



The Concept of the Self & Psychiatry:

Epistemological vicissitudes

Prof G E Berrios
Santander, 18 July 2011
geb11@cam.ac.uk

CONTENTS OF THIS LECTURE

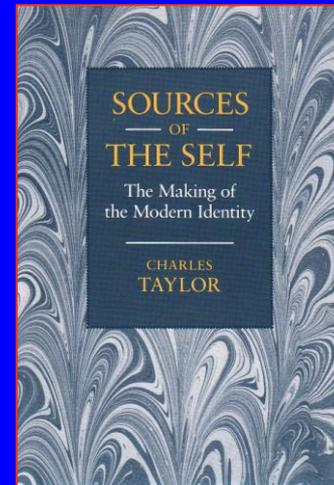
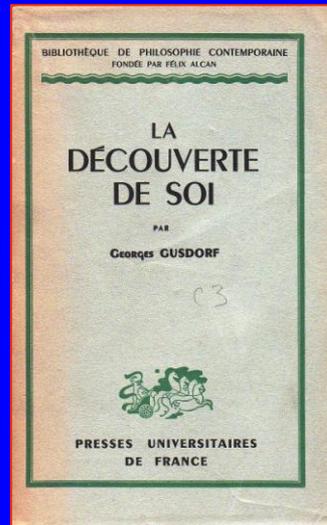
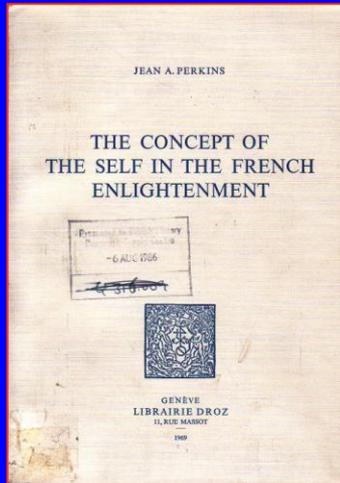
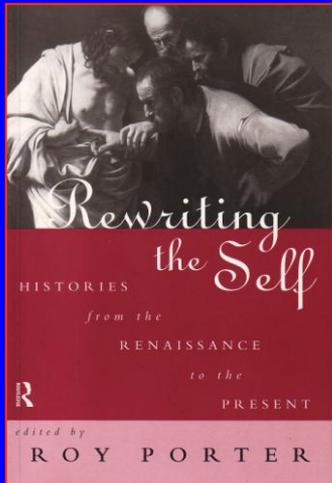
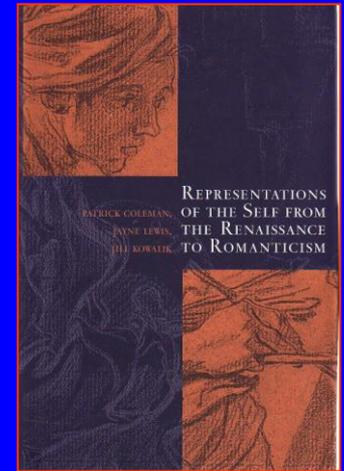
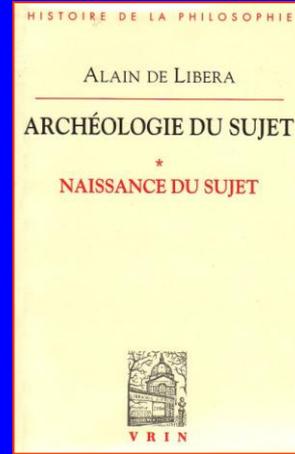
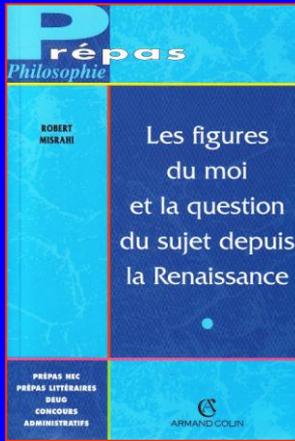
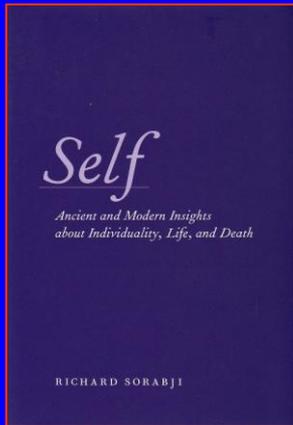
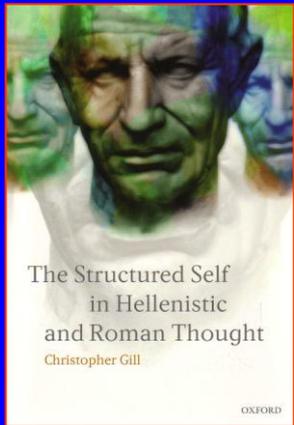
The Concept of the Self

- *What to read?*
- *How to study the Self?*
- *Vernacular terms, definition & boundaries*
- *The Self and its conceptual family*
- *The many referents of the concept of Self*
- *Self & the function of 'self-reflection'*
- *The Construction of the Self*

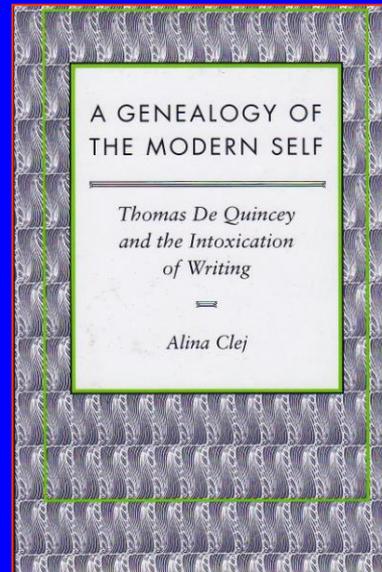
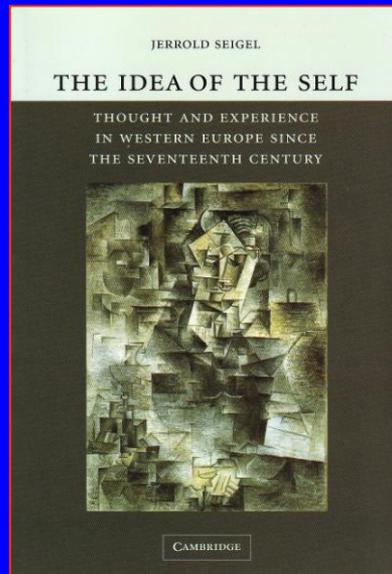
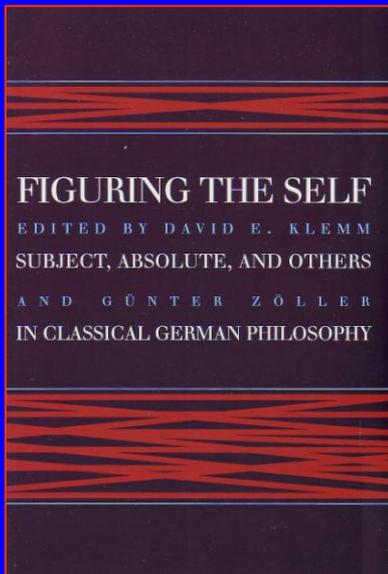
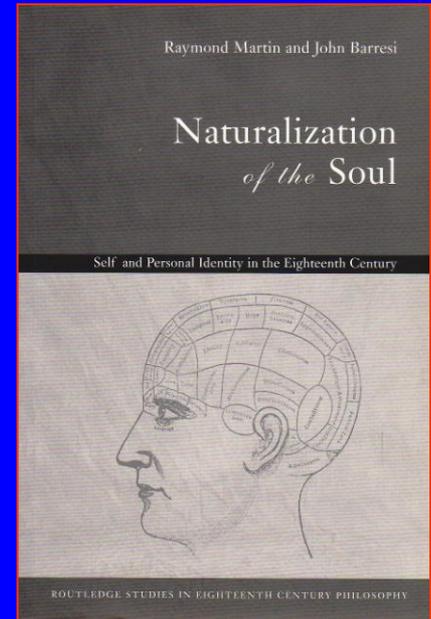
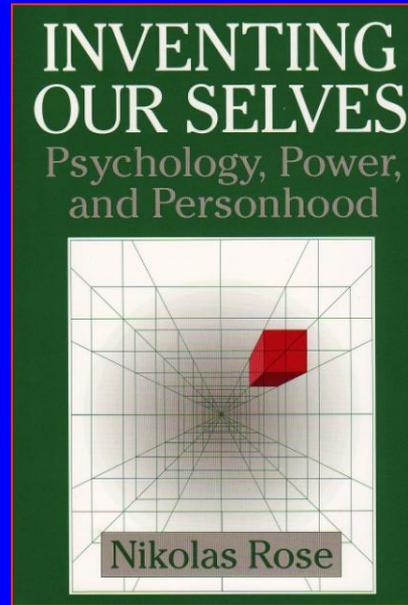
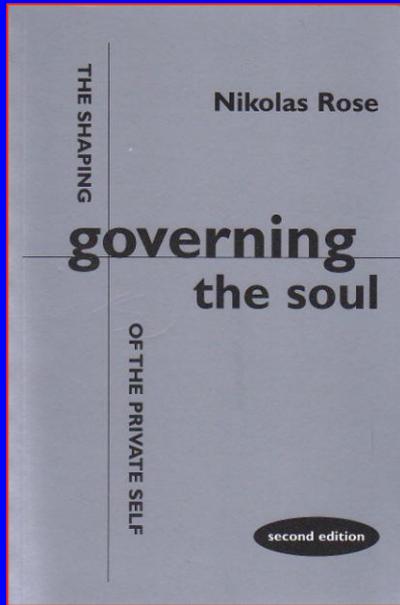
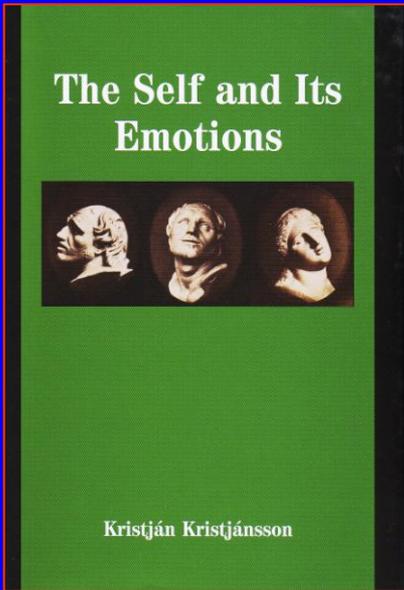
The Self in Psychiatry

- *What Self & what Psychiatry?*
- *The Disorders of the Self*

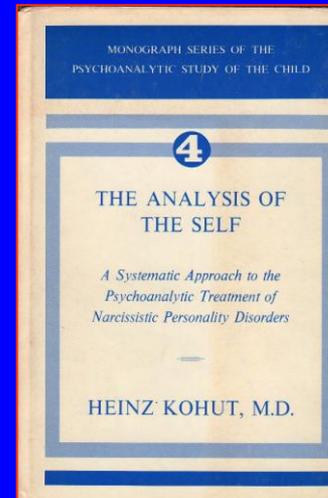
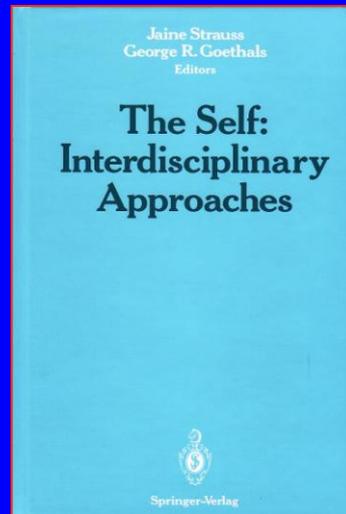
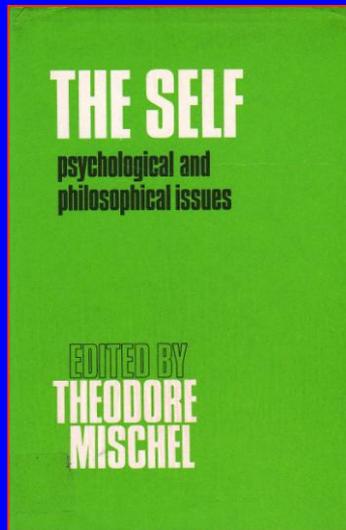
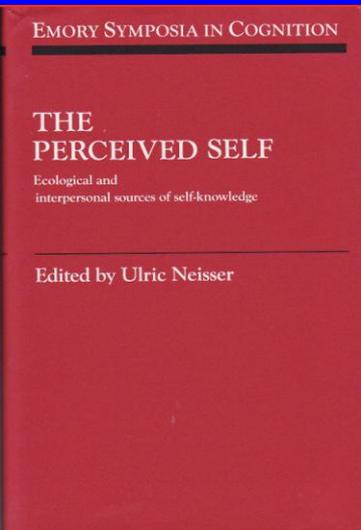
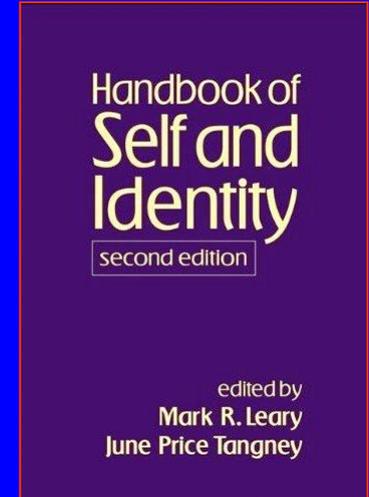
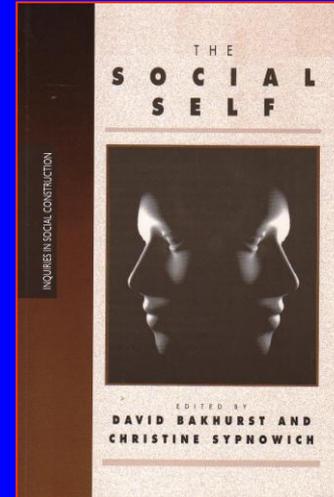
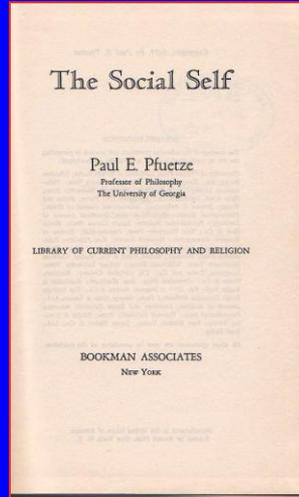
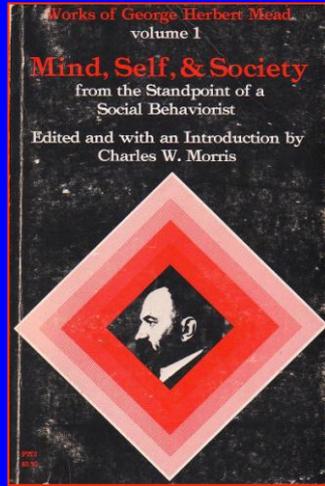
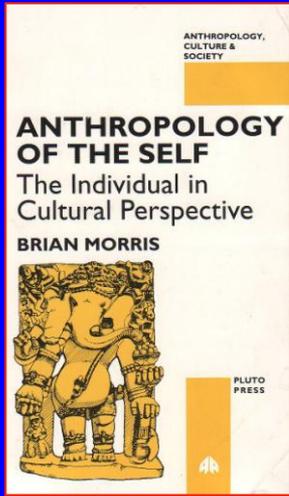
Conclusions



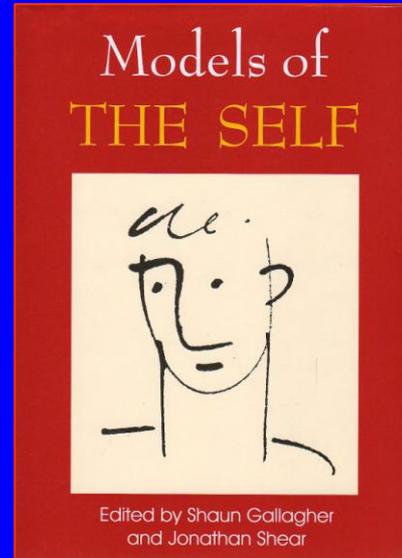
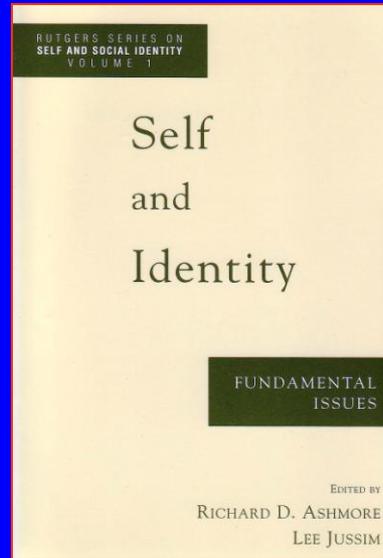
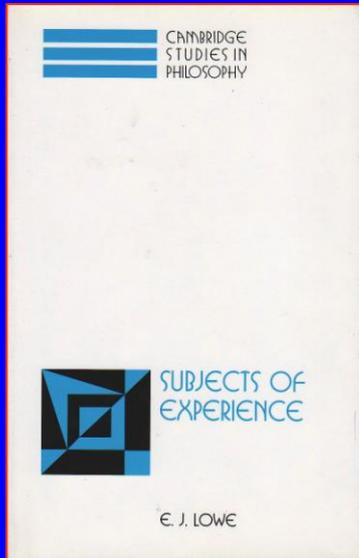
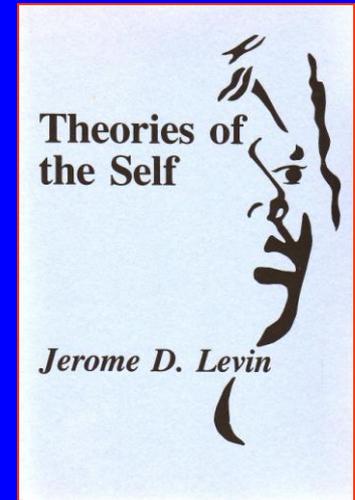
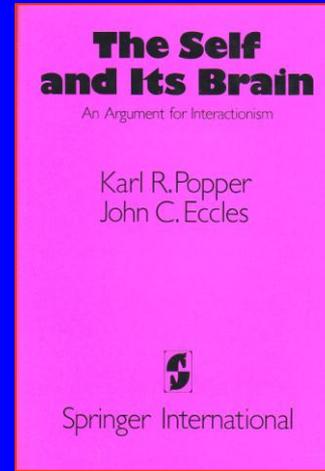
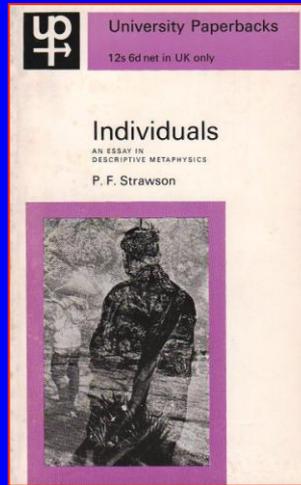
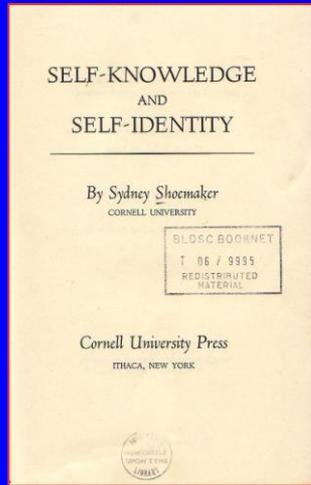
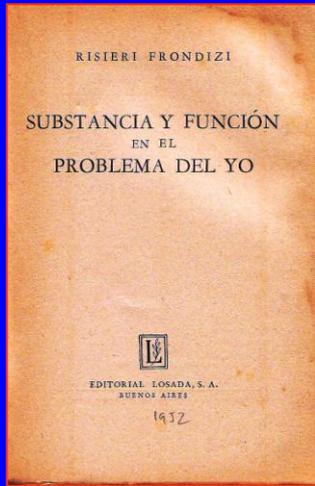
HISTORICAL



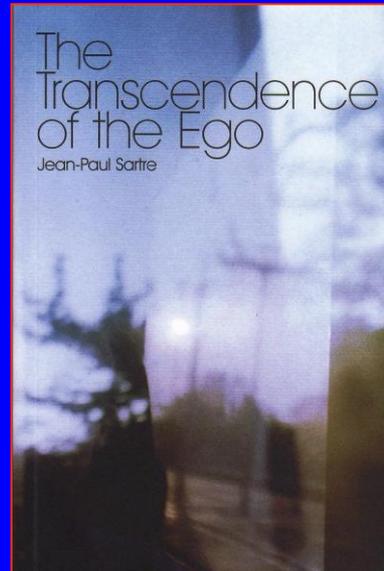
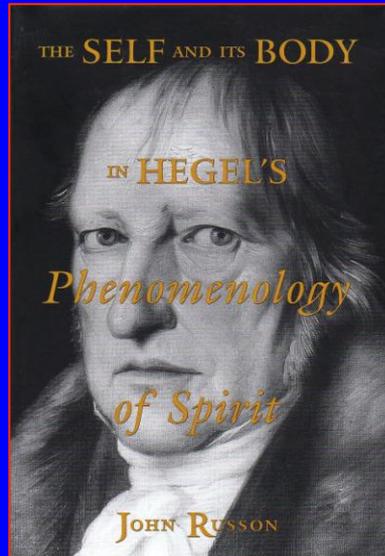
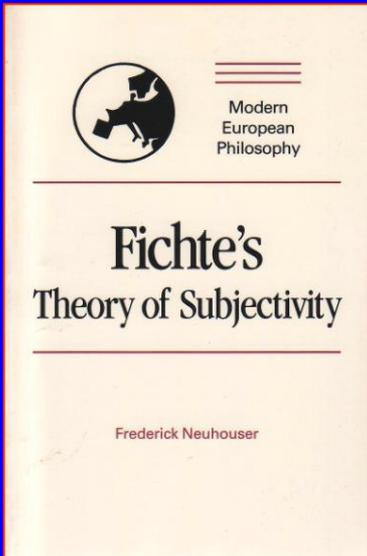
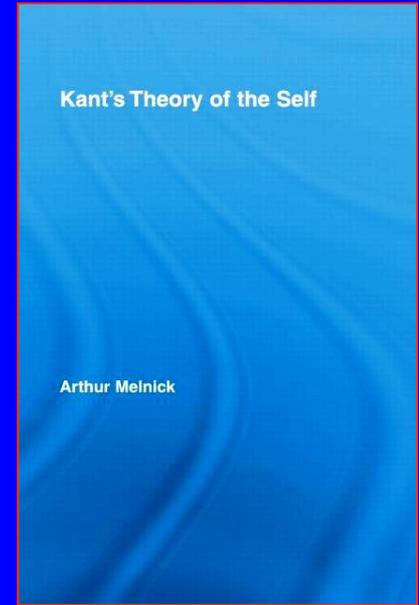
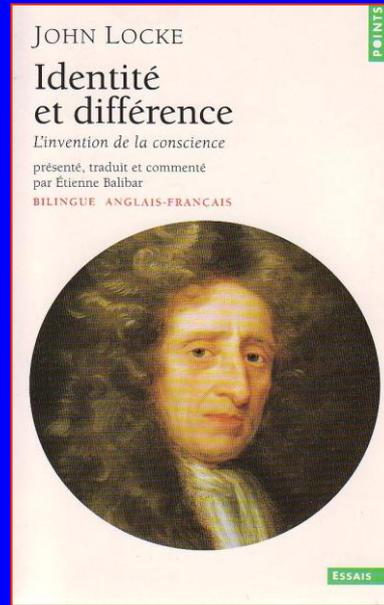
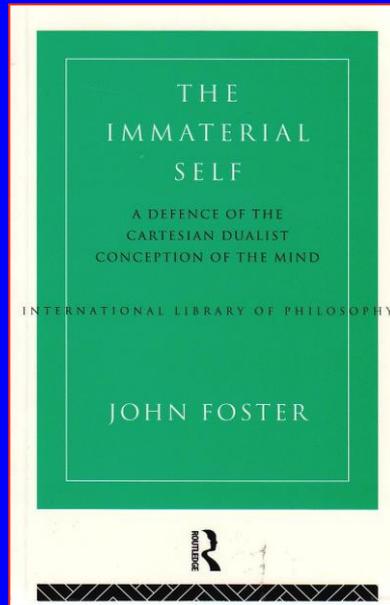
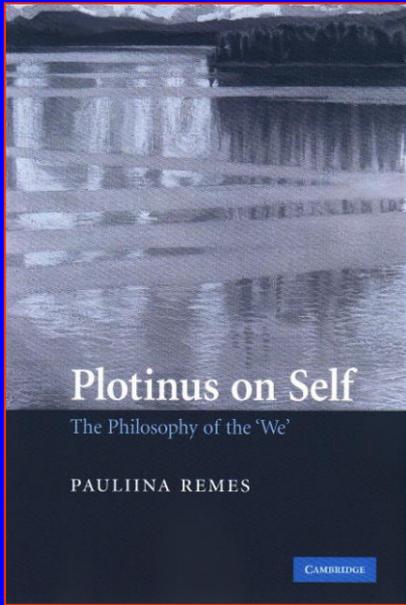
HISTORICAL



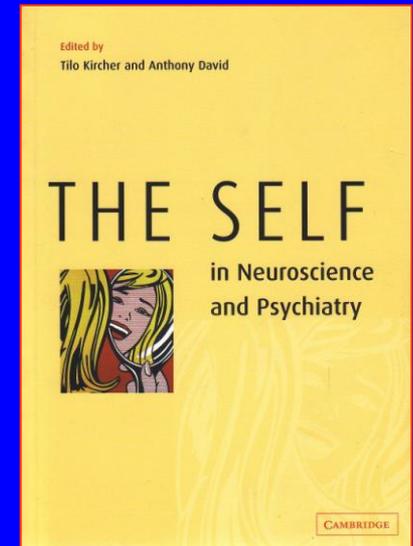
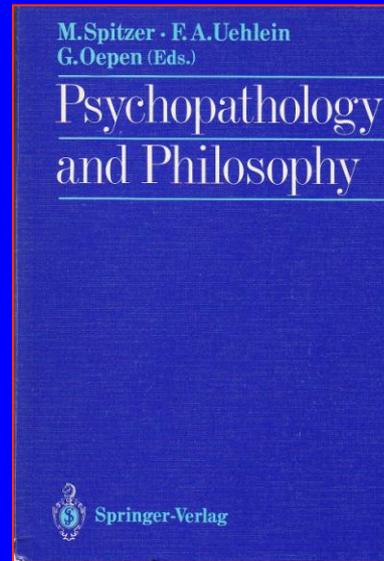
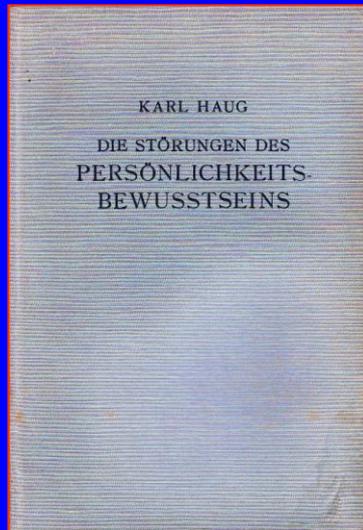
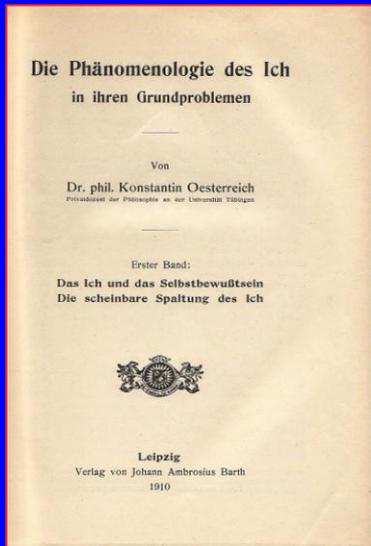
**SOCIAL AND
PSYCHOLOGICAL**



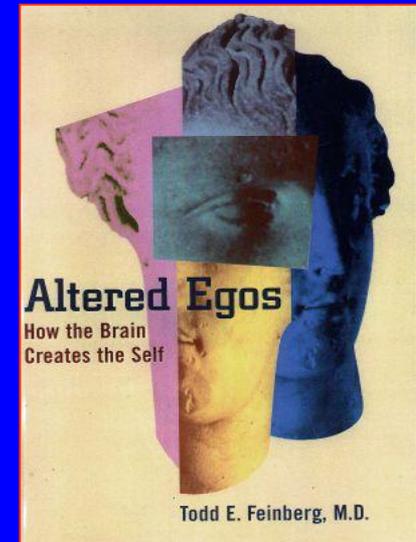
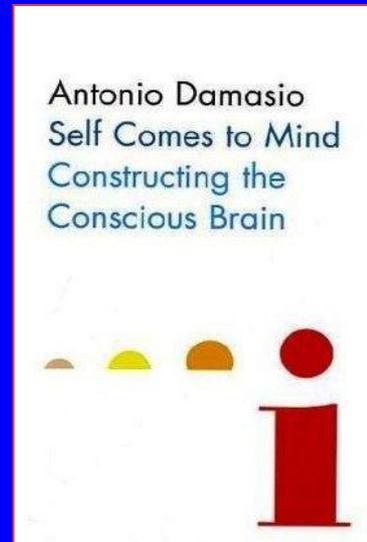
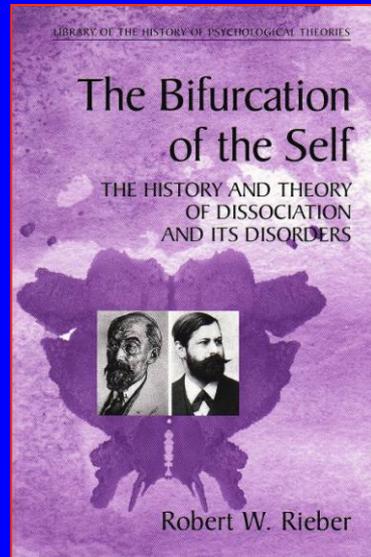
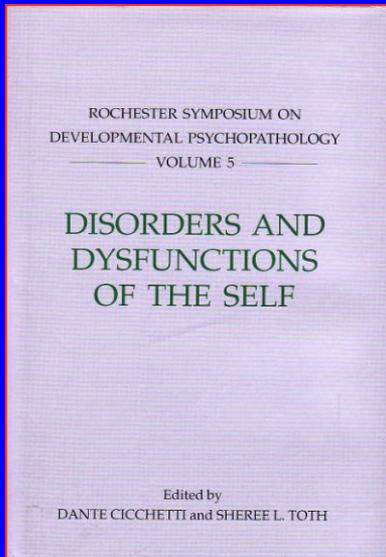
PHILOSOPHICAL



PHILOSOPHICAL



The 'Disorders' of the Self



HOW TO STUDY THE CONCEPT OF SELF

Historico-Philosophical Methodology

- *'Discovery' vs Constructivism*
- *Linear vs Epistemic Narratives*

Questions

- *What kind of 'object' is the Self?*
- *What 'Self' is compared in transcultural studies?*
- *Should Western categories be used as a paragon?*

Boundaries of the documentary database

- *What to leave out & what to include?*

(Reflexive Pronoun, Pronominal Adjective)

ἐγώ

Ego & ipse

Self (*Object & Subject self*)

Yo

Ich, selbst

Le Moi, Soi (*Coste*)

Io

DEFINING THE SELF (OED, 2009)

1. That which in a person is really & intrinsically he (*in contradistinction to what is adventitious*);
2. The ego (*often identified with the soul or mind as opposed to the body*);
3. A permanent subject of successive and varying states of consciousness (*identity criterion*).



Ego: That which is symbolized by the pronoun I; the conscious thinking subject, as opposed to the non-ego or object

THE BOUNDARIES OF THE SELF

Differentiating Self from non-Self

- Divine decision
- Intuition
- Inner conviction
- *Sens intime*
- 'First-hand' access
- Biological evolution

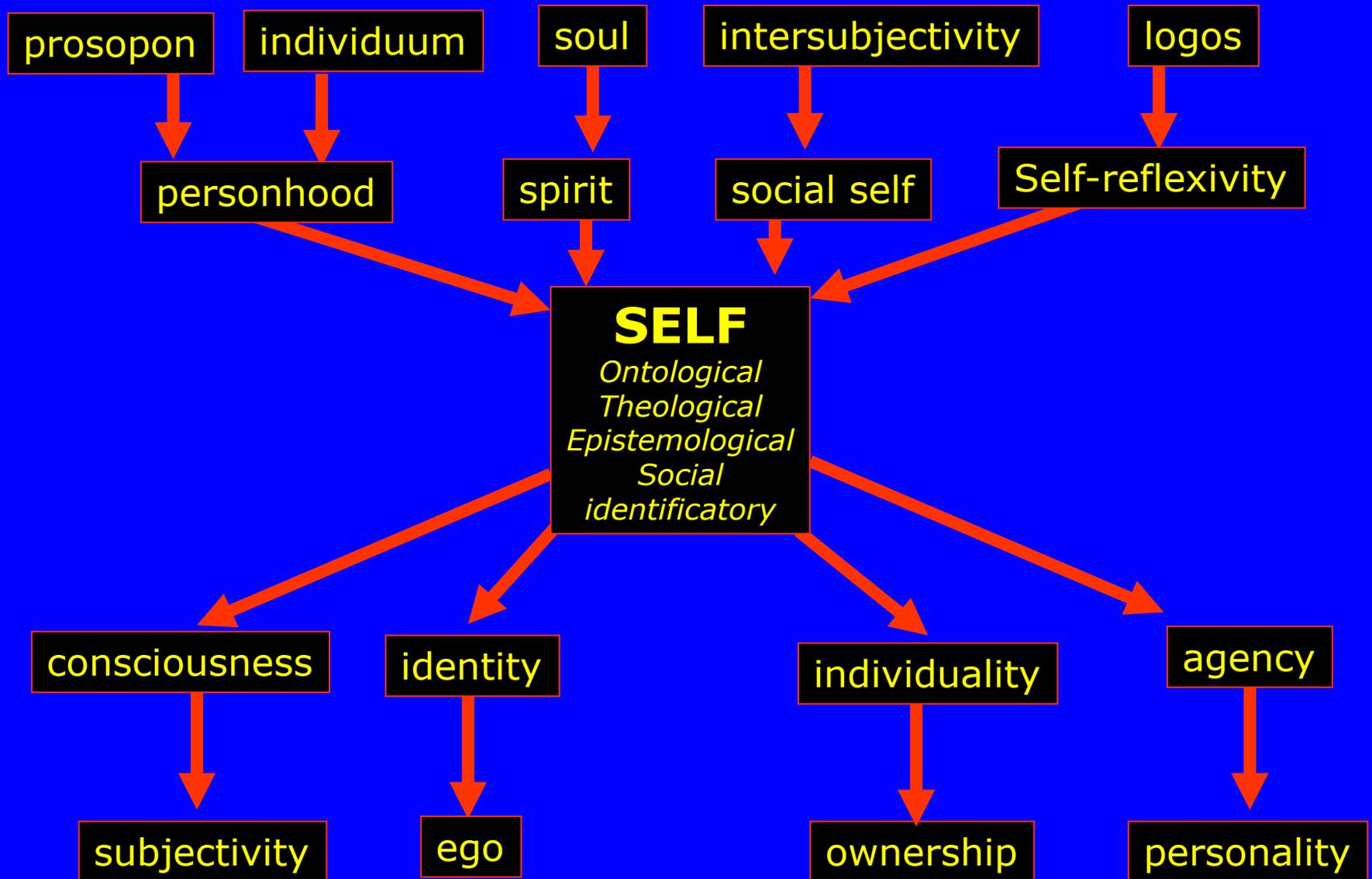
Problems

- Reliance on intuition
- Pliable boundaries (*e.g. fashion, ownership*)
- Collective selves (*other cultures*)

SELF AS A SELF-REFLECTIVE CONSTRUCT

- Self-reflective: "Awareness of being aware"
- Awareness of the boundaries, mechanisms & contents of the Self
- A defining component of the Self
- As "*Selbstbesinnung*" ('autognosis') it has been used as a criterion to differentiate the Social from the Natural sciences (e.g. Dilthey)

THE SELF & FAMILY OF TERMS IN WESTERN CULTURE



As a Pronoun (Signifier), the Self is expected to have a Referent (Signified):

- **Ontological** (*objectual*) ←
- **Epistemological** (*subject & object-self*)
- **Experiential** (*self-awareness*)
- **Effortful** (*agential*)
- **Historical** (*biological, hermeneutic*)
- **Dialogical** (*intersubjective*)
- **Narrative** (*linguistic construction*)
- **Post-Modern** (*contingent, illusory*)

Ontological, Objectual or Substantial referent (1)

- The Self is posited as the internal 'reality' or substratum onto which 'psychological phenomena' may rest & converge
- The relationship between the psychological phenomena and the Self can be conceptualized in various ways (*e.g. as features or accidents are attributed to a substance*)
- The ontological referent of the Self also services notions such as person, subject, consciousness, agent, awareness, *etc.*

Ontological, Objectual or Substantial Referent (2)

- Considering the Self as a substance has encouraged its reification (via 'naturalization') (e.g. by effectively reducing the Self to a 'region of the brain')
- ❑ Reified Selves have been conceptualized in Ontological (Anatomical) or Dynamic (Physiological) terms.
- ❑ It has also been suggested that the Self has been 'assembled' by biological Evolution & become 'hard-wired' in the brain
- ❑ The 'substance' view of the Self facilitates the claim that Selves can become:
 - a) disordered (pathological); and**
 - b) liable to legal & ethical responsibilities.**

THE HISTORICAL CONSTRUCTION OF THE SELF

- Debate on Individuation of Experiences (*Plato, Aristotle*)
- The *hêgemonikon* as a unitary Self (*Stoics, Plotinus*)
- The Private Inner Space (*Augustine*)
- *Res Cogitans* & the Epistemological Self (*Descartes*)
- The experiential or 'psychological' Self (*Locke*)
- The empirical & the transcendental Self (*Kant*)
- The sceptical Self (*Hume*)
- The hyperbolic Self (*Fichte*)
- The *Sens Intime* & the effortful Self (*Maine de Biran*)
- The psychodynamic Self (*Freud, et al*)

Berrios G.E. & Marková I.S. (2003) The Self in psychiatry: a conceptual history.
In Kircher T & David A. (eds) *The Self in Neurosciences and Psychiatry*.
Cambridge, Cambridge University Press, pp9-39

THE 'DISORDERS' OF THE SELF

It is claimed that anomalous experiences & behaviours are met with in clinical practice whose functional content is redolent of features conventionally attributed to the theoretical structure of the Self (e.g. boundaries, functions, contents)

- Can the 'Self' be disordered?
- Can narratives/theoretical entities be disordered?

SELF IN PSYCHIATRY: main contributions

- Mental disorders as distortions of 'unconscious self' (*Griesinger*)
- 'Primary & secondary' Selves (*Meynert*)
- Self as a 'mediator' (*Freud*)
- *Anomalien des Ichbewusstseins (4 criteria)* (*Störring*)
- *Pathologie des Ich-Bewusstseins* (*Pick*)
- *Veränderungen des Selbstbewußtseins* (*Oesterreich*)
- *Criteria for awareness of Self* (*Jaspers [4] / Schneider [5]*)
- *Ichstörungen* (*Grühle*)
- *Störungen des Persönlichkeits-Bewusstseins* (*Haug*)
- 'True' & 'false' Self (*Winnicott*)
- 'Tragic' & 'guilty' Self (*Kohut*)
- The 'new' disorders of the Self (*Cicchetti, Feinberg, etc.*), etc.

Viviani R. & Berrios G.E. (1996) Introduction to, and translation of, Pick's 'On the Pathology of the Consciousness of the Self'. *History of Psychiatry* 7: 319-332

'Disorders' of the Self according to its Epistemological components



- a) *Ichstörungen* named defects of the boundaries and functions of the self (as per schizophrenia)
- b) *Pathologie des Ichbewusstseins & Störungen des Persönlichkeits-Bewusstseins* mainly concerned disturbances of the functions of the Self.
- c) The 'new disorders of the Self' seem to relate to changes in experiential contents and functions unrelated to conventional definitions of the Self (e.g. Gilles de la Tourette syndrome, suicidality, etc).

VORLESUNGEN
ÜBER
PSYCHOPATHOLOGIE
IN IHRER
BEDEUTUNG FÜR DIE NORMALE PSYCHOLOGIE
MIT EINSCHLUSS DER
PSYCHOLOGISCHEN GRUNDLAGEN DER ERKENNTNISTHEORIE
VON
DR. PHIL. ET MED. GUSTAV STÖRRING
PRIVATDOZENT DER PHILOSOPHIE AN DER UNIVERSITÄT LEIPZIG
MIT 8 FIGUREN IM TEXT
LEIPZIG
VERLAG VON WILHELM ENGELMANN
1900.



**Gustav Störring
1860-1946**

Siebzehnte Vorlesung.

Anomalien des Ichbewusstseins. Die Komponenten des Ichbewusstseins. Die Genesis des Ichbewusstseins.

Nach Behandlung der Erinnerungs- und Wiedererkennungstäuschungen wende ich mich zur Untersuchung der Anomalien des Ichbewusstseins.

Die alte Psychologie fand das Problem des Ichbewusstseins darin, dass uns in diesem Phänomen eine Selbstverdoppelung gegeben sei. Wenn ich den Thatbestand meines Ichbewusstseins in die Worte fasse: „ich stelle mich vor“, so bin ich in diesem Akt Subjekt und Objekt zugleich. Dieses Problem hat sich uns schon in der ersten Vorlesung als gegenstandslos erledigt. Die Psychopathologie und die normale Psychologie lehren uns bereits das Ich als eine komplexe Grösse kennen. Es fragt sich vor allem, welches die einzelnen Komponenten derselben sind.

Ich werde nun zunächst das pathologische Material beibringen, aus dem sich Komponenten des Ichbewusstseins erschliessen lassen, und da es sich hier mit einigen Worten thun lässt, will ich im Anschluss daran die Komponenten des Ichbewusstseins überhaupt feststellen: wir werden da, um die Ergänzung zu vollziehen, nur einige Fragen mit Hilfe der normalen Psychologie zu beantworten haben, welche uns die

“Mental pathology & normal psychology alike teach us that the Self is a complex notion and the really important question to ask is what its individual constituents are”.

The constituents of the *Ichbewusstseins* are:

- 1. Awareness of one's own body*
- 2. Feelings of activity*
- 3. Awareness of our capacity to perceive and feel*
- 4. Awareness of Continuity with the past (identity) (p290-294)*

KLINISCHE PSYCHOPATHOLOGIE

VON

KURT SCHNEIDER
PROFESSOR AN DER UNIVERSITÄT HEIDELBERG

VIERTE, ERWEITERTE AUFLAGE
DER BEITRÄGE ZUR PSYCHIATRIE



GEORG THIEME VERLAG · STUTT GART

weise besser nicht. J a s p e r s hatte als formale Kriterien des Ichbewußtseins (zuerst: Persönlichkeitsbewußtseins) folgende vier aufgestellt: Ichbewußtsein im Gegensatz zu Außen und Anderen, Tätigkeitsgefühl (Aktivitätsbewußtsein), Bewußtsein der Identität im Zeitverlauf, Bewußtsein der Einfachheit im Augenblick. Wir haben diesen vier Kriterien das Existenzbewußtsein angefügt, das J a s p e r s dann übernahm, indem er als Unterart des Aktivitätsbewußtseins das Daseinsbewußtsein unterschied. Wir halten dieses, nunmehr Daseinserlebnis genannt, als selbständiges fünftes Kriterium fest.

**Kurt Schneider
(1887-1967)**



Jaspers established four formal criteria for awareness of the self (which he first called 'awareness of the personality'): as contrasted with the external world and others; feeling (awareness) of agency; of identity through time; and of unity in the present. To these four criteria we added the criterion of awareness of existence; Jaspers adopted it as part of his feeling of agency criterion. Under the name 'experience of our own existence' we hold it to be an independent fifth criterion.

CONCLUSIONS (1)

- Literature on the Self is enormous & repetitive
- The 'Self' is a member of a family of concepts developed in the West to deal with internal cultural needs concerning identification, agency, ownership and ethical & legal responsibility.
- Western concepts of the Self include (*often incompatible*) ontological, epistemological, social, historical, relational, dialogical, etc., formulations
- Western views of the Self are not universal. Claims that such difference can be explained by the fact that the Western 'Culture' is 'more advanced' than others are meaningless.

CONCLUSIONS (2)

- The fact that Western views on the Self are multiple and not universal suggests that:
 - a) the Self is not a unitary construct; and*
 - b) it unlikely that it can support meaningful & stable correlations with brain sites.*
- Conventional Psychiatry makes use of ready-made definitions of the Self and is only interested in listing its 'disorders'.
- Given all the meanings & functions attributed to the Self, the concept of a 'Disorder of the Self' has little meaning. Indeed, currently it is being applied to all manner of psychiatric complaints.