In his comment to our paper (Moreira-Almeida & Araujo, 2017), Maung supports its two central points, namely, our critique of physicalism as the only game in town, and our call for theoretical pluralism in psychiatry (Maung, 2017). However, despite his favorable attitude, Maung seems to have misunderstood the underlying logic of our paper.

First, it was not our intention to present an exhaustive list of all available alternatives to physicalism in contemporary philosophy of mind. Instead, we sought to argue that, despite its widespread acceptance among psychiatrists, physicalism is problematic and far from being the only available option. To this end, a few up-to-date references are enough.

Were this the only point to be corrected in Maung’s comment, a rejoinder might be unnecessary.

A second misapprehension, though, calls for a response on our part. Misunderstanding how we construe the link between the critique of physicalism and the call for theoretical pluralism, Maung criticizes our argument as a non sequitur. As he states:

“I am not so confident that the latter methodological conclusion follows from the former metaphysical discussion. Ontological claims about fundamental metaphysics do not necessarily translate into methodological considerations at the level of practice. [...] Therefore, even if physicalism is false at the level of fundamental metaphysics, this does necessarily justify explanatory pluralism at the level of practice” (Maung, 2017, pp. 73-74).

Maung’s reasoning reveals not one, but two misunderstandings. First, we have never claimed that physicalism is false. On the contrary, we said, “Physicalism—be it in its reductive or non-reductive form—is certainly a plausible candidate to account for the MBP, but it is not the only one” (Moreira-Almeida & Araujo, 2017, p. 24). Second, our call for theoretical pluralism in psychiatry is based not on metaphysical premises, but on epistemological, methodological, and practical ones. Indeed, physicalism represents not only a metaphysical doctrine, but also a broad research program in philosophy and science, with epistemological, methodological, and practical consequences, as we have specified in the case of psychiatry (Moreira-Almeida & Araujo, 2017, p. 23). In this sense, we can recast our argument this way: because physicalism has been unable so far to offer an epistemic solution to the MBP and provide a satisfactory training model for psychiatrists, it is not reasonable to defend it as the only alternative (theoretical monism); therefore, theoretical pluralism, at least at this epistemic stage of psychiatry, is justified. In fact, it represents a broader and richer attitude at both theoretical and practical levels, including the scientific training of new psychiatrists.

Finally, Maung also seems to imply that we argue that metaphysics should guide the choice of a theoretical approach, which, according to him, “is better informed by the considerations of empirical adequacy, explanatory relevance, predictive strength, and therapeutic utility” (Maung, 2017, p. 74). Curiously, metaphysics is not included among the criteria we presented.
for theoretical choice in psychiatry: empirical adequacy, predictive accuracy, breadth of scope, simplicity, theoretical integration with correlated areas, and ability to predict new kinds of phenomena (Moreira-Almeida & Araujo, 2017, p. 24). In fact, these criteria are very close to those listed by Maung, which makes us wonder why he saw a metaphysical criterion in our proposal, and it is particularly difficult to understand his reasoning without specific textual support for his allegations.

REFERENCES