

Strangers to Ourselves: Self-Deception and Lack of Insight in the Setting of Mental Illness

“There are stories that save us, and stories that trap us, and in the midst of an illness it can be very hard to know which is which.” —Rachel Aviv, *Strangers to Ourselves*

“What’s the individual’s purpose? I would say it’s to burn through delusion, try to figure out what’s actually happening in this mind, in this body. For example, why am I so convinced that I exist as a person, that I exist permanently, and that I’m central to everything in the world? Well, we kind of know why. It’s because of thinking. And it seems fairly urgent that we should get to the bottom of that because death is coming. And it’s going to shock the shit out of you when it does come.” —George Saunders, on the Ezra Klein podcast

When does a story lead us to some greater understanding, shed light on an event or on a person, reveal a previously undisclosed insight, and when does it distort or misrepresent what actually happened, tricking us into believing something we otherwise would not? This is the question that frames Rachel Aviv’s recent book *Strangers to Ourselves* (2022) in which she offers an account of her experience of being diagnosed with anorexia nervosa at the age of six. She details the circumstances in her life at the time—the divorce of her parents, the routine jokes family members made about people with obesity, even the ritual of religious fasting—that may have precipitated an eating disorder at an unusually young age. Yet Aviv is less concerned with uncovering the precise reasons why she developed this illness than with why she went on to fully recover while another girl, with whom Aviv felt a strong kinship, did not. Anorexia became a chronic condition for Aviv’s friend Hava who represents something of a double for Aviv, intimating an alternate path that her own life could have gone down. Hava would go on to require multiple hospitalizations throughout her life and would eventually die from complications of her illness in her 30s. In trying to make sense of how their lives vastly diverged after their shared starting points, Aviv writes, “Mental illnesses are often seen as chronic and intractable forces that take over our lives, but I wonder how much the stories we tell about them, especially in the beginning, can shape their course” (22). She then adds, “people can feel freed by these stories, but they can also get stuck in them” (22). While Aviv never directly addresses whether people have any degree of agency over these stories of illness that shape the course of

their lives, the overriding impression of the book, underscored by its title, is that self-misconstrual pervades if not entirely underlies our sense of ourselves.

The story Aviv shares points to a number of central issues in discussions of the treatment of mental illness. Of these issues, none are as prevalent or as complex or as contentious as the decision to treat a patient against their will. If indeed self-identity emerges out of some core set of motives, desires, mental processes that remain obscure to us, then how does that affect the understanding of autonomy and the determination that aims to assess the appropriate functioning of this autonomy? For Aviv, the issue hinges on the word *insight*, which she calls a “pivotal, almost magical word” in psychiatry and the purpose of describing someone as having it or not is “to evaluate the truth of people’s stories about what is happening in their minds” (22). Put this way, the lack of insight evokes the overarching concept of self-deception and the large body of research on it in the fields of philosophy and psychology. Self-deception, then, complicates any straightforward notion of what it means to have capacity and may have implications for judging a patient not to have it. Drawing from the multidisciplinary research on the topic, this essay will examine a fictional case study in the form of a literary narrative to argue that self-deception has been insufficiently considered in the context of decision-making capacity (DMC) and that only by accounting for the blind spots ingrained into every human psyche can we more fully appreciate all that is contingent on assessing the soundness of someone’s mind.

Decision-Making Capacity

The historical origins of DMC arose out of a convergence of landmark events as well as a general movement within society (Beckley 2022). The era of mental health care reform of the 1960s and 70s, with its emphasis on deinstitutionalization and its heightened scrutiny on the

ethical treatment of patients, set the stage for the fallout from the Tuskegee Syphilis Study. The resulting Belmont Report (1979) focused on the standards for voluntary consent in scientific research, and while it did refer to DMC, it did not go on to define it. The subsequent President's Commission issued a report a few years later that continued to develop a legal foundation for what would be called autonomy, but it was not until the 1988 article "Assessing Patients' Capacity to Consent to Treatment" by Paul Appelbaum and Thomas Grisso that clearly delineated guidelines were in place. The authors identified four standards the patient must demonstrate to have capacity: they need to be able to communicate a choice, understand the relevant information, appreciate the situation and its consequences, and manipulate information rationally. The article thus established the core of how DMC is assessed today and has since led to various other criteria that comprise the current gold standard, including giving the patient their best opportunity to demonstrate capacity, assuming adults can make their own decisions, and considering DMC as specific to both a particular decision and the given moment in time.

While the four standards remain the bedrock of DMC, alternative models and differing approaches have been proposed. The sliding-scale model, for instance, aims to balance respect for autonomy with beneficence by calling for a more careful examination of a choice when that choice has a greater likelihood of endangering the person (Lahey and Elwyn 2020). The dispositional capacity model addresses the issues that occur at time of discharge when a patient declines a higher level of support at home (e.g., assisted living) that the provider deems them as requiring (Erickson et al. 2022). The over-riding objections model posits either a goal-based or burdens-based refusal that expands the boundaries of capacity and allows a patient to make a decision that may not otherwise meet the requisite standards (e.g., wanting to avoid receiving treatment in the hospital at all costs) (Navin et al. 2021). These models offer some helpful

modifications to the original standards, and yet because of their status as emerging concepts and their varying degrees of adoption into practice, it may be most accurate to characterize their upshot as exposing the existence of limitations in the established guidelines for DMC.

To return to the case of the six-year-old Aviv, not even the conceptions of capacity with the most lenient criteria would grant her as having it. When it comes to insight, she herself admits that she “basically had none” (24). The case of Hava presents a more equivocal scenario—as Aviv states that her journals at the time demonstrate an awareness of her diagnosis—and anorexia itself raises questions that get to the crux of debates on capacity. In weighing the arguments for coercive interventions, the philosopher and ethics scholar Jennifer Hawkins puts forward the idea of a *prudential mistake*, which she defines as a decision that leaves a person “with a level of welfare far less than what she would have had, had she chosen differently” (156). Hawkins believes that anorexia is one such instance of a *prudential mistake* and “may be a rare case of justified paternalistic intervention” (158). For Hawkins, the justification to intervene appears to rest on the tension between a person’s present and future self, and when the former poses a significant threat to the potential of the latter, then it becomes necessary to deliberate on intervention. This tension between different selves at different points in time often presents itself in cases involving surrogate decision-making and leads Hawkins to ask: “What are the capacities we ordinarily possess that ground our deep personal interest in being decisionmakers for ourselves?” (197). In contemplating what exactly constitutes the abilities or processes that combine to enable capacity, Hawkins points toward the ambiguity surrounding this fundamental human attribute—an ambiguity thoroughly explored in the research on self-deception.

Self-Deception in Philosophy

To give a sense of the disparate ways of thinking about the subject, the entry in the *Stanford Encyclopedia of Philosophy* starts off as follows: “virtually every aspect of self-deception, including its definition and paradigmatic cases, is a matter of controversy among philosophers” (Deweese-Boyd 2021). Eric Funkhouser believes that self-deception is such a lightning rod within philosophy because it threatens the enterprise itself as it represents “a failure of both reflection and rationality” (1). In other words, how can we say anything remotely accurate about the world and our purpose in it if we do not have a clear sense of ourselves? Broadly speaking, the approaches to self-deception fall into two camps: the intentionalists and non-intentionalists. The intentionalists have to grapple with the paradox of how a person can make themselves believe something they know not to be true, while the non-intentionalists dwell on how a person falls under the influence of falsely held beliefs. Both of these approaches bear some relevance to DMC and to mental illness. It may seem that the prime example for the intentionalists would be a case of malingering or factitious disorder and that one of somatoform or conversion disorder would be the equivalent for the non-intentionalists, but many cases resist any easy classification. As Funkhouser points out, the complexity of considering self-deception in the context of mental illness quickly compounds: “in addition to the mental disorder itself manifesting self-deception (e.g., someone is diagnosed with anorexia nervosa, in part, because they have self-deceived beliefs about their body weight or shape), many others self-deceive so as to deny that they have any disorder at all” (65). Mental illness can thus deceive the mind twice—once in its distortion of perception and once in its concealment of itself from the suffering person—and warrants an original framework to attempt to untangle this doubling of deception.

A more helpful approach than one based on the presence or absence of intention would be one that accounts for the role narrative plays in fashioning the self-deceived person. David Polonoff offers such an approach in his analysis into the origins of the phenomenon. He portrays self-deception as emerging out of the mismatch between the story one tells about one's life and the actual lived experience, a mismatch akin to the influential distinction made by a group of literary theorists known as the Russian formalists who theorized a difference between *fabula* ("the raw material of the story") and *syuzhet* ("the way a story is organized"). For Polonoff, this crucial insight belies any claim that narrative could make to objectivity. The nature of how narrative imposes its order on reality—giving a beginning and ending to a sequence that has neither, relating some events in lieu of others, endowing significance here and not there—ensures that it always shares a degree of complicity in the deceptive act. Yet this is not to say that any one narrative is just as true or false as any other. Polonoff maintains that one's self-narrative is subject to the criteria of internal and external coherence. The story needs to unfold in some logical progression and bear some resemblance to the perspectives of others in order to be believable. The issue of how well the story of ourselves fits with whom we feel ourselves to be implies that self-narration is not a static but a dynamic process, as though we were constantly trying on a different set of clothes to try to match our outer presentation with our inner selves. The problem then arises of competing stories, which leaves Polonoff to conclude that "we can never know anything but a version of ourselves" (47). The task of assembling a coherent identity out of a mishmash of conflicting stories is inevitably fraught and prone to oversight, exaggeration, and outright fallacy. When one's understanding of oneself does teeter over the edge into unbelievability, then philosophers tend to concur that something more than self-deception is at work. Tamar Gendler, for instance, employs an example in the clinical context to

draw the line between deception and delusion: the illness-denier who believes they have no illness when a cure does not exist corresponds to the former and the illness-denier who rejects the need for a cure that does exist to the latter (Gendler 2007). This interrogation by philosophers into the structure of narrative and its multiple susceptibilities to misrepresentation thus provides a plausible, albeit theoretical, model for the existence of self-deception and its possible contours within identity formation.

Self-Deception in Social Psychology

Social psychologists have found ample empirical evidence to lend support to these theories put forward by philosophers. Unlike the philosophers who disagree how to even define the term, there is a relative consensus among social psychologists on what constitutes self-deception and how it functions. Emily Balcetis describes it as “ignoring, rationalizing, or manipulating some thought or behavior to create consistency between that thought or behavior and one’s sense of self” (362). Self-deception appears to incite less debate in social psychology because it is taken for granted. The discipline presumes its existence and considers it a routine function of the “psychological immune system” that, when operating appropriately, filters information in such a way as to effect a positive self-view, quelling any impression contrary to this view (363). Experimental studies consistently demonstrate the prevalence of deception in human thought and behavior: everything from the tendency to judge others by ego-centrally defined personality traits (e.g., the unassuming individual who praises humility in others) to the privileging of health information that reaffirms already established habits (e.g., the person who smokes who downplays its risks) (366). With self-deception a foregone conclusion, social psychologists concern themselves more with the cognitive mechanism that manages to carry out

the deceit. They use the phrase *motivated cognition* to refer to the mind's sleight of hand that performs the reversal seen in the previous experimental examples—reason does not guide the behavior or the belief but the other way around. Self-deception, then, can be understood as the final product of motivated cognition.

David Dunning breaks down motivated cognition into three distinct motives. The epistemic motive inclines people to reject chance and chaos in favor of logic and coherence, to adopt a worldview founded on pattern recognition to give “the impression that they understand the world surrounding them” (778). The affirmational motive predisposes people to believe that they have control over their environment and “are effective beings imbued with mastery over their world” (778). The social motive, the last of the three, influences people to hold their status and social standing in high regard, leading them to embellish the extent to which “they are loved and appreciated by those around them” (778). These motives exert pressure at each step, all the way from perception, to attention, to cognitive processing, and finally to memory formation and retrieval. Because these facets of human psychology remain vulnerable to bias and because of the irrefutable impact this has on what may seem to be even the most unique attributes of personality, it is thus necessary to consider the implications of self-deception on DMC. What a capacity interview involves, after all, is attending, encoding, and integrating information, and, as the social psychologists have demonstrated, self-deception leaves none of these processes untouched.

Even with all the complex philosophical models and the vast amount of psychological experiments conducted, perhaps the most surprising thing about self-deception is simply that it works. It pulls off this miraculous feat, the seemingly impossible task of convincing someone of something even in the face of evidence to the contrary. And despite the negative connotations

contained within the world *deception*, it may not necessarily be all that bad. In his book that shares its title with the one by Aviv, Timothy Wilson asks how it is that we have such poor insight into ourselves, eventually arguing that a significant portion of personality resides outside the realm of consciousness (Wilson 2002). Wilson refers to this realm as the adaptive unconscious precisely because it errs in the direction of survival. Self-deception has indeed been shown to convey survival benefit. Multiple studies have indicated that patients with overly optimistic understandings of their prognosis have better outcomes—another point in favor of viewing self-deception not as an aberration but as a natural part of human psychology (Balcetis 2008). From an evolutionary standpoint, self-deception more than makes up for any drawbacks of misinterpretation by bestowing the most crucial of advantages, thereby ensuring the perpetuation of it within the species.

Self-deception thus supplies an explanation of why people with a mental illness may have no awareness of their condition, even if it would be in their interest to have this insight in the long run. If the human brain is hardwired to believe, esteem, and decode whatever sensory input crosses its path, then when that input becomes garbled, the person is left to experience the misperceptions as though they were actually there. From its milder manifestations that merely tinge thinking with a given mood to its more spectacular forms involving swirling scenes of delusions and hallucinations, mental illness unveils self-deception as the Svengali of the psyche. The tragic irony of mental illness is that those who suffer from it will often go to extremes to uphold their version of the world as incontestable—no matter how horrific their visions—rather than accept it as a symptom of disease. Self-deception continues on undaunted in the face of the phantasmagoria of psychosis. More so than the most cogent philosophical argument or the most well-designed psychological experiment, the all-too-common case of a patient without insight

provides the most compelling evidence for the sheer power that self-deception wields over the conscious mind, a power that everyone is subject to it whether their mental health is intact or not. The question then arises with respect to the assessment of mentation: should lack of insight account for such a significant factor in the determination of capacity when it is merely a byproduct of the standard psychological apparatus? This question necessitates turning to literature to help answer.

“The Beast in the Jungle”

Literature provides particularly fertile ground for pondering self-deception not only because some of the quintessential characters in the western tradition embody its principles (Hamlet and Don Quixote to name the most recognizable) but also because fiction deals in artifice. The magic of a story well told is that, while it has its fabricated trappings, it can bring forth an authenticity to which the day-to-day convention of life has no access. In his recent book *Seduced by Story* (2022), the literary critic Peter Brooks bemoans the ubiquity of stories that circulate within modern culture and the corruption this exacts on the concept of a story, naming everything from a company’s story printed on a package of cookies to the national myths that infuse state propaganda. While Brooks insists that society’s addiction to stories inevitably leads to mass deception, he still holds out hope that a literary narrative has the potential to disabuse. He writes, “we need fictional representations of persons in order to understand the most elusive and consequential issues of our limited human existence” (96). One of the writers who is most adept, in Brook’s estimation, at prevailing upon the reader to look beyond the ordinary confines of their vantage point is Henry James. The plot of a story by James often takes a backseat to—or is at least held in equal relation to—the narration itself. In describing his aesthetic ideal for a

narrator of one of his stories, James aims to render not “my own impersonal account of the affair in hand” but “my account of somebody’s impression of it” (James 1909). James conceives of his narrator at multiple removes from the events themselves, and the partial third-person perspective in his stories can be said, in some sense, to dramatize the act of storytelling.

In no story of his does the focus fall more on the story’s telling than “The Beast in the Jungle” (1903). Reading this long short story that is sometimes considered a novella feels like having to cut through thick branches of vegetation to try to catch a glimpse of what is actually happening: the incessant conditional clauses, the frequent use of passive voice, and the overall elusiveness of the language obscures more than elucidates. The plot, keeping in mind the caveat that it is only part of the story, begins with a chance encounter between two people among a gathering in a manor house in the English countryside. Yet this meeting between John Marcher and May Bartram turns out not to be their first. They had gotten to know each other ten years earlier in Italy, and the extent to which they had known each other remarkably escapes John until May says, “Has it ever happened?” (554). The question, centered on its unclear antecedent, serves as an early turning point in the story for it signifies that John took May more into his confidence than anyone else he has known in his life. The *it*, to which May refers, is the secret by which John lives his life. He believes himself to be destined for some great tragedy that could befall him at any moment. May recounts her memory of his confession:

“You said you had had from your earliest time, as the deepest thing within you, the sense of being kept for something rare and strange, possibly prodigious and terrible, that was sooner or later to happen to you, that you had in your bones the foreboding and the conviction of, and that would perhaps overwhelm you.” (556)

To which John then expounds on his continued anticipation of the coming event:

“Well, say to wait for—to have to meet, to face, to see suddenly break out in my life; possibly destroying all further consciousness, possibly annihilating me; possibly, on the other hand, only altering everything, striking at the root of all my world and leaving me to the consequences, however they shape themselves.” (556)

The exchange of dialogue gives a sense of the story as a whole. Both May and John speak around the issue, continually revising or modifying what was just spoken, with the ultimate effect that, at the end of the utterance, no declarative statement seems to have been made at all. The accretion of qualifications only adds to the mystery of what John’s premonition could portend, and it only coalesces into the eponymous image through the illusory association of metaphor: “something or other lay in wait for him, amid the twists and turns of the months and years, like a crouching Beast in the Jungle” (561-2). So John and May settle in, resolute to wait it out together, as time passes them by.

The character of John Marcher has been interpreted as a paradigmatic case study of both narcissistic personality disorder and delusional disorder (Hunt 1995, Abse 1976). Yet to label this fictional character with a diagnosis—or for our purposes, to determine whether or not he has impaired capacity—seems beside the point. John is inarguably self-involved with giving his life a self-aggrandizing fulcrum, but to assess whether he fulfills some set of criteria flattens the complexity of this richly drawn portrait. For all that sets him apart as an exemplary instance, James never precludes the possibility that the line of thinking that consumes his protagonist—the belief that something sensational awaits—is not peculiar to him:

He hadn’t disturbed people with the queerness of their having to know a haunted man, though he had had moments of rather special temptation on hearing them say they were

forsooth “unsettled.” If they were as unsettled as he was—he who had never been settled for an hour in his life—they would know what it meant. (561)

His very insistence on his unusual nature makes John utterly ordinary. As evident in the motivations that drive cognition, the impulse to stand out from the crowd is one of self-deception’s most familiar ploys.

James’s story is less a morality tale about the dangers of the lack of self-knowledge than a model for how self-deception makes self-knowledge unattainable. John describes his social identity in all its different contexts—as a holder of a government office, as a homeowner, even as a guest at a party—as “a long act of dissimulation,” to which the narration then adds: “what it had come to was that he wore a mask painted with the social simper, out of the eye-holes of which there looked eyes of an expression not in the least matching the other features” (564). To help unpack this line, the concept of double-voiced discourse proposed by the literary theorist Mikhail Bakhtin proves useful (Bakhtin 1934-5). The term distinguishes two different meanings within the same passage depending on whether they are attributed to the character or to the author. In the mouth of John, the statement testifies to his feeling that his societal obligations disguise his true purpose in life. Yet as voiced by James, the quotation becomes something more profound, a commentary explicating the story’s larger thematic content: that when the outer layers of a character are peeled back, it may reveal a hollow core. Personality may be nothing more than a procession of personas. Even when John most fervently upholds his *raison d’être* and asserts his agency over his circumstances, the language undermines him. He asks May if she has grown tired of waiting for the event to happen, but she deflects the question back to him, prompting his response:

“For the thing to happen that never does happen? For the Beast to jump out? No, I’m just where I was about it. It isn’t a matter as to which I can *choose*, I can decide for a change. It isn’t one as to which there *can* be a change. It’s in the lap of the gods. One’s in the hands of one’s law—there one is. As to the form the law will take, the way it will operate, that’s its own affair.” (566)

The equivocation here—magnified by the passage being particularly difficult to parse, even by Jamesian standards—is impressive to behold. He appears to start off defending his volitional capacity by negation (the Beast exceeds his ability to contain it) but then pivots to the perhaps inadvertent admission that humans live by the laws of their own creation, only to backpedal and deny any role he may have played in dreaming up the Beast. Yet this most oblique of disclosures is what rings most true about him: John needs the Beast. The precondition of self-deception requires the invention of a story to explain his behavior in not marrying May.

Unlike conventional narrative structures that inexorably progress towards matrimony (i.e., the marriage plot), the narrative tension in this story emanates from the resistance to the unfolding of any romantic storyline. This is why the story proved such an eloquent example for the literary critic Eve Sedgwick who interpreted it outside a heteronormative framework to suggest “the Beast” as a stand-in for a closeted questioning of a presumed heterosexuality. Yet regardless of whatever sexual orientation John is imagined as having, the overtures to love between the characters in the beginning never play out. In the climactic scene that occurs many decades from when the story opened, May, in no uncertain terms, throws herself at John:

“It’s never too late.” She had, with her gliding step, diminished the distance between them, and she stood nearer to him, close to him, a minute, as if still charged with the

unspoken. Her movement might have been for some finer emphasis of what she was at once hesitating and deciding to say. (581)

Compare the direct, unambiguous line of dialogue from May to how her action is rendered by John's consciousness. The conditional tense of "might have been," the abstraction into meaninglessness of "some finer emphasis," the contradiction in his description of her simultaneously hesitating and deciding to say something (especially given that she *just* had finished saying something), all temper and muddy the perception of the painfully obvious scene before John. This discrepancy between the dialogue and the narration highlights the attention to detail that James pays to language, and in the process, captures in writing the mechanism of self-deception well before the emergence of the philosophical and psychological explanations that comprise the contemporary understanding of the subject. With her health now failing, May tries to name this then unidentified nescience that held such sway over their lives, calling it "the strangeness in the strangeness" and "the wonder *of* the wonder." There is wisdom in these words as they still seem to convey something essential about human character: as much as it can now be explained away, self-deception preserves the shroud of mystery surrounding it, leaving us with the uneasy realization that we will always be, to some degree, self-estranged.

The denouement could be considered the most unrealistic part of the story as it portrays the breakdown of self-deception and the consequences that this inflicts. After May's death, John visits her grave and becomes lost in thought, reflecting on his relationship with his friend through the years. He then spots another visitor at a nearby grave, freshly dug, who is overcome with emotion, uncontrollably grieving, provoking John to question his own comparative complacency. He concludes nothing less than that "he had seen *outside* of his life, not learned it within," and he

can only stand there aghast at “the sounded void of his life” as the final lines of the story roll like credits over this still life of sorrow and regret that then dissolves into John’s last act:

This horror of waking—*this* was knowledge, knowledge under the breath of which the very tears in his eyes seemed to freeze. Through them, none the less, he tried to fix it and hold it; he kept it there before him so that he might feel the pain. That at least, belated and bitter, had something of the taste of life. But the bitterness suddenly sickened him, and it was as if, horribly, he saw, in the truth, in the cruelty of his image, what had been appointed and done. He saw the Jungle of his life and saw the lurking Beast; then, while he looked, perceived it, as by a stir of the air, rise, huge and hideous, for the leap that was to settle him. His eyes darkened—it was close; and, instinctively turning, in his hallucination, to avoid it, he flung himself, face down, on the tomb. (597)

The symbolic self-immolation of John casting himself onto the tomb seems the only recourse available to him when having to reckon with the awfulness of his epiphany. While James certainly heightens the stakes of what his character must endure to acquire insight in order to enhance the dramatic effect, the warning to the reader is starkly matter of fact. At some point, in the waning years of your life, you will have to stand in the position that John did, James seems to be saying to his reader, and face the Beast—the terrifying prospect that you did not live as you have ought. In whatever specific shape the Beast takes for a given person—not loving as deeply as one could have, not being as present as one may have been, not living as intensely or as genuinely as one had the chance to—the confrontation appears inevitable. Yet this is the moment when, in reality but not in fiction, self-deception takes the stage, directing the self out of harm’s way, turning temporary doubt into justification and acceptance in due time, so one can go on with the remainder of one’s life. Only in fiction, can the horror of life without self-deception be

envisioned. If the story of John Marcher serves to stir its readers into not living the unexamined life, then it only does so by depicting how unbearable life would be if we were not at least partially self-deceived.

To return to the question posed at the outset of the analysis of the story by Henry James: should the lack of insight account for such a significant factor in DMC? As prescient a writer as James was—in his representation of self-deception *avant la lettre*—it would be, at best, unscientific to recommend any practical changes to present-day capacity assessments. The conflation of historical contexts and of distinct literary and legal paradigms would be unfounded. Yet this perceptive piece of fiction underscores the disastrous consequences that can ensue from not accounting for self-deception, even though there is no escaping it. From a child with an eating disorder, to a person in the precontemplative stage of a substance use disorder, to the individual beset by the unreality of hallucinations, in each of these instances the mind gives the perceived content a valence of validity. As terrible as it can be to live with a serious mental illness, it may be more terrifying to not take what the brain presents as a faithful depiction. Discounting the ineluctable modalities of the sensorium—that is, resisting the world as it is laid out before us—may be some fundamental violation of the human psyche that we lack the capacity to carry out. Self-deception, in the final analysis, exposes the lie of the presupposition on which capacity establishes itself: that we, without a doubt, know ourselves. The lesson of self-deception is that even at so-called full capacity, we may not always know what we truly believe or want. It then stands to reason, that what DMC should aim to assess is less insight itself—as insight is always lacking in some degree—than the ability to make logical choices based on whatever given state of impairment insight may be in. Abiding by self-deception rather than willfully disregarding it would encourage capacity assessments to evaluate a decision based on

its adherence not to some core values or some presumed essence—which in the end, turn out to be fictions that readily dissipate—but to a person’s most aspirational story of themselves.

Refining our understanding of how we expect a capacitated mind to function with the hard-won insights of philosophy, psychology, and literature can only deepen our appreciation of both the knowable and unknowable sides of ourselves that allow for genuine decision-making to occur.

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