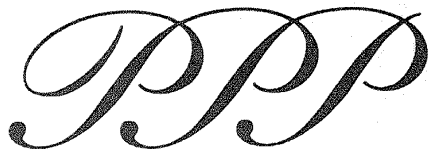


COMMENTARY ON "THE SOCIAL RELOCATION OF PERSONAL IDENTITY"

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HINSHELWOOD'S PAPER is clinically fascinating and offers a welcome introduction to Kleinian theory. The main purpose of his paper is to put the phenomena he describes so vividly as instances of splitting, projection, and introjection onto the philosophical agenda, and in this he succeeds admirably. Whatever we make of them, the phenomena are clearly important, and compared with other closely related phenomena (such as dissociation—see below), they have received relatively little attention from philosophers. However, I find some of Hinshelwood's cases more convincing than others. Although his clinical examples are all very interesting, I am less convinced than Hinshelwood of the explanatory power of his specifically Kleinian interpretation of them. I would argue, in fact, that cases of apparent splitting, projection, and introjection may be less significant for classic puzzles about identity than Hinshelwood suggests.

Hinshelwood's interesting speculations concern an alleged "spreading, even a relocation of identity," and he argues that they challenge the received view that persons are "stable 'atomic' entities." According to Hinshelwood, "we commonly assume that the boundary to the person—somatic, social and psychological—is well de-

fined." But I wonder, first of all, how widespread that view is. Most people, of course, do not have clearly articulable views about personal identity. But in contexts where issues arise concerning moral responsibility for one's actions, people seem tacitly to assume that—in some respects, at least—identity is anything but stable. The interesting cases that illustrate this cover a wide range and extend well beyond the domain of psychopathology. They include chemically induced sanity in court cases (see Radden 1989), political and religious conversions, the progress from childhood to adolescence to adulthood, as well as increasingly common instances of gender changes. Moreover, there are many parts of the world (and significant subcultures in the West) where familiar bodily criteria of personal identity yield to a variety of religious or spiritualistic beliefs concerning the independence of the mind or self from the physical body.

A second point is the similarity between Hinshelwood's account of Kleinian *splitting* and the concept of *dissociation*. Because Hinshelwood describes splitting as a process in which mental parts are separated so that they "no longer influence each other," at first it seemed that the difference between the two is that in splitting separated mental parts are independent of one another, whereas in dissociation that independence varies and is sometimes only apparent (see Braude 1995, for comments on the only ap-

parent independence of dissociated parts of the self). But toward the end of his paper Hinshelwood inaccurately describes dissociation and multiple personality as a kind of splitting into parts that are "completely disconnected." I wondered, therefore, whether there was any difference at all between Kleinian splitting and dissociation and whether Hinshelwood had perhaps also exaggerated the degree of independence of mental parts throughout his descriptions of splitting. So one of the main questions I had concerning Hinshelwood's proposals was whether projection and introjection had any explanatory utility apart from appeals to dissociation (or splitting) alone.

In trying to resolve this, I found Hinshelwood's definitions of "projection" and "introjection" (particularly the latter) rather unclear and even misleading. One would have expected the definitions to have a similar form and to differ primarily with respect to the direction of the alleged causal arrow. In projection, something "goes out" (so to speak) from oneself, and in introjection something is "brought into" oneself. But Hinshelwood's use of the terms "one person's" and "someone else" in his definition of "introjection" allow instances of projection to satisfy the definition. Of course, these are difficult concepts, and one reason for seeking to engage philosophers in the debate about them is to improve the clarity (or at least the consistency) of the way such concepts are used. But one would have thought that all Hinshelwood needs to say (roughly) is that in projection, one's feelings, etc. get transferred somehow to another person, whereas in introjection, another person's feelings, etc. get transferred to oneself.

At any rate, what needs to be examined is (a) whether appeals to introjection and projection explain various kinds of real-life cases any better than "folk-psychological" or commonsense accounts or appeals to nothing more than dissociation, and (b) whether (or to what extent) it is appropriate to describe the phenomena of projection and introjection as cases in which one person's mental contents or parts of the self "reappear" or get relocated in another.

Although I am not a clinician and have no more knowledge of Kleinian theory than what I learned from Hinshelwood's paper, I would like

to comment briefly on the first of these issues. There are serious commonsense objections that one could raise to some of Hinshelwood's claims. Consider his example of projection concerning the patient, Mr. B., who "viewed himself as persistently lively to a dramatic, even operatic degree; whilst I was only dull." Hinshelwood explains this polarization by making two claims: (1) that Mr. B "divested himself of certain aspects of his own mind which might be depressed or lifeless," and (2) that Mr. B "relocated" those aspects in his view of Hinshelwood. Now at the risk of seeming intolerably pedestrian to those readers who are psychoanalysts, (2) seems to claim far too much, and (1), if it is true at all, could be expressed without recourse to specifically Kleinian categories. In (1) Hinshelwood presumably describes an instance of splitting. But it might be described equally successfully as an instance of denial, dissociation, repression, or suppression (see Braude 1995, for an account of the distinction between these terms). As far as (2) is concerned, a plausible commonsense (or folk psychological) account of the matter would simply be that Mr. B finds his distorted self-image easier to maintain when he views others as considerably less interesting than himself. From this point of view, the process at work in Mr. B's mind is analogous (and possibly identical) to a familiar kind of self-deception, in which we distort the world around us in order to avoid conflicts with some other distorted view we are trying to maintain. One often sees this, for example, in victims of abuse who manage to view their abusers as caring and nonabusive. But the kinds of helpful distortions one places on surrounding events can vary widely and idiosyncratically, and I would suggest that the general psychological strategy here can be grasped without appealing to projection or introjection. In fact, Mr. B's case seems analogous to one in which a person tries to sustain an inflated self-image by viewing his friends as more *interesting* than they are—that is, the sorts of people with whom only a very interesting person would associate. It appears, then, that the lifelessness Mr. B attributed to Hinshelwood can be accommodated without recourse to the contentious claim that Mr. B's *own* lifelessness was projected onto another.

Similarly, it is unclear from Hinshelwood's ac-

count of the phenomena in groups why one community member's impatience with Ellen is an example of introjection of Ellen's own "severe inquisitorial function." Was this person the only one impatient with Ellen at that point? From Hinshelwood's account, it seems as if this impatience was expressed only after considerable discussion, including Susan's explanation of what had occurred, as well as attempts by several others at the meeting to examine Ellen's own contribution to the events of the previous night. But more important, isn't impatience with Ellen's behavior understandable and explainable quite apart from appeals to introjection? Here again, it is unclear why commonsense accounts will not do. People often see those who are stuck in a distorted or self-serving view of themselves as being self-indulgent and unwilling to do the hard work necessary to get out of their psychological rut. Impatience with such people seems analogous to impatience with those who exhibit other forms of cowardice or laziness—for example, friends who complain about their marriages or jobs but will not do anything to improve their situation. Even when we can sympathize with the fears and inertia these "stuck" individuals experience, for many there is a point at which sympathy runs out, and it is unclear why appeals to introjection or projection are needed to explain the impatience that finally emerges.

But let us suppose that we find a case that is plausibly explained by appealing to projection and introjection. Should these be described as cases in which mental contents or parts of the self get transferred to or relocated in other persons? Hinshelwood correctly acknowledges that if these locutions are to be taken seriously, they are not to be taken literally. For example, he concedes that the sense in which he feels a patient's anxiety "is not the sense in which I might have borrowed her glasses, or indeed her kidney or arm." Moreover, although his subjective experience in such a case involves "a curious and unsettling uncertainty about who one is," Hinshelwood concedes that he does not feel he has "*become* the analysand."

But he argues that the case still poses problems for a psychological continuity and connectedness model of identity. He claims that something has occurred which that model cannot accommo-

date. And it is here I believe that Hinshelwood may have overstated his case. He says a mental particular, "a concern to make coherent the thinking about A's experiences," in a sense got transferred from patient to analyst. Now even if that is true, why would it be a problem for the aforementioned model of identity? The reason, according to Hinshelwood, is that this concern "at one point identified one person [i.e., the patient] . . . [and] at another another point identified another [the analyst]." Now Hinshelwood may have been misled here by an ambiguity in the term "identified." But his claim seems to be false. A more modest and accurate description would be that the aforementioned concern for A was at one point truly predicable of one person, and then later it was truly predicable of someone else instead. But of course, a person may be described and even individuated in a context in ways that are not essential to the person's identity. For example, we might pick out a person as the individual who just spilt soup on himself, or who answered an interlocutor's question, or who is comforting a crying child.

A source of difficulty in Hinshelwood's account is the ease with which he shifts between talking about identity and one's *sense* of identity. Although it is far from clear what either of those expressions means, presumably they pick out different things. It may be true, then, as Hinshelwood says, that "the interpersonal network of relationships is a constitutive factor in the inward sense of individual personal identity." But it is unclear why differences or changes in one's *sense* of self must correspond to differences or changes in *identity*. In fact, different senses of oneself may coexist within individuals we clearly consider to be only one person. In everyday cases these may correspond to different social roles, or they may be conceived more broadly (as in public versus private self). And in cases of multiple personality disorder and other forms of dissociation there are good reasons for distinguishing both different *kinds* of senses of self (autobiographical versus indexical, see Braude 1995) as well as different instances of these kinds within a single person.

That last point merits a few final comments. The distinction I drew (in Braude 1995) between autobiographical and indexical states is complex and unavoidably less crisp than one would like.

Very roughly, it helps us to distinguish a phenomenological from an epistemological sense of self. A state is indexical for a person just in case the person believes the state to be his/her own. And a person's state is autobiographical just in case the person experiences it as his/her own. There are numerous examples of how these two senses of self differ, and how a person may at times have one but not the other. Two examples will suffice for now. First, in some cases of hallucination, out-of-body experiences, or depersonalization, people experience their bodily or mental states as if they were detached from them or as if they were acquainted with them from the perspective of an outside observer. Hence, those states would be nonautobiographical for those individuals. At the same time, however, these persons might believe that their experiences are phenomenologically delusory and that the states in question are really their own. If so, those states would be indexical for them. There are also cases in which one both experiences a state as one's own but consciously and actively believes that the state is not one's own (i.e., the state is both autobiographical and nonindexical). An interesting example (discussed more fully in Braude 1995) is the Zen nun who believes she has no self, and who adopts various strategies to counter what she believes to be the illusion that the autobiographical state of hunger is not her own.

Now as Hinshelwood describes his examples of projection and introjection, it might appear as if we needed to isolate yet another kind of sense of self. Consider the case in which Hinshelwood ostensibly "takes on" his patient's thinking capacity. If Hinshelwood is correct in suggesting that there is some robust (and not merely figurative) sense in which he experiences the thinking capacity as his own, then perhaps we need to distinguish yet another type of sense of self. After all, it is surely false to say that Hinshelwood actually has the patient's concern for her welfare, because the patient experiences that concern reflexively (i.e., she feels the concern to be about her), whereas Hinshelwood does not (he does not feel the concern to be about himself). So the patient's concern is not autobiographical for Hinshelwood. Similarly, her concern does not seem to be indexical for Hinshelwood either, because

he knows that the concern she felt was reflexive (i.e., self-referential) whereas the concern he feels is not (it is extra-referential). Nevertheless, I suspect we can avoid introducing yet another type of sense of self, so long as we describe the situation carefully enough.

What I think we can say is that Hinshelwood has an autobiographical state of feeling concern for the patient, and he also has the indexical state of believing that his concern arises from his taking on a responsibility the patient has disavowed (and which she must eventually reclaim). Hinshelwood acknowledges that when his patient stopped thinking he was taking responsibility for doing it instead. He says that this way of feeling the patient's anxiety is not analogous to borrowing the patient's glasses. But he does not say why it is not analogous to his putting on his glasses instead (i.e., an activity that suggests no interesting sort of sharing between analyst and analysand). Hinshelwood claims that he had not simply swapped roles with his patient, because in taking on the responsibility he experienced some uncertainty as to who he was. But that strikes me as a non sequitur. Apparently, Hinshelwood assumes tacitly that swapping roles never affects one's sense of self. But that seems antecedently implausible. In fact, one would *expect* it to affect the analyst's sense of self, because the newly assumed responsibility may feel like a new and crucial (if only temporary) component to his/her everyday interests and agenda. But it is not clear that such alterations in the subjective *sense* of self, even when correlated with corresponding changes in someone else, involves (as Hinshelwood claims) a relocation of their respective *identities*.

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