

# Self-narratives, story-telling, and empathetic listeners<sup>1</sup>

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*Autobiographies are simply literary expressions of the kind of narrative self-interpretation that we engage in, in our day-to-day lives.<sup>2</sup> Philosophical reflections on Elyn Saks's (2007) and Susan Brison's (2002) autobiographical narratives motivates my concerns in this paper. With reference to the Saks and Brison examples, I argue that constructing self-narratives and sharing them with empathetic others promotes a more flourishing life, and can be an especially valuable process for those who suffer from mental illness or trauma. In so doing, I reject a common objection to narrative accounts of identity, namely, that constructing self-narratives amounts to 'story-telling'. I also aim to explain the sense in which stigmatising those who suffer from sexual assault or mental illness exacerbates their suffering.*

**Keywords:** narrative identity; self-understanding; mental illness; trauma; story-telling.

## 1. Introduction

Susan Brison's autobiographical book is a philosophical reflection on the experience of being sexually assaulted and left for dead by her attacker. In the aftermath of the assault she suffers the effects of Post Traumatic Stress Disorder (PTSD). Elyn Saks suffers from acute paranoid schizophrenia and her autobiography is an account of how her psychotic episodes impair her both cognitively and affectively. Both individuals recount the ways in which their respective experiences diminish the overall quality of their lives. A central theme in Brison's and Saks's self-narratives concerns how we are both vulnerable to and dependent on others. More specifically, both Saks and Brison discuss how suffering from the effects of mental illness or disorder can splinter an individual's self-narrative, and, conversely, how empathetic others can help to rebuild it. These themes provide the impetus for this paper.

Narrative accounts of identity within contemporary philosophy claim that we constitute our identity, practically speaking, through the construction of an autobiographical self-narrative.<sup>3</sup> A central function of constructing a self-narrative is that it enables us to order our experiences, create a degree of meaning in our lives, and exercise agency. Our self-narratives also serve to shape who we are and how we behave, and thus, to shape our identity. This is because they capture those psychological motivations, actions, experiences, relationships, and decisions which define us and which are best understood in relation to aspects of our past, present, and future (Hutto, 2007). However, narrative accounts of identity have recently come under fire for—among other things—encouraging us to create falsified or fabricated life-stories in which we cast ourselves as the protagonists. A version of

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<sup>1</sup> Thanks to Bo Meinertsen and two anonymous reviewers for their helpful comments on an earlier draft.

<sup>2</sup> I take my cue here from Dan Zahavi (2007, p.180).

<sup>3</sup> Representative here are Paul Ricoeur (1991; 1994), Marya Schechtman (1996); Alisdair MacIntyre (1981), Daniel Dennett (1992), Peter Goldie (2003); Jerome Bruner (2003); Charles Taylor (1989); and Anthony Rudd (2009).

this objection has been developed by Samantha Vice (2003), who rejects the view that constructing self-narratives promotes a more flourishing life.

I have two main aims in this paper. First, I aim to explain the sense in which constructing a self-narrative, and sharing it with empathetic others, can promote a more flourishing life, particularly if one suffers from mental illness or trauma. To that end, I draw on Marya Schechtman's work in *The Constitution of Selves* (1996) to scaffold my discussion, and Saks's and Brison's autobiographical narratives.<sup>4</sup> Second, with reference to these autobiographical examples, I defend the view that despite Vice's 'story-telling objection' (2003), constructing a self-narrative does not amount to a story-telling exercise, although the former may contain features of the latter. My discussion here has four main practical implications: it speaks to the need to construct self-narratives; it highlights the fact that we need to be attuned to the difference between fabricated stories and self-narratives, while also allowing for the fact that some self-narratives will invariably involve an element of fabrication; it demonstrates how stigmatising individuals like Saks and Brison can exacerbate their suffering; and, it speaks to the need to find ways to be empathetic listeners to those suffering from PTSD or mental illness. Although these observations do not pertain to philosophical counselling directly, they do have implications for how we think about and approach philosophical counselling when dealing with individuals who have endured a trauma or whose thinking is disordered.<sup>5</sup>

In section 2, I outline the main features of a narrative account of the self and the constraints on what counts as an 'identity-constituting' self-narrative. Thereafter, in section 3, I explain what the story-telling objection involves, and why it is not necessarily a damaging objection. In sections 4 and 5, I discuss the Brison and Saks cases respectively, highlighting some of the central philosophical implications of each and using them to reinforce my discussion in sections 2 and 3. Finally, in section 6, I sketch the practical implications of these cases.

## 2. A brief overview of narrative self-constitution

In this section I focus on the main features of a narrative account of the self in order to scaffold my argument that constructing and sharing self-narratives can promote a more flourishing life. I develop and defend the latter claim in sections 4, 5, and 6.

In *The Constitution of Selves* (1996), Schechtman argues that a narrative account of identity is best equipped to respond to the kinds of 'identity crises' we as agents face during the course of our lives. While the cause and nature of identity crises varies dramatically from person to person, the nature of an identity crisis is that there is a sense in which we no longer know who we are and we find ourselves feeling estranged from aspects of ourselves and our lives. Mental illness, and post traumatic stress disorder due to interpersonal violence, are two common and severe sources of 'identity crises' insofar as they can disrupt our self-narratives and make self-understanding extremely difficult. It is thus that Schechtman's

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<sup>4</sup> It is not my concern in this paper to engage with the narrative identity debate per se, or to defend a particular narrative account.

<sup>5</sup> For the purpose of my discussion I use the term 'disordered thinking' broadly, to refer to cases like Saks's and Brison's where the individual suffers from mental illness or disorder.

narrative self-constitution view is germane to philosophical reflections on the Saks and Brison cases.

Narrative theorists, like Schechtman, start from the assumption that what distinguishes us from other sentient beings is that we are reflectively self-aware. Further, we have a unique, embodied first-person perspective from which we experience the world, and experience ourselves as the authors of our actions and decisions. It is from the first-person perspective that we engage in a process of self-understanding and self-knowledge. Self-understanding typically resembles the logic or form of a narrative inasmuch as we think of our lives as involving a past, present and future. On a narrative account, the distinct episodes of our lives typically make sense within the context of our 'life-story' as a whole (Schechtman, 1996, p.113). Self-understanding is thus temporally extended: an individual comes to understand herself through a process of looking backwards over her past and projecting herself forwards into her imagined future, by setting goals and making plans.

Narrative accounts of identity thus turn on a descriptive claim that qua human beings, we typically understand and experience our lives as a narrative, or collection of narratives, and an ethical claim that narrative self-understanding is essential to a flourishing, "well-lived life" (Strawson, 2004, p.428). Schechtman's narrative self-constitution view is one such account which hinges on two main insights: first, that we constitute our identity, that is, 'who we are', through the activity of constructing a self-narrative; and second, because we are social beings, there are constraints on what counts as an 'identity-constituting' self-narrative (Schechtman, 1996, p.95). An agent's self-narrative constitutes her identity inasmuch as it ties how she conceives of herself in the present to defining or significant experiences and events in her past, which in turn shapes her future actions, decisions, and plans. The idea here is that it is through constructing a self-narrative that we come to integrate ourselves and our lives into a roughly coherent whole and are able to exercise agency. As such, having a self-narrative is not solely a way of thinking about our lives, "it is an organizing principle of our lives...the lens through which we filter our experience and plan for actions" (ibid, pp.113–114).

Moreover, because we are social beings, our narratives will invariably be shaped by others and by contingent circumstances like our upbringing, social roles, and social experiences. In organizing our lives into an over-arching narrative, we can explain our actions and experiences in terms of characteristic patterns of behaviour, dispositions, affective responses, and thoughts, thereby making them intelligible to ourselves and to others. A practical implication of having a self-narrative is that we can, among other things, hold someone responsible for her actions on the basis of her self-narrative. For example, in a rape trial like Brison's where the accused pleads insanity, the judge and jurors come to a decision about the extent to which the rapist ought to be held responsible through a process of listening carefully to the different self-narratives (Brison, 2002, pp.107–108).<sup>6</sup> Further, insofar as the function of our self-narratives is to make our actions and decisions meaningful to ourselves and to others, those features of our self-narratives that are roughly in synch with others' perceptions of who we are

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<sup>6</sup> For a comprehensive account of the relationship between narrative self-constitution, moral responsibility, future self-concern, compensation, and survival, see Schechtman (1996).

significantly shape our identity. This, Schechtman argues, places constraints on what counts as an identity-constituting self-narrative.

Specifically, Schechtman argues that we constitute our identities when our self-narratives meet what she terms the 'articulation' and 'reality' constraints. According to the articulation constraint, an individual's self-narrative needs to be reasonably comprehensible to others and explain, when necessary, that her actions are part of an "intelligible life story" (Schechtman, 1996, p.114). According to the reality constraint, our self-narratives and beliefs about ourselves and the world should roughly cohere with "basic observational facts and interpretative facts" (p.120). This is because core to being a person is that we engage with other persons and as such we need to agree on the basic features of reality between us.<sup>7</sup> For our self-narratives to be coherent in this way, they must align with the sort of story others would tell about us. Thus, although our self-narratives can be more or less well-drawn and will admit of a variety of different styles, for a narrative to shape an individual's identity it has to be broadly intelligible and it cannot be unduly self-deceived or false (although our self-narratives will invariably contain some self-deception and errors of fact and interpretation).

For example Elyn Saks recounts how, when psychotic, she thought she had killed scores of people with her thoughts alone (and would declare as much). Even though her murderous thoughts formed part of her self-narrative at the time when she was psychotic, insofar as she had not killed scores of people with her thoughts alone, strictly speaking, that aspect of her self-narrative was not identity-constituting. This is because it was out of touch with reality (Schechtman, 1996, p. 127). In keeping with this, her friends and colleagues were able to discount her ravings as a symptom of her psychosis (Schechtman, 1996, p.127). The 'reality' constraint also requires that the characteristics and features an individual attributes to herself for the most part need to fit with the facts, and cannot be resistant to revision in light of contrary evidence. In addition, they cannot be radically mistaken or false, although the nature of narrative self-interpretation is that it will contain some elements of fabrication, misinterpretation and falsification. Thus, our self-narratives may also fail to meet the reality constraint (or, at least, aspects of them might) if we dramatically misinterpret reality. For example, inasmuch as Saks's paranoid delusions stem from fundamentally misinterpreting events in the world, they fail to meet the reality constraint, even though there is a basic sense in which her delusions are real to her at the time.<sup>8</sup>

Nonetheless, Schechtman is clear that we need not self-consciously narrate our lives and she allows for the fact that some people's self-narratives will be more emotionally engaged, self-aware, detailed, or prone to self-deception than others. As she says, "people actually *narrate* very little of their lives in any self-conscious way. Instead, they permit a general set of background assumptions about themselves and their lives to guide the unfolding of experience" (p.116). Underlying

<sup>7</sup> Schechtman's account of the articulation and reality constraints is somewhat contentious. Although a critique of her account lies outside the scope of this paper, for a discussion that deals explicitly with some of the limitations of the articulation and coherence constraints see Mackenzie and Poltera (2010 forthcoming).

<sup>8</sup> As will become apparent in section 5, while Saks's delusions arguably contravened the reality constraint when she was delusional, in constructing her autobiography she was able to revise aspects of her self-narrative and to treat them as symptomatic of her illness. Thus, I suggest that Saks's narrative is identity-constituting, even though it may not meet Schechtman's constraints at first glance. For a more detailed discussion of the sense in which paranoia breaches the reality constraint, see Schechtman (1996, p.126–130).

this aspect of Schechtman's account is the view that we can be mistaken about how a past action or experience affects how we conceive of ourselves and we may not always understand why we think, feel and act as we do.

Overall, a narrative account of identity like Schechtman's is based on the claim that it is a feature of our lives as social, *narrative beings*<sup>9</sup> that we construct and share self-narratives. Further, doing so promotes a more flourishing life because it enables us to organise our experiences and our lives over time, to constitute our identities, and to explain our actions, thoughts, and decisions to ourselves and others. Nonetheless, in a recent facet of the debate Samantha Vice has critiqued narrative accounts of identity for promoting falsification and fabrication. I turn now to a brief discussion of Vice's objection.

### 3. The story-telling objection<sup>10</sup>

In what follows I examine the 'story-telling objection', namely, the view that on one reading of the ethical narrative view, we *ought* to think of ourselves as protagonists in our own stories if our lives are to have any meaning at all (Vice, 2003, p.101). In my response to Vice I distinguish between story-telling, and constructing and sharing self-narratives—a distinction which is instructive for outlining the practical implications of my view in section 6.

Vice's 'story-telling' objection is a direct response to the ethical narrative claim that we ought to construct self-narratives as doing so promotes a more flourishing life. According to Vice, if we take the narrative view 'seriously' and 'literally,' it requires that we cast ourselves as 'characters—usually the protagonists—of the stories we tell or could tell about ourselves' (2003, p.93). Vice also argues that while some people may think of their lives and themselves in narrative terms, few do; and those who *do*, tend to do so only when they are being particularly reflective (p.97). She deems the narrative view 'seductive' as it appeals to our desire to construct meaning in our lives, create ourselves, and to have a coherent story to tell. Vice also argues that our lives can be meaningful even if we do not construct self-narratives or think of our lives in narrative terms. She presupposes that narrative theorists like Schechtman are committed to the view that we need to see ourselves as characters in a life-story, and argues that central to self-knowledge is that we do *not* see ourselves as characters in stories of our own creation and that we need to 'think of our lives as they really are' (p.104).

Vice argues that if we try to mould ourselves into the genre of a narrative and conceive of ourselves as a particular 'character' (which she thinks the narrative view recommends) then we are likely to be more prone to self-deception, and may undermine who we really are in our efforts to fit the trappings of a particular character. A worrying implication, argues Vice, is that in so doing we run the risk of constraining autonomy and being inauthentic, since those who try to live up to the standards of their perceived identity, are limited to making choices consistent with that perceived identity. Her point is that authenticity and autonomy require acting in accordance with what we most strongly identify with. If what we

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<sup>9</sup> "Narrative beings" in this sense means beings whose lives have a narrative structure and who construct (both consciously and unconsciously) narratives of their lives.

<sup>10</sup> Although there are other objections to narrative accounts of identity, I limit my focus here to Vice's story-telling objection. See Strawson (2004; 2008), Hutto (2007), Peter Lamarque (2004) and John Lippitt (2007) for other critiques of the narrative view.

identify with is fabricated or fictional then our actions will be inauthentic and thus cannot be autonomous. For example, if I pursue a career as a prima ballerina because I have appropriated my parents' wish to spawn one, my decision to pursue ballet may be inauthentic and non-autonomous, because it stems from motivations that are not, strictly speaking, my own.

Furthermore, Vice claims that even in cases where we do recount a narrative (taking as her example times of crisis when we visit psychologists) we do not merely 'tell a story'; we attempt to get at the truth of what is going on or has gone on in our lives, thereby finding and attributing meaning to the events therein. While she says this, Vice does not seem to take seriously the fact that this is precisely the point narrative theorists like Schechtman are trying to make: in constructing a self-narrative we are, consciously or unconsciously, constructing as accurate an account of ourselves and our lives as we possibly can. An important implication of the reality constraint is that it deflects Vice's objection that narrative self-constitution amounts to 'story-telling'.<sup>11</sup> Vice's charge has little hold given that Schechtman (who Vice explicitly cites) expressly denies that *any* story we tell of our lives, fictitious or otherwise, counts as an identity-constituting self-narrative. Schechtman is clear that there is a difference between "telling a story about ourselves" and identity-constituting self-narratives, stating that a "view that held that *any* narrative self-conception was identity-constituting would be committed to the obviously false claim that persons cannot be mistaken about themselves" (1996, p.94).

Thus, although Vice may be right that in cases where we construct fabricated narratives and repress aspects of our actual identity, our actions and decisions will invariably be inauthentic and lack autonomy,<sup>12</sup> overall she distorts what narrative accounts of identity amount to. Nevertheless, claims like Jerome Bruner's that "self-making is a narrative art" (2003, p.210) and Daniel Dennett's claim that our experiences should "cohere into a *single* good story" (Dennett, 1992, p.114), lend themselves to Vice's assumption that constructing a self-narrative is a fictive act. Although an individual's self-narrative may well contain some errors of fact and some misinterpretation and may share some of the features of story-telling, insofar as a self-narrative is primarily an attempt to get at an accurate account of one's self and one's life, it is distinct from a fictional story. The claim that narrative self-understanding *necessarily* promotes falsification and fabrication is thus contentious. Furthermore, to claim that constructing a self-narrative can profoundly influence our lives is distinct from arguing that life is a narrative and we are the authors of that narrative (Goldie, 2003). Vice, however, fails to fully appropriate this difference in her paper. A useful way to disambiguate mere story-telling from narrative self-understanding is with reference to Paul Ricoeur's distinction between the 'fictive character' of narrative self-understanding and 'mere fiction' (1994).

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<sup>11</sup> Similarly, Galen Strawson (who has influenced Vice's account) takes narrative theorists to be committed to the claim that in order to have a self-narrative we have to treat ourselves and our lives as 'fitting the form of some recognized narrative genre' (2004, p.442). Strawson also argues that narrative self-understanding distorts the 'truth' of an individual's identity (p.447) and thus, like Vice, seems to presuppose that those who conceive of themselves and their lives in narrative terms are more prone to self-deception and fabrication.

<sup>12</sup> See Velleman (2006, pp.330–359) for a compelling discussion of the sense in which repression is inimical to autonomy and to authentic self-expression.

Briefly, Ricoeur argues that while mere fiction involves creating and recounting a fictional story, narrative self-understanding has a fictive character insofar as we employ a degree of imaginative interpretation in recounting, interpreting, and reinterpreting the events in our lives. As Ricoeur says, “it is precisely because of the elusive character of real life that we need the help of fiction to organize life retrospectively, after the fact, prepared to take as provisional and open to revision any figure of emplotment borrowed from fiction or from history” (1994, p.162). This is not to say that our self-narratives are wholly fictional or even largely fictional. Rather, that we are creative beings who come to understand our lives and impose meaning on the experiences therein retrospectively. In that sense, narrative self-understanding may involve an unavoidable element of fabrication and fiction. Unlike a work of fiction, our self-narratives do not clearly delineate between author, narrator, and characters, and they do not have a set beginning, middle and end (p.159–160). Further, an individual’s self-narrative is inextricably bound up with the self-narratives of others and thus we are only ever co-authors of the meaning in our lives (p.162). The discussion of the Brison and Saks cases in sections 4 and 5, illustrates the sense in which this is so and reinforces my claim that Vice’s story-telling objection is not as damaging to narrative accounts of identity like Schechtman’s, as it may appear.

In sum, narratives are central to how we lead our lives. Moreover, for the most part, we do not set out to deliberately deceive ourselves and others, although we may deliberately omit or emphasise various aspects of our self-narratives relative to the context of our re-telling. Our self-narratives are unlikely to be able to convey the nature of our psychological lives with absolute coherence and accuracy. Rather, our self-narratives are dynamic and subject to a degree of self-interpretation, reinterpretation, and revision over the course of our lives. As such, it is generally not the case that we fabricate stories of our lives (although there are exceptions to this). Thus, just as I think that it is mistaken to interpret the narrative view as a view that promotes falsification, fabrication and distortion, so it is similarly mistaken to assume that a narrative account of identity demands that we construct wholly accurate and detailed self-narratives. In sections 4 and 5, I expand these claims with reference to Brison’s discussion of PTSD, and Saks’s discussion of managing schizophrenia.

#### **4. Violence and Post Traumatic Stress Disorder**

In *Aftermath*, Brison describes how being sexually assaulted and left for dead in a ravine while on holiday in the South of France quite literally shattered her self-narrative, making her feel as if she had ‘outlived herself’ (Brison, 2002, p.9). In the immediate aftermath of trauma, Brison lacks a self-narrative binding together the disparate aspects of her life pre- and post- the assault. Some of the very foundations of a meaningful life, such as setting goals and making life plans, are not things she feels able to do, in large part because she feels plagued by the symptoms of PTSD (p.40). Brison’s account illustrates how when an agent’s self-narrative is shattered, her capacity for effective agency is compromised. *Prima facie*, Brison’s account reinforces the central insight underlying narrative accounts of identity, that in order to live our lives we need a self-narrative and we need to conceive of ourselves as the primary authors of our actions and decisions. This,

however, was precisely what Brison was missing as PTSD diminished the 'mine-ness' (Ricoeur, 1991, p.193) of her self-experience and—as a result—her practical interest in continuation. Further, trauma obliterated Brison's 'former emotional repertoire' and her motivation to construct a self-narrative at all (Brison, 2002, p.50).

There are three main features of Brison's account worth highlighting here. The first concerns how stereotypes and oppressive social norms exacerbate the victim's isolation and suffering; the second concerns the role of empathetic listeners in restoring a self shattered by violence and trauma; and the third concerns the ways in which Brison's account can be used to reinforce the view that constructing a self-narrative is distinct from story-telling. I outline each in turn.

Brison argues that the experience of trauma illustrates that the self is fundamentally relational: "capable of being undone by violence, but also of being remade in connection with others" (p.xi). This illuminates a central feature of human life, namely, that we are both acutely vulnerable to, and yet inescapably dependent on, others. One of the themes in Brison's book concerns the sense in which the victim's status as a victim can be perpetuated by oppressive social stigmas. Representative here are assumptions that the rape victim somehow provoked her attacker's lust, as well as asymmetrical responses to the rape victim (by police officers, jury members, and citizens) on the basis of her class, race, or social status. For example, Brison recounts feeling somehow 'fortunate' that she was so badly beaten, that she was married at the time of the attack, and that she was not dressed in a provocative manner on the day of the attack, because it meant that people (and in particular, the police) did not question the seriousness of her ordeal. These aspects of Brison's account start to shed some light on how important it is that others bear witness to an individual's self-narrative in an empathetic and open manner.

Brison also explains how she was in a better position to recount her experience and be taken seriously because of her education, class, race and so on (p.94). By implication, had she been a sex worker, homeless, a different ethnicity, or raped in the context of a relationship or during a date, her account may have been deemed less credible. One of Brison's underlying claims is that in cases where others judge the victim on the basis of stigmas, it can be profoundly isolating at a time in her life when she is already feeling cut off from herself and the world. As such, how others respond to an individual's self-narrative can threaten and undermine the victim's recovery process, particularly if they lack empathy or fail to acknowledge the harm that was done to her.

Conversely, another pervasive theme in Brison's book involves the role of empathetic others in enabling trauma sufferers to piece their self-narratives back together. Empathetic others are those who are able to bear witness to the victim's trauma and to identify with her suffering. In the case of sexual assault support groups, empathetic others will typically have endured a similar trauma themselves and so will be able to better comprehend the victim's plight. Brison argues that trauma survivors "are dependent on empathetic others who are willing to listen to their narratives" (p.62).<sup>13</sup> As Brison describes it, it is through sharing her trauma narrative with empathetic others, and through the process of empathising

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<sup>13</sup> Hilde Lindemann Nelson reiterates this aspect of Brison's account, arguing that recounting one's self-narrative to empathetic others can facilitate rebuilding a self in the wake of social oppression or trauma (2001, p.111-112).

with other trauma survivors and hearing their stories, that she was able to begin to piece her life back together. This is in part because she was able to begin to stop blaming herself for the attack.

A ramification of Brison's account is that gaining some sort of emotional closure (Goldie, 2003) is particularly difficult for trauma survivors because they tend to blame themselves and, because of the symptoms of PTSD, they tend to be unable to see their experiences and themselves in an objective light. Rather, they are 'flooded' by the past (Wollheim, 1984, pp.130–131) and caught up in the immediate present. A significant implication of Brison's view is that gaining emotional closure is relational and facilitated by the process of shared trauma narratives. It is by "constructing and telling a narrative of the trauma endured, and with the help of understanding listeners, the survivor begins not only to integrate the traumatic episode into a life with a before and after but also to gain control over the occurrence of intrusive memories" (Brison, 1997, p.23). It is thus that constructing and sharing her self-narrative enables the survivor of trauma to manage the effects of her PTSD, to rebuild her narrative identity and sense of authorship over her life, and to begin to exercise effective agency once more. It is in these ways that having a self-narrative can promote a more flourishing life.

This brings me to the third point: reflections on Brison's account illustrate the sense in which constructing a self-narrative is distinct from story-telling. The basic purpose of sharing trauma narratives is to work through what actually happened to the victim and to bear witness to the ways in which the trauma affects her in the present. The process of constructing a trauma narrative with the help of empathetic others is therapeutic in the ways Brison suggests precisely because it attempts to get at what happened to the trauma victim as accurately, authentically, and objectively as possible. Thus, although the trauma victim may blame herself for the assault, sharing that aspect of her narrative with empathetic others better enables her to realise that what happened to her was not her fault. It provides a means for the victim to see her experiences in a more objective manner, from the perspective of those who bear witness to her self-narrative. Unlike mere story-telling, which is first and foremost fictional even though it may draw on aspects of real-life, a self-narrative first and foremost attempts to capture and portray real-life, even though it may draw on aspects of fiction in the telling and retelling. Nevertheless, the element of fiction in a self-narrative does not detract from the fact that an individual's self-narrative attempts to get at "the truth of a self, grasped by itself" (Lloyd, 1986, p.170).

Moreover, re-constructing a self-narrative with the help of empathetic others enhances the predictability and coherence of the victim's life, making the experiences therein more intelligible and manageable. That is not to say that constructing a self-narrative can eradicate the trauma or undo the damage, merely to say that it can help in restoring some semblance of order and coherence to the victim's life. In this way, having a self-narrative promotes a more flourishing life where this is evident in agents whose self-narratives are shattered by trauma or disordered thinking.<sup>14</sup> In section 5, I reinforce this claim with reference to the ways in which Saks's self-narrative was fragmented by psychopathology.

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<sup>14</sup> Arguably, in cases where others are able to bear witness to traumatic narratives in an empathetic manner, and are able to help the victim to restore a shattered self-narrative, it can also promote a more flourishing life. I revisit this claim briefly in sections 5 and 6.

## 5. Saks's experience of schizophrenia

Elyn Saks suffers from a form of schizophrenia that causes her to have florid paranoid delusions.<sup>15</sup> Her autobiography tells of her struggle to accept that she is mentally ill and requires medication and intensive psychoanalytic therapy. I focus on three main features of Saks's account in this section. First, the nature of her illness is that it fragments her self-narrative and causes her great distress, thereby diminishing the quality of her life. Second, people's propensity to stigmatise her in light of her illness is at times highly destructive and exacerbates her psychosis. And third, empathetic colleagues, friends, and professionals helped her to manage her illness through constructing an 'illness narrative'. Although illness narratives may include elements that are out of touch with reality, I suggest that they are nevertheless identity-constituting and reinforce the ethical narrative claim. As such, contra Vice, I use my discussion of Saks to illustrate the sense in which constructing a self-narrative can promote a more flourishing life. In what follows I outline each feature in turn.

First, Saks recounts how her illness disrupts her self-narrative and alienates her from her own thoughts, actions, and beliefs, and from others. Saks explains the nature of a psychotic episode in terms of the gradual dissolution of her sense of self:

consciousness gradually loses its coherence and the "me" becomes a haze. ... No core holds things together, providing the lens through which to see the world. ... Random moments of time follow one another. Sights, sounds, thoughts and feelings don't go together. No organising principle takes successive moments of time and puts them together in a coherent way from which sense can be made (Saks, 2007, p.12).

When psychotic, Saks lacks a conception of herself as narrator and her sense of authorship over her actions and decisions is missing: she is quite literally 'cut off from herself' (Wollheim, 1984, p.273). In the grip of a psychotic delusion, Saks's first-person perspective is fundamentally altered, her agency impaired, and her sense of time dissipates. She likens a psychotic episode to feeling assaulted by thoughts, visions, and feelings (2007, p.212) and her psychosis means that she cannot manage information in the same way as a mentally well person can. In the case of extreme psychotic episodes, "the wall that separates fantasy from reality dissolves", making her feel frantic (p.104), and making it exceptionally challenging, if not impossible, to be an effective agent. I revisit the relationship between Saks's illness and her self-narrative shortly.

Second, Saks had to deal with the stigma attached to being 'mentally ill'. At best, others thought she was odd or eccentric, and at worst, they were terrified of her. Saks describes how she knew she could not be transparent about her illness in her professional life or, for example, when applying for jobs and attending job interviews, because it would have stood against her. Saks deemed medical

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<sup>15</sup> Despite the severity of her illness, Saks has an admirable professional life: she is currently professor at The University of Southern California, and she achieved a Masters in philosophy at Oxford and a law degree at Yale (while in and out of psychiatric hospitals).

professionals amongst those most likely to stigmatise her in virtue of her illness, saying, “Stigma against mental illness is a scourge with many faces, and the medical community wears a number of those faces” (p.214). One of the most horrific experiences Saks recounts was a practice called “making the patient safe” where doctors and psychiatric nurses strapped her to the bed, covered her body with a net, and left her in isolation to ‘calm down’ when she was delusional. However, being isolated and strapped down increased her paranoia, as she felt she could not escape the delusions. According to Saks, “No single hallucination, no threat of demonic forces or impulses I couldn’t control had ever held me hostage like this” (p.139). In short, being psychotic terrified Saks, and made her feel acutely isolated and distressed. And yet, when others (including and perhaps especially, health care professionals) failed to listen to her, empathise with her, or to take her distress seriously, it exacerbated her psychosis. My point here is that the stigmas associated with mental illness similarly diminished the quality of her life and at times, further fragmented her self-narrative.

Third, Saks shares with others who suffer from psychopathology,<sup>16</sup> the fact that she experienced difficulty appropriating that she is ill and needs medication and care to manage her illness. Saks notes the irony that despite her intelligence she held onto the belief that most people believed that evil forces were putting thoughts into their heads and controlling them (p.281). Like Brison, Saks found that empathetic others were central to managing her illness and restoring her self-narrative. Specifically, her close friends and Mrs. Jones, her psychoanalyst, were an invaluable source of social support. Mrs Jones neither judged nor feared Saks and allowed her to communicate her terrifying delusions. Saks says Mrs Jones’s “steady and calm presence contained me, as if she were the glue that held me together. I was falling apart, flying apart, exploding. [...] She] gathered my pieces and held them for me” (p.93). Thus, much like Brison, Saks came to realise that she could not manage her illness or constitute herself on her own: she needed the help of friends and professionals to construct an overarching self-narrative and to piece her life together. Saks is thus an example of an agent whose narrative is fundamentally fragmented, although largely coherent and intelligible overall (as evidenced by her autobiography). Insofar as this is the case, Saks manages to construct what psychiatrist James Phillips terms an “illness narrative”. In the remainder of this section I explain how illness narratives can promote a more flourishing life for those, like Saks and Brison, who suffer from mental illness or disorder. This aspect of my discussion reinforces the ethical narrative claim and the distinction between constructing a self-narrative and story-telling.

Illness narratives are predominantly characterised by suffering (Phillips, 2003a, p.316); on average lack the coherence and intelligibility of many self-narratives; and they have a more chaotic temporal structure as the individual’s experience of time is not ordered into a past, present and future.<sup>17</sup> Although I do not purport to engage with Phillips’s account in detail here, I want to highlight a few central features of his view in order to reinforce my defence of the view that

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<sup>16</sup> See Lloyd Wells (2003), Phillips (2003a, 2003b), and Melvin Woody (2004) for more detailed discussions on different kinds of psychopathology and their effects.

<sup>17</sup> Phillips takes his cue from Wells’s (2003) discussion of four patients, each with a different psychopathology. Following Phillips I use the term ‘illness narratives’ to refer to psychopathological agents who maintain a narrative identity despite the symptoms of their disorder.

constructing a self-narrative promotes a more flourishing life. First, Phillips argues that an illness like schizophrenia can threaten narrative unity and make it difficult for the agent to experience her life as a unified, coherent whole (p.324). This lack of narrative unity can in turn threaten the quality of her life, and her capacity for agency. Second, the disordered agent's experience of time is such that she may be unable to organise her life into the general structure of a self-narrative, which can contribute to the distressing and chaotic nature thereof (*ibid.*). Third, disordered agents experience substantial emotional turmoil because of their illness, which—along with the prevalence of suffering—can disrupt their self-narratives. Finally, although there is a point at which we could say that an agent's sense of self is so diminished that her self-narrative is lost, self-narratives can nevertheless be severely diminished and still serve to organise the agent's experiences and impose meaning on her life (p.325). Thus, when dealing with illness narratives, it is mistaken to assume that we can make threshold claims about which self-narratives are identity-constituting and which not.

On Phillips's account, sufferers of schizophrenia can be divided into those who can re-establish their narrative identity by taking medication and managing their illness with regular psychiatric care, and those whose sense of themselves as author of their lives diminishes with each psychotic episode (2003b).<sup>18</sup> With medication, empathetic others, and psychoanalysis, Saks is able to construct an illness narrative fragmented by psychosis, which “combines a realistic acknowledgement of her condition with an assurance that there is more to her than the schizophrenia” (Phillips, 2003b, p.332). An individual's self-narrative is thus an accomplishment, where this is quite clear in the case of agents like Saks and Brison who manage to construct illness-narratives. For example, Brison's illness narrative constitutes her as a survivor of trauma<sup>19</sup> and Saks's constitutes her as a sufferer of a severe mental illness who requires ongoing psychiatric care. Although Schechtman may want to say that insofar as Saks's delusions are at odds with reality they are not strictly speaking ‘identity-constituting’. I think it is important to allow for the fact that Saks's delusions significantly shape who she is and how she acts and in that sense they form part of her identity as an individual who struggles to manage the symptoms of schizophrenia. Further, as mentioned, Saks revised her interpretation of events in the past with the benefit of hindsight and lucidity. As such, although when she was psychotic her delusions seemed real, in retrospect, she understands them as symptomatic of a psychotic episode. In this way, illness narratives are functional and therapeutic because they provide meaning and coherence to the distinctive events and long-term suffering experienced by those who suffer from mental illness or disorder (Phillips, 2003a, p.320).

Arguably, an illness narrative like Saks's which is interspersed with delusions, may be somewhat fabricated. Nevertheless, the fact remains that, like Brison's, Saks's self-narrative is a concerted effort to get as accurate an account of herself and her life over time as possible. In constructing a self-narrative that acknowledges her illness as well as acknowledging her academic successes, she is doing precisely that. As such, illness narratives are also distinct from story-telling as they

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<sup>18</sup> Phillips (2003b) discusses one of his patients, Mrs M., whose experience of schizophrenia is similar in kind to Saks's.

<sup>19</sup> For an account that explicitly connects Phillips's account with trauma, see Woody (2004, pp. 329-345).

are rooted in an attempt to capture and convey real-life experiences and struggles. Drawing on some of the claims I make here, in the following section I outline the practical implications of my discussion.

## 6. Practical implications of the Saks and Brison cases

What has emerged from this discussion is that not only do we tend to construct and share self-narratives with each other, but that doing so is essential for a flourishing life. Our self-narratives are the organising principles of our lives and insofar as having a self-narrative scaffolds our actions and decisions, it is an essential feature of agency.<sup>20</sup> In cases where individuals suffer from mental illness or disorder, constructing an illness narrative with the help of empathetic others can better enable the individual to manage the symptoms of the illness, and to alleviate some of the distress caused by disordered thinking. These observations speak to the need for us to acknowledge the role of narratives in our lives and in managing some of the symptoms of mental illnesses or disorders like Saks's and Brison's.

What has also emerged is that we need to be attuned to the difference between fabricated stories and self-narratives. While the former are fictional, the latter are not, even though they may contain some self-deception, elements of fiction, imaginative interpretation and possibly even delusion. For the most part, our self-narratives will stem from a desire to capture an accurate account of ourselves and our lives over time. However, it may be the case as Vice suggests, that for some people, some of the time, a desire to construct a self-narrative stems from an attempt to be something that they are not. When that happens, it can promote inauthenticity and compromise the individual's autonomy. Nevertheless, such a self-narrative would not count as 'identity-constituting' on a narrative account like Schechtman's. Thus, while self-narratives have a fictive character and share certain traits with fiction, they are not fabricated and falsified in the way stories are.

Philosophical reflections on the Saks and Brison cases highlight the sense in which constructing a self-narrative is distinct from story-telling, and elucidate the value of suspending the kinds of stigmas we may attach or be tempted to attach to sufferers of mental illness and victims of sexual assault, as they can be extremely destructive and exacerbate the agent's suffering. Arguably, when bearing witness to another's self-narrative (particularly when that narrative is characterised by trauma or illness), we need to find ways to become aware of those stigmas that we may take for granted. And, where possible, we need to find ways to be more empathetic listeners. The underlying assumption here is that although many of us may generally be quite well-equipped to care for and empathise with those who are physically ill, we are less frequently equipped with the skills to empathise with victims of trauma or with individuals who suffer from mental illness. On the face of it, at least, we are typically less likely to know what it is like to suffer from the effects of PTSD and/or mental illness than we are to know what it is like to suffer from influenza, from infections, or from broken limbs. Thus, it is much more difficult to imagine what it feels like for the individual who suffers from mental illness or disorder as we may lack the means to imaginatively project ourselves into their shoes (Goldie, 2006). Finding ways to bear witness to another's

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<sup>20</sup> For recent discussions on the relationship between narrative and autonomy, see Christman (2008), and Mackenzie and Poltera (forthcoming 2010).

self-narrative in an empathetic manner is a fundamental source of social support and plays a significant role in restoring a shattered self. This is especially so for those, like Brison and Saks, whose self-narratives are fragmented by the symptoms of their respective psychopathologies.

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