
Article: The Eternal Now: Phenomenology and the Temporal
Structure of Depression

Research Proposal: Phenomenological Psychopathology and
Temporality: a Heideggerian Approach

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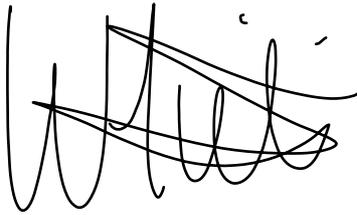
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A handwritten signature in black ink, appearing to read 'Ward Huetink', with a stylized, cursive script.

Ward Huetink

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The Eternal Now: Phenomenology and the Temporal Structure of Depression

Abstract

Contemporary phenomenological accounts of depression have been increasingly focused on the temporal structure of the condition. In this article, I discuss the accounts proposed by Fuchs, Ratcliffe and Fernandez, and show how each of them faces significant drawbacks. I argue that this is primarily due to the fact that they employ a Husserlian model of temporal experience. Because on this account all temporal dimensions – past, present, and future – are conceived of as present in intentional experience, the meaning of a depressed person being ‘stuck in the present’ cannot become clear. Instead, I propose a conception of the temporal structure of depression based on Heidegger’s twofold account of temporality. On this account, depression essentially involves a disruption of the enactment of primordial time. I show how this account avoids the drawbacks of the others, while it is still able to accommodate features of their descriptions of the depressive experience.

Keywords: Depression – Temporality – Phenomenology – Psychopathology – Heidegger – Husserl

1. Introduction

In recent years, there has been a major upsurge in the amount of literature on the phenomenology of depression. This is perhaps unsurprising, considering the fact that the burden of mental health issues is on the rise globally and depression being one of the most common of these issues and a leading cause in disability worldwide (WHO, 2020). Apart from the economic, social and individual urgency of this crisis, however, the renewed interest in a specifically phenomenological approach to depression also illustrates a more conceptual problem: our limited understanding of the affective dimension and structural causes of the disease. The renewed interest in a phenomenological approach to the psychopathology of depression is at least due partly to the ambiguity and restrictiveness of DSM-criteria. With regard to ambiguity, for example, one of the two core symptoms cited in the DSM is the presence of a ‘depressed mood’, for a period of at least two weeks (American Psychiatric Association, 2013, p.160). This begs not only the question what ‘depressed’ actually means, but also what exactly a ‘mood’ is. Additionally, the DSM leaves out aspects of depressive experience that show up in many patient reports, such as a disturbance of temporal experience and the close relation between depression and anxiety.

The new wave of phenomenological literature on depression thus serves two main purposes. The first is elucidating the affective dimension of depression by describing and analysing “what it means” or “what it feels like” to be depressed. The second is providing a structural explanation of *why* it feels this way. Depression involves a fundamental shift in the way the world is experienced, and in what follows, I discuss the accounts of Thomas Fuchs, Matthew Ratcliffe and Anthony Fernandez, who each offer a different explanation of what exactly goes wrong in psychic life, and on what level the disturbance occurs that manifests in depressive experiences.

In spite of these differences, these accounts share four central features. 1) Depression essentially involves a ‘lack’; a loss or erosion of a structure of consciousness that enables ‘normal’ experience. This erosion 2) results in an

overwhelming sense of being ‘stuck’, and this sense of ‘being stuck’ should be understood at least in part in temporal terms, meaning that there is no longer any hope or possibility of change, let alone of change for the better. 3) The temporal structure of depression should be understood as a loss of futurity, as a collapse of the future as an open horizon of possibility. And 4), these accounts primarily use an Husserlian framework to describe and explain this disruption in temporal structure.

In this article, I argue that conceptualizing depression strictly as a type of lack has significant drawbacks. For example, accounts that maintain that depression essentially is an overall loss of affect (Fuchs 2005; Aho 2013; Fernandez 2016) are in tension with the experiences of heightened anxiety, pain, hopelessness and despair reported by many individuals suffering from depression. Furthermore, although contemporary phenomenologists emphasize the change in the experience of time involved in depression, I argue that this aspect still remains underappreciated. Accounts that conceive of the temporal disruption characteristic of depression strictly as the loss of the projected or anticipated futural horizon are problematic in that they cannot grasp the full, daunting sense of ‘being stuck in the present’. They fail to grasp the full sense because they apply Husserl’s conception of time, in which all temporal dimensions – past, present, and future – are dimensions of presence. Instead, I argue that depression *essentially* involves a disruption of temporal experience, and that it should be understood as a crushing excess of presence that extends forwards as well as backwards, indefinitely. This is due, I argue, to the fact that depression involves a disruption of the enactment of what Heidegger calls ‘primordial temporality’ (*ursprüngliche Zeit*). I suggest that Heidegger’s twofold account of temporality, distinguishing between primordial and quotidian time, is a more suitable conceptual framework to understand this disruption, as well as its significance. ‘Being stuck in the present’ means that, for the depressed patient, the future and past look identical to the present; there can be nothing new any longer, and in fact it appears that things have never been significantly different. The depressed patient is stuck in quotidian or now-time, due to a disruption of the enactment of primordial time. Thus, I disagree with

assumption 4 listed above, as well as common interpretations of claims 1 and 3. I show that by adopting a Heideggerian model of temporality, we can avoid the problematic aspects of other accounts, while accommodating convincing aspects of the descriptions of depressive experiences they provide.

First, I discuss the phenomenological accounts of depression offered by Fuchs, Ratcliffe and Fernandez, specifically with regard to the ‘lack’ they identify. Following that, I examine the way in which they conceptualize the disruption in temporal structure in depression. In section 4, I problematize these accounts and introduce a different way of conceptualizing the disruption of temporality that takes place in depression, one that focuses on an excess of the presence, rather than a loss of the future. I conclude by showing how this model can accommodate the descriptions of depressive experience offered by the discussed accounts, while avoiding the problems each of them faces.

2. Depression as a type of lack

Over the past decade and a half, a number of philosophers have developed original phenomenological accounts of depression. Fuchs, Ratcliffe and Fernandez each offer an account that conceptualizes depression as a type of lack or loss, that consequently alters temporal experience. The difference between these theories lies in their conceptualization of the type of lack that is specific to depression. These differences are not necessarily problematic, since experiences of depression are heterogenous. This is to say that patients diagnosed with depression can have very different experiences. Regarding the diagnostic criteria for Major Depressive Disorder, DSM-V requires one of two core symptoms to be present (either the presence of ‘depressed mood’ or the loss of interest or pleasure in nearly all activities) and at least four out of seven additional possible symptoms (changes in appetite or weight, sleep, and psychomotor activity; decreased energy; feelings of worthlessness or guilt; difficulty thinking, concentrating or making decisions; or recurrent thoughts of death, suicidal ideation or suicide plans or attempts) (American Psychiatric Association, 2013, pp. 160 ff.). Because changes in weight, sleep and psychomotor activity can entail either an increase or decrease, two people

can be diagnosed with depression without sharing a single symptom. Moreover, further specifications can be added to a diagnosis of Major Depressive Disorder, such as ‘mixed’, ‘melancholic’ or ‘psychotic’ depression. Considering the variety of depressive experiences, different phenomenological accounts that elucidate the affective dimension of depression, as well as the structural explanation of particular experiences, can exist side by side; some patients might fit one phenomenological model better than another.

This variety notwithstanding, these models share four central assumptions. In what follows, I show that each of them conceptualizes depression as essentially involving a ‘lack’; the loss or erosion of a structure of consciousness that enables ‘normal’ experience. This loss, then, causes an overwhelming sense of being ‘stuck’, and this sense of ‘being stuck’ should be understood at least partly in temporal terms, meaning that there is no longer any hope for the possibility of change. Hence, thirdly, the nature of the temporal disruption that takes place in depression, according to these accounts, should be understood as a loss of the future, where the future stands for the open horizon of possibility. To explain this state of affairs, each uses a predominantly Husserlian framework to account for the disruption in temporal structure. That is to say, depression on these accounts essentially involves the loss of a horizon that is normally present in experience; the loss of an anticipated future, that is, of anticipated possibilities.

I first discuss the models offered by Fuchs, Ratcliffe and Fernandez with regard to their respective conceptualization of the type of lack erosion that characterizes depressive experience. Then I elaborate on the nature of the temporal disruption each theory details.

Loss of conation

Thomas Fuchs has written a number of influential articles on the nature of depressive disorders. He shows how depression encompasses an overall disturbance in the experience of bodily feelings, perception, movement and general emotional resonance (Fuchs 2005). This breakdown is a shift from the lived body (*Leib*), the body as pre-reflectively lived and experienced, the medium through which one acts

and exists without consciously reflecting on it, to the body as material, anatomical object. In depression, the lived body is corporealized; one is no longer comfortably immersed in it, but rather continuously confronted *by* it. In depression, the body becomes a heavy object, an obstacle, rather than the transparent locus of action, experience and life. This, in turn, impedes our sense of perception and motility. Senses of colour and taste are dulled, and movement becomes inhibited, slowed down and burdensome. The loss of comfortable immersion in one's body and of vital engagement with one's surroundings entails a loss of emotional resonance. The world ceases to affect a depressed person altogether, starting with a loss of interest, pleasure and desire, but ultimately resulting in a complete loss of feeling altogether. The experience of the depressed patient is restricted to feeling rigid, empty, dull or dead; a 'feeling of not feeling' (Fuchs 2005, p.5).

Fuchs explains the cause of this breakdown of comfortable immersion in our body and through our body in the world as a loss of the *conative-affective momentum of life*, or, in short, conation (Fuchs 2013). He defines conation as the characteristic psycho-physical vital force of all living beings that is expressed in drive, urge, strive and affection. It is the root of spontaneity, affective directedness, attention and the tenacious pursuit of a goal, thereby affording the 'intentional arc' of directed activity the energetic momentum required. The loss of this essential vital force explains a number of the central characteristics of depression, such as psychomotor and thought inhibition, the loss of pleasure, interest and libido. It also explains other signs of eroded vitality, such as the slowing down of the bio-physical rhythms of life – most notably, the sleep/wake-rhythm – and the explicit experience of the body as an object, accompanied by feelings of heaviness, exhaustion and oppression. Moreover, the loss of vital force is intimately connected to temporality, to which I will return.

Loss of significant possibility

Matthew Ratcliffe argues that depression essentially is the loss of certain kinds of significant possibility that the world normally affords (Ratcliffe 2015). Ratcliffe's argument hinges on two central observations: (1) in normal life, we perceive

possibilities, and (2) depression changes the *kinds* of possibility that are experienced. He provides several detailed expositions of the kinds of possibility individuals suffering from depression have lost, ranging from loss of hope, a contraction of lived space (or: loss of bodily possibilities), the loss of the possibility of self-directed or meaningful action and of feeling at all better.

Ratcliffe emphasizes that this change in the kinds of possibility one experiences in depression is not merely a change in *what* is experienced – i.e., not simply a matter of feeling more sad, anxious or guilty, or feeling less happy and excited – but rather an *all-encompassing shift in the way in which our experience of the world is structured*. He writes: “[Depressive] experiences cannot be accounted for solely in terms of what the person perceives, feels, believes, or remembers. They involve a change in the structure of perceiving, feeling, believing, and remembering, attributable to a disturbance of ‘world’” (Ratcliffe 2015, p.19). The nature of this disturbance is specified by his concept of ‘existential feeling’. The ‘world’ Ratcliffe talks of here is the world of experience. This is not something immediately given to us as it is, but a culmination of the different modalities of experience and perception we enact, such as judging, anticipating, imagining, believing, doubting, hoping et cetera. All these intentional modes take place against a backdrop sense of reality and belonging to a shared world. This background sense of the world is not itself the object of an attitude or experience, but functions as the condition of intelligible possibilities of the different modalities of experience. Ratcliffe’s ‘existential feelings’ are the pre-intentional ‘ways of finding oneself in the world’ that determine the intentional states one is capable of having, the kinds of possibility that experience incorporates, and as such amount to the overall ‘shape’ that experience takes on. He compares them to Heidegger’s ‘fundamental moods’ (*Grundstimmungen*), in that they disclose the world as a whole. In depression, there is a change in this sense of reality and belonging, resulting in a restriction of the intentional states one is capable of enacting. With regard to hope, for example, Ratcliffe shows how many cases of depression include not just the loss of specific hopes, the hope for *p*, *q* or *r* to happen. Instead, what is lost is the very possibility of having hope in general. What is left is *existential*, rather than

intentional hopelessness, the deeply felt loss of a possibility normally taken for granted, resulting in feelings of being stuck in an impoverished world that has ceased to draw us in in a meaningful and engaging way. Thus, depression here essentially is the loss of various kinds of possibility through a change in existential feeling.

Loss of mood in general

The third conceptualization of depression as a type of lack we discuss here comes from Fernandez. Whereas Fuchs and Ratcliffe conceive of depression as a particular way of being situated in and attuned to the world – a pernicious and agonizing way, certainly, marked by privation, but still a way of relating to and disclosing the world nonetheless – Fernandez argues that depression is essentially an *erosion of situatedness or attunement altogether* (Fernandez 2016, p.62).

Drawing on the work of Heidegger, he claims that the essence of depression is in actuality a diminished capacity of having moods altogether. ‘Mood’ (*Stimmung*) – even fundamental mood (*Grundstimmung*) is the mode of the existential *Befindlichkeit*,¹ and Fernandez argues that, in depression, it is this existential itself that is eroded, rather than depression being a particular variation or mode of this existential. *Befindlichkeit* cannot be lost completely; an existential is a constitutive, essential or ontological characteristic of human existence, without which experience would be rendered incomprehensible. The turn of phrase ‘always-already’ that is so characteristic of much phenomenological work applies to this domain. However, existentials are always *enacted*. As such, they are susceptible to disruptions, alterations and breakdowns. In other words, the affective dimension of depression should be understood as a change in the way we have moods at all, rather

¹ The Heideggerian notion of *Befindlichkeit* is notoriously difficult to translate. Fernandez uses the English ‘situatedness’, Ratcliffe prefers ‘attunement’. Macquarrie and Robinson used ‘state of mind’, but I consider this inaccurate, since it is not strictly a matter of inward feeling, but rather the way in which the world is disclosed in its totality. Personally, I prefer the 1963 translation of Richardson as ‘already-having-found-oneself-there-ness’; this emphasizes the always-already structure of the existential, while the grammatical structure of ‘having-found’ implies the ongoing character of *Befinden*, of finding myself in a world that exists and bears meaning to me. For the rest of this article, I leave it untranslated.

than a shift from one particular mood to another. More specifically, depression entails an eroded capacity of having moods, of breaking open the world in a meaningful way, and to be affected by it, altogether. The many reports of utter meaninglessness, insignificance and ‘lack’, an overall inability to feel, of emptiness and void, of diminished sense of touch, of taste and of colours growing dimmer conveyed by people suffering from depression are understandable as an erosion of the existential *Befindlichkeit* as a whole, of the very capacity of world-disclosure. Fernandez writes:

“For Ratcliffe, depression is understood as consisting primarily of ways of being attuned to and situated in a world. My account, in contrast, offers an understanding of depression whereby the degree to which one is attuned to and situated in a world through moods can itself undergo change. (...) While Ratcliffe’s account forces us to interpret every self-report of a loss of feeling as a “feeling of not feeling” (i.e. as itself a positive feeling), my account allows us to take such self-reports at face value, allowing for the possibility of an erosion or degradation of one’s capacity to be affected” (pp. 78-79).

Thus, the upshot of this ‘negative’ account is that we are able to take reports of emptiness, lack of feeling and enticement and dulled sensation at face value.² What is eroded here is the very capacity of feeling, of being affected, and of disclosing the world in a meaningful way. Another important benefit is that Fernandez provides a truly *structural* explanation of the change that occurs in depression. Whereas for Fuchs and Ratcliffe an important aspect of experience is eroded – the conative dynamics of life and the perception of significant possibility due to a change in existential feeling or mood, respectively – these do not account for an

² ‘Positive’ and ‘negative’ here should not be understood in an evaluative sense. These terms refer to the presence or absence of affectivity and indicate that, whereas Fuchs and Ratcliffe consider the affective dimension of depression as the presence of a distinct feeling – a ‘feeling of not feeling’, resulting from a loss of conation or a change in existential feeling, respectively – Fernandez views it as an outright erosion of our capacity for affectivity in general.

overall change in the way our experience of the world is *structured*. A structural change is a change in *how* the world is experienced, rather than a change in *what* is experienced, and – contrary to Ratcliffe’s argument – no change in degree of affect or disaffect, nor an enumeration of kinds of possibilities that are lost can account for this structural disruption, while Fernandez’ account of the erosion of an existential can. I return to this point later.

3. Depression and temporality: the loss of horizons

The accounts on the nature of depression offered by Fuchs, Ratcliffe and Fernandez each identify a different aspect of experience that is affected or eroded in depression. This results in an experience of the world that is in some way lacking and impoverished. Moreover, what is ‘lost’ here is intimately bound up with (the experience of) time. A disturbance of temporal experience features extensively in many writings on depression, not only in the tradition of phenomenological psychopathology (notably Minkowski 1970; Tellenbach 1980), but in first-person reports as well. For example, William Styron writes in his memoir *Darkness Visible* (1990): “All sense of hope had vanished, along with the idea of a futurity” (p. 33). Danish scholar Mikkel Krause Frantzen notes that “In [depression], the future is considered a thing of the past, a *fait accompli*” (Frantzen 2019, p. 9). Moreover, some of the symptoms listed in the DSM-classification for depression are essentially linked with temporal dimensions that make up experience, such as hopelessness with regard to the future, and excessive guilt over the past.

Fuchs argues that the temporal disruption that takes place in depression should be understood as a ‘becoming stuck in the past’. Central to his account is the distinction between implicit and explicit time. ‘Implicit time’ refers to temporality as it is pre-reflectively lived. When we are immersed in performing an everyday task or activity, say, doing the dishes or reading a book, we are not consciously aware of the passing of time. Neither past nor future stand out as such in this implicit mode of temporality. Still, a sense of temporality must of course be present in everyday awareness: it structures the continuity of the activity itself, the fluid bodily comportment that is required, and the being directed towards the goals and tasks

involved. This unreflectively lived time requires, according to Fuchs, two key conditions:

- 1) The basic continuity of inner time consciousness, with its potential-presenting-retential structure, and
- 2) Conation, or the basic energetic momentum of mental life.

Explicit time, on the other hand, results from an interruption or negation of implicit time. One becomes consciously aware of past or future when the fluid continuity of habitual being is broken down or interrupted, for example by a sudden shock or loss. This creates a rupture in what hitherto had been a timeless continuum and segments it into a consciously remembered (and no longer merely retained) past and an imagined future. The passing of time is now consciously experienced, the past as something that has been and that one is moving away from, and the future as something aspired to or anxiously or impatiently awaited.

Because depression on this account essentially involves a loss of conation, the depressed patient is cut off from implicit temporality and stuck in an over-awareness of the passing of time. Fuchs writes: “In melancholic depression, time becomes explicit to such an extent that it turns into a constant burden of guilt and omission” (Fuchs 2013, p. 94). Time has become ossified, with a fixed, irreversible past on the one hand, and an inevitable future on the other. Fuchs characterizes this as *being stuck in the past*; cut off from the “implicit time of pure becoming” (79), the open horizon of the future, the depressed patient is always ‘too late’, always lagging behind the present moment, feeling lifeless, rigid and disconnected from the vital movement of others.

Ratcliffe agrees with Fuchs that there is an erosion of the sense of the ‘flow’ of time, as this is predicated upon – as well as constitutive of – a horizon of enticing possibility, a sense of being affected and driven. However, Ratcliffe argues, contra Fuchs, that the loss of conation also affects the passive synthesis of time-consciousness; being affected by the objects of experience, being enticed and drawn in by them and the possibilities they afford is an integral part of world-experience and the passing of time. Without this sense of enticement and practical significance,

that is, without the perception of possibilities and their actualization, a central aspect of temporal experience is lost: the very sense of things being significantly different from one moment to the next, which characterizes the transition from past to present to future. Thus, “[t]he immediate and long-term future offers only ‘more of the same’; there can be nothing new” (Ratcliffe 2015, p. 180). The present reflects our desires, goals and project, and when these cease to draw us in, our orientation in time becomes problematic. Time becomes *cyclical*, with nothing standing out as significant anymore. What remains is an endless repetition of the present, a seamless repetition of suffering this recurring ‘now’ without contrast to orient oneself and hold on to. Ratcliffe cites reports of experiences of time as having stopped, of having become utterly insignificant. One patient reports: “I have no concept of time when I am depressed” (p. 175).

Fernandez agrees with Ratcliffe that depression entails a deeply felt impossibility or even unimaginability of feeling different, but argues that the temporal implications of a loss of *Befindlichkeit* apply to the past as well as to the future. If *Befindlichkeit* is the ontological characteristic of disclosing the world that in turn conditions the possibility of being attuned to the world that matters to us in some way or another through different moods, the erosion of this existential would render world-disclosure as such severely restricted. By extension, different ways of disclosing the world become unintelligible. And this is indeed what happens: people with severe depression not only cannot see a possibility of feeling different, but in fact *don't remember ever having felt differently*. Whereas the accounts of Fuchs and Ratcliffe focus on a loss of futurity, Fernandez' account includes the past as important in the temporal disruption of depression, and not only as derived from a loss of futurity. World-disclosure entails the experience of past and future, and the erosion of this existential thus affects the experience of time as well. He writes:

“Tools do not call out to us to be taken up in our everyday projects and concerns. The world is still there, but not as forcefully as it once was. Nothing within the world solicits the engagement of the depressed person. This does not apply only to “things.”

Cultural practices, personal, professional, and family roles all lose significance. The sense of the future bringing anything meaningful, either positive or negative, is either absent or severely eroded. *The past, too, offers little to stand on. If you are still capable of reflecting upon your situation, who you were and who you are ceases to offer a space of possibilities. (...) Many people diagnosed with depression are, in a sense, de-situated.*” (pp. 76-77, emphasis added).

Freud already remarked on the role of the past in depression. In *Trauer und Melancholie*, he notes that the self-depreciation that is so characteristic of depression extends *backwards* in time, and the depressed patient does not recognize a change has taken place (Freud 1917/1946, p. 431).³ In their perception, they have always been this reprehensible, miserable, morally defective person. Thus, in depression not only the experience of the future is affected, but of the past as well.

Thus, we have here three phenomenological accounts that differ in their explication of how the experience of time is affected in depression. Despite their differences, it is important to note the common aspects of these theories, specifically the four points listed earlier. To summarize briefly: first, they agree that depression essentially involves a ‘lack’; the loss or erosion of an aspect of the way we are in the world that enables ‘normal’ experience. For Fuchs, Ratcliffe and Fernandez, respectively, this concerns a loss of conation, a change in existential feeling that restricts the ability to perceive significant possibilities, and an attenuation of the possibility of developing moods and affectivity altogether. Secondly, the loss results in an overwhelming sense of being ‘stuck’, and this sense of being ‘stuck’ is integrally tied up with the way one experiences time. Thirdly, the disruption of temporal experience that is characteristic of depression – the meaning of the sense of being ‘stuck’ – should be understood as a loss of futurity, as the collapse of the open horizon of possibility. Without conation, a person

³ “Er hat nicht das Urteil einer Veränderung, die an ihm vorgefallen ist, sondern streckt seine Selbstkritik über die Vergangenheit aus; er behauptet, niemals besser gewesen zu sein.”

suffering from depression is condemned to an over-awareness of the passing of time (or maybe rather, an explicit awareness of time as passing), described as “being stuck in the past”. Ratcliffe argues that the loss of certain types of possibility diminishes our capacity to register the passing of time altogether; without a horizon of perceived possibilities that draw us in, time becomes a cycle of recurring now-moments. Fernandez adds that with an erosion of *Befindlichkeit* not only the horizon of the future collapses, but that of a significant past as well. And fourth, finally, they primarily use an Husserlian framework to account for this disruption in temporal structure. Fuchs and Ratcliffe explicitly draw on Husserl’s work on the passive synthesis of time-consciousness, and add the feature of vitality that is consequently disrupted in depression. Moreover, what is lost, according to these accounts, is the *horizon of projected, anticipated or imagined possibility*, which is normally *present* and which structures the experience of the present moment.⁴ The loss of this horizon then results in the experience of an impoverished world, devoid of the sense of teleological direction towards the future one is striving for or moving towards. Although Fernandez explicitly argues for a Heideggerian approach to the phenomenology of depression by conceptualizing it as a degradation of *Befindlichkeit*, of the way we disclose the world through moods, he too remains entrenched in the Husserlian model of the temporal dimensions as horizons of presence, the experience of which has emptied out in depression.

The central problem with these accounts is that that they cannot satisfactorily account for the meaning of ‘being stuck in time’. Depression is primarily a problem of presence, both in affective and temporal sense. Being stuck in time is, therefore, being stuck in the present. To suffer from depression is to be stuck in a horrific now that extends forwards as well as backwards in time, absorbing the future and the past. Husserl’s framework conceptualizes the temporal dimensions of future and past as potential presence, as future-presence and past-presence (or the not-yet-now and not-anymore-now; the imagined, anticipated,

⁴ Cf. Husserl (1913/1983), §47: “Any actual experience points beyond itself to possible experiences which, in turn, point to new possible experiences and so ad infinitum. (...) Any hypothetical formulation in practical life or in empirical science relates to this changing but always co-positing horizon whereby the positing of the world receives its essential sense.” (trans. F. Kersten).

expected or desired future and the remembered or retained past). Because all temporal dimensions on this account are modifications of the present, the precise problem of ‘being stuck in the present’ cannot become clear. There is, however, another account of time available in which past and future are not conceptualized as modifications of the present. In what follows, I argue that depression essentially involves a disruption in temporal experience, specifically with regard to the enactment of what Heidegger calls ‘primordial time’ (*ursprüngliche Zeit*).

4. Depression as Presence

What exactly do we mean when we say that for a depressive patient, “the future is lost”? Certainly not that there is no idea of next moments coming along. In fact, the predicament of the depressed person lies precisely in the fact that there *are* next moments, and that these, moreover, all feel the same – exactly like this moment right now. In fact, from the perspective of the depressed person, the past looks and feels identical to the present as well. Consider the following description from Andrew Solomon’s *The Noonday Demon* (2001):

“When you are depressed, the past and future are absorbed entirely by the present moment, as in the world of a three-year-old. You cannot remember a time when you felt better, at least not clearly; and you certainly cannot imagine a future time when you will feel better. Being upset, even profoundly upset, is a temporal experience, while depression is atemporal.” (p. 136)

In this passage, Solomon touches on two crucial aspects of depressive experience. The first is the *structural* difference between depression and emotions, moods and even fundamental moods (or existential feelings) mentioned earlier. Depression appears to have no beginning and no end; from within, depression seems timeless and all-enveloping. This is a profound feature of depressive experience. With moods and emotions, even when they are unusually strong, we do not lose the capacity to imagine, or at least remember, ever feeling different. That depression involves a structural break from normal experience, rather than it being a matter of

unusually high degrees of feeling sad, lonely, guilty, disaffected or otherwise, is attested by the many claims of indescribability.⁵ If depression involved only a gradual difference from normal affects, there would not be such difficulty in describing it. This tells us two things: first, what is needed is a structural explanation of depressive experiences, one that accounts for the rift between experiences of depression and normal experiences. In other words, Fernandez is absolutely right when he argues, contra Ratcliffe, that we need to account for a difference in *how* experience is structured, rather than strictly *what* is experienced. Secondly, Solomon shows again that the structural rift between normal and depressive experience is intimately bound up with the enactment and experience of time. The fact that depressive experience is described as atemporal goes to show that the kind of structural explanation we are looking for is essentially connected to the way we enact and/or experience time.

The second important feature Solomon's testimony reflects, is that it is not the past that dominates temporal experience in depression, nor is the future; rather, it is the present. The present dominates the experience of time in depression in that it extends forwards as well as backwards, overshadowing completely the experience of time. Dutch philosopher Eva Meijer writes in her monograph on depression:

“The temporal dimensions start to blend. The future takes the shape of a repeating present, (...) the past becomes a strange fiction, further removed than usual – once things were good, but how is unintelligible; it is an empty knowing without feeling.”
(2019, p. 48).⁶

To say that “the temporal dimensions start to blend” is to say that somehow the present moment ‘flows over’ and overshadows the future and the past. Even if there

⁵ E.g. Styron (1990): “Depression is (...) close to being beyond description” (p. 5). And Solomon writes: “[Depression] can only be described in metaphor and allegory” (2001, p. 8).

⁶ “Ook gaan de tijdsdimensies door elkaar lopen. De toekomst vormt zich om tot een soort zich herhalend nu, (...) het verleden wordt een vreemde fictie, verder weg dan anders – ooit was het goed, maar hoe is onbegrijpelijk; het is een kaal weten zonder het te voelen” Translation my own.

is some faint memory of better times, it is remote and isolated. And again, the language of being stuck in a repeating ‘now’ is striking.

To sum up: an explanation of depression needs to account for 1) a structural break from normal experience, that entails 2) the experience of being stuck in a present that extends over the future as well as the past; and 3) the suffering that takes place in this present moment. The three theories discussed above all satisfy one or some of these criteria, but are problematic with regard to (an)other(s). It is clear that Fuchs’ conceptualization of the temporal structure of depression as “being stuck in the past” does not align with the descriptions of depressive experience discussed above. One is not ‘lagging behind time’, trying to catch up, but caught up in the midst of it without possibility of relief. The past is as much affected as the future. Another objection against Fuchs’ model is that the loss of “psycho-physical vital force” does not explain much, for it is close to saying the depressed patient has lost the will to live. Freud observes that one of the strangest (*merkwürdige*) features of melancholia is that it causes an overcoming of the drive to live (Freud 1917/1946, p. 432). But this ‘overcoming’ (*Überwindung*) does not entail a straightforward *loss* of this drive. Rather, in the melancholic condition this drive is blocked or impeded. The late author David Foster Wallace seems to have this kind of erroneous idea of depression in mind when he has one of his (many) depressed characters in *Infinite Jest* (1997) think:

“The person in whom Its [depression’s, WH] invisible agony reaches a certain unendurable level will kill herself the same way a trapped person will eventually jump from the window of a burning high-rise. Make no mistake about people who leap from burning windows. Their terror of falling from a great height is still just as great as it would be for you or me standing speculatively at the same window just checking out the view; i.e. the fear of falling remains a constant. The variable here is the other terror, the fire’s flames: when the flames get close enough,

falling to death becomes the slightly less terrible of two terrors.

It's not desiring the fall; it's terror of the flames." (p. 696).

If we assume that depression essentially is a loss of vital drive, it becomes problematic how to explain the suffering: what exactly is someone suffering from depression is *suffering* from? Fuchs argues that the depressed person suffers from being desynchronised from intersubjective time, from the discrepancy between one's own lifelessness and the vitality of the environment. But to suffer from this contrast presupposes that one *wants*, desires or strives to be that way, but in fact *can't*. In other words, a vital drive has to be present in order for a living being to suffer in this way. A straightforward loss of this drive cannot account for this. In short, in depression conation is blocked and frustrated, rather than eroded and lost.

This ties in with a more general critique of the theories of lack. Conceptualizing depression as an overall loss of affectivity, as Fuchs and Fernandez do, is not easily reconcilable with the reports of intense affect in depression. Many patients report excessive feelings of guilt, anxiety, loneliness or despair – but often more forceful descriptions of affect are invoked, such as “horror” (Styron 1990) and “agony”, by Wallace in the quote above. Fernandez accounts for this by arguing that “[i]n this eroded form of existence, we may be attuned and situated through dulled or blunted moods. This leaves open the possibility of being guilty, hopeless, or even anxious (e.g. in agitated depression) while nonetheless suffering a degradation of meaning and significance, coupled with muted affectivity.” (2016, p. 83). But often these experiences do not appear to be muted at all. This begs the question how certain moods and affects can be felt so *strongly* when depression essentially involves an erosion of the capacity to develop moods and be affected altogether. We must conclude that describing depression primarily in terms of a lack of affectivity cannot suffice. Heidegger's concept of time, I suggest, can be used to account for the reports of emptiness and the structural disruption of temporality, without having to commit to a general loss of affectivity.

Heidegger on the twofold structure of temporality

In the lecture series *Logik. Die Frage nach der Wahrheit*, Heidegger provides an elaborate account of temporality (Heidegger 1925/1976). More specifically, he provides a phenomenological account of the temporal structure of the fundamental way human beings are in the world: as caring (*sorgend*). Heidegger speaks of care because human beings are always directed at the world, it bears meaning to them, it *concerns* them. The fundamental structure of care is: “1. being ahead-of-oneself, along with 2. being already familiar-with-the-world. In a phrase: being already ahead of oneself and familiar with one’s world. [translation modified]” (p. 235).⁷ Ultimately, ‘care’ (*Sorge*) is a matter of temporalization (cf. *Being and Time*, 374-378).

Heidegger distinguishes between two modes of temporalization; now-time and primordial time (*Jetzt-Zeit* and *ursprüngliche Zeit*, or *Ur-Zeit*, respectively). ‘Now-time’ refers to the common, everyday conception of time as a continual succession of now-moments, moving from the past through the present to the future, indefinitely. Characteristic for this conception of time is the primacy of the present. Both past and future are perceived as modifications of the present; the past as what is not-anymore-now, the future as the not-yet-now. Different modalities of experience, that is to say, different modes of being of human existence, are directed at the making-present of the different dimensions of now-time. For example, to expect something is the making-present of a possible future, and to recollect is the making-present of the past. Therefore, past and future cannot be *conceived* as absence; they can be apprehended only insofar as they can be presented.

According to Heidegger, this linear conception of time is predicated upon a more original or authentic (*eigentlich*) temporalization: primordial time. In order for experience of a ‘before’ or ‘after’ to be possible, there has to already be an enactment of time, a primordial temporalization. This primordial temporalization, the enactment of the so-called “ecstatico-horizonal time”, is the transcendental

⁷“Und Sorge, die als solche Besorgen ist, hat dann die Struktur: sich-selbst-vorweg-sein in eins mit dem Schon-sein-bei der Welt: *Sich-selbst-vorweg-schon-bei-der-Welt-sein*.” (Emphasis in original). Translation by Thomas Sheehan (2010), modified: Sheehan translates the German ‘schon’ with ‘a priori’. I prefer ‘already’, because it is closer to the German, and ‘a priori’ as a concept is problematic with regard to Heidegger. Ultimately, even ‘a priori’ structures are enacted and as such susceptible to change.

structure of time that breaks open the present and endows it with depth and meaning (Heidegger 1927/1967, p. 325 ff.). Three characteristics of ecstatico-horizonal time are important for us here. First, the primary temporal dimension of primordial time is not the present, but rather the future, in connection to the past. The present issues from our ownmost future that is in the process of having been (*gewesende Zukunft*) (Heidegger 1927/1967, p. 326). Secondly, primordial future and past are experientially *absent*, that is, they cannot be presentced. Heidegger insists on the inauthentic and derivative nature of now-time and the making-present of what has been and is to come. The very condition of possibility of possibility itself, of any presenceable, that is, perceivable or imaginable possibility whatsoever, is time as absence, the unknown, that which is not presenceable. The significance of the present moment comes about through the absolute inapprehension, the openness of our own future coming towards us, not from the future as imagined or anticipated. The same goes for the past. The primordial past is not the past that can be presentced through recollection, but the past that we are (*Gewesenheit*) but that cannot be retrieved, the sedimented and incorporated past that we are and which is coming towards us, behind our back, from the future (Heidegger 1927/1967, p. 325). And third, finally: primordial time has the structure of a loop (Vasterling 2000, p. 95). Whereas now-time is conceived as a line, Heidegger conceives of primordial time as the simultaneous temporalization of the three dimensions. The past is coming towards us from a future that is in the process of having-been, opening up the present, lending depth and meaning to what we encounter. Only on the ground of this transcendental structure of time significant possibilities can be disclosed.

The meaning of the problem of being ‘stuck in the present’ can now become clear. What is characteristic of depression is that the enactment of primordial temporality is disrupted, leaving one stuck in now-time. What is left of the future is a succession of now-moments that offer only more of the same: more of the suffering of the present. The past, too, is overshadowed by this ‘now’. Ratcliffe is absolutely right when he says that in depression, time becomes cyclical, a repetitious present without meaningful change. A linear passage of repeating instantiations of the present without differentiation might well be described in this

way. But it is not the loss of any number of types of presenceable possibilities that accounts for this experience. Rather, what is lost for the depressed patient is the depth-structure of time, authentic temporality, that is the condition of possibility for the openness of the future itself, for the unforeseen and the genuinely new. Again, this is not to say that for the depressed patient nothing will happen anymore – there certainly is a future, next days will come and people will go about their business, but this future is disclosed wholly in the light of the present, as is the past. The foreseeable future and remembered past become ‘flat’, and take on the shape of a linear sequence, or endless cycle, of now-moments. A disruption of the enactment of the primordial or depth-structure of time – of the temporal dimensions of non-presenceable past and future – entails the loss of the possibility of real novelty and meaningful change. In other words, depression essentially is an *excess of presence*. Consider Sartre’s description of nausea, often interpreted as a description of depression:

“*Too much*, the chestnut tree there, opposite me, a little to the left. *Too much*, the Velleda... And I – soft, weak, obscene, juggling with dismal thoughts – *I too was too much*. Fortunately, I didn’t feel it, although I realized it, but I was uncomfortable because I was afraid of feeling it (even now I am afraid—afraid that it might catch me behind my head and lift me up like a wave). I dreamed vaguely of killing myself to wipe out at least one of these superfluous lives. But even my death would have been too much. Too much, my corpse, my blood on these stones, between these plants, at the back of this smiling garden. And the decomposed flesh would have been too much in the earth which would receive my bones, at last, cleaned, stripped, peeled, proper and clean as teeth, it would have been too much: I was too much for eternity.” (p. 138, emphasis in original).⁸

⁸ “*De trop*, la marronnier, là en face de moi un peu sur la gauche. *De trop*, la Velleda... Et moi – veule, alanguï, obscène, digérant, ballottant de mornes pensées – *moi aussi j’étais de trop*.”

In this experience, there is too much of everything – too much of trees, too much of Roquentin himself; in short, too much being, and a lack of absence and negation. The ‘absence’ that is lost is the openness required for real, that is, unforeseen possibility, a future that cannot be presented.

Conceiving of depression as a disruption of the enactment of primordial time also accounts for the loss of meaning and significance that many patients report. Care is encountering the world as meaningful and significant. An erosion or disruption of temporalization affects care and, hence, the significance of the world. Objects, projects and people make little sense to someone if they are no longer capable of relating to them as a changing, developing individual. On the other hand, a disruption of the enactment of primordial time does not necessarily entail an overall loss of affect. If life is reduced to an endless passage of now-moments, bereft of the depth-structure of time, of openness, meaning and significance, it is likely one feels trapped, utterly hopeless or remorseful, lonely and anxious, lethargic or restless. The definitive characteristic of depression on this account, however, is that *whatever the affective dimension of the experience might be, it appears to last forever.*

If we conceive of depression as essentially involving a disruption of the enactment of primordial temporality, we satisfy the three criteria mentioned earlier. First, there is a structural break from normal experience. Primordial temporality pertains to the fundamental structures – existentials – of human beings. Without time as absence, the original time of the non-presenceable past and future, the new and unforeseen as such is lost. What is left is the certainty of the present moment and its indefinite extension forwards and backwards in time, thus explaining the second characteristic. And third, this being stuck in a senseless passing of presents causes overwhelming feelings of being trapped, stuck, of hopelessness and

Heureusement je ne le sentais pas, je le comprenais surtout, mais j’étais mal à l’aise parce que j’avais peur de le sentir (encore à présent j’en ai peur – j’ai peur que ça ne me prenne par le derrière de ma tête et que ça me ne soulève comme une lame de fond). Je rêvais vaguement de me supprimer, pour anéantir au moins une de ces existences superflues. Mais ma mort même eût été de trop. De trop, mon cadavre, mon sang sur ces cailloux, entre ces plantes, au fond de ce jardin souriant. Et la chair rongée eût été de trop dans la terre qui l’eût reçue et mes os, enfin, nettoyés, écorcés, propres et nets comme des dents eussent encore été de trop : j’étais de trop pour l’éternité.” Translation my own.

isolation. Because we are not committed to an overall loss of affectivity or vitality, there is no conflict in accounting for the reports of severe affect. To reiterate: what is characteristic of depression on this account is that, whatever the affective dimension might be, it is atemporal.

This phenomenological account of depression thus differs in some respects with the shared assumptions of the theories discussed above. Most notably, of course, I draw from Heidegger's account of temporality, rather than Husserl's. I agree that depression essentially involves an overwhelming sense of being stuck in time. This should be understood as being stuck in 'now-time', time as a linear succession of moments that, moreover, issue from the present without the possibility of genuine change. I agree that this is the result of the loss or erosion of an existential structure that human beings normally enact. But whereas the others conceive of this as the loss of something that is usually present – vitality, perceived possibility, or *Befindlichkeit* – I have argued that it is essentially a disruption of the enactment of primordial time, of the past and future as absence that cannot be made present, the very condition of possibility of there being change and novelty. This results in a different interpretation of assumption 3), that temporal structure of depression should be understood as a loss of futurity, as a collapse of the future as an open horizon of possibility. For example, Ratcliffe conceives of depression as the loss of certain types of presenceable possibilities that constitute the horizon of meaning. On my account, depression essentially involves a disruption of the condition for 'openness' itself. As a result, the future becomes, for the depressed person, clearer and more certain than ever. It is the present that extends forwards and backwards in time. In short, depression is essentially a problem of becoming stuck in linear now-time, an excess of presence, due to a disruption of the enactment of primordial temporality.

5. Conclusion

Depression is a paradoxical condition. It involves emptiness and loss, but also overwhelming affect. As Solomon says, "Major Depression is both a birth and a death: it is both the new presence of something and the total disappearance of

something” (2001, p. 42). This ‘total disappearance of something’ is the total disappearance of the possibility of the new, of change, of openness. What is present is the desolate landscape of inevitable extension of the present moment without differentiation. The future and the past are now truly nothing more than modalities of the present; without the depth-structure of time that endows our experience of the world with meaning, everything turns flat, empty, grey, insignificant. The upshot of this account is that it is able to explain the structural difference between depressive and normal experience in terms of the disruption of temporal experience, without having to commit to an overall loss of affect.

Moreover, this account can integrate the temporal disruptions described in the other accounts. Stuck in now-time, one is continuously confronted with *time as passing*, rather than time as one’s own becoming. This is what Fuchs calls ‘explicit time’. Stuck in now-time, the future is an endless continuation of the present. This might well be described as ‘cyclical’, as Ratcliffe does, and the future certainly lacks openness. This is, however, not the result of the loss any number of kinds of presenceable possibilities, but the condition for ‘openness’ and change itself; the enactment of authentic time. And Fernandez is right in claiming that in depression, the past is affected as well. But this is not the result of an overall loss of mood and affectivity, but of the being stuck in now-time that results in an extension of the present over the future as well as the past.

While much recent phenomenology of psychopathology has been directed at the temporal structure of conditions such as depression, schizophrenia, mania and anxiety, the role of temporality in depression has so far remained underappreciated. It is my contention that depression essentially involves a disruption in temporality, and that Heidegger’s philosophy is a more suitable conceptual framework to analyse and describe what exactly occurs than Husserl’s. What is lost is not just a kind of presenceable future or past, but the condition of possibility of there being *different* horizons altogether – what is lost is time as absence. The truly melancholic utterance is not, as Frantzen says by words of Johnny Rotten, that there is “no future”, but rather that the future is now; this unbearable present that extends forwards and backwards in time, indefinitely.

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Research Proposal

1. Project Title

Phenomenological Psychopathology and Temporality: a Heideggerian Approach.

2. Project Summary

In recent years, many contributions to the phenomenology of psychopathology have detailed the specific types of temporal disturbance that are characteristic of different psychopathological disorders. These accounts without exception, either explicitly or implicitly, employ a Husserlian framework to account for the different temporal disruptions. This is unnecessarily restrictive and even, in some cases, detrimental, especially when it comes to affective disorders such as anxiety and depression. Because a Husserlian account conceptualizes the different temporal dimensions as (modalities of the) present, they cannot conceptualize a disruption in temporalization other than the way in which we make the past and the future present. Heidegger provides a different account of the way in which we enact and experience time. This project proposes an application of this Heideggerian account to phenomenological psychopathology, in order to provide more refined descriptions and explanations of distorted temporal experience in psychopathological conditions.

The emphasis on Husserl's account of temporality is at least partly due to a general neglect of Heidegger's twofold account of temporality. The proposed research project has two aims. First, to provide an overview and discussion of the relevant differences between Husserl's and Heidegger's account of temporal experience. Secondly, an application of this account of temporality to phenomenological psychopathology, in order to improve understanding, research and treatment options for affective disorders.

3. Description of the Proposed Research

3.1 Background / Status Quaestionis

Phenomenology of Psychopathology

Phenomenology of psychopathology is a growing field of research in which insights from the phenomenological tradition are used to describe and explain psychopathological experiences (Sass, Parnas & Zahavi 2011). From the outset, this rapidly growing field of research has been concerned with temporality (Jaspers 1913/1968; Minkowski 1933/1970). In recent scholarship, philosophers, psychologists and psychiatrists have provided phenomenological accounts of the kinds of temporal disturbance that are characteristic of psychopathological disorders such as schizophrenia (Fuchs 2013; Stanghellini et al. 2016; Sass & Pienkos 2013a, 2013b), mania (Sass & Pienkos 2013a, 2013b; Fernandez 2017), anxiety (Aho 2018) and depression (Wyllie 2005; Fuchs 2005, 2013; Aho 2013; Sass & Pienkos 2013a, 2013b; Ratcliffe 2015; Fernandez 2017; Maiese 2017). In each case, they make use of an Husserlian account of temporality to describe and explain the nature of the temporal disruption that takes place in the different psychopathologies. This is to say that they conceive of the temporal structures as a distortion in the way the patient experiences temporal dimensions. This is because Husserl's account conceives of the experience of time as the way in which we make different temporal dimensions present; we retain and remember the past, and imagine, desire, anticipate, fear and project the future; the present is constructed against these horizons.

The use of a strictly Husserlian framework to account for temporal disruptions is unnecessarily restrictive and even, in some cases, demonstrably flawed. The disturbance in the way one experiences and enacts time in some cases or types (especially affective disorders, such as depression and anxiety) of psychopathology are better understood not in the way in which something or other is experienced, but as a disruption of what Heidegger calls primordial temporality. This original temporality underlies our everyday sense of time as a sequence of

now-moments, but this is time as *absence*, an openness that cannot be presenced. One reason that Husserl's framework is predominant over Heidegger's is a general scholarly neglect of Heidegger's philosophy of time.

Heidegger's Twofold Account of Temporality

Heidegger's notion of primordial temporality, distinguished from our 'everyday' conception of time as a linear succession of now-moments moving from the past to the present to the future, is generally considered obscure, ill-defined and even aporetic and misguided (Dahlstrom 1995). Some recent scholarly work is explicitly dismissive (Fleischer 1991), while others have simply neglected this ontological aspect of Heidegger in favour of a pragmatist reading (Dreyfus 1991). Still others have tried to vindicate its importance, relevance and consistency (Dahlstrom 1995; Luchte 2008; Dastur 2011; Roubach 2016). However, even these modern interpretations are left wanting. For example, Roubach characterizes Heidegger's original temporality as "Dasein's relationship with time, that is, the manner in which Dasein understands its temporality" (2016, p. 166). Blattner on the other hand insists that Heidegger's account of original temporality is essentially a version of transcendental idealism (1999, p. 231 ff.). Both interpretations, of which there are many variations, remain, in my view, too close to Husserl. Heidegger explicitly criticizes and breaks away from Husserl's transcendental philosophy and the metaphysics of presence, which is reflected in his account of primordial temporality, in which the temporal dimensions of past and future are fundamentally unpresenceable – and hence not temporality as 'conceived of' or 'understood', if that means presenced in intentionality. Instead, they are the time that we are, that lies sedimented in our back and comes towards us, unseen, from the future as radical openness (Heidegger 1925/1976). A central aim of this research project is to contribute to Heidegger-scholarship by re-examining Heidegger's hermeneutic account of primordial temporality and its deviations from Husserlian phenomenology and metaphysics.

Application for Phenomenology of Psychopathology

Based on the conceptual work on Heidegger's account of temporality, I will provide the groundwork for a reconceptualization of the kinds of temporal disruption that take place in psychopathological conditions, specifically with regarding depression and anxiety. The twofold account of primordial time and now-time allows for more fine-grained descriptions and explanations of particular experiences, and can serve as an elaboration on the 'resynchronizing therapy' outlined by Fuchs (2005). It should be noted that a temporal disruption that concerns time as absence, rather than the way in which we conceive of or 'presence' time, as a cause of psychological suffering is not without historical precedent. For example, Kierkegaard's notion of 'despair' is rooted in a disturbance of the relation between the finite and the infinite that make up the self, where the infinite is absence and openness. (Kierkegaard 1849/2004). Freud's concept of *Nachträglichkeit* similarly involves a disruption in temporality that cannot be made present (the triggering of a past trauma that has been sedimented in the past that we are, and cannot be made present – in this case, due to repression) (Freud 1918/1946). It is my suggestion that we take these considerations of time as absence as a starting point to re-evaluate the conceptual underpinnings of the phenomenology of psychopathology.

3.2 Aims and Research Questions

These considerations elucidate the two main aims of this research project. On the one hand, I will provide an analysis of Heidegger's twofold account of temporality that remains true to Heidegger's philosophical position, emphasizing and discussing the relevant deviations from Husserl. The guiding questions here will be: "How can we read Heidegger's account of primordial temporality without succumbing to Husserlian presuppositions? How are the differences between Husserl and Heidegger in this regard misrepresented or overlooked in contemporary phenomenology of psychopathology (e.g. Aho 2013; Ratcliffe 2015)?"

The second part of the project aims to contribute to the phenomenology of psychopathology by enlarging our understanding of the way temporal experience is structured and enacted. This, in turn, will improve understanding of patients, their friends and relatives, clinicians and the general public with regard to the nature and

first-person experience of the condition, and could be used to develop treatment options. The research questions here are: “How can the inclusion of primordial temporality in our conceptualization of psychopathology contribute to refining the way we understand and interpret psychopathological experience, specifically regarding affective disorders such as anxiety and depression? How can the insight gained from conceiving of the temporal disruption in affective disorders as a disruption of the enactment of primordial temporality aid the ‘resynchronization therapy’ outlined by Fuchs (2005)?”

3.3 Methods

The first part of the project will predominantly rely on philosophical and conceptual analysis of primary sources. Since I will mostly be focused on the early works of Heidegger and their reception, this part could be considered exegetical. The second part of the project will also rely on philosophical and conceptual analysis, but adds the vital phenomenological aspect. My application of Heidegger’s philosophy of time on the foundations of the phenomenology of psychopathology will draw on first-person accounts of patients suffering from affective disorders, by examining first-person reports, including but not limited to literary works. I am also interested in conducting qualitative interviews with patients, and in order to be able to do so I will take interview training. This part of the project could also benefit from interdisciplinary work, that combines philosophical insight with the work and experience of psychologists and psychiatrists.

3.4 Societal and Scientific Relevance of the Research Project

This research project contributes to scholarship by providing an analysis of Heidegger’s philosophy of temporality that remains close to his philosophical position and approach, including an overview and discussion of the deviations from Husserl relevant to phenomenological psychopathology. This is not only a contribution to Heidegger scholarship, but also to the way phenomenology is being used to describe and explain psychopathological experiences, and thus contributes

to the tools we have available in psychiatric and psychological research and clinical practice.

In addition to the scientific relevance, this project contributes to society by its developing additional tools to understand and help patients suffering from affective disorders. This will be valuable to not only patients themselves, but also to the ones close to them and even society at large, considering the increasing number of people suffering from psycho-affective disorders and the resources dedicated to helping them.

4. Keywords

Phenomenology – Psychopathology – Heidegger – Primordial Temporality – Affective Disorders

5. Research Programme

The table below details the scheduled research, activities and output for each year of the four-year research project.

Year 1	<p>Research: Reading the early works of Heidegger and secondary literature on Heidegger’s twofold account of temporality.</p> <p>Activities: OZSW workshops, advanced language course in German.</p> <p>Output: Draft of the first part of the thesis on Heidegger’s account of temporality. Overview article on the different interpretations of primordial temporality.</p>
Year 2	<p>Research: Continued research on Heidegger’s philosophy of time. Start research on temporality in the phenomenology of psychopathology.</p> <p>Activities: Obtaining BKO (University Teaching Qualification), presentation on Heidegger’s philosophy of time at an international conference.</p> <p>Output: Revised version of the first part of the thesis. Article on time as absence in Heidegger’s philosophy.</p>

Year 3	<p>Research: Continued research on the phenomenology of psychopathology.</p> <p>Activities: Spending a semester abroad at the department of a leading phenomenologist in the field, preferably Matthew Ratcliffe or Thomas Fuchs. Teaching a course in philosophy. Take training in qualitative interviews.</p> <p>Output: First draft of second part of the thesis concerning an Heideggerian approach to temporality in phenomenology of psychopathology.</p>
Year 4	<p>Research: Developing a phenomenology of psychopathology regarding disruptions in temporal experience based on Heidegger's philosophy of time.</p> <p>Activities: Organizing a conference on temporality in the phenomenology of psychopathology. Conduct qualitative interviews with patients suffering from affective disorders to develop a phenomenological account of temporal disruption in psychopathology.</p> <p>Output: PhD-thesis on a Heideggerian approach to temporality in phenomenological psychopathology.</p>

6. Summary for Non-Specialists

What does it mean to be depressed? What is anxiety, actually? For answers to these kinds of questions, we usually turn to a psychologist or psychiatrist. However, too often clinicians consider 'depression' or 'anxiety' as a definite 'thing' with certain established characteristics that a patient can be identified as having. But this does not illuminate exactly *what it is like* to suffer from these conditions, how the world appears to a person that is depressed or anxious. For example, the Diagnostic and Statistical Manual of Mental Disorders includes that, for a diagnosis of depression, a patient has to have been suffering from a 'depressed mood' for at least two weeks. This tells us nothing of what a 'depressed mood' actually is.

Phenomenology is a philosophical discipline or method that studies the way things appear to consciousness. That is to say that we do not simply 'receive' the world as it is through input, but the way in which we experience the world is the result of structures of consciousness that precede and condition that experience. Phenomenology identifies these structures by describing and investigating first-

person experience. When it comes to psychopathology, phenomenology is used to describe and explain what exactly it ‘means’ or ‘feels like’ to suffer from a certain condition, and what exactly goes wrong in our way of enacting these structures that results in this or that experience. For example, phenomenologists have provided detailed accounts of depressive experience and have provided different explanations of why a depressed person experiences the world in this way.

Central to many phenomenological analyses is the way we experience time. That depression involves a distorted sense of time is confirmed by many clinical reports, but aside from the regularly reported ‘slowing down’ of time as experienced by a depressed patient, other core symptoms also entail a relation to temporal dimensions, such as hopelessness towards the future and excessive guilt over the past. Often, depressive experience is described as being “stuck in time”.

Contemporary phenomenologists have explained this experience in terms of a distortion in the way we make time ‘present’. This is because they employ the model of temporal experience developed by Edmund Husserl. But I argue that this model cannot account for the precise meaning of ‘being stuck in time’. For a depressed person, the future and the past are disclosed exclusively in the light of the present moment; there can no longer be any meaningful change, and the past looks the same as the present, too. In my view, this is not simply a disturbance in the way we remember, imagine or anticipate time (the way in which we make these temporal dimensions present). Rather, the problem is a disruption in the way in which one enacts time itself, that is limiting the view on the past and future to what is happening now. This conception is based on a different account of our experience of time, based on Heidegger’s philosophy, that distinguishes between now-time (time as made present) and primordial time (the unfolding of the time that we are).

Unfortunately, Heidegger is rarely used in phenomenological psychopathology. This is because a comprehensive and accurate interpretation of Heidegger’s account of temporality is currently lacking. This proposed PhD-research seeks to rectify this, by on the one hand providing a new interpretation of Heidegger’s philosophy of time, and on the other applying this account of time to the phenomenology of psychopathology.

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Ward Huetink

Curriculum Vitae

PERSONALIA

Name: Ward Huetink

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SKILLS

Academic reading and writing

Archival research

Proficient in Dutch and

English

Conversational in French and
German

EXPERTISE

Phenomenology

Philosophical Anthropology

Critical Theory

Metaphysics

Aesthetics

INTERESTS

Philosophy

Chess

Literature

Poetry

Cooking

PROFESSIONAL PROFILE

I am a passionate, dedicated and communicative student and employee. Every decision I have made over the past years has been to prepare for a career as a scholar. Besides completing my education with excellent results, I have held several positions as a student-assistant, spanning 5 years, teaching as well as conducting research. My international experience includes participation in the summerschool *Kierkegaard: The Individual in Global Society* at Copenhagen University and trips to Oxford, Cambridge and King's College in the context of the Humanities Honours Programme at Utrecht University. A PhD-fellowship is the ideal next step in my academic training.

ACADEMIC QUALIFICATIONS & EXTRACURRICULAR ACTIVITIES

EDUCATION

Research Master in Philosophy: Metaphysics & Epistemology
Radboud University, Nijmegen
2018-2021

Bachelor in Philosophy
Utrecht University, Utrecht
2015-2018

Bachelor in Law
Utrecht University, Utrecht
2011-2017

EXTRA-CURRICULAR ACTIVITIES

Humanities Honours Programme, Utrecht University (2016-2018). Conducted interdisciplinary research, presided over collaborations between the honours programmes of humanities and social sciences, organized a symposium on art and philosophy and visited classes in Cambridge, Oxford, King's College London and Edinburgh.

Held introductory lecture for OZSW (Dutch Research School of Philosophy) Youtube Philosophy Watching Group on Rick Roderick's 'The Self Under Siege', March 2021.

Volunteer student acquisition for the Humanities Faculty, Bachelor in Philosophy and Humanities Honours Programme at Utrecht University, 2016-2017.

Attended reading groups on Scheler's *Die Stellung des Menschen im Kosmos* and Spinoza's *Ethica*, 2020-2021. 41

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Book review: 'Zullen We Contact Houden' by Rob van Gerwen (2018), in: *Ongehoord Magazine*, no. 1, vol. 1 (2019).

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Book review: 'Going Nowhere, Slow: The Aesthetics and Politics of Depression' by Mikkel Krause Frantzen (2019), in: *Splijtstof*, no. 48, vol. 4 (2020). Cited on: <https://www.johnhuntpublishing.com/zero-books/our-books/going-nowhere-slow>

EMPLOYMENT HISTORY

STUDENT-ASSISTANT | Radboud University | 2019-present

Seminar Teacher

Teaching seminars for a course in philosophy for first- and second year students at the Faculty of Management Sciences.

RETAIL ASSOCIATE | Pluk & Proef, Putten | 2020-present

Part-time retail sales work at a local store for organic foods and sustainable products.

STUDENT-ASSISTANT | Utrecht University | 2016-2017

Archival Researcher

Locate copies of Spinoza's *Opera Posthuma* and *De Nagelate Schriften* in collections around the globe. Facilitate communications between researchers and inquire concerning the specifics of physical copies of Spinoza's work. Part of NWO-funded research project Spinoza's Web: <http://spinozaweb.org/>

HOSPITALITY | Pannekoekenhuis 't Uilenbos | 2009-2014

Waiter/Manager

Waiter at a local pancakehouse. Later took on a managing position.