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# KEEPING A SENSE OF SELF. PATHOLOGIES AND PREFERENCES OF SELF AND AGENCY

*abstract*

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*This paper deals with the question concerning the effects of the sense of self on agency, particularly the implications that a disharmonious sense of self can have for agency. Consciousness, as intimately connected with a sense of self has a unique status in being accessible both from a first-person and a third-person perspective. A study of self therefore requires phenomenological approaches as well as neurological, psychological or sociological ones. A promising approach to understanding how the sense of self affects agency is studying pathologies. Such studies support the view that both the sense and the conception of self as unified and as an initiator of agency are valued, while a sense of conflict or dissonance is avoided. The frequency with which confabulations occur in pathologies of self can be taken as an indicator that distortions of perception, memory and narration are considered a fair price to pay to counteract a sense of diffused self. The picture or narrative of the self that is thereby produced necessarily involves a sense of what the individual regards as good. However a strong urge to maintain an idealised, unified and stable picture of self and agency may involve the danger that mechanisms used against a diffusion of the self misrepresent both self and the other.*

*keywords*

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*Agency; self-representation; pathologies of the self*

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Two points tend to stand out in the debate around the question concerning the self. One deals with the metaphysical respectability of the self; is it real or an illusion? The other is concerned with its nature and number; is the self a unified, singular entity or is there a multitude of selves in a given moment or during a lifetime? Another set of questions lags a little behind in popularity but is in fact just as central to an exhaustive picture of the self: what are the conditions of agency, should the self be understood as an agent and what is the relationship between self and agency? Specifically, the phenomenological study of self and agency includes the role that the conception of self plays in an individual's understanding and realisation of agency.

Certain assumptions surrounding such questions should be clarified. Some assume that there is such a thing as self or that there are certain qualities that it has. This can be contrasted with another assumption, i.e. that individuals have conceptions of what a self is. These two aspects should not be confused; one concerns the nature of self, if it exists; the other what individuals take their selves to be. Using the term "individual" here aims to suspend judgement on whether an individual is identical with her self or if she had better be understood as the owner of her self. These two notions should further be distinguished from a "sense of self", which denotes a primary, pre-reflective, experiential feeling of what it's like to be a certain individual in a given moment. A further assumption is that the self should be understood as an initiator of action as opposed to an epiphenomenon.

Self and agency are thus thought to be closely related when it comes to considering which characteristics of individuals are necessary for agency. A number of these characteristics seem to call for an agent who is unified both diachronically and synchronically. Synchronic unity is thought to be necessary for the capability to choose and implement action; diachronic unity is thought to be necessary for accountability, responsibility and the capability of judging, choosing and following up long-term actions. The notion of agency seems to need a unified self as the initiator and carrier of action, while conversely the fact that a single individual can only act out a single course of action at a given time is used as an argument to strengthen the picture of a unified agent (Korsgaard 2003).

A further step is that of conceptual clarification and an evaluation of the

appropriate uses of the term “self”. Not only is there no consensus on what the “self” is supposed to be but the debate is additionally made more difficult by the fact that related questions are discussed under a number of terms. Among the terms popularly used are “Person”, “I”, “Ego”, “Subject”, “Identity” or even “Soul” and though different discourses prefer different terms and disregard others, their connotations can be unclear. Thus, some argue that the whole concept of self should be disregarded since the confusion about what it is supposed to denote might be taken as an indicator that it does not exist (Olson 1998).

Nevertheless it seems safe to assume that there is enough of a “self” to be used as a tool and to be problematised both as concept and as phenomenon. It also seems relatively safe to assume that apart from certain pathologies most people tend to experience some sort of a self. Even in cultures where the self is (dis)regarded as an illusion, it is thought of as something that needs to be overcome by training and reflection. A sense of self, it seems, has a strong pre-reflective presence but it has a precarious status in hard sciences since there is a uniquely first person access to it which the traditional reliance on objectivism in natural sciences tends to eye with suspicion. The first-person perspective makes the self categorically different than any other thing that can be studied because it cannot be grasped without taking that perspective into account.

Studying pathologies is a way to combine both aspects by comparing first person reports of senses of self and agency with neurological or psychological anomalies. These can provide indications for the relationship between the structure of the central nervous system and the function of parts of it as concerns a sense of self. There is an abundance of “pathologies of the self”, which indicate that the seemingly given sense of self is nourished by a complex interaction of neurological, psychological, social and possibly self-constitutive sources. By studying such pathologies one might hope to abstract certain factors and thereby gradually develop a broader theory on the various contributors to the sense of self.

Some such pathologies of the self are directly related to the question of embodiment. The self is sometimes regarded as disembodied. We tend to have no difficulties imagining ourselves as living in another time, as another person, of another gender, age or with other physical characteristics than those that we have<sup>1</sup>. It is quite another thing, however, to imagine ourselves as *being* another being. A famous account of the irreducibility of the first person account of what it feels like to be a certain being is the impossibility of imagining what it feels like

<sup>1</sup> A literary example of this is Virginia Woolf's Orlando.

to be a bat (Nagel 1979). In fact, one needn't go further than the next best person to see that the particular feel of a self cannot be captured by anything else but by the self itself. Descartes argued that the fact of our ability to imagine ourselves without a body at all demonstrates that the ego is of another substance than our material bodies. We are not our bodies, our bodies are not even part of us, rather we own our bodies, just as one owns a toolbox<sup>2</sup>. In fact, the conviction that one's body is not one's own or that parts of it don't belong to it carries with it a strong feeling of estrangement and discomfort. Patients who suffer from asomatognosia do not recognise parts of their bodies and reject them as alien (Feinberg 2001, p. 8) and in some cases this is coupled with impaired proprioception, the sense of the position of the body in space (Feinberg 2001, p. 11). Fantastic confabulations can occur when patients are asked to identify one of their limbs, attributing the limb to a spouse or a family member or even attributing a self of their own to the wayward limb, giving them names and speaking of them in the third person (Feinberg 2001, p. 15). It is noteworthy that such patients, suffering from a strong sense of estrangement of parts of their bodies tend to try and integrate the phenomenon into a unified picture of themselves and their surroundings that makes sense and maintains a feeling of familiarity. This is one of the many indications that the sense of a unified self with clear margins is a valued feeling while that of detachment and disintegration is experienced as decidedly unpleasant or even painful<sup>3</sup>.

Another prominent example of the failure of the brain to produce a "normal" sense of self is the Capgras syndrome (Ramachandran 2003). A patient suffering from the Capgras syndrome misidentifies a usually very close person as an impostor. The Capgras syndrome is significant because it indicates that the capability of cognitively recognising an individual is not sufficient to identify her as that individual if a certain feeling of relatedness lacks. While we tend to think that it's the cognitive familiarity with a person that is the cause of a sense of emotional familiarity, the Capgras syndrome indicates that there are two independent pathways involved, at the failure any of which the recognition fails to take place. Patients complain that the person in question is in every respect identical to their spouse, their mother or their friend but that they don't feel like them, therefore they reason, they can't be them. The dissonance that exists

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<sup>2</sup> This sense of one's self as a mental entity that owns the body is very common, "It connects with a feeling that nearly everyone has had intensely at some time – the feeling that one's body is just a vehicle or vessel for the mental thing that is what one really or most essentially is", (Strawson 1999, p. 3).

<sup>3</sup> There is a suggestion that the feeling that we are continually present persons as opposed to construction out of temporal entities might have a biological basis (Kim, J. & Sosa, E. 1999, p. 329).

between their recognition of the person and the lacking emotional response creates an urge for a resolution and results in a Capgras delusion. The failure of various brain regions involved in the creation of recognition and the ensuing hardly credible explanations by the patients indicate not only that the inter-relational creation of the self-other complex is a function of different centers converging on one narrative but also that the production of such a narrative seems to be of utmost importance to the individual<sup>4</sup>.

Another example for a change in the margins of the self is the Frégoli syndrome, quasi the opposite of the Capgras syndrome. Here the patient experiences a relatedness, which is not grounded in prior experience and strangers or casual acquaintances are attributed a position of much closer relationship with the patient. These examples of mistaken relatedness occur also with places or with objects, familiar from patients who mistake the hospital for their house (Feinberg 2001, p. 49). Dissociative fugue, on the other hand, is a mental disorder, the sufferer of which travels away from home or from the accustomed places of their lives without remembering part or all of their past. Part of this disorder is a complete or partial confusion of identity, occasionally with the assumption of a new one (American Psychiatric Association 2000, pp. 300-313).

Autoscopia is a hallucination in which the patient projects herself into the outside world (Feinberg 2001, p. 80). The *Doppelgänger* appears often but not necessarily always ghost-like and mimics the patient. It is remarkable that these hallucinations are visual; the hallucinating subject creates itself as an object, i.e. it brings the distinction the subjective, first person view and the objective, third person view into visual explicitness. Despite this, autoscopia is generally not accompanied with a sensation of being split; on the contrary, the patient experiences herself and her *Doppelgänger* as unified (*ibid.*). This pathology seems to indicate that it is possible to have a sense of a unified self with a sense of multiplied embodiment.

In some cases of autoscopia, the experience is nearer to an out-of-body experience; the subjective, perceiving “I” seems to move out of the “Me” and to see it from the third person perspective. These experiences often occur with patients suffering from autoscopia but they are not confined to them (Feinberg 2001, p. 82); the phenomenon of “depersonalisation”, of a vivid sense of

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<sup>4</sup> In most cases the confusion is regarded as deeply disturbing but it can have advantages: in a case reported in the thirties a woman experienced her lover as two different people, one of whom she described as a failure while the other was virile, rich and satisfying (Feinberg 2001, p. 35).

estrangement from oneself and ones surroundings at certain moments of stress or discomfort, often accompanied with a feeling of looking at oneself from above or from outside is common. A suggested explanation for this phenomenon is self-protection by reducing the activity of the pre-frontal cortex, i.e. by tuning down the intensity of emotional response (Fine 2005, p. 47); the self puts some distance between itself and itself, so to speak, when the perceived situation is difficult to cope with. This finding is remarkable because it indicates the importance of intact emotional functions for the sense of self. In a pathological extent, this loss of self due to a loss of emotional responsiveness is the Cotard delusion; patients suffering from it are so detached from their phenomenological life, from their bodies and from the world that they have difficulties believing that they are alive (Fine 2005, p. 49); indicating that it isn't so much the cogito that makes one exist as a self but rather the *sentio*<sup>5</sup>.

A similar common example of the fragmentation of self is the invention of imaginary friends or companions, usually by children. Here the imagined entity can be understood as an alter-ego of the inventor although at times they are personifications of others close to her. With adults the opaqueness of the invented entity tends to fade and turns into a vague sense of “a presence” (Feinberg 2001, p. 87). Again, these phenomena are comparable in that they involve discomfort or stress – the sense of disintegration of the self is, in itself, uncomfortable and tends to produce a variety of coping mechanisms to be overcome. In the case of imaginary friends however, they are actively used by the patient to overcome a sense of unity, which is experienced as too painful to bear. The tendency to confabulate is central to most, if not all these pathologies. Confabulations are false statements about the personal state or life of a patient, they are especially common in cases of amnesia and are often related to damages in the frontal lobes (Feinberg 2001, p. 69). Among other functions, the frontal lobes or more specifically the prefrontal cortex regulates emotional responses. The prefrontal cortex takes over twenty years to develop (Fine 2005, p. 30). In

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<sup>5</sup> Emotions tend to be neglected in some schools of moral thought. The resurgence of virtue ethics (Anscombe, G.E.M., 1958) and its fairly swift return among the main moral theories might partly be explained by the fact that a moral theory devoid of a proper explanation of the function of emotions is psychologically too crude to be satisfying. Bernard Williams explains the neglect of emotions in the British philosophy of the 20th century with the Anglo-Saxon emphasis on language, specifically “the preoccupation with the distinction between fact and value”, (Williams 1973, p. 208) and with the influence of a Kantian theory of morality (Williams 1973, p. 207). The disrepute of emotivism, as the theory in analytical moral philosophy, that puts weight on the role of emotions to the point of reducing moral judgement to emotions, also played its part in the rejection of emotions in morality (*ibid.*, p. 208).

contrast to the “maturing” prefrontal cortex, the limbic system, which is the phylogenetically older part of the brain that colours experiences with emotions, does not mature at all (Taylor 2008, p. 18), which means that it is up to the prefrontal cortex to control and direct emotion.

There are two main types of confabulations at work to create a sense of a unified self. “Momentary” or “provoked” confabulations are brief and occur in response to a situation in which a statement about the patient is expected (Feinberg 2001, p. 55). Other confabulations are “fantastic” or “spontaneous” and are more akin to delusions (Feinberg 2001, p. 57). Most confabulators share the need to “fill in the blanks” in their autobiographical memories but there are others whose urge to confabulate doesn’t seem to stem from a forgotten episodes in their biographical narrative. Yet in both cases, whether with the aim to unconsciously gloss over blank parts or to indulge in fantasies, the product is a unified self with a linear storyline. Such confabulations are “therapeutic”; they “help to restore a sense of identity and create a sense of belonging in the world that might otherwise be incomprehensible” (Feinberg 2001, p. 68).

The phenomenon of confabulation also supports the conception of self as a narrative construction. What is worthy of being narrated, what had better be disregarded or suppressed is a question of the values the individual has come to support and thus the “constructive” work on the self involves a sense of the Good (Taylor 1989). A narrative in this context should be understood much more widely than the biographical narrative of an individual agent; it involves the story told by the agent to herself and others about the metaphysical structure of the world, of action and of morality and it is distinctly normative (Flanagan 2009). The narration in question involves something we might call “worldview”, which is not independent of culturally reigning narratives about morally relevant aspects of life. Owen Flanagan speaks of “master-narratives” (Flanagan 2009, p. 54) which are commonly accepted in a given culture and which influence individual narratives.

If we understand this sort of a narrative, “autobiographical” self, not as something that should be thought of as replacing the idea of a basic, pre-reflexive, phenomenal self but rather as an additional aspect of personhood which is both influenced by the stream of experiences and which helps shape the structure of experience, then our view of agency in general and of moral action in particular could profit from the distinction. Traditionally, the transcendental pure ego is seen as necessary for moral judgement, agency and responsibility to be conceivable. If it is correct to take the phenomenon of confabulation in cases of a sense of diffusion of the self as an indicator that a sense of meaningful and

intact being-in-the-world is generally cherished, then it might be possible to argue that mechanisms like those used against cognitive dissonance support a conception of agency that misrepresents both self and other. If we understand the most basic self and the sense thereof as necessarily being in the world and relational (Buber 1999) instead, then this might not only not undermine the notion of agency, it might on the contrary support particularist notions of moral agency, which emphasise the specific inter-subjectivity in a given moment. Additionally, pathological cases like the Capgras syndrome or the Cotard delusion indicate that a loss of emotional responses hinder both a sense of self and a sense of agency, so that the disembodied thinking ego of the cogito had better be complemented with a *sentio*, which needs yet to be fleshed out and which takes into account the phenomenology of the relational self.

Broadly, what a study of pathologies of the self seems to indicate is that individuals are not neutral about their conceptions of self but prefer a singular, unified and coherent self. A sense of ownership seems to be insufficient for such a preferred sense of self. The autobiographical self that adds to the feeling of what it's like to be me and answers to a broader question of *who* or *what* I am demands a fairly linear, fairly unified storyline<sup>6</sup>. Individuals seem to cherish this so much that they are ready to confabulate in most fantastic ways to keep up a picture of themselves as a singular self and agent. A phenomenological approach that differentiates between the various elements of self, agency and their interaction helps to bring out the distinctions between levels of self-awareness or self-fictionalisation that affect attributions of consciousness, sentience, personhood, character, agency and accountability to self and other in morally relevant ways. A further investigation concerning the question of the relation between a sense of self and agency on the one side and patterns of (moral) judgement and behaviour on the other would need to be informed by empirical studies of subjects, both with conventional senses of self and those diagnosed with pathologies of the self and their respective views and habits concerning moral agency.

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<sup>6</sup> This, at least, seems to be the case in “the West”. An empirical study of how adherents of religions or worldviews advocating a No-Self approach react to a loss of a sense of self due to pathologies could possibly provide conflicting indicators.



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