THE HAUNTING OF CONSCIOUSNESS:
FREUD, LOCKEAN IDENTITY, AND THE UNCANNY SELF

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A thesis submitted to the Faculty of Graduate Studies
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IDENTITY AND THE UNCANNY SELF

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a thesis submitted to the Faculty of Graduate Studies of York
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John Locke asserts that it is consciousness alone which makes personal identity.

Sigmund Freud, in contrast, sees consciousness as just the tip of the iceberg; most of what is important for understanding ourselves is unconscious. This essay will show that our everyday experience of consciousness and, thus, personal identity, is made uncanny by the introduction of Freud’s theory of the unconscious. The notion of the “uncanny” referred to is that in Freud’s essay “The Uncanny (1919)” -- with the uncanny as fundamentally an intertwining of and confusion between the familiar and the unfamiliar.

Locke’s account of personal identity being solely constituted by “consciousness” is one that is familiar in our everyday experience of “self”. Psychoanalytic theory, with Freud’s formulation of the unconscious, adds an element of the unfamiliar to this idea of the “self”, but the relationship of the Lockean version of consciousness to the Freudian unconscious is not a straightforward one of opposition between familiar and unfamiliar elements.

Our day to day experience of selfhood is intuitively compatible with the Lockean conception of personal identity formed through the continuity of consciousness -- briefly, our intimate, inward connection to the thoughts and actions which we claim as our own.
Psychoanalytic therapy in some ways reinforces the importance of this continuity of consciousness, acting to create new continuities through the interpretation of unconscious material. As well, an acceptance of the "new" material as "one's own" must take place in the analysand in order for a positive therapeutic effect to occur. This practice of extending continuities, however, is founded upon a theory of the unconscious that ultimately undermines continuity of consciousness, and elicits the uncanny on several levels.

Through the use of linguistic, literary, and clinical examples, the relationship of the unconscious to consciousness is elucidated. The uncanny aspect of "doubling" is developed in parallel with an exploration of parapraxes, and the conscious disconnection from underlying motivational processes. Such phenomena can also be described in terms of disruptions in Lockean continuity of consciousness. These disruptions of personal identity are found to coincide with the uncanny experience. We find that we cannot trust our "self", or "consciousness", in the same way as we might have before the introduction of the Freudian unconscious.
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Introduction.

"He calls it up. It shudders and begins. What does? The Other; all that he is not comes into being. And the whole being turns a sudden face, far realer than he thought."
--Ranier Maria Rilke, "The Magician."

In An Essay Concerning Human Understanding (1690), John Locke writes about consciousness, as that which alone "makes personal identity". Sigmund Freud, in contrast, seems to displace consciousness from this primary position in the scheme of personhood. For him, consciousness is just "the tip of the iceberg", while the majority of that which is most significant to who we are swirls darkly below the surface of our conscious awareness.

While these two accounts of the role of consciousness may appear completely at odds with each other, they actually share some common elements. The Lockean role of the continuity of consciousness—the inner connection that extends to an action or idea in such a way that one has the sense that "I" did or thought that—as a criterion for what is relevant to one's personal sense of self, is detectable in psychoanalytic considerations. Unless the analysand can accept "as her own" the memories which the analyst's interpretations suggest to her, for example, there will be no lasting therapeutic effect. Whatever psychoanalytic theory might say about consciousness being only a small part of
the person's psyche, it would seem that consciousness is where the final act of the psychotherapeutic drama takes place. Thus, aspects of psychoanalytic technique tend to reinforce the Lockean emphasis upon continuity of consciousness as crucial in the experience of being a person.

As expected, though, there are many ways in which Freud's theory challenges the Lockean conception of consciousness. Personal identity through consciousness is no longer a relatively simple, commonplace matter of being able to experience and remember in an intimately connected way. In Freud's view it is below the threshold of ordinary consciousness where the "truths" about ourselves supposedly reside. That which is relevant to understanding a person exists within and beyond the limit posited by Locke who states: "...personal identity [reaches] no farther than consciousness reaches." 3 By ignoring the unconscious sources of personality, memory, and motivation theorized by Freud and incorporated into modern psychoanalytic practice, even though such elements exist outside our readily experienced consciousness of them, we are somehow "missing" a vital part of our identities.

Locke's theory of personal identity along with his corresponding conception of consciousness is an apt choice of theoretical counterpoint to Freud's theory of the psyche. The interpretation of Locke that will be put forth in this essay fits in easily with the everyday understanding of "who I am". Most of us do not have the leisure or inclination to analyze our own behavioural nuances at length, even though we may be all too happy to "analyze" the behaviours of those around us. We are quite secure in believing that if
our own continuity of consciousness extends to an action or idea, if we have a sense of having committed an act, or thought a certain thought, that we in fact did so. And if someone were to ask us why we did something, we are pretty confident that we "know" why, and can provide an explanation through recollection of circumstances and thoughts surrounding that action, of which we are consciously aware. In most situations a basic Lockean continuity of consciousness is all one needs to get on in the world.

Freud's more recent account of the psyche, though, is also embedded in our contemporary, common understanding of what a person is. The Freudian notion of the unconscious, for example, is not exactly a part of a person's continuity of consciousness. That is, we are not personally, consciously aware of the "thoughts" in the unconscious in a way that is part of our personal identity in the Lockean sense. Yet, while not experienced directly, the unconscious has come to be taken for granted as a "real" component of the self and is a part of our intellectual understanding of who we are, not just in academic and clinical circles but in popular cultural terms as well.

We may live for the most part as though continuity of consciousness is all that matters to our self-conception. But we think and speak as though there is much more to us than meets the conscious "eye", without, it would appear, deeply considering what this "much more" does to our personal, everyday notion of "self". We may accept Freudian theory as an explanation of mental illness, and even accept with only passing discomfort the odd Freudian slip which we may, without consciously intending, commit--only considering for the moment this part of ourselves that haunts our actions and which has
briefly, if only humorously, let its presence be known. But what happens if we take Freudian theory out of the medicalized context of the consultation room, and beyond the relatively safe confines of the vernacular? What if we take Freudian theory in -- into the everyday, into our "souls"?

The bringing together of Locke and Freud is not only intended as an academic exercise, nor a point by point war of theories. For Freud has a very interesting effect on the Lockean consciousness, making consciousness itself suspect, and personal identity as "made by" consciousness suspect along with it. At the extreme end of a Freudian view, every element of consciousness carries with it a shadow of unconscious desire, the dark drive which emerges in compensatory and disguised form as conscious thought and deed. The reasons given earlier in answer to "why" we do something are no longer sufficient. We act in answer to motivations that we do not for all intents and purposes "know", and that do not belong to the conscious deliberation by which we assume we come to our decisions to act.

In addition, the memories we do have, by which we form the extension of our personal identity, are themselves put into doubt. They may be screens, covering actual happenings. Our recollection may be compromised by the forces of repression which render past events inaccessible to and isolated from consciousness. Parts of the past which rightly belong to our personal continuity of consciousness are denied to us. Faced with the various elements of Freudian theory, the intimate, very personal ways in which we look at ourselves as persons and the sources of that sense we all have of being "me"
are altered and irrevocably made suspect. We seem to each be haunted by another "self" that we have no say over, and the continuities of consciousness which we have taken for granted may no longer seem dependable or reliably discerned.

The sense of being haunted, and of confusion about the demarcations between what is normally easily discerned--such as the difference between self and other, or the familiar and unfamiliar--are among the complex blending of elements associated with the experience of "the uncanny". This eerie, unsettling feeling which is often evoked by artists, authors and film makers, is psychoanalytically explored by Freud in his essay "The Uncanny" (1919). The uncanny is more subtle, more creepy, than the merely terrifying, though we often can be terrified by the uncanny as well. What distinguishes the uncanny is that it is always associated with something which is familiar.

The multi-tentacled alien blob which bursts out of a suddenly appearing spaceship and begins destroying panicked citizens with a death-ray is terrifying. But the alien which has taken on the appearance of one's spouse, and whose presence is slowly revealed through curious slips in the mannerisms that one knows so well, is somehow more deeply disconcerting. It is in the intertwining of the familiar and the unfamiliar that the uncanny arises. What the different kinds of uncanny experience to be discussed have in common is an element of the "unexpected"--either an unexpected presence or unexpected absence, or a combination of both--the unexpected event, quality, or lack being insidiously embedded within the context of the familiar and expected.
In reference to personal identity, the familiar experiential context is that of continuity of consciousness. The Lockean view of personhood is promoted herein as a formulation of the familiar, an account that encompasses the comforting, everyday notion of what it means for each of us to be an individual "self". With Locke's theory forming the well-known ground, Freud's psychoanalytic description of the psyche will appear as harbinger of disturbing transformations to this ground.

The place of psychoanalysis in relation to the familiar-unfamiliar polarities inlaid in uncanny experience is not straightforward. On the one hand, psychoanalytic treatment seems to function in the extending of the familiar, by incorporating symptoms into a new context of rationality, and through interpretive explanation bringing the "sources" of symptoms into line with the analysand's continuity of consciousness. The uncanny, "foreign" symptoms are subdued into becoming part of the common landscape.

But Freudian theory which drives practice also brings along with it a dimension of the "unexpected presence" into our familiar conceptions of consciousness—in the form of the unconscious. The uncanny experience of "doubling" is evoked by the form of the unconscious "other" existing within us. In addition, the "unexpected absence" is introduced by the mechanism of repression, and by the resultant gaps in continuity which are filled in various ways. Parts of what was once our "self", including still operative intentions and motivations, are barred from our continuity of consciousness. We experience an absence of conscious connection to various processes behind our thoughts and actions.
Symptoms may be diffused by bringing their sources into consciousness, but in doing so the character of consciousness itself is put into question. Not only can continuities of consciousness be demonstrated to be altered in part by the analyst and also by a person's own defensive mechanisms, they are also irrevocably tied to the hidden unconscious which we are told gives consciousness its shape. The influence of the unconscious does not only occur in illness but infiltrates every aspect of our lives.

Current literature on the uncanny concentrates on its appearance in the realm of art, literary works in particular, and on the uncanny aspects of symptoms in certain types of mental illness. Only brief mention is made in reference to uncanny aspects of "normal" experience, generally in terms of one's reactions to outside events and not concerning inner conceptions of one's own identity. While this essay will utilize both literary and clinical references in an illustrative manner, ultimately the inquiry will lead to a concerted focus on the nature of the "normal" individual's experience of his or her own personhood, and of consciousness. Covering aspects of psychoanalytic technique, the unconscious, parapraxes, and repression, Freudian theory will be demonstrated to have tainted with unfamiliarity and uncertainty the experience of consciousness, and to have rendered the "self" uncanny.

The chapters that follow will explicate the Lockean idea of continuity of consciousness in an effort to "define the familiar", and will show how aspects of psychoanalytic therapy extend this idea of the familiar by creating new personal continuities. The unconscious will be examined, and interpreted as an unfamiliar
presence which ingresses into the familiar experience of consciousness, as well as the once-familiar that has become artificially alienated from consciousness. Consciousness and intentionality will be shown through an investigation of "parapraxes" to be haunted by the motivations arising from the unconscious. As a consequence of unconscious influence, an uncanny "doubling" of ourselves occurs on several levels, affecting our certainty about what constitutes our "own" consciousness. In addition, the construction of consciousness, and of continuity itself will be questioned, leading to a consideration of the effects of repression upon personal recollection and awareness of process-major components of our experience of identity. Throughout the expansion of the uncanny into the experience of personal identity, disruptions of Lockean continuity of consciousness presented in both literary and clinical examples will be found to coincide with uncanny effects.

In conclusion, a few general questions on consciousness and identity will be addressed in light of the foregoing. With the status of consciousness in some disarray, for example, what is the significance of our experience of personal identity? How far can we take consciousness at face value, if at all? Is the unconscious the haunting shadow of our experience of consciousness, or is it the "substance" of our person, casting the mere shadow that is consciousness? And even if consciousness is shown to be a kind of ghostly illusion, of limited significance and verity, are we not all, for better or worse, "prisoners of consciousness" nonetheless?
Chapter 1 - Locke and the Continuity of Consciousness:

Defining the Familiar.

In the film, "Prisoner of Consciousness", psychologist Jonathan Miller has created a documentary case record of one of his patients, Clive Waring. A gifted conductor and musician, Waring suffers from a disorder of memory brought on by an organic illness. He has lost memory of events (episodic memory), but has maintained some memory of general facts (semantic memory) and of "how to do things" (procedural memory). He is unable to recall any events for more than a few minutes after he experiences them. Beyond that small window of awareness the events are permanently lost to him. Yet he has retained his musical abilities, although not his memory of having such abilities, along with the memories of certain facts. He recognizes his wife for instance, although if she is absent for more than fifteen minutes or so he greets her as though he has not seen her in years.

The partial absence-presence of memory makes for many fascinating and puzzling scenes in the film, one of which is strikingly relevant to our discussion of the Lockean notion of consciousness. In that scene, Waring is watching a short film taken earlier of himself playing the piano and singing with his wife. He is disturbed by the film, having no memory of the events therein, and states that he was not conscious when "he" performed the actions depicted on the screen.
Waring is expressing, in inadvertently Lockean terms, his sense of personal disconnection from what he is watching. While the film shows what appears to be himself engaged in a musical performance, his continuity of consciousness, severely limited as it is, does not include the musical event. The act is completely foreign to him, and in his mind it is as if he did not do it.

Those present and watching the film with him, Waring's wife and Dr. Miller, try to convince Waring through logical argument that almost verges on badgering, that indeed it was he who had played the piano. After all, they suggest, people who are "unconscious" cannot play the piano. While their points of persuasion are well taken, and glaringly simple from an outside observer's point of view, their argument has no effect upon Waring's convictions to the contrary. What Waring's wife and Miller seem to miss, and this may be deliberate in the context of filming the documentary, is Waring's inner conception of what he is seeing—and whether or not he conceives himself as being the one who experienced the events as they are filmed.

Similarly, there are times when detractors of Locke's notion of continuity of consciousness seem to miss the inner conviction that a person has of "being me", and of being the owner of his or her acts and recollections, in the interest of philosophical analysis of what a "person" may be as a concept to pronounce coherent or non-contradictory. It is not the intent of this essay to determine the value of such analyses, nor to refute objections against Locke at length. Rather, the preference is to develop and
clarify one interpretation of Locke that can be supported by the text, an interpretation that focuses on the inner, personal experience of identity. It is this conception of self that Freudian theory disrupts most profoundly.

For Locke, this inner conception of "self" takes priority over other considerations in assigning what he calls "personal identity". He writes of our own present sensations and perceptions as being that by which "everyone is to himself that which he calls 'self;' it not being considered, in this case, whether the same self be continued in the same or diverse substances." While other philosophers may debate about substance-based criteria for personal identity, looking for an essential "thing" that is a "person", Locke's notion of personal identity turns upon the individual's own experience of self.

John L. Mackie refers to this kind of experience as "remembering from the inside". This "inner" connection to events cannot be observed from without and interpreted, but is experienced intimately as personal continuity of consciousness. The terms "inner" and "outer", used in reference to experiences in this essay, are not used to designate places in a spatial sense. Rather, they are used to indicate a perspective, or in other words, a degree of connection. William James writes of one being able to distinguish which thoughts are one's own, through one's own thoughts having a "warmth and intimacy about them", and thoughts which "belong" to others "being merely conceived in a cold and foreign fashion." In addition, the "self comes to its acquaintance, or is actually felt, with warmth and intimacy." We feel our own bodies in this way, as well as "the inner 'nucleus of the spiritual self" and every other aspect of
ourselves, including our "social selves", all of which "come also with a glow and a
warmth." The experience of personal consciousness is intimately, inwardly connected
as is no other experience.

The ranking of consciousness over physical considerations in assessing personal
identity is shown by Locke in an odd discussion on the possibility of reincarnation. When
attributing one or another identity to a man in question, as in, could he be one of two
persons that had lived during the siege of Troy, Locke asks:

...does or can he conceive himself the same person with either of them? Can he be concerned in either of their actions? attribute them to himself, or think them his own, more than the actions of any other man that ever existed?9

Does the man in question have a relation to either person, or their actions that is an "I"
relation, and when he is concerned in what they do is it self-concern, concern for "me"? And is this an exclusive relation in that he does not feel the same degree of connection to
the person or actions of any other?

In making his decision, Locke determines that if the man's consciousness does not
reach "to any of the actions of either of those men, he is no more one self with either of
them,..." 10 But should the man in question "once find himself conscious of any of the
actions of Nestor", that is, should he view the actions of Nestor as his own, even though
the man Nestor to whom Locke is referring has physically been long dead, "he then finds
himself the same person with Nestor."11 These are all "inward", personal claims and, it is
assumed, exclusive connections.
The above reincarnation scenario brings attention to an important distinction which Locke makes between a "man" and a "person", that is, between the body and personal identity. He is not referring to a mind-body split, but differences of perspective or context when considering a human being. Locke writes that it is "one thing to be the same substance, another the same man, and a third the same person, if 'person, man, and substance,' are three names standing for three different ideas." This distinction, he adds, will prevent a great deal of confusion, especially concerning personal identity. The designation "same man" is for Locke the same animal body "so and so shaped." Consciousness alone makes the same person irrespective of either body or substance.

Consciousness is inseparable from thinking in Locke's view. It is not something that we can will, such as in accounts of consciousness as a kind of "attention" or "perception", but is a part of all of our thoughts. Further, it is consciousness "that makes everyone to be what he calls "self," and thereby distinguishes himself from all other thinking things;..." Thus, it is the person himself who not only claims as "mine" certain thoughts and actions, but who makes this claim against all others. No outside pronouncement is required to determine which thoughts belong to which person. Distinctiveness is a personal pronouncement, a determination from within. This emphasis in Locke is repeatedly evidenced.

A "person", Locke writes, "is a thinking intelligent being, that has reason and reflection, and can consider itself as itself, the same thinking thing, in different times and places." Again, these are "inner" qualities. With respect to being the same "thinking
thing" the person is the arbiter in his or her own personhood, considering "himself as himself", or not. This intelligent being is able to consider itself by "consciousness", which Locke describes as perceiving that one does perceive, or, knowing that we do whatever it is that we do.

The very notion of such introspection, the knowing that one knows, sees, feels, and so on, might be seen to presuppose "an implausible splitting of consciousness." The language of such "self-observance" is regressive, it will be allowed, if we are to read this illustration of Locke's as intentionally indicating some hierarchical nesting of observers and perceivers within a single person. But we can read Locke in another way. When I say, "I see the book in front of me", I do not mean, "I see (sense, perceive) that I am seeing the book in front of me." (And who, then, sees/senses/perceives that I am seeing myself seeing, etc.) Rather, I am describing, in Locke's view, consciousness: the intimate personal connection that I have with my actions, perceptions, thoughts, with anything it is that "I" do.

In remembering that which I've done, I do not remember seeing myself doing something, for example, but I remember doing something. As Mackie puts it, "with an action, it is not that I remember that I did it, but rather the remark 'I did it' or 'I remember doing it' expresses a way of remembering the action that (if genuine) makes it mine."17

It is important to note Mackie's addition of "if genuine" as a qualification. With respect to the "I" who makes the action "mine", however, the issue of whether or not the recollection is historically, "factually" genuine is irrelevant in terms of personal identity.
If the person has a sense that the recollection is genuine, along with the conviction that "I did it", then the continuity of consciousness incorporates the recollection into the inside experience of personal identity regardless of the "truth" of the recollection. And, should the "truth" of one's conscious recollections be thrown into doubt, as, it will be argued, happens when we closely examine consciousness in light of Freudian theory, the effect upon the "I" can be deeply disturbing.

In terms of our everyday experience of identity, Locke's continuity of consciousness provides a familiar, comforting account of our inner experience. Locke does mention the limitations of his view as an outer assessment of personhood. *Person* is a forensic term "appropriating actions and their merit", allocating responsibility, reward and punishment. There are two levels at which this allocation occurs according to Locke: at the level of "human judicatures" where the limitations of Locke's notion of personal identity are acknowledged, and at the level of divine judgment.

For practical reasons, the legal usage of "same man" is all that we can depend upon for now in assessing responsibility. While it is true that a drunkard, for example, may not be conscious of what he did, and thus not in Locke's view personally responsible in a way that justifies punishment--a particular circumstance that is today subject of much controversy--Locke concedes that our legal systems justly punish the offender.

The punishment is "just" within practical limitations because the continuity of consciousness which will or will not determine personal responsibility "cannot be proved"\textsuperscript{19} from the outside. In the absence of such proof the "facts" of the "man's" crime
must count against him. Only on the day of final judgment, when the "secrets of all hearts shall be laid open",20 will another level of justice be realized. God alone can judge the truth, from (arguably) the "outside", of the inner personal experience of identity.

It is interesting to note that Locke unquestioningly assumes that God will subscribe to the notion of personal identity outlined by Locke, in measuring out ultimate justice.

Locke uses his puzzle cases not so much to come to any conclusions about what a person "essentially" is, but to illustrate what he means by his notion of continuity of consciousness making personal identity, and to clarify the difference between same man and same person. Kathleen Wilkes prefers to use cases from real life to challenge Locke. but in doing so she tends to ignore this difference of context, and to use her designation "same person" as Locke would use "same man".

Mackie points out that most people do not use the term "same person" as does Locke. Rather, most speak using "same person" and "same man" to mean the same thing.21 Locke states:

I know that, in the ordinary way of speaking, the same person, and the same man stand for one and the same thing.....But yet when we want to inquire what makes the same spirit, man, or person, we must fix the ideas of spirit, man, or person in our minds; and having resolved with ourselves what we mean by them it will not be hard to determine in either of them, or the like, when it is the same and when not.22

Locke is aware of the casual usage of "person" and sees this kind of usage as a source of confusion rather than the term "person" itself being confusing. Whatever difficulties that Wilkes may want to introduce into the question of personal identity, within the limits of
the distinctive way in which Locke defines personal identity sameness of person is not
hard to determine. And we must be careful not to view Locke's theory as saying more
than it does.

The difference between the approaches of Wilkes and Locke can be illustrated in a
consideration of the real-life condition of the fugue state. In a fugue, a person becomes
"someone else" for a time, with no memory of who they were before the fugue state and
certainly with no conception of being the same "person" as before. A classic example of
a fugue state is that related by William James, in the case of Reverend Ansel Bourne, of
Greene, Rhode Island.

For a period of two months in 1887, Bourne "became" A. J. Brown, setting up and
running a confectionary in Norristown, Pennsylvania, unbeknown to Bourne's family who
reported him missing. Bourne himself was not at all acquainted with shop-keeping, and
James points to the "peculiar occupation which the so-called Brown indulged in" as the
most remarkable part of the identity change. Brown the shopkeeper went about his
business in an orderly way, and was seen as not at all unnatural, eccentric or "queer" by
his neighbours.

Bourne subsequently regained his own awareness, finding himself confused and
bewildered in a strange town and a strange life of which he knew nothing. Bourne was
never able to spontaneously recall the entire episode at Norristown. James was able to
resurrect Brown under hypnosis, but Brown likewise had no "knowledge" of Bourne.
Each identity was separated from the other by an irrevocable break in continuity of
consciousness, with James noting that an integration of the two personalities proved impossible. "...Mr. Bourne's skull today still covers two distinct personal selves."\textsuperscript{24}

Locke might concur with this assessment, for he states that "if it be possible for the same man to have distinct incommunicable consciousnesses at different times, it is past doubt the same man would at different times make different persons;...."\textsuperscript{25}

James describes Brown's inability to remember what had occurred before or after his brief two month existence. Brown's attempts to do so and his reactions are interesting from the Lockean perspective. Such comments as "I'm all hedged in", and "I can't get out at either end" uttered by Brown may remind us of the case of Clive Waring. Like the Waring case, the Bourne/Brown case highlights in a very personal way the sense of being confined to our continuity of consciousness when assessing our inner experience of personal identity. And as persons ourselves who may be neither the subject of fugue states nor of abnormal disorders of memory, it is hard to imagine any alternative meaningful conception of our experience of "self" other than our sense of continuity of personal consciousness.

Not all fugue states are as extended or radical as the case of Bourne/Brown. One of Wilkes' examples is that of a doctor who performs a detailed medical examination which he is unable to recollect doing. Wilkes does not come to the same conclusion as do James and, we assume, Locke, when assessing the personhood of the fugue subject. She looks to outwardly observable criteria.
Some abilities are maintained by the subject from one state to the other, for obviously there are many things that the person in fugue does not have to relearn. Brown remembered how to cook, speak, use money, and a multitude of other actions which we daily take for granted. In Wilkes' example above the doctor's medical ability and training were maintained while his "person" was absent for a while. Thus the abilities which extend into the fugue state range from basic skills to those necessary to complete a complex medical examination. Consequently, Wilkes pronounces that "it seems clear that each of the individuals cited is one and only one person throughout the fugue to non-fugue transitions and states. Because our "intuitions" indicate that "we have...one and the same person here", she tells us, "that must be because unity or continuity of consciousness, or perhaps even consciousness itself, are not quite as important as one might at first think" for our assessments of personhood.

While this is certainly true about our determinations from the outside of who a person is, which tend, as Mackie suggests, to indicate a "same man" kind of determination, Wilkes' observation is not one that Locke would agree with. This is not exactly a case of one being wrong and the other right, but a difference in the perspective from which assessments of personhood are made—a difference which must be kept clear. Even though certain abilities in common are to be found in both the fugue and non-fugue states of a "man", the "person" who identifies with and claims the abilities and actions in each state is a different one, from an inner perspective. Bourne and Brown are no more the same person than two doctors with comparable medical skills, or you and I because
we can both cook eggs "over easy" without breaking the yolks. Consciousness is not the key to determining whether or not we have the same "man," or to conferring outer criteria for personhood as does Wilkes. But continuity of consciousness is the key to deciding on a Lockean version of personal identity, as put forth herein.

What, then, is the experience of personal identity, not for the observer, but for the person himself who has recovered from an extended fugue state? Without a continuity of consciousness there is no sense for the person himself that he was the same person in a fugue state as he is once recovered. Consciousness does not extend to events or thoughts during the fugue. Locke, quoted above, entertains the possibility that there be different persons "made" by the same man.\(^2\) We can, like Wilkes, pronounce the subject "the same person" because of some criteria we've decided they have met, and against the person's own protests. Or we can take a Lockean view and ask the person himself, and accept his or her own inner experience of personal identity, of being "me", as encompassed by their continuity of consciousness--regardless of what our intuitions and judgments of their personhood might be from the outside.

It may seem that the only disruption to one's continuity of consciousness would occur in illness, and psychoanalysis will be shown in some respects to work toward re-establishing our comforting sense of continuity which has been disrupted in this way. But gaps in continuity are part of normal life as well. As Wilkes points out, we sleep dreamlessly, and there "are patches of our life that we have just forgotten. So we should admit that there are discontinuities... in the lives of normal and perfectly healthy
people." Wilkes, though, takes such normal discontinuities to mean that "even in ordinary life, the 'Lockean principle', or as I shall sometimes call it the 'Lockean condition', needs some modification and weakening."\(^{30}\)

Wilkes seems to have misinterpreted the Lockean meaning of continuity of consciousness as it determines personal identity. Locke acknowledges the gaps in normal life, "that this consciousness [is] interrupted always by forgetfulness," and that we spend most of our lives "intent on our present thoughts", not our "past selves", "and, in sound sleep, [have] no thoughts at all,..."\(^{31}\) Of course there are these kinds of "discontinuities". but in our conception of "self" it is through the *continuities* that we derive an inner sense of personal identity.

Consciousness reaches back to before the time one fell asleep, and the continuity of consciousness refers to the connection between the "self now" and the self of that earlier time, and the sense that we are both one and the same "me" now and as had gone to sleep. Similarly are we connected with past events temporarily out of our thoughts: provided that one can "repeat the idea of any past action with the same consciousness [one] has of any present action",\(^ {32}\) that is, with the conviction that "I" performed that action, then there is a continuity of consciousness with that past action which incorporates it into one's personal identity. Continuity of consciousness refers to the connections which form our sense of self, not to an unbroken chain of constant, total, past-present awareness from birth to now, as Wilkes' seems to expect of the notion of "continuity".
Locke's notion of personal identity is not adequate to cover all perspectives in personhood, particularly our conceptions through outside observation of those "real people" in strange-but-true circumstances whom Wilkes uses to illustrate her points. Wilkes' cases, which include people under hypnosis, and those suffering from various brain abnormalities, erode our assumptions about assessing personhood "from the outside". The cases also serve to highlight the relentless drive within each person to incorporate even bizarre discontinuities of experience into a plausible personal continuity of consciousness, and thereby support the basic importance of the Lockean self to the general inner sense of personhood. Whatever trials and disruptions the subject undergoes in Wilkes' examples, the strength of conviction which the subject has of who he is, in spite of the assessments and knowledge of outside observers, is unwavering. It is not hard to imagine this inner conviction being the same for any of us faced with similar circumstances.

Thus, while Locke's account is not all-encompassing, as a focused, useful formulation of the familiar experience of self that we seem to share as human beings it is exemplary. The Lockean person appears to mesh perfectly with the everyday vagaries of how we function as human beings. Derek Parfit too, "admits that the Lockean concept of psychological continuity--in which he includes similarity of character as well as memory--is not quite suitable as a basis for a concept of identity, but he argues that nonetheless it is this continuity that matters."33 In this essay what is being put forth is not a "concept" of identity, but an account of the *experience* of identity, including that which matters most.
to us in that experience. For Locke, for us, the "I" includes the personal connection of consciousness to our thoughts and actions, and a belief in the verity of these connections. The "familiar" ground for our exploration of the "uncanny" self being thus set, and the limits within which the Lockean approach functions well being acknowledged, we can now begin to add a consideration of Freudian theory to our exploration of the inner experience of personal identity.

Chapter 2 - Psychoanalytic Therapy:

Extending the Familiar and Establishing New Continuities.

Freud's theory of the psyche is more complicated than Locke's, with consciousness forming but a small part of our psychical totality at any given time. Freud does grant a certain primacy to consciousness in the scheme of our personal experience, however, that is comparable to the significance attributed to consciousness by Locke. To begin with, Freud sees consciousness as the "starting point" for the investigation of the psychical, referring to consciousness as "a fact without parallel ...." such that "if anyone speaks of consciousness we know immediately and from our most personal experience what is meant by it." In this sense the Freudian conception of consciousness would seem to correspond with that of Locke as developed in the previous chapter, the given which is part of anyone's everyday experience, that which is intimately known and familiar.
Freud alludes to behaviourist accounts which construct what he calls a "psychology without consciousness." Perhaps such accounts arise in part because any comprehensive explanation for the "fact" of consciousness seems elusive, or unattainable.

Yet these accounts which leave out consciousness, while scientifically attractive perhaps, would seem to have little meaning in the context of the way we live our actual lives outside the laboratory setting. The descriptive account of consciousness, while saying little in the way of explaining what consciousness as a "thing" might be, manageably depicts the experience of consciousness in a way that is not foreign to experience.

Beyond that, "there is no need to characterize what we call 'conscious': it is the same as the consciousness of philosophers and of everyday opinion." As much as Freud may criticize accounts which leave out consciousness, he cautions as well against supposing that only consciousness is psychical. Locke may not have exactly stated that the *psychical* consists only of that which is present to consciousness; but he does argue at length that thought is not possible outside of consciousness, "it being hard to conceive that any thing should think and not be conscious of it." In terms of personal identity consciousness is all that could matter for Locke, and anything which existed outside of consciousness we could not say anything conclusive about. For Freud, though, the part of our psyche which is not conscious matters very much. In his conviction that this other, hidden side of the psyche exists, is active, and has an impact on our lives, Freud's idea of consciousness, while still descriptively corresponding to the Lockean and everyday accounts of experience, takes on
a different dimension not found in the Lockean account. The way in which consciousness is considered in analytic therapy in part is in concordance with the Lockean emphasis on continuity of consciousness for identity, but the places in which Freud looks to find potential elements to be included in a person's consciousness are not the places where Locke would have thought to look.

Freud's descriptive consciousness rests "on perception of the most immediate and personal character." Conceptions which are conscious are those of which we are aware, the ideas and perceptions which we "perceive ourselves perceiving" as described in our Lockean account. Locke also includes ideas which consciousness can "reach back to", that which we are able to remember, in the continuity which comprises personal identity. These readily remembered ideas, when not in our immediate awareness, would be described by Freud as being part of the preconscious, that is, the realm of the potentially conscious. The material contained in the preconscious is able to enter consciousness relatively easily, such as when we remember a grocery list, or our eighth birthday party, for example. These are ideas and events of which we become directly aware as part of "my" experience.

We are not able to remember everything that has happened to us, and we accept this forgetfulness as a normal part of living. Locke mentions two senses of forgetfulness: those events that are not at the moment remembered but can be readily recalled, as mentioned above; and those parts of one's life that are forgotten "beyond the possibility of retrieving them". For Locke, that which is forgotten in the latter sense simply does not
enter into an individual's continuity of consciousness and is therefore not part of that person's experience of identity in any meaningful way. While such events might be said to have shaped who we are, they are not currently, directly relevant in terms of our own sense of self—our personal experience of which ideas and events are of the "I".

Freud's account of events which have occurred at some point in the personal history of an individual and that cannot be recalled to consciousness indicates that, far from being a simple case of forgetfulness, such absences are the result of some force which "actively" bars an idea from entering consciousness. Thus kept from consciousness, that which we cannot remember does not just quietly remain "out of sight, out of mind". Unlike Locke's dismissal of that forgotten "beyond the possibility of retrieval", in the scheme of our sense of self, Freud suggests that such unconscious ideas in fact exert a powerful influence upon our conscious experience. They continue to exist in some form below the threshold of direct awareness, not just as a memory that is not conscious at the time, but as an active ideational affect currently influencing us, yet of which we are not aware and with which we have no continuity of identity.

As with Locke, for whom "not conscious" is "not self", Freud describes our own unconscious processes, those "of which we know nothing", in terms of our having the same relationship to such processes as to the psychical processes of another person. We cannot ordinarily claim these processes as "our own", yet for Freud they are "in fact" our own. It is the theorized existence of some kind of link nevertheless between our
conscious self and this strange hidden sort of "self", or shadow "self", which seems to be crucial to the therapeutic success of psychoanalysis—indeed to the possibility of psychoanalytic therapy at all.

The unconscious is the "source" of the symptoms which psychoanalytic therapy seeks to alleviate. Freud describes the hysterical patient, for example, as:

- full of active yet unconscious ideas; all her symptoms proceed from such ideas. She has no knowledge of these ideas and may perceive the actions constituting her "fit" with the detached feelings of an onlooker.43

It is as if the actions arise from the intentions of someone else. Although consciously disconnected as the patient is from the intentionality of the actions, there is what Freud calls a "sense" to her symptoms. "The sense of a symptom lies... in some connection with the patient's experience."44

Analysis operates according to the premise that this connection can be established, as in the case of the hysteric where Freud states that technical procedures of analysis can detect the unconscious ideas and make them conscious, consequently alleviating the symptoms. A Lockean description of this "making the unconscious, conscious", might consist of the bringing of that which is not part of one's continuity of consciousness to within reach of one's personal continuity. The goal seems to be to make elements which seem to be "other", into "our own"—in effect, creating new continuities of consciousness.

By making something conscious that was relegated to the unconscious, psychoanalytic technique must first "raise" the unconscious idea to the level of
preconscious access—must bring it "within reach" of consciousness. This is accomplished when the idea becomes "connected with the word-presentation corresponding to it." The focus on and importance of the word is a characteristic of psychoanalysis. We find mention of such terms as the "talking cure", used by the famous "first" hysteric Anna O., as she supposedly talked her symptoms away. The confessional style of therapy sessions, the technique of free-association where a person is to say whatever comes to mind, both look to the word where the search for the problematic unconscious idea begins, and where consciousness can ultimately take possession of the idea as its own.

The analyst is able to find a pathway to the unconscious through words because, according to psychoanalytic theory, what we say has two sides: the manifest and the latent. These two terms are best understood in reference to Freud's work on dreams. The manifest content of the dream is the account of the dream as it is related to the analyst by the patient, and indeed, the appearance of any dream to the dreamer. It is not only the neurotic in whose dreams can be found both the obvious and the concealed, but all of us. The psychoanalytic assessment of the dream assumes forces which work to conceal the true nature of the dream, and to create the resultant distortions which form the manifest content. By deciphering the apparently nonsensical features of the dream the analyst can reveal the hidden, latent content behind the appearance of the dream. Moving on from the dream, in keeping with a focus on consciousness, our waking, manifest conversations also include the latent undertones of unconscious influence.
Frances M. Moran describes this doubling of meaning: "The subject speaks to the analyst in a very particular way—that is, both consciously and unconsciously—and, what is more, does this simultaneously."

The speaker is only aware of the one spoken discourse, that which she consciously intended, while the unconscious discourse "is embedded within the conscious discourse and so available to the analyst's ear". Psychoanalysis assumes the presence of traces of the unconscious in what is given consciously, and provides a variously flexible framework of interpretation, with the analyst acting as the interpreter.

What the analyst wants to hear from the patient is thus "not only what he knows and conceals from other people; he is to tell us too what he does not know." That is, the patient is to tell the analyst that which the patient is not consciously aware of, but which is nonetheless intimately connected to the patient in some way. The analysand does so inadvertently, presenting the analyst with thoughts, ideas, recollections—which are already subject to the influence of the unconscious, which are often its direct derivatives, and which thus put [the analyst] in a position to conjecture his repressed unconscious material.

As mentioned previously, there is a kind of force in the psyche which prevents material in the unconscious from readily or directly entering consciousness. Various levels of censorship bar forbidden thoughts from our awareness. "Derivatives" of this repressed material are ideas which share some common quality or characteristic with the unconscious idea, but which are sufficiently different from the "actual" content of the
unconscious idea, or which are sufficiently distorted forms of the unconscious idea, such that they are able to bypass censorship and enter into consciousness.  

Freud's statement that the presence of derivatives puts the analyst in a position to "conjecture" the content of the repressed unconscious requires some explanation. His account of this process of conjecture goes beyond the advocacy of mere suggestion, at least in theory, and takes us back to the idea and importance of personal continuity of consciousness. He would maintain that psychoanalytic therapy reveals psychical truths and that suggestibility is ruled out by the final test of therapeutic effectiveness.

The analyst works by "making plausible inferences", constructing "a sequence of conscious events complementary to the unconscious psychical processes." In contrast to the "insertion of lies" as Ian Hacking refers to psychotherapeutic techniques such as those of Pierre Janet, a contemporary of Freud—where "substitute positive images" are hypnotically implanted in the place of actual troubling memories of the patient—a theoretical premise of Freudian psychoanalytic technique is that the "constructions" must and ideally do correspond as closely as possible to actual ideas existing in some form in the patient's unconscious. Moreover, it seems that without the connection to something actual in the patient, a therapeutic effect will not be realized. "After all, [the patient's] conflicts will only be successfully solved and his resistances overcome if the anticipatory ideas he is given tally with what is real in him."  

Upon examining more closely the process followed in the introduction of a "suggestion", or "anticipatory idea" by the analyst, this conviction that the analyst is not
imposing some fanciful external suggestion, but is enabling the "raising up" of actual material from within the patient's psyche is apparent. Freud remarks that when the analyst first communicates to the patient the idea "discovered" in him by the analyst, the telling does not have an immediate therapeutic effect. What has happened in this first stage is that the patient now has the same idea "in two forms in different places", or as described elsewhere, "the material is present to him in two records". First, there is an "auditory trace" of the analyst's suggestion; the patient has an experience and memory of hearing the idea spoken aloud by the analyst. The second way in which the idea exists in the patient is as the unconscious memory of "the experience as it was in its earlier form". The suggestion by the analyst is not something "new" to the patient, but has been preceded by something which is already a part of the patient.

What must happen in order for the suggestion to have any therapeutic value is that it must "enter into connection with the unconscious memory-trace". Where two forms of the idea had previously existed, "the two records are brought to coincide", becoming of singular conscious form. In language which recalls the previous explication of the Lockean account of consciousness, Freud describes this transformation of idea for the patient as "making the unconscious material conscious to him himself". The material becomes intimately the patient's own, a part of his continuity of consciousness, his experience of "I".

Freud further distinguishes between the idea as told to the patient, and "mere" suggestion in general as only affecting the patient's "intelligence, not his illness".
patient has new theoretical information regarding his illness, but there has been no change to what is "self" for the patient. There are more Lockean echoes in Freud's assertion that "to have heard something and to have experienced something are in the psychological nature two quite different things, even though the content of both is the same." The patient must have a sense that the material revealed in analysis is actually his own experience—not just intellectually as a "truth" related by another person, however plausible, but as an event once lived through, "experienced from within" to return to Mackie's term for the personal connection to one's own experience. In theory, "only something which has once been a conscious perception [of an idea or event for example] can become conscious". Because only something that was once part of one's continuity of consciousness can once again become part of one's conscious personal account of experience, it would seem that the acceptance and integration by the patient of mere suggestion, or constructions on the part of the analyst which have nothing to do with the actual past of the patient, would be impossible.

Thus, "making the unconscious conscious" involves a change in one's personal continuity of consciousness. We may even wish to consider this process to be one of the extension of continuity, either as the bringing in of "new" connections to material once barred from consciousness, or as the restoration of old continuities. Either way, the importance of the continuity of consciousness in the context of psychoanalytic therapy is such that an alleviation of symptoms will not occur unless the unconscious source of the
symptoms is brought within reach of the patient's personal continuity. Ultimately, change can only take place if the effect is part of the conscious realm.

The extension of continuity to hitherto discontinuous symptomatic associations occurs concurrently with an extension of familiarity to that which is hidden in the psyche. In looking at the sense of symptoms, or even in assuming that there could be any "sense" to symptoms at all, characteristics with which we are comfortable as attributes of our consciousness have been "discovered" by Freud in the convoluted workings of the unconscious. Regarding the symptom, "the task is...to discover, in respect to a senseless idea and pointless action, the past situation in which the idea was justified and the action served a purpose."64 However odd the symptom, "justification" and "purpose" can be found by the analyst who digs deeply enough.

Freud is creating new contexts in which continuities can be formed, new contexts of the familiar. Wilkes describes the Freudian method as one of the type in which the familiar "normal" notion of rationality is applied to explain the aberrant: "...something apparently abnormal or mad is in fact, if seen in a certain light and given certain background assumptions, rationally intelligible."65 While the idea that as an infant one has a sexual desire for one's parent may seem foreign, the ideas of desire in general, of motivation, of wishing, and the concept of bringing about, through reason and action, circumstances in which to attain one's desires, are all familiar to us in our everyday conscious experience. Viewed in light of symptoms being ways in which unconscious desires are satisfied, albeit incompletely or ineffectively, illness becomes understandable
in familiar terms. We might determine that, to use Wilkes' phrase, "obviously someone in such a position would do that"; once "that position" is suitably explained in a way that corresponds to more familiar experiences.

At this point one might be tempted to go along merrily complacent in consciousness, assured that all that is psychical has been rendered explainable, continuable, and familiar. In extending the familiar, however, a reciprocal effect of extending the unfamiliar has occurred. We must remember that while we are confined to consciousness in our experience of personal identity, for Freud the consciousness is still the smallest part of our psychical makeup. He goes so far as to refer to consciousness as "in general a highly fugitive state". Thoughts may persist for a time but are eventually replaced by other thoughts. Most of what is conscious is only so for a moment, and "passes in a flash".

Furthermore, the unconscious is not just a passive reservoir into which tumble the repressed elements of our pasts, to be held until they can be brought into consciousness. The unconscious does not simply lie quietly except in cases of illness characterized by the unconscious' eruption in symptom formation. Our unconscious side is always seeking to be heard and appears in consciousness not just as symptom, but as distortion and compromise in our everyday thoughts and actions. The unconscious is present in the "normal", in such a way as to defy easy differentiation. Freud may have subdued the symptom into the familiar, but he does so on the basis of a strange doubling of the familiar, with consciousness as a curious intertwining of both the hidden and the
revealed. For whether or not we intentionally admit the unconscious, it would seem to admit itself regardless of our conscious intentions, according to Freud's account. Does the detachment the hysteric feels for her symptoms, therefore, unavoidably pervade our own relation to certain of our "conscious" thoughts and actions?

Another interesting byproduct of Freud's augmentation of consciousness concerns the therapeutic effects of the extension of continuity. What starts off as the spoken suggestions of the analyst becomes a part of a person's sense of self-identity. In effect, the analytic process changes who a person is by changing their continuity of consciousness, to express that process via our Lockean understanding of consciousness. Without entering into a debate concerning actual psychical happenings from the standpoint of realism—as in: are actual unconscious thoughts being made conscious and do the analysts' suggestions correspond accurately to these thoughts?--we can continue our focus on the experience of identity through continuity of consciousness. Hacking refers to our personal sense of identity as the story which we can tell about ourselves.69 It would seem that changes in the "content" of that story, by the addition of "new" memories for example, leads to a different way of being in the world. Freud asserts that "the patient's life is permanently changed, is raised to a high level of development and remains protected against fresh possibilities of falling ill."70 This reordering of the self, then, is a therapeutic goal.

What does Freud do, however, to this story which we tell about ourselves outside the therapeutic setting? Our stories, which we live as well as narrate, and which in fact
we are, would apparently consist of a series of subplots that we are not aware of. In addition, who we are seems to be very fluid and subject to profound change, essentially through the addition of a few well-chosen words. Having introduced some suspicions regarding our familiar conception of consciousness, attention will be directed toward a more detailed exploration of what is supposedly the quantitatively greater part of our psyche, the unconscious, and the uncanny effect which this notion has upon the status of experienced identity, not in illness but in the everyday.

The incorporation of these spookier elements into our story will be found to have an unsettling impact upon what it is we take to be ourselves. Having made a case for the importance of continuity in developing our sense of self, and in our experience the "self" or "I", the chapters to follow will show how continuity is suspect—not in the obvious sense that Wilkes highlights above, i.e. that sometimes we sleep dreamlessly, or forget life events—but in the sense that the continuity of consciousness itself, as we know and experience it, is infused with the unknown, the un-conscious, and the un-continuous.
Chapter 3 - The Uncanny Unconscious:

Unfamiliar Familiarities

In considering how it is that Freud's account of the psyche adds an *uncanny* quality to our conception of personal identity—introducing as he does the vast area designated *unconscious*—the terms "uncanny" and "unconscious" warrant further explanation. In his essay "The Uncanny" (*Das Unheimliche*, 1919), Freud undertakes a detailed examination of the first term, including a linguistic analysis and an assessment from a primarily psychoanalytic perspective of the sources and situations which evoke uncanny feelings. Subsequent to Freud's essay is the development by other authors of the uncanny aspects of mental illness, personality alterations due to brain injury, and certain classes of literary themes.

An intermixing of the psychological and the literary seems to be a prevailing characteristic of articles on the uncanny, whether the main thrust of the particular article is of the former or the latter. Carolyn Feigelson's primarily clinical article on brain trauma, for example, uses the work of various literary authors to enrich her discussion on "personality death" and "doubling". Conversely, Phillip McCaffrey's chiefly literary essay on uncanny absences analyzes what he calls Freud's numerous "erasures" in "Das Unheimliche" and concludes that these "can be read like conversion symptoms." And
in an unusual synthesis of the psychological and literary, Richard Hutch's article on "the uncanny and Henry James" argues that James' writing of uncanny literary works enabled James to successfully fend off neurosis.

Freud himself relies primarily upon literary examples in illustrating the intricacies of the uncanny. Obvious examples of the uncanny are easier to find in literature, and such examples may be more readily shared with a wider audience than a strictly clinical discussion, reflecting experiences that Freud's readers would most likely have had in their encounters with the literary works which he cites, or at least with works similar in effect.

The literary realm "is a much more fertile province than the uncanny in real life". An author has control over the circumstances within the work and can portray that which falls beyond the usual and the real, in the creation of his or her stories. Thus, there are "many more means of creating uncanny effects in fiction than there are in real life." Nonetheless, Freud maintains that the uncanny in fiction arises from the same basic sources and conditions as those which produce the uncanny effect in reality.

In addition to sharing the same origins, the "creepy" characteristics of the uncanny effect in both literature and life are the same. Hence, the inclusion by Freud of the literary in an essentially psychoanalytic discussion is useful and justifiable. Consequently, the elucidation of the "uncanny" to follow, while it is a part of an overall discussion about personal identity, will draw upon illustrative examples from both clinical and literary sources to more fully convey the nuances of the term.
Freud points out that the usual usage of the word "uncanny" coincides largely with the general idea of that which is frightening, but deems the uncanny to be a "special case" of the frightening. He professes curiosity regarding what the "common core" of feeling might be that distinguishes things uncanny from the frightening in general, and that "justifies the use of a special conceptual term". It will be found that the uncanny is the result of a complexity of feeling, comprised of a variety of somewhat contradictory elements uneasily juxtaposed. The first dichotomy drawn out by Freud as essential to arousing the feeling of uncanniness is that of the "familiar" and the "unfamiliar", which are to be found not opposed but intimately associated in cases of the uncanny.

We are told that the uncanny "is that class of the frightening which leads back to what is known of old and long familiar", at which point Freud promises to show us the circumstances under which the familiar can become uncanny and frightening. In the next paragraph he addresses the contrary conception that the uncanny is frightening because it is unknown and unfamiliar. Suggesting that mere unfamiliarity is not enough to designate a thing as uncanny, he speculates that something must be "added" to the novel and unfamiliar in order to render it uncanny. Whether the ground of the uncanny is the familiar which is somehow transformed by circumstances, or the unfamiliar to which something is added, is uncertain. But it would seem that both are present--somehow together.

Carolyn Feigelson incorporates this association between apparent opposites, in her description of the uncanny as being, in part, "the peculiar perception that [an] object [for
example] is familiar and unfamiliar in an intertwined way. The "object" which Feigelson is referring to is the brain-injured human being, one who has survived the trauma physically but who has suffered a "personality death". Destruction of the patient's personality leads to an uncannily perceived coexistence of both familiar and unfamiliar traits in the same "person"--or, perhaps, same "man", if adhering to a Lockean distinction.

The combination of familiar and unfamiliar also exists in conceptualizations of the unconscious. The previous chapter includes Freud's extending of a kind of familiarity to the unconscious factors behind symptom-formation. The "reasoning" which leads from unconscious desire to symptom is similar to the means by which we consciously deliberate and act in satisfying our conscious desires. The unconscious desire can in addition be exposed in therapy by the analyst and, through the exercise of psychoanalytic technique, assimilated by the patient into her personal continuity of consciousness. By making unconscious motivations intelligible, Freud puts forth a comfortably familiar "sense" to symptoms resulting from unconscious influence. But Freud also refers to the unconscious as a "foreign territory" to consciousness' familiar landscape, and there are many ways in which the unconscious is a profoundly unfamiliar realm.

The word "unconscious" is used in two senses by Freud, the descriptive, "which merely attributed a particular quality to a mental state", this quality simply stated as referring to that which is "not currently conscious"; and the dynamic:
The term *unconscious*, which was used in the purely descriptive sense before, now comes to imply something more. It designates not only latent ideas in general, but especially ideas with a certain dynamic character, ideas keeping [sic] apart from consciousness in spite of their intensity and activity.  

Descriptively unconscious ideas include those which just happen to be "not now conscious", and which, put in Lockean terms, can be brought into one's continuity of consciousness relatively easily. Their content is easily familiar, usually not surprising, and that of ordinary recollection. Ideas that are part of the *dynamic* unconscious, however, cannot be ordinarily brought into continuity of consciousness. They have characteristics that differ markedly from those of conscious thought, and consist of material which often surprises us in the context of the everyday. The focus herein is to be on this latter dynamic understanding of the unconscious--the repressed, secret, hidden part of the psyche.

The dynamic unconscious, as Freud tells us, consists of "ideas" *held apart* from consciousness, and would seem at first glance to fit unambiguously the designation "unfamiliar". "The laws of unconscious activity differ widely from those of the conscious".  
Furthermore, "analytic investigation reveals some of these latent processes as having characteristics and peculiarities which seem alien to us, or even incredible, and which run directly counter to the attributes of consciousness with which we are familiar."  
Freud places the unconscious "directly counter" to the familiar ground of consciousness, setting up a qualitative separation between the two psychical components.
Freud depicts the contents of the unconscious to be wishful or instinctual impulses, latent "ideas". Among the special characteristics which Freud lists as unique to the unconscious is that of "exemption from mutual contradiction". Ideas which seem incompatible, inconsistent, or in direct contradiction with each other, "exist side by side" in the unconscious. A person may both love and hate (or fear) his father unconsciously and simultaneously, and wish for both the father's well-being and demise. Directly opposing ideas such as these neither influence each other nor cancel each other out in the realm of the unconscious. This coexistence of contradictory ideas refers to both active and inactive ideations. When two opposite impulses are active at the same time they will combine into a "compromise formation", whereby both impulses are satisfied at once, albeit incompletely and usually indirectly via a highly convoluted chain of associations.

In addition to the exemption from mutual contradiction in the unconscious is the absence of negation. All unconscious contents exist in a positive form, or as positive impulses. There is no impulse "against" loving one's father, for instance, in our previous example—no "do-not-love" idea. Rather, there exists the "positive" impulse of hatred toward the father. There is no "not" in the unconscious, only that which "is".

Nor is there any sense of "maybe" to the contents of the unconscious; the ideas and impulses are not subject to doubt or degrees of uncertainty. An unconscious idea simply exists as a wish/instinctual impulse. The idea is either present or it is not there at all, with no intermediate degrees of formation. As can be inferred from the characteristics of the unconscious already stated, the "love" and "hate" impulses toward
one's father do not succumb to a "canceling out" of contradictory forces, combining into a kind of wishy-washy uncertainty of feeling in the unconscious. In a true ambivalence of feeling, both impulses—love and hate—exist, each pure and certain. The only "ranking" of the unconscious elements consists in accordance to their respective strengths, that is, the amount of energy associated with each idea, and not how certain each idea is relative to another.

Another odd feature of unconscious contents is that they "have no reference to time at all." Specifically, "they are not ordered temporally, are not altered by the passage of time." Reference to time, according to Freud, is the work of consciousness only. The unconscious contents exist in a preserved state, frozen in the affective contexts in which the original experiences were placed. Due to or in conjunction with their being temporally isolated, the unconscious ideas comprise a psychological "reality" that pays little regard to external, physical reality. Herbert Fingarette summarizes the characteristics of the unconscious: "logical, temporal and causal relations are ignored, part stands for whole, isolated similarities establish equivalencies, and so on."

In everyday terms, aspects of the unconscious are overtly alien to consciousness. The disassociation of the unconscious from physical reality runs against both Locke's and Freud's strong associations of consciousness with perception, especially with perception of the "outer" world, including our physical bodies. Regardless of the intensity of any conscious state of introspection, we are practically unable to completely shut out external perceptions. We must take reality into account when we deliberate between courses of
action, in order to be able to act efficaciously and, simply, to survive; there is a ongoing
reciprocity and response between us and the world we live in.

Characteristics such as timelessness seem impossible to comprehend
meaningfully. The "reference to time" that is a quality of consciousness\textsuperscript{91} works
relentlessly whenever we experience or recollect events. We don't seem to be able, in
consciousness, to hold ideas apart from some temporal reference—reference to time is
fundamental to our making sense of experience. When this reference is altered our sense
of continuity with experience is disrupted. Additionally, we usually try to reduce direct
contradictions in the important ideas we hold, and experience a sense of dissonance or
confusion when we cannot. Such direct conflicts aside, we entertain degrees of certainty
all the time and would probably have a hard time functioning and making decisions only
in terms of absolute certainty. We live our lives and formulate plans of action among
partial certainties.

In terms of the dichotomy "familiar-unfamiliar" that is fundamental to the
uncanny experience, the dynamic unconscious described above would seem to be
introducing the uncanny by introducing decidedly alien aspects into our psyche. But this
is only the simplest level on which the unconscious lends an uncanny tone to conceptions
of the self. Merely stating, however elaborately, that there is this strange realm "held
apart" from our awareness does not seem to touch consciousness and our experience of
Lockean personal identity unduly, or in any but an intellectualized sense. The uncanny
requires an intertwining of familiar and unfamiliar qualities, not just an opposition, to
create its affect.
The unconscious is more complex than just unfamiliar, as has been alluded to in our earlier discussion of psychoanalytic therapy. One might speak of the unconscious as the "repressed familiar". The ideas which are kept back from consciousness in the dynamic unconscious were once part of our continuity of consciousness. Theoretically, as Freud states, only that which was once conscious can be made conscious again.92 Therapeutic technique works to bring "alien" material back into continuity of consciousness, once again to be part of our Lockeian personal identity. There is a sense in which it is a part of our "self" that is locked away in the unconscious, the "once familiar" that has become unfamiliar by design.

The term "familiar" commonly refers to that which is well known, and with which we are well-acquainted, with "unfamiliar" meaning the direct opposite of "familiar." There is, however, a particular quality of familiar-unfamiliar that is part of the German sense of "unheimlich", as Freud's examination of linguistic usage of the term shows, which is not evident in the English substitute, "uncanny". "The English term is not...an exact equivalent of the German one",93 with the German unheimlich being literally "unhomely". Freud spends considerable time on the linguistic explication of the term unheimlich, and its "opposite", heimlich, which oddly enough reveals an intertwining of meaning between the terms themselves.

Following Freud's extended discussion of heimlich, a useful exercise on his part leading to an enriched understanding of unheimlich for the reader, we find that heimlich. "homely". refers to that which, variously, belongs to the house, is familiar, intimate,
friendly, agreeable. We are reminded, though, "that the word 'heimlich' is not unambiguous, but belongs to two sets of ideas." For, in addition to that which is familiar and agreeable, the meaning of heimlich includes that which is concealed, secret. "kept from sight so that others do not get to know of or about it, withheld from others". As an aside, Albert Dixon notes that "a similar ambiguity attaches to the English 'canny'. which may mean not only 'cosy' but also 'endowed with occult or magical powers."

The two sets of ideas which are found to make up the meaning of "heimlich"--"homely, familiar" and "secret, hidden"--are not entirely contradictory nor are they unrelated, as can be seen when we consider what different ideas of "home" commonly connote. There is a sense of "home" as the familiar, that which we know and are comfortable with, the colloquial haven, the safe place to be. The home, though, is also that place which is private not public, and where, essentially, things are hidden from the outside.

There are secrets "of the home" that are only for the eyes and ears of the family who inhabits the home and not for the outsider at all. This is what makes the home the haven that it can be for the inhabitants, protected as it is from the scrutiny of strangers. The familiar and the secretive can be objectively the same, but contextually opposite; the same element that is familiar to those in the home may be "withdrawn from the eyes of strangers, something concealed", and not generally familiar to the outsider in particular.

Heimlich, in effect, contains "its opposite within it" in terms of the notions of the familiar and the unfamiliar, approaching and overlapping with unheimlich in meaning. The unheimlich is the eerie, the weird, that which can arouse gruesome fear. Literally the
unfamiliar/unhomely, in direct contrast of the first meaning of *heimlich*. *Unheimlich* is more than simply unfamiliar. Schelling is cited by Freud as stating that "...everything is *unheimlich* that ought to have remained secret and hidden but has come to light."100

Secrets are intimate possessions to those who hold them, and far from strictly unfamiliar. As well, we begin to get a hint of the forbidden associated with the uncanny, of the "known yet not known", of that which "ought" to be kept from view.

This sense of the uncanny as "forbidden" invites comparison between the relationship of *heimlich* to *unheimlich*, and that of conceptions of "self" and consciousness, to the unconscious, leading to some interesting correspondences. Perhaps the experience of homeliness closest to us is that of our own self. The self can be thought of as the most intimate of "homes", containing and concealing the most intimate of secrets.

The word *"heimlich"* belongs to two sets of ideas, "what is familiar and agreeable. and...what is concealed and kept out of sight."101 The "self"--and here the word is being momentarily strained, seemingly unavoidably, beyond a Lockean sense of continuity of consciousness--is also that which "contains unfamiliarity and hiddenness, and its opposite "not self", within it. Our psychical totality contains that which is part of our personal identity from the Lockean perspective; this totality also contains within itself much that is discontinuous with a Lockean sense of identity, in the form of the unconscious. Yet at the same time we are surprised to find the "familiar" and "of self" in the discontinuous. The unconscious supposedly harbours “our” deepest wishes, whether or not we are aware
of these wishes, and much of our personal histories. The unconscious also guards our secrets. In psychotherapy it is assumed that the repressed, "discontinuous" unconscious can become part of the familiar continuity "again". While the unconscious falls outside our continuity of consciousness strictly speaking, it does not exactly seem adequate to apply sweepingly the designation "not self" to the unconscious either.

Thus, as with the notion of homely, "which develops in the direction of ambivalence, until it finally coincides with its opposite...."[Freud, v.14, 347], the "self" considered in a Lockean sense undergoes similar ambivalence in our understanding when we introduce the idea of the unconscious into the psychical mix. Just as there is a secret side to the home, there is also a concealed, secret side to the self. We are not "for" all others, open to being known and personally available for everyone. Apparently we are not even "for self", according to Freudian theory, with large parts of our psyche barred from entering our continuity of consciousness. "...What is characteristic of defence is that one 'hides' something from oneself."102

The unconscious consists of that which "should" remain hidden. There is a sense of the forbidden found associated with the secret parts of the psyche. The secrets are kept through the mechanism of repression. By way of conveying how repression works, using what he concedes is a "crude" spatial illustration, Freud relates an analogy which includes the "watchman" who performs a censorship function in the psyche, and rooms to represent psychical components:
Let us therefore compare the system of the unconscious to a large entrance hall, in which the mental impulses jostle one another like separate individuals. Adjoining this entrance hall there is a second, narrower, room—a kind of drawing-room—in which consciousness, too, resides. But on the threshold between these two rooms a watchman performs his function: he examines the different mental impulses, acts as a censor, and will not admit them into the drawing-room if they displease him.... The impulses in the entrance hall of the unconscious are out of sight of the conscious, which is in the other room; .... If they have already pushed their way forward to the threshold and have been turned back by the watchman, then they are inadmissible to consciousness; we speak of them as repressed. ... Repression consists in [an impulse] not being allowed by the watchman to pass from the system of the unconscious into that of the preconscious. It is the same watchman whom we get to know as resistance when we try to lift the repression by means of the analytic treatment.103

While keeping in mind that the images of rooms and the watchman are "very far-reaching approximations of the real facts"104 the extended passage above provides a graphic representation of the mechanism of repression. There is something "displeasing" about the material that is kept from consciousness. The hiding of what is in some way a part of us includes not just the hiding from others, but from our own self. At this stage the use of the term "self" becomes confusing. We have our inner home from which secrets are kept even from the "occupant" of the home, and, more puzzling, by the occupant of the home. The progression of the "self" through ambivalence does not stop at the introduction of the "secret self", however. The next chapter will trace the ambivalence past the point where continuity of consciousness fails to reach to the unconscious and where the Lockean "self" misses some significant part of who we are.

The concept of the unconscious brings another dimension to the character of Lockean consciousness, one that is not a part of continuity directly, but which leaves its
mark upon consciousness nonetheless. The foregoing discussion moves from the portrayal of the unconscious as "unfamiliar" to the development of a more ideationally complex unconscious that is at once "alien"; "what is known of old and long familiar"

and what is forbidden and secret. It remains for the unconscious to be brought even closer to home, from "concept" to manifestation in experience. Not only the holder of secrets from consciousness, the unconscious is a haunting presence within consciousness itself, coiling into conscious motivation, thought, and action. The effects of the unconscious upon experience will lead us to a deeper ambivalence of "self", with an accompanying confusion of and disconnection from intentionality and, ultimately, our identity.
Chapter 4 - Suspect Consciousness:

Disrupted Continuities and Unsolicited Intrusions

The dynamic unconscious is not only "held apart" from consciousness, but was formerly part of our familiar consciousness, and is present somehow in the "now-familiar". Further exploration of uncanny themes, particularly that of the "uncanny double" and related disconnections from process, reveals a connection between disruptions of Lockean continuity of consciousness and the uncanny experience. Theoretically, the unconscious is active and acting from its dark hiding place, not just as idea but as experienced presence and, it will be shown, absence— influencing, disrupting and distorting the continuities we take for granted.

The idea of the unconscious as a "presence within" invites comparison with a theme readily found in literature, which elicits a strong sense of the uncanny: that of the "double" in which there is a "dividing and interchanging of the self." Typical are two characters who are identical in appearance. Freud includes an example in which "the hero has promised his beloved not to kill his antagonist in a duel. But on his way to the dueling-ground he meets his 'double', who has already killed his rival." Such situations present an interesting play on Locke's "same man", "same person" distinction, as well as on inner and outer assessments of personhood.

In Freud's example the "men" look the same physically; it just happens that there are two of them. There are two of the same "person" in a qualitative sense also, sharing,
we are assuming, identical histories and continuities of consciousness—that is, each will feel a personal connection to historically identical events up until the time of the divergence of the two "men's" associated personal actions and thoughts. Prior to "divergence" an outer assessment could settle on there merely being "one person times two", a not unduly disturbing, intellectual pronouncement. But from an inner perspective, the prospect of two of "me" is not a pleasant one. Our "hero" above does not feel any personal connection with the actions of his double. Unfortunately, he will not be able to escape the consequences of the double's actions, witnesses' accounts of what appear to be "the hero's" murderous actions locking him into an outer pronouncement of guilt.

Placing ourselves on the "inside" of such circumstances seems to lead us beyond the dispassionately intellectual exercise and to elicit a personally unsettling, uncanny effect. This effect seems to have something to do with "undeserved" responsibility, and the lack of personal control associated with the seemingly inescapable character of this responsibility. We see ourselves put in the position of having things done "in our name" that we have no inner sense of having "done" ourselves, the consequences of which we will personally suffer as though we had.

"Doubling" does not just consist of an outer duplication of the same physical being, but can also appear as a confusion between two different personal consciousnesses—between "self" and "other". This alternative version of the uncanny double consists of an apparent mixing of one's own mental processes with those of someone else: "One possesses knowledge, feelings, and experience in common with the
other ... or ... the subject identifies himself with someone else, so that he is in doubt as to which his self is ...." A clinical example, related by a patient of Dr. Krishnaber, which shares the characteristics of an "inner" doubling of this type is cited by James:

I appeared to myself to act automatically, by an impulsion foreign to myself....There was inside of me a new being, and another part of myself, the old being, which took no interest in the new-comer. I distinctly remember saying to myself that the sufferings of this new being were to me indifferent...but my mind grew often tired of incessantly correcting the new impressions, and I let myself go and live the unhappy life of this new entity....I was another, ...it was certainly another who had taken my form and assumed my functions."

Dr. Krishnaber's patient uses language that recalls certain of Locke's criteria for assessing claims of personal identity. Locke asserts that we take a special personal interest in our own thoughts--thoughts that are part of our continuity of consciousness; we are "concerned with" our actions, attribute them to ourselves, "think of them as [our] own, more than the actions of any other man that ever existed." The patient above "takes no interest in" and is "indifferent to the sufferings" of the new "being" inside him. Yet in his confusion he finds himself living the life of the other, becoming the other. As with the first version of doubling, if we move in this case from a clinical stance to the personal and place ourselves in the imagined position of being even partly usurped by a "foreign" consciousness from within, the effect is decidedly disturbing.

What different formulations of "doubling" share is a disruption in the generally unambiguous, exclusive claim made upon thoughts and actions in the Lockean account of personal identity. In the first case, one is forced to take an interest in and endure personal
consequences of actions with which one has no continuity of consciousness, acts committed by the double--one's "self once-removed". In the second case, one leads a life divorced from one's "interest" and continuity of consciousness, but must lead that life "as one's own" nonetheless. A disconnection from "self" and an unwilling blending with "otherness" takes place.

Such double-elicited disruptions of the Lockean sense of identity which we take for granted, along with the resultant blurring of the boundaries and easy distinctions between "selves", seem to correspond with an uncanny effect. The proposed existence of the dynamic unconscious as the "true psychical reality" according to Freud adds an undeniable disruptive element to our familiar experience of personal identity, enacting the uncanny phenomenon of doubling on many levels.

The unconscious exists as a kind of uncanny double within us, the "foreign territory" that is at the same time the "old and long familiar". The repressed contents of the unconscious were once a part of our personal continuity of consciousness, were "self", until they were banned from consciousness and became artificially "other". As with the hero and his double above--where a history of consciousness coincides until the split which allows the divergence in the "men's" respective actions to occur--the personal context and continuity of an event in consciousness are singular until repression occurs. A "split" then takes place, with the repressed event becoming contextually frozen in the timeless unconscious, and continuity of consciousness in time continuing to be added to and evolve. The dynamic unconscious, as a collective of such repressed material,
comprises in some sense another level and type of "personal history", isolated from
continuity of consciousness in the Lockean sense, but nonetheless slipping alongside our
awareness, and impacting upon consciousness surreptitiously. The symptoms of neuroses
are only the most dramatic manifestations of the unconscious interference which appears
in more subtle form in the everyday.

Psychoanalytic therapy aims at alleviating symptoms by resurrecting and
reconnecting with consciousness that which has been lost to it through repression. To that
end, Freidian psychotherapy utilizes a technique of "doubling", and the subsequent
integration of the doubled material into singular consciousness. As discussed previously.
the source of symptoms is assumed to be in the unconscious, and outside of the conscious
awareness of the patient. Through psychoanalytic techniques of interpretation, the analyst
seeks out the troublesome unconscious material and then communicates to the patient the
unconscious idea "discovered" in the patient by the analyst.

At the point of communication to the patient, the same idea thus is present to the
patient "in two records", or, "in two forms in different places. A doubling of the
unconscious memory trace has been effected, with the spoken suggestion of the analyst
corresponding, theoretically, with the unconscious memory of the experience in original
form. The idea is not yet a part of the patient's continuity of consciousness, however.
Curiously, it is an outer assessment that initially claims the idea for the patient. Like the
case of the hero doomed to find the actions of the double being judged by outside
observers to be the hero's own actions, the analyst-as-witness is the one who judges the
unconscious ideas brought to light through psychoanalysis to be the ideas of the
analysand, ideas which may seem as completely foreign to the analysand as if they were
the ideas of someone else.

Unlike the Lockean assessment of personal identity where only the person herself
can determine which thoughts are part of her own continuity of consciousness, and thus,
her "self", the Freudian view is one that gives someone else the power to determine what
a person's "thoughts" are. Therapy evokes our "double", the part of ourselves outside
conscious awareness and control, like the hero's double acting out of his sight.
Resistance, which Freud assures us is due to the "forbidden" aspects of the resurrected
material, may also be due to a perfectly understandable difficulty in incorporating the
suggestions of another in a way that makes the outer suggestion a part of one's inner
personal experience, continuous with consciousness.

For Locke, the prospect of anyone knowing our thoughts which we ourselves do
not know is doubtful, "it seeming easier to make one's self invisible to others than to
make another's thoughts visible to me, which are not visible to himself." Taking on a
tone of scepticism Locke speculates that:

it cannot be less than a revelation that discovers to another thoughts in my
mind when I can find none there myself: and they must needs have a
penetrating sight who can certainly see that I think when I cannot perceive
it myself, and when I declare that I do not. 

He could just as well have been commenting on the analyst as self-proclaimed "diviner of
thoughts". Yet, psychoanalytic therapy presumes that the analyst is capable of seeing
in us something that we cannot--something that is capable of inducing emotional and somatic disturbances that can disrupt our lives--and also assumes that a cure can be effected by the analyst doing so. The idea that someone else "knows" our thoughts better than do we, though, for whatever beneficial purpose, is unsettling. The integration of the "new" material into consciousness through therapy does not entirely dispel this uncanny erosion of our personal convictions of "self".

The hidden ideas are revealed to the analyst through the double nature of the patient's spoken discourse. As cited previously, "the subject speaks to the analyst...both consciously and unconsciously--and...does this simultaneously". The unconscious "speaks", dramatically, through the symptoms of the patient seeking help. The unconscious is also, more quietly, "embedded within the conscious discourse and so available to the analyst's ear". The doubling of meaning found in speech is not an occurrence restricted to the therapeutic discourse, however, to oblige the inquiring analyst. Nor are the other physical and psychical manifestations of the unconscious confined to the extreme symptoms of neurosis.

Referring to the healthy, non-neurotic person, Freud states: "It is true that if one subjects...waking life to a closer examination one discovers ... that this ostensibly healthy life is interspersed with a great number of trivial and in practice unimportant symptoms". While symptoms of healthy people--ranging from "dreams" to "slips of the tongue"--may be practically unimportant in the scheme of our everyday lives, the implications of "symptoms" occurring at all in normal conscious experience are not so
trivial and unimportant. Not all of our actions are within our conscious control, it would seem. The concept of the unconscious becomes our double in experience, leading to an uncanny confusion regarding which intentions we are really enacting, and "whose" life it is that we are actually leading.

"Certain deficiencies of function of most frequent occurrence among healthy people... may be easily shown to depend on the action of strong unconscious ideas in the same way as neurotic symptoms."121 The "deficiencies of function" that Freud is referring to have been termed parapraxes--122 the class of various little slips, lapses and errors that are commonplace in peoples' lives, and which in perverse and often amusing ways turn out to be not exactly "errors" after all. The "Freudian slip", referring to the usually humorous mistakes of speech which are lightly taken as indicative of the erring person's "real" thoughts, is a term that has become part of the vernacular. Parapraxes extend beyond slips of speech to include virtually any accidental act, and even some apparently intentional acts as well.

Proceeding to support the theory that "accidental acts are really intentional",123 Freud compiles a detailed list and explication of the different kinds of parapraxes in The Psychopathology of Everyday Life (1901). In addition to slips of speech, misreading and miswriting join the forgetting of names and words to round out the linguistic parapraxes. Being mistaken about what one has read, or unable to recall a name or word that one wished to use in a conversation are occurrences that one does not ordinarily take much notice of. But through case by case study, Freud endeavors to convince his readers that
"slips" can be shown to be acts with a "sense" to them. One might, for example, call one's lover by the wrong name. Besides provoking hurt feelings and a heated argument, one's error could be construed as expressing a wish to be with the person named by mistake, or expressing a dissatisfaction or hostility toward one's present lover.

Other parapraxes find similar explanations. No longer is forgetfulness a sufficient excuse for a missed appointment, a misplaced item or the like. Freud prefaced his discussions concerning "The Forgetting of Impressions and Intentions"\(^\text{124}\) with the remark: "I can state in advance the invariable result of the entire series of observations: in every case the forgetting turned out to be based on a motive of unpleasure."\(^\text{125}\) One does not forget to keep an appointment with someone, for example, unless one "wishes" to avoid that person, whether or not one is consciously aware of that wish.

Yet more parapraxes, under the heading of "bungled actions" including breaking things and falling, are presented as the result of more complex motivations. Often such actions are "sacrificial acts": acts of atonement for some wrongdoing, or superstitious acts to "avert evil". Freud relates a personal anecdote where he believed that his daughter was mortally ill. When he heard unexpectedly that she would recover after all, he "yielded to an impulse" to hurl his slipper against a wall and ended up "unintentionally" breaking a small marble statue of Venus--an act viewed by Freud as a sacrificial offering of thanks to the fates for his daughter's recovery.\(^\text{126}\)

Not all parapraxes are apparent "errors", though. A person's characteristic habits, "such as playing with one's watch-chain, fingering one's beard and so on", or "idle" play
such as doodling with a pencil that one happens to be holding, are also acts with a hidden "sense". Perhaps a person always prefers to sit with his back to the wall when dining in restaurants, or decides that the glasses in the cupboard should be arranged in a certain way. Such habitual or sporadic acts which do not appear to be errors in any way are unobtrusive and not demanding of an explanation, and thus they innocuously pass our noticing of them. According to Freud, though, these kinds of actions can be symptomatic acts, "[giving] expression to something which the agent himself does not suspect in them. and which he does not as a rule intend to impart to other people but to keep to himself." When a "sense" is attributed to the errors and non-errors included among the array of parapraxes, "by 'sense' we understand 'meaning', 'intention', 'purpose' and 'position in a continuous psychical context'. But the sense of these actions is outside of our personal continuity of consciousness. For "whom" does the action have meaning, "whose" purposes and intentions being enacted, and what is the nature of the context within which these actions should be rightly placed? What is the relationship of this unconscious meaning, purpose, and intention, to conscious accounts of one's actions?

Parapraxes are the result of a doubling of intent. They are "psychical acts arising from mutual interference between two intentions." The results can be humorous, as in the blending of two words to form a single, nonexistent word. When a friend of this author recently "slipped" in describing his plans to call a government department and get some "fanswers" to a problem, questioning uncovered the doublespeak of "answers"
combined with the contrasting notion of "fancy". Scepticism regarding whether he would get "fact or fancy" in answer to his concerns seemed to elicit the misspoken word. The interference of intentions is less easily laughed off when more significant physical acts are thwarted.

A person might consciously intend to meet someone for lunch, for instance. Her "misplaced" car keys prevent her from keeping the appointment. As soon as the lunch hour is past she discovers that the keys were in her pocket, previously checked several times to no avail, all along. "Another" intention has come to fruition when the appointment is missed, a desire to annoy or avoid the prospective luncheon partner perhaps. In some circumstances, missing a meeting with a tiresome relative for example. the "accidental" misplacing of the keys may be a somewhat welcome event.

Such unsolicited intrusions into one's conscious intentions may at times be highly unwelcome, however, and even detrimental. If the luncheon appointment was part of a job interview, for instance, and the person's conscious, appropriate, and apparently wholehearted desire for employment is derailed by some lingering unconscious fear of authority or success, determining the status of her competing motivations becomes problematic. Which is her "real" intention? Which is "her" intention?

Our performance of, or failure to perform certain acts in ordinary life would seem to not be within our command, for the unconscious can "override" our conscious intentions when we least expect it. Placing the "real" motives for actions in the unconscious realm, as Freudian theory seems to do, places them outside of our awareness.
and in effect, just outside the reach of our conscious, causal efficacy. Freud asserts that intentions can "become operative" of which a person "knows nothing". He writes further of the "secret" actions of a "counter-will"--contrary to conscious will--which is able to achieve its aims specifically because of the covert nature of its influence.

The hero and his double above can be viewed as conveniently representative of dual intentions in a single psyche, for although the hero had promised to spare the rival's life, surely the desire to see the rival dead could not have been too far from the hero's thoughts. Were our "hero" able to have seen his double attempting to carry out the murder which the hero had pledged to refrain from, the hero could have possibly acted to stop the double from performing the forbidden act. Like the "counter-will", though, the double acted out of the hero's sight. And, like the hero, we ourselves can neither counteract nor foster, should we so choose, "intentions" which exist outside our awareness of them.

Unlike the hero's predicament, the discontinuous actions are not "outside" us. We live the life of the "other" within, at the same time as we lead our "own" life--as including the events and thoughts which we experience as connected with our continuity of consciousness. It is difficult to assess the degree to which unconscious processes permeate the conscious, the extent to which we are unaware or delude ourselves as to the "reasons" for our actions. In terms of the Lockean continuity of consciousness, the motives of the unconscious would be considered "other", yet they lead to actions which we perform, actions which form part of our personal continuity of consciousness. In
terms of the Freudian psyche, the motives of the unconscious are fundamentally "our own" motives, even if we do not know it, a notion leading to an experientially disconnected "self" in the contrast to the comforting Lockean view. While we experience the manifestations and consequences of the unconscious intentions in carrying out many of our conscious actions, we are disconnected in some way from the motives of these actions and from the underlying process of how they came to be.

The "doubling" elicited by the unconscious elements in our psyche evokes the uncanny experience through its unexpected presence and influence upon our thoughts and actions. One outcome of this doubling and influence is the "disconnection" from motivation, or process, described above. Such disconnections can be linked to another aspect of uncanny experience, as the unconscious brings about uncanny absences as well as an eerie presence.

Uncannily frightening instances can be generated by an unexpected presence, such as in the form of a ghost, perhaps, or "a double, or a return from the dead." Uncanny instances can also be generated by an unexpected absence—unexpected loss, disappearance, or lack. From the perspective of consciousness, the influence of the unconscious is also uncanny in this second sense, through creating an absence of conscious continuity with intentions and the process behind actions, that we expect to have a conscious connection to. As well, the associated "removal" and repression of thought from consciousness, holding us apart from aspects of ourselves, is another part of the uncanny effect of the unconscious on our experience of self identity.
The uncanny as unexpected "absence" is effectively imparted in Phillip McCaffrey's literary example, in which a rural family hears "a murderous clamour" in the middle of the night. When they rush outside they "find only an eerie quiet...: no perpetrator, no footprints, no sound of breathing, no wounded body." When the family was thus confronted with the unexpected absence of some source of the din, finding only what McCaffrey refers to as a void, "the thing became uncanny, cold trickled down most of their backs". This is an easy to illustrate example of an absence.

There are also subtler ways in which "absence" becomes a factor in the uncanny, notably when we turn our attention from literary to clinical examples, and connect these examples to the relationship between the unconscious and the "self". Sheldon Bach notes in his essay on the uncanny and narcissistic disturbance, that uncanny feelings can be evoked when one feels a lack of continuity, or of a reciprocal responsiveness, with either aspects of one's self or the world. There is a certain lack of reciprocity evidenced when we consider the influence of our own unconscious upon consciousness, in parapraxes, chance actions and symptoms. The influence is virtually unidirectional, with the unconscious taking opportunistic advantage of and disrupting conscious intention, but with consciousness being unable to acknowledge or detect "our own" truly unconscious motives. The unconscious does not "let us in on" its plans.

There are other ways in which the unconscious creates psychical circumstances that resemble certain uncanny elements of Bach's clinical examples, where "the uncanny" is the result of an internal disruption rather than an encounter with a specific uncanny
external object. Focusing on narcissistic disturbance and uncanny feelings associated with this form of disturbance, Bach describes the related "problem of a lack of belief in the continuity and substantiality of the self and in the continuity of the process of being alive." Accompanying this disbelief in the continuity of the self as experienced by Bach's patients, we are told in an illustrative case that the patient's own behaviour "feels strange to him, unreal, disconnected...." In terms of a Lockean continuity of consciousness, it is as if the patient's connection to his own actions has not been fully established. And as a consequence, or in tandem, his sense of self has not been fully established either.

Further to this sense of the uncanny found associated with the personal discontinuity of self, is that arising from an "inability to experience process, which leads from here to there, as a continuous one in which [the person] and the world remain continuously alive for each other." The inner experience of process, the continuity of consciousness with the events comprising that process, also seems to be necessary for a person's self to seem real--for a person to be real to himself. It is not enough to merely have continuity of consciousness with a particular event in our personal history, or with the present moment. We seem to need some kind of accounting for how significant events in the past and present arose, and, more generally, of how we got to the "now"--a context formed by a chain of events without troubling gaps--in order to feel at ease in the present. "Process" is not only a series of events to be recollected as having occurred, but also a series to be experienced in an "inner" way. These events must be placed in a
personal continuity of consciousness in order for the experience to be one of world being "alive" for the person, and for the person to be in the world in a way that is "real" to him.

Gaps in consciousness, or what can be here conceived in some respect as interruptions of process, such as when we sleep, have already been shown to present little problem in terms of Lockean continuity of consciousness. We experience continuity of consciousness with the thoughts and actions of our "self" before we slept, and consider ourselves the same person upon waking. If in contrast we were to find ourselves at the office with no recollection of how we got there, our last memory being that of going to bed the night before, there would be an unexpected and irreconcilable lack of awareness of the process whereby we came to be where we presently are.

As previously explained in our discussion of Wilkes' idea of continuity, "continuity" does not refer to an unbroken line of awareness of every single moment of our lives from infancy to present. We do, however, expect to have some experience of the process whereby we got to "wherever we are" at any given moment, and an awareness of that experience. Simply put, I don't normally just suddenly find myself in this room; I will remember walking into it. And if I could not remember how I got into this room, chances are I would be surprised and probably feel an uncanny bewilderment.

We all experience less extreme examples of breaks in process every day, such as when we find ourselves to have driven "automatically" to a daily destination without incident, and without being "conscious" of the last mile of the trip. If we accept Freudian accounts of parapraxes and similar manifestations of unconscious intentions, we are
radically dissociated from the process originating many of our actions, even actions that we perform in full conscious awareness. As with the disruption of continuity of consciousness and confusions of Lockean versions of personal identity, the disconnection from processes which we expect to have continuity with as Lockean persons also invites uncanny sensations. Without consciousness of process, the present moment becomes unsettled, unsettling, and open to being experienced as uncanny.

Locke is aware of the commonly occurring gaps in consciousness, but beyond commenting upon them is not overly concerned about their significance for personal identity. His focus is upon the continuities that persist despite the gaps, and from which a sense of self are fashioned. Unlike Locke, Freud is not resigned to accepting a degree of disconnection between some conscious acts but prefers to "interpolate between them".140 Breaks in continuity are the signals for the analyst that something important is being omitted. "We make our observations precisely with the help of the breaks in the sequence of psychical events: we fill in what is omitted by making plausible inferences and translating it into conscious material."141 Continuity of consciousness as described by Locke does not fill the gaps, but bridges them. In Locke's view, we cannot say very much about anything that is beyond what is present to consciousness and incorporated into our personal continuity. Freudian theory, on the contrary, makes much ado of that which is not present to consciousness.

The theory of an unconscious functions to fill in "gaps" that commonly occur in "the data of consciousness"142 in healthy people as well as those who are suffering from
neuroses. This train of thought furnishes a "process" where one did not previously exist in consciousness, in cases where psychoanalytic therapy exposes processes underlying symptoms, and turns the therapeutic interpretation into a conscious accounting for the symptomatic effect. "Process" such as unconscious motives and activities provide, however, is inaccessible to consciousness under normal circumstances.

Thus, we have a continuity of consciousness with a series of events, processes, feelings, thoughts--the totality of consciousness which makes our personal identity according to Locke. We only have part of our story, though, missing out on the repressed events confined to the unconscious, as well as the unconscious intentions and ideas behind manifestations of unconscious activity in conscious life. However incomplete or limited this view we have of ourselves is, we like to think that we can still trust the view we do have in certain respects. While some elements have been removed from consciousness, and some actions cannot be explained through a conscious accounting of process, we do not question our recollection of having experienced the experiences which we do remember. We might question motives behind events as having underlying unconscious sources perhaps, but not the events themselves. Generally, if something is a part of our continuity of consciousness we recognize it as "true" for practical purposes, insofar as we might view such knowledge as falling within the "limitations" of conscious awareness.

Due to the activities of the unconscious, though, there are some cases where we cannot even trust that the recollections which we do have are of events as they actually
took place. There are many factors which can disrupt and influence memory, ranging from what Elizabeth Loftus suggests are people's "filling in gaps in their memory with socially desirable constructions", creating favourable memories for themselves (and favourable "selves"?), to the current controversies surrounding the possibility that therapists can create false memories in their patients, generating a debate that falls beyond the scope of this essay. In The Psychopathology of Everyday Life, however, Freud includes along with his explication of parapraxes, a chapter on a particular form of alteration of memory which he terms "screen memory". The inclusion of screen memories herein is due specifically to their being directly attributed to the activities of the unconscious, their connection to the "doubling" of intent, and the place that Freud allocates them to as being comparable to parapraxes.

Referring to childhood memory, Freud comments on the "striking fact that a person's earliest childhood memories seem frequently to have preserved what is indifferent and unimportant." These memories of dull little events from our earliest years have a strange power to persist throughout much of our adult lives. "With such memories we are surprised we have them at all." The persistence of these memories in spite of their ordinariness is due to their being "screens", or substitutes for memories of significant impressions. Screen memories gather strength from the energy associated with the memory which has been replaced or covered over by the substitute formation.

Like parapraxes, the screen memory is the result of an unconscious "purpose"--the "other" intention which interferes with conscious intention-- a purpose which "favours
one memory while striving to work against another." Thus, unconscious activity does not only remove and repress certain events from consciousness. Some of the renderings of events which we recollect as part of the continuity of consciousness comprising our identity may be present due to unconscious activity, and not because the events actually happened the way in which we recall them. Such memories "owe their existence" to the mechanisms of the unconscious.

Freud would not discuss how much of our memory store falls into the screen memory category. Not only may we be led to mistrust the completeness of conscious accounts of motivation and intention behind actions, but there are indications that the events which we remember consciously experiencing and our recollections of actions themselves are not entirely trustworthy. In keeping with his assessment that "the unconscious must be assumed to be the general basis of psychical life," Freud goes so far as to refer to consciousness itself as "symptom" in his bid to stress the importance of "the metapsychological view of mental life." Wilkes gives a summary of the degree to which psychoanalytic theorizations suggest that the unconscious infiltrates our lives:

Unconscious factors permeate and colour our most rational and conscious activities. Dispositions, inclinations, patterns and habits of behaviour are all said to be due in part to early projection, introjection, displacement, idealization, transference, to the inhibition or repression of infantile desires, to sublimation of unacceptable drive onto acceptable objects, to unconscious memories of primitive satisfactions and frustrations, and so forth. The conscious mind is formed from all this, and cannot be fully understood independently of it.

And "all this" operates below the threshold of our own awareness.
Through psychoanalysis we are given a therapeutic method which purports to uncover the covert operations of our unconscious and reassuringly restore conscious continuity and well-being, but the theoretical underpinnings of which disrupt consciousness in the everyday and which imply that we are held apart from much of our inner world. Our once-familiar and trustworthy “continuity of consciousness” becomes an uncanny intertwining of presence, in the form of unsolicited intrusions from the hidden unconscious; absence, in the form of continuities barred from consciousness through repression; and suspect presence, when we find ourselves unable to fully believe in our conscious rendering of motives, intentions, and even events themselves. Our “self” becomes impossible to clearly demarcate from the “otherness” within, as every conscious element of our personal identity--our thoughts, acts and recollections--are formed from an uncanny blending of the hidden and the revealed.
Conclusion:

Uncanny Consequences and Speculations

Locke's theory of continuity of consciousness provides a sensible, experience-based, internal account of personhood. Psychoanalytic theory in some ways supports the Lockeian account. Therapeutic technique extends continuities through bringing repressed unconscious material into consciousness. If the "new" material is not made continuous with a person's consciousness—if the patient is not able to incorporate the new material such that she can claim the analyst's interpretation as the patient's "own" experience—then there is no therapeutic effect. The importance of this personal connection to therapeutic success reinforces the primacy of continuity of consciousness in the scheme of personhood. The unconscious is presented accordingly as able to be assimilated by consciousness via the techniques of psychoanalytic therapy, and as containing chains of reasoning and motivation similar to those with which we are acquainted in consciousness.

The unconscious is also described by Freud as alien and unfamiliar, conforming to "laws" contrary to those by which consciousness operates. Yet, the alien unconscious material was once a part of our familiar continuity of consciousness. This intertwining of familiar and unfamiliar characteristics corresponds to conceptions of the uncanny, and introduces the uncanny into the idea of the psyche, and, indirectly, into considerations of
personal identity. The ingress of the uncanny into our Lockean sense of identity further occurs in experience, through the manifestations of unconscious activity in conscious thought and action.

The unconscious disrupts personal continuity of consciousness through evoking a confusion and doubling of intent, and through eliciting absences—both of elements which "belong" to our continuity of consciousness, and of connections which we expect to have to the sources of our actions. An elucidation of varieties of uncanny concepts and experiences, combined with a discussion of the relationship between the unconscious and consciousness, shows that disruptions in our familiar experience of Lockean continuity of consciousness, and thus of self, are found to coincide with the uncanny effect in several ways. From the idea of the self as "home" which hides many secrets, to the experiences of doubling and disconnection from process, the Freudian unconscious unsettles the simple Lockean rendering of self, adding an uncanny element to our everyday experience of being persons.

A rare reference to non-pathological uncanny experiences in "normals" is made by Bach, who states that such experiences arise under two general conditions: in the creative state, and in cases of "unique events". The second condition would be one "in which an event is so unique it cannot be integrated into preexisting structures." Feigelson's "uninjured partners" could qualify as "normal" persons experiencing the uncanny. The strange new person that seems to have "taken the place" of the injured partner due to physical brain trauma—"this 'stranger'... who is physically recognizable but whose
personality, as previously known, is deceased\textsuperscript{156} --proves difficult to integrate into long established preexisting structures of interaction between the two partners. The uninjured partner is "stranded with a psychological stranger" leading to "an 'uncanny' sensation".\textsuperscript{157}

What if the "psychological stranger" whom we are stranded with is within us? The unconscious parts of our psyche, disassociated from temporal influence, consist in old motives set within old contexts. We may consider ourselves to have long outgrown and forgotten the desires and circumstances comprising our unconscious ideation, and find it difficult to fit passé unconscious motives into our present context of "self". Unconscious motives may seem completely foreign to our current conscious motivations and conceptions of who we are. The unconscious "self"--not purely "other", yet not at all part of a Lockean "self" at present even though much of it once was--proves difficult to integrate into our preexisting notions of what the boundaries and characteristics of our experience of personal identity are. We are at once adults, self-created and defined by our sense of continuity of consciousness, acting within the context in which we presently reside; and at the same time Freudian theory delivers us into the grip of an unconscious rife with infantile contexts and motives.

When the Krishnaber patient, cited by James, relates his sensations of inner doubling, and his reluctance in living "the unhappy life of this new entity" he had found "inside" himself,\textsuperscript{158} we can imagine the patient being cursed with an awareness of the way things really are. The patient could just as well have been describing the plight of
consciousness in relation to the unconscious—as though some strange shift in sensitivities had produced in him an uncanny awareness of both simultaneously.

We may discuss “the stranger within” at length, but we seem to need to live as if it does not exist, at least not to the degree and the strength of influence which Freud would advocate. A trust in and ability to depend upon our continuity of consciousness seems crucial to our well-being as persons, with disruptions in continuity, in varying degrees, creating unbearably uncanny sensations. With disruptions in Lockean personal identity coinciding with the uncanny, the establishing of a sense of continuity would seem to act as a kind of defense against the uncanny.

Does therapy “work” when it works because it provides continuities in which to place symptoms, and in so doing counteracts the uncanny sensations evoked by symptoms? Therapeutic success may consist, in part, of resolving uncanny sensations in the analysand, some of which are probably created by the process of analysis itself. Unsettling dissonances must often be elicited when the analysand is confronted with her strange “unconscious” ideation by the analyst, dissonances which are resolved through the integration of the new material into the patient’s continuity of consciousness. The drive toward preserving continuity should not be underestimated, for it is the drive to preserve the “self”.

In the Bourne-Brown case, once Bourne had returned to his old life after the two-month fugue episode living as the candy-shop proprietor Brown, Bourne "had such a horror of the idea of the candy-store that he refused to set foot in it again."159 The prospect of such undeniable confirmation of a discontinuity of his current "self" would
seem to be for Bourne intolerable. We do not like to be confronted with evidence of the tenuous nature of our own "self", or with the presence of the "other" within. In a sense. preserving the comforts of continuity, however illusory, acts to stave off the uncanny.

Whatever vagaries Freud introduces into the concept of consciousness, however, we seem powerless to transcend consciousness in experience. Our experience of "self" is still confined to consciousness, regardless of what our new conceptual understanding tells us the significance of consciousness is. Consciousness is "where we live", where the unconscious resolutions and compensations that we supposedly harbour are played out, and where continuities and their semblance of solidity and dependability are preserved. Our conscious "self" is the only self that we can effectively know.

We appear to be trapped with our uncanny inner disruptions, and cannot trust our everyday experience of "self" in the same way as we might have without the complications which Freudian theory introduces. For Freud, we cannot possibly know ourselves. Consciousness, revealing the only "truths" about ourselves that we can experience directly, is for Freud a concealer, a screen over the "truths" of psychical life.\(^1\) Our personal identity is, paradoxically, a "self"-deception. The unconscious undermines consciousness, makes it illusory, uncanny, infinitely suspect. But it may also afford a source of an underlying unity that manifests itself incompletely at the conscious level. As David Sachs maintains, Freud takes for granted that beneath incongruities in consciousness "there is an unconscious but real congruity."\(^1\) Wilkes as well suggests that perhaps the bulk of what matters for personal unity lies below the threshold of
consciousness. There may be another level of personal continuity. But it is not at the level of consciousness, and it cannot be determined from the outside, or from the inside for that matter. It lives in dreams, even as we are not conscious of them. We can only assume, insist, or hope that it is there. It remains a haunting but not an incarnation, hovering just outside the Lockean experience of personal identity.

Considering the conscious "self" in light of Locke's account, psychoanalytic theory, and the uncanny, continuity of consciousness may be conceived as sometimes being created for continuity's sake—for the comforts and coverings which continuities provide to fill uncanny spaces and incorporate uncanny presences and incongruities. Continuity of consciousness, and therefore, personal identity, is not just a "given", but a matter of creation—a matter of discovery.
ENDNOTES

1 Ahead of All Parting: The Selected Poetry and Prose of Ranier Maria Rilke, 167.
2 Locke, Bk. 2, Ch. 27, Sec. 21 and Sec. 23.
3 Locke, Bk. 2, Ch. 27, Sec. 14.
4 Locke, Bk. 2, Ch. 27, Sec. 9, emphasis added.
5 John Mackie, Problems From Locke, 186.
6 William James, The Principles of Psychology, 314.
7 James, 316.
8 James, 316.
9 Locke, Bk. 2, Ch. 27, Sec. 14.
10 Locke, Bk. 2, Ch. 27, Sec. 14.
11 Locke, Bk. 2, Ch. 27, Sec. 14.
12 Locke, Bk. 2, Ch. 27, Sec. 7.
13 Locke, Bk. 2, Ch. 27, Sec. 8.
14 Locke, Bk. 2, Ch. 27, Sec. 9.
15 Locke, Bk. 2, Ch. 27, Sec. 9.
16 David Smith, citing Compte, in "Mind and Body in Freud", 394.
17 Mackie, 186.
18 Locke, Bk. 2, Ch. 27, Sec. 26.
19 Locke, Bk. 2, Ch. 27, Sec. 22.
20 Locke, Bk. 2, Ch. 27, Sec. 22 and Sec. 26.
21 Mackie, 176.
22 Locke, Bk. 2, Ch. 27, Sec. 15.
23 James, 369-371.
24 James, 371.
25 Locke, Bk. 2, Ch. 27, Sec. 20.
26 Wilkes, Real People: Personal Identity Without Thought Experiments, 105.
27 Wilkes, 106.
28 Locke, Bk. 2, Ch. 27, Sec. 20.
29 Wilkes, 103.
30 Wilkes, 103.
31 Locke, Bk. 2, Ch. 27, Sec. 10.
32 Locke, Bk. 2, Ch. 27, Sec. 10.
33 Mackie, on Parfit, 198.
34 Freud, An Outline of Psychoanalysis, 14.
36 Freud, An Outline of Psychoanalysis, 16.
37 Freud, An Outline of Psychoanalysis, 16.
38 Locke, Bk. 2, Ch. 1, Sec. 11.
40 Locke, Bk. 2, Ch. 27, Sec. 20.
43 Freud, “A Note on the Unconscious in Psychoanalysis”, v. 11, p. 52.
44 Freud, “The Sense of Symptoms”, v. 1, 310.
45 Freud, “The Ego and the Id”, v. 11, 358.
47 Francis M. Moran, Subject and Agency in Psychoanalysis, 4.
48 Moran, 4.
51 Freud, “Repression”, v. 11, 149.
52 Freud, An Outline of Psychoanalysis, 16.
53 Ian Hacking, Rewriting the Soul, 195.
54 Freud, “Analytic Therapy”, v. 1, 505]
55 Freud, “The Unconscious”, v.11,177-78],
56 Freud, An Outline of Psychoanalysis, 17.
57 Freud, “The Unconscious”, v. 11, 178.
58 Freud, “The Unconscious”, v. 11, 178, emphasis added.
60 Freud, An Outline of Psychoanalysis, 17, emphasis added.
61 Freud, “Analytic Therapy”, v. 1, 505.
63 Freud, “The Ego and the Id”, v. 11, 358.
64 Freud, “The Sense of Symptoms”, v. 1, 310.
65 Wilkes, 208.
66 Wilkes, 208.
67 Freud, An Outline of Psychoanalysis, 16.
68 Freud, An Outline of Psychoanalysis, 16.
69 Hacking, 218.
78 Carolyn Feigelson, “Personality Death, Object Loss, and the Uncanny”. 331.
79 Refer to 11-12,14-15, this essay.

Freud, "Analytic Therapy", v.1, 510, refers to dreams as the symptoms of healthy people.

Freud, "A Note on the Unconscious in Psychoanalysis", v. 11, 54.

Editor's note, "In German 'Fehlleistung', 'faulty function'. It is a curious fact that before Freud wrote this book the general concept seems not to have existed in psychology, and in English a new word had to be invented to cover it." The Psychopathology of Everyday Life, v. 5, 34, n.1.


Freud, "Parapraxes", v. 1, 88.

Freud, "Parapraxes", v. 1, 70, 78.

Freud, "Parapraxes", v. 1, 92.

Freud, "Parapraxes", v. 1, 102.

Feigelson, 335.

McCaffrey, 372.

McCaffrey, citing Gotthelf, 225.


Bach, 78.

Bach, 80.

Bach, 79.

Freud, The Unconscious", v. 11, 168.

Freud, An Outline of Psychoanalysis, 16.

Freud, "The Unconscious", v. 11, 168.

Elizabeth Loftus, "The Reality of Repressed Memories," 532.

See Elizabeth Loftus, 1993, for an excellent discussion of the factors affecting memory, and current controversies of therapeutic "suggestion".


Freud, creditling Lipps, The Interpretation of Dreams, v. 4, 773.

Freud, "The Unconscious", v. 11, 197.
Wilkes, 81.
Bach, 85. Reference to but not development of the first theme, creative states, telling us only that the uncanny in creative states is due to "regression to narcissistic modes".
Bach, 85.
Feigelson, 331.
Feigelson, 331.
Refer to 46-47, this essay.
James, 370.
Freud, The Interpretation of Dreams, v. 4, 773.
David Sachs, "On Freud's Doctrine of Emotions" 146.
Wilkes, 151.
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