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Philosophical Conversations is designed to stimulate thought and discussion, and keep you philosophically active. The format will be the presentation of a brief position paper to which responses are encouraged. In the subsequent issues selected responses may be published in addition to a new position paper. We invite you to respond to this position paper either by contacting the author or the Department. (Address - mail and e-mail, and phone numbers and fax numbers are provided at the end of this issue).

Descartes and Psychopathology

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Descartes held that each of us has an intuitive awareness of self that is implicit in consciousness as such. However, I argue that, even if intuitive self-awareness is possible, no such awareness is implicit in consciousness as such. I further argue that this point, together with certain characteristics of consciousness in both normal and psychopathological cases, supports a distinction between mind and self. Of particular interest are data given in first-person reports of the fragility of people's sense of self in psychopathology (and outside psychopathology as well). Also important is the phenomenon of thought insertion. The cases I discuss all point to a need for an anti-Cartesian distinction between mind and self.

The Cartesian project, of course, was to renovate and ground human knowledge from a single individual's -- the enquirer's -- point of view. For Descartes, the problem was to discover what, if anything, he himself, or any other observant enquirer, could know with certainty. Solving this problem required that he attend, carefully and systematically, to salient characteristics of his own mental life, his conscious experience, as well as to the nature and extent of cognition. Descartes' first breakthrough (and the supposed foundation of all that was to come) consists of his *Cogito* 'proof' in the **Second Meditation**. Now it's easy to slip into viewing the *Cogito* as a deductive argument for the conclusion "I exist", but Descartes rules out such an interpretation in "The Reply to the Second Objections".¹ There he insists that "when someone says: 'I am thinking, therefore I am, or I exist, he does not deduce existence from thought by means of a syllogism, but recognizes it as something self-evident by a simple mental intuition of the mind' (CSM p. 127). Indeed, no enquirer can legitimately establish that he exists by appealing to "the major premiss 'Everything which thinks is, or exists'...". The reason for this, says Descartes, is that "he learns it [i.e. learns that he exists] from experiencing in his own case that it is impossible that he should think without existing" (CSM p. 127).

In other words, successful deployment of the *Cogito* rests on the enquirer's capacity for having an intuitive awareness of herself. More than that, Descartes is suggesting that intuitive awareness of oneself is generally *implicit within* conscious experience. The very having of experience suffices for one's intuitive discovery of self, provided that one attends to the experience.² This explains the wording of the *Cogito* itself: "I must finally conclude that this proposition, *I am, I exist*, is necessarily true whenever it is put forward by me or conceived in my mind" (CSM p. 80). Likewise, the implicit presence of self-knowledge in consciousness serves to explain Descartes' remarks a page or so after the *Cogito*: "I am, I exist -- that is certain. But for how long? For as long as I am thinking" (CSM p. 82). The point is that consciousness assures certain self-knowledge -- knowledge that the self exists -- because one's conscious experience *includes* an idea of oneself. One has only to *notice* it.

Near the end of the **Third Meditation**, Descartes says "the idea of myself" -- like that of God -- is "innate" (CSM p. 97). "Innate" does not mean *inborn*, but something more like *present in*. In a 1648 letter,³ Descartes emphasizes that our "intuitions" of self are "primary, unacquired...and certain" (A & G pp. 300 and 301). Knowledge that is "primary" and "unacquired" must somehow be present in us. That it is not inborn, however, comes out in an explanation of the term "innate" in Descartes' "Notes Directed Against a Certain Program" (1647).⁴ He writes that innate ideas, those that "proceed...solely from faculty of thinking within me", are innate "(i)n the same sense...that in some families generosity is innate, in others certain diseases like gout or stones, are innate, not that...the babies of these families suffer from these diseases in their mother's womb, but that they are born with a certain disposition or propensity for contracting them" (Ariew p. 288). Likewise, then, the idea of myself is "present" in my conscious experiences in the dispositional sense that, if I observe the content of my experiences, I will experience a "simple mental intuition" of myself, i.e. clear intuitive knowledge that I exist.

Descartes' various discussions of the self and self-knowledge constitute a paradigm of confident self-expression. But this contrasts starkly with the more or less failed attempts at self-description that we encounter in the utterances of persons afflicted by severe psychopathological states or conditions, notably, the schizophrenias. Some of these utterances tend to undermine the epistemological value of the *Cogito* by suggesting that intuitive awareness of oneself is *not implicit within* conscious experience, as Descartes alleged. Even if most of us (happily) possess what is in some good sense "intuitive" knowledge of our individual selves, it is doubtful that such knowledge is implicit within consciousness generally and doubtful that it "primary, unacquired...and certain".

In *Shattered Selves*⁵ the clinician James Glass analyzes a variety of pathological utterances of hospitalized patients suffering from thought disorders such as schizophrenia and Dissociative Identity Disorder (formerly "multiple personality"). These utterances convey these persons' sense of having lost their inner selves. As Glass remarks, these people "live without a history...in a placeless universe; the self without a sense of place, a history to call its own, an enclosure in community, a cohesive sense of its own internality: these kinds of 'selves' wander silently in the corridors of mental hospitals" (SS pp. 77-8). Patients such as those Glass conversed with lack "a cohesive sense of [the self's] own internality".

Only that would explain the 32-year-old Hilde's utterance: "How do I become a person? Maybe I should change my eyes or move them differently or get new arms and toes? Do you know where I can buy them?...Why don't you let me live inside your skin; I can make myself real small and crawl right in" (SS p. 148). The perhaps total absence of a sense of an inward self seems to result in Hilde's distorted emphasis on body parts -- as if she could repair her self by manipulating physical things, borrowing a body or the like. Diverting one's attention from one's inner, private conscious experience to outward aspects of one's body or the bodies of others is not uncommon in those who look for, but find no, inward unity or identity. Thus "Ned tries to commit suicide because he feels his body is a hindrance to his encounter with God", and "Jenny spends half a day eating grass on the hospital grounds because she believes herself to be a cow and has to 'feed' her 'unborn calves'" (SS p. 150).

While some of these patients (probably Ned and certainly Jenny) are in delusional states, the felt absence of a unified self, of an inner cohesive "I", is not restricted to delusional persons. Thus a perfectly lucid patient of the Harvard Medical clinician-professor Arnold Modell⁶ expresses her fragility of self by saying that she "felt as if her sense of self could be sucked out and obliterated by others", as the "octopus" uses its tentacles to suck out things. Another non-delusional person with a deteriorating sense of self is this Alzheimer's patient⁷: "Every few months I sense that another part of me is missing. My life...,my self...,are falling apart. I can only think half thoughts now. Someday I may wake up and not think at all..., not know who I am. Most people expect to die some day, but whoever expected to lost their self first?" (Radden p. 276 fn. 2). What's of interest is not whether these people are irrational or even psychotic but whether what they say is in some way meaningful or significant for our understanding of the self. Utterances can seem meaningless and insignificant when they are not. Prior to the 1920s, it was thought that schizophrenics lacked minds altogether, and thus that their verbal utterances carried no meaning or reference. Their speech acts were thought of, roughly, as sputterings of an organism in neurophysiological decline. Only after the clinical and theoretical work of Harry Stack Sullivan did a more accurate (and humane) view of these people emerge. Sullivan showed that patients' apparently nonsensical speech could be made sense of if they were observed closely in interpersonal interactions with family members. This, incidentally, marked the birth of "interpersonal psychoanalysis".⁸

It's difficult to believe, when pondering the words of the afflicted and/or pathological that a clear knowledge of self is generally available in consciousness as such. Furthermore, psychopathological evidence suggests that some conscious states have an "agentic", i.e. active, quality whereas other such states are passively suffered by consciousness and feel alien ("ego-alien"). This evidence goes against a Cartesian conception of self as simple or wholly unified. For Descartes' essential nature will not *certainly* be to be a simple, wholly self-contained thinking being if he is unable to *distinguish* his own conscious experiences from the experiences possessed by other conscious beings (Cf. Principle 60 in CSM, p. 180). Yet, consider the psychopathological phenomenon known as "thought insertion". (Generally, psychopathology suggests that our modes of consciousness or awareness of our inner experiences are not all phenomenologically the same.)

George Graham and G. Lynn Stephens⁹ cite these puzzling words of a patient suffering from "thought insertion": "I look out the window and I think that the garden looks nice and the grass looks cool, but the thoughts of Eamonn Andrews come into my mind. There are no other thoughts there, only his....He treats my mind like a screen and flashes his thoughts onto it like you flash a picture" (Graham and Stephens, p. 93). This patient believes that some of her thoughts (read "thoughts in her mind") are *not hers*, but someone else's. Bear in mind that there might be something coherent in what this patient says even though it's not possible for Eamonn Andrews to 'insert' *his* thoughts into *her* mind. Graham and Stephens propose that an experience can coherently be said to be "mine and not mine" at one and the same time insofar as (a) it is "mine" in the sense that it occurs in my stream of conscious experiences, yet (b) it is "not mine" in the sense that I am not the *agent* of the experience. Not every thought (desire, etc.) that occurs in my subjective experience is one that I recognize as something that *I think*. Thus the victim of thought-insertion can be subjectively aware of a thought which, however, she experiences as *foreign* or *strange*. In consequence, she experiences the thought as being hers and yet not hers, viz. as being in her mind and yet not being *thought by her*. Graham and Stephens are *not* proposing that the patient's belief that Eamonn Andrews is projecting his thoughts into her mind is a coherent belief, but only that "This thought is mine and yet is not mine" can be given a coherent sense in the way described.

Descartes thinks he shows that he is a unique conscious being, a subject of thought, and that this subject is his "own self". But, examples such as thought-insertion show that being the *subject* of a particular conscious experience (having the mind in which it occurs) is not necessarily sufficient for that experience's being a part of the *self*. Descartes supposes that the unique subject of his experiences is of

necessity his true self. But the examples we have discussed suggest that, even given a unity of *subjective consciousness*, many of one's experiences could at times be *ego-alien*. These, while being conscious, would not be integrated into the fabric of what we may more rightly call our "selves", even though they are "our" experiences in the subjective sense. Descartes never conceived of this possibility, but perhaps should have.

ENDNOTES

¹ See trans. John Cottingham, Robert Stoothoff, and Dugald Murdoch, *Descartes: Selected Philosophical Writings* (Cambridge, England: Cambridge University Press). 1988. Hereafter referred to as "CSM".

² For a very similar interpretation of Descartes, see Peter Markie, "The *Cogito* and Its Importance", in ed., John Cottingham, *The Cambridge Companion to Descartes* (Cambridge, England: Cambridge University Press), 1992. Reprinted in ed., John Cottingham, *Descartes* (Oxford: Oxford University Press), 1998.

³ See trans., Elizabeth Anscombe and Peter Thomas Geach, *Descartes: Philosophical Writings* (London: Thomas Nelson and Sons Ltd.), 1954, 1968. Hereafter referred to as "A & G".

⁴ See ed., Roger Ariew, *Rene Descartes: Philosophical Essays and Correspondence* (Indianapolis: Hackett Publishing Co., Inc.), 2000. Hereafter referred to as "Ariew".

⁵ James A Glass, *Shattered Selves: Multiple Personalities in a Postmodern World* (Ithaca: Cornell University Press), 1993. Hereafter referred to as "SS".

⁶ See Arnold Modell. *The Private Self* (Cambridge, Massachusetts: Harvard University Press), 1993.

⁷ See Jennifer Radden, *Divided Minds and Successive Selves: Ethical Issues in Disorders of Identity and Personality* (Cambridge, Massachusetts: The MIT Press), 1996. Hereafter referred to as "Radden".

⁸ A fascinating discussion of these matters may be found in Stephen A. Mitchell and Margaret J. Black, *Freud and Beyond: A History of Modern Psychoanalytic Thought* (New York: BasicBooks), 1995. See Chapter 3: "Harry Stack Sullivan and Interpersonal Psychoanalysis".

⁹ George Graham and G. Lynn Stephens, "Mind and Mine", in eds., Graham and Stephens, *Philosophical Psychopathology* (Cambridge: Massachusetts), 1994. Hereafter "Graham and Stephens".

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Service for Dr. Stillwell has included chairing the College of Arts and Sciences Curriculum Committee, election to the Panel of Ten, service for the Ethics and Grievance Committee and the Department Faculty Status Committee and serving as President of the Illinois Philosophical Association.

In her early research, Dr. Stillwell worked on confirmation theory and Wittgenstein's philosophy of logic. Her recent research focuses on the nature of the self, especially problems concerning self-unity and unity of consciousness as these arise in psychopathology. Dr. Stillwell has been nominated to be a Fellow at the Center for Advanced Study in the Behavioral Sciences in Stanford, CA.

By way of personal interests, Dr. Stillwell enjoys all kinds of music, contemporary painting, "performance art" and European painting of the 1400s. She also enjoys jogging several miles every week and playing with her beloved cat "Harold".

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