In Defense of Realism about Self–Illness Ambiguity

Self–illness ambiguity (SIA) is the difficulty of distinguishing "who I am" from "what my disorder does," voiced in claims like "It wasn't me; it was the illness" (Karp 1994; Sadler 2007). Recent constructivist and practice-oriented approaches suggest that SIA-talk lacks a discoverable target and functions mainly as narrative positioning within therapeutic and social practices (Jeppsson 2022; Ballesteros et al. 2025). I argue this is premature.

I defend moderate realism: in many cases there are objective facts about whether, and to what extent, an episode is illness-driven. This does not require sharp boundaries or discrete psychiatric natural kinds, only facts about agency-impairment that constrain correct attributions (Kendell & Jablensky 2003; Hyman 2010). Building on reasons-responsiveness approaches to mental disorder (Dembić 2023), I propose modeling these facts via counterfactual reasons-responsiveness relative to the agent's blueprint state: an episode is illness-driven insofar as the agent would have been more responsive to the relevant normative reasons if their psychological capacities were functioning as designed, ceteris paribus.

I then consider standard constructivist objections: "never-ending questioning" about symptom-vs-self, limited access to the "healthy self," and the charge that the distinction is irreducibly evaluative and socially shaped.