-system that can be manipulated in various ways in enacting social behavior and in making the social world intelligible.<sup>108</sup> According to Geertz, what makes ideology properly *ideological* is how these symbol-systems are taken up in modernity. With the collapse of pre-modern symbol-systems that made the world intelligible, such as the Great Chain of Being in medieval Europe, political, religious, and social ideologies arose that provided modern persons with a model to explain this new social world, and which have competed against one another for prominence as societies move into modernity. This view is descriptive, according to Geertz, because it does not require an assumption that ideology perpetuates oppression, obscures truth, or is intentionally misleading.<sup>109</sup>

Pejorative views of ideology, however, see ideology as necessarily oppressive, obscurantist, or deceptive. According to pejorative views, ideology is not just any symbol-system, but one that allows for the perpetuation and reproduction of an unjust social system.<sup>110</sup> Geertz himself offers two competing versions of the pejorative view: (1) the interest view and (2) the strain view.<sup>111</sup> The interest view is derived from a crude understanding of Marxism, whereby ideology always represents the interests of the ruling class, who construct ideological beliefs and processes in order to obscure the material conditions of the underclass.<sup>112</sup> As Geertz points out,

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<sup>107</sup> Sally Haslanger, *Ideology in Practice*, 10-13.

<sup>108</sup> Clifford Geertz, *The Interpretation of Cultures* (New York City, NY: Basic Books, 2017), 232-5.

<sup>109</sup> Ibid.

<sup>110</sup> Sally Haslanger, *Ideology in Practice*, 10-13.

<sup>111</sup> Clifford Geertz, *The Interpretation of Cultures*, 224-226.

<sup>112</sup> A more developed form of the interest view in Marxist philosophy can be seen in *History & Class Consciousness* by Georg Lukacs. Lukacs argues that ideology represents a “false consciousness,” whereby the material conditions of the underclass are misrepresented by the ruling class. Lukacs therefore emphasizes “consciousness raising” as a strategy of combatting the deception that is inherent to ideology.

this view makes too many assumptions as to the intentions of the ruling class, de-emphasizes the agency of the underclass, and is too psychological in its construction of ideology.<sup>113</sup> The strain view, meanwhile, argues that ideology is a result of the tensions and anxieties experienced by persons in their social position.<sup>114</sup> For instance, a white worker may develop racist ideological beliefs as a defense against the anxiety of their own unstable class position. This view, too, is overly psychological, seeing ideology as a set of beliefs rather than an overall social process or system.<sup>115</sup> It also seems overly reliant on just-so stories to explain how ideologies arise from anxiety. Rather than referring to the system of white supremacy and how different persons of different races are positioned in that system, the strain view offers a just-so story where white supremacy arises out of pre-existing economic and social anxieties, which are not themselves ideological in nature. Both I and Geertz therefore reject the interest and strain theories of ideology.

Haslanger also prefers a pejorative view of ideology; however, her view differs from both the interest and strain theories.<sup>116</sup> As mentioned above, Haslanger states that all persons and communities have a cultural *technē*, a system of symbols and narratives that make the social world intelligible and which guide social action, but that only some of these are *ideological*, in that they perpetuate injustice.<sup>117</sup> More precisely, Haslanger argues, “An ideology is a cultural *technē* that organizes us (i) in relations of domination and subordination (either through the production and distribution of goods, or in the constitution of selves), or (ii) in relation to resources whose value is misconceived or not recognized.”<sup>118</sup> Though I make use of Haslanger’s

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<sup>113</sup> Clifford Geertz, *The Interpretation of Cultures*, 224-226.

<sup>114</sup> Ibid.

<sup>115</sup> Ibid.

<sup>116</sup> Sally Haslanger, *Ideology in Practice*, 10-13.

<sup>117</sup> Ibid., 67.

<sup>118</sup> Ibid.

theories of ideology, social structure, and social practices throughout this paper, I will take a descriptive view of ideology closer to Geertz. This is because I disagree with the contention that there is a significant distinction between ideology and a cultural *technē*, except insofar as ideology perpetuates and reproduces social positions. Whether or not these social positions are unjust is a separate question, but for something to be ideological, it is not necessary that the social positions being reproduced are unjust. Tying the term “ideology” to only unjust symbol-systems seems to draw an arbitrary line between the ideologies that persons take up, ignores how both just and unjust processes can co-occur in the same ideological network, and does not provide an adequate explanation for how the reproduction of certain social positions is unjust, while others are not. Providing a descriptive account of ideology means that we can locate unjust characteristics in any ideology or social structure without having to deny its characteristic as ideological or its role in reproducing social positions.

I also, however, deny Geertz’s contention that ideology is an outgrowth of modernity. Geertz’s thesis relies on the assumption that there is a significant distinction between pre-modern and modern symbol-systems. I deny this thesis, however. It is unclear how “modernity” is to be defined, except through reference to the development of other processes such as the growth of capitalism and European colonialism. If we take the position that ideology perpetuates and reproduces social positions, then it does not seem that the relevant shift here is between the pre-modern and the modern, but between one social structure, with its own corresponding social positions, and another. This can be better explained through a shift in class structure, rather than a shift in the function of symbol-systems from the pre-modern to the modern. Though changes in class society are not as clearly demarcated as the taxonomy provided by Marx and Engels in *The German Ideology*, from primitive communism to slave societies to feudalism to capitalism, etc.,



their explanation of the processes that underlie these shifts are still useful in explaining how social positions shift over time and therefore how ideological practices change.

According to Marx and Engels, a change in class structure is a result of the development of productive forces and their conflict with the relations of production, or how production is organized.<sup>119</sup> In order to survive, human beings modify their environment, creating a new social environment that is the result of the productive activity of human beings in transforming the resources available to them. These acts of concrete production give rise to relations of production or the organization of these concrete acts into a system that makes production more efficient. These relations of production then give rise to corresponding social systems that allow for the maintenance, perpetuation, and reproduction of the relations of production. However, these relations of production also allow for the development of the forces of production, or those tools and resources that are utilized in production, including labor, artisanal techniques, natural resources, tools, and machinery. As these forces of production develop, they become more efficient, allowing for production to exceed the limits of the relations that make that production possible. When this happens, there is a transformation in the relations of production so that production can be organized in a way that is more amenable to the productive forces as they now exist. This transformation in the relations of production then necessitates a corresponding change in the social structure that surrounds production, shifting social positions to better allow for the perpetuation and replication of the new relations of production. A new type of class society, therefore, develops out of the expansion of the productive forces and corresponding changes in the relations of production.

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<sup>119</sup> For Marx and Engels' account of ideology and the materialist conception of history, see "Marx on the History of His Opinions" and "The German Ideology: Part One," both in *The Marx-Engels Reader*, ed. by Robert Tucker.

Marx and Engels saw this as part of the underlying shift from feudalism to capitalism. Production under feudalism was organized around the labor of peasants, who were tied to the property of specific landowners.<sup>120</sup> However, as production developed, this allowed for the accumulation of wealth by certain peasants who were engaged in artisanal activity and trade. This accumulation led to the creation of proto-capitalist organizations – namely, the guild system, which organized the upper strata of peasants into a new merchant class. This merchant class would continue to develop the forces of production until there arose a conflict between the organization of production under feudalism and the new trade economy that was being developed by the guild system. This resulted in a widescale shift in the relations of production, enclosing common spaces and shifting to a private property system where the lower strata of peasants became contract workers who sell their labor-power to the merchant class. Marx and Engels argue that this is how capitalism developed and that this change in the relations of production eventually necessitated a change in the social structure, leading to what they called the “bourgeois revolutions” of the 18th and 19th centuries, which established the modern nation-state system.<sup>121</sup>

For our purposes, the details of this story are not important. It is highly likely that Marx and Engels were mistaken on the historical details of this transformation and that they did not consider other relevant processes, such as the Black Death, the trans-Atlantic slave trade, and European colonialism, which cannot be explained solely in economic terms.<sup>122</sup> However, the broad brushstrokes of this theory can be used to make sense out of changes in ideology over

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<sup>120</sup> This process is called “primitive accumulation” by Marx because it represents the accumulation of resources necessary for the organization of capitalist production. The primary analysis of primitive accumulation by Marx can be seen in *Capital, Vol. 1*, chs. 26-33.

<sup>121</sup> Marx’s description of this process of structural change is primarily found in *Class Struggles in France, 1848-1850*, *The Eighteenth Brumaire of Louis Bonaparte*, and *The Civil War in France*. Selections from these works can be found in *The Marx-Engels Reader*, ed. by Robert Tucker.

<sup>122</sup> For a critique of Marxism’s lack of consideration of race, see *Black Marxism* by Cedric Robinson.

time, without reference to a more abstract notion such as modernity, or without assuming a malevolent intention on the part of the ruling class or the necessary injustice of any particular system. In fact, part of where I would disagree with orthodox Marxists is on their contention that socialism and communism represent a “post-ideological” era because of the abolition of class society.<sup>123</sup> This is a similar thesis to Francis Fukuyama’s declaration that neoliberal democracies represented the “End of History” and humanity’s final political state.<sup>124</sup> So long as there are relations of production at all there will be corresponding positions within those relations, even if they are not paired with unjust political or institutional power. These positions are necessarily perpetuated and reproduced through social practices that seek to coordinate a solution to the creation and circulation of resources, and so even in a purely just system, there will be ideology, at least in the descriptive, positional, and structural sense that I offer.

I will now move from the view of ideology and historical change offered by Marx and Engels to that offered by Antonio Gramsci. Gramsci advocates a descriptive view of ideology that is similar to my own and demonstrates how the materialist view of history and ideological change developed by Marx and Engels can be combined with a descriptive, rather than pejorative, view. According to Gramsci, ideology is a result of the propagation and reproduction of the norms and cultural systems of the ruling class.<sup>125</sup> This establishes what Gramsci calls *cultural hegemony*, or the domination of an ideological system over a given society.<sup>126</sup> For Gramsci, this does not necessarily mean that ideology is unjust or deceptive. Instead, ideology

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<sup>123</sup> See the description of socialist and communist society in “Critique of the Gotha Programme,” found in *The Marx-Engels Reader*, ed. by Robert Tucker.

<sup>124</sup> This is the overall argument of Francis Fukuyama in *The End of History and the Last Man*. It is derived from a similar Hegelian conception of ideology that Marx and Engels deploy, though from the perspective of the triumph of neoliberal democracy in the 1990s.

<sup>125</sup> Antonio Gramsci, *Selections from the Prison Notebooks* (New York City, NY: International Publishers, 1971), 506-508.

<sup>126</sup> Ibid.

and hegemony are neutral, descriptive concepts about the application and reproduction of power.<sup>127</sup> Ideology is not necessarily propagated intentionally, or performed for the sake of obscuring material conditions, but through the same processes that structure social and productive relations between persons. Though changes in productive relations are causally primary to changes in the ideological superstructure of a society, it is ideology that preserves and reproduces the class positions associated with that superstructure, and therefore which perpetuates and reproduces the relations of production.

Gramsci, therefore, moves away from orthodox Marxism by emphasizing the role of culture and symbol-systems in either preserving or transforming class society, seeing ideology as a necessary component of any social structure.<sup>128</sup> Gramsci also emphasized the historical contingency of these ideological systems, borrowing the term “historic bloc” from Georges Sorel, which references both (1) how the totality of social relations form an interconnected system, and (2) how this totality is contingent and subject to both destructive and reconstructive forces that eventually lead to a shift from one social structure to another. For Gramsci, each successive historical society is not fully determined by the productive relations that exist in them, but by the totality of social relations that form the structure of society, including relations of production, distribution, consumption, and the symbol-systems that govern social behavior. To understand ideology, we must first understand how it perpetuates and reproduces the totality of social relations that give rise to it, through locally reproducing the social positions of individuals and groups. After providing this descriptive account of ideology, according to Gramsci, we can

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<sup>127</sup> Ibid.

<sup>128</sup> Though this is outside the bounds of this essay, for Gramsci this also meant that social justice movements need to emphasize cultural change and develop a countervailing cultural hegemony to the one present under capitalism. Gramsci argued that cultural, political, and economic change were interrelated and dependent on one another.

then seek to challenge unjust ideological practices and social positions and offer a differing ideological system to that which is hegemonic.

I will now turn to the theory of ideology offered by Louis Althusser, a later French structuralist Marxist. Though Marx and Engels offer a compelling view of the development of ideology, and Gramsci demonstrates the structural components of ideology, Althusser directly connects ideology to particular social institutions and to the perpetuation and reproduction of social kinds and social behavior. Althusser distinguishes between two types of institutions that perpetuate class positions – repressive state apparatuses (RSAs) and ideological state apparatuses (ISAs).<sup>129</sup> Repressive state apparatuses enforce expected social behavior and reinforce social positions through direct coercion and violence.<sup>130</sup> They include institutions such as the police, the military, courts, the coercive use of mental health institutions, etc. Ideological state apparatuses, however, reinforce and reproduce social positions – and thereby incentivize forms of social behavior – through the ideological “hailing” of targets into the behavior associated with their social position.<sup>131</sup> This hailing is what is called interpellation, which is one of the primary processes I am focused on in this thesis. ISAs include institutions such as schools, universities, hospitals, scientific research centers, churches, etc., each of which has their own processes of interpellation that arise from the ideological context in which they are embedded. RSAs and ISAs are not fully distinct from one another, in that ISAs will many times resort to coercion or violence whenever interpellation or other non-coercive methods of ideological enforcement fail. This may include the use of physical and carceral punishment against students in schools, the forced institutionalization of disabled persons, and the use of conversion techniques (such as gay

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<sup>129</sup> Louis Althusser, “Ideology and Ideological State Apparatuses, 92-96.

<sup>130</sup> Ibid.

<sup>131</sup> Ibid., 115-120.

conversion therapy) by religious institutions. In contemporary democracy, ISAs are the primary way through which ideology is produced and the social positions of targets are reproduced; however, the interpellative function of ISAs are typically backed by the coercive power of RSAs, which can enforce social behavior through violence whenever the non-coercive methods of ISAs fail.

As Haslanger points out, Althusser's theory of ideology can be effectively combined with Michel Foucault's notion of power and self-surveillance.<sup>132</sup> According to Foucault, in contemporary democratic societies, direct violence and coercion has largely been replaced by surveillance, both externally through the presence of authorities and authoritative institutions, and internally through processes of self-surveillance.<sup>133</sup> The purpose of these mechanisms is discipline, transforming potentially disruptive subjects into "docile bodies" that reproduce the behavior expected of their social position. This is closely connected to Althusser's notion of ISAs and interpellation, insofar as the function of these ISAs is to hail targets into the behavior and norms associated with their social position. So long as the purpose of these ISAs is to perpetuate and reproduce a social structure, their function is also to limit struggle and conflict among oppressed classes. It is in this way that they can be considered disciplinary, causing targets to modify their behavior in accordance with their social position and therefore not challenge those same behavioral expectations. Though I advocate for a descriptive view of ideology that does not assume injustice or deception, the disciplinary function of ISAs that Foucault and Althusser describe points to one potential way that ideology can become unjust – through constraining individual and group action and limiting potential paths of resistance and

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<sup>132</sup> Sally Haslanger, *Ideology in Practice*, 35-36. See also: *Discipline and Punish* by Michel Foucault.

<sup>133</sup> Ibid.

autonomous self-expression, ISAs can reproduce unjust social hierarchies and contribute to subjugation.

Combining these views, I can articulate a view of ideology as a symbol-system that perpetuates and reproduces those social positions that are required for the functioning of a social structure. This may include norms and behavioral expectations tied to certain social positions and the construction and identification of social kinds that make these norms and expectations recognizable by their targets. Ideology is itself a neutral phenomenon but can become unjust insofar as it (1) perpetuates and reproduces unjust social positions, (2) constrains individual and group action, (3) blocks off paths to resistance and beneficial transformation of social kinds, social practices, or the social structure.

### **Conclusion**

In this chapter, I offered an account of social structures as constituted out of a network of social practices that materially reflect the relationships between persons inhabiting nodes in the structure, of social practices as patterns of conventional behavior tied to coordination problems involving valued or disvalued resources, social kinds as partitions in logical space that make the social world and one's own social position intelligible, and ideology as a symbol-system that perpetuates and reproduces those social positions which make up a social structure. I contend that these definitions meet the preconditions for ontogenesis and interpellation that I stated at the beginning of this chapter – that (1) there must exist a taxonomy of social kinds for targets of ontogenesis to be instantiated as, (2) that the behavior and treatment associated with these kinds must be governed by social norms, and (3) that these behavioral expectations must be recognizable and intelligible to the persons instantiated as these kinds. The relevant social kinds arise because of partitions in the logical space of a social structure that are necessitated by the

coordination problems resolved by social practices, with these kinds functioning (a) as valued or disvalued resources, (b) as part of the grammar that makes these practices intelligible, and (c) as categories to which persons can belong and which can therefore regulate social behavior in these practices. This background makes ontogenesis possible. However, it is ideology that makes interpellation possible, insofar as participation in ideological processes reproduces the behavioral expectations associated with those social kinds through locating members of that kind in a social position that enables or constrains their behavior. Through recognizing authoritative acts of ontogenesis, a target can also recognize, through being embedded in a symbol-system, that they are socially positioned in a particular way through being a member of that kind and that certain behaviors and norms are expected of them in virtue of that social position. In the next chapter, I will expand on ontogenesis and interpellation, applying them to the institutional and ideological context of psychiatric diagnosis.



#### **Ch. 4: Psychiatric Diagnosis as an Ontogenetic, Interpellative Speech Act**

In prior chapters, I introduced the concepts of social structure, social kinds, and ideology and argued in favor of diagnosis as a speech act. In this chapter, I will utilize these concepts to argue that diagnosis constitutes a specific type of speech act - an authoritative ontogenetic speech act - that has ontogenesis for its illocutionary force and interpellation for a perlocutionary effect. In this speech act, the psychiatrist instantiates the patient as a member of a social kind through an utterance or sign, which has the effect of hailing the target (or appropriate interlocutors) into behavior appropriate to that kind and to the social role associated with that kind. To defend this view, I will first provide definitions for ontogenesis and phylogenesis. I will then differentiate between types of ontogenesis and phylogenesis, focusing on authoritative ontogenetic acts as the type to which psychiatric diagnosis belongs. Afterward, I will analyze interpellation, demonstrating how ideology and social structure result in ontogenesis becoming interpellative. Finally, I will use the requirements listed for authoritative ontogenetic acts and interpellation to argue that psychiatric diagnosis meets the requirements for these acts.

#### **An Overview of Ontogenesis & Phylogenesis**

I will begin by providing a short genealogy of ontogenesis and phylogenesis. Ontogenesis and phylogenesis, or ontogeny and phylogeny, are originally concepts from developmental biology. In developmental biology, ontogeny refers to the origination and development of an organism.<sup>134</sup> An ontogenetic process in this context refers to how an organism originates, its embryonic growth, and the development of its phenotypic features.<sup>135</sup> It therefore refers to biological processes that affect everyone in a species. However, phylogeny refers to the individuation and development of a clade of organisms, where a “clade” refers to a set of

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<sup>134</sup> Stephen Jay Gould, *Ontogeny and Phylogeny*, 1-12.

<sup>135</sup> *Ibid.*

organisms grouped by a common ancestor.<sup>136</sup> This clade may be a species, a genus, or any other ancestry-defined group that is necessary for explanations in evolutionary biology. A phylogenetic process therefore refers to how a clade emerges out of a prior clade and how the characteristics of that clade developed from their common ancestor.<sup>137138</sup> An example of this is speciation, the process by which one species develops out of a prior species.

The terms ontogeny and phylogeny are also utilized in psychoanalytic theory. Sigmund Freud defined ontogeny as the incorporation of the development of an organism into the construction of that organism's unconscious, becoming a source of psychological characteristics and conditions.<sup>139</sup> This contrasts with phylogeny, which for Freud refers to the development of the groups to which the organism has belonged, with this social development also featuring in the development of an individual's unconscious.<sup>140</sup> The psychoanalytic theorist Frantz Fanon used this distinction to criticize racism and racial essentialism by incorporating the concept of sociogenesis. Sociogenesis, or sociogeny, refers to the process of producing a socially constructed category.<sup>141</sup> Fanon argues that white supremacist societies mistake sociogenic traits for ontogenetic or phylogenetic ones - that is, categories and characteristics that are socially constructed and contingent are mistaken for the essential traits of individuals or the groups to which they belong to.<sup>142</sup> It should be noted that, given Fanon's definition of sociogeny, both ontogenesis and phylogenesis in the way that I am using those terms are sociogenic. I am

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<sup>136</sup> Wilson, Robert A. and Matthew J. Barker, "Biological Individuals", *The Stanford Encyclopedia of Philosophy* (Winter 2021 Edition), Edward N. Zalta (ed.), URL = <https://plato.stanford.edu/archives/win2021/entries/biology-individual/>.

<sup>137</sup> Gould, *Ontogeny and Phylogeny*, 1-12

<sup>138</sup> Turner, Derek and Joyce C. Havstad, "Philosophy of Macroevolution", *The Stanford Encyclopedia of Philosophy* (Summer 2019 Edition), Edward N. Zalta (ed.), URL = <https://plato.stanford.edu/archives/sum2019/entries/macroevolution/>.

<sup>139</sup> Sigmund Freud, *The Wolfman and Other Cases* (London, UK: Penguin Classics, 2003), 288-302

<sup>140</sup> Frantz Fanon, *Black Skin, White Masks* (New York City, NY: Grove Press, 2011), xi-xvii

<sup>141</sup> Ibid.

<sup>142</sup> Ibid.

applying the categories of ontogeny and phylogeny as categories *within* sociogeny. Therefore, though I agree with Fanon's contention that sociogenic traits are mistaken for essential traits, I do not use ontogeny and phylogeny in the same way.

I use terms from biology and psychoanalysis intentionally to reflect how concepts arise from evolutionary processes, including social kinds and roles, and how these concepts affect the cognition and behavior of individuals. I contend that social kinds and roles develop, and are instantiated, through processes that mirror phylogeny and ontogeny in biology. In the same way that biological clades are defined by a common ancestor, social kinds and roles can be understood through their conceptual ancestry: prior kinds and roles that are connected to new kinds and roles through the creative reapplication of their resources and practices.<sup>143</sup> Resources, like in the previous chapter, are those objects, properties, and identities that are valued in a social context, while practices are the behaviors through which resources are expressed, instantiated, or utilized, and through which the behavioral expectations of social roles are reproduced and reinforced.<sup>144</sup> Social kinds and roles do not emerge from nothing, but instead arise out of prior kinds and roles and take shape through processes of cultural development. This cultural development might be creative and involve a radical reshaping of prior concepts, but it still relies on the existence of prior kinds and roles from which to derive resources and practices.

Like other social kinds, diagnoses do not arise wholesale from scientific speculation, but evolve from prior concepts, which take definitive forms through institutional processes of diagnostic classification and research. For example, autism spectrum disorder (ASD) as it exists today is derived from prior diagnostic categories, including Leo Kanner's "infantile autism" and

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<sup>143</sup> This is like the genealogical approach to social ontology found in *Historical Ontology* by Ian Hacking.

<sup>144</sup> Sally Haslanger, "What is a Social Practice?", 232.

Hans Asperger's "autistic psychopathy."<sup>145</sup> This does not mean that ASD is the same as these prior diagnoses; in fact, they differ extensively. However, it does mean that ASD arose from the creative re-application and re-contextualization of prior conceptual resources in conjunction with new facts derived from scientific and medical research.

The definition of ontogenesis I will offer in this chapter is also like that found in biology through describing how individual members of a kind *become* members of that kind or are instantiated and individuated as members of that kind. This is like ontogeny in developmental biology through detailing the individuation and origination of an organism, rather than a class of organisms. Though the processes differ, through being social rather than biological, they are analogous in their effect on the identification and individuation of entities.

This theoretically applies to any social kind or role that includes members or has potential members. However, for the purposes of this paper, I will be focusing on ontogenesis and phylogenesis in relation to social identities - those kinds and roles that attach to human beings and figure in the self-concepts of individuals. Such identities may include gender identity, race, sex, class, religion, disability, mental illness, nationality, and other social kinds that operate in a similar way. These identities are social kinds because they act as demarcations in the kinds available to entities in a social context and function in explanations of individual and group behavior. However, they are also social roles in that being a member of these kinds has effects on the behaviors that are permitted, prohibited, or prescribed to an individual that follows patterns of social positioning in a social structure. These social identities are therefore simultaneously social kinds and social roles, with ontogenesis instantiating an individual as a member of both.

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<sup>145</sup> Stuart Murray, *Autism*, 45-52.

Because these identities are roles and figure in the self-concepts of individuals, they therefore are best characterized as action-guiding, insofar as membership in these kinds has a significant effect on the behavior of the person and/or other persons in relation to them. A kind that is not action-guiding may be an identity in the minimal sense that “it is a fact that S identifies as x,” but if it does not function in explanations of individual and social behavior it is incidental to the purposes of this argument. This action-guiding dimension of social identities can be understood as interpretive. Because social identities are simultaneously social kinds and roles, they make the behavior of persons intelligible through locating them in a social position that includes associated permissions, prohibitions, and prescriptions on their behavior. Social identities allow one to locate themselves in a social structure and to interpret the behavioral paths available to them; however, it also allows others to position those around them, creating a map of potential behaviors that reflect the position of persons in the social structure.<sup>146</sup> Phylogenesis creates the key for understanding this map, through creating the concepts that allow one to identify entities on the map, while ontogenesis instantiates these entities as these concepts and so “fills in” the content of the map. Social identities are therefore interpretive in that they allow individuals to accurately interpret the social context in which they are embedded.

It should be noted that a social identity does not necessarily need to be known by others, so long as it is recognized by at least one person who incorporates it into their behavior. For example, in the case of psychiatric diagnosis, a person who is diagnosed as having ASD may not tell this information to anyone else, but so long as it is incorporated into their self-concept and has a causal effect on their behavior it still operates as a social identity. Likewise, a person with

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<sup>146</sup> I want to acknowledge that this map metaphor of social identity has also been used for other social categories by other philosophers, including Sally Haslanger in “You Mixed? Racial Identity Without Racial Biology,” William Cross in *Black Identity Viewed from a Barber’s Chair*, and Katharine Jenkins in “Toward an Account of Gender Identity.” In later works, I hope to engage with these texts more fully.

behavioral, social, or phenotypical features associated with ASD may be identified as autistic by another person, who then incorporates this identity into their treatment of the former, without them identifying as autistic. Both cases are included in my operational definition of social identities. Given these conditions, I will limit my discussion to ontogenesis and phylogenesis of social identities.

One way to characterize the role of social identities in behavior is through the works of Wilfrid Sellars and David Lewis. Sellars, working from Wittgenstein's theory of language games in *Philosophical Investigations*, introduces the concept of language-entry, language-language, and language-exit transitions as a taxonomy of actions available to an agent in a language game.<sup>147</sup> A language-entry transition identifies the agent with a position in the game, which can be defined by the move-set available to a person in a conversational context. A language-language move is the speech acts and behaviors that can be made in the game, the set of which is determined by the initial position of the person. Finally, language-exit transitions move a person from a position in the game to a position outside the game, which then may affect the extra-linguistic behaviors that the person undertakes.<sup>148</sup> Social identities are like language-entry transitions in a language game, in that they position the individual in a way that expands or restricts the acts that they can make in the game. For social identities, this means tagging the person as a member of a social kind that is associated with a social role. This social role is the set of behaviors that are permitted, prohibited, or prescribed in a social context that is associated with a pattern of social positions. Using Sellars' paradigm, this social context can also be described in terms of iterated conversational contexts or a series of language games, where the

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<sup>147</sup> Wilfrid Sellars, "Some Reflections on Language Games," in *Science, Perception, and Reality* (Atascadero, CO: Ridgeview Publishing Company, 2017), 323-358.

<sup>148</sup> Ibid.

behaviors that are part of a person's social role include both acts within these language games and any extra-linguistic behavior they may perform.

This process can be characterized through David Lewis' notion of a conversational record. According to Lewis, in any conversational context, there is a conversational record that includes the illocutions that have successfully been made in that context.<sup>149</sup> Any speech act that is successful modifies this conversational record and, thereby, changes the properties of the players in the game and the moves available to the players. This contrasts with Robert Stalnaker's concept of a common ground, which is the set of propositions held in common by interlocutors in a conversational context.<sup>150</sup> The conversational record does not list propositions, but instead illocutions – the speech acts that are made in the game and which thereby modify the context of the game. Because I argue that ontogenesis is part of the illocutionary force of psychiatric diagnosis, this means that any act of diagnosis that is successful becomes part of the conversational record. Psychiatric diagnosis, understood through this paradigm, is a language-entry transition that positions an individual in a language game (which in this case includes all social contexts in which this positioning is relevant) through instantiating them as a member of a social kind that is associated with a social role. This identification is tracked in the conversational record and thereby affects both what moves can be made by the individual and what moves others can make regarding them.

In the next chapter, I will return to the theories of Sellars and Lewis to discuss the ethical implications of psychiatric diagnosis as an ontogenetic interpellative speech act. However, for now I will move to providing a taxonomy of ontogenetic and phylogenetic acts.

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<sup>149</sup> David Lewis, "Scorekeeping in a Language Game," *Journal of Philosophical Logic* 8 (1979), no. 1: 345

<sup>150</sup> Robert Stalnaker, "Common Ground," *Linguistics and Philosophy* 25 (2002), no. 5-6: 701.

## A Taxonomy of Ontogenetic Acts

I will now offer a tentative taxonomy of ontogenetic and phylogenetic acts. For ontogenesis, this includes (a) authoritative ontogenetic acts, (b) ontogenetic self-identification, and (c) ontogenetic presupposition, while for phylogenesis this includes (d) authoritative phylogenetic acts, (e) phylogenetic self-constitution, and (f) phylogenetic presupposition. As I argue that psychiatric diagnosis constitutes an authoritative ontogenetic speech act, I will be providing felicity conditions for that type to demonstrate how psychiatric diagnosis meets those conditions. Felicity conditions are the requirements for a speech act to be performed successfully, meaning that its illocutionary aim has been met, which in the case of an authoritative ontogenetic speech act is ontogenesis.

An authoritative ontogenetic speech act occurs whenever an agent with the requisite authority, typically granted by ideological or institutional requirements in a social structure, makes an utterance or sign that instantiates a target as a member of a social kind. More formally:

**Authoritative Ontogenetic Speech Act:** An authoritative ontogenetic speech act  $P$  is made by a speaker  $S$  regarding a target  $T$  if and only if (a) there is a kind  $K$  available for instantiation, (b)  $S$  has the authority to instantiate  $K$  through  $P$ , (c)  $T$  is believed by relevant interlocutors,  $I$ , to be an appropriate target for  $P$ , (d)  $P$  is made by  $S$  in a medium intelligible as  $P$  to both  $T$  and  $I$ , and (e)  $T$ ,  $I$ , or both believe that  $T$  is  $K$  after  $P$  and continue to treat  $T$  as  $K$ .

In the case where  $P$  succeeds,  $T$  is instantiated as a member of  $K$  and therefore is part of the social role associated with  $K$ , affecting both their behavior and the behavior of others regarding them.



Before discussing examples of authoritative ontogenetic speech acts, I want to first explain what counts as a relevant interlocutor – that is, what conditions there are on identifying *I* in the above formalization. Because of the role of the interlocutor in the ontogenetic act, the relevant interlocutor must (1) have knowledge of the act and (2) must be socially connected to the target in such a way as to (a) feature in explanations of the behavior or life-status of the target and (b) know at least enough information about the target to form a concept about them and to remember them over multiple encounters. If the interlocutor does not have knowledge of the act, whether directly or indirectly, then it cannot be part of an explanation of their behavior or decision-making. If they are not connected to the target in the sense of (a), then their social kind membership does not have a significant effect on their life and cannot be characterized as a social role that they inhabit – at least not one that is relevant to explanations of their behavior or life conditions. Finally, if they are not connected to the target in the sense of (b), then the interlocutor’s treatment of the target based on their social kind membership cannot be sustained over time and any behavior that was a response to this membership is not part of the individual’s concept of the target. For the interlocutor to fulfill the requirements of ontogenesis, their relation to the target must be one that has a significant causal effect on the target’s life, and which can feature in explanations of their behavior or life conditions.

Some examples of authoritative ontogenetic acts include sex assignment or a judicial decision that declares someone guilty of a crime. In the first case, the clinician has the authority to assign an infant a sex, so long as they meet the institutional requirements of being a clinician, it is part of the ideological background that clinicians have the authority to assign sex, and the infant is an appropriate target for the assignment (that is, would be generally believed by others in their context to be a member of that sex). In the case where such an act succeeds, the infant is

assigned membership in a sex and can be treated in ways considered appropriate to that sex.<sup>151</sup> Likewise, a judge may have the authority to label someone as guilty of a crime so long as they meet the conditions for being institutionally recognized as a judge, it is part of the ideological background that judges may adjudicate on this matter, and the target is an appropriate subject for the verdict. In both cases, it is also necessary that the acts be made in a way that is intelligible to either the target or relevant interlocutors and the proper uptake obtains, meaning that the infant is treated as the assigned sex, or the accused is treated as guilty.

Because I am concerned with authoritative ontogenetic acts that are *speech* acts, it is also important to characterize this category in terms of speech act theory. In the speech act theory of J.L. Austin and John Searle, there is a division between the locutionary, illocutionary, and perlocutionary acts.<sup>152</sup><sup>153</sup> A locution is the utterance or sign that acts as the medium for the speech act. The illocutionary act is the action constituted by the speech act, such as making a promise, making a bet, etc. Finally, the perlocutionary act is the effects of the speech act that are not part of the illocutionary act. An authoritative ontogenetic speech act has an utterance or sign for its locution and ontogenesis for its illocutionary force. However, what perlocutionary effects arise from the act will depend on the context in which the act is made. Later in this chapter I will argue that psychiatric diagnosis constitutes an authoritative ontogenetic speech act, so that its locution is the utterance or sign made by the psychiatrist and ontogenesis is its illocutionary force, but I will also argue that interpellation is part of its perlocutionary effects. This is not necessarily the case for all authoritative ontogenetic speech acts, but psychiatric diagnosis is a sub-type of authoritative ontogenetic speech acts that are also interpellative.

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<sup>151</sup> This understanding of sex is influenced by Judith Butler's performative approach in *Gender Trouble*.

<sup>152</sup> J.L. Austin, *How to Do Things with Words*, 94-102.

<sup>153</sup> John Searle, "Austin on Locutionary and Illocutionary Acts," *Philosophical Review* 77 (Oct. 1968), no. 4: 405-424.

In an earlier chapter, I argued that psychiatric diagnosis as a speech act could be characterized as either a verdictive (in Austin's taxonomy) or a declarative (in Searle's taxonomy). A verdictive occurs whenever an agent renders a decision on an unresolved question, while a declarative occurs whenever a speaker instantiates a state of affairs through a speech act.<sup>154</sup><sup>155</sup> An authoritative ontogenetic speech act can potentially meet the requirements for either, depending on if the kind membership is interpreted as pre-existing the speech act or coming into existence through the act. In the former interpretation, though the kind membership is not part of the conversational record prior to the act, and likely does not feature in the common ground (though characteristics associated with the kind might), the kind membership can still function in explanations of the individual's behavior prior to the act. For example, someone may not identify, or be identified, as homosexual until later in life, but this does not mean that homosexuality was not causally significant in explaining their prior behavior. In this case, the authoritative ontogenetic speech act would be a verdictive, in that it renders a decision on a pre-existing question or area of ambiguity. However, in the latter interpretation, the authoritative ontogenetic speech act fully instantiates the kind membership and it does not figure in explanations of individual behavior prior to the act. This is likely most common for kind memberships that are strictly defined, such as membership in a formal group. For example, someone may be instantiated as a college graduate through an authoritative ontogenetic speech act at graduation. When this happens, the kind membership is instantiated and does not exist in any explanatorily adequate sense prior to the act. In this interpretation, authoritative ontogenetic speech acts are Searlian declaratives, as they instantiate a state of affairs that did not exist prior. Because an authoritative ontogenetic speech act can be either a verdictive or a declarative, a

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<sup>154</sup> Austin, *How to Do Things with Words*, 153.

<sup>155</sup> John Searle, "A Taxonomy of Illocutionary Acts," 358-360.

psychiatric diagnosis can therefore be an authoritative ontogenetic speech act no matter which interpretation we take.

I will now move on to the other types of ontogenetic and phylogenetic acts, though I will not offer felicity conditions for these acts, as they do not figure in the later argument. An authoritative ontogenetic speech act differs from the next kind of ontogenetic act, ontogenetic self-identification, in that the former is made by one individual towards another, while the latter is made by agent towards themselves. Ontogenetic self-identification occurs whenever an individual, who believes that they have the requisite self-authority, performs an internal or external act that identifies them as a member of a social kind, with this kind and/or its associated role being incorporated into the self-concept of the agent, thereby having a significant causal effect on their behavior.

Some examples of ontogenetic self-identification are gender self-identification and/or psychiatric self-diagnosis. In the former case, though a person may have been assigned a sex at birth that is culturally associated with a gender, they may make a conscious decision later in life to identify as another gender. To do this, the individual makes an external or internal act of ontogenetic self-identification, whereby they identify with a given gender and incorporate it into their self-concept. Likewise, a person may diagnose themselves as having a condition without undergoing formal diagnosis (or while rejecting a different formal diagnosis). In doing so, if this condition is associated with a social kind and/or a social role, then this kind and role are incorporated into the self-concept of the person and has a causal effect on their behavior. Even if this self-diagnosis is never recognized by a clinician, the ontogenetic self-identification is successful insofar as it affects the individual's self-concept and behavior.

It should be noted, as an extension of the previous point, that ontogenetic self-identification can succeed even without being accepted by anyone other than the target. For instance, many LGBTQIA+ people self-identify as queer prior to expressing it to other people. In these cases, their queer identity still might be behavior-guiding and part of their self-concept; therefore, their self-identification still succeeds as an ontogenetic act. In cases where external validation is sought for ontogenetic self-identification, other felicity conditions arise. These include (a) that the appropriate interlocutors believe the individual is self-authoritative regarding their kind membership, (b) that the interlocutors incorporate this kind membership into their concept of the individual, and (c) the interlocutors continue to treat the individual as a member of the kind. External self-identification can fail without a failure in internal self-identification. For instance, a person who expresses their queer identity to another, but who is ignored or rejected, may be said to fail regarding the desired external self-identification but still retains the internal self-identification. In this case, the ontogenetic act of self-identification remains felicitous, even without it being recognized as legitimate by others. Likewise, an external self-identification can continue to be in effect even if one's internal self-identification has changed. For example, a person may identify as a member of a kind at one time, but then cease to treat themselves or identify as such later without expressing this change to others. When this happens, the initial external self-identification can be said to still be in effect, and have bearing on the conceptual ontology of others, without this being the case for the individual themselves.

The final type of ontogenetic act I will consider is ontogenetic presupposition. Ontogenetic presupposition occurs whenever an agent is instantiated as a member of a social kind and/or social role not through either an authoritative act or self-identification, but through the presupposition of that membership as part of the common ground of a given context. An

ontogenetic presupposition succeeds when the target meets similarity conditions for being considered a member of a kind or has a historical relationship to the kind (such as being part of a community associated with it). In this case, the target is treated as a member of a kind and this membership is part of the common ground of a conversational context so that treatment may be understood as being predicated on that membership. In ontogenetic presupposition, neither the individual themselves nor every individual in the conversational context needs to consider the target a member of the kind. What matters is that enough interlocutors in the conversation assume this membership that it can function in explanations of their behavior.

Examples of ontogenetic presupposition include when a person is assumed to be a gender based on their presentation or whenever a person is treated as having a disability based on their phenotypic characteristics, without an authoritative act or self-identification in either case. In the former, a person may have features that are associated with being a woman or a man and, even without identifying as either or the interlocutors in a conversational context knowing their assigned sex, may be treated as such. Likewise, in the latter, a person may have characteristics that are associated with a diagnosis, such as differences in communication in the case of ASD, that result in others treating them as having that diagnosis even in the case where they do not self-identify as such and have never been formally diagnosed. In both cases, the interlocutors might be said to be wrong in some sense - the individual in both cases may themselves contest the presupposition - but these assumptions can still function as part of explanations of individual and group behavior.

## **A Taxonomy of Phylogenetic Acts**

I will now move from a taxonomy of ontogenetic acts to one of phylogenetic acts. This taxonomy is analogous to that of ontogenesis but differs in important ways given the distinct content of phylogenesis.

The first type I will consider is authoritative phylogenetic acts. An authoritative phylogenetic act is performed whenever an agent or agents have the authority to instantiate a new kind that will be explanatorily efficacious in a context, and which will then operate as a kind to which entities may belong. This can occur only in the case where there is not only the appropriate authority on the part of the agent(s), but there is a genealogical connection between the new kind and older kinds, including their conceptual resources and practices, that help form the content of the new kind. Note that the “content” of this new kind does not need to be a set of necessary and sufficient conditions, nor does there need to be universal agreement on the definition. To function in ontogenetic acts, the new kind instantiated in the phylogenetic act needs only a minimal agreement among those authorized to instantiate persons as the kind as to membership conditions and expectations of the kind. These expectations and conditions will likely be taken from the kind’s genealogical relationship to prior kinds, with the practices and resources associated with those kinds bearing on how these conditions and expectations are formed regarding the new kind.

Examples of authoritative phylogenetic acts include decisions by biologists to describe a new clade of organisms or a music critic declaring the invention of a new genre. In the former case, a new kind is instantiated that can be used to categorize organisms, and which can function in explanations of biological phenomena. This occurs so long as the biologists have the requisite institutional authority, and the new clade is intelligible given the available facts and prior clades

that have been named. In the institutional context of biology, this declaration also must have the proper uptake - namely, it needs to continue operating as a clade in biological research and be accepted by other biologists. In the latter case, if the music critic is recognized as having authority in a context, such as being a well-respected writer for a major publication, then their description of a musical artifact as being a new genre may be efficacious in instantiating that genre as a kind and causing other writers and musicians to utilize the genre. In both cases, the members of the kind may be said to exist prior to the act of instantiation, in that there are organisms that belong to the new clade and songs that belong to the new genre prior to the phylogenetic act. However, the role of the phylogenetic act is to group those members into an identifiable set and establish membership conditions for members of the set. Though the individuals exist prior to the phylogenetic act, it is only with the act that the group can be named and described as a kind.

Another type of phylogenesis is phylogenetic self-constitution, which is analogous to ontogenetic self-identification. The reason that the term “self-constitution” rather than “self-identification” is used here is that, though in the ontogenetic case an agent identifies as a pre-existing kind, in the phylogenetic case the agent creatively applies prior existing kinds, including their conceptual resources and practices, to simultaneously constitute a new kind and assign it to themselves.

Examples of phylogenetic self-constitution include a group identifying themselves as members of a new religious community or a person identifying themselves as a gender identity that was not in prior use. In the former case, we might say that a group of persons is instantiated as a new kind of religious community in the case where they consider themselves self-authoritative, there is a minimal agreement as to what membership in this kind involves, and the



kind derives from prior kinds that make this membership intelligible. In the latter case, a person may not wish to identify as any of the gender identities that are in common use. If this occurs, they might self-identify using a term that is not yet in use, but which has significance to themselves and others through reference to the conceptual resources and practices of other identities. For instance, the term “gendervague” was invented by autistic trans people to describe their gendered experience and, though it is distinct from other gender identities and rests on the experience of autistic individuals, it is intelligible to others because its description relies on a creative application of resources and practices from other identities such as non-binary, genderqueer, and genderfluid.<sup>156</sup> In any case of phylogenetic self-constitution, the agent or agents who perform the act succeed in producing a new social kind and in applying it to themselves, making these acts both phylogenetic and ontogenetic. Because of this, every act of phylogenetic self-constitution can also be understood as an act of ontogenetic self-identification.

The final type of phylogenetic act I will consider is phylogenetic presupposition, which is analogous to ontogenetic presupposition. Phylogenetic presupposition occurs whenever a kind has entered use and functions as an available kind through being presupposed as part of the common ground of a conversational context. It is likely that phylogenetic presupposition is the origin of many existent kinds, as conceptual evolution often does not involve explicit phylogenetic acts; instead, kinds may evolve from prior kinds and only receive agreed-upon names after use.

Examples of phylogenetic presupposition include cases where the membership conditions and expectations of a kind evolve over time to the point where a new kind is constituted, such as how the term “liberal” has gained and lost conditions and expectations as the political

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<sup>156</sup> Finn Gratton, *Supporting Transgender Autistic Youth and Adults* (London, UK: Jessica Kingsley Publishers, 2019), 14-15.

environment in which the term is deployed has changed. Another example is when a genre functions as a potential style to which artworks may belong prior to the invention of the name of the genre, or without it being traceable to any original authoritative or self-constitutive act.

Each of these types of ontogenesis and phylogenesis functions in the production and application of kinds. In a future section of this chapter, I will argue that psychiatric diagnosis meets the conditions for being an authoritative ontogenetic speech act. However, prior to this, I will analyze one of the perlocutionary effects of such acts: interpellation.

### **Interpellation**

Interpellation is when an agent is signaled to recognize themselves as being part of a social kind and social role and, through this, behave in ways that are appropriate to that kind and role. This process can operate through any medium that the target can recognize as the appropriate signal, including speech, symbolism, and the arrangement of space.

Interpellation derives from the work of Louis Althusser, who utilizes it in his theory of ideology. According to Althusser, ideological state apparatuses fulfill their function (the reproduction of the relations of production through the reproduction of class positions) through interpellation.<sup>157</sup> Interpellative acts are those that signal agents to act in accordance with their class position, which is fulfilled through their recognition of the subject position that they inhabit in their ideological context.<sup>158</sup> This subject position is analogous to the self-concept of a person, being that which constitutes their sense of self and which guides their behavior. One of the functions of ideology, according to Althusser, is to align this subject position with the person's class position, so that they unconsciously reproduce their class position.

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<sup>157</sup> Louis Althusser, "Ideology and Ideological State Apparatuses", 92-6.

<sup>158</sup> Ibid.

An important element of interpellation for Althusser is its relation to Jacques Lacan's concept of a mirror stage, which functions in the subject position of interpellated agents.<sup>159</sup> According to Lacan, the mirror stage is when an infant can recognize themselves as an imagined whole and thereby form a self-concept.<sup>160</sup> This stereotypically occurs through an infant recognizing themselves for the first time in a mirror, splitting their perception of their self from others and from reality. Central to this concept is the split between what Lacan calls the imaginary order and the real. For Lacan, the real is reality itself, a chaotic assemblage of information that cannot be fully incorporated into an orderly, sensible representation of the world.<sup>161</sup> The imaginary order emerges from this real in the mirror stage through constituting the self, which necessitates an imaginary relationship to oneself, others, and the world that is intelligible and sensible and which can give context to the self. This is important for Althusser because, according to him, one's subject position is constituted out of this imaginary order and Lacan's related concept of a symbolic order.<sup>162</sup> This symbolic order is the sphere of linguistic and symbolic discourse that makes intersubjective relations intelligible in conceptual terms.<sup>163</sup> Interpellation is possible precisely because the target of interpellation already perceives themselves as a self inhabiting a subject position to which the interpellation applies.

My theory of interpellation is like that of Althusser insofar as I seek to explain a similar set of phenomena through a distinct framework. My view does not require the Lacanian apparatus of concepts to describe these phenomena and I make no claim as to the veracity of his metaphysics or account of the unconscious. Instead, I contend that interpellation can be

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<sup>159</sup> Ibid., 108-109.

<sup>160</sup> Jacques Lacan, *Ecrits* (New York City, NY: W.W. Norton & Co., 2007), 75-81.

<sup>161</sup> Ibid., 17.

<sup>162</sup> Frederic Jameson, "Introduction," in Althusser, *Lenin and Philosophy and Other Essays*, xiv

<sup>163</sup> Jacques Lacan, *Ecrits*, 17.

understood in terms of the behavior of individuals in a social structure. In interpellation, a person is signaled (sometimes by another agent, sometimes by an object or feature of the environment) to recognize themselves as a member of a social kind associated with a social role and to then behave appropriately to that kind and role in a context. This is an ideological process insofar as ideology provides justification for the behavior and for the norms associated with the social kind or role. Whenever a person is interpellated, they not only recognize themselves as part of a social kind and role but are able to refer to ideological beliefs that justify the behavior expected of the individual.

Formally, we can define interpellation as follows:

**Interpellation:** An act of interpellation  $P$  is performed regarding a target  $T$  in a context  $C$  if (a)  $T$  believes themselves to be a member of kind  $K$ , (b)  $K$  is associated with a set of behaviors  $B$  in  $C$ , (c)  $T$  recognizes  $P$  as signaling members of  $K$  to perform  $B$ , and (d)  $T$  performs  $B$ .

In this formalization, an act of interpellation succeeds whenever the target is part of a social kind that, through its position in the social structure and its embedding in an ideological framework, is associated with certain behaviors in a context and that the act is signaling for them to perform that behavior. Note that this formalization also means there is no successful interpellation whenever (d) does not obtain, but it does not mean that there is not an intended interpellation. It is possible for an act to fulfill (a)-(c) without fulfilling (d), but (d) determines whether the interpellation succeeds.

It should also be noted that interpellation, under this formalization, can be either its own illocution or a perlocutionary effect of another illocution. In the former case, an interpellative act may itself be a speech act, where the illocutionary force of the utterance or sign is to interpellate

the target into a given behavior. However, the class of interpellative acts that I am concerned with in this paper are those where the interpellation is a perlocutionary effect of another act. In this class, ontogenesis creates the conditions by which interpellation can occur. Interpellation can only happen if the target believes themselves to be a member of a kind or, at minimum, believe that others believe they are a member of the kind. One way this can occur is through being the target of an ontogenetic speech act, which instantiates them as a member of a kind and which requires, as uptake, the continued treatment of the target by others in a way consistent with the social role attached to members of that kind. As the target of an ontogenetic speech act, even if the individual themselves resists the identification, so long as the context of the act was intelligible to the individual and they believe others have incorporated this identity into their concept of them, they will be able to recognize that they are being interpellated based on this membership. It is also possible for someone to be interpellated into behavior that is considered appropriate for one kind in relation to another kind, so that even in cases where only interlocutors have the beliefs necessary for interpellation to occur, they can be interpellated into behavior based on their belief of another person's kind membership. As I will discuss in the next section, psychiatric diagnosis meets the requirements for being both an authoritative ontogenetic speech act and interpellation, with ontogenesis providing the grounds for interpellation.

### **Psychiatric Diagnosis as Ontogenesis & Interpellation**

I will now argue that psychiatric diagnosis is an authoritative ontogenetic speech act, where ontogenesis is the illocutionary force of the utterance and interpellation is a perlocutionary effect. In doing so, I will argue (a) that psychiatric diagnosis meets the five conditions established earlier for being an authoritative ontogenetic speech act and (b) that it likewise meets the four conditions for a successful interpellation. To begin, I will again list the felicity

conditions for an authoritative ontogenetic speech act: (1) a kind must be available for instantiation (meaning that there must have been a prior phylogenetic act that made the kind available), (2) the speaker must have the authority to make the act, (3) the target must be believed by relevant interlocutors to be an appropriate object for the act, (4) the act must be made in a medium that is understandable by the target and/or the interlocutors, and (5) the target or interlocutors must believe the target to now be part of the kind and treat them as a member.

I will now discuss how psychiatric diagnosis meets these five conditions. The phylogenetic background is provided, at least in the United States, through the *Diagnostic and Statistical Manual of Mental Disorders*, which provides a taxonomy of diagnoses. This taxonomy is decided by the American Psychiatric Association (APA) in conjunction with clinicians and researchers.<sup>164</sup> The APA has the institutional authority to decide this taxonomy based on the professional requirements of psychiatry, where the APA acts as an arbiter for what diagnostic acts are considered legitimate by medical institutions, the state, and insurance agencies. In deciding on the list of diagnoses to be included in the *DSM*, the APA enacts an authoritative phylogenetic speech act, using its institutional authority to make an explicit locution (through the medium of the *DSM* itself) whose illocutionary force is to instantiate the diagnoses in the *DSM* as legitimate phylogenetic kinds to which patients may belong. This creates the phylogenetic basis for the ontogenetic function of psychiatric diagnosis. Therefore, psychiatric diagnosis, through its institutional connection to a taxonomy of kinds that are considered legitimate in the profession, meets the first requirement for being an authoritative ontogenetic act. Psychiatric diagnosis can operate as an ontogenetic act because of the phylogenetic preconditions that are established by the APA and the *DSM*.

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<sup>164</sup> Dominic Murphy, "Philosophy of Psychiatry."

The second requirement, the authority of the psychiatrist, is also determined by the standards of professional organizations like the APA, along with the institutional support of other organizations such as the state and insurance companies. Psychiatrists must meet a set of requirements to have the authority to make diagnoses that are considered legitimate by these institutions, including having a medical degree, meeting licensure requirements, operating in a clinical context, and having the appropriate professional connections, such as to the APA. This authority is also reinforced through ideology, which centers clinicians as arbiters of diagnostic membership through offering beliefs that justify that authority. Through the interconnection of these requirements, the psychiatrist is considered, by either the patient, relevant interlocutors, or both, as having the requisite authority to decide on membership in the kinds described by the *DSM*. Because of this, psychiatric diagnosis meets the second condition for being an authoritative ontogenetic speech act.

The third condition is that relevant interlocutors must believe the target of the act to be an appropriate object. Note that this condition is related to, but distinct from, the membership conditions listed in the *DSM*. The psychiatrist will use the membership conditions listed in the *DSM*, in conjunction with the facts of the case, to decide on the condition of the patient. However, for interlocutors to recognize this as legitimate does not require that they know all the symptoms associated with a condition. Instead, what matters is that the membership assignment is not disjoint with prior applications of the kind. For a patient to be considered the appropriate object for an authoritative ontogenetic speech act means (1) that they are subject to the institutional authority of the clinician (meaning that they are not someone who is clearly outside of that authority), and (2) that they resemble prior cases enough that the diagnosis can be accepted by relevant interlocutors and can therefore be incorporated into their concept of the

patient without much resistance. There can therefore be a sharp divide between what is considered a legitimate diagnosis by the psychiatrist and what is legitimate for other interlocutors. This is important because the relevant interlocutors (and/or the patient) are who ground the social role associated with the diagnosis. For a diagnosis to function as a social role it must be the case that it affects either their behavior or the behavior of others towards them. For this to be the case, however, it must be accepted by the patient and/or the interlocutors as a legitimate application of the kind, which is determined not through the institutional requirements of the *DSM*, but their own knowledge of prior instances of the kind.

The fourth requirement is that the act must be made in a medium intelligible to the target and/or interlocutors. This is met by psychiatric diagnosis occurring in spoken or written language and the target or interlocutors having the requisite background knowledge to identify (a) that the clinician has the appropriate authority, (b) that the patient is being diagnosed with a kind, and (c) at least a minimum acquaintance with the behavioral expectations associated with that kind. So long as the patient or interlocutors can understand the language that the diagnosis is made in and the conceptual apparatus being drawn on in the diagnosis, this felicity condition is met. This can be accomplished even if the patient does not understand the medium of the act, or the concepts being utilized, so long as other persons, such as family members or caretakers, meet these conditions and are able to incorporate the diagnosis into their concept of the patient. For example, a person who is experiencing severe psychosis may not recognize that a speech act has been made towards them, but the persons who are involved in their care may recognize it. Therefore, the authoritative ontogenetic speech act still succeeds because the patient is identified as being a member of the kind and this affects the behavior of other persons and so functions as a social role to which the patient is assigned. Thus, even in cases where the patient themselves



does not understand the act, psychiatric diagnosis still meets the fourth requirement of being an authoritative ontogenetic speech act.

The final requirement for an authoritative ontogenetic speech act is for the patient or interlocutors to respond with the appropriate uptake. For psychiatric diagnosis to be ontogenetic the patient must behave, or be treated, as if they have that diagnosis. Without this behavior, there are no continuing social effects to the diagnosis and the kind can therefore not operate as a social role. To meet this requirement, (a) the patient must incorporate the diagnosis into their self-concept and so be primed to behave in ways appropriate to that kind, (b) relevant interlocutors must incorporate the diagnosis into their concept of the patient and so treat them in ways appropriate to that kind, or (c) both. What constitutes appropriate treatment or behavior will likely differ between diagnoses as it will depend both on the institutional expectations tied to patient treatment and on more dispersed social and ideological assumptions as to the position and role of persons with that diagnosis. These latter norms may shift over time and not be neatly enumerable; however, they have a large influence on what acts are permitted, prohibited, or prescribed to the patient and, therefore, what social role is associated with their kind membership. Therefore, though it is possible for a psychiatric diagnosis to not meet this requirement, especially in the case of diagnoses that do not have a closely associated social role, many acts of diagnosis meet this condition, particularly those with rich normative associations.

It should also be noted that the behavioral uptake required here is not necessarily limited to the time at which the speech act is made. An individual may reject a diagnosis when it is made and not incorporate it into their self-concept, but later return to the diagnosis and integrate the expectations associated with that kind into their behavior. Because diagnoses are typically contained in medical documents, the authority of the clinician in making the diagnosis continues

into the future, making it possible for a future uptake that makes the act successful. This can also occur with relevant interlocutors and is possibly a reason for avoiding sharing such information with others. Such interlocutors may use their knowledge of a prior diagnosis in explaining future behavior, incorporating it into their concept of the person long after the speech act is made and even without a corresponding uptake by the patient. Because of this, it is possible for an authoritative ontogenetic speech act like psychiatric diagnosis to initially fail in meeting this condition, but can then meet it later, so long as the initial diagnosis can be referred to, whether directly through documentation or indirectly through memory.

Psychiatric diagnosis therefore meets all five conditions of being an authoritative ontogenetic speech act. The psychiatrist refers to a phylogenetic background through the *DSM*, the authority of the clinician is supported through institutional and professional regulations and ideological expectations, the appropriateness of the target is decided through reference to past examples of the diagnostic kind, and the act is made in a medium that is intelligible to either the patient or relevant interlocutors, allowing them to modify their behavior in relation to expectations associated with the kind. Psychiatric diagnosis is therefore an authoritative ontogenetic speech act and has the illocutionary force of instantiating its target as a member of a social kind and role, being that associated with the diagnosis.

I will now argue that interpellation is a perlocutionary effect of this speech act, with ontogenesis creating the grounds for interpellation. To begin, I will list the four felicity conditions I have set for interpellation: (1) that the target must believe themselves to be (or believe others consider them to be) a member of a relevant social kind, (2) that this kind is associated with a set of behaviors in the context in which the act takes place, (3) that the target recognizes that the act is signaling for members of the kind to perform those behaviors, and (4)

that the target actually performs those behaviors. (1)-(3) in this case are required for an act to count as interpellative, while (4) is required for the interpellation to succeed.

Psychiatric diagnosis meets the first condition by instantiating the patient as a member of a social kind through the initial authoritative ontogenetic speech act. Ontogenesis creates the grounds for interpellation and interpellation can only function given a prior ontogenetic act, whether that be through authoritative speech, self-identification, or presupposition. Because of this, so far as one of these ontogenetic acts has occurred concerning the kind that the interpellative act is signaling to, and this act was directed at the target, then the target is a member of the relevant kind. Likewise, the second requirement is an extension of this ontogenetic background in that the uptake required for the authoritative ontogenetic speech act to succeed indicates that there are behavioral expectations concerning the kind. Without these behavioral expectations, there would be no social role associated with the kind and therefore the kind would not feature in the self-concept of the target and would not be part of the phenomena that ontogenetic acts are concerned with. In the context of psychiatric diagnosis, the psychiatrist interpellates the patient into the role associated with the kind, which by extension means that they can recognize these behavioral expectations and meet the second requirement for interpellation. Psychiatric diagnosis, therefore, meets the first two conditions of interpellation, which creates the basis for meeting the final two requirements.

The last two requirements are also met through this ontogenetic basis. For interpellation to succeed, the target must believe (a) that they are being signaled in some way based on their kind membership, (b) that this kind is associated with a social role that has behavioral expectations, and (c) that there is a behavior or set of behaviors that are expected of members of this kind in the context in which they are being signaled. The interpellation must then be

completed by performing the behavior in (c). For example, using Quill Kukla's example of taking roll in a classroom, whenever a teacher calls a student's name, this is an act of interpellation.<sup>165</sup> A student is signaled through this naming to refer to their identification as a student, which itself is connected to an expected behavior in this context – namely, saying “here.” Though one may or may not become a student through an authoritative ontogenetic speech act, there must be a process of ontogenesis that precedes the act of interpellation, so that the target may refer to their kind membership.

In the case of psychiatric diagnosis, the authoritative ontogenetic speech act takes place simultaneous to the act of interpellation. Though the precise behavioral expectations probably differ based on diagnosis, in general it can be characterized as (a) accepting the authority of the clinician over this identification, (b) incorporating this diagnosis into their self-concept, and (c) engaging in current and future behaviors based on this diagnosis, such as accepting the therapeutic or medicinal prescriptions of the doctor. Because this uptake is dependent on the authority of the clinician, it also depends on surrounding ideological beliefs that justify this authority. As with ontogenesis, this uptake can also be temporally disjunct from the act, with the uptake being provided much later. Though the majority of interpellative acts likely require uptake at the time they take place, psychiatric diagnosis has the quality of allowing for an interpellative uptake in the future because of its being conjoined to the illocutionary force of ontogenesis. For example, someone can be diagnosed with ASD at one time and reject the diagnosis. They do not provide the proper uptake for either ontogenesis or interpellation because they do not incorporate the diagnosis into their self-concept, and neither is it incorporated into anyone else's concept of them. However, later, they may come to accept the diagnosis and

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<sup>165</sup> Quill Kukla, “Slurs, Interpellation, and Ideology,” 15-16.

incorporate it into their self-concept. When this happens, the prior interpellative effect of the diagnosis remains in place and the individual can respond with expected behaviors, such as seeking therapeutic interventions. In these cases, (1)-(3) of the felicity conditions of interpellation might be fulfilled by psychiatric diagnosis much earlier than (4) is fulfilled, as the interpellative act remains open, just as with the ontogenetic illocution. Therefore, even if the uptake is temporally disjoint from the initial diagnosis, psychiatric diagnosis meets all the conditions required for interpellation and can be characterized as a perlocutionary effect of the utterance.

### **Conclusion**

In this chapter, I have defined the concepts of ontogenesis, phylogenesis, and interpellation, including felicity conditions for authoritative ontogenetic speech acts and interpellation. I then defended psychiatric diagnosis as an authoritative ontogenetic speech act, where the illocutionary force of the utterance is ontogenesis and the perlocutionary effect is interpellation. In the next chapter, I will discuss the ethical and political implications of this view of psychiatric diagnosis through the lens of a particular case of injustice – the denial of autistic agency and the use of violence against autistic individuals by family members and caretakers.

## Ch. 5: Autpocalypse & Filicide

*Content warning: Discussion of murder, suicide, sexual violence, and child abuse*

Alex Spourdalakis was fourteen years old when his mother and grandmother murdered him for being autistic. When he was two years old, his family first noticed symptoms – a lack of speaking and “strange behaviors.”<sup>166</sup> At her trial his mother stated, “He couldn’t focus, he had trouble doing things like he normally would. The person we knew up until now... something was wrong.”<sup>167</sup> In June 2013, she and his grandmother drugged and stabbed him repeatedly before attempting suicide, saying in their suicide note, “Alex will not be neglected and abused by the medical community anymore... Alex will not be treated as less than human... Alex will not have to suffer anything, anymore.”<sup>168</sup> They were convicted of involuntary manslaughter and were imprisoned, being sentenced to four years.<sup>169</sup> The case of Spourdalakis is one of ableist violence and the denial of autistic humanity and is intimately linked to the social roles assigned to autistic individuals and their families and caretakers and the actions that they license.

Before the murder, Spourdalakis and his family were filmed by a documentary crew led by Andrew Wakefield. Wakefield is the primary originator of the fraudulent claim that vaccines cause autism.<sup>170</sup> According to Wakefield, autism results from a novel type of enterocolitis, or inflammation of the digestive system, that he called “autistic enterocolitis” and which he claimed

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<sup>166</sup> ABC 7 Chicago, “ABC7 Exclusive: Alex’s Story,” ABC 7 Eyewitness News, ABC, Dec. 16, 2014: <https://abc7chicago.com/alexs-story-alex-spourdalakis-dorothy-agatha-skrodzka/439605/>.

<sup>167</sup> Ibid.

<sup>168</sup> Ibid.

<sup>169</sup> Autistic Self Advocacy Network, “Statement on the Sentencing of Alex Spourdalakis’ Murderers,” ASAN, Autistic Self Advocacy Network, Dec. 12, 2016: <https://autisticadvocacy.org/2016/12/statement-on-the-sentencing-of-alex-spourdalakis-murderers/>.

<sup>170</sup> The history of Wakefield’s activities is discussed in Brian Deer, *The Doctor Who Fooled the World: Science, Deception, and the War on Vaccines* (Baltimore, MD: Johns Hopkins University Press, 2020).

was caused by the MMR vaccine.<sup>171</sup> Though there is a correlation between digestive symptoms and autism, there is no evidence that “autistic enterocolitis” exists or that digestive problems or vaccines cause autism.<sup>172</sup> Wakefield would eventually be investigated by the British General Medical Council (GMC) for misconduct, such as misrepresenting his finding and engaging in ethically irresponsible research, including the use of unnecessary, invasive medical procedures on autistic children.<sup>173</sup> Despite this, his views gained traction in parent communities, leading to parents not vaccinating their children or using unproven and even dangerous treatments for autism.

The narrative that Wakefield supported is directly linked to the murder of Alex Spourdalakis. In the time immediately preceding the murder, his mother and grandmother attempted to find a hospital to treat the inflammatory bowel disease (IBD) that they were convinced – following Wakefield’s views – had caused his autism. They claimed that no hospital in New York would treat his assumed IBD until changes were made in his behavior. Polly Tommey, a representative from Wakefield’s production, stated about Spourdalakis’ mother, “...she just couldn’t take seeing her son in pain anymore and seeing no future for him, and there was no help for him.”<sup>174</sup> Wakefield would eventually publish his film, titled *Who Killed Alex Spourdalakis?* in which he blamed the medical system for the murder and implied that the case was a natural result of autism, stating, “This is not the future for Alex. It should never be the future for any child, this

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<sup>171</sup> Andrew Wakefield, et al., “Enterocolitis in Children with Developmental Disorders,” *American Journal of Gastroenterology* 95 (Sep. 2000), no. 9: 2285-2295. This article was later retracted, with the contributors besides Wakefield distancing themselves from its arguments.

<sup>172</sup> E. Fombonne & S. Chakrabarti, “No Evidence for a New Variant of Measles-Mumps-Rubella-Induced Autism,” *Pediatrics* 108 (Oct. 2001), no. 4: e58.

<sup>173</sup> Brian Deer, *The Doctor Who Fooled the World*. Also see: Douglas Opel, et al. “Assuring Research Integrity in the Wake of Wakefield,” *British Medical Journal* 342 (2011): d2.

<sup>174</sup> ABC 7 Chicago, “ABC7 Exclusive: Alex’s Story.”

condition.”<sup>175</sup> For Wakefield and others, autism was already a living death, or even something worse than death, so the murder of autistic individuals could be justified. This is core to what the autistic theorist M. Remi Yergeau calls “autpocalypse,” or the denial of autistic futurity, communication, and humanity.

In this chapter, I will connect the Spourdalakis case to autpocalypse and the wider problem of filicide. Filicide is the murder of persons by their parents, though it is commonly extended to other family members and caretakers as well. It is especially a problem in the case of disabled persons, including people with autism, who are many times murdered by their parents or caretakers for reasons that are considered “altruistic” or even beneficial by the perpetrators of the crime. In the case of autism, this is directly linked to autpocalypse, the cultural narrative that autism negates a child’s future, that autism is an essentially negative condition that inherently undermines the flourishing and life trajectory of a person, and which implicitly denies the relevance (or even existence) of autistic adults and the independence of autistic persons.<sup>176177</sup> Autpocalypse is the horizon of death that is assumed to face autistics by an ableist social context, and which is used in the justification of murder, torture, and abuse. During this chapter, I will connect this narrative and problem to previous chapters by showing how the ontogenetic and interpellative effects of psychiatric diagnosis can combine with an ableist ideology and social structure to unjustly restrict the self-authority and behavior of autistic individuals while licensing violence and discrimination against them. In doing so, I will (1) analyze the history of the autpocalypse narrative and its use in justifications of filicide or abuse, (2) consider how

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<sup>175</sup> Andrew Wakefield, *Who Killed Alex Spourdalakis?*, directed by Andrew Wakefield (2015; Disinformation Studios), video.

<sup>176</sup> M. Remi Yergeau, *Authoring Autism: On Rhetoric and Neurological Queerness* (Durham, NC: Duke University Press, 2018), 34.

<sup>177</sup> This definition of autpocalypse and its historical reconstruction are also influenced by Yergeau’s blog post “Autpocalypse” on their blog *Autistext*: M. Remi Yergeau, “Autpocalypse,” M. Remi Yergeau, *autistext*, March 4, 2017: <http://autistext.com/2017/03/04/autpocalypse-then-autpocalypse-now/>.



psychiatric diagnosis as an ontogenetic interpellative speech act contributes to this history, and (3) explain the resulting oppression in terms of illocutionary subordination and silencing.

Though these unjust effects are not specific to autism, I will use autpocalypse and autistic filicide as case studies to analyze the ethical implications of psychiatric diagnosis as an ontogenetic interpellative speech act.

### **A Short History of Autpocalypse**

I will begin by analyzing the concept of autpocalypse, providing a genealogy of the narrative and a short history of cases of autistic filicide and the reasons used in their justification. I will begin with a conceptual overview of autpocalypse. Autpocalypse is a term introduced by M. Remi Yergeau in their book *Authoring Autism*. It refers to a set of cultural narratives that present autism as equivalent to, or worse than, death.<sup>178</sup> The implications of this narrative are (1) that autism is inherently harmful, (2) that autism is something to be cured, (3) that living with autism is worse than death in many cases, and (4) that there is no future for autistic persons. For Yergeau, autpocalypse is part of the presumed arhetoricity of autistic persons – that is, a presumed inability on the part of autistic individuals to communicate their intentions, desires, and needs and to incorporate this into a life plan.<sup>179</sup> Yergeau contends that this assumption is not only false but also leads to other forms of oppression and violence, including filicide, harmful or coercive medical treatments, and discrimination. To understand autpocalypse, however, we need to consider the phenomena that Yergeau is drawing from – namely, the history of autism as a diagnosis and its cultural representations.

The origins of autism as a diagnosis lie primarily in two sources: (1) Leo Kanner and (2) Hans Asperger. Though there were persons with autistic traits before the development of the

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<sup>178</sup> Yergeau, *Authoring Autism*, 34.

<sup>179</sup> *Ibid.*, 52-60.

diagnosis, they were not identified with a common category, instead typically being grouped with other disabled or outcast people. Kanner, an American psychiatrist, coined the term “infantile autism” as a reference to the Greek “*autós*,” meaning self, as Kanner argued that one of the central features of autism is “aloneness” or a desire for isolation and self-preoccupation<sup>180</sup> However, the term “autism” was used prior to Kanner in connection with schizophrenia and early on autism was associated with childhood schizophrenia.<sup>181</sup>

The etymology of “*autós*” is important for understanding the phenomenon of autpocalypse. Deriving from Kanner and Asperger, mid-century narratives of autism emphasized the isolation of patients, with this isolation being tied to a lack of parental (and especially maternal) care and attention.<sup>182</sup> This explanation has now been superseded in the medical literature.<sup>183</sup> However, the connection seeped into the public consciousness and led to tropes such as “refrigerator mothers,” which referred to the supposedly “icy” or “cold” mothering that was presumed to lead to autism.<sup>184</sup> This had a profound impact on future narratives and treatment of autism as it tied the condition to an assumed lack or mistake by the parents, making the parents morally liable for their child’s autism. During the mid and late 20<sup>th</sup> century, autistic traits were characterized as reflections of abnormal or harmful parenting, which were presumed to lead to the child’s insular personality, insistence on routine, and repetitive behaviors. The psychoanalyst Bruno Bettelheim, himself a survivor of the Auschwitz concentration camp, would extend this metaphor by comparing autism to the Holocaust. He states, “The difference between the plight of prisoners in a concentration camp and the conditions which lead to autism and schizophrenia in children is...

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<sup>180</sup> Leo Kanner, “Autistic Disturbances of Affective Contact,” *The Nervous Child* 2 (1943), no. 4: 217-50.

<sup>181</sup> Roland Kuhn & Charles Cahn, “Eugen Bleuler’s Concepts of Psychopathology,” *History of Psychiatry* 15 (2004), no. 3: 361-366.

<sup>182</sup> Stuart Murray, *Autism*, 53-58.

<sup>183</sup> *Ibid.*

<sup>184</sup> *Ibid.*

that the child has never had a previous chance to develop much of a personality.”<sup>185</sup> For Bettelheim, the autistic is trapped in their world, a world that has little care, warmth, or development opportunities and which mirrors some of the most profound evils and tragedies in human history. This metaphor helped cement the ethical core of the autpocalypse narrative, seeing the “curing” of autism as a moral requirement that is centered on the parents, understood as the causal agents of the condition.

The attempt to cure or modify autism developed into Applied Behavioral Analysis (ABA) through the work of Ole Ivar Løvaas, who used principles of behavior modification and operant conditioning to suppress autistic behaviors in children.<sup>186</sup> It is one of the primary interventions used for autistic children today, though it has faced growing opposition from the autism rights movement, primarily on the grounds it punishes and marginalizes autistic behavior and causes long-term harm through masking, or hiding the characteristics of autism.<sup>187</sup> Notably, ABA is connected to other controversial or unethical therapies, including LGBTQIA+ conversion therapy. Løvaas helped develop conversion therapy for gender non-conforming children, using similar methods as ABA, to supposedly prevent homosexuality in later life.<sup>188</sup> Løvaas also used pain and discomfort as an enforcement mechanism, subjecting autistic children to electroshocks for displaying autistic behavior, such as hand-flapping.<sup>189</sup> Though contemporary ABA is different from that developed by Løvaas, many autistic rights advocates consider ABA to be unethical.<sup>190</sup>

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<sup>185</sup> Bruno Bettelheim, *The Empty Fortress: Infantile Autism and the Birth of the Self* (New York City, NY: Free Press, 1972), 68.

<sup>186</sup> Ole Ivar Løvaas, “Behavioral Treatment and Normal Educational and Intellectual Functioning in Young Autistic Children,” *Journal of Consulting and Clinical Psychology* 55 (1987), no. 1: 3-9.

<sup>187</sup> Autistic Self Advocacy Network, et al., “For Whose Benefit? Evidence, Ethics, and Effectiveness of Autism Interventions,” ASAN, n.d.: <https://autisticadvocacy.org/policy/briefs/intervention-ethics/>.

<sup>188</sup> Yergeau, *Authoring Autism*, 110-113.

<sup>189</sup> Ibid.

<sup>190</sup> Autistic Self Advocacy Network, et al., “For Whose Benefit?”

The reason that ABA and Løvaas are important for the autpocalypse narrative is that it grounds responses to autism in behavioral modification, which many times incentivizes or justifies the use of force and coercion. If autism is an inherently harmful condition caused by bad parenting, and the parents have a moral obligation to eliminate or alleviate the traits of autism, then ABA becomes a model by which to do it. I will not in this chapter argue whether ABA is inherently harmful, or whether there are elements that can be salvaged. What matters for my purposes is that the behavioral modification methods used in ABA, including the forceful and coercive methods of Løvaas, influenced the actions that parents took toward their autistic children. Whether or not ABA constitutes abuse in general, the misapplication of ABA methods led directly to actions of abuse, including filicide, which I will now turn to.

### **The Problem of Filicide**

One of the primary ethical problems that autpocalypse leads to is the engendering of unethical and harmful actions towards autistic people – namely, filicide. Filicide is the killing of a person by their parents, though it may be extended to include murders by other caretakers, whether familial or not. Though filicide can occur for many different reasons, there is a particular problem with the filicide of disabled persons by their families and caretakers.

According to the scholar Philip Resnick, there are five main motivations for filicide, two of which are most pertinent for discussions of autistic filicide – fatal maltreatment and altruism.<sup>191</sup>

In the case of fatal maltreatment, the perpetrator may not intend to murder the victim, but may instead cause their death during another type of mistreatment. This may include attempts by the caretaker or family to “cure” or “relieve” the condition of the victim, with these attempts many times being coerced, not medically approved, and ultimately fatal. An example of these

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<sup>191</sup> Philip Resnick, “Child Murder by Parents: A Psychiatric Review of Filicide,” *The American Journal of Psychiatry* 126 (Sep. 1969), no. 3: 325-334.

cases is the pseudoscientific use of chelation therapy in the treatment of autism.<sup>192</sup> Chelation therapy is the administering of chemical chelation agents to a patient to remove heavy metal toxins from their body. This is beneficial in the case of actual poisoning; however, it is sometimes applied to autistic children based on a false belief that autism is caused by the presence of heavy metals.<sup>193</sup> When chelation therapy is applied to individuals without heavy metal toxicity it can cause serious consequences, including liver damage, kidney damage, and death. Cases of death by improperly applied chelation therapy are examples of fatal maltreatment because the intention of the family or caretaker is not to kill the victim, but death is unintentionally brought about through improper treatment.

Altruism is also a common motivator for the filicide of disabled persons, including people with autism. In these cases, the family or caretaker assumes that they are benefitting the victim through ending their life, typically without input from the victim themselves and based on the family's or caretaker's assumptions as to the experience of the condition.<sup>194</sup> The Alex Spourdalakis case is an example of this, as his mother and grandmother argued they were alleviating his suffering through their violence. However, another case that might be instructive here, especially as it influenced later discussions and justifications of filicide, is that of Mary Callahan and her book *Fighting for Tony*. Callahan did not murder her child, but the reasons she provides in the book for her coercive and many times violent treatment of her child for his autism profoundly affected the cultural narrative surrounding anti-autistic violence and similar reasons feature in later cases of filicide.

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<sup>192</sup> Wendy Weber & Sanford Newmark, "Complementary and Alternative Medical Therapies for Attention-Deficit/Hyperactivity Disorder and Autism," *Pediatric Clinics of North America* 54 (Dec. 2007), no. 6: 983-1006.

<sup>193</sup> Ibid.

<sup>194</sup> Mark Palermo, "Preventing Filicide in Families with Autistic Children," *International Journal of Offender Therapy and Comparative Criminology* 47 (Feb. 2003), no. 1: 47-57.

According to Yergeau, one of the ways that autpocalypse is circulated is through centering and popularizing stories of parental frustration and abuse, at the expense of those harmed.<sup>195</sup><sup>196</sup> In Callahan's book, she recounts her struggle with her son's autism and the controversial treatments she used on him. She claimed that her son was "cured" of his autism through food deprivation, incorporating both the negative and positive reinforcement techniques of ABA and the pseudoscientific focus on diet that was beginning to take shape and which would influence the work of Andrew Wakefield.<sup>197</sup> *Fighting for Tony* was a prominent parent narrative on autism and gained positive recognition when it was released, with Callahan appearing on talk shows including *Oprah* and *The Phil Donohue Show*, and receiving praise from the founder of the Autism Society of America.<sup>198</sup> However, as already implied, there were serious ethical issues with Callahan's and her husband's treatment of their son. When Tony had trouble sleeping as a small child, she recounts using violence against him, including slamming him into a bed and slapping him, with this violence eventually turning into explicit threats on his life.<sup>199</sup> These threats are not idle, as Callahan recounts her husband discussing how he is not sure he could stop himself from murdering Tony if he begins spanking him.<sup>200</sup> At one point in the book, Callahan and her husband discuss the possibility of murdering Tony, justifying it by saying, "We'd know we did it for him," a paradigmatic case of altruistic filicide.<sup>201</sup> Eventually, Callahan claims that Tony "recovered" from his autism through dietary changes, including eliminating dairy. This is likely not the case and may have been a mistaken identification of masking.

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<sup>195</sup> Yergeau, *Authoring Autism*, 2.

<sup>196</sup> Yergeau, "Autpocalypse."

<sup>197</sup> Ibid.

<sup>198</sup> Ibid.

<sup>199</sup> Mary Callahan, *Fighting for Tony* (New York City, NY: Fireside Books, 1987), 51.

<sup>200</sup> Ibid., 52.

<sup>201</sup> Ibid., 59.

Though Callahan’s perspective may seem extreme, the positive attention that she and her book received at the time would influence later justifications of parental and caretaker violence. One of the most prominent advocates for such justifications has been Autism Speaks (AS). AS is a charity that focuses on autism medical research, viewing autism as a disease rather than a natural difference that should be resolved through medical interventions.<sup>202</sup> Originally, their focus was on finding a cure for autism. Though this has been removed from its mission statement, it remains part of AS’s efforts and the goal has been defended by the organization.<sup>203</sup> However, what matters for our purposes is AS’s involvement in the justification of violence against autistic persons.

In a film titled *Autism Every Day*, Alison Singer, former vice president of Autism Speaks and current president of the Autism Science Foundation, stated that she considered murdering her autistic daughter.<sup>204</sup> The film focused on the relationship of parents and their autistic children, but through the lens of its supposed negative effects on families. In pursuance of this goal, the filmmakers instructed participants to exaggerate the conditions that they lived in and the anxieties that they faced. Though it is clearly the case that having a child with autism can come with challenges, this extreme representation had the effect of implicitly justifying violent acts by the parents, with Singer being framed as contemplating murder out of love, being concerned for her daughter’s life in the education system. Singer herself later stated that she should have worded her concerns differently.<sup>205</sup> However, her statements have been causally linked to at least one case of filicide, that of Katherine “Katy” McCarron, who was murdered by her mother just

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<sup>202</sup> Autism Speaks, “About Us,” Autism Speaks, n.d.: <https://www.autismspeaks.org/about-us>.

<sup>203</sup> Liz Feld, “A Call for Unity,” Autism Speaks, Aug. 25, 2015: <https://web.archive.org/web/20180615032203/https://www.autismspeaks.org/blog/2015/08/25/call-unity>.

<sup>204</sup> Allison Singer, *Autism Every Day*, directed by Lauren Thierry (2006; Autism Speaks), video.

<sup>205</sup> Alison Singer, “Speaking Out About ‘Autism Every Day,’” ASF Blog, Autism Science Foundation, Sep. 9, 2009: <https://autismsciencefoundation.wordpress.com/2009/09/09/speaking-out-about-autism-every-day/>.

days after the release of the film.<sup>206</sup> The struggles of parents with autistic children, including conditions like those presented in the film, were used as legal justifications for the mother's actions. Whether or not her mother was herself motivated by autpocalyptic considerations, the narrative that surrounded the case mirrored that found in *Autism Every Day* and the pathologizing rhetoric of *Autism Speaks*, showing a link between violence and assumptions as to the nature of autism.

### **Autpocalypse & Diagnosis**

Now that I have analyzed cultural depictions of autpocalypse and their relationship to cases of violence and oppression, I will offer a view of how psychiatric diagnosis as an ontogenetic interpellative speech act can contribute to this relationship. This model will be rooted in (1) the theory of social roles that I offered in chapter three, (2) Lynne Tirrell's theory of action-engendering speech, and (3) Rae Langton's theory of illocutionary silencing. My contention is that, through placing autistic persons and their families and caretakers into social roles that are conditioned through ableist ideological narratives like autpocalypse, autistic individuals are illocutionarily silenced from making certain communicative and self-authoritative speech acts and families and caretakers are licensed to commit violent and abusive acts against these individuals, including filicide.

I will start by reviewing the concept of a social role and how it relates to behavior. Social roles are patterns of positions in a social structure that correspond to sets of prescribed, prohibited, and permitted behavior for anyone in those positions. A social structure is a network of nodes in which individuals are positioned in relation to other persons, objects, institutions,

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<sup>206</sup> Meg Breslin, "Daughter's Murder Puts Focus on Toll of Autism," *Chicago Tribune*, June 9, 2006: [https://web.archive.org/web/20141113005720/http://articles.chicagotribune.com/2006-06-09/news/0606090155\\_1\\_autistic-children-autism-society-katie/2](https://web.archive.org/web/20141113005720/http://articles.chicagotribune.com/2006-06-09/news/0606090155_1_autistic-children-autism-society-katie/2).



norms, practices, and processes. Many times, these nodes correspond to social kinds and roles, with kinds referring to the partition of the world used in explanations of the type of entities in the world and roles being a pattern of expected behavior that may be associated with these kinds. Typically, for roles to be recognized and repeated there needs to be a kind that corresponds to the role, so that persons inhabiting the role can be explained as doing so through the kind. Whenever someone is identified with a social kind, they are many times identified with a role. This is common with social identities such as race, class, sex, gender identity, disability, etc., though it can in principle apply to any social kind that a person may inhabit. Because of this, the identification of someone as a kind can result in changes to their prescribed, permitted, and prohibited behaviors, corresponding to the role associated with that kind. As I have argued in a previous chapter, this occurs in psychiatric diagnosis, where diagnostic kinds are associated with behavioral expectations of persons that exemplify those kinds.

One way to model these behavioral effects is through language games, especially the language-entry, language-language, and language-exit transitions described by Wilfrid Sellars.<sup>207</sup> Because social roles are patterns of nodal positions in a social structure, they are traceable in any conversational context where that position is relevant and known by interlocutors. This means that in iterated conversational contexts, so long as knowledge of the social role passes among interlocutors, the actions that an individual can perform in those contexts are replicated and perpetuated through time. The behaviors prescribed, permitted, and prohibited to the individual based on their social role are a set of limitations, expectations, and abilities that the individual holds in any conversational context where the role is known and relevant. These actions can be understood through Sellars' taxonomy.

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<sup>207</sup> Wilfrid Sellars, "Some Reflections on Language Games," 323-358.

According to Sellars, moves, or transitions, in a language game are either language-entry, language-language, or language-exit transitions.<sup>208</sup> Language-entry transitions move an individual from a position outside a game to a position within the game, which then affects what actions the individual can take in that game. In the context of social roles, the identification of someone as part of a role (or a kind associated with a role) may be understood as a language-entry transition, in the sense that it positions a person within a game and structures the set of actions available to them. Language-language transitions are actions within a game that modify its context, such as illocutions that are made by different parties to the game, which might be recorded in what David Lewis calls the conversational scoreboard.<sup>209</sup> The illocutions recorded in the scoreboard modify the game and the relationships between interlocutors, thereby modifying what actions are available to any individual affected by that change. The set of permissions, prescriptions, and prohibitions available to a role might (at least in many cases) be understood as the set of language-language transitions available to an individual given the language-entry transition of their identification as part of a given social role. Language-exit transitions, then, move an individual from a position inside a game to a position outside of it, modifying the external actions available to, and even licensed for, the individual, which may be modified by actions taken within the game. Because of this, language-exit transitions help trace the actions engendered by speech acts, which I will discuss in a moment. Understood in terms of these transitions, a social role corresponds to those moves or transitions that are prohibited, permitted, or prescribed to any individual in any conversational context where that role is known and relevant. Identification of a person with a social kind, such as in psychiatric diagnosis, can

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<sup>208</sup> Ibid.

<sup>209</sup> David Lewis, "Scorekeeping in a Language Game," 345

therefore modify the actions available to a person through modifying the moves or transitions they are able to make in iterated language games.

This model can be used to understand how psychiatric diagnosis, combined with an ableist ideological context, can result in oppressive limitations to the actions available to individuals (such as in autpocalypse) or engender violence against those individuals (such as in filicide). The former phenomenon is best understood through Rae Langton's concept of silencing, or illocutionary disablement, while the latter is best understood through Lynne Tirrell's notion of action-engendering speech. According to Langton, certain speech acts, such as those occurring in or constituted by pornography, can "silence" individuals by blocking the proper uptake of illocutions that they make, rendering it impossible for them to make those illocutions.<sup>210</sup> Langton's primary example is the silencing of women through pornography, where the presentation of women undermines and silences the ability of women, in general, to refuse sex with a man. This means, effectively, that pornography limits the ability of women to express their consent or non-consent for sexual behavior, engendering acts of rape through ignoring the illocutionary force of statements or gestures made by women.

This concept of illocutionary silencing, however, can also be applied to autpocalypse. Representations and narratives like those I discussed above are similar to Langton's model of pornography in that they present tropes that undermine the real-world ability of persons identified with those tropes to successfully make certain illocutions. For example, by presenting autism as inherently harmful, it becomes more difficult, if not impossible, for an individual to refuse interventions or to communicate their own needs and desires. This is especially the case when combined with a denial of autistic communication as communication at all, particularly

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<sup>210</sup> Rae Langton, "Speech Acts and Unspeakable Acts," *Philosophy and Public Affairs* 22 (1993), no. 4: 314-315.

when an individual is non-verbal. Because their communication is not accepted as communication, they are unable to perform illocutions that they intend or desire and what they communicate may be ignored. This inability to perform illocutions or to communicate intentions and desires leads directly to violent and discriminatory behavior on the part of others because it undermines the ability of individuals to refuse that behavior by discounting their communication as communication. Because of this, like how in Langton's model a woman is unable to refuse sex because of the illocutionary silencing engendered by pornography, autistic persons become unable to refuse coercive and violent behaviors, such as forced treatment, electroshocks, and restraints because of apocalyptic narratives. Though diagnosis of autism is not inherently tied to these practices, and is likely not inherently silencing, because of the social context in which that diagnosis takes place it has the effect of modifying the social role that an individual inhabits, and, through this, silencing illocutions performed by them.

While apocalyptic narratives restrict the illocutions that autistic persons can make, they also engender actions by others. Not only are autistic individuals unable to refuse coercive and harmful treatment, but these narratives license and even justify others taking these actions. Action-engendering speech is discussed by Lynne Tirrell in "Genocidal Language Games," where she discusses how the use of the term "inyenzi" (cockroach) influenced the genocide of Tutsis by Hutus in Rwanda.<sup>211</sup> According to Tirrell, operating from an inferential role semantics model, the repeated use of dehumanizing language can engender violent actions in listeners through inferentially connecting the persons targeted by the language with the traits and inhumanity associated with the term. In the case of the term "inyenzi," an inferential connection is made between the Tutsis and cockroaches, with Tutsis being dehumanized as a result and

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<sup>211</sup> Lynne Tirrell, "Genocidal Language Games," In *Speech and Harm: Controversies Over Free Speech*, ed. by Ishani Maitra & Mary Kate McGowan, (Oxford, UK: Oxford University Press, 2012) 195-196.

murderous action being licensed against them, similar to how the killing of a cockroach is assumed as natural and justified. In the Rwandan genocide, this led to Hutu individuals committing atrocities that they likely would not have done prior.

In the case of autism, autpocalyptic narratives are like the term “inyenzi” in that they engender violent, coercive, and discriminatory behaviors against autistic individuals, even for persons who are not otherwise violent or prejudiced. For example, autpocalyptic assumptions about the inability of autistic persons to communicate mean that individuals with authority over those persons do not provide the proper uptake when the autistic individual seeks to reject an action. This incentivizes those with authority to use methods that would not be accepted in other contexts, such as using forced restraints on a child in an educational setting. Even in cases where the autistic person may be trying to communicate a need or to express a desire, the communication cannot succeed because the persons receiving the communication do not recognize it as legitimate. Instead, the communication itself is pathologized in autpocalyptic narratives, seeing “acting out” as a medical problem to be forcefully resolved. This is even the case for more innocuous forms of autistic communication, such as hand-flapping, which is used by autistic persons to communicate both happiness and stress, but which is many times coercively discouraged in ABA and not considered legitimate.<sup>212</sup> The repetition of autpocalyptic narratives establishes an inferential relationship between the autistic individual and tropes about their non-communicativeness and suffering, incentivizing actions by non-autistic agents that restrict communicative behaviors or suppress autistic traits.

On the extreme end of this is filicide. If it is repeated to the point of presupposition that (1) autistic persons cannot communicate legitimately and (2) that autism is an inherently harmful

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<sup>212</sup> This is pervasive enough that, in my personal experience, many individuals who come to accept and value their autism put a high value on the first time they can hand-flap freely.

condition that must be forcefully suppressed or eliminated, then a strong inferential connection is made between autism and the justification of violence. In cases of non-fatal abuse, this may look like behaviors being suppressed through force or deprivation, including the food deprivation utilized by Mary Callahan and others, with any communication on the part of the autistic individual ignored. However, in cases of filicide, this is combined with a pseudo-altruistic assumption that the autistic individual is suffering, whether or not this is the case, and that *if* they were able to communicate, they would request death. Therefore, persons who commit filicide against autistic individuals can claim that they “did it for them,” typically referring to a mythical non-autistic individual that is imagined hiding behind the autistic exterior. To use Bruno Bettelheim’s metaphor, if autism is a concentration camp, then the only proper response is to “liberate” the camp, which entails killing the person with autism as a way of “killing” autism itself. Autpocalyptic narratives contributed to the killing of Alex Spourdalakis because it inferentially connected him in the minds of his family to suffering and a lack of communication that engendered a violent response.

In terms of psychiatric diagnosis, this process of action-engendering on the part of autpocalyptic narratives can be seen as centering on the kind membership of diagnosed individuals, with families and caretakers being interpellated into behavior associated with their roles, which includes an inferential association with autpocalyptic narratives and, therefore, with violence. If psychiatric diagnosis is an ontogenetic interpellative speech act, then diagnosing a person as autistic results in them being ontogenetically instantiated as a member of the social kind “autism,” which corresponds to a social role that may be illocutionarily silenced from performing communicative and self-authoritative acts. However, even as the person diagnosed with autism is illocutionarily silenced through their social role – even in cases where there is no

intention or desire on the part of the clinician to make this connection – family and caretakers may be interpellated into their associated role, namely, being a caretaker or parent for an autistic person. Since social roles correspond to nodal positions in a social structure, then these positions include relationships with individuals in other roles, with these relationships governing behaviors that occur between the two. In the structural relationship between the autistic individual and the caretaker, the former is limited in the illocutions they can make towards the latter, but the latter is able to take more forceful and violent measures against the former. Because of this, whenever a person is diagnosed with autism, the illocutions that they can make are limited while the illocutions authoritative others can make towards them are expanded, even to the point of licensing violence.

### **Conclusion**

In 2018, I attended the Autistic Campus Inclusion (ACI) conference held by the Autistic Self Advocacy Network (ASAN). I was a fellow with ASAN at the time. Though the explicit aim of the conference was to train autistic self-advocates in higher education, another implicit aim was to create a temporary space in which autistic individuals existed among each other and were therefore partially liberated from ableist ideological assumptions. Many of us had experienced violence or lost loved ones because of the same ableist processes described above and it was one of the first times where our communication was seen as legitimate. Hand-flapping and echolalia were common and embraced.

The problems of autpocalypse and filicide are simultaneously structural, ideological, social, personal, and practical. They are the results of a social structure that places authority in the hands of clinicians at the expense of patients, which ideologically enforces ableist assumptions about the abilities and experience of disabled persons, and which incentivizes group

and individual behaviors toward autistic persons that are violent, oppressive, or discriminatory. Because of this, the resolution of these problems requires a multi-pronged approach. The reality of the above problems does not mean that we should abandon autistic diagnoses – autism is an important identity to many, including myself, and diagnoses are important in accessing resources and accommodations. However, it does mean that we should challenge ideological assumptions that cause oppressive outcomes from these diagnoses, that we should center the communication of autistic persons when it comes to the rights and experience of autistic people, and that medical institutions should be reformed to reflect the self-authority of patients more accurately, seeing them as collaborators in the diagnostic process, rather than as inert objects.

Psychiatric diagnosis is ontogenetic and interpellative; however, ontogenesis and interpellation are not necessarily unethical or harmful phenomena. A person can be ontogenetically instantiated as part of a kind that affords them community, which expands their available actions and life trajectories, and which is incorporated into their self-concept as a positive social identity. Likewise, interpellation can fulfill an important function in signaling ethical or polite social behavior through signaling the obligations that individuals have towards others. However, when these processes are combined with an ideological background that deprivileges the communication and humanity of certain individuals while privileging the authority of others, they can lead to the unjust and oppressive results discussed above – violence, abuse, and silencing.



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