
LUKA JANEŠ
University of Zagreb
lukajjan@gmail.com

IMPROVEMENT OF PSYCHIATRY WITH HERMENEUTICS AND PHENOMENOLOGY AS A PREREQUISITE FOR TREATING PSYCHOTIC DISORDERS

abstract

The Inherent inseparability of psychopathology and phenomenology is generally a known fact, established and popularised by Karl Jaspers in Allgemeine Psychopathologie. In the following paper, I will show the development of interdisciplinary methodology initiated by Jaspers, and discuss it by combining M. Merleau Ponty's theory of embodiment, R. D. Laing's existential-phenomenological approach, and T. Fuchs' concept of brain resonance and integral causality with the hermeneutical thoughts of Paul Ricœur regarding the notion of selfhood. The main thesis proposes that fusion of hermeneutics and phenomenology with psychiatry can play a significant methodological role in the approach to diagnosis and treatment of the psychotic disorders spectre, especially regarding the most complex yet inaccurately defined and evaluated mental disorder – schizophrenia. Due to the fundamental interpretative capacity of both disciplines regarding the understanding of the displacement (translocation) of subject, disembodiment, delusions and consciousness, I am considering them as a prerequisite for the effective expansion of psychiatric practice.

keywords

hermeneutics, phenomenology, subject, embodiment, psychosis, schizophrenia, psycho-phenomenological field, psychopathological hermeneutical circle

1. Introduction As the basic task of each scientific field, in the context of its sustainability and progressive value, I am taking a constant improvement of the methodology and the subject perspectives depending on the level of complexity of each particular task that in certain life issues inherently arise. And in relation to the world – the permanent improvement of the epistemic potential of the human species, aimed at the moral and responsible coexistence with the environment (Čović, Jurić, 2019). Psychiatric science is not isolated from the given hypothesis, and because of the intricacy and complexity of the human mental life and psychological manifestations, as well as the adaptation of the consciousness to the constantly new living conditions and the paradigm of “normality” of people in the social context, it requires a necessary dose of flexibility, and should not remain in “molds” and dependent exclusively on the paradigms of historical postulates. I claim that in the contemporary phase of development, psychiatry is ready for, and necessarily requires an interdisciplinary and transdisciplinary methodology as a fundamental scientific paradigm, in order to fulfil a teleological potential and to respond to the complex question of human psyche phenomenology, as well as the mental disorder treatment. Namely, I argue that the psychiatric domain extends to a much broader scale than the biomedical, clinical and neurocognitive practice, and, I think that it inevitably needs to integrate with various disciplines from humanistic domain, above all - philosophy/phenomenology (Herpertz, 2014, p. 179), sociology, psychology, anthropology, and pedagogy.

In the following paper, the importance of interdisciplinary dialogue between the humanities and the biomedical domain will be addressed through the introduction of the necessity of hermeneutic and phenomenological aim implementation into the rudimentary panel of psychiatric diagnostic methodology. The argumentation will be implemented by relying on the example of psychotic disorders (Paris, Philips, 2013), with the emphasis on schizophrenia¹ (APA, 2013), for whose diagnosis and adequately conducted treatment, the aforementioned philosophical disciplines play a key role, according to the appropriate scope of consideration

¹ Delusions are, besides the auditory hallucinations, one of the main symptoms and the crucial diagnostic criterion “axis” for recognition of the schizophrenic disorder. I claim that their analysis could not be sufficient without the phenomenological approach. A worthy argument for the given thesis is present in Louis A. Sass’ article “Delusion and Double Book-Keeping”. (Jaspers, Wundt, Breyer, 2014),

of the relationship between the subject and the object and the ontic mereological constellation² potency with which these two philosophical approaches are categorically fulfilled³.

The inseparable interdisciplinary relationship between psychiatry and philosophy, i.e. the psychopathological and phenomenological approach, is by no means a new fact. Karl Jaspers, a well-known German psychiatrist and philosopher, pioneer of the given orientation, vividly demonstrated the inseparability of the concerned domains, and in his eternal book *Algemeine Psychopatologie*, (*General Psychopatologie*) the subject of philosophical education in relation to a medical worker in the field of mental health stated:

Of philosophy, he will not, of course, learn anything he could ever take on his science. Initially, this study has a negative value. But anyone who is thoroughly remodeled about critical philosophy will be protected from many misguided questions, excessive debates, and constrained prejudices that otherwise play a certain role in psychopathology in the non-philosophical heads. On the other hand, the study of philosophy will be of positive value for the type of psychopathologists human behaviour in practice and for the clarity of his motives in knowledge. (Jaspers, 1997, p. 18)

I would add that a psychopathologist can indeed learn much from philosophy, and from it take the antidogmatic, *in-essence-of-aporía* critical thinking, which has been presented by many historical actors whose thoughts will be presented throughout the paper. The necessity of an interdisciplinary humanistic approach to the mental health system can also be found in the figure of Paul Tillich, who in the book *Courage to Be* claims:

Medicine needs learning about man to fulfil theoretical tasks; and it could not have a learning about a man if it does not constantly cooperate with all those professions whose central subject is a man. The purpose of the medical call is to help a man in some of his existential problems, those who are usually called illnesses. But it could not help a man without constant cooperation with all other professions whose purpose is to help a man as such. (Tillich, 1952, p. 50)

Above all, I repeat that it should necessarily integrate with the various disciplines that form the humanistic and social sciences domains – philosophy, sociology, anthropology, psychology and pedagogy, in order to preserve its inherent humanistic character. But, in this presentation, the main focus and primary goal is not to address the relationship between biomedicine and the humanistic domain, instead it is pointing to the unavoidable importance of hermeneutics and phenomenology to the development, treatment and diagnosis of the psychotic spectrum. I am implying that interpretation, therefore hermeneutics, is the starting point for each etiology and diagnosis, and in the context of determining the mereological (Potrč, 2002), constellative place and importance of certain phenomena, is inseparable from phenomenological evaluation and elaboration.

² This kind of mereology could be analyzed and synthesized with the help of Thomas Fuchs' theory of the "phenomenological field and the life space". (Fuchs, 2019)

³ According to the complexity and wideness of the issues indicated in the title, this presentation will have a propaedeutic character, i.e. it will in the basic lines present the crucial segments of a thesis, and a thoroughly presented system of the aimed thesis will be published in the future.

2. Hermeneutics and Psychopathology

Hermeneutics derives its etymological root from the Greek word ἑρμηνεύω (*hermēneuō* – to translate, to interpret) (Beekes, 2009, p. 462). In Greek mythology Hermes was a messenger of the gods, protector of trade and travelling.

Jean Grondin quotes that “the early usage of ‘hermeneutics’ places it within the boundaries of the sacred. A divine message must be received with implicit uncertainty regarding its truth. This ambiguity is an irrationality; it is a sort of madness that is inflicted upon the receiver of the message. Only the one who possesses a rational method of interpretation (i.e., a hermeneutic) could determine the truth or falsity of the message.” (Grondin, 1994, p. 21)

Hermeneutics has reached its historical and cultural relevance through the interpretation of biblical texts, and later in history, the hermeneutical method was applied to the interpretation of other great relevant textual works of human culture, and I am setting it in the context of interpretation of certain elements of a person that faces psycho-social challenges, mainly the ones of the psychotic spectrum⁴.

The key feature in hermeneutics is the concept of hermeneutical circle, which presumes contextual grasping of the interpreted sequence, and it is a kind of mereological eccentrically positioned⁵ methodological approach to the interpreted issue. This becomes an extremely important, even crucial factor in the psychopathological approach to the persons with psychosocial challenges, or mental disorders, and it is extremely important and unavoidable in the context of treatment of psychotic patients. I will induce the concept of the “psychopathological hermeneutical Circle”⁶ that assumes that we should interpret the wholeness from the details, and from the wholeness find certain parts of patients’ mental environment in order to analyze, specify and treat certain disorders. Later in the paper I will connect this concept with Thomas Fuchs’ concept of integral circular causality.

Furthermore, subsequent hermeneutics are present in Flacius Illyricus, Schleiermacher, Gadamer, Dilthey, Heidegger and Popper, and in the context of this work, the most relevant figure – Paul Ricœur, who reflected on the hermeneutics of selfhood. We could say that interpretation is a basic diagnostic tool present in the psychopathological domain, and Otto Dörr claims:

When trying to understand what tradition has meant in any of the fields of human experience, we cannot avoid going beyond the mere understanding of the text we have before us, since this will transmit to us, inevitably, certain viewpoints and/or certain truths. And how can we be sure of the legitimacy or truth value of what is understood? This is precisely the role of hermeneutics: *to constitute the experience of truth*, where natural science appears surpassed, as it occurs with history, art, law, etc. (i.e., in the social sciences). (Fuchs; Breyer; Mundt, 2014, p. 19)

⁴ Statements of the psychotic patients are a kind of book with torn pages, and the role of the psychopathologist (psycho-hermeneuticist) is to synthesize this confusing „statement mosaic“ into a meaningful composition.

⁵ Helmuth Plessner is the inventor of the concept of the eccentric positionality of the human entity, and in his perspective it is a characteristic that divides human beings from animals and vegetables (Plessner, 1970). I claim that the basic issues of the psychotic person are present in the frame of the eccentric positioning of its presence in the frame of the phenomenological objective field.

⁶ Argumentative support for the given thesis could be found in the book *Hermeneutics and psychological theory: interpretive perspectives on personality, psychotherapy, and psychopathology* (Messer, Stanley., Sass, Woolfolk, 1988).

I am considering the validity and truthfulness of the message as a crucial stance in the psychopathological diagnostic process, and the most aporetic part of semantical mediation between the subject and his message is present in treatment of a persons diagnosed with the disorder of the psychotic spectrum, with the focus on schizophrenia – the most stigmatized disorder present in the ICD and DSM diagnostic criterion which is, despite the various researches, and the knowledge based upon it, still a big taboo, and is in great measure socially stigmatized. Official researches proves that it is present in about 0,3 – 0,7 percent of people worldwide (Nuno, Guilera, Coenen, Rojo, Gomez-Benito, Barrios, 2019), more in urban than in rural places, and is marked with genetical determinations as well as social ones. Schizophrenia, as it is etymologically disputed, refers to bifurcation, the split on various levels of a person's circular causality of consciousness – the split from his own body, from his own being's continuity and temporality, from his past and his future, from society. Unavailable to verbalize it, he is not sharing the same world, the same phenomenological field with others anymore. The blockade of the person's environmental resonance and contextual integrativity occurs, as well as the semantical and ontical dissonance in relation to the environment. R. D. Laing, famous Scottish Psychiatrist and Philosopher, while writing on the example of a schizophrenic client named Julie quotes:

The phenomenological characteristics of the experience of this self seems in Julie to be in principle similar. However, one must be prepared to paraphrase her schizophrenia into sane speech before one can attempt a phenomenological construct of the experience of this 'self'. (Laing, 1960, p. 222)

I would say that the task of a psychiatrist, a psychologist and a psychopathologist is to find a suitable mediation tool for translating a complex psychotic statement, and with a lucid, adaptive, creative and flexible hermeneutical methodology, phenomenologically oriented to the objective relational constellation, and a circular causal space in which the patient's self resides, even the interpretation of "grammar" and "geometry" of the psychotic's psyche becomes accessible.

I claim that, in the context of schizophrenia, the most perplexing and most complex task is to puzzle out a true and false self, i.e. to semantically grasp from which semantic root the message comes that the psychotic person communicates and intends to intensify, in the frame of the meaningful message.

Laing on many places emphasizes the importance of understanding the schizophrenic statement, however complicated and difficult it is to grasp. He also claims:

Even when one felt that what was being said was an expression of someone, the fragment of a self behind the words or actions was not Julie. There might be someone addressing us, but in listening to a schizophrenic, it is very difficult to know 'who' is talking, and it is just as difficult to know 'whom' one is addressing. (Laing, 1960, p. 214)

Ontological background of the selfhood agency, methodologically summarized as the hermeneutics of the selfhood, which is thoroughly considered in the book *Oneself as Another*, Ricœur summarizes quoting:

Oneself as another suggests from the outset that the selfhood of oneself implies otherness to such an intimate degree that one cannot be thought of without the other, that instead one passes into the other, as we might say in Hegelian terms. To 'as' I should

like to attach a strong meaning, not only that of comparison (oneself similar to another) but indeed that of an implication (oneself inasmuch as being other). (Ricœur, 1992, p.3)

In the given context it is worthy to mention what Merleau Ponty thought on mutual incorporation, or mutual inhabitation of the body. He claims:

The communication or comprehension of gestures comes about through the reciprocity of my intentions and the gestures of others, of my gestures and the intentions discernible in the conduct of other people. It is *as if the other person's intentions inhabited my body and mine his*. (Merleau Ponty, 1981).⁷

So, if we perceive society hypothetically as a macro-organism, as a body comprising of various beings – or let us say atoms and organs, schizophrenic patients present deviant, unaccepted, categorically bifurcated elements which are disabled for this mutual inhabitation, which are disembodied, and “mentally dead” in relation to the liveness of the existential phenomenological field of social habitat, or environment⁸. Yet, I would say that the situation that is preceding the given schizophrenic disembodiment could in some cases be interpreted as a kind of hyper-worshiping of their own bodily entity, which implies certain narcissistic elements, not in Freudian context of grandiosity of self, but in Kohut’s context of secondary, loss-of-confidence kind of narcissism (Kohut, 2009), which makes a kind of shield to a person’s relation to the connectedness to others.

We can put the given macro-concept on the micro-scale of one’s psyche which is constituted of various mental and physical atoms, and harmonization between them presumes a healthy being.

Sartre, in his existential-philosophical manners, quoted that “Hell is other people” (Sartre, 1989). I would point out that in a psychotic’s case hell is raised and represented in his own image in the perception of others, whereby the psychotic subjectivity is dislocated, transmuted into objectivity, whereby “objectivity” judges, observes, follows, reads thoughts to the subject through his own traumas, compassions, fears, anger and various expectations. Furthermore, it should be noted that a person is never affirmed solely by themselves but always through the community⁹, and the initial community, in which the human psyche as well as psychological disorders are formed, is the family, and the person’s early years of life. I think that various mental breakdowns and disorders can be prevented mainly by intervention into this habitat¹⁰.

7 In this context, it is also worthy to mention Martin Buber’s concept of I and Thou (Buber, 1984).

8 Schizophrenic persons certainly live in a kind of the divided worlds. Minkowski, when writing about one hallucinating patient says: “I consider him as someone “hallucinated,” as a person “mentally ill,” and that I have the impression that a modification of tolerance of perceptible reality has occurred in him, that two dissociated worlds, one superimposed upon the other, exist in him. And since each of these two worlds seems to be endowed with spatial properties, if we pursue our “double-entry bookkeeping, the Idea of two spaces, the one superimposed upon the other in our patient’s perceptions, comes to mind as a natural reflection on our part as to the way in which he conceives reality. But here we are led to an impasse; for in reality there is only one space, and it seems impossible at first sight for us to conceive of how this space comes to be doubled and superimposed upon itself even in our subjective life. Moreover, the patient projects his hallucinations into the same space as his perceptions.” (Minkowski, 1970, p. 423.) I wonder if the phenomenological approach is not the perfect one for making a proper description and bringing an ontical identification between the hallucinatory worlds living in the schizophrenic’s mind?

9 This is a main motive in Aristotle’s – *Politics*, rounded in the syntagm *zoon politicon*.

10 The influence on the educational system, above all else, by directing children to the existence of selfhoods who exists beyond them, i.e. from learning that mankind is chased by a handful of different self-hoods which are first

Furthermore, Ricœur discusses that the actions of the self can never be understood from the position of pure subjectivity, because the question of motives is a question of personality that is always a concrete historical subject. The crucial point in understanding selfhood is showing the way that understands itself in the chain of intersubjective relations (Todorović 2019). I think that it is a crucial moment of the psychiatric diagnosis, and it needs a hermeneutical approach in order to adequately fulfil its tasks in the field of successful diagnosis and etiology of the psychic disorder.

What is decisive for understanding Ricœur's dialogue with history is a new methodology in which he clearly distinguishes "self" and "identity", "self" and "otherness" (Ricœur, 1992, p. 16). Unlike other methods, hermeneutics puts an emphasis on this very class and is deliberately addressed. The being is a dialectical relation to itself, it means that it is not always in the identity with itself, but is the identity of identity and change. On the other hand, change is never absolutely authentic, but selfhood is always constituted in relation to others, though it preserves its personal relationship (Ricœur, 1986, p. 4). This means that the double dialectics is at work, the dialectics of self-relationship that is rounded up in dialectical relation to others.

Ricœur states that hermeneutics is the site of three interrelated problematics:

1. the indirect approach of reflection through the detour of analysis;
2. the first determination of selfhood by way of its contrast with sameness;
3. the second determination of selfhood by way of its dialectic with otherness (Ricœur, 1992, p. 297)

Ricœur claims that the phenomenological method uncovered and revealed the importance of others in the interpretation of selfhood. Because apart from the fact that others appear in some form, it just wants somehow to "appear for others". Being a self is designing yourself in particular situations. How does he project himself? Ricœur would say: based on the value of the selfhood system.

So, as the fundamental task of a "psyche-hermeneuticist", I consider determining the key moments and causes of the patient's selfhood dislocation (which directs to disembodiment - (Stanghellini, 2009), for which it is necessary to have an insight into the spatiotemporal mereological context of the patient's life, genetical compound of his family and predecessors, periods and epochs in which traumas and other mental *aporia*¹¹ occurs, which, in the case of psychosis, is of course extremely difficult to grasp through the patients statements. Therefore, as a symptomatology-etiology tool, psychopathologists need to talk to relatives and friends of the person, but the big question is: are these statements true and benevolent regarding the patient? Therefore, the analyst and diagnostician must accurately analyze the psychological condition of the given "witnesses" and build the mereological mosaic of the phenomenological environment of the patient. Laing was a kind of a virtuoso in such situations, and I think that prior to analyzing a certain family and the social cases and relationships that precede the development of psychosis and stimulates it, it is necessary to set the general framework of the human brain and consciousness evolution, which should later be applied to particular cases.

of all - living beings which need care and understanding, despite their validity or invalidity. This should, of course, be applied to the parents too, in order to provide holistic methodology and raise practical results, and the family situation is definitely connected to transformation of one's psyche. I do not grant that this will bring results, but I am sure that the narcissistic seed in persons is a starting point, a development factor in many mental disorders and illnesses.

11 Greek term ἀπορία refers to something impassable, lack of resources or a kind of puzzlement.

The aforementioned mereological picture of the intentional position and relationship of an individual entity in relation to the environment could not be precisely understood without the use of a phenomenological approach, and in the contemporary literature, in the context of width and quality of the approach, it is inevitable to consider reflections of Thomas Fuchs, whose book *Ecology of the Brain* I am taking as a kind of encyclopedic orientation for the interdisciplinary relation between neuroscience and phenomenology, and as an effective methodological tool for etiological and also as the treatment paradigmatic approach to the phenomenology of the psychotic patients psyche, i.e. – the mental state.

3. Fuchs' *Ecology of the Brain* and the Issue of *embodiment*

The given book is marked with fascinating and paradigmatic interdisciplinary integration between sharp critical philosophical reflection and impressive range of neuroscientific specialized knowledge.

The author indicates the crucial role of, as he says – the *Umwelt* for understanding the human brain, namely as an organ of relation, interaction, and resonance: with the body itself, with the immediate environment of the organism, and with the social and cultural environment of the life-world. It is, as one can notice, closely connected to the arguments set for psychopathologists.

He is trying to break the dualism between body and mind, and sets a thesis that the fact that bodily consciousness does remain coextensive with the organism shows that it does not spring up out of it as a separate entity, like “Athena from the head of Jupiter” (Fuchs, 2017, p. 62). It is rather, from the very beginning, an *embodied and extended consciousness*, and it presents the “integral” of the living organism altogether, not the phenomenon encapsulated in the brain. He writes:

...consciousness cannot be envisaged as an invisible chamber that is literally contained in the head and concealed behind the sensory organs. Indeed, it is not contained at all “in the physical body”, but rather is *embodied*: conscious acts are particular, integral activities of a living, self-sustaining, sensory-receptive, and mobile organism. Therefore, the primary dimension of consciousness is the reciprocal, homeostatic, sensorimotor, and active-receptive relationship of the living organism and the environment. (Fuchs, 2017, p. 69)

I claim that the question of embodiment that is transmuted to the image that the environment creates towards the subject potentially inhabitates the underlying problem of the development of psychosis.

I would say that the possible cause of the disorder development, and the main issue of the person who is diagnosed with psychotic disorder is that he or she is in a “vacuum” of their own expectations and expectations of others concerning him or herself, and throughout this process his or her perceptive and ontic balance is being mixed up and smashed in plenty of hallucinatory pieces, full of content but without symmetric ontological form. The given chaos brings the feeling of embodiment as the final symptom. Stanghellini's early mentioned article *Embodiment and Schizophrenia* can be used as argumentative support for the given thesis.

He writes:

In the relations between the disorders of embodied self-awareness and intersubjectivity-intercorporeality, we can recognize a circular relationship. The defective structuring of selfhood, particularly through the phenomena of somato-psychic depersonalization (bodily perception disorders) and auto-psychic

depersonalization (detachment from one's own emotions and thoughts), can become an obstacle to the inter-corporeal attunement between the self and the other persons. Schizophrenic autism may derive from the incapacity to enter into emotional attunement with others and recognizes as *primum movens* a different quality of bodily performance. (Stanghellini, 2009)

In relation to the body, Merleau Ponty, through analysis of bodily space notices that

...with regard to our own body, what is true of all perceived things: that the perception of space and the perception of thing, the spatiality of the thing and its being as a thing are not two distinct problems...to be a body is to be tied to a certain world, as we have seen, our body is not primarily in space: it is of it. (Merleau Ponty, 1981, p. 148)

The synthesis between a psychotic person's selfhood, his expectations, the psycho-phenomenological space in which he is being constituted, the embodiment and mentality world could be reconnected and integrated with the existential-phenomenological therapeutic approach¹², and the task of the psychotherapist is to bring back the ontical balance in the patient's psyche, to harmonize ontic spatiotemporal balance of the patient's psyche in causal relation to its environmental space of phenomenological field (Fuchs, 2019).

In this context, it is necessary to recall Laing's construct of partial microsystems within persons that are in inter-collision due to the insufficiently formed "integrity of the self". (Laing, 1960, p. 215) The link between these systems, i.e. their integration into the macro-system of the selfhood's oneness, is the work of hermeneutics and phenomenologists. A similar concept is set by Thomas Fuchs who builds the concept of circular causality of consciousness based on vertical and horizontal circularity. The given is referred to in connection with mental disturbances:

On this basis, the concept developed here may be outlined as follows: mental disorders are marked, on the one hand, by a disruption of *vertical circular causality*, that is, of the interplay between lower-level processes and higher capacities of the organism. As we will see, this primarily affects a patient's relation to him- or herself, which continually influences the course of the illness including the neuronal processes on the micro-level. On the other hand, mental disorders are characterized by a disruption of *horizontal circular causality I, that is, of social relationships and the ability to adequately* respond to the demands and expectations of others. This leads to negative feedback loops in socio-functional cycles, which also have a crucial influence on the course of the illness. Both kinds of circular causal processes are tied to mediation by the brain, but cannot be located within it. For this reason, reduction of mental disorders to brain disorders is in principle not possible. (Fuchs, 2017, p. 256)

I claim that the ontical topology represents the key issue and starting point for research and evaluation of the psychotic stances of human beings, as well as for evaluation and navigation through the psychic field. The given topology, in the context of psychosis, marks issues of ontological dislocation of the selfhood, primarily present through the bifurcation between *Körper* (organic body) and *Leib* (lived body), (Fuchs, 2017, p. 12) of biological and experienced body.

¹² Medicaments can play a key-role in the given process, but I claim that the dialogue between therapist and patient plays an even crucial role. It derives the conclusion that philosophy plays a key role in psychotherapy.

Fuchs develops his thesis on the concept of embodied subjectivity, initially grounded in the phenomenology of bodily existence. He writes:

...consciousness cannot be envisaged as an invisible chamber that is literally contained in the head and concealed behind the sensory organs. Indeed, it is not contained at all “in the physical body”, but rather is *embodied*: conscious acts are particular, integral activities of a living, self-sustaining, sensory-receptive, and mobile organism. Therefore, the primary dimension of consciousness is the reciprocal, homeostatic, sensorimotor, and active-receptive relationship of the living organism and the environment. (Fuchs, 2017, p. 69)

I conclude that if consciousness is a circular relation between body and environment, and between *Körper* and *Leib* of the selfhood, than schizophrenia could be treated with circular therapeutic approach marked with phenomenological postulates strengthened with the bioethical sensibility, and this disorder, or disease can be efficiently curable. If the main problem of schizophrenia is disembodiment, then the phenomenological approach to development of ontical and selfhood dislocation can play a crucial role in treating the given disorder. Above all, in the context of proving that schizophrenic persons actually share living phenomenological space with “normal” ones, the phenomenologist can actualise this potentiality of schizophrenic comeback in the shared, entangled environment of reality.

4. Conclusion In this paper, in the baselines I denoted the tangents that links the hermeneutical and phenomenological expression in the plan of psychotic disorders, and the necessity of their interdisciplinary discipline is implemented in order to potentially improve the mental health system.

Communication is at the core of a psychotic problem, but also in a potentiality for overcoming it – and at the micro level of an individual’s psyche, his relationship to his own self, his communication with the environment, perceptions of others regarding his appearance and exact perceptions of others in relation to the subject. Also on the macro-level relationship between the psychiatrist and psychotherapist towards a person with problems, the communication between disciplines that must necessarily work together in the field of mental health.

In the context of the development of a psychotic disorder, I note that every thought has a communication value, and if we put it on a plan of cosmology and overall evolution – it is impossible to ignore the fact that the entire evolutionary organism is saturated with a handful of entities, atoms and relationships that communicate with each other at a multitude of levels. It is exactly the communication, therefore the semantic line that is interrupted in the schizophrenic’s case. Apart from communication, the key problem is the transfer of perceptive energy leading to dislocation of selfhood and complete disorientation in the face of objectivity and disorganization of the being’s intentionality. It is difficult for a phenomenologist to, using some miraculous formula, point out the paternal tendencies and directions of life that would ontologically anchor it on the domains of a mental harmony, but can definitely offer outlines or templates for starting points of the practice enquiry.

It is crucial to phenomenologically conclude this paper with the claim that a person in a state of psychosis is not a commodity or biological organism with a fault, but a person whose ontological status is disharmonized and lost¹³, but which can be found again and integrated at the personal level of psyche but also at the social level of integration into society. This

13 Laing uses syntagm *Ontological Insecurity* (Laing, 1960).

is, I believe, the strength of the reach of the hermeneutic and phenomenological approach, strengthened by ontological ethical and further integrative bioethical postulates, which, I believe, is the basis of a more integrative, interdisciplinary approach to the psychotic persons, and an orientation for the quality and functional integrative mental health system of the future. Likewise, it is necessary to underline that a psychotic person is above all – a living person who needs help, and is a part of the cosmical “environmental mereology”, so we as a community of empathic beings should work a lot on de-stigmatisation of schizophrenia, but also on the de-stigmatisation of psychiatry. Integrative bioethics can be used as an orientative methodological tool for the induction of given directions, in the context of interdisciplinary openness and transparency, which includes open dialogue regarding the mental health of beings in all stages.

I will conclude with the normative thought that we are all connected with the life nexus, and the mission, aim and deontics of human beings is to help, to bring liveness and orientation to disembodied entities, and for the given mission we should include a whole society in order to save disharmonized, schizophrenic persons, and to create a holistic, mereological, hermeneutically and phenomenologically engaged and directed mental health system. Overall, human mental health can be put in the analogy with musical harmony, which presupposes dialogue between multiple factors and elements, and I claim that mental health personnel who are induced with hermeneutical phenomenology could play the role of a conductor of the given fulfillment of the phenomenology field and life space in which mental disorders, including the psychotic ones, develop, manifest, and are cured.

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