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To cite this article: Léa Salje (2023) Depression, *Ataraxia*, and the Pig, *Australasian Journal of Philosophy*, 101:2, 251-266, DOI: [10.1080/00048402.2021.2005106](https://doi.org/10.1080/00048402.2021.2005106)

To link to this article: <https://doi.org/10.1080/00048402.2021.2005106>



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Published online: 17 Nov 2021.



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ABSTRACT

What would happen if we succeeded in ‘turning down’ our emotional reactions? In this paper I compare two conditions that play out the answer to this question in very different ways—the lived experience of flattened affect characteristic of depression, and the idealised emotional restraint of the tranquil Epicurean *ataraxia*. I use this comparison to develop a new proposed source of value for the presence of emotion in our ordinary lives: *it feels good to feel like oneself*, and there are facts about our reflexive relationship to our emotional lives that provides one explanation of when and why we get to feel that way.

ARTICLE HISTORY Received 16 October 2020; Revised 24 September 2021

KEYWORDS affect; emotion; self; depression; *ataraxia*; Epicurean ethics; anhedonia

1. Introduction

There is something it is like for me as I go about my day—not just sensorily, but emotionally. When I walk into my sun-flooded kitchen in the morning, or leave my child at the school gates, or grapple with a difficult problem at work, I am not just phenomenally conscious of these worldly situations as I find myself in them. I emote. All of the time. My mental life consists, in part, in an ever-shifting kaleidoscope of felt affect accompanying the experienced events that make up the course of my day. I am, I assume, not alone in this.

There are at least two standpoints from which we might reckon the value of these dynamic affective reactions. The first is the objective-theoretical standpoint of evolutionary advantage. Emotional reactions are far-reaching in their possible effects on thought and behaviour. They have an intrinsic motivational force that needn’t (and often doesn’t) wait for slower-paced inferential capacities to kick in. They can be highly fine-tuned, and sensitive to features of a situation that would be difficult to articulate or to take up into the content of a propositional belief. It’s not hard to see the evolutionary advantage of creatures so-equipped over their affective-zombie counterparts.

The second standpoint is the subjective experience of emotion. Emotions infuse our perceptions, interactions, projects, and relationships with a sense of meaning, and help us to track what matters to well-being. Indeed, from a first-person perspective, they can be what makes life seem worth living. Individual emotional states can,

of course, be pleasurable—the feeling of being in love, for instance, or succeeding in one’s projects. But their subjective value clearly isn’t *merely* the value of pleasure. From the subjective standpoint no less than the evolutionary standpoint, it can be just as valuable to experience appropriate sadness, grief, or anger if that’s what the situation calls for. Having a full range of properly calibrated affective responses to the situations in which one finds oneself is plausibly part of the subjective experience of a well-adjusted mental life.

Each of these two thumbnail sketches offers a story, about the value of emotion, that focuses on what its *presence* does for us in our lives. An alternative approach is to focus on dimensions of emotional *loss* or *absence* as a way of bringing the value of its presence into focus. That is the strategy of this paper. The central proposal is going to be that having reliable expectations about one’s ‘normal-for-me’ affective responses generates a sense of self, relative to which we feel a sense of authenticity or self-affirmation when met—or, crucially, in cases in which those expectations are disappointed, self-alienation and self-loss. In other words, *feeling like myself* is a source of value in itself, and I will argue that there are facts about the way in which we relate to our own affective lives that provides at least one explanation of when and why we get to feel that way. We will come to see this new source of value by looking to cases where it is missing.

More specifically, my route to this proposal will be a side-by-side comparison between two affective conditions that involve anhedonia, or a sustained reduction in one’s emotional reactions. These two conditions are clinical depression and Epicurean *ataraxia*. Setting them out will be the task of the next two sections. Still, the first of these is likely to be more familiar to most readers than the second, so let me briefly say what I mean by *ataraxia*. The Greek term *ataraxia* is usually translated as ‘tranquillity’—denoting a kind of freedom from disturbance in the mind. The *ataraxic* individual achieves this tranquillity by a lifelong programme of philosophical training partly aimed at reducing the intensity of her affective responses to worldly circumstance. The juxtaposition of these two conditions raises a fresh question about the value of affect: what is the relevant difference between them, such that the diminishment of affect is so starkly positive in one case, and so starkly negative in the other? I set out this question in full in section 4. In section 5 I rule out an initially plausible response, and in section 6 I argue for my favoured answer. It is here that I set out the above proposal. There is a potentially worrying objection to that proposal, with which I deal in section 7.

Before beginning on this plan, two notes on terminology. First, both the question that I am raising and the solution that I am offering cut across a disagreement that organises much discussion in the philosophy of emotions—of whether emotions should be thought of as a special kind of intentional cognitive state, or as subjective (bodily) feelings that merely bear an appropriate relationship to an associated cognitive state. Sometimes, ‘emotion’ is reserved for a cognitive affective state and ‘affect’ for the bodily feeling of an emotion. I will use the two terms interchangeably, to mean a state that is both the right sort of feeling-state (for instance, the physiological feeling of delight), and *either* has intentional content itself, *or* doesn’t but has the requisite connections with such a state (for instance, the judgment that the sun is shining). I am neutral on how these issues are to be settled, but for those who aren’t I invite them to read these terms in their preferred way.

Second, I will use the qualifier ‘ordinary’ as a shorthand for ‘non-*ataraxic* and non-depressive’ (as in ‘ordinary affective responses’).

2. Depression

Flattened affect is a widely reported and clinically recognised feature of depression. First-hand accounts repeatedly use language of ‘numbness’, feeling ‘empty inside’, or finding it ‘hard to feel any emotions at all’ [Anon 2020a, Anon 2020b]. Andrew Solomon, in his book *The Noonday Demon*, puts it as follows [2002:19]:

The first thing that goes is happiness. You do not gain pleasure from anything. That’s famously the cardinal symptom of major depression. But soon other emotions follow happiness into oblivion: sadness as you had known it, the sadness that seemed to have led you here; your sense of humour; your belief in and capacity for love. Your mind is leached until you seem dim-witted even to yourself.

These ways of talking about depressive experiences are widespread and easily found.

Importantly for our purposes, the experience captured by these ways of talking is not the presence of a negatively valenced emotion like sadness; as another sufferer explains, with unmistakable frustration, ‘[i]t’s so typical to believe depression is nothing more than being sad. Depression isn’t feeling sad; if it were, it would be so much easier to deal with’ [Anon 2020c]. What these subjects are describing is a felt *absence* of ordinary affective reactions—a sort of emotional emptiness, flattening, or weighing down, rather than a positively experienced sadness. (Indeed, notice that this is reflected in the disorder’s name, which is not Major Sadness Disorder, but Major *Depressive* Disorder, one’s ‘being pressed down’.) These sufferers feel as if their very capacity for emotions is suppressed.

We must, of course, tread carefully here. Depression is a dynamic condition, with different symptoms characteristically attending different stages in its trajectory over the affected lifetime of the individual, as well as different periods in each cycle of a depressive episode. So, as with any symptom of depression, this emotional numbing is likely only to emerge during specific phases. There is also evident difficulty, and a certain amount of philosophers’ artifice, in isolating a single feature of the depressed experience from the highly complex phenomenological structure of the condition. Still, it is clear that flattened affect is a symptom that is often part of the lived experience of depression for many sufferers, even if not by all sufferers at all times.

What is also clear is how excruciating it is. Consider the following, highly evocative, first-hand account [Anon 2020d]:

Nothing about hearing the word ‘depression’ prepared me for having a moment of eye contact with my two-year-old niece that I knew ought to melt my heart—but didn’t. Or for sitting at a funeral for a friend, surrounded by sobs and sniffles, and wondering, with a mix of guilt and alarm, why I wasn’t feeling more. During my recent depression spell, I experienced this kind of numbness for weeks. Political news that would have previously enraged me left me cold. Music had little effect beyond stirring memories of how it used to make me feel. Jokes were unfunny. Books were uninteresting. Food was unappetizing. I felt, as Phillip Lopate wrote in his uncannily accurate poem ‘Numbness’, ‘precisely nothing’.

This passage is searing; it leaves us in no doubt about the horror of such a debilitating state of depleted feeling. We have obvious reason to take efforts to avoid this state in ourselves or our loved ones if we can.

So much for the first of our two conditions making up the central comparison of this paper; now to the second.

3. *Ataraxia*

The concept of *ataraxia*—an aspirational ideal of freedom from mental disturbance—shows up in all of the major Hellenistic schools, including Epicureanism, Stoicism, and Pyrrhonism.¹ There are important differences in its role and nature as construed by these different traditions, and a sizeable literature on its overlaps, differences, historical aetiology, and interpretative issues that won't matter for our purposes. I will focus on the Epicurean tradition, and will circumscribe its discussion by the needs of the paper. The main take-away from this section is that *ataraxia* is a highly desirable condition that involves a cultivated form of anhedonia. The work of the section is to make it plausible that there could be such a state of *ataraxia* in the Epicurean framework, rather than to defend an historically privileged interpretation of Epicurus. The idea that there *could* be such a desirable state of muted affect is all that is needed for the aims of this paper.

For Epicurus, *ataraxia* (freedom from mental disturbance) combines with *aponia* (freedom from bodily pain) to form the *telos* of the good life, or *eudaimonia*—and so it occupies an absolutely foundational role in his ethics. How does one achieve it? In large part by better organising one's mind, which one does by developing a clear categorisation of one's first-order desires. There are two distinctions in force here—natural vs unnatural desires, and necessary vs unnecessary.² The first divides the desires that we have in virtue of our natures (food, friendship, and shelter, for example) from those we have imposed on us by artificial social means (for example, political office and wealth). The second divides those whose satisfaction we really need (for example, nourishment) from those whose satisfaction is superfluous to basic need (for example, fancy food). Once an individual has a clear understanding of how their existing desires are to be sorted under this taxonomy, the route to *ataraxia* is to rid themselves of all desires that are not natural and necessary, by expunging any false beliefs about what those desires are. The drive behind this purge is not that the pleasures gained by gratifying them wouldn't be enjoyable—pleasure is always valuable for Epicurus; it just isn't always *choiceworthy*, given the mental disturbance that it brings in its train. The key point here is that '[n]o pleasure is something bad *per se*: but the causes of some pleasures produce stresses many times greater than the pleasures' [Long and Sedley 1987: 155].³ The truly *ataraxic* individual is left with a vastly scaled-back set of choiceworthy first-order desires for basic food, shelter, and so on, whose presence do not make trouble for the soul. Alongside this, the *ataraxic* must also rid themselves of troublesome negative first-order mental states—fear of pain, death, or intervening Gods.

None of this comes easily. The prescription is a hardcore regimen of philosophical training [ibid.: 144]:

¹ Even before the emergence of these accounts, Epicurus was heavily influenced by Democritus, who had a related notion that went under several names (*athambia*, *eusto*, *euthymia*). For discussion, see Warren [2002].

² 'We much reckon that some desires are natural and others empty, and of the natural some are necessary, others are natural only; and, of the necessary, some are necessary for happiness, others for the body's freedom from stress, and others for life itself' [Long and Sedley 1987: 113]. For an analysis of this taxonomy, see Annas [1995: 190–3].

³ Or again, 'Every pleasure, then, because of its natural affinity, is something good, yet not every pleasure is choice-worthy' [Long and Sedley 1987: 114].

Practise these things [Epicurus' ethical teachings] and all that belongs with them, in relation to yourself by day, and by night in relation to your likeness, and you will never be disquieted, awake or in your dreams, but will live like a god among men.

The pay-off, however, is well worth the effort—a global or higher-order state of tranquil pleasure in which ‘all the soul’s tumult is released. It’s not hard to see the appeal.

The nature of this ultimate state of higher pleasure on the Epicurean picture is filled with interesting theoretical and interpretative wrinkles. Most don’t matter for our purposes, but one that does can be put in the form of a challenge—or, rather, as a family of challenges. Alongside a reduction of fears and their associated pains, is Epicurus really recommending a reduction of desires and their associated pleasures as a way of producing a further state of pleasure? It can be hard to see how to make sense of this proposal: how can the *absence* or *diminuation* of pleasure itself constitute a kind of pleasure? Isn’t the absence of pleasure neutral, rather than positively pleasurable? How would such a negatively defined state of pleasure *feel*?⁴

One way of responding to these challenges draws on yet a further distinction—between active or *kinematic* pleasures (such as the pleasure of eating) and static or *ketastematic* pleasures (such as the pleasure of having eaten).⁵ Pleasures of the first kind are of the affect-laden giddy kind—the ‘pleasures of the profligates’ (cited by Warren [2002: 4])⁶—and include as paradigmatic instances physical pleasures such as sex or eating. By contrast, ketastematic pleasures involve a *restoration of calmness* once a felt lack or need has been removed. Now, even if first-order desires of the non-necessary and non-natural kind invite pleasures of the first sort, their cultivation serves to *increase* restive feelings of lack or need that makes static pleasures of the second kind ever harder to reach. How, then, should one act to optimise one’s chances of pleasures of the second, deeper, calmer kind? In the short term, ketastematic pleasures can be had by satiating individual felt needs—eating delicious meals or gratifying one’s sexual desires, and so on. But this strategy is bound to satisfy only in the short term: with unregulated masses of first-order desires like this in one’s practice, feelings of lack or need always return, creating only more pain. (‘For the time we when we need pleasure is when we are in pain from the absence of pleasure. [But when we are not in pain] we no longer need pleasure’ [Long and Sedley 1987: 113–14].) A more sustainable solution is to remove the sources of felt lack or need altogether—to remove, as far as possible, any unnatural and unnecessary first-order desires [ibid.: 114]:

This—the tranquil state of no felt lack or need—is the higher pleasure of *ataraxia*: So when we say that pleasure is the end, we do not mean the pleasures of the dissipated and those that consist in having a good time, as some out of ignorance and disagreement or refusal to understand suppose we do, but freedom from pain in the body and from disturbance in the soul. For what produces the pleasant life is not continuous drinking and parties or pederasty or womanizing or the enjoyment of fish and the other dishes of an expensive table, but sober reasoning which tracks down the causes of every choice and avoidance, and which banishes the opinions that beset souls with greatest confusion.

⁴ See, for instance, Annas [1995: 344] and Warren [2002: 4–5] for related criticisms. It is also a criticism raised by Cicero in *de Finibus II* 13–20: see Annas et al. [2015].

⁵ See Irwin [2007: 270–3] for a close analysis of this distinction and its application to *ataraxia*.

⁶ Translated in Long and Sedley as ‘the dissipated’ [1987: 114], and quoted below.

It is in the nature of such ketastematic pleasure that, although it can be varied—depending on the details of how one goes about satisfying one’s skeleton set of necessary and natural desires—it can never be increased or decreased. Talk of increasing or decreasing pleasure only makes sense for the affect-laden kinematic pleasures—the warm, fuzzy, feelings of pleasure that carry a valence and intensity that can be turned up or down. For the calm pleasure that comes from an *absence* of felt need, no sense can be made of talk of ‘more’ or ‘less’; it is just a calm absence, and that absence is a pleasure.⁷

So here we have our second affective condition on the table—an aspirational state of blissful tranquillity consisting in part in a global diminution of emotional responses to one’s worldly circumstances, good and bad.

4. Depression, *Ataraxia*, and the Pig

Ataraxia is symbolically associated with a number of animals. The most memorable among them is the pig. Originally levelled at Epicurean ethics as a criticism, the symbol of the pig was (one suspects, tongue firmly in cheek) reclaimed and held up as a figurehead for the sort of tranquillity towards which we should be striving. This ideal of the *ataraxic* pig is captured in the following anecdote about the philosopher Pyrrho (cited by Warren [2002: 114]):⁸

When his fellow travellers were bothered by a storm he remained calm and was untroubled in his mind. Pointing to a pig eating on deck, he told them they should stay in such a state of tranquillity.

As the boat heaves about in the storm, Pyrrho calmly demonstrates the pig eating away on deck as an aspirational ideal of tranquillity. What is supposed to impress us here is not so much that the pig is enjoying kinematic pleasure from the food, which after all is hardly likely to be much. Rather, what is impressive is its capacity to continue eating in the midst of the storm, a capacity that signals a state of complete tranquillity, the state of *ataraxia*.

This pig—quietly chomping away, mid-storm—can be used to draw out a fresh question about the value of our emotional lives. That is because the anecdote provides a compelling image of a creature experiencing muted affect. As such, and this is the important point, the storm-battered pig *could stand equally well as a symbol of depression as of ataraxia*. Indeed, it is possible to create a sort of duck-rabbit effect demonstrating these two ways of seeing the pig’s condition, by concentrating on its image and deliberately flipping one’s evaluative stance between thinking of it as

⁷ See Long and Sedley [1987: 1145]. This style of response to the above challenge to the Epicurean—that *ataraxic* pleasure is not a *felt* pleasure but instead a sort of orderly calmness, is present in both contemporary and historical commentators; e.g. ‘This kind of pleasure, *ataraxia*, is unhindered tranquillity, rather than a sensation of active pleasure’ Thrasher [2013: 425]. See also Annas [1995: 344] for a proposed error theory as to why we might not immediately recognise this ‘freedom from’ pleasure as a pleasure:

By the time we have a correct view of what it is our needs really are, we will, Epicurus thinks, have revised our view as to the negative character of *ataraxia*. The reason most people expect to get a positive charge from their activity comes from their false beliefs and the unhealthy emotional attitudes they produce. By the time we are clear about our natural desires, Epicurus thinks, we will see that freedom from pain and trouble is in fact what we really want.

⁸ This anecdote is from Pyrrho (chosen for its memorability), but there are many similar remarks and anecdotes given by Epicurus and his followers about pigs. See, e.g., Warren [2002: ch. 5].

occupying a dreamy state of *ataraxic* calmness and a harrowing state of emotionally vacuity. (Think first of it as calmly munching away, blissfully undisturbed by the whirling storm. Think now of it as choking down its food with grim mechanistic determination, too flat to muster up even a shred of care about the violent weather lashing its body or the imminent threat of death.) The question now is this: do we want to be like the pig? This is, I think, a difficult question to answer, and in its difficulty resides the contrast on which I want to focus for the rest of the paper. Less colourfully, the contrastive question on which I want to focus is this: a substantially reduced state of first-order affect seems to be at once a bad thing (in depression) and a good thing (in *ataraxia*); how can this be, and what does it tell us about the value of the *presence* of affect in our ordinary lives?

Neither of the ready-to-hand sources of value for our emotional lives raised in the introduction—evolutionary fitness or first-personal experience—could easily answer this new question. That's because both of those sources yielded reasons to value the presence of well-calibrated affect in our lives, and so it's not clear how they could provide a discriminating explanation as to why its *absence* is sometimes to be welcomed and sometimes feared. In section 6, I will offer an alternative source of value for our emotional lives that does explain the difference.

In the rest of this section, let me quickly respond to two sorts of reactions that might spring to mind:

It's not the state of reduced affect itself that is good or bad; it is other attendant features of depression and ataraxia that make it bad and good, respectively.

As a rarely achieved ideal, we don't know much about attendant features of *ataraxia*. By contrast, there are many known symptoms alongside affective flattening in depression—changes in appetite, sleep, cognitive changes, suicidal ideation, and so on. It is surely *these* features of depression that make it so unbearable, and that explain the evaluative contrast with *ataraxia*, not merely being in a reduced state of first-order affect.

With these symptoms in view, it is hardly a mystery as to why depression is undesirable. But to bring them into view is to miss the point of the contrastive question that I have raised. The point is that, *even without* these additional features of depression, the reduction in affect associated with depression is a condition that we seem to have strong reason to avoid if we can. If you like, take the pig on deck as a stipulative example of a creature who has a sustained state of reduced first-order affect but none of the other symptoms of depression (or if you find it too hard to work through this exercise for a pig, try it with a human). *Still* we can easily flip between thinking of this as an extremely desirable or extremely undesirable condition in which to be—and this, by itself, throws up a question about the value of affect in our lives. The prospect of lacking it strikes us as either very good or very bad, but definitely not neutral.

Maybe this just shows that we shouldn't want to be ataraxic.

The explanatory task raised by the story of the pig depends on two unargued intuitions: (i) in the context of depression, the state of muted affect is highly undesirable, and (ii) in the context of *ataraxia*, it is highly desirable. One might deny those intuitions, and so get off the boat before this paper even gets going. I doubt that there will be readers

who disagree with the first intuition, but what about those who disagree with the second?⁹

Even if *ataraxia* is not a state that one would wish for oneself (for reasons of personal taste perhaps, or attachment to one's own 'pleasures of the profligates'), it is a sociological datum that it had sufficient sustained appeal to find widespread incarnations for several centuries in Hellenistic Greece. What's more, the core idea of dampening one's habitual affective responses to everyday events as a form of therapeutic training aimed at a more emotionally resilient mode of living is plainly recognisable in other times and traditions, too—various forms of Buddhism,¹⁰ for instance, or contemporary mindfulness.¹¹ So, even if one does not share the intuition that deliberately reducing one's affective responses is something to which to aspire, it must at least be allowed that it is an intuition held by many across different cultures, traditions, and times. That should be enough to get us started.

5. Agentive Control

Where, then, to start the search for an answer to our contrastive question? A natural place to begin is with the subject's level of agentive involvement in bringing about the state of muted affect. After all, this really does seem like a commanding point of difference between the two conditions. In *ataraxia*, the subject must work hard, long, and deliberately by means of difficult philosophical training and active self-scrutiny, a process that is the work of a lifetime [Long and Sedley 1987: 154]:

Let no one either delay philosophizing when young, or weary of philosophizing when old. For no one is under-age or over-age for the health of the soul.

This is worlds apart from the onset of depressive episodes, which are unwelcome—let alone actively worked towards—and usually impossible to resist. The following metaphor from sociologist David Karp [2017: 209] vividly captures this sense in which the ebbs and flows of chronic depression feel to be outside the depressed individual's control:

One day the weather is bright and sunny in the morning, but by mid-afternoon a gloomy cold front might descend. There might be several pleasant days in a row, followed by a month-long

⁹ For an example of this reaction from the Hellenistic period, the Cyrenaic proponents of sensual hedonism centred on bodily pleasures—to which Epicurus was partly responding in developing his more restrained hedonistic ethics—would certainly disembark at this point. See, e.g. Zilioli [2012].

¹⁰ Take, for instance, the following description that Buddha gives of one of his earliest experiences ([M I 246–7]; cited by Shaw [2006:2, emphasis added]):

And then, Aggivessana, this thought came to me: 'I remember that when my father the Fakyān was busy, while I was sitting in the cool shade of the rose-apple tree, quite secluded from sensual pleasures, secluded from unskilful states, I entered upon and abided in the first jhāna, which is accompanied by applied and sustained thought, with the joy and happiness born of seclusion. Might that be the path to awakening?' Then, following on that memory came the consciousness: 'This is the path to awakening'. 'Why am I afraid of a happiness that has nothing to do with sensual pleasures and unskilful states?' And then, Aggivessana, this thought came to me: 'I am not afraid of this happiness, for this happiness has nothing to do with sensual pleasures and unskilful states'.

The 'unskilful states' rejected in this passage is explained in the Vitakkasanthana Sutta as thoughts imbued with desire, aversion, or delusion.

¹¹ See, e.g., Cullen [2015]. The emphasis in contemporary mindfulness is not on emotional suppression, but on learning to regulate one's emotions in a way that allows one to feel it in the moment but not to experience lingering or disproportionate effects.

cloudy spell with some really stormy periods. And there have been years when the weather was pretty lousy most of the time.

One of his study participants is even more explicit [ibid.: 238–9]:

I have a feeling of unpredictability and lack of control over something that has a life of its own [and] contradicts my feeling of mastery. And I know that now. I've had this experience for so long that I'm going to be up and that I'm going to be down and I suppose that makes things a little easier. I mean, I know it's going to happen. It is out of my control and therefore I shouldn't feel so dreadful when it does happen because it's just part of the rhythm of my life I suppose.

What's more, it is common for sufferers of depression to imagistically externalise their condition—for example, 'Mr Shoulder', who sits on Jeffrey Smith's shoulder in his memoir of depression whispering destructive messages in his ear—or to draw on externalising spatio-physical metaphors such as 'a shadow looming over me', 'a force field I am stuck behind', or 'a brick on my chest'.¹² Solomon vividly describes his depression as a strangling vine: 'My depression had grown on me as that vine had conquered the oak; it had been a sucking thing that had wrapped itself around me, ugly and more alive than I. It had had a life of its own that bit by bit asphyxiated all of my life out of me.' [2002: 18] These ways of thinking and talking about depression reflect a felt 'othering', or lack of control over the condition that exerts such power over the sufferer.

It is surely to be agreed that the agency involved in their onset is a difference between our two conditions. But is this difference enough to solve our question from section 4? It is a good start, but it cannot be the whole story. That's because, even accepting this aetiological difference in the affect reduction as it appears in our two conditions, identifying that difference really just pushes the question back a step. It leaves us with the further question: why does a difference in the level of agency involved in its realisation make a difference between a state of reduced first-order affect that is desirable and one that is undesirable?

This question is not obviously easier to answer than our original question was. We do not normally think of emotional states as falling directly under our agentic control—or rather, more pertinently to the two conditions at which we have been looking, we do not normally think of our *patterns* of emotional responses as directly controllable. (To wit, the toe-curling uselessness of advice to 'Cheer up!')¹³ Certainly, we can take indirect action on ourselves to improve our chances of hitting the more enjoyable regions of our emotional ranges—tidying up one's workspace, engaging in creative activities, physical exercise, eating a gut-healthy diet, choosing a well-matched career, partner, and living situation, and so on. But straight-up voluntarism about our affective lives is, I take it, plainly implausible. Indeed, even in the case of *ataraxia*, the individual does not work directly on her emotional profile, but instead on her surrounding beliefs by way of philosophical reasoning.

So it cannot be that direct control of emotional patterns is what matters for the desirability of the resulting state. What about the difference in level of indirect control via these secondary factors? There are three reasons why this also doesn't seem like the explanation we're after. First, even if we can sometimes bring about limited changes to our emotional lives, the extent of that control is clearly dwarfed

¹² The first of these is from Karp [2017: 238], the second and third from Anon [2020e].

¹³ 'No mockery in this world ever sounds to me so hollow as that of being told to *cultivate* happiness', from Charlotte Brontë, cited by Solomon [2002: 33].

by factors beyond our control. One's affective temperament is presumably a complex result of genetics, personal history, and current environment, only a small portion of which can be the potential target of causal interventions by the subject. This relative lack of control is hardly an impediment to the desirability of the patterns of affect issuing from those temperaments. So, agentic control does not seem to be a necessary condition for desirability of the resulting emotional dispositions; indeed, the level of agentic input involved in reaching a state of *ataraxia* seems to be something of an outlier relative to our ordinary, and often perfectly valuable, affective lives.

Second, it's hard to see why level of agentic control ought to make a difference to the desirability of the resulting emotional dispositions. Briefly, if *ataraxia* is as wonderful as it sounds, why isn't a low-effort shortcut to it a bonus?

Finally, and perhaps most interestingly, recall Karp's study participant who described in explicit terms the lack of control that he feels over the dynamic course of his depression. Far from exacerbating his experience of his condition, this subject has come to think of this lack of control as a *good* thing—a way of folding his depression into the 'rhythm of life'. This idea is hard to square with the suggestion that lack of control could be what explains the *undesirability* of depressive anhedonia. We will return later to this important theme of incorporating depression into the rhythm of one's life. For now, the take-home point is that the differential level of agentic control in bringing about the reduction of affect in depression and *ataraxia* cannot be the answer to our explanatory question about the difference in their desirability. Still, there is something appealing about the idea that the difference is somehow one of self-management. In the next section, I will propose an alternative answer that spins out this initial appeal in another way.

6. Self-Affirmation and Self-Loss

In 1848, a 25-year-old construction foreman called Phineas Gage was involved in an accident while excavating rock for a railway. An iron rod of more than a metre long was driven through his head from below his left cheek to the top of his skull. Incredibly, not only did Gage survive, but the accident did not even cause him to lose consciousness. The injury to his frontal lobe, however, left him with a radically changed personality. The physician treating him, Dr Harlow, recorded that his employers (cited by O'Driscoll et al. [1998]),

who regarded him as the most efficient and capable foreman ... considered the change in his mind so marked that they could not give him his place again ... He is fitful and irreverent, indulging at times in the grossest profanity (which was not previously his custom), manifesting but little deference for his fellows ... His mind was radically changed, so decidedly that his friends and acquaintances said he was 'no longer Gage'.

I mention this well-known historical case because it provides a fitting model for the key point that I want to make about depression. The point is this: not only is depression unchosen by the individual, but each new onset brings with it massive changes to the sufferer's experienced mental life and the expressive manifestations of those changes in his or her personality. For present purposes, the most important among these changes is the flattening of affect. The ordinary emotional inflections of the individual's participation in everyday activities are radically changed, changes that are imposed by the illness and unwanted by the individual. In this respect, we might say that depression is a *Phineas-Gage-style disorder*.

The central proposal of this paper is that a comparison between a Phineas-Gage-style disorder such as depression and the contrast-case of *ataraxia* can offer us insight into a new source of value for the presence of affect in our ordinary lives. It is this new source of value that is going to answer our question from section 4. To get to this proposal, recall the start of the paper. I began by describing some of the events in the course of my day that reliably evoke certain emotional reactions in me—waving goodbye to my son, meeting a difficult problem at work, and so on. The ways in which I reliably react to these scenarios make up part of my ‘normal-for-me’ affect range—the typical spectrum of affective reactions that I experience in response to familiar situations. This range is peculiar to me. You have one peculiar to you; which is another way of saying that what it is like for me as I go about my day, emotionally speaking, is different from what it is like for you as you go about yours.

These individual affect profiles are profoundly important to one’s sense of self. (Incidentally, they are also important to our sense of each other: the expressions of these profiles are often at the heart of what we love, like, hate, envy, admire in one another.) Let me try to make this idea a little more precise. My own ever-shifting kaleidoscope of felt affect is not random: it patterns more-or-less reliably with the sorts of situations in which I find myself. These correlations are not perfect—how I feel depends partly on all sorts of endogenous factors, too—but they are relatively robust. Now, these repeated patterns are apt to generate low-level expectations about how I am likely to feel in certain situations—warm glowing feelings when I see loved ones doing well, low-level tension when I have a talk coming up, an unpleasant cocktail of irritation and boredom at the prospect of researching travel options. I don’t just happen to find myself emoting in these ways in these situations. I reliably react in these ways. So, it is hardly surprising that I have built up a set of expectations about doing so.¹⁴ I might, or might not, approve of the ways in which I characteristically react, but I come to expect them.

These stable expectations, I submit, are a source of *feeling like oneself*. We can see this most conspicuously by considering ‘bad’ cases in which these expectations are violated. To take a relatively widespread example, hormonal changes involved in pre-menstrual syndrome, pregnancy, or menopause can distort usual emotional patterns, and in very bad cases can throw them into almost unbearable disarray. Think, too, about what it is like to be in prolonged physical pain, grief, or illness, or to be bedbound with a chronic condition. The emotional implications of being in these conditions are, of course, unpleasant in themselves, but there is an added injury: the emotional reactions that the individual now finds herself having are no longer part of the range that she recognises as ‘normal-for-me’. It isn’t hard to see how this could disrupt one’s sense of self.

The sense of not feeling like oneself is plausibly a primitive source of disvalue. By contrast, when all goes well and one’s expectations are met, one plausibly enjoys the primitively valuable experience of feeling like oneself—a condition that, ironically, normally allows the self to recede into the phenomenological background.¹⁵ Given the bedrock status of these value claims, I won’t argue for them. It might, however,

¹⁴ Some of these might be personal-level, but it is probable that most will be sub-personal.

¹⁵ This contrast between the self being highly phenomenologically salient during depressive episodes of felt self-alienation, and then receding into the background during episodes of good mental health is widespread in accounts of depression: e.g. ‘the true hell of this illness is its endless self-absorption. “L’enfer c’est moi” is its motto’ [Smith 1999: 218], and ‘one of the great pleasures of mental health is that she needs to spend far less time thinking about herself’ [Karp 2017: 208].

be worth mentioning their corroboration by a recent upsurge of research in positive psychology on *authenticity*. That literature characterises its key concept, authenticity, as either the feeling of being (state) or the disposition to feel (trait) ‘true to oneself’. On the current standard model offered by Wood et al. [2008], its presence partly constitutively depends on the absence or diminution of self-alienation—understood in turn as the experiential state or trait of *not* ‘being true to oneself’. Higher levels of authenticity have been shown to correlate with a whole range of positive psychological features—increased self-esteem, mindfulness, subjective well-being, ideal-self overlap and a decrease in mindwandering, stress-levels, and verbal defensiveness (Heppner et al. [2008]; Schlegel [2011]; Robinson et al. [2012]; Vess et al. [2016]; Lenton et al. [2016]; Sedikes et al. [2017]). These results are compelling; the more that we feel like ourselves, the better we do.

With these ideas in hand, turn back now to our central question from section 4. What makes the difference between the state of reduced first-order affect that is desirable (in *ataraxia*), and the one that is undesirable (in depression)?

My proposed answer is that an individual suffering from depression does not recognise her affective reactions during a depressive episode as falling in her usual ‘normal-for-me’ range. The relevant change is not merely the diminishment of pleasurable feelings. Such a change would be unwelcome, of course, but a well-functioning human psychology cycles through many different affective states in the course of a typical day, and these are certainly not all positively valenced. Neither is the relevant change the reduction of affect in particular; that was the point brought out by our *ataraxic* foil. The relevant change, rather, is in the *hijacking* of the range of affective responses that is normal for that individual, who suddenly finds themselves with a new and unasked-for set of affective responses thrust upon them. The sufferer sees themselves in situations that they can easily recognise as tending to evoke particular responses in them—a conversation with a friend, tender physical touch, a threatening encounter with a stranger—and is simply struck with a lack of feeling. This intrusion by an alien affect-profile leaves the individual with a sense of not being themselves. In other words, the result of the emotional changes is not valuable or disvaluable in itself: its disvalue comes from the fact that that the new state of flattened affect has forcibly displaced the individual’s normal emotional range, generating a potentially powerful sense of self-alienation.

Themes of self-loss or self-alienation are absolutely pervasive in first-hand accounts of depression, which is, for that reason, sometimes classed as a disorder of the self. Consider, for instance, the following handful of first-hand descriptions, which are utterly typical (all are from Anon [2020b]):

Each day I mourn the loss of my prior self. I retrace the steps that led to the period when this beast cemented into being, trying to make sense of it, my way of fighting for myself. ... All these years. And the memories of before are stolen, one at a time. Soon I will have little to no memory of before. I miss living life. It’s not supposed to be this way.

It’s like you lost something and you don’t quite know what until one day you realize you lost yourself.

Having depression is like if there is another soul inside you who is doing its best to ‘kick out’ the real you and take over control.

It is like being half-asleep and half-awake, you are trapped in limbo state and you don’t know what to do anymore, you are just trapped in your mind: an ebbing vortex of both emptiness and

loud voices. Depression ... is almost like you are away from your body and you watch yourself slowly disintegrate and disappear in your own hands.

It feels like you lose your true self and no matter how hard you try you can't find who you once were.

Indeed, reports like these suggest that the sense of self-loss is utterly foundational to the experience of depression. The current proposal offers at least part of an explanation for this. The gap between the sufferer's ordinary non-depressed emotional profile and the deadened affective responses that she now finds herself having is not merely a bolt-on symptom of the illness; it is an integral part of the defining phenomenological structure of the condition during depressive episodes. We cannot cleanly separate first-order depressive anhedonia from the sufferer's reflective sense of having been so forcibly displaced, and it is this whole phenomenological structure that can feel so impossible to bear—not just the first-order muted emotions. *That* is the answer to our question from section 4. The feeling of emotional absence in depression is not disvaluable in itself; its horror derives from its place in this broader phenomenological context that leaves the sufferer with a devastating feeling of self-absence.¹⁶ As Solomon said in the quotation above, 'The first thing that goes is happiness. ... But soon other emotions follow happiness into oblivion.' The quotation continues: 'Eventually, you are simply absent from yourself' [2002: 19].

Compare all of this with the idealised state of *ataraxia*. The reduction of first-order affect here is not only deliberately chosen by the individual, it has taken years of effortful training to achieve. What's more, the subject must repeatedly affirm it as their goal to maintain focus and to avoid the temptation of choosing an easier path. The result is a sustained state of reduced first-order affect that is aligned with a goal self-conception cultivated over many years. Far from generating a sense of self-alienation, then, in the case of *ataraxia* there is reason to think that the eventual successful dampening of affective responses will be incorporated into a reflective phenomenological structure that is experienced by the subject with a sense of pride and self-affirmation; after all, these aspects of the *ataraxic's* mental life are actively chosen and worked towards, in a way that many other parts of her mental life are not. Unlike the state of reduced affect in the context of depression, in *ataraxia* the state of reduced affect does not displace the individual's normal emotional range: it *is* the individual's new normal emotional range.

7. The Rhythm of Life

That is the proposal. In this final section I want to address a potentially worrying—but also potentially illuminating—objection. If the above proposal is along the right lines, then shouldn't it be possible for sufferers to cure themselves of at least *this* undesirable aspect of depression, by simply updating their expectations? The victim-blaming that is tacit in this suggestion, as well as the idea that sufferers of depression ought to settle for their new impoverished emotional range, are unacceptable. But they don't follow from the proposal. The quickest way to see this is to note that the expectations are likely to

¹⁶ Is this feeling of self-absence itself an emotion? That depends on one's theory of the emotions, and different answers are equally compatible with the central proposal. The option that I prefer is to understand it as an 'existential feeling', in Matthew Ratcliffe's terms [2005].

operate for the most part at a subpersonal level, and so are simply not the right sort of target for personal-level arbitration or straightforward voluntary change. What's more, there is nothing inherent in the idea of a self-alienating mismatch between expectation and experience that says that treatment efforts would be better aimed at changing the expectations, rather than targeting features or causes of the experience of emotion in depression.

So, the objection shouldn't worry us. It might, however, still be illuminating. That's because, even if these expectations are not the appropriate targets of personal-level interventions, a surprising number of first-hand accounts *do* describe an eventual shift in the sufferer's orientation towards their depression—a sort of acceptance or reconciliation that allows them, as the study participant from section 4 put it, to fold their depression into the 'rhythm of life'. This may be evidence that something like an expectation-shift does happen over time for at least some depressed individuals. What's more, descriptions of this shift often reflect a sense of relief from the pains taken up that point to live a happier life. In his memoir, for instance, Smith chronicles the evolution of his severe depression through various stages of struggle towards a reconciliation of just this kind. The following two quotations are taken from two points in this journey. The first, from early on, describes a dissolving sense of self during a depressive episode [1999: 117]:

Melancholia appears to originate outside the conscious mind, and the conscious mind appears powerless against it, so any notion of a 'self' as a cohesive and continuous being seems a fiction.

The second, from the end of the book [ibid.: 259–60], describes a feeling of regained wholeness at finding a way—not of being happy, but—of living cohesively with his condition:

It was a blessed life I had. Maybe I was temperamentally unsuited to what we mean by 'happiness'. ... Maybe I wasn't 'happy', but sure it didn't seem like I was missing anything. For now, this was enough. This life felt to me like health—in the literal sense of the word—it felt like wholeness.

Smith is not the only one. In his large-scale study, Karp repeatedly found depressed individuals reaching a point of acceptance in their relationship with depression, sometimes even coming to see their condition as giving them special access to a new sort of knowledge or insight into the world. Interestingly, Karp notes that this shift is often expressed by using spiritual rather than bio-medical language, and often involves a turn towards religion or spirituality. This—the so-called *incorporation stage*—is the final stage of Karp's model of the characteristic career of depression, developed using results from this study. He describes reaching this point in his own depression [2017: 238]:

for me depression is akin to being tied to a chair with restraints on my wrists. ... [I]t took me a long time to see that I only magnified the torment by jerking at the restraints; that my pain diminished only when I gave up escaping from it.

Here are three quotations from his study participants, illustrating the same stage:

I've stopped thinking, 'OK I'm going to get over this depression. [...] [At one point] I did buy into the idea of the pursuit of happiness and the pursuit of fulfilment. I hate that word. And the mental health equivalent to finding fulfilment is to fill up gaps inside of you and everything grows green. ... But then I finally realized that, well, maybe I'm in a desert. Maybe your landscape is green, but, you know, I'm in the Sahara and I've stopped trying to get out ... I'd rather

cure it if I had my choice, but I don't think that is going to happen. My choice is to integrate it into my life. ... I just see myself becoming, you know, better able to cope with it, more graceful about it. [ibid.: 162]

I believe that people can hobble along, and you can learn to limp gracefully and nobly, or you know, you can scream about it. ... I don't believe that, you know, I'll ever be a happy person. And, when I stopped believing that is when I started to get better. [ibid.: 239–40]

And there is this sort of battle with the psychiatrist that I am seeing now. Basically what he's saying is that 'You don't have to be depressed. Your life doesn't have to be this way.' ... And I'll say, 'But that's who I am. That's my way of looking at the world.' I accept the fact that I will always look at life this way. [ibid.: 240]

It seems, then, that some individuals with depression *do* incorporate the effects of depression into their stable expectations about their 'normal-for-me' emotional range, and for those individuals this shift typically brings with it a sense of newfound peace that has intriguing points of connection with our idealised *ataraxic* from section 3. That is illuminating, because it is just what we would expect under the proposal from the previous section.

8. Conclusion

It feels good to feel like yourself. In this paper I have argued that, when things are going well, emoting in ways that conform with one's individualised affect-profile gives us one a route to feeling like that. By contrast, in Phineas-Gage conditions like depression in which one's ordinary affect-profile is forcibly displaced, the gap between expected and experienced emotion is apt to generate a sense of self-alienation. This proposal helps to shed light on a very particular element of the experience of depression, and its powerful capacity for violence against one's sense of self.

It also reveals a new source of value for our emotional lives. We don't value the presence of emotion just because of its objective-theoretic contribution to our survival fitness, or because it helps us to experience the world as laden with meaning and affordances. We value it, too, because it gives us a measure by which we can feel like ourselves; it also suffuses our relationship with ourselves, as well as the world, with a special sort of meaning. This is, I have argued, another reason to value the dynamic emotional course of our days.¹⁷

Disclosure Statement

No potential conflict of interest was reported by the author.

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¹⁷ For discussion and comments thanks to Margaret Hampson, Daniel Morgan, Chris Megone, Joe Saunders, Caroline Starkey, and The Mind reading group. Thanks, too, to incredibly helpful comments from two anonymous reviewers for this journal.

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