The Self: I and My Body

The concept of the self, or the person, or the "real me" is frequently taken for granted as a metaphysical ultimate, that is, as a primitive term or entity which cannot be reduced to, or analyzed into, anything simpler, and is somehow there to be found. The body of course is neither ultimate nor simple: it is composed of familiar chemical elements, into which it will disintegrate. But am I the same as my body? or is it I who have a body? Note that the question is not, who am I? but what am I? There is clearly a strong sense in which I am not identical with my body. This insight has been expressed in a multitude of ways. "The spirit is willing but the flesh is weak"; "Our bodies are our gardens, to the which our wills are gardeners" (Othello); "You bury only my body, not me" (Socrates); "This body of mine is Gautama's body, and it will be dissolved in due time ... but Buddha will not die" (Buddha); the Orphic pun on soma sema ("the body is a tomb"); and not least by the old Jewish patient who complained to Erik Erikson, "Doctor, my bowels are sluggish, my feet hurt, my heart jumps, and, you know, Doctor, I don't feel so good myself."

The issue may be put thus: is my body an object of my experience, or is it the source of my experience? Do "I" discover "my body?" When I first touch my foot, is that a different kind of experience from my first touching a table? "I" can cause
changes in "my body"—does this mean that "I" am separable from "my body"? Are my eyes transparent windows through which I look, so that conceivably "I" could look through other eyes? Could "I" possibly be in another body? smile with another mouth? feel sad in another heart? My eyes are the only eyes I cannot see. My body is the only body I can control directly; it is the only avenue through which I can influence the world outside. As a baby, I had to learn the difference between my thumb and my mother's nipple: if all events occurred as and when I wished, would I ever find out where my body ended? Is it logically possible, asks Schlick, that I might say, I have a pain in the candlestick? (Note that these issues are philosophical rather than scientific; they are concerned with the meaning of concepts, not with the facts; the criterion for settling such questions is not empirical possibility but freedom from logical contradiction.)

### Continuity of the Person

What is it that makes for the continuity, or sameness, of the person? Would you be the same person if you changed your clothing style radically? or your hairdo? or if your features were altered by plastic surgery? Would you be the same person in a wheelchair? or if your skin color were different? or your sex? What if these changes had occurred ten years ago? or right after you were born?

Perhaps the continuing identity of the person is not bodily. (Emphasis on the mind—the "Ego cogito"—dates from Descartes.) What if you had another nationality? spoke a different language? had a different religion? (religious conversion is often described as a rebirth). *Is there an essential core, a true self, an inner you, an identity of the person*, which would be the same if you had been brought up from birth by foster parents, say, in China? *Sartre* and the existentialists deny this; *they say that you are what you are as the result of a series of "accidents," fortuitous circumstances (such as race, sex, and nationality) which might have been other than they are. You delude yourself if you think you can find a real inner, personal essence.*

*The problem is to find a criterion of individuation*: what is it that identifies a person as a distinct entity? Rosencrantz and Guildenstern in Hamlet are always on stage together. At their first appearance, this is said:

King. Thanks, Rosencrantz and gentle Guildenstern.
Queen. Thanks, Guildenstern and gentle Rosencrantz. Is it possible that the king and queen are confused? or even that Shakespeare did not distinguish between Rosencrantz and Guildenstern as persons? Tom Stoppard raised the interesting possibility, in his play *Rosencrantz and Guildenstern Are Dead*, that they themselves may have had doubts as to who was who. (One of them introduces himself as the other, and has to be corrected!) Mark Twain described an interview in which he explained to his interviewer that he was one of identical twins; one twin had drowned in his bath when two weeks old, "but we didn't know which ... one of us had a peculiar mark, a large mole ... that was me. That child was the one that was drowned!"

Is existence at a certain place and time part of the person? Consider the relation between spatial location and sameness: I hold in my hand the "same pen" I had in China; but, if we could somehow move the Hudson River to China, it would not be the "same river." Being in a certain place is part of being the same river, but not of being the same pen. What about being the same person? Consider temporal location. If you see a photograph of yourself at the age of three, you ask, was that angelic child really me? If you are told you will someday be a toothless doddering imbecile, you say, Oh no! that won't be me. Thus we may intuitively reject identification with ourselves at points far distant in time (d. the self-contradiction in "time travel" in Chapter 12).

Is ancestry part of the person? The genes you inherit from your parents, and which were fixed at the moment of your conception, will normally be transmitted unchanged to your descendants. This sum of genetic determinants, or genotype, lives on, not because it is immortal, but because it replicates itself. How you grow as a person after the moment of your conception depends upon the continuous interaction between your unchanging genotype and your changing environment. Because environments differ so widely, a vast number of different mature phenotypes is possible from a single genotype. For this reason it is practically impossible to isolate innate from acquired behavior patterns. Also for this reason, the Darwinian theory of evolution, based on natural selection among phenotypes, finds it difficult to predict the future course of evolution (Chapter 13).

The effect of environmental changes may clearly be seen in Japanese teenagers today—they tend to be a head taller than their parents—and in the children born in Israeli *kibbutzim*, who are
so different from their European-bred parents. **Rene Dubos** writes,

> Genes do not determine traits, genes only govern the responses of the person to environmental stimuli ... man's body and brain have not changed significantly during the past hundred thousand years. The same set of genes that governed man's life when he was a Paleolithic hunter ... still govern his anatomical development, physiological needs, and emotional drives .... Human nature ... is the historical expression of the adaptive responses made by man during his evolutionary past and his individual life. Genetic and experiential factors operate in an interrelated manner in all biological and behavioral manifestations. ... The child is pro-

grammed by the conditions of intra-uterine and early post-natal life ... He can never change his past.

As long as you are alive, your body grows and decays. The cells that make up your body are constantly being discarded and replaced. Where do the replacements come from? From some fish now swimming in the Pacific Ocean, some plant now growing in Idaho. **Metabolism is the process of remaking one's body by absorption and ingestion. If the body's cells are almost entirely replaced every seven to ten years, what makes one's body the same body?** Only its relatively constant form. An analogy would be an army regiment marching: every minute some soldiers may drop out and be replaced by others; after a while perhaps not one man who started is still marching, but it is the same regiment. A club is a similar case: all of its founders may be deceased, the original building sold, but it may continue to be "the same club" because the new members follow the same traditions.

**How important is bodily form?** In *The Brothers Karamazov*, Grigory has fathered a six-fingered child: "don't christen it," he declares, "it's a confusion of Nature!" (Real monstrous births are more frequent than you might suppose; there is an unsettling collection in the museum at Salzburg.) The local priest must decide whether to baptize the "confusion"; that is, he must determine whether or not it is human. What latitude does he have?

If your cat (Tobermory!) began to talk and read and study philosophy, would you ever call it human? When Actaeon was turned into a stag and Narcissus into a flower, did they continue to be the same persons? In Kafka's "Metamorphosis," a man awakens to find that he has the body of a large cockroach: is he still the same person?

In the new biological technique called "cloning," a cell can be
removed from a living animal and nurtured into full independent growth. The new animal is genetically identical to its single "parent." This technique has apparently been somewhat successful with a frog. Suppose it were performed on a human being. Would the cloned person be a continuation of the cell donor? If human beings could reproduce by fission, as the amoeba does, each half would have not only the same genes but the same memories. Would there be one person or two?

Discontinuity in time also raises questions about personal identity. Rip van Winkle was presumably the same person after his twenty-year slumber; but in the new science of cryogenics, the body can be frozen and "kept alive" almost indefinitely-after hundreds of years is the person the same?

When Does Life Begin and End?

The relation between the person and his body has other aspects. When does life begin? that is, when does a blob of tissue become a person? The Catholic Church for centuries permitted abortion prior to the "quickening" of the fetus (during the first eighty days of pregnancy) . When does life end? Today the heart can be artificially kept beating for long periods. "With enough tubes in a person and surrounded by oxygen there is hardly any way a patient can die," a doctor has said. President Eisenhower was kept alive by electrical stimulation of the heart, forced feeding, and artificial respiration long after he could not possibly perform these functions by himself. A wealthy Midwestern matriarch with encephalitis was kept alive in a coma for five years; tended seven days a week by three shifts of nurses, she never said a word, never made a voluntary movement; her brain was dead. Physicians now propose three criteria for the irreversible loss of consciousness which would be defined as death: lack of response to stimuli, even those normally very painful; no movement or spontaneous breathing; and no reflexes. The "flat" encephalogram would be deemed corroborative evidence of death. Under these circumstances, may a surgeon extract a still-beating heart, or another organ, to transplant it? Is there an ethical distinction between putting a person to death and withdrawing the means whereby he is kept alive?

Recently in a Brooklyn hospital two infants were born, a few hours apart; one had a deformed heart valve that would have caused the child's death within weeks, the other had a brain defect likewise incompatible with survival. Physicians trans-
planted the heart from the brain-damaged infant to the one with heart disease: "we were trying to make one whole individual out of two who had no chance of survival."

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**Memory**

*Let us consider memory as a possible criterion for the continuity of the person.* Rip van Winkle remembered his past; what if a person in a cryogenic experiment, on being rewarmed to life, remembers nothing? With sophisticated brainwashing, your memories now can be edited, or elided, and replaced with others: do you then become a different person? Are you the same person after hypnosis? or after psychoanalysis? Are Dr. Jekyll and Mr. Hyde the same person? If two persons are brainwashed, and their memories switched, along with their habits, tastes, and plans, do they exchange identities?

*(A parenthesis on illness and disease: these are quite different concepts. It is the person who is ill, but the body which is diseased -remember Erikson's oldster. The physician may cure a disease; but this cure may or may not heal an illness. A disease is caused either by a germ [e.g., cholera] or by the injury or malfunction of a bodily organ, system, or tissue [e.g., heart failure]. But normal healthy persons usually carry around within them many disease-causing microbes; some additional factor, therefore, must be required to cause the disease. In some instances a germ-caused disease has been "cured" by a placebo. A person may be ill without having any bodily disease at all; on the other hand, one may have a disease but at certain stages show no signs of illness, for example, diabetes, venereal disease, and arteriosclerosis. A person may have any of these diseases and feel perfectly well. There is both a personal and a psychological component to illness, whereas disease is presumably a bio-physical reality. But it would be a mistake to consider a disease as an objective entity, somehow waiting "out there" to be discovered and labeled. The human body at any given moment varies from the "normal" in many ways; but it is the medical profession that identifies symptoms, classifies syndromes, and establishes the categories of disease. "Disease occurs as a natural process," according to Dr. Fabrega, "... but any disease-smallpox, leprosy, syphilis, hypertension, cardiovascular disorders, cancer, etc.-is in part a cultural construct." In the nineteenth century, for example, consumption was considered as the characteristic attribute of heightened or artistic*
sensitivity [remember Camille]. Goiters [the compensatory hyper trophy of the thyroid gland] were once admired: Rubens' 1625 portrait [now in the Prado] of the famous beauty Maria de' Medici highlights her sizable goiter. Goiter was so prevalent in certain areas that Napoleon complained that his Alpine troops could not wear the standard uniform because of their swollen necks. Today almost everybody gets pyorrhea after a while: is it a disease? Is senility a disease? Is death?)

**The Rights to Your Body: Self and Society**

Homer tells the story of the beautiful tall Queen of the Amazons, who is slain in battle. As she lies dead on the field, a Greek named Thersites plunges his spear into her unseeing eye. Achilles, enraged beyond measure, kills Thersites on the spot. We all share Achilles' sense of outrage, I think. *But have you a right to the integrity of your body after death?* Should your beliefs against autopsy, for example, or against cremation, be given priority over the right of your survivors to knowledge or to protection against disease? Does the person have any rights after death?

Do you have an absolute right to your body even during your life? A court in New York has stated, "Every human being of adult years and sound mind has the right to determine what shall be done with his own body." But there are laws as well as strong feeling against self-mutilation. **Kant** condemned masturbation on the ground that you ought not violate the humanity which subsists within your person by treating your body as a mere device for your own gratification. **Cotton Mather** was an early advocate of inoculation against smallpox—an outraged citizen threw a bomb into his study. It took that great genius **Christopher Wren** to perform the first blood transfusion in England, in 1657. A law in Belgium prohibits any operation on the human body, except to save life or cure disease; three doctors are currently being sued for a sex-change operation. Do you have the right to change your sex? Do you have the right to be sterilized? How do you feel about van Gogh's cutting off his ear to send to a friend? In short, the notion that you are not the owner, but only the trustee, of your body has a long history.

On the other hand, *what right does society have over your body?* Does it have the right to order sterilization of mentally defective
individuals, vaccinate masses of people during epidemics, spray insecticides on crops, fluoridate drinking water? Does it have the right to order drug "therapy" to tranquilize schoolchildren who are hyperactive "behavior problems"? What about violent prisoners, or people in old age homes that lack sufficient nursing personnel? Should Jehovah's Witnesses be compelled to submit to blood transfusions to save their lives?

Should experimentation on the living human body be prohibited? Such a ban would impede the growth of medical knowledge since experimenting on animals does not yield adequate information. The premature marketing of the drug thalidomide had horrible results. Yet, to this day no one knows how aspirin works: should it therefore be taken off the market? Not trying out a new drug also constitutes an experiment.

It seems unquestionable that society should obtain the consent of the subject or patient, and inform him fully of the risks involved in experiments or medical procedures. What if he is mentally deficient? or an infant? or senile? or a prisoner who is being cajoled and subtly coerced? We must never forget the Nazis, with their human guinea pigs, people in cages, and mass graves.

Bodily transplants raise additional issues. Recently a twenty-eight-year-old man named Tommy Strunk was dying of kidney disease. Only a kidney transplant could save him, and the best donor was his twenty-seven-year-old brother Jerry. But Jerry was in a mental hospital, not competent to authorize surgery on himself, although he loved Tommy. A Kentucky court approved the surgery, on the ground that Jerry depended on Tommy's friendship and understanding; Jerry's well-being "would be jeopardized more severely by the loss of his brother than by the removal of a kidney."

In a study published by Skeels in 1966, carried out for some thirty years, a group of mentally retarded one-year-old children were in the course of time brought into the normal range of intelligence by increasing their developmental stimulation and the intensity of their relation with mother surrogates. A control group, initially higher in intelligence, was left in a nonstimulating environment; all but one of these individuals became mentally retarded and were institutionalized. Does this experiment violate your sense of the rights of the person? On the other hand, another study, recently reported, examined the effects of the long-term use of anticoagulant drugs by persons who had suffered strokes. A large number of patients was divided into two groups,
only one of which received the treatment. The ethics of withholding a beneficial treatment from the control group was questioned—but the results of the study indicated that the treatment was not only not beneficial, but probably harmful.

Two other situations concern the issue of the social control of the person's body. Kidney disease victims can be helped, their lives perhaps saved, by renal dialysis. But dialysis machines are scarce. In Seattle, a committee was organized to allocate the machines. Its job was to determine "the worth to the community" of each of the sufferers: among the criteria was whether or not the sufferer was a churchgoer. The second situation involves American soldiers in North Africa during World War II. Penicillin was scarce: should it be given to soldiers wounded in battle or to men with venereal disease? The army decided in favor of the latter: they could be restored to combat fitness more quickly; and battle wounds are not contagious.

The dialectical opposition between the person and society extends beyond the body: there is a right to privacy. Is this right invaded by pollsters? by sex researchers? by educational experiments in the ghettos? by inquisitive anthropologists? by experimental psychologists? Are the rights of the person infringed by economic and psychological incentives to limit family size? or (not so long ago) to increase it? Mussolini offered a bonus to large families; our income tax structure continues to reflect a similar partiality.

The tensions between the right to bodily integrity and the needs of society, and between the right to privacy and the right to knowledge, should never be relaxed. There is no simple solution or clear boundary between them; this is part of the problem of what it is to be human. If you join a mountain climbing expedition, and rope yourself to the other climbers, you expect to be saved by them if you should slip; and you assume the risk of being killed yourself by their mishaps or incompetence. But this is the best way to climb a mountain.

Creation of the Person

A good part of this chapter has consisted of unanswered (unanswerable?) questions. The person must be seen as an ongoing integral process, which resists analysis into any simpler constituents. It is a metaphysical ultimate for which traditional categories are conceptually inadequate. To ask whether the body is the
object of experience or the source of experience is to forget that the process of becoming a person rests on both modes. *The body is both the self and the world.* I am not the same as my changing body, yet I am not different from it. I am not separable from my body, yet I am not identical with it. My memory is part of what constitutes me; yet I am reluctant to say that I would be a different person if I had another memory. I would not be who I am if I had had a different parentage; but the constraints placed upon me as a person by my genetic endowment are minimal. I am not independent of society; yet I am not entirely the creature of society. *There is, in short, incessant interaction between the growing person and the natural and social environments which both make his growth possible and yet resist his efforts* (just as the artist's medium resists the artist). While alive, the process is never complete; the potentialities are never exhausted. The person is no more certain of his outcome than any other artist is. For it is the person who learns, who makes choices, who doubts, who acts and strives, who grows, who is guided by morality, who has an inner standpoint, who is creative. *When Socrates said, Know thyself, he did not mean Discover thyself, but Create thyself.*