The mind body problem a reaction paper philosophy essay



The mind-body problem has been discussed by philosophers and scientists for hundreds of years. The crux of the mind-body problem is that humans have a subjective experience of an inner life or consciousness that seems removed from the physical world. Despite a subjective experience of a separation between mind and body, mind and body need to interact in some way. Exactly how the mind and body interact is the subject of intense controversy. At the beginning of this course, I knew that my views on the mind-body problem leaned more toward monism, but I did not have a clear rationale for my position. Given the complexity of the mind-body problem, I expected that both dualism and monism would have limitations, and the challenge for me would be to choose a position whose limitations I could reconcile. Some people in my cohort approached this assignment with a lot of passion for their beliefs. To me, the mind-body problem is not an unsettling or emotional matter. So, I approached it in terms of which position had the best evidence.

The more I learned about dualism (as conceived only by Descartes, given the length of this paper), the more overwhelming its flaws appeared. First, there is a lack of consensus over an identifiable point of interaction between mind and body. Dualism also violates the law of conservation of energy, in that the mind (which is conceived as a non-physical entity) must need to generate energy in order to move the body, but energy can only be transferred from one physical system to another (Cofer, 2002). Furthermore, the dualist position separates the activity of the mind (which is conscious) from the electrical activity of the brain. However, experiments by Wilder Penfield (1952) revealed that electric stimulation of the brain can elicit emotional

experiences, memories, and movement, all without conscious volition. On a related note, brain injuries may also damage the mind, unlike injuries to other parts of the body. In the past few decades, the field of psychology has advanced more neurochemical etiologies of mental disorders, and Descartes' dualism could not explain how a neurochemical abnormality injures the non-physical mind (Churchland, 1988). Finally, dualism is not a testable hypothesis (Cofer, 2002), and therefore I cannot accept it as scientific.

The monist position, specifically monist materialism, circumvents many of the aforementioned flaws of dualism. Monist materialism maintains that all subjective states, such as consciousness, can be reduced to neuronal activity. People with religious convictions may find monist materialism to be objectionable, because reducing consciousness to a neural signature discredits the notion of free will. However, recent research indicates that brain activity and muscle movement precede conscious decision-making, which clearly supports monist materialism (Libet, Gleason, Wright, & Pearl, 1983). Since I am not a religious person, I do take issue with monist materialism's stance on free will. In terms of consciousness, I did not think that any of the assigned philosophers did a great job explaining why consciousness could absolutely not be the product of neurons and synapses. I thought that John Searle articulated the monist materialist position very coherently, in that consciousness is spatially localized to the brain. In fact, David Chalmers, in discussing correlational research that links certain subjective experiences to specific brain areas, actually strengthened John Searle's argument, in my opinion. I think that John Searle's argument about consciousness was elegant, in that consciousness does not exist without

brain activity. Therefore, one could infer that brain activity has a causal impact on the experience of consciousness.

However, Dr. Mario Beauregard's video gave me some pause on the issue of consciousness, especially when he recounted the experiences of the American woman who was clinically dead, but aware of what her doctors were saying and doing to revive her. My instinct as someone with scientific training is to dismiss this anecdote as impossible. However, even if I give Dr. Beauregard the benefit of the doubt, I believe it is possible to reconcile such an unusual experience within the monist materialist paradigm. When I think about how much brain imaging has progressed in the past few decades and how much we truly do not know about brain activity, I imagine that it may be possible for brain activity to occur on some level for a few minutes after death, but that our means of measuring brain activity are not sophisticated enough to detect it. Since people in comas (who have very little measurable brain activity) can sometimes hear what is around them, I don't feel like this assertion is too much of a leap. Dr. Mario Beauregard's video also inspired a lot of reflection on the common experience of a "bright light" in near-death experiences. Dr. Beauregard regards this consensus as evidence of a spiritual life that is separate from brain activity. However, I would disagree. Researchers have argued that the experience of light can be the result of the brain losing oxygen (Alleyne, 2010), and that near-death experiences can be replicated in a laboratory environment (Jansen, 2000). So, Dr. Beauregard's reliance on the consensus of his subjects' experiences is, in my opinion, flawed.

In addition to the importance of the mind-body problem in understanding human experience and consciousness, the mind-body problem has important implications for mental illness. The dualist position on the origin of mental illness is, in my opinion, too complicated to be useful. The dualist tradition forces an ill-fitting dichotomy that mental illnesses are either diseases of the body (including neurochemical abnormalities in the brain) or diseases of the mind/will. Put another way, the dualist tradition considers mental illnesses to be either serious/organic (such as schizophrenia and bipolar disorder) or nonserious/inorganic (such as anxiety). I have a number of problems with this false dichotomy. First, this line of thinking could allow for stigmatization of individuals who have "less serious" mental illnesses, because a dualist may argue that their disorder is "all in your head" or easily controlled by the mind/will. This line of thinking was prevalent several decades ago with alcoholism, which was viewed as a moral deficiency or a lack of willpower, instead of as a serious mental illness. Second, this false dichotomy is inconsistent with patient experiences, as well as research on several psychological conditions that have multifactorial etiologies that entail both mental and neurological processes (such as panic disorder; Mosing et al., 2009). A third problem I have with this false dichotomy is that it implies that psychopathology caused by an organic etiology requires medication, whereas non-organic pathology needs psychotherapy (Cabaniss, 2001). This is not consistent with research indicating that psychotherapy can be effective even among individuals with schizophrenia who do not take psychotropic medications (Sensky et al., 2000).

On the other hand, the monist materialist view is more consistent with the mechanisms of effect in cognitive-behavioral therapy (CBT) and other evidence-based practices. The complex connections between emotion, cognition, behavior, and biology maintained by CBT are better conceptualized if all of these levels of analysis are contained within one system, instead of two systems that can sometimes interact. I understand that more modern takes on Descartes' dualism better account for this problem interactionism. However, at the end of the day, I consider myself a scientist who believes in Occam's razor, and the monist position just seems much simpler and better suited to what is known about reciprocal interactions between cognitions, emotions, physiological responses, etc.

In conclusion, the mind-body problem is too complex to be entirely explained by either the dualist or monist positions. As I considered the flaws in these positions, I found fewer and less serious limitations in monist materialism.

Monist materialism also appears most consistent with the type of therapy I practice and the research I have read in recent years, so I feel more comfortable adopting the monist materialist point of view than a dualist one.