

De-situated minds: The role of the environment in understanding depression

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1 INTRODUCTION

A significant number of contemporary psychopathology researchers are challenging the discipline's long-held neurocentrism. Researchers are increasingly becoming aware of how various aspects of psychopathological experience can be better understood by searching for explanations that make reference to the context in which an individual is embedded, as well as their internal, neurobiological states. In the case of depression, several projects have been undertaken that note higher rates of depressive illness amongst socially marginalised, disenfranchised, and oppressed persons [1][2][3] highlighting the deleterious circumstances that seem heavily implicated in the development and continuation of depressive symptoms. Moreover, some excellent work has been done that aims to get to the heart of the depressive experience, by qualitatively investigating the phenomenology of depressive disorders [4][5]. This work has highlighted issues in depression related to the way one relates to the world more generally; that is, not simply in a social sense. While Slaby, Paskaleva and Stephan focus on the way depression appears to disrupt normal relations of action-readiness and agency leading to a "...profound - and quite horrifying - sense of incapacity" [4:1], Benson, Gibson and Brand emphasise, amongst other things, the way in which reciprocal self-world relationships - the sense of being able to make an impact on the world and for the world to 'move' oneself in turn - disintegrate during episodes of suicidality [5:65-6].

This work complements and draws from the slightly better established literature on how cases of non-pathological emotional and affective experience are environmentally and socially situated [6][7][8]. This research has been able to develop some useful conceptual frameworks and theories that have shed light on questions in emotion theory. What insight we might be able to get into affective *disorders* from these theories however, remains somewhat open. In particular, there has been no concerted attempt to theorise about depressive illness as a disorder of psychological situation; that is to think about what goes emotionally 'wrong' in depression with reference to a theory that views affect as typically situated in a body and environment.

In this paper I hope to begin remedying that situation. The key idea is that depression involves, in part, a 'de-situating' of a person's mind. That is, the normal relationships one finds oneself in with the environment (both social and natural) in virtue of one's affective experiences are, to varying degrees and in different ways, lost to a depressed individual. To put it in a slightly different way, their affect becomes unusually circumscribed; it no longer puts them in contact with the environment in the way it once did, nor is it structured by environmental factors in the normal fashion. I shall discuss two common elements of depression that I think demonstrate this particularly well; impairments to agency and anhedonia.

2 IMPAIRED AGENCY

It is widely recognised in the situated emotion literature that affect largely determines what aspects of the world appear salient to us, and hence functions to orient us to the world and what in it appears as worth acting upon. That is, it directs our attention to certain action possibilities, or affordances, in our environment and motivates us to act on those most relevant for the realisation of our current goals. Colombetti refers to this kind of world-directedness as a person's 'intentional orientation' [7]. I argue that a diminished, or even absent, capacity for such world-directedness is the best way of explaining the loss of motivation and a sense of worldly significance often reported in cases of depression [4]. In this way we see the intentional, action-centric relations between individuals and their environments as being circumscribed in the case of depressed persons.

3 ANHEDONIA

Anhedonia is at once simple and deceptively tricky to understand. It does not require a huge leap of imagination to appreciate the notion of consistently failing to enjoy activities one once found pleasurable, but exactly what such a statement amounts to is unclear and up for debate. While some have interpreted it as a diminished hedonic capacity - a cap on the maximum amount of pleasure one can take in an activity [9] - others have argued that it is the result of an inability to sustain joyful responses over time [10][11]. I argue that there is a further dimension to anhedonia that this debate does not pay sufficient attention to. This is that failing to take pleasure in previously enjoyable activities can usefully be viewed as a disconnection from positive affective scaffolds; the elements of our environments that we utilise to perform much of the day-to-day work of emotional regulation [6][8]. We do not, typically, attempt to 'think ourselves happy', instead preferring to go for a run, listen to music, smoke a cigarette, chat with friends, and so on. In severe cases of anhedonia this general rule is inverted; patients are not able to make use of the environment's capacity for emotional regulation as they once were, putting greater strain on 'internal' systems of emotional regulation. Once again, here we observe a phenomenon where affect appears to be pathologically insular.

4 CONCLUSION

I conclude by suggesting some areas in which this framework could come in useful for future research. Specifically, I highlight the role it might play both in explaining what kinds of social conditions should be expected to lead to depression *per se* (as opposed to, say, anxiety), and in how we are to account for intuitively puzzling aspects of depressive and suicidal

phenomenology. Both of these areas of potential application relate to the theory's tendency to view depression not as a collection of discrete symptoms with a single aetiology, but as a particular pattern of activity in a dynamic affective system that spans brain, body, and world.

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