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COTARD'S SYNDROME

In this most extreme instance of a self gone awry, your brain tells you that parts of your body, or even your entire body, are dead. Some people with Cotard's syndrome plan their own funerals, or even starve to death because they feel they no longer need to eat.

What's more, Hudson has found that 87 per cent of people would like to see at least a little movement in their ratings on each of the big five traits. "The data are compatible with the intuitive notion that most people would ideally like to be a little more energetic and at ease socially, kinder and more loving towards others, more responsible and productive, less stressed and irritable, or more creative and thoughtful," he says.

One route to change is therapy. In January, Brent Roberts at the University of Illinois and his colleagues reported that four to eight weeks of psychotherapy (the specific type didn't seem to matter) can bring about changes in personality, most notably an increase in extroversion and a substantial decrease in neuroticism.

Then there are psychedelic substances. Research at Johns Hopkins University School of Medicine has shown that consuming magic mushrooms can have a big effect on personality. Even a single session increased the openness scores of volunteers. One year on, their heightened openness remained.

But magic mushrooms are illegal in many countries and psychotherapy is not for everyone. So what to do? Is there a DIY route to a different you? To explore this question, Hudson and Chris Fraley at the University of Illinois at Urbana-Champaign asked a group of student volunteers to write down the traits they would like to alter and then helped them identify specific behavioural changes that would help them achieve their goals. Broad goals are not very effective, Hudson notes.

Four months later, the volunteers reported substantial changes including increases in extroversion and conscientiousness and lower neuroticism. What's more, there was a virtuous circle in which alterations in behaviour led to changes in traits, which in turn led to alterations in behaviour.

Psychologists continue to debate the extent to which personality is plastic in adulthood, but there is now no doubt that it can and does change. And that's good news for all of us. Knowing that you are not "set" by 30 is empowering. "You can think: I'm not stuck with who I am. I can change," says Boyce.

Emma Young is a writer based in Sheffield, UK



TRENT PARKE/MAGNUMF

The good delusion

We think of ourselves as moral beasts - understand that and we can all get along better, says **Dan Jones**

N THE 1980s, evangelical Christian Mark Pierpont travelled the world preaching that homosexuality was a sin and promoting ways to resist gay urges. It was a deeply personal quest. He was himself wracked by the very yearnings he sought to excise from others – a contradiction he openly acknowledged.

So here's the question: which of Pierpont's attitudes reflected his true self? Was his message about the sinfulness of homosexuality a betrayal of his essential, gay self? Or did it reflect what he was deep down, freed from the distorting influence of more primal urges?

At first sight, it is a question of little scientific merit: psychologies are complex, individual things, and there's no part of the brain, and no aspect of our personality, that stands out as being the seat of the true self, so we're never going to discover a universally valid answer. "As a scientific concept, the idea of a 'true self' is not tenable," says Nina Strohminger of Yale University.

And yet she and other psychologists have set out to study it. Most of us are convinced that something like a true self lurks beneath our surface attitudes and behaviour. It might be a delusion, but it informs how we view human beings, ourselves included. If we could better understand what that delusion consists of, we might learn to get along a little better with ourselves and others.

The question of the most essential element of self has troubled philosophers for centuries. In the 17th century, John Locke put memory front and centre, arguing that the self is grounded in the continuity of conscious experience. So long as you have a memory that can stitch together experiences into a coherent narrative, you have an enduring self.

It's an appealing idea, but modern science has given us reasons to doubt it. People with **>**

retrograde amnesia, for example, can lose memories from before the accident or illness that caused it while retaining the ability to lay down new memories. They do not feel as if their self has been wiped out, and nor do their caregivers.

Intuitively, though, Locke's idea of the essence of self as being something that endures across time makes sense. If it didn't, you'd have a series of fleeting selves at best, none of which was really you. There are indications things aren't quite that simple (see "The future is a foreign person", page 33). But take it as a starting point, and your personality would seem a prime candidate for providing that continuous sense of self – were it not for the discovery that your personality can itself change dramatically over time (see "Mercurial you", page 29).

So if not memory or personality, what then? These days, instead of speculating about the essence of the self, psychologists and experimentally minded philosophers have a new strategy: asking people. By presenting them with various scenarios about someone changing and looking at how far they intuitively feel that the person has strayed from their true self, researchers hope to get to grips with what we regard that true self to be.

In 2014, Strohminger teamed up with Shaun Nichols of the University of Arizona in Tucson to quiz people about the hypothetical case of Jim, the victim of a serious car crash whose only hope for survival is to have his brain transplanted to a new body. In different versions of this story, post-transplant Jim remains psychologically identical or

"THE GREATEST CHANGE IN IDENTITY IS PERCEIVED WHEN THE MORAL CONSCIENCE IS LOST "

selectively loses the ability to recognise objects by sight (a condition called visual agnosia) or his autobiographical memories (amnesia), for example.

When the transplant resulted in visual agnosia, participants viewed the change in Jim as minimal. Amnesia was seen to effect a much bigger change in his identity – in line with Locke's theory. But it was a third scenario that they regarded as having changed his self the most: when brain damage resulted in the loss of his moral conscience, so that he could no longer tell right from wrong, or be moved by the suffering of others.

The same seems to be true in the real world. In 2015, Nichols and Strohminger surveyed the family members of people with one of three

THE PETRIFIED SELF

An important part of selfhood is the ability to form and recall autobiographical memories, so it will come as no surprise that people who no longer have this power report an incomplete sense of self. This "petrified self" might also explain why people with dementia are often not aware of their condition. neurodegenerative diseases – amyotrophic lateral sclerosis (ALS), Alzheimer's, and frontotemporal dementia (FTD). ALS, the condition Stephen Hawking lives with, causes progressive muscle loss but leaves mental abilities intact; Alzheimer's gradually erases memories; FTD leads to changes in social and moral behaviour. Relatives of people with ALS felt the identity of their loved one had changed less than those caring for someone with Alzheimer's, but relatives of people with FTD reported seeing the greatest change.

The upshot is that when it comes to our perceptions of others, we see the moral self as the true self. That makes sense for us as a social species, says Strohminger. "We care about people's moral character because we want to know what they'll be like as social partners," she says. The very reason we see people as having a true self in the first place,



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