

# The Interface Between Sartre's Theory of Emotions and Depersonalization/Derealization

Rena Kurs<sup>1</sup>

© Springer Science+Business Media New York 2017

**Abstract** Human beings are emotional beings and emotions are one's way of relating to the world. Sartre's *Emotions, An Outline of a Theory* lies on the borderline between psychology and philosophy. In this paper I will attempt to present the interface of Sartre's philosophical theory of emotions with the signs and symptoms of depersonalization/derealization syndrome as presented in the psychiatric/psychological literature. I will begin by concisely situating Sartre's concept of emotions within the Sartrean doctrine of existentialism, and follow with a brief summary of Bernard Frechtman's translation of Sartre's "The Emotions, An Outline of a Theory". I will focus on the Introduction and Chapter Three, where Sartre presents the findings of his phenomenological study that purport to reveal the "essence" of emotions. Next, I will introduce the diagnostic components of the depersonalization/derealization syndrome which is a subcategory of dissociative disorders as defined in the Diagnostic and Statistical Manual of Mental Disorders, 5th edition (2013) as well as criteria of International Classification of Diseases—10th edition (1992) and highlight the similarities with Sartre's characterization of emotional behavior. Finally, I will attempt a brief comparison between Sartre's theory of emotions and depersonalization/derealization syndrome using literary and philosophical critiques of Sartre's "Emotions" and theoretical as well as research papers from the psychiatric literature. The focus will be on the similarities and incongruities between Sartre's characterization of emotions and psychiatric diagnoses of depersonalization/derealization syndrome.

**Keywords** Depersonalization · Derealization · Emotions · Sartre

---

✉ Rena Kurs  
rena@sm.health.gov.il

<sup>1</sup> Sha'ar Menashe Mental Health Center, Mobile Post Hefer, Hadera 37806, Israel

## Existentialism

Sartre's theory of emotions is part and parcel of his doctrine of existentialism. Thus, in order to understand the role that Sartre attributes to emotion, it is important to place emotion within the context of his broader philosophy of human existence and human reality. For Sartre, the starting point for existentialism is that human existence precedes human essence (Sartre 2007, p. 20). As an atheistic existentialist, Sartre claimed that there is no universal a priori "human nature" or basic human qualities (Sartre 2007, p. 22). What he meant by this was that, in contrast to a manufactured object such as a paper knife—the concept and purpose of which pre-exists the actual physical object (the knife must be sharp enough to cut paper, otherwise it is not a paper knife)—human beings have no pre-determined purpose (Sartre 2007, p. 20). Sartre stated that a person is a "being whose existence comes before its essence", and *that* in Heidegger's term is, "human reality" (Sartre 2007, p. 22). Thus, a human being first arrives in this world, and then defines and makes something out of himself.

The basis of human reality is that one must choose what he will become.

"...man first exists: he materializes in the world, encounters himself, and only afterward defines himself. If man as existentialists conceived of him cannot be defined, it is because to begin with he is nothing. He will not be anything until later, and then he will be what he makes of himself" (Sartre 2007, p. 22).

The fact that a human being is first thrust into the world is a given. However, who he is, or who he becomes is totally dependent on the choices that he makes and the actions he takes. According to the existentialist's definition of a human being, when one first appears in the world he is nothing. He becomes something only when he makes something of himself, through his actions.

A human being's starting point, according to Sartre is subjectivity (Sartre 2007, p. 20). One defines his own essence because he has the freedom to choose whatever he wants. Sartre rejects the idea that one is free not to choose, because by not choosing, one is making a choice not to choose. A human being cannot escape freedom, and cannot blame determinism, but must take responsibility for his actions.

"Whatever he does, he cannot avoid bearing full responsibility for his situation" (Sartre 2007, p. 45).

Whatever one chooses to do; he must take full responsibility for the situation he is in. Responsibility is not an (external) demand but accompanies one's feeling of freedom. That is to say, when you experience freedom you experience responsibility.

Man makes himself; he does not come into the world fully made, he makes himself by choosing his own morality, and his circumstances are such that he has no option other than to choose a morality. We can define man only in relation to his commitments (Sartre 2007, p 46).

Thus, there is no prescribed morality to guide a person in making the right decision. Owing to his circumstances, one must take a stand and choose a morality, (define his values). This means that the very act of choosing one's own ethics makes a person who he is. Sartre stressed that the circumstances in which one find himself force him to constantly define himself by choosing various courses of action. Through involvement and the choices a person makes, that person is able to define himself.

## Free Choice

The past corresponds to the facticity of human life. One cannot choose the factors that are already given, such as time, environment and place of birth. However, one is free to use those factors to create his life as he chooses. External factors cannot determine what a person is, one must pave his way through life ourselves from the inside (Sartre 1957a, b). Just as the artist while free to create follows the constraints imposed by his medium, so his actions, while not governed by rules are constrained by the choices he and others have made.

Every individual must exercise his freedom in a manner that does not lose sight of his existence as a facticity, as well as a free human being.

“...man is condemned to be free: condemned, because he did not create himself, yet nonetheless free, because once cast into the world, he is responsible for everything he does.” (Sartre 2007, p. 29).

According to Sartre, one is condemned to be free because there is no creator, no external source that provides a plan for the essence of the human being. Thus, since one cannot explain his actions or behavior by referring to a priori human nature, he is condemned to make free choices and must take responsibility for his choices. Responsibility is imminent to freedom. A person's whole life and the values he projects are then the outcome of the choices he has made and the actions he has taken. This understanding can only be obtained through living one's particular life and avoiding the pitfalls of strategies of self-deceit. Self-deceit occurs when under pressure from external sources such as society or the environment, one forfeits innate freedom by acting inauthentically. According to Sartre, one's choice can potentially lead to bad faith,<sup>1</sup> where one's true nature as for-itself (consciousness in relation to something else) is cast off in order to assume that of the in-itself (non-relational independent consciousness). The only way one can escape self-deception is through authenticity, by choosing to reveal the existence of the for-itself as both factual and transcendent. Bad faith is the denial of freedom (the devil made me do it) or the denial of responsibility (it is only me and affects nobody else). By taking responsibility for one's choices, without using excuses such as predetermined

---

<sup>1</sup> “Bad faith is a philosophical concept used by existentialist philosophers Jean-Paul Sartre and Simone de Beauvoir to describe the phenomenon where human beings under pressure from social forces adopt false values and disown their innate freedom, hence acting inauthentically. It is closely related to the concepts of self-deception and resentment” (J. Childers/G. Hentzi eds., *The Columbia Dictionary of Modern Literary and Cultural Criticism* (1995) p. 103).

“human nature” one realizes the authentic option which represents the realization of a universal in the singularity of a human life (Onof 2016).

I am therefore responsible for myself and for everyone else, and I am fashioning a certain image of man as I choose him to be. In choosing myself, I choose man (Sartre 2007, pp 24–25).

This means that through one’s choices, one commits not only himself, but to all of humanity. By choosing a specific behavior, a human being affirms the values of what he chooses. According to Sartre, human beings always choose what is good, and what is good for one is good for all. Since existence precedes essence and human beings already exist when one fashions his image, the image he fashions is valid for all and for the era in which he lives. Man is therefore responsible not only for himself, but also for everyone else. Man’s singular choices, then become universal for all mankind (Sartre 2007, p. 25).

## Consciousness

Consciousness is awareness of something that is other than consciousness itself. For Sartre, consciousness of one’s surroundings is different from reflecting on this consciousness. Consciousness, before one thinks or reflects on it is called pre-reflective consciousness, (focuses on a thing, not on itself). Reflecting on the pre-reflective consciousness is called reflective consciousness.

In this sense consciousness always requires being self-aware (being for-itself, the thing is for it), as opposed to the pre-reflective state of mind which is immediate and first-personal ‘givenness’ of experiential phenomena (Gallagher and Zahavi 2015). Thus, for Sartre, consciousness also entails an awareness of our separation from the world, and hence freedom to choose how to relate to the world. Human beings can manipulate these two levels of consciousness, the pre-reflective and reflective, so that one’s reflective consciousness interprets the factual limits of one’s objective situation as insurmountable, while pre-reflective consciousness remains aware of alternatives (Flynn 2013).

## Emotions

Emotive behavior is associated with physiological effects on the body such as slightly accelerated respiratory rhythm, slight increase in muscular tonicity (Sartre 1948, p.15). However, for Sartre, emotions do not exist as a corporeal (bodily) phenomenon because the body does not have the capacity to bestow a meaning on its own manifestations. That means that rapid heartbeat or increased muscle tone alone cannot explain or define the associated feelings. Human beings will seek something beyond the physiological disturbances, and this something is emotion, the feeling of joy or sadness. These feelings are not externally imposed. They exist only to the extent that they are consciously assumed by human reality. Thus, one consciously chooses his emotional actions or behaviors (Sartre 1948, p. 19). However, emotive behavior differs from other behaviors. It does not intend to act on the object of the emotion using any specific means. Rather, emotive behavior seeks

to confer upon the object of the emotion a lesser (or greater) existence. The body, directed by consciousness attempts to change its relations with the world so that the world may change its qualities. It is an attempt to transform the world by changing ourselves. Sartre gives the example of passive fear. I see a wild animal coming toward me, my legs give way, my heart rate becomes feeble, I become pale and faint. On the rational level this behavior seems to make me defenseless in the face of danger. However, Sartre explains, lacking the power to avoid the danger by "normal methods", I wanted to annihilate the danger, and that demanded "magical behavior". In order to eliminate the danger that was an object of my consciousness I was able to do so only by fainting, and eliminating consciousness itself. Fainting, for Sartre is the transition to a dream consciousness, it is a magical behavior, a way of "unrealizing".

Thus, the true meaning of fear is apparent; it is a consciousness which, through magical behavior, aims at denying an object of the external world, and which will go so far as to annihilate itself in order to annihilate the object with it (Sartre 1948, p. 64).

The emotion of fear is a consciousness that uses the magical behavior of fainting to remove the object of the fear from the external world, even if it means annihilating itself (by fainting) in order to do so.

Emotion is a change in attitude that is projected onto the world via an affective quality; this quality is then experienced as a real change in perception that justifies our attitude. If emotion is a joke, warns Sartre, it is a joke human beings believe in (Sartre 1948, p. 61). Emotions are spontaneous in our pre-reflective consciousness which is aware of our separation from the world and of the alternatives in our situation. Because one's emotions are in pre-reflective consciousness, one has the freedom to choose how to use them to relate to the world, e.g. to the dangers that confront him. This freedom to choose infers one's responsibility for those choices.

Once in the world, a person is surrounded by things to be done. Human beings have a cognitive and conscious relation to the world, because people are nothing but what they choose to become. Their essence consists of what they choose to do, to know, and how they choose to see the world. Emotion arises when they choose to see the world in a particular way, namely the magical. When faced with an object that poses an insurmountable problem, one attempts to view it differently, as though it were magically transformed. Thus an imminent extreme danger may cause one to faint so that the object of fear is no longer in his conscious grasp. The essence of an emotional state is thus not an inherent feature of the mental world, but rather a transformation of the subject's perspective upon the world.

By virtue of the choices one has made, one is responsible for what he has made of himself and for the "world" in which he functions. Emotions are meaningful contributions to the way one understands the world. Our emotive behavior represents the choices one makes when confronted by extreme situations. The magical transformation of emotion which is the activity of consciousness, changes the way reality is experienced by the subject (Hatzimoysis 2011).

By taking responsibility for one's emotions, one can choose how to function and understand the world. In line with Rational Emotive Behavior Therapy, one's language should be in line with one's responsibility.

"Thus instead of saying, 'I can't help feeling depressed,' we should rather say, 'I won't (or I don't choose to) address my depression'. Addressing one's emotions typically involves working on them not just cognitively but also behaviorally. Thus REBT combines both cognitive and behavioral techniques. For example, an REBT therapist or life coach might instruct a person who has intense anxiety about dating to push herself to go out on a date. By getting rid of the 'can't' as in 'I can't help my anxiety' and replacing it with 'I won't' the anxious individual takes an important step toward overcoming the anxiety. For now, she has no excuses to fall back on but the lack of her own choosing" (Cohen 2009, p. 290).

Cognitive-behavior psychology, especially Rational Emotive Behavior Therapy (REBT) aims to help people overcome similar emotion-associated problems such as depression, anger and guilt, by helping individuals to choose to take responsibility of their emotions. For example, instead of blaming others or external circumstances by saying "you are aggravating me" or "the dog is frightening me", using REBT, one can use "responsibility-bearing language" and say "I am aggravating myself" or "I am afraid of the dog". By blaming others, one disclaims the ability to deal with one's emotions, Existentially, this would be considered living an inauthentic existence, by engaging false pretenses or excuses. Taking responsibility for one's emotions, enables constructive change (Cohen 2009, p. 290).

Though REBT focuses on the cognitive, behavioral and also the rational and emotive and seems to coincide with humanistic and existential views, it avoids Sartre's claim that human beings were absolutely free.

## The Emotions, Outline of a Theory

Sartre's *Emotions, An Outline of a Theory* lies on the border between psychology and philosophy in that it proposes a phenomenological theory in place of what he believes to be psychological misconceptions. Sartre refutes various classical and psychoanalytic affect theories. He takes on the task of presenting a phenomenological account of emotion to correct what he considers mistakes. Sartre supersedes the conventional picture of the passivity of human emotional nature with the position that one actively participates in his/her emotional experiences. He criticizes his contemporary scientific or pseudo-scientific psychology and psycho-analytic methods. Sartre maintained that positive psychology draws its findings from experience by collecting accidental facts, a method he felt, that could not successfully identify the characteristics of emotions as a conscious phenomenon. In that respect, psychology, according to Sartre, was similar to other sciences that try to organize facts and interpret them until they are no longer isolated phenomena, but rather a component of a larger context, and thus, part of the psychic life.

“... the natural sciences do not aim at knowing the world, but the possible conditions of certain general phenomena” (Sartre 1948, p. 6).

Sartre concluded that it is impossible to reach essence by merely accumulating facts. The scientific method is not applicable when seeking essence because the natural sciences do not aim at knowing the world, but rather seek to know the possible conditions of certain general phenomena. In addition, the psychic facts accumulated by the psychologist are never the first facts. They are essentially, one's reactions to the world. Therefore, they can only be fully understood if one's notions of the world are first elucidated. One must go beyond the psychic, beyond the person's situation in the world, to the source of the human being and the world. Sartre, in line with Husserl's discipline of phenomenology, believed that essences and facts are incommensurable, and that an inquiry based on facts does not arrive at essences. Thus, according to Sartre, if one does not have access to the essence of emotion, it would be impossible for one to identify the facts related to emotion from among the mass of psychic facts.

Sartre introduced phenomenological psychology. He proposed a novel thesis wherein a human being chooses his emotions. He claimed that physiological explanations of emotions are not satisfactory, because taken by themselves, they are meaningless, because emotions are not a psychophysiological disorder. For example, physiological manifestations associated with anger differ only in intensity from those that often accompany joy (slightly increased heartbeat and muscle tone), however anger is not more intense joy. Emotions have an essence which can only be revealed in a phenomenological study. It remains to be proven whether emotions can withstand a phenomenological investigation, and whether or not emotions are indeed a phenomenon with signification.

Sartre argues that “Emotional consciousness is, at first, consciousness of the world.” (Sartre 1948, p. 51). Thus, consciousness of emotion is consciousness of the world, a mode of apprehending reality. Emotions are characterized by a change of intention.

“The impossibility of finding a solution to the problem objectively apprehended as a quality of the world serves as motivation for the new unreflective consciousness which now perceives the world otherwise and with a new aspect, and which requires a new behavior — through which this aspect is perceived — and which serves as hyle for the new intention” (Sartre 1948, p. 60).

This means that when one is faced with a problem the solution to which seems impossible, one's unreflective consciousness is motivated to see the world from a different perspective, and requires a person to change his attitude as to how to relate to the situation.

A person deliberately focuses on an object and can recognize what he feels in the emotion. A person knows what the emotion signifies to himself. He is aware of the signification of the emotion because he consciously chooses specific emotive behaviors to respond to a specific affective object.

“..an emotion refers back to what it signifies. And, in effect, what it signifies is the totality of the relationships of the human reality to the world” (Sartre 1948, p. 93).

Emotions in general signify the wholeness of the relationships of the human being to the world.

It is important for Sartre to claim that emotional consciousness is unreflective because people perceive the problem in their unreflective consciousness—the problem is what it is.

“I did not leave the unreflective level, but, lacking power to avoid the danger by the normal methods and the deterministic links, I denied it” (Sartre 1948, p. 62).

The danger existed in the unreflective state of consciousness (it was there), I did not leave that state of consciousness. Without even reflecting on the situation, I denied the danger because I could not avoid it.

Comprehension of the world, as experienced by emotions, according to Sartre, is a transformation of the reality.

“It is a transformation of the world. When the paths traced out become too difficult, or when we see no path, we can no longer live in so urgent and difficult a world. All the ways are barred. However, we must act. So we try to change the world, that is, to live as if the connection between things and their potentialities were not ruled by deterministic processes, but by magic” (Sartre 1948, p.58–59).

That is, by denying the danger, one is transforming the world. He is annihilating the object of the danger. When the plans one has made become complicated or when one sees no way out, and can no longer live in such a difficult world, one feels as if he is between a rock and a hard place. This is not a reflection or assessment of the situation; it is the seizure of an urgency. The person must do something, so he transforms the reality—he changes the world, by changing the object of the danger. The danger can be eliminated only by eliminating the object of the danger from consciousness, and one can do that only by eliminating consciousness itself. The annihilation of the object is the transformation of human reality, by magic.

Sartre admits that emotive behavior is not effective. It is not on the same plane as other rational behaviors, and therefore does not aim to neutralize the object of the danger by using rational effective means, but rather seeks to bestow upon the object a lesser presence (Sartre 1948, p. 60), such as by eliminating the object from one’s consciousness.

According to Sartre, emotion is essentially an intentional act because it requires an object to exist. A man who is afraid is afraid of *something*. A man who is angry is angry at *someone or something*. There is an affected subject and an affective object that are firmly bound. Emotion is the way the affected subject apprehends the affective object. The emotional act is thus a “signification” a freely chosen attitude toward the object and the world; emotions therefore have a meaning that can be attributed only to the subject. For example, if a person seeks a solution to a practical



problem and fails in his attempts to find one and becomes irritated, his irritation is the way in which the world appears to him (Sartre 1948, p. 52).

One's pre-reflective consciousness apprehends the difficulty and then tries to transform itself in order to transform the object. In stressful situations one acts upon the world and changes it in line with his perceptions.

Sartre gives the following example that fits emotions that are distressing such as anger or despair.

I extend my hand to take a bunch of grapes. I can't get it; it's beyond my reach. I shrug my shoulders, I let my hand drop, I mumble, "They're too green," and I move on (Sartre 1948, p. 61).

When I can't reach the branch with the grapes I would like to eat, I perceive that they are green and sour. Conferring the quality of being "too green" on the grapes replaces the action I am not able to perform. One is aware of the world of objects and one is also aware that he is acting. When I realized that I could not reach the grapes that at first seemed appealing, the inability to reach them motivated me to see the grapes as too green—and that mode of apprehension resolved the conflict and ended the tension. Because I could not reach the grapes, I adopted the idea of the tartness of green grapes by assuming the behavior of disgust, and magically conferring the required quality on the grapes—The incantatory behavior is emotion (Warnock 1965, p. 39).

An additional example is the feeling of horror that one might experience on seeing a face at the window.

For example, suddenly a grinning face appears flattened against the window pane; I feel invaded by terror. Here, evidently, there is no behavior to take hold of; it seems that the emotion has no finality at all. Moreover, there is, in a general way, something immediate about the perception of the horrible in certain faces or situations, and the perception is not accompanied by flight or fainting (Sartre 1948, p. 82).

Through the window, I suddenly see a face that is grinning and I am horrified. The object of the terror acts upon me with an immediacy, and I do not use the normal categories of what is possible to do and what is not possible to do.

The concept of magic has a double role—The object of terror acts upon human beings immediately and is devoid of categories of the possible and impossible. Rationally one could deduce that because the window is shut the man cannot get in, and even if he did he would probably not cause harm. However, these possible assumptions do not share the horrific vision of the face in the window. There seems to be no spatial or protective separation between us and the face. Since the face terrifies us as a magical object that has no physical constraints, we attempt to magically combat the danger. We do not perform rational actions to reach our goal but we blot out the horror by screaming and fainting. According to Sartre—even when one runs away in fear, it is not in order to take shelter. One runs only if he can't annihilate himself by fainting, in order to magically render the object of terror non-existent. The "magical" is the name Sartre ascribes to the many fundamental

ways human beings have of seeing the world. It is an inferior and more primitive mode of perception than one is generally accustomed to (Warnock 1965, p. 40).

Sartre emphasizes that emotional behavior is unreflective. The subject “lives” the magical transformation in the unreflective state: it is the world, not the individual which seems changed. Sartre claims that since emotion is purposive, (the transformation of a world which has become too difficult), emotion must be more than an uncomplicated direct response to a stimulus followed by a perception of that response. Sartre refers to emotion as a “degradation of consciousness (Sartre 1948, p. 77). In emotion “consciousness is caught in its own trap” (Sartre 1948, p. 78). I am conscious of what is, and feel trapped by it, so I must transform it. Sartre’s emotions are self-deceptions. For Sartre emotional deceptions appear to be mostly negative—fear, sadness, horror, anger, disgust etc. According to Sartre anger is the emotion that has the most evident functional role. This supports his view that emotion is a reaction to situations perceived as overtly difficult. For Sartre, even joy is a response to a frustrating situation.

“... the joyous subject behaves rather exactly like a man in a state of impatience... He is informed that he has acquired a considerable sum of money ... But although the object is “imminent,” it is not yet there, and it is not yet his. A certain amount of time separates him from the object (Sartre 1948, p. 68).

The joyous person behaves impatiently. He has been notified that he is about to receive a lot of money, but from the time of notification of his good fortune, until he actually receives the money he is in an agitated state of anticipation or frustration.

Just like anger or fear, Joy is the response to a setback or frustration (Fell 1965, 13–20).

Sartre concludes that emotion is not an accident.

It is a mode of existence of consciousness, one of the ways in which it understands it “being-in-the-world” (E91).

Thus, emotion, for Sartre, is the way one encounters things in the world. Emotions are not imposed on human beings but are mobilized by a person for specific purposes in specific situations. One chooses whether or not to become irritated in a non-reflective way, or to become angry or afraid, depending on the situation one is facing and the objects one is up against. Emotions are not conscious of themselves but of their respective objects. In line with Sartre’s existentialist doctrine, one’s behavior and physical changes in response to the meanings one attributes to the objects are his own choices (Hart 1949).

## **The Interface Between Sartre’s Theory of Emotions and the Psychiatric Conceptualization of the Depersonalization/Derealization Syndrome**

In his phenomenological conceptualization of emotion, Sartre’s use of “magical behavior” brings to mind the psychiatric classification of the depersonalization/derealization subtype of dissociative disorder. The process of classification lies at

the root of scientific behavior. The goal of syndromal classification is to identify collections of signs and symptoms that will lead to the identification of disorders with a known etiology, course and response to treatment (Hayes et al. 1996). The term syndrome derives from the Greek and means literally “run together,” as the features do. In medicine, the term syndrome means a group of symptoms or phenomena that collectively indicate or characterize a disease, psychological disorder, or another abnormal condition. It is most often used when the reason that the features occur together, or the pathophysiology of the syndrome, has not yet been discovered (Syndrome 2015).

*The Diagnostic and Statistical Manual of Mental Disorders* published by the American Psychiatric Association (2013) is the most widely accepted nomenclature used by clinicians and researchers and has led to worldwide adoption of syndromal classification. The only widely used alternative is *The International Classification of Diseases (ICD)*, published by the World Health Organization which was a source document for the original DSM (American Psychiatric Association 1952), and there are continuous efforts to maintain compatibility between the systems (Hayes et al. 1996; World Health Organization 1949, 1992).

However, while seeking the interface between Sartre's theory of emotions and psychiatric diagnoses, it should be noted that Sartre felt that the scientific method could not successfully identify the characteristics of emotions as a conscious phenomenon because the natural sciences do not aim at knowing the world, but rather seek to know the possible conditions of certain general phenomena. Indeed, the conceptualization of depersonalization/derealization syndrome according to the DSM and ICD classification systems is based on “a collection of facts” (to use Sartre's term, Sartre 1948, p. 4), or more specifically, signs and symptoms that must be present to make the diagnosis.

There are some striking similarities between some of the diagnostic criteria for depersonalization/derealization and Sartre's descriptions of emotive behaviors in his phenomenological description of emotions as an “organized type of consciousness” (Sartre 1948, p. 12), in other words emotions as a human being's conscious response to a given situation.

In order to compare the concepts, a description of the psychiatric categorization of depersonalization/derealization disorder are presented.

### **DSM 5 Criteria for Depersonalization/Derealization Disorder**

In the DSM 5, depersonalization disorder was combined with de-realization and is categorized as a Dissociative Disorder. DSM 5 diagnostic criteria for Depersonalization/Derealization Disorder 300.6 determine that there must be continuous or periodic experiences of either one or both; depersonalization and derealization. Depersonalization is the experiencing of something not real or of feeling detached or being an observer of one's own feelings and thoughts or actions for example not seeing things as they are, and feeling emotionally and or physically immobilized. Derealization is the feeling of being detached from one's environment. People and objects seem dreamlike and not real. When one is experiencing depersonalization or derealization, he can continue to distinguish between his internal world of thoughts

and feelings and the external world. The symptoms significantly impact most levels of the individual's functioning (such as social and occupational). Depersonalization and/or derealization is not the result of substance abuse or any medical condition. Other mental disorders do not explain the disturbance (American Psychiatric Association 2013; p. 302).

## ICD10 Diagnostic Criteria for Depersonalization–Derealization Syndrome

F48.1 are as follows:

A rare disorder in which the patient complains spontaneously that his or her mental activity, body and surroundings are changed in their quality so as to be unreal, remote, or automatized. Among the varied phenomena of the syndrome, patients complain most frequently of loss of emotions and feelings of estrangement or detachment from their thinking, their body, or the real world. In spite of the dramatic nature of the experience the patient is aware of the unreality of the change. The sensorium is normal and the capacity for emotional expression is intact. Dissociative Disorder symptoms may occur as part of a diagnosable schizophrenia depressive phobic or obsessive compulsive disorder. In such cases the diagnosis should be that of the main disorder (World Health Organization 2010).

Depersonalization–derealization syndrome is an uncommon disorder, in which the individual experiences a change in the quality of his mental and physical environment which suddenly seems not real. The patient feels detached from his emotions and from his body, but remains aware that the change is not real. The senses remain intact. If these symptoms occur as part of a different psychiatric disorder, the diagnosis remains that of the main disorder.

There are inherent limitations that must be considered when examining the interface between two distinct disciplines. Each discipline has its own focus. For example, according to the Merriam-Webster dictionary, philosophy is *the study of ideas about knowledge, truth, the nature and meaning of life*, and psychiatry is *a branch of medicine that deals with mental or emotional disorders* (<http://www.merriam-webster.com/dictionary>). Thus, when studying the philosophical aspects of emotion we seek to know the nature of the meaning of emotions, and when studying the psychiatric aspects of emotions we examine the pathology and seek causality of emotional disorders in order to find a cure.

That said, and considering these limitations, there remains a clear overlap between Sartre's phenomenological/philosophical theory of emotions and the psychiatric syndrome associated with depersonalization/derealization.

The feeling of detachment from the environment, in particular emotional detachment, and unreal dreamlike, foggy experience is similar to Sartre's magical behavior and transformation of the world so that it is no longer a threat. However, while in the psychiatric diagnosis, these symptoms are the cause of clinically significant emotional or somatic distress, Sartre, is concerned with the meaning of the distressful situation and the conscious detachment from the environment.

Though for Sartre, stress is the precursor of the derealization, and according to the psychiatric diagnoses, stress may be the outcome of the emotional experience, in both, there is a diminished sense of agency. The psychiatric diagnosis describes “feeling robotic, lacking control of one’s speech or movements, and a feeling of unreality or detachment from or unfamiliarity with the world” (American Psychiatric Association 2013). The person feels as if he is no longer in control of his body, and becomes detached from the world.

Similarly, Sartre describes:

It is the same way that novices in boxing shut their eyes and throw themselves at their opponent. They want to eliminate the existence of his fists; they refuse to perceive them and by so doing symbolically eliminate their efficacy. Thus, the true meaning of fear is apparent; it is a consciousness which, through magical behavior, aims at denying an object of the external world.

The inexperienced boxer who is afraid, closes his eyes in order to detach himself from the world, and does not see the opponent’s fists, and thereby eliminates the danger.

In both descriptions, the person is dissociated from the reality of the situation. Sartre’s boxer, however chooses to close his eyes and thus transform the world. In psychiatric depersonalization, there is estrangement from one’s self, which in contrast to Sartre, is not a conscious choice.

This behavior is typical of individuals with depersonalization/derealization syndrome, who are characterized by harm avoidant temperament, immature defenses, and disconnection schemata (Simeon and Abugel 2006). Simeon and Abugel (2006) defines depersonalization as “a response that is intended to distance the self from overwhelmingly painful or conflictual impulses or feelings” and makes sense as a “Defense mechanism against over-whelming traumatic stress”. As an emotional response or as a syndrome, depersonalization seems to be a coping or defense mechanism that works to distance the individual from the traumatically stressful situation he is facing.

If one views emotions as having a neurochemical process, then many emotions may be spontaneous and may not be associated with conscious awareness. Many scientific researchers in the field of emotion agree that emotions best are described by a three component model, consisting of physiological, expressive and experiential components. Within this framework, the emotional process might not be in one’s consciousness, but some of its outcomes are; e.g. feelings, elevated heart rate, muscular tension, sweating (Lundqvist 2015). These “outcomes” coincide with Sartre’s descriptions of the physiological manifestations emotive behaviors.

According to the DSM 5 (American Psychiatric Association 2013, p. 302), mean age of onset of depersonalization/derealization disorder is 16 years. Less than 20% experience onset after age 20, and only 5% after age 25. Duration varies from hours/days to weeks, months or years. Course of the disorder is often persistent. About 1/2 discrete episodes, 1/3 continuous symptoms, 1/3 initially episodic that becomes continuous—for years or decades.

Sartre however, did not put age limits on magical behavior, and his descriptions present a transient characteristic to the phenomenon.

Alongside the mean age and the persistent course of illness described in the DSM, Sadock et al. (2014) have described that transient experiences of depersonalization and derealization are extremely common in both normal and clinical populations. A survey performed by the National Institutes of Mental Health revealed that half of the adults in the United States have had one or two brief episodes of depersonalization during their lives, usually as a result of severe stress. About one-third of those who are exposed to life-threatening situations develop brief periods of depersonalization, as do 40% of psychiatric inpatients (Putnam et al. 1996). Depersonalization/derealization are the third most commonly reported psychiatric symptoms after depression and anxiety. Depersonalization is common after life threatening experiences with or without serious bodily injury (Sadock et al. 2014, 454–455). The extremely common occurrence of the phenomenon of depersonalization and derealization among normal populations following life threatening experiences, lends support to Sartre's phenomenology of emotions. In line with the prevalence of depersonalization and derealization experiences, it seems that in the face of life threatening situations, it may indeed be "human reality itself in the form of 'emotion' " (Sartre 1948, p. 17). Emotion thus described is human consciousness of life threatening situations. Derealization may be the manner in which man who is faced with life threatening situations in his pre-reflective consciousness chooses to respond.

## Discussion

Ludovic Dugas, a French psychologist, introduced the term depersonalization to the medical literature in 1894. The word "depersonalization" itself was first used by the Swiss philosopher Frédéric Amiel, who lived from (1821–1881).

"I find myself regarding existence as though from beyond the tomb, from another world; all is strange to me; I am, as it were, outside my own body and individuality; I am depersonalized, detached, cut adrift. Is this madness?" (Amiel 1893).

I see myself as if I am looking down from another world, as if I am outside my own body. Everything seems strange to me, I am depersonalized, detached. Does this mean that I am mad? Amiel further explained that it seemed to him that those mental changes were actually philosophical experiences. Thus the first use of the term depersonalization was indeed a link between the philosophical and psychiatric phenomena.

In their introduction to the translation of Dugas' *Un cas de dépersonnalisation* (*The case of depersonalization*), Sierra and Berrios (1996) stated that depersonalization which has been recently associated with 'derealization' has given rise to medical speculation, philosophical inquiry, (in some forms of existentialism) and fictional writing. This claim perhaps sheds light on the breadth of the concept which extends beyond pure psychiatric diagnostics.

In their conceptual history of depersonalization, Sierra and Berrios (1997) claimed that the predominant view has been to conceive of the phenomenon of

depersonalization as a psychological disturbance of self-awareness. They cited Dugas' beliefs that depersonalization resulted from the lack of the feeling of agency which lead to a failure in the "personalization of behavior" meaning that the behavior was not experienced as belonging to the self.

Thus, the phenomenology of depersonalization has remained stable for the last 100 years. Core symptoms include visual derealization, altered body experience, emotional numbing, loss of agency feelings, and changes in subjective experiencing of memory (Sierra and Berrios 2001). It is noteworthy that in their conceptual history of depersonalization/derealization and subsequent works on depersonalization, Sierra and Berrios referred to the "phenomenology" of depersonalization/derealization. This brings to mind Sartre's phenomenological approach to emotions in general, which he presents using the terms of unreal magical behavior.

Depersonalization is a subjective mental phenomenon characterized by an altered awareness of the self. In addition to its occurrence in various psychopathological states, such as extreme anxiety, it has also been reported by normal persons under a variety of circumstances including environmental stress and life threatening situations (Sierra and Berrios 2001).

Noyes and Kletti (1977) conducted a study based on personal structured interviews with persons who described their experiences during extreme danger. The uniformity of their responses suggested that their behaviors were typical reactions to life-threatening situations.

Two typical descriptions of experiences of extreme danger:

".....I had a clear image of myself being killed. I saw this as though watching it on a television screen from an unusual angle, that is, I saw it from a distance of about 50 feet as though looking at the car from the side. I pictured this wreck occurring in slow motion... while all this was taking place I felt calm, even detached" (Noyes and Kletti 1977, p. 376).

"... As the car was spinning I had a relaxed kind of feeling like being stoned on "pot" or something. I gave no consideration to the danger. It just didn't exist. I had a sensation of floating. It was almost like stepping out of reality. I seemed to step out of this world, where you feel the sensation of your body in the seat and the air you breathe, into some other state. In that state I seemed to have no control over myself but everything seemed to working in harmony. For example, I didn't have the fear that in the next second the ceiling was going to rush in and crush me, which would have been realistic. Rather it seemed as though a machine or a physical law of nature was swinging me around and was going to bring me down unhurt. My attention was focused on what was happening inside the car and the rest of the world seemed very far away..." (Noyes and Kletti 1977, p. 377).

The emotional calm, feeling of unreality and sense of loss of control accompanied by invulnerability is especially noteworthy. Some described time as "not existing", detached calm or peacefulness, or feeling cut off from emotions but with a sense of assurance, and stability. In contrast, 69% of the interviewees described intense emotions such as debilitating fear, panic, anger, loneliness and sadness. An overload of emotions led to numbness. There were expressions of loss



of volition that were paradoxically often associated with a sense of invulnerability or magical control. The most common feature of depersonalization was a feeling of strangeness or unreality. 72% applied this description to themselves and 30% identified the world around them as unreal. Many felt as though the accident was not actually happening. There was an “AS IF” quality to the descriptions of many aspects of the depersonalized state.

These descriptions of depersonalization/derealization, bring to mind Sartre’s description of emotive behavior:

...in emotion it is the body which, directed by consciousness, changes its relations with the world in order that the world may change its qualities (Sartre 1948, p. 60–61).

This means that emotive behavior differs from other behaviors. It does not directly confront the object to find a solution. It consciously aims to change its relationship to the world in so that the world will change its qualities.

The accident victims felt removed from the situation. The “AS IF” quality they ascribed to their predicaments resembled Sartre’s changed relations with the world in order that the qualities of the world may change.

According to Anders (1950), for Sartre, human beings live in both a rational world and a magical one. When a situation is too difficult, or life threatening, or when a situation presents an impasse, one switches the difficult task and the world in which the difficult task arises to a different world which is less difficult and which has no threat. Emotion has a world of its own, and the emotional world differs from the world in which one behaves rationally.

Rather than rationally confront the danger, the person in the car crash seemed to step out of the rational world by employing the world of emotions, the rest of the world then seemed very far away.

According to Sartre, a person chooses to employ his emotions in order to make delusive judgments, thus emotions can be derealizations, or self-delusions.

Though he claims that emotions correspond to a unique world, the only real world is the one that appears in a rational pragmatic behavior. The world of emotions is iridescent. Emotion for Sartre is an act of departure from one’s rational state, in which one is able to take steps in the pursuit of his goals. Sartre never doubts that rational behavior is the norm. Sartre explains emotion as the “other” possibility of a human being. Sartre’s person chooses the magical world of emotions only in certain insuperable situations (Anders 1950).

The data presented by Noyes and Kletti (1977) suggest that depersonalization is, like fear, an almost universal response to life-threatening danger. It develops instantly in recognition of danger and vanishes just as quickly when the threat to life is past. The interpretation of depersonalization as a defense against the extreme threat of danger or its associated anxiety seems unavoidable. Thus in the face of life-threatening danger, individuals seem to choose Sartre’s magical behavior to remove themselves from danger. Detachment in the depersonalized state thus seems to be a major adaptive mechanism (Noyes and Kletti 1977).



## Conclusion

According to Sartre, emotion allows human beings to transform the world that has become difficult—it allows people to avoid difficulties. Human beings use magic to change their consciousness. If necessary, humans annihilate their consciousness by fainting in order to annihilate the object of their consciousness which is the cause of their fear or stressful situations. With derealization, human beings live as if the potential harm is not ruled by predetermined processes, but by the magic they have chosen to utilize.

Is Sartre's changing the world a type of avoidance? A defense mechanism?

Functional consequences of depersonalization/derealization include extremely distressing symptoms, affectively flattened and robotic demeanor that may seem incongruent with extreme emotional pain reported by those with the disorder.

There is a substantial body of literature demonstrating a link between experiencing trauma and various types of dissociative response (e.g. Chu and Dill 1990). Depersonalization disorder with its state of heightened arousal together with a diminishing emotional response, is often viewed as a defense mechanism when faced with severe stress, life threatening situations or trauma. However, although this response may be adaptive in the short or medium term, as in the response of normally healthy individuals to threatening situations, psychiatric patients diagnosed with the depersonalization/derealization subtype of dissociative disorder are not always able to overcome this response and return to their premorbid state (Senior et al. 2001).

Psychiatric patients demonstrate in their dissociation from revealing emotion, often through avoidance of painful choices, disabling emotional life (Mazis 1983, p. 186).

An overlap between Sartre's magical behaviors and depersonalization/derealization has been demonstrated. This type of dissociation is quite common in extremely stressful situations in the general population. As a symptom or experience, depersonalization is what many individuals encounter at some point during their lives. It is usually a brief episode, and has no lasting effects. However, depersonalization disorder is a chronic illness, with an agonizing long-lasting course.

When does an emotion become an emotional disorder? This is where the disciplines of philosophy and psychiatry part their ways. Sartre, the philosopher presented his phenomenology of emotions and focused on the meaning of emotions, and the aspects of emotions that are relevant to the philosophic discourse but are less relevant in when dealing with the causality of psychiatric disorders that require treatment. Sartre indeed rejected the scientific method and the classical psychoanalytic theories as he embraced the phenomenological approach in his theory of emotions which he called an experiment in *phenomenological* psychology. The scientific method he shunned with regard to emotions is the basis of medical research which lays the ground for psychiatric methodology. For Sartre, emotions are “an organized form of human existence” (Sartre 1948, p. 18), a state of being to be studied as a phenomenon (Sartre 1948, p. 21).

Albert Ellis, a clinical psychologist seems to have agreed with Sartre's views on psychoanalysis and concentrated on changing people's behavior by confronting them with their irrational beliefs and persuading them to adopt rational ones as he developed Rational Emotive Behavior Therapy (REBT). Cognitively, a central goal of Rational Emotive Behavior Therapy is to help clients make a profound philosophic change that would affect not only their current emotions, but also their behaviors (Ellis 1980, p. 326). In line with Sartre's approach, Ellis' Rational Emotive Behavior Therapy emphasizes the need for taking ownership of one's emotions and simultaneously working towards changing maladaptive behaviors (Habinsky 2016). For Ellis, psychology was cognitive as well as behavioral, and was also rational and emotive. However, though he believed it was humanistic and existential, in terms of freedom and responsibility, he avoided Sartre's claim that human beings were "condemned to be free". At the point in history when the philosophical trend was to "interpret" language, Ellis took the phenomenological approach to help individuals deal with their behavioral and emotional disorders in a rational manner (Cohen 2007).

In contrast, scientists seek causality rather than meaning. Emotional disorders, as conceptualized in the various psychiatric diagnostic manuals are illness processes with defined periods of onset, course of illness and hope for recovery. While the interface of the disciplines may contribute to broader mutual understanding of the emotions, each discipline maintains its unique focus.

**Acknowledgements** My most sincere thanks go to my advisor and mentor Prof. Shai Frogel. I thank him for introducing me to the wonders of philosophy and for his guidance, encouragement and support during the development of this work.

#### Compliance with Ethical Standards

**Conflict of interest** The author declares that she has no conflict of interest to report.

## References

- American Psychiatric Association. (1952). *Committee on nomenclature and statistics. Diagnostic and statistical manual of mental disorders*. Washington DC: American Psychiatric Association.
- American Psychiatric Association. (2013). *The diagnostic and statistical manual of mental disorders DSM-5* (5th ed.). Washington DC: American Psychiatric Association.
- Amiel, H. F. (1893). *Amiel's journal : The journal intime of Henri-Frédéric Amiel* (trans: with an introduction and notes by Mrs. Humphry Ward). New York: Macmillan.
- Anders, G. S. (1950). Emotion and Reality. *Philosophy and Phenomenological Research*, 10(4), 553–562.
- Chu, J. A., & Dill, D. L. (1990). Dissociative symptoms in relation to childhood physical and sexual abuse. *American Journal of Psychiatry*, 117(7), 887–892.
- Cohen, E. D. (2009). *Critical thinking unleashed*. Lanham, MD: Rowman & Littlefield Publishers Inc.
- Cohen ED. Albert Ellis' philosophical revolution. Alpert Ellis Tribute Panel, American Psychological Association Meetin, San Francisco, August 17, 2007. <http://www.rebtnetwork.org/library/tributes/cohen.html> . Accessed 18 Dec 2016.
- Ellis, A. (1980). Rational-emotive therapy and cognitive behavior therapy: Similarities and differences. *Cognitive Therapy and Research*, 4(4), 325–340.
- Fell, J. P. (1965). *Emotion in the Thought of Sartre* (pp. 13–20). New York: Columbia University Press.

- Flynn, T. (2013). Jean-Paul Sartre. In E.N. Zalta (Ed.) *The Stanford Encyclopedia of Philosophy* (Fall Edition). <http://plato.stanford.edu/archives/fall2013/entries/sartre>. Accessed 27 May 2016.
- Gallagher, S., & Zahavi, D. (2015). Phenomenological approaches to self-consciousness. In E.N. Zalta (ed.) *The Stanford Encyclopedia of Philosophy* (Spring 2015 Edition). <http://plato.stanford.edu/archives/spr2015/entries/self-consciousness-phenomenological/>. Accessed 27 May 2016.
- Habinsky E. REBT & Existential Therapy. <http://albertellis.org/rebt-existential-therapy/>. Accessed 18 Dec 2016.
- Hart, S. L. (1949). Review. *Philosophy and Phenomenological Research*, 10(1), 132–133.
- Hatzimoysis, A. (2011). *The Philosophy of Sartre*. Durham: Acumen.
- Hayes, S. C., Wilson, K. G., Gifford, E. V., Follette, V. M., & Strosahl, K. (1996). Experimental avoidance and behavioral disorders: A functional dimensional approach to diagnosis and treatment. *Journal of Consulting and Clinical Psychology*, 64(6), 1152–1168.
- Lundqvist, L.O. (2015). [http://www.researchgate.net/post/Do\\_unconscious\\_emotions\\_exist](http://www.researchgate.net/post/Do_unconscious_emotions_exist). Accessed 27 May 2015.
- Mazis, G. A. (1983). A new approach to Sartre's Theory of Emotions. *Philosophy Today*, Fall, 183–199.
- Noyes, R., & Kletti, R. (1977). Depersonalization in response to life-threatening danger. *Comprehensive Psychiatry*, 8, 375–384.
- Onof, C.J. John Paul Sartre: Existentialism. Internet Encyclopedia of Philosophy. <http://www.iep.utm.edu/sartre-ex>. Accessed 27 May 2016.
- Putnam, F. W., Carlson, E. B., Ross, C. A., Anderson, G., Clark, P., Torem, M., et al. (1996). Patterns of dissociation in clinical and nonclinical samples. *Journal of Nervous and Mental Disease*, 184(11), 673–679.
- Sadock, B. J., Sadock, V. A., & Ruiz, P. (2014). *Kaplan and Sadock's Synopsis of Psychiatry: Behavioral Sciences/Clinical Psychiatry* (11th ed.). Philadelphia: Lippincott Williams and Wilkins.
- Sartre, J.P. (1948). *The Emotions, Outline of a Theory* (trans: Frechman, B.). New York: Philosophical Library.
- Sartre, J.P. (1957). Existentialism is a Humanism, Lecture given in Paris on October 29, 1945 (trans: by Bernard Frechtman in *Existentialism and Human Emotions*). New York: Philosophical Library, pp. 9–16.
- Sartre, J.P. (1957). Transcendence of the ego (trans: Williams, F., Kirkpatrick, R.). New York: Farrer Straus and Giroux, pp. 80–82.
- Sartre, J.P. (2007). Existentialism is a humanism : (L'Existentialisme est un humanisme)/Jean-Paul Sartre; including a commentary on The stranger (Explication de L'Etranger) (trans: by Carol Macomber; introduction by Annie Cohen-Solal; notes and preface by Arlette Elkaim-Sartre; edited by John Kulka). New Haven : Yale University Press.
- Senior, C., Hunter, E., Lambert, M., Medford, N., Sierra, M., Phillips, M. L., et al. (2001). Introducing the Depersonalisation Research Unit at the Maudsley Hospital. *The Psychologist*, 14(3), 128–132.
- Sierra, M., & Berrios, G. E. (1996). A case of depersonalization by dugas. A translation and introduction. *History of Psychiatry*, 7, 451–461.
- Sierra, M., & Berrios, G. E. (1997). A conceptual history. *History of Psychiatry*, 8, 213–229.
- Sierra, M., & Berrios, G. E. (2001). The phenomenological stability of depersonalization: Comparing the old with the new. *The Journal of Nervous and Mental Disease*, 189(9), 629–636.
- Simeon, D., & Abugle, J. (2006). *Feeling unreal: Depersonalization disorder and the loss of the self*. New York: Oxford University Press.
- Syndrome. (2015). Stedman's Medical Dictionary. Houghton Mifflin Company. <http://dictionary.reference.com/browse/syndrome>. Accessed 12 May 2015.
- Warnock, M. (1965). *The Philosophy of Sartre*. London: Hutchinson University Library.
- World Health Organization. (1949). *Manual of the international statistical classification of diseases, injuries, and causes of death*. Sixth revision. Geneva: World Health Organization.
- World Health Organisation. (1992). *The ICD-10 classifications of mental and behavioural disorder: Clinical descriptions and diagnostic guidelines*. Geneva: World Health Organization.
- World Health Organization. (2010). <http://apps.who.int/classifications/icd10/browse/2010/en/#F48>. Accessed 10 May 2015.