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PHENOMENA OF LOSS OF SELF IN SOCIOCULTURAL CONDITIONS OF PRECARITY

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Abstract

Subjective intolerance for uncertainty and loss of Self by an individual in the modern world is demonstrated in the present article. Using the example of the "split" Russian public consciousness, the phenomenology of two types of loss of Self (diffusion and destructive narcissization of self-identity) are considered with regards to social traumas and global social transformations of our time. It is believed that the sociocultural conditions of fluidity, transitivity, uncertainty create a situation of general increased vulnerability, victimization and traumatic exposure to the past, present and future situations of uncertainty. The term "precarity" is used in the sense which is closest to understanding by Ulrich Beck, when social cataclysms and fractures become the inner content of individual and collective experiences of insecurity, unsafety, intolerable anxieties. A clinical interpretation of the current state of Russian public consciousness is given, the integrity of which is deficient, split; subcultures are antagonized; no signs of cooperation and solidarity are present. The loss of Self, crystallized in the experiences of patients with personality disorders and comorbid suicidal behavior, are summarized. The phenomenology of the loss of Self is analyzed, which is expressed in the traumatic intolerable experiences of uncertainty, diffusion and destructive narcissization of self-identity, perfectionism, as well as in manipulative, violent and hostile attitude towards the Other, in refusal to understand and take into account the subjective world of the Other, and in cognitively simplified character of mentalization.

Keywords: Precarity, uncertainty, loss of self, manipulation, perfectionism, mentalization disorders.

1. Introduction

Nowadays, Russian society is stratified and fragmented upon a multitude of bases (material, cultural, educational, axiological, etc.) and "split" into a lot of hardly comparable pieces that sometimes fiercely oppose each other. There is no agreement in the definition of the main tasks of sociocultural self-identification: there is no single historical memory, therefore, there is no shared space of universal human and national values. Ideas about I and We are antagonized, as well as the boundaries and the criteria of what is "ours" and what is "alien". The only thing that unites people is the pessimistic-paranoid attitude towards the "alien" and the feeling that the present and the future are hopeless (Gudkov, 2018).

We have to admit that we are dealing with an all-embracing process of cultural and historical disintegration, with pronounced phenomena of persistent historical traumas, a state of uncertainty and vagueness in self-determination, which, due to their prevalence, are cautiously qualified as "borderline" between the norm and pathology, in a certain sense appropriate for the period of social development, which can be called fluid (Bauman, 2002), "transitive" (Martsinkovskaya, 2013) or "precarious" (Butler, 2018; Khoroshilov, 2018), with the typical experiences of fragmentation, constant instability, vulnerability and uncertainty.

2. Problem Statement

Today, the philosophical and sociological discourse around the problems of cultural postmodern world requires association with concepts and empirical research in the field of clinical psychology and psychotherapy of identity disorders. In order to understand new cultural phenomena, when, under conditions of global disintegration, the experienced shock of uncertainty and insecurity becomes an overall state of precarity (Beck, 2000), the thesaurus of clinical psychology and modern psychoanalysis with its metaphors of "diffused identity", "destructive narcissism", "blurred identity", "instability", "uncertainty" can become a new "language" of the phenomenological description of the worldview (Kernberg, 2000; Rosenfeld, 2008).

3. Research Questions

The question arises, how methodologically legitimate is it to transfer the processes explained in psychological terms, mostly borrowed from the clinical descriptions of personal identity disorders, such as "fragmentation", "splitting", "fragility", "vulnerability", "instability" and the paradoxical combination of the incompatible to the sphere of public consciousness?

4. Purpose of the Study

The purpose of this study is to perform cultural-historical analysis of identity disorders developing in the sociocultural conditions of transitivity and uncertainty through studying groups of people who are experiencing a state of subjective precarity in a particularly acute way, and are characterized by a constant feeling of unbearable insecurity. A generalization of theoretical and empirical studies carried out in the field of personality disorders with accompanying repeated suicide attempts and other forms of self-harming

behavior will demonstrate the use of the clinical-phenomenological method of studying individual personality identity disorders in their proper context and will allow to correlate them with the description of a number of cultural transformations of public life.

5. Research Methods

It is precisely the concept of "intolerance for uncertainty" (and a number of its synonyms, such as "instability", "fluidity", "diffusion") that becomes today a key concept, on the basis of which a common methodology is developed for the clinical and psychological study of cultural phenomena of precarity and clinical identity disorders in situation of global uncertancy. Thus, we use the same method as in studying deviations of personal identity in the context of sociocultural uncertainty and move from analysis of uncertainty as a cultural phenomenon to the phenomenology of experiencing subjective intolerance for uncertainty, and through that to the sense of loss of self and related phenomena.

6. Findings

6.1. The data of sociological surveys and a number of cultural studies shows that the cultural situation seems quite paradoxical and close to clinical, indicating traits of borderline and split organization, when "parts" of Self, each in their own way, are defective, lack points of contact, do not accept or understand each other and avoid interaction. Some "parts" of modern Russian identity are energetically charged with ambition, perfectionism, grandeur and narcissism, i.e. they reject restrictions, generally accepted norms, and moral taboos (transgressive); are self-centered, not burdened with a sense of duty and responsibility, prefer the "positive", not inclined to social activity or solidarity. Other sides of self-identity are motivationally depleted, passive, unfriendly, depressive, deprived of the resource for development and are "connected" through superficially interpreted patriarchal-traditionalist attitudes and paternalism; changes are feared and avoided; they are dependent on strong power and "deify" it, prefer to "cling" to the given situation; despite the general dissatisfaction with quality of life, they avoid realizing the social and personal causes of their own troubles (Lipskii, 2014).

In recent decades, the phenomena of "disconnected" unity of historical experience and the crisis of collective self-identity have been recorded in Russia after the fundamental sociopolitical and cultural transformations of the 80ies and the 90ies. Famous Russian Writer recorded the memories and testimonies of those who are acutely aware of their current lack of demand, "obsolescence", for whom social and political changes of the 80ies and the 90ies have become a serious psychological trauma, destroying their basic values and established self-identity. Here are some excerpts from the text of her book, the statements of ordinary "people from the crowd": "How I envy people who had an idea! And now we live without any idea. I want the great Russia! I do not remember her, but I know that she was there." - "It was a great country with a queue for toilet paper ... I remember well how the Soviet canteens and Soviet shops smelled" (Aleksievich, 2013, p. 38).

All the time we are talking about suffering ... This is our path of learning. Western people seem naive to us, because they don't suffer like we do, they have a cure for any pimple. But us! We were imprisoned in

camps, flooded the land with corpses during the war, scooped the nuclear fuel in Chernobyl with our bare hands... And now we are sitting on the ruins of socialism. Like after the war. (Aleksievich, 2013, p. 40)

The important binary oppositions here that constitute sustainable self-determination for Self-among-We, are the identified personal and socio-ideological experiences, the idealization of "one's own" and the devaluation of the "other", the compensatory exaggerated value of the historical experience of national suffering and a pointed disregard for material values; nostalgia and a keen sense of loss of self. At the same time, the general feeling of danger and insecurity, which for defensive purposes is unconsciously attributed by the irrational phantasmal images of the Other, negatively evaluated, unfriendly and aggressively invasive, becomes the basis for unification.

6.2. Subjective intolerance for uncertainty as clinical phenomena

An individual in today's sociocultural situation is confronted with many important personal choices, which creates a particular existential anxiety. And it grows even higher with more simplified cognitive resources that he operates, trying to structure the uncertainty, with his stronger dependence on the immediate and often violent and manipulative influences from macro- and microsocial environment, and with his lower tolerance for uncertainty which he is able to handle constructively, while remaining an integrate and autonomous subject. An "escape from uncertainty" indicates "fragility", vulnerability of Self, a high level of anxiety, resistance to change, a preference for stable traditions, and authoritarian style of power. This is confirmed by a number of empirical studies that indicate the presence of individual-style, age, clinical and intercultural differences at the threshold of emotional tolerance for uncertainty and variability of defensive and coping strategies in subjective transformations thereof that can transform chaos, horror and incoherence into meaningful and "detoxified" whole (Sokolova, 2015; Hogg, 2007).

6.2.1. One can describe some individual and clinical style variations in experiencing the sociocultural shock of uncertainty in special precarious subcultural group of borderline persons. The first type of shock is "flooded" with an all-consuming negative affect, the core of which is an intolerable persecutory anxiety. The level of subjective uncertainty is supreme and its phenomenology is following: vagueness, blurred state, infinity, incoherence. They bring to life paranoid fantasy representations of immeasurable horror, total hostility and, as a way of defense, split and polarized positive and negative qualities of external and internal "other" in order to prevent the complete loss of the Self, its absorption and annihilation.

6.2.2. The second type is also associated with a somewhat different phenomenology: ambiguity, fear of novelty here leads to a decrease in the level of mental functioning: cognitive simplicity, preferred orderliness, regularity, routine as a defense against the expected catastrophicity of the new and loss of Self.

6.2.3. The third type is characterized by intolerance for uncertainty as a situation of lack of access to one's own internal resources and, as a consequence, extreme dependence on the support of the Other and the social environment as a whole; rejection of one's free agency, preferred personal and social conformity, complete obedience to authority, power, loss of one's own Self due to complete merging with the situation.

6.2.4. The fourth type of shock experience of uncertainty is the manic "intoxication" with transgression and chaos, the absence of all boundaries, of any restraining norms and rules, the triumph of narcissistic-perfectionist all-accessibility and permissiveness. The state is fraught with risk of losing vigilance of dangerous situations, an easy transition to antisocial actions and self-damaging behavior, including suicidal acts.

6.3. Uncertainty and manipulation as clinical phenomena

The blurring of individual moral principles, lack of empathy and attention to the subjective world of the Other, and cynicism are acutely manifested in uncertain or ambivalent situations of social interaction. This uncertainty contributes to the rise of the "communicative corruption": Machiavellianism and interpersonal manipulation which is supporting violence of various kinds, the conquest of power, self-assertion driven by the basic emotion of ressentiment (aggressive revenge), disguised hostility to Otherness, envy of the unattainable power of the Other, the prevalence of competition strategies and the struggle of everyone against everyone (total destructiveness) and a complete inability to cooperate (Sokolova, 2018; Sokolova & Laisheva, 2017).

6.4. Uncertainty and perfectionism as clinical phenomena

Another evidence of the dominant destructive overcompensational strategy in the situation of uncertainty, experienced as an intolerable confirmation of the fundamental fact of the imperfection of Self, and dependence on the Other, can be perfectionism. Understood in the paradigm of loss of Self, perfectionism indicates splitting of the integral self-identity and the "absorption" of its other "parts" by the substructure of the magical and fictional narcissistic-grandiose Self with its expansive and invasive desires, tireless polishing and beautification of one's own physical and mental self (Sokolova, 2015). The results of our research prove that a high level of perfectionism is fairly associated with the phenomenon of "attacks on linking": the destruction of symbolic and emotional connections that impede the understanding of complex cognitive and communicative situations. Pronounced perfectionism is a constant source of painful unbridgeable gap between the desired Ideal and rejected Imperfect Real Self and is a predictor of new types of dependence, including dependence on self-esteem, addiction to various cultural practices of transforming the body (for example, dependence on plastic surgery), bordering on anti-vital and self-destructive behavior up to suicidal attempts.

6.5. Intolerance to epistemological uncertainty and mentalization errors as clinical phenomena

6.5.1. The level of cognitive mediation in mentalization is reduced to its syncretic organization, when fantasies and illusions are easily projected outwards and are taken for real-life objects. The structure of this whole is undifferentiated, which implies the absence of boundaries between objective and subjective, real and hallucinatory, a weak distinction between the psychological boundaries of oneself and another person. Such a phenomenon is characteristic of borderline personality disorders (Bateman & Fonagy, 2004), but occasionally and for a short time it can occur in the state of extreme affective seizure, in the form of an instant "shutdown" of the ability to comprehend interpersonal experience of a

trauma (violence, in particular); it can appear together with some signs of "magical thinking" in understanding of causal connections between one's desires, impulses and intentionality of another person. In the pre-categorical mode of functioning, the consciousness the Self presents itself and the objective reality (and the Other) not as separate entities that are distinct from his hallucinations, but as an undifferentiated whole ("proto-Us", "one body, one soul for two"). Only unconscious affective attitude "for" or "against" oneself or the Other, dominates.

6.5.2. Mentalization processes which are based on the complex nature of thinking, lack the versatility and integrity, as well as the dynamic "fluidity" and flexibility in constructing intellectual and affective life, which is manifested in a lack of understanding of the fundamental incompleteness in cognition of the Other. The individual does not accept the uncertainty of the cognitive situation, is intolerant to alternative options in understanding experiences and intentions of the Other, except based on the observable situations, facts and obvious causal relationships. In a changing, uncertain and controversially organized social and cultural reality, a person with a pronounced complex mentalization style experiences a confusion and internal chaos; he lacks support in the outside world and faith in the future. At the same time, it would be unfair to deprive the complex style of mentalization of a special contribution to the overall picture of a person's subjective life: with all its dogma, limitations and fragmentation, it creates a world of stable routine and "healthy" ideas, stereotypes that allow one to adapt to everyday life without much mental effort, concretizes, "roots" and "earthens" ideas about oneself and others.

6.5.3. Studies prove that the loss of ability to mentally represent (rather than mechanically act and stereotypically reproduce in memory) emotionally significant events, symbolically (and not through direct response or magic control) to "contain" and process psychological trauma is a consequence of the lack of experiencing reliable and secure relationships of attachment and partnerships. The fragility of identity and the insufficiency of means and methods of symbolic self-regulation form an overdependence on the narcissistic mirror of the Other, manipulations in order to obtain the necessary support and, thus, to supplement the deficiency of self (Sokolova, 2018).

7.   Conclusion

7.1. Based on the thesis about the socio-cultural identity dependence, an analysis is presented of such phenomena of modern Russian culture as fragmentation, disintegration, broken historical memory, antagonism of goals and values, lack of cooperation and solidarity. The collective experiences of precarity, understood in terms of insecurity, constant instability, vulnerability, victimhood and diffuse anxiety, are almost the only basis for unification and integration.

7.2. The generalization of empirical studies of the phenomena of   intolerance for uncertainty, interpersonal manipulation and cinism, perfectionism, mentalization distortions, in acute and extreme form expressed in acute precarious patients with borderline personality disorder and

suicide attempts, in accordance with the principles of Russian clinical psychologists are qualified as syndromes of loss of Self in the form of diffused identity and/or destructive narcissism.

7.3. The necessity of methodological polyparadigm is emphasized. The clinical-phenomenological method of studying individual personality identity disorders in their proper context was applied and show correspondace with the description of a number of cultural transformations of public life.

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