



## Fragmented Experience in Bulimia Nervosa

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Chapter 1 made the case, preliminarily, that it was possible to describe moments of truth, bits of pristine experience. We discussed what we called a Catch-484: You can't really understand moments without first understanding experience and genuinely submitting to the constraints that the apprehension of experience imposes; you can't genuinely submit to the constraints without first understanding moments and experience; and you can't really understand experience without first understanding moments and genuinely submitting to the constraints.

We said that the way out of a Catch-484 is to start anywhere: Start, say, with a little discussion of moments, so that then we can have a little discussion of experience, so that then we can have a little discussion of the constraints, so that then we can have a deeper discussion of moments, so that we can have a deeper discussion of experience, and so on. It is a screwy (meant literally) approach; each turn of the screw takes us a little deeper, a little more securely, into exactly the same moments ↔ experience ↔ genuinely-submitting-to-the-constraints place that we started from.

The present chapter will focus primarily on experience. However, moments, experience, and the constraints co-determine each other, so every discussion of experience is also a discussion of moments and the constraints – we can never talk about one while completely ignoring the other two. The illustration at the top of this chapter is intended to convey this: Chapter 2 will focus primarily on experience but will always keep moments and the constraints in mind.

### APPREHENDING EXPERIENCE

If we tentatively accept that moments of truth are apprehendable, we are still left with the question of whether such moments of truth have any value. Perhaps moments of truth are inconsequentialities, mere faithfully apprehended minutiae, too small to be useful in any way. Or perhaps they are

of interest to the person whose moments they are but useless to others. Or perhaps these moments are of interest to the person and to the person's acquaintances but useless to science.

This is another Catch-22: There's no sense bothering to apprehend moments of truth unless you can be assured that it's worth the trouble, but it's impossible to discover whether it's worth the trouble until you have apprehended them. This Catch-22 is therefore overlaid on the Catch-22<sup>2</sup> of Chapter 1, making it a Catch-22<sup>3</sup>, or Catch-10648. As before, the way out of these catches is to turn the screw gradually: We went some ways into the possibility of apprehending moments of truth in Chapter 1; now we'll go a bit into the value of doing this; and in subsequent chapters we will return to both.

Over the course of my studies of inner experience, I have observed that usually, if I stay with a person's microscopic moments of truth long enough, I discover there are strong regularities/patterns/salient characteristics in the person's experience, and that pausing to observe those regularities can offer deep, sometimes startlingly new and seemingly useful insights into a person. If I observe a group of individuals who share a common characteristic, I discover that there are strong regularities/patterns/salient characteristics *across* people. I don't expect you to believe that without evidence; this chapter provides the beginning of that evidence, provides an example of the potential within-person and across-person insights achievable by examining moments of truth.

Stephanie Doucette, Sharon Jones-Forrester, and I have explored the pristine inner experience of twenty-four women with bulimia nervosa using a method that carefully examined moments of experience and that genuinely submitted, I think, to the constraints that the attempt to apprehend experience imposes. Let's have a look at a few moments of truth of one of those women, whom we will call "Jessica" (Jones-Forrester, 2009). The question we mean to discuss is whether we learn something worthwhile about bulimia by apprehending Jessica's pristine experience or that of other individuals with a similar affliction.

#### JESSICA'S EXPERIENCE

Jessica was a twenty-two-year-old university student with a long history of binge eating, purging, laxative misuse, and excessive concern about her weight, shape, and appearance. Traditionally evaluated, she was at the eighty-ninth percentile on the bulimia sub-scale of the Eating Disorder Inventory-3 (Garner, 2004), the state-of-the-art eating-disorder measure, indicating that she reported bulimic behaviors that were severe even when compared to those in treatment for bulimia nervosa. She volunteered for the bulimia study after hearing it described in one of her university classes. We gave her the same kind of beeper and the same instructions we gave Stephanie in Chapter 1 (for

more details, see Chapter 3 and beyond); Jessica wore the beeper on five sampling days. As is usual, we interviewed her about her experiences on either the day she wore the beeper or the next day. A total of seventeen samples were discussed extensively.

Here are a few examples of Jessica's experience, as discovered through beeps and interviews at least as thorough as the one we conducted with Stephanie in Chapter 1.

Sample 2.4 [second sampling day, fourth sample]. Jessica was in class and was directly experiencing about ten simultaneous, chaotic unworded thought/feelings. These experiences were in her head, were all jumbled together so that none was clearly differentiable or separable. Jessica knew them to be related to the day's activities: her paper is due, about the final exam, wanting her teacher to shut up, wanting the class to be over, realizing that she was going to be late to her sampling appointment, wanting to leave the class. These experiences were neither thoughts nor feelings, or perhaps were both thoughts and feelings, or were somewhere between thoughts and feelings, and were apprehended as simultaneous experiences; that is, it was *not* one thought with ten aspects or ten thoughts quickly in a row. All of these thought/feelings were apprehended to be in her head except the wanting to leave the class, which involved an undifferentiated bodily urge to get up and go as well as a cognitive wanting to leave.

Simultaneously, Jessica was feeling a complex nervousness/worry/anxiety that was also undifferentiated but contained all three aspects (nervousness, worry, and anxiety); this feeling included a bodily sensation of her stomach's turning upside down. She also was seeing her teacher in the front of the room.

**Q:** Stomachs don't turn upside down, so we have no idea what it would feel like if they did. Isn't this another example of what Pascal did when she said she felt like a dog run over? Yet you don't seem to have a problem with it here.

**A:** I accept that all description contains some ambiguity, but the degree thereof can differ dramatically. I think the stomach-flipping description unpacks quite unambiguously into: "Jessica felt a sensation in the midsection of her body, in the region she takes to be occupied by her stomach, that was a twisting or flip-flopping sensation." There is little question about *what* is experienced (a bodily sensation); there is little question about *where* that sensation is (*here* in my midsection); there is little question about *how* that sensation feels (flip-flopping).

By contrast, Pascal's <<description>> provides no details whatsoever about *any* such major aspects of experience: Is Pascal talking about *physical pain* or the *psychological pain* of abandonment (left by the side of the road)? Is she talking about the risk of being run over *again*? We don't know. These are

not details; they are entirely separate ontological realms that have not been specified.

There are ambiguities of our description of Jennifer: one or many flips? Left to right or front to back? And so on. But those are indeed details that, if they were judged to be important, could be elaborated. (In Chapter 10 we will return to a discussion of how to perform this elaboration.)

Sample 3.2. Jessica was watching the TV show *Scrubs*, a scene in which a skinny blond female doctor walked into a room and all of the male doctors froze and stared at her. As she watched, Jessica was innerly speaking words in two distinctly separate parts of her head. In the front of her head, she was innerly saying, in her own normal speaking voice, the words “blond,” “skinny,” “guys,” and “stare.” These words were clearly apprehended as if spoken aloud except there was no external sound. At the same time, in the back part of her head, she was also saying, in another inner voice, “Why is it that movies and TV shows always have,” “girls for,” “to,” and “at.” These words were also apprehended as being said in her own inner voice, but this voice was quieter. At the moment of the beep, these two voice streams were not temporally coordinated or synchronized; that is, both the front/louder and the back/softer voices were simultaneously speaking jumbles of words like pieces of a puzzle. If one were to combine the puzzle pieces from both streams and arrange them in order, one would get, “Why is it that movies and TV shows always have blond skinny girls for guys to stare at?” but at the moment of the beep Jessica did *not* experience that coherent sentence – that meaning was fragmented across the two simultaneous voice jumbles.

Simultaneously, Jessica was recalling perhaps eight or ten separate scenes from movies or TV shows in which skinny blond girls were featured, a jumble of incompletely articulated thoughts that somehow existed in a pile or heap outside and behind her head. There were no words, visual images, or other symbols in these recallings.

**Q:** What the heck do you mean by two separate voices? By distinctly separate parts of her head? How can Jessica make such distinctions? Sounds like bullshit to me. Also, what do you mean “in a lower voice” when no one is actually hearing anything?

**A:** In this chapter I am asking you to bungee jump with me into some pretty complex experiences, and I recognize that the leap might have been less frightening if I had placed this chapter at the end of the book. But if I don't give you, early on, a glimpse of some pretty remarkable experiences, you will have little reason to do the work necessary to *get* to the end of the book. That is, of course, one of the Catch-22s of this book. I assure you that Jessica's sample 3.2 is as straightforward a description of Jessica's experience as we can manage, and that we will discuss reasons to believe that description throughout the book.

For now I'm asking you to accept *the possibility* that, at the moment of the beep, Jessica experienced herself as speaking in two separate but simultaneous voices, each with different vocal characteristics and locations, and each conveying only part of a meaning. If that sounds highly implausible to you, then I note that one of the constraints that the exploration of experience imposes is that you not judge others by yourself. We will, as the screw turns, repeatedly discuss those constraints; don't judge others by yourself will be a consideration of Chapter 9.

Sample 5.2. Jessica was looking at her digital camera display, seeing a photo of her and her boyfriend taken on a recent trip to Chicago. While seeing this photo, she was also innerly seeing at least five separate, simultaneous, overlapping visual scenes of places she had visited in Chicago. These inner seeings were fuzzy or indistinct, and were apprehended as if looking at snapshots – the scenes had edges, for example.

Simultaneously, she was innerly seeing herself and her boyfriend standing close together at the kitchen sink. In this seeing, which was somewhat clearer than the Chicago scenes, Jessica was on the left, the boyfriend on the right, and both were seen from the back. This was a re-creation of an event that had actually taken place, but viewed from behind her, an obviously impossible perspective for her to have taken in reality.

Simultaneous she was feeling happy, apprehended as a volleyball-sized sensation deep in her stomach but also all over her stomach.

Certainly there is a pattern in these samples: All include a strikingly fragmented multiplicity of experience that is impossible to overlook. Such multiplicity was evident in twelve of her seventeen samples (70 percent). The multiplicity cut across aspects of her experience: multiple thought/feelings in sample 2.4, multiple inner speakings and non-symbolic recallings in sample 3.2, and multiple inner seeings in sample 5.2.

The question we are asking in this chapter is whether it is worth the trouble to try to get to moments of truth, and a first step in answering that question is to try to discover whether we learn something about Jessica by examining her experience. It seems that we *have* learned something about Jessica: that she has fragmentedly multiple inner experiences. That is a salient characteristic of Jessica as a particular individual; that is, fragmented multiplicity is an idiographic (Hurlburt & Heavey, 2006) characteristic of Jessica. Regardless of the characteristics of other individuals, whether others do or do not have this characteristic, Jessica has frequent fragmentedly multiple inner experiences.

**Q:** I don't think anyone has experience – Jessica's "descriptions of experience" are merely fabrications designed to please the interviewer or to serve some other unstated goal. Experience doesn't exist for anyone, including Jessica.

**A:** Such thoroughgoing skepticism is impossible to refute, I think. Yet it is also hard to maintain in the face of so many compelling reports – of images, dreams, inner speech – from so many people. I personally am entirely agnostic on this point: I don't at the outset presume that people have experiences or that they don't. I try to structure occasions where they can describe experiences if they exist, and, equally, where they can report that no experiences exist. You can judge for yourself whether that is adequate.

I will not try to talk you out of your skepticism, but I urge you to try to bracket it – cultivate your own personal agnosticism about it – so that you can see for yourself whether that is a productive point of view. Keep in mind that we are still very early in our discussion of the apprehension of experience.

#### IS JESSICA UNUSUAL?

A second step in determining whether it is worth the trouble to try to get to moments of truth is to try to discover whether Jessica's experience is similar to or different from that of other individuals. Let's recall our glimpse of Stephanie's experience from Chapter 1: Stephanie had basically one thing ongoing: a felt pressure to say something politically correct about Las Vegas, a process of reviewing and rejecting things she could say about it. Stephanie's experience in that sample was *far less* complex than Jessica's experience. Stephanie's Las Vegas sample was rather typical of her other samples – none was remotely as complex as any of Jessica's examples here. So it seems, preliminarily, that there are substantial differences between people in their inner experiences.

Chris Heavey and I (Heavey & Hurlburt, 2008) used this sampling procedure with a stratified random sample of thirty college students in the same large urban university that both Jessica and Stephanie attended. We found the median frequency of multiple experience to be zero, with the highest frequency of multiple experience 30 percent. Jessica's 70 percent is therefore very extreme by these standards; Stephanie's 0 percent was typical.

**Q:** I don't think Jessica's *experience* is that different from Stephanie's experience. It's just that Jessica has a strange, idiosyncratic way of *describing* her experience. For whatever reason, she gives reports that sound like fragmented multiple experience, but that doesn't mean that her experience is really fragmented multiple.

**A:** That is a reasonable concern at this point. I think her reports reflect her experience, but I don't wish merely to assert this as an established fact. For now, I ask only that you accept the *possibility* that they are faithful accounts of her experience. It will require several more turns of the screw for you to decide that for yourself, one way or the other.

## JESSICA'S PARADOX

Jessica's fragmented multiplicity is striking. It jumps out at you, inescapably, unavoidably. The rough implications are astounding: Assume, as we did in Chapter 1, that experiences last a few seconds, resulting in roughly 20 experiences per minute  $\times$  60 minutes  $\times$  16 hours = 19,000 experiences per day. If roughly 70 percent of those experiences are fragmentedly multiple, that's 13,000 multiple experiences per day. To be conservative, cut that estimate in half: Jessica has perhaps 6,000 fragmentedly multiple experiences per day, or 2,000,000 per year.

And yet *Jessica herself, prior to sampling, didn't know that her own experience had this fragmentedly multiple characteristic, didn't know that her experience differed from others in this way.* This we will call Jessica's paradox: that her experience, on millions of concretely existing occasions, is fragmentedly multiple, and yet she does not know that her experience is frequently fragmentedly multiple.

Here are six potential explanations of Jessica's paradox. First, *no comparison*: Fragmented multiplicity emerges starkly as a salient phenomenon for *us* because *we* have something to compare it to (you have your own experience and Stephanie's; I have my own, Stephanie's, and the hundreds of other people's with whom I've sampled). *Jessica has nothing to compare her experience to.* Everywhere she looks, experience is always the same (always hers).

Second, *no interest*: Jessica has never really been interested in her experience per se. People are generally more interested in the *about what* of their experience than the *how* of their experience. Were it not for the beep and her participation in our study, at the time of her sample 2.4, Jessica would have been interested in her upcoming exam, in wanting her teacher to shut up; she would have no natural interest in the fact that these interests presented themselves simultaneously as part of a complex experience.

Third, *presumed similarity*: In the (unlikely) event that she would focus on the fragmentedly multiple way her experience presented itself, she would naturally assume that everyone (obviously!) has fragmentedly multiple experience. She's not unusual in this regard: Most people (including most consciousness scientists) assume that everyone's experience is just like their own.

Fourth, *no attention*: Jessica has never really paid attention to moments, never really paid attention to experience, never really paid attention to the careful apprehension of moments of experience. Chapter 1 showed that all three are necessities for the faithful apprehension of experience.

Fifth, *multiplicity hides multiplicity*: Those first four explanations pertain to all kinds of characteristics of inner experience. The fifth and sixth are focused particularly on Jessica's particular kind of inner experience: The existence of multiplicity of experience makes it harder to notice multiplicity of experience.

If you have one single, stable point of view (as did Stephanie in Chapter 1), then it is easy to notice the characteristics of experience – that would be simplicity aimed at simplicity, relatively easy to accomplish. However, if you characteristically have lots of things going on, then it may be more difficult to notice that lots is going on – that would be complexity aimed at complexity, a difficult feat.

Sixth, *focus destroys multiplicity*: Even if Jessica were to wonder whether she had multiple experience, the specific, premeditated, and therefore focused intention to examine her experience may cause that multiplicity to disappear for the duration of the self-examination (the risk of armchair introspection; see Hurlburt & Schwitzgebel, 2011b).

However, I say again, I am not trying to convince you; for now all I wish is that we make this remarkable observation: In response to beeps, Jessica provided, over and over, compelling accounts of fragmentedly multiple experience that differed, apparently, from her own understanding of her own experience.

By the way, once Jessica saw for herself fragmentedly multiple experiences at moment after moment of her own experience, it became easy for her to observe that multiplicity frequently as it naturally happened in herself and to recognize how that multiplicity seems to have impacted her life.

#### FRAGMENTED MULTIPLICITY OF EXPERIENCE IN BULIMIA

Stephanie Doucette and I (Doucette, 1992; Hurlburt, 1993b; Doucette and Hurlburt, 1993a, 1993b) and Sharon Jones-Forrester and I (Jones-Forrester, 2006, 2009) have used this same beep-interview procedure to examine the moments of inner experience of twenty-four women with bulimia. *Every one of these women had frequent fragmented multiplicity of experience.* The largest and most recent of these studies is Jones-Forrester's dissertation (Jones-Forrester, 2009), in which we sampled the inner experience of thirteen bulimic women. The frequency of multiply fragmented inner experience ranged from 44 percent to 92 percent. Recall that Heavey and Hurlburt's (2008) normative sample (a stratified random sample of fifteen men and fifteen women from the same basic general population) found the median frequency of multiple experience to be 0 percent and the *highest* frequency to be 30 percent. The lowest multiplicity frequency in our bulimic sample is half-again as high as the *highest* frequency in the normative sample. That's a huge difference.

This difference in the frequency of multiplicity cannot be explained away by differing definitions of "multiple" between investigators in the two studies: I myself was intimately involved in the samplings in both studies. I attest that the bulimic women have *far* more multiplicity of experience than do non-bulimic subject individuals.

Compared to our sample of bulimic women, Jessica is not at all unusual. Her 70 percent is right in the middle of the 44 percent to 92 percent range. We selected Jessica to be the example in this chapter because the features of her fragmented multiplicity are pretty typical of the bulimic women that we have studied.

*None of these women, prior to sampling, knew that her own experience was fragmentedly multiple; none knew that her own experience was similar to other bulimic women but different from non-bulimic women in this way.* That is to say, Jessica's paradox applies to every woman in our sample. One cannot, therefore, dismiss our characterization of Jessica's experience as being merely the result of Jessica's strange, idiosyncratic way of describing her experience.

**Q:** OK. So it's not Jessica who has a strange way of talking. It's *you* who has a strange way of listening. You are the common denominator in all these observations; you have some delusional fantasy that leads you to project multiplicity into bulimic women's experience. You saw multiplicity in 1980s in your case study (Hurlburt, 1993b), and then again in 1992 in your study with Doucette, and ever since you have been infecting your own observations.

**A:** That is a criticism that I take very seriously. I think it's incorrect, but I accept that all delusional people think their critics are incorrect. I would be delighted if some investigators unrelated to me would carefully explore the inner experience of bulimic women and either corroborate or disconfirm our observations.

I have, over the course of my career, gone to great lengths to examine whether I do in fact have such delusions, whether I am effective in bracketing presuppositions (I generally call the delusions that you refer to "presuppositions"; Hurlburt & Heavey, 2006; Hurlburt & Schwitzgebel, 2011c). In the most prominent example, I invited noted introspection skeptic Eric Schwitzgebel to conduct jointly with me six hours of interviews with a subject we called Melanie; we've published transcripts of those interviews and Eric's critique of them (Hurlburt & Schwitzgebel, 2007); we've made audio files of those interviews available on the Web ([http://mitpress.mit.edu/inner\\_experience](http://mitpress.mit.edu/inner_experience)) for those who wished to hear the original interviews. Eric grants, after careful examination, that I am "a careful and even-handed interviewer" (Hurlburt & Schwitzgebel, 2007, p. 221). A reviewer of that book says that "Hurlburt shows an almost flawless use of a Rogerian-Husserlian interpersonal phenomenological dialogue" (Faw, 2008, p. 121).

I am not asserting that I am an excellent interviewer – perhaps I have fooled Schwitzgebel, Faw, and others, including myself. However, it does seem to me that it shouldn't *glibly* be presumed that my presuppositions are the culprit here. Replication by others is required.

By the way, like Jessica, once these women saw, for themselves and in themselves, fragmentedly multiple experiences at moment after moment, it became easy for them to observe that multiplicity in themselves and to recognize how that multiplicity seems to have impacted their lives.

It is a stark conclusion: *The existence of fragmented multiplicity of experience in bulimia is ubiquitous but essentially entirely unknown, even among people who experience it at most of their waking moments.*

### “TAILS”

In 1984 I sampled the experience of “Ashley,” a bulimic operating-room nurse; I reported this case in Hurlburt (1993b), in which I described a phenomenon that Ashley, and subsequently I, called “tails.” Since that time, we’ve observed the tails phenomenon in at least a half dozen of our bulimic women, but never in the hundreds of non-bulimic subjects with whom I have sampled.

Ashley said her experience was like an aquarium with lots of fish in it, her metaphor for describing multiplicity of awareness. Metaphors are dangerous – their brilliance may lull you into falsely believing that you understand what is meant (recall Pascal’s run-over dog). Genuinely submitting to the constraints that the endeavor to provide a faithful description of experience imposes requires careful questioning to delimit the metaphoricity of a description. Such questioning revealed that Ashley meant to convey that her several or many simultaneous experiences were not coordinated – each fish appeared when it wanted to appear, stayed as long as it wanted, traveled at its own speed, and disappeared when it wanted to disappear, apparently independent of the other fish in the aquarium. In that regard, Ashley is very similar to Jessica and the other bulimic women we have studied.

Ashley extended her metaphor, saying that some of the fish in her aquarium were “under the rocks,” mostly disappeared but with their tails sticking out. By this, Ashley meant that when she stopped thinking about *X* to think about *Y*, she didn’t *completely* stop thinking about *X*; *X* simply “parked under a rock” while she thought about *Y*. The “tail” of *X* continued to be a directly experienced reminder that *X* was there, waiting to be thought. Then, if she was attracted to think about *Z*, she parked *Y* and now had *three* things simultaneously in awareness: *Z*, the tail of *Y*, and the tail of *X*. And it didn’t stop at three; she frequently reported having about five fish and ten or more tails all simultaneously in awareness.

When most people turn their attention from *X* to *Y*, *X* vanishes completely from their direct experience. *X* may continue to be important, and perhaps to be processed, but that takes place *outside* of direct experience while attending to *Y*. Ashley’s description was different; she continued to experience a bit of *X*, an explicit-in-awareness I-should-get-back-to-thinking-about-*X*. In 1984 I found that hard to believe, figured she was just using florid language to describe the everyday fact that sometimes she returns to thoughts. However, six years later, Stephanie Doucette and I sampled with a few more bulimic women (Doucette, 1992; Doucette & Hurlburt, 1993a, b). One of these women said that she had, in her awareness, “strings,” by which she meant that there

were thoughts that had stalled and were waiting to be restarted; being stalled didn't mean the thoughts were entirely out of her awareness; instead, there was a hint or a sign, directly in her awareness, that the thought was there, waiting. Another of these women said she had "threads." Tails, strings, threads: different metaphors, apparently the same phenomenon.

Now for the interesting part: Sometimes there were more tails than at other times, or more strings than at other times, or more threads. As the threads began to build up, her awareness became "webby," and that webbyness was nauseating; same for the tails and the strings.

And now for the even more interesting part: When the number-of-tails nausea became strong enough, Ashley induced vomiting. When the vomiting was done, the tails were gone, for a while. Why should emptying the stomach have anything to do with emptying the mind? I have no idea.

**Q:** Your descriptions make many uses of the word "simultaneous." Everyone knows that the mind can think about only one thing at a time. I think it likely that Ashley's and Jessica's mental events happened very quickly, right after the other – *badabadabing*; Ashley and Jessica mistakenly apprehend that as simultaneous.

**A:** First, "the mind can think about only one thing at a time" is the presupposition of a particular form of mental realism. By its proponents, it is accepted as "obvious," but it is not at all obvious to me. There are individual neurons, and collections of neurons, firing simultaneously all over the brain, so the notion of parallel processing is by no means absurd.

Second, I make no claim about whether the mind actually does only one thing at a time (or whether the mind exists, for that matter). This book is not about the *mind* and what happens in it; it is about *experience* and what presents itself. What presents itself, for some non-bulimic subjects and all bulimic subjects some of the time, is simultaneity. Perhaps the underlying neurological or cognitive mental processes are actually sequential, but they happen so fast that they appear simultaneous. I know nothing about that. This book is about what presents itself in experience, which is, in these samples, simultaneity.

Third, and related to the second point, I think you underestimate the importance of the iterative process (see Chapter 10). These women are not merely asked once, "Was your experience multiply simultaneous?" They are not asked whether there is multiple simultaneity at all. Instead, the conversation goes something like this: Investigator: "What was in your experience at the moment of the beep?" Subject: "I was thinking X, and at the same time I was thinking Y, and at the same time I was thinking Z. I had three simultaneous thoughts." Investigator (whose skill is to remain neutral): "Really simultaneous? Maybe it's *badabadabing*, mental events happening very quickly, right after the other." Subject: "Maybe so, I don't know." Investigator: "I don't know, either. Let's suppose that either simultaneity or quick sequentiality is possible – the question is what it's like for you. It's too late to figure that out

for this beep (we can't go back and experience this again), but not to worry – if this simultaneity or rapid sequentiality is a frequent phenomenon, we'll see it on later beeps, and maybe we can figure it out then.”

After several days of practice, subjects are, I think, just as good at differentiating simultaneity from *badabadabing* sequentiality in inner experience as they are in reality, which is to say, pretty good but not perfect. The bulimic subjects say, convincingly, that the experience is of simultaneity.

#### IS APPREHENDING EXPERIENCE IMPORTANT?

This book is not about bulimia per se. We are using our investigations of bulimia as a case study to discover whether investigating moments of experience might be fruitful for science.

#### The Hay in Every Haystack

Fragmented multiplicity is not a needle in some haystack; it is the *hay* in the haystack. In fact, it is the hay in *every one* of our bulimic haystacks. Our investigations of bulimic women find fragmented multiplicity to be an enormously salient characteristic of their inner experience. *All* our bulimic women experience fragmented multiplicity frequently – the *lowest* frequency was 44 percent (recall the *highest* frequency in Heavey and Hurlburt's (2008) non-bulimic sample was 30 percent).

#### But the Hay Has Been Overlooked

Most modern theories of bulimia nervosa believe that inner experience is an important, probably causative feature in bulimia nervosa. Typical and influential in this regard is Fairburn's cognitive behavioral model of bulimia nervosa (Fairburn, Cooper, & Shafran, 2003), which suggests that a cognitive over-emphasis on the importance of weight, shape, and eating leads to dietary restriction, compensatory behaviors, and preoccupation with weight, shape, and eating. This dietary restriction and cognitive preoccupation then trigger binge-eating behavior, which then triggers purging behavior. Intense self-criticism and negative self-evaluation appear to play an additional active role in maintaining these cyclic bulimic behaviors.

*Despite the perceived importance of inner experience, the science of bulimia nervosa is essentially unaware of the existence of fragmented multiplicity of experience in bulimia. There is no scientific recognition that bulimic women may have very high frequencies of fragmented multiplicity by comparison to non-bulimic women; no scientific exploration of whether the degree of fragmentation is related to purging.*

Our own work agrees with the bulimia literature that preoccupation with weight, shape, eating, self-criticism, and negative self-evaluation are indeed important. For example, Jessica's sample 3.2 (skinny blond girl on *Scrubs*) was about the thin ideal. However, the most striking feature of our observations of bulimic women is their complex multiplicity.

### The Hay Might Be Important

Assuming that our observations of the connection between multiplicity of experience and bulimia are correct, the source of that connection remains to be explored. We don't know whether bulimia causes multiplicity, multiplicity causes bulimia, or some unknown third factor causes both. That will require substantial additional study, probably including prospective studies of the inner experience of women at risk for bulimia but not yet bulimic.

However, there is reason to suspect that working through those connections might be of vital importance for the science of bulimia and the women it affects. First, the standard therapies for bulimia aim primarily at altering cognitions about weight and shape, thus interfering in the Fairburn sequence described earlier, but bulimia therapies are not highly effective. Our research suggests that it might be prudent to explore therapies that aim at the focusing of inner experience (the reducing of multiplicity), rather than (or along with) altering the contents of experience (reducing preoccupation with weight and shape). As far as we know, that is an unknown therapeutic strategy for bulimia. Just how such a therapy might be implemented has never been investigated, but we note that most of the women who have participated in our studies have claimed some therapeutic benefit from participation. Our studies have never attempted to be doing therapy – we have done nothing except relentlessly inquire about experience at the moment of the beep. Nonetheless, many of our subjects report that their bulimic symptoms have improved over the course of their participation. Perhaps our systematic requirement to pay attention to the details, to slow down and tell us about one (of the multiple) aspect of experience at a time, serves as some sort of calisthenic for focusing experience. Note that we are not making that as a claim, only suggesting it as a possibility. Others may have different or better suggestions for a therapeutic intervention.

### A Wild Speculation

Bulimia science rests on the assumption that preoccupation with weight and shape leads to bulimia. Our observations can be interpreted to reverse that logic: that bulimia *leads to* preoccupation with weight and shape. We do not claim that that is true; the mere existence of such a counter-intuitive explanation

of bulimia shows the potential fertility of the faithful apprehension of inner experience for science. So here is how this counter-intuitive claim goes:

Suppose that fragmented experience leads to nausea, and that the more fragmented the experience, the stronger the nausea. (Why might that be? Fragmented experience requires having several simultaneous points of view: here looking that way; there looking this way; hither understanding this way; yon understanding that way. Maybe such multiple points of view confuses the circuitry connected to the inner ear; a confused inner ear leads to nausea. [I remind the reader that the heading of this section is “wild speculation.”]) Now suppose that teenaged Bonnie learns that inducing vomiting eases her nausea, leaves her in a peaceful state that she doesn’t comprehend but sure feels good. She doesn’t need to understand the connection between multiplicity and the inner ear or between the inner ear and nausea or between a peaceful feeling and lack of fragmentation; all she needs to have discovered (perhaps by accidental observation, as in illness) is that vomiting leads to an inner peace that lasts for a while. So Bonnie starts to induce vomiting, begins acquiring the skills of inducing vomiting – how to do it, when to do it, how to hide it, who to tell and not tell about it, how to lie about it, and so on. That is, she learns the bulimic behaviors. Note that becoming bulimic is about cultivating a peaceful feeling, *not at all* about the socio-cultural thin ideal.

Now suppose Bonnie’s friend Nora, who is not bulimic, discovers that Bonnie is self-inducing vomiting and tries to figure out why. Like most people, Nora *presumes* that everyone else’s inner experience is just like her own – that is, Nora presumes that Bonnie is pretty much just like Nora herself except that Bonnie self-induces vomiting. Nora tries to imagine why she herself would self-induce vomiting and finds that the only imaginable reason is weight control – the socio-cultural thin ideal and its concomitant weight-control behaviors are pretty important issues for Nora, and self-induced vomiting seems like a solution. Therefore, Nora *presumes* that the self-induced vomiting *must be* a weight-control behavior *for Bonnie*. Nora notices, furthermore, that she herself does not self-induce vomiting; therefore the socio-cultural thin ideal must be a *stronger* issue for Bonnie than it is for Nora herself.

Because of Jessica’s paradox, *Bonnie, too, presumes that everyone else’s experience is just like her own*. Bonnie observes that she herself induces vomiting and Nora doesn’t; therefore Bonnie, too, thinks her connection to the socio-cultural thin ideal *must be* stronger than is Nora’s – Bonnie accepts that she must be preoccupied with the socio-cultural thin ideal whereas Nora must just be influenced by it.

Note that Bonnie’s interest in and her connection to the socio-cultural thin ideal is *independent of* her bulimia – she’s no more impacted by the magazines, billboards, TV shows, and so on than is Nora. However, her presumption about the *strength* of her connection to the socio-cultural thin ideal – that

hers is a preoccupation rather than merely a strong influence – is the *result* of her bulimia, not its cause. More precisely, Bonnie’s preoccupation about the socio-cultural thin ideal is the result of her bulimia *and* the fact that both she and Nora systematically fail to notice the huge differences between their experience.

The stakes are high: If our speculation is in the ballpark of correct, it is a tragedy. Nora’s theory imposes a substantial untruth on Bonnie, forces her to look in the wrong direction for self-understanding.

### How to See

As we have said, it is not our aim to provide a theory of bulimia, but rather to provide a way of investigating that may provide constructive alternatives to or extensions of present theories. That bulimia causes preoccupation is a wild speculation, and I have no attachment to that theory, make no claim that it is true. I’m quite confident in the robustness of the fragmentedly multiple observations – I have made the same observations over a span of twenty-five years. However, how to explain those observations is another matter.

The failure of observers early in the history of a science to theorize correctly about their observations should not be held against them. Van Leeuwenhoek, looking through the home-built microscopes he was perfecting, saw “many very little living animalcules, very prettily a-moving” (Van Leeuwenhoek, Letter to the Royal Society, September 17, 1683). He was quite mistaken about the nature of these animalcules (for example, he thought sperm cells were complete animals whereas egg cells were just “nourishment for the sperm animal”), but that theoretical misstep in no way diminishes his contributions to the development of microscopy on which modern biology rests. Van Leeuwenhoek’s contribution was to the science of how to see, not to the science of what was seen.

**Q:** I don’t believe you when you say you have no attachment to your theory. Everyone is attached to their theories! I think you should just be honest.

**A:** What you, with evident passion, see as obvious, I see as a profound dilemma. I do *not* in fact have a theory about bulimia. It seems to me that you are falling into the same trap that both Bonnie and Nora fell into.

I would urge you, as my mother urged me countless times, not to judge others by yourself. Psychologists are selected, bred, trained, and rewarded to value theory (as your question suggests) with insufficient recognition of the blinders that theory imposes. Just because *you* may (over)value theory does not imply that *everyone*, including me, (over)values theory.

Having a theory about bulimia would seriously harm my ability to apprehend faithfully the phenomena in the vicinity of bulimia, would cause me to look too hard in some directions and not hard enough in others. Over-valuing theory is, I think, a primary culprit leading five thousand

studies of bulimia to miss the fragmentedly multiple hay in the haystack. So it may well be that the explorer of phenomena should be firewalled away from the theorizer (Hurlburt & Akhter, 2008). I have spent the better part of a lifetime working at bracketing the influence of theory (cf. Hurlburt & Schwitzgebel, 2011c). I accept that I am well short of perfection in this regard, but I do think it reasonable to suppose that I have improved my abilities.

I'm not opposed to theory. I am opposed to *premature* theory, theory that is advanced before the relevant phenomena have been thoroughly explored. Further, I'm opposed to theory that seeps into or otherwise clouds careful observation of phenomena. We will return to this topic in Chapter 21.

**Q:** Might I register a stylistic complaint? This book includes many forward references, which frustrates me. Here, for example, you refer to Chapter 21, so I have to leave one finger holding my place here while paging forward to find Chapter 21. That's happened a half dozen times already. Couldn't you have eliminated forward references?

**A:** I agree that forward references are generally annoying. However, here they derive from the "screwy" organization of this book, which is essentially one big forward reference. I have inserted some explicit forward references to make it *possible* for you to look ahead if you so desire. I assure you that it is *unnecessary* to follow any forward reference; the text will read coherently without them.

#### IMPLICATIONS FOR GENUINELY SUBMITTING TO THE CONSTRAINTS

Let's accept (which I think is fair, now that we have conducted three studies of the phenomena of bulimia spanning twenty years) that fragmented multiplicity is a strongly salient characteristic of women with bulimia. Let's accept that bulimia science has not noticed fragmented multiplicity. What can we glean about the constraints imposed by the attempt to apprehend pristine experience faithfully?

*Constraint: There is no safety in numbers.* Our consideration of bulimia demonstrates that an entire science, literature, and lore can be oblivious to important aspects, perhaps the most important aspects, of experience. Therefore one of the constraints that the faithful apprehension of experience imposes is that the fact that everyone is saying the same thing does not automatically engender confidence. It is possible, as perhaps here, that everyone employs the same or similar flawed methods (universal Jessica's paradox), leading to the same or similar incomplete or otherwise flawed descriptions. This constraint applies to all science of phenomena; there is nothing unique about bulimia that makes its experience particularly invisible to science, literature, or lore (we discussed the particular difficulty of multiplicity viewing multiplicity difficulty earlier, but I think that is a small effect by comparison to others).

*Constraint: You can't find out about a phenomenon unless you talk about the phenomenon.* The Eating Disorder Examination (EDE-12; Fairburn & Cooper, 1993) is a widely used structured interview for the scientific exploration of bulimia. Perhaps we would understand why bulimia science's five thousand articles overlook fragmented multiplicity if we understood why the structured clinical interview tools of that science overlook fragmented multiplicity. Here, then, is a typical question from the EDE-12:

Over the past 4 weeks have you spent much time thinking about your shape or weight? Has thinking about your shape or weight interfered with your ability to concentrate? How about concentrating on things that you are interested in, for example, reading, watching television, or following a conversation? Concentration is regarded as impaired if there have been *intrusive thoughts about your shape or weight that have interfered with activities.* (Fairburn & Cooper, 1993, p. 350)

This question does not ask about fragmented multiplicity, and neither do any of the other questions of the EDE-12. If you don't ask about fragmented multiplicity, you can't find out about fragmented multiplicity. That may seem so obvious as not to require comment, but it is of such fundamental importance that it is frequently ignored. This will lead us to the necessity of "open-beginninged" questions in Chapter 10.

*Constraint: Bracket the influence of theory.* The EDE-12 asks questions that are suggested by current theory; anything off the current theoretical radar is ignored. The attempt to apprehend pristine experiences as they actually exist requires that you be indifferent to theory, or at least behave indifferently to the implications of theory – that is, you should suspend or "bracket" your current theories. Phenomena that are relevant to current theory should be asked about but not exaggerated; phenomena that are not deemed relevant by current theory should be asked about but not minimized. Even-handedness about one's own theoretical persuasions is no mean feat, but it is possible to cultivate (Hurlburt & Schwitzgebel, 2011c).

*Constraint: Ask about moments.* The EDE-12 question, "Over the past 4 weeks have you spent much time thinking about your shape or weight?" does not ask *at all* about *any* specific moment. It asks about undefined times over four weeks.

*Constraint: Manage retrospection.* There is lots of psychological evidence (eyewitness testimony, for example) that shows the inadequacy of memory. People's "recollections" are shaped at least as much by recency, salience, plausibility, and other heuristics than by direct recall of events. Remember that there are roughly 19,000 experiences per day; that's roughly 500,000 experiences over four weeks. It is highly doubtful that those will be even-handedly remembered. Any attempt at apprehending experience must somehow manage the difficulties of retrospection.

*Constraint: Clarify what is meant by “experience.”* When the EDE-12 asks, “Over the past 4 weeks have you spent much time thinking about your shape or weight?” what is meant by “thinking”? You might believe that it is obvious what “thinking” means, but a careful observation of experience reveals the opposite:

In fact, there is substantial variability from person to person in what is intended by the phrase “*I was thinking...*” For example, when Alice says “*I was thinking...*” she means that she was saying something to herself, in her own naturally inflected inner voice. When Betty says “*I was thinking...*” she means that she was seeing a visual image of something. When Carol says “*I was thinking...*” she means that she was feeling a sensation in her heart or stomach, and that she had no awareness of cognition whatsoever. (Hurlburt & Heavey, 2001, p. 402; cf. Hurlburt & Heavey, 2006, p. 36)

The foregoing refers to differences in the direct experience of what is called “thinking.” However, “thinking” also refers to underlying cognitive processes that are not directly present to experience.

As it happens, our research with bulimics shows that many (most, in our sample) are quite strikingly confused about what is and is not thinking. Most non-bulimic people experience a clear distinction between thinking and feeling, but our bulimic subjects often have a very difficult or impossible time in this regard.

*Constraint: Remove ambiguities.* What, for example, does “much time” mean in “Over the past 4 weeks have you spent much time thinking about your shape or weight?” Does “much time” mean the same thing to Anne as to Betty? Does the administrator of the EDE-12 know what it means to either of them? I fear not.

Thus the EDE-12 question asks whether you have spent “much time” thinking about shape or weight, as if you were (a) capable of knowing what is meant by “thinking”; (b) capable of noticing what you’re thinking about in all moments; (c) capable of remembering those thinkings across four weeks; (d) capable of “averaging” across all those moments; and (e) sharing a common understanding of what “much time” means. I think there is ample reason to believe that *none* of those considerations is true; at the very least, there is little reason to believe that we know the extent to which those considerations are true. Therefore, the EDE-12 question and its answers should not be taken as attempts to describe experience in high fidelity. If Anne says, “Over the past 4 weeks I have spent much time thinking about my shape or weight,” she “offers a description of a certain state of affairs without genuinely submitting to the constraints which the endeavor . . . imposes” (Frankfurt, 2005, p. 32).

*Constraint: Be skeptical about reports of experience.* We have indicated many reasons for skepticism about people’s reports of experience. The same

applies for our own reports. We say that fragmented multiplicity is frequent. Is that so? Maybe the questioner is right: It is my delusion and I have infected my students and our subjects. I can assure you that I have tried not to do so, and that assurance is offered in good faith, offered by a careful practitioner who has subjected his technique to extraordinary scrutiny by many. But you should be skeptical anyway. To be skeptical is not blindly to disbelieve. True skepticism is to keep your eyes wide open; to desire corroborating or disconfirming evidence *and to be equally happy with either outcome*. There is no substitute for corroboration, either by others using adequate interview methods or by objective performance measures that validate our observations. Unfortunately, most people, when they say “I am skeptical of your observations,” really mean something closer to “I am closed-mindedly positive that you are full of baloney.”

*Constraint: Particulars can lead to generalities, but generalities cannot lead to particulars.* Recall that Jessica’s paradox referred to the fact that Jessica might be able faithfully to describe the details of a specific concrete experience while not having a clue about the main features of her experience in general, and it turned out that Jessica’s paradox applied to all the women in these studies. There is nothing unique about bulimia that leads to Jessica’s paradox; it may well apply to you as well – the chances are good that you are ignorant about some important feature of your experience, but that you could describe your individual experiences faithfully, one at a time, if you used a proper method.

It is possible to derive a generality from a stream of particulars; it is not possible to derive a particular from the general, no matter how often the general is restated. In our investigations of bulimia it was a very straightforward thing for us to begin with a stream of moments of experience, each faithfully described, and notice the frequency of fragmented multiplicity. That allowed us to draw a generalization about experience: Fragmented multiplicity occurs often in bulimic women and rarely elsewhere. Subsequent research may discover some limitations of that generalization, perhaps even discovering that that generalization, although true for the twenty-four subjects whose experience we have explored, is not true for any other bulimic women. However, no matter how often scientists have asked bulimic women about the features of their experience, they have never provided a generality that noticed the fragmented multiplicity that populated most of their moments. A science of experience must begin with particular moments and build upward toward generalities.

*Constraint: The exploration of experience probably has to be a first-person-plural endeavor.* Reports of inner experience are often called “first-person” reports, a phrase usually meant to imply “first person singular”: one person observing his or her own experience. Jessica’s paradox implies that the exploration of inner experience is best undertaken as a first-person-plural endeavor. Jessica’s first person *singular* reports do not reveal

important features of her experience, because she is blind to her own blindnesses, forgives her own exaggerations, takes as fact her own delusions, sees the wisdom only in her own conclusions, and so on. There is an intimate choreography between observer and observed when both are the same person. But when *two* (or three, as in the case of most of our bulimia observations) people are involved in the first-person-*plural* observing of one of their experiences, that oh-so-intimate dancing-with-myself rhythm gets interrupted. It is easy for *me* to notice Jessica's fragmentedly multiple experience because I myself don't have fragmentedly multiple experiences; and even if I did, I don't have them in exactly the same way at exactly the same time as does Jessica. *We* (first person plural) can do what *Jessica herself* (first person singular) cannot. This is not an idiosyncrasy of Jessica; *everyone* (short of nirvana) is blind to their own blindnesses, forgives their own exaggerations, takes as fact their own delusions, elevates the wisdom of their own conclusions, and so on.

**Q:** You're pretty hard on the EDE-12. The EDE-12 does a good job of discriminating bulimics from non-bulimics.

**A:** Yes, it does. I am not at all critical of the EDE-12, which is indeed a highly useful tool in the diagnosis of bulimia and for validating some hypotheses about bulimics. The point is that whereas the EDE-12 is a useful *validation* tool, it is *not* useful for exploring pristine experience. That is not a criticism of the EDE-12 any more than it would be a criticism of a hammer to observe that is not good at tightening nuts and bolts. The mistake (which I think is frequent) is to believe that the EDE-12 provides a forum for subjects to reveal in high fidelity their inner experiences.

## DISCUSSION

This chapter has focused on the fragmented multiplicity that is characteristic of our bulimic subjects. Chapter 16 describes sensory awareness, another frequent characteristic of the experience of our bulimic subjects.

This book is attempting to turn the screw into the notion that these three aspects co-determine each other: moments ↔ experience ↔ genuine-submission-to-the-constraints-that-the-exploration-of-experience-imposes. By co-determine, I mean that it is impossible to be good at apprehending moments but bad at apprehending experience and/or bad at genuinely submitting to the constraints, and all possible combinations of vice-versa. Either an investigation is good at all three, or bad at all three.

We have tried to show that investigating moments of experience using a method that genuinely submits to the constraints might produce observations of substantial importance: The complex multiplicity of experience is, we think, an enormously salient feature of experience in women with bulimia (for other characteristics of experience in bulimia, see Jones-Forrester, 2009). If

our observations are correct (and we've replicated them three times), and if experience matters, this discovery might be of substantial consequence for some, maybe many, bulimic women.

We have also tried to show that the bulimia literature falls short of exploring experience on all three counts: It does not consider moments, it does not consider experience, and it does not genuinely submit to the constraints that that interest imposes. As a result, bulimia science has overlooked a large part of the hay in the haystack.

We used bulimia science as an example *not* because bulimia science is particularly inexpert in the exploration of inner experience. In fact, we think that bulimia science is typical: Modern science does not explore moments of experience; does not genuinely submit to the constraints that such exploration imposes. I have not proven that to you yet; I'm turning the screw into it.

If experience is important in bulimia, and if there are huge but unknown aspects of that experience, the same seems likely to be true of schizophrenia, and/or of old age, and/or of work performance, and/or of reading, and/or of guitar playing – of some if not in most everyday human activities. If experience is important, then moments and genuinely submitting to the constraints must be important.

In our moments ↔ experience ↔ genuinely-submitting-to-the-constraints revolution, we haven't yet discussed in much detail what is entailed by genuinely submitting to the constraints. We've seen ten constraints suggested by the discussion in this chapter; we turn now to the method that is my best shot at genuinely submitting to the constraints.