CHAPTER FOUR

THEORIES OF CONSCIOUSNESS, THERAPY,

AND LONELINESS

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OVERVIEW: Prior chapters have discussed perceived differences and similarities between psychotherapy and philosophical counseling. However, yet unexplored are the possible implications of philosophies of mind for therapy. Can the theories about the nature of mind itself assumed by different psychological practitioners affect their capacity to adequately address the problems for which their clients seek therapy? In this Chapter, Ben Mijuskovic discusses the implications for therapy of three metaphysical/epistemological approaches to consciousness—materialism/empiricism, dualism/rationalism, and existentialism/phenomenology. In this context, Mijuskovic connects materialism to medication interventions and behavioral and cognitive treatments, and argues that materialist approaches are incapable of addressing what he considers to be the most basic universal human drive, namely, the struggle to escape loneliness. In contrast, according to Mijuskovic, the selfconscious, reflexive aspects of dualistic approaches, and the existential/ phenomenological approaches’s emphasis on intentionality of consciousness (the ability to venture outside itself to construct meanings), help to make each of these approaches more amenable to grappling with the challenges of loneliness.

So, do philosophical counselors, along with psychotherapists, also encounter similar challenges in their practices depending on the type of approach they take? Do cognitive behavioral approaches to philosophical counseling have a harder time dealing with loneliness than say, existential, phenomenological approaches? It is constructive to keep such questions in mind when exploring the approaches to philosophical counseling developed in Part 2 of this volume.

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**Theories of Consciousness, Therapy, and Loneliness**

I contend that in Western philosophy, there are three dominant paradigms of consciousness. And these three models have exhibited a direct impact on therapeutic approaches to psychiatric disorders. The first two opposing, indeed antagonistic, principles to be discussed—materialism/empiricism versus dualism/rationalism—have traditionally pitted Democritus against Plato; Epicurus against Plotinus; Hobbes against Descartes; Locke against Leibniz; Hume against Kant; Mill against Hegel; D.M. Armstrong against H.D. Lewis; and so on. It is the battle between the Giants (the materialists, protagorean empiricists, and Democritean behaviorists) and the Gods (the Platonic dualists, rationalists, and “idealists”) treated in Plato's dialogue, the *Sophist*. The third paradigm is Husserl’s and Sartre’s phenomenological and existential descriptions of awareness as grounded in the transcendent principle of intentionality while emphasizing the aspects of the freedom of consciousness.

**Implications for Therapy**

At least five distinct but related claims follow for materialism and empiricism (versus dualism, idealism, and rationalism):

(l) The brain is physical, material, spatially extended, and the "mind" is reducible to, identical with, or explainable by the brain (and/or the central nervous system); and since existence and materiality are identical, it follows, in effect, that the concept of the“mind” is completely eliminable as a helpful theoretical construct.

1. The brain is passive; it is programmed or conditioned from "without," by external, stimuli, causes, or agents; it is like a computer and essentially mechanically explained by appealing to a behavioral stimulus-response model.
2. Perception is a key term; thus, for example, the eye is stimulated by an external object and as a result an impulse is transmitted to the brain, which in turn causes, produces, or results in a sensation. The sensation is then connected to a desire, an affective impulse, and the desire is associated with an image of the desired object or action, which in turn then causes or is discharged in a series of physical behaviors (Hobbes).
3. Sensations are immediate, direct and atomistic; they can exist independently of other sensations. Accordingly, this conception naturally entails an "atomistic psychology" (Hume).
4. The "self' is not real; it's merely a fortuitous bundle, an aggregate of disparate, discrete sensations that are transiently huddled together and appear and disappear in a continual flux. As Hume declares, perceptions follow each other with inconceivable rapidity and exhibit a Heraclitean rate of flux.

The rationalist camp, in opposition, holds that there is something special about the mind and although it has a problematic relationship to the body (the problem of dualism and the mind-body problem), nevertheless the mind must be conceptualized along radically different guidelines and powers than those of the body.

1. It exists but it is *simple*, i.e., immaterial, without physical parts, unextended, incorporeal.
2. The mind is active, spontaneous, free, and independent of external and material forces or causes.
3. It is self-conscious, reflexive; it can think upon its own thoughts, it can curl back on itself.
4. Since the mind is immaterial, i.e. "simple," it intrinsically follows that there is a unity of consciousness and that I know that my thoughts are my own and not those of someone else.
5. There is a real self, the ego is a genuine substance; and one has a "privileged access" to his or her own states of awareness; thus only I can *know* that I am in pain; you can only *infer* it (Descartes).

This approach in therapy promotes the past as it strives to uncover the hidden or forgotten layers of pain and distress hidden within the depths of self-consciousness and possibly unconsciousness. Prime examples are the therapeutic programs offered by Freudian psychoanalysis.

These two models of consciousness have dominated Western philosophy and psychology since their ancient common beginnings and we would do well to recall that the two disciplines were originally one, certainly in Plato but even in Aristotle, although, to be sure, The Philosopher deals with them in separate treatises. However, there is yet a third picture of consciousness which appears in the late nineteenth and early twentieth centuries and it is one that is put forth by Franz Brentano, the early Husserl, and Jean-Paul Sartre. It assumes the following:

1. Consciousness, which is not equal to *self*-consciousness (nor, of course, to passive perceptions) is immaterial, either as a phenomenological sphere of being (Husserl) or an existential "nothingness," the latter involving a correspondent awareness of nonbeing/negation/absence (Sartre).
2. It is radically free, spontaneous, without pre-existing forms or immanent structures; each of us is absolutely alone and perforce condemned to freedom; indeed, freedom is a direct consequence and implication of social unrelatednss.
3. Consciousness is intentional, beyond itself, transcendent; it is meaning-intending; it *creates* or constitutes objects, moods, and absolute values from within itself, from its own internal resources and hence independently of external or environmental factors and constraining public pressures.
4. The ground of the unity of experience derives from posited constitutive meanings projected "beyond" one's "self"; thus meanings are transcendent to consciousness; or they are grounded in projected values, for instance, and not derived from nor rooted in a substantial, enduring self.
5. There is no metaphysical self or theological soul underlying our states of consciousness. Accordingly, as suggested above, one of the oddities of Sartre's model of translucent consciousness is that his concept of absolute freedom depends on the hermitic isolation and loneliness of the individual without ties to God, human nature in general, or society in particular—and yet there is no Cartesian, Kantian, Husserlian ego (as in the later *Cartesian Meditations*) "behind" or "beneath" awareness. The self is not a substance, not an enduring entity. This critical consideration makes it difficult to assign moral responsibility; freedom is guaranteed but it is the freedom of no one.

This type of therapy points toward the future and subjective responsibility; indeed it is argued that the individual voluntarily chooses his "symptoms" and should assume responsibility for them. It is pointless and cowardly, Sartre insists, to blame our parents, others, or our environment for either our unhappiness or our values.

**Implications for Therapy**

As therapists, does it make any difference as to which theory of awareness we subscribe? Does it really matter if we believe that human reality is grounded in the brain; or the compromised and injured mind’s biography and history; or in an individual's sense of radical freedom? It not only makes a difference but indeed all the difference because one's assumptions about mental reality, broadly conceived, dictate the method of treatment.

Materialism commits one to believe that all mental disorders are due to chemical imbalances in the brain and that treatment is to be conducted along the lines of behavioral contracts and measurable goals. Cognitivebehavioral methods are increasingly promoted by American psychiatrists and psychologists. Indeed, the 1990's was christened, by the American Psychiatric Association, as "the decade of the brain," as the profession committed itself, with all its scientific and technological optimism, to soon curing all "mental," i.e. brain, disorders by first analyzing, secondly dissecting, and then applying chemical interventions via medications. In fact, more recently and more frequently there is an increasing but fully predictable tendency for materialism—i.e., physiology—and medication to partnership in their therapeutic approaches. Also, not surprisingly, the focus of this form of treatment resides in the temporal present and directly observable behaviors. The past is irrelevant and the future illusionary.

Accordingly, in the early 1960's, the American Psychiatric Association assured the various states in America that the bulk of the institutionalized mental patients could be treated successfully in the community simply on the profession’s promise of the efficacy of new and emerging psychiatric medications. How well that has worked, I can only leave to the reader's own judgment to evaluate. Consider the fact that all psychiatric medications involve negative side effects and that some of them, namely, sleep, anxiety, and pain medications, are downright addictive and lead to both tolerance and withdrawal symptoms. It is also the case that the major tranquilizers are so sedating that they numb the brain, that cognitive associations are appreciably delayed, and that patients—the emphasis being on passivity—feel and think they have been drugged; they complain that they feel they are in a fog as both concentration and memory are severely impaired.

America, as a culture, firmly believes in the efficacy of technology and science and is more than willing, as Dostoyevsky illustrated in the "Grand Inquisitor" passage of the *Brothers Karamazov*, to trade in freedom for happiness. Faster production of manufactured goods and faster cures naturally seem to go together. We are all in a rush to get to wherever it is we are going and processing thoughts and extensive psychotherapy are far too slow. However, if one were to pause and reflect on how long it has taken to develop a serious mental illnesses in virtually all cases, short of substance abuse, then it seems naïve to think that all that is required is the “right” medication, the correct tinkering with the brain’s chemical imbalance. How short sighted can it be to assume that an infant, who is removed from the mother’s custody at birth, and grows up in one foster home after another, can simply be repaired by the mechanism of hitting a certain combination of pills. It may work for slot machines but it seems totally at odds with what we know about human beings and, more importantly, our selves.

But the most serious disadvantage of the behavioral method of treatment and psychiatric medications is grounded in the fact that they are "external" approaches to what is basically an internal problem, a crisis within consciousness, one which involves the full panoply of the dynamics of loneliness, forces which intrinsically incorporate narcissism, depression, hostility, anxiety, and the subjective sense that one is unable to communicate their distress to others. These dynamic factors constitute intrinsic *a priori*  but synthetic structures *within* self-consciousness. I would argue, therefore, that the model of self-consciousness, which originally derives from Plato and actually continues on into the Cartesian, Leibnizian, and Kantian theories of self-consciousness (and “descending” into the unconscious), ends in stressing the primary role of insight in therapy. Indeed, although Freud is correctly interpreted as a psychological determinist, with the traumatic event serving as the cause and the neurotic symptom functioning as the effect, nevertheless Freud clearly believes that it is by and through the self-conscious uncovering of the painful past that we are freed.

One of the most distinct advantages of the focus on reflexivity in the subject is that it allows for the full exploration, expression, and disclosure of the dynamics of loneliness within the labyrinthine vessels of the mortal soul. This presents a powerful alternative over behaviorist therapies and medication interventions limited as they are by their external and physical methods. Loneliness is a self-conscious phenomenon as evidenced by the fact that we can be lonely in a crowd. This is important because, as I have continued to stress, the drive to escape loneliness is the primary and universal motivational desire in each human being. If we are persuaded to grant the preceding descriptions concerning the critical role of loneliness in human existence, then we are now in a position to inquire how the intentionality paradigm of Sartre, with its radical freedom of conscious activity, grounded in the exploding freedom of positing meanings, moods, and values, can be related and incorporated within the principle of selfconsciousness, of reflexivity. The answer is that the mind exhibits two mental activities: self-conscious mental activities and intentional mental activities. The former are self-enclosed and the latter struggle to escape this threatening enclosed circle of awareness.

The paradox of man is that he is trapped in his own hermitic selfconsciousness and yet that he yearns to escape his solipsistic prison of awareness. The attempt to do so forces him to try to relate to other animate creatures beyond himself, whether God, humans, or brutes. But like a false key that merely leads to another cage, he remains condemned to loneliness. On one level, man may be indeed a “social” being, as Aristotle observes, and apart from others he is either a beast or a god but not a man, as The Philosopher declares. However, his very social impulses are merely derivative and secondary to his primary feelings of loneliness and the latter drive will always remain unfulfilled. And yet man is forced to continue trying to escape, to keep attempting to burrow through a passage into the next cage.

To conclude: I simply am not convinced that materialism, behaviorism and medication have a great deal to offer beyond physical control of the person. By stimulating hyperactive children with Cylert and Ritalin and all the way through to sedating psychotics with numbing major tranquilizers, medications that essentially alter the brain but leave the mind's problems intact and unresolved, we have failed to deliver the promised cure. What needs to be recognized is that man is a paradox because he exhibits two very different powers within the mind that need to be constantly reassessed by our reflective thoughts. The self-aware element dooms him to inescapable loneliness; its circular activities and features imprison him in a mental world of his own making. As Brand Blanshard remarked, in *The Nature of Thought*, man is like a nautilus who dwells in a house of his own making. By contrast, the dynamic of intentionality enables him to at least quixotically attempt an infinite number of escape strategies that are essentially transient but often give her or him the hope and the temporary consolation of connecting with other consciousnesses, be they divine, human, or primitive. Indeed, the very worst terror would be to be immortal but continue to exist eternally as the only self-conscious being in a lifeless universe. As Joseph Conrad expressed it, “we are lonely from the cradle to the grave and perhaps beyond.” Hopefully not!

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