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Three Modes of Distorted Temporal Experience in Addiction: Daily Life, Drug Ecstasy, and Recovery

A Phenomenological Perspective¹

ABSTRACT: The article examines distortions of lived time in addiction from a phenomenological perspective and presents their three ideal-typical qualities concerning: (1) daily life, (2) drug ecstasy, and (3) recovery. Regarding the first dimension, the following experiences are being discussed: the highly constricted present, lack of relationship with the future, collapse of being toward possibilities, repetitiveness of behavior and desynchronization with others. Regarding the second dimension, it is argued that drug ecstasy consists in the condensed experience of infinite future possibilities. Regarding the third dimension, the transformation of lived time in recovery is reinterpreted in terms of sublime aesthetic experience in the sense that the paradoxical nature of the sublime exemplifies the phenomenon of double identity of recovering addict in regard to time.

KEY WORDS: lived time • temporal experience • circular time • temporal horizons • sublime

If we looked at drug ecstasy as poisoning – as intoxication by some active substance – would we find what is essential about it? [...] We would learn as little as when examining the seductive beauty of a landscape through a microscope².

Jürg Zutt

¹ This paper was written during 2015 EURIAS Junior Fellowship at the Collegium Helveticum at the ETH Zurich and the University of Zurich, Switzerland. I would like to express my gratitude to the European Institutes for Advanced Study (EURIAS) Fellowship Programme and the European Commission Marie-Sklodowska-Curie Actions COFUND Programme FP7. I would also like to thank Elvan Kut for her useful comments to an earlier version of this paper.

² J. Zutt, *Zur Anthropologie Der Sucht*, [in:] *Auf Dem Wege Zu Einer Anthropologischen Psychiatrie*, Berlin 1963, pp. 435–436 (trans. MM).

Introduction

Addiction as discontinuity

One of the major phenomenological psychiatrists of the 20th century, Viktor Emil von Gebsattel, claimed that addictive behaviors have a distorted temporal character. While time experienced normally smoothly progresses towards the future, in a disturbed, “neurotic” condition, this future becomes a means to escape from the meaningless present. Lived time breaks into dissociated moments and one starts to move in vicious circles.

Every addiction is an attempt to heal oneself from the emptiness of the present, to compensate for it or to fill it up [...]. As far as the temporal structure of addiction is concerned, the moment of repetition is determining. The addict loses the overall continuity of his inner life story and exists only in moments, in instants of deceptive fulfillment, and therefore in a discontinuous way³.

The meaningful transition among three dimensions of time, past, present and future – that is the proper structure of lived time – is being lost.

Existential dimension of lived time

What von Gebsattel had in mind was an existential dimension of lived time. It is important to bear in mind that lived time is not only different from what is usually called clock time, but also from subjective duration. Within clock time the now-moments have no temporal extension and are merely no-longer or not-yet (the so-called B-series order⁴). Clock time’s seconds, minutes and hours (or whatever other nomenclature we choose to apply) are objective in a sense that their “lengths” are objectively settled. Subjectively apprehended they become relative, for a minute may seem longer or shorter, depending on the circumstances. Measures of subjective duration – such as those employed by objective psychology – presuppose that time is an external “object”. On the basis of such a presupposition, the phenomena such as a changed perception of time – for example, due to intoxication – can be empirically and, indeed, successfully tested.

³ V. E. von Gebsattel, *Prolegomena Einer Medizinischen Anthropologie*, Berlin, Göttingen, Heidelberg 1954, p. 133–134 (trans. MM).

⁴ P. Turetzky, *Time*, London and New York 1998.

In contradistinction, phenomenology recognizes that all experiences have some pre-given temporal content. Lived time is more than just an experience of an external time. It is a complex phenomenon constituted through an engagement with oneself, others and the world. As Medard Boss put it: “Original temporality always refers to a meaningful caring for something or disclosing of something – i.e. to the concrete happenings as which the unfolding (and coming into being) of man’s own existence actually takes place”⁵. Lived time comprises subjective apprehension of clock time, intersubjective synchronization with others and qualitative experiences of the personal past, present, and future. Access to givens of the past, happenings of the present, and projects of the future, as well as synchronicity with others, are basic existential conditions for all experiences. The three dimensions of lived time do not follow each other in the manner of clock time, but – quite on the contrary – are mutually entangled and dependent upon one another. In this respect, Martin Heidegger’s analysis of the *Dasein*’s existence from his *Being in Time* remains exemplary: experience does not temporarily unfold in a merely sequential or a linear way⁶. Its entanglement is dependent upon the primary movement towards the future – by all means the most important “extention” of lived time – conditioned by the ontological being-towards-death, which makes the possibilities of the actually lived future possible. But even anthropologically speaking, a lived past appears as a result of one’s present orientation to the future, as new situations and new expectations create a presently lived past out of their reservoir of significant memories. Presently lived past as well as presently lived future are actually being lived, meaning they are not simply experienced as external objects. From a phenomenological and existential point of view, one does not simply experience one’s memories and one’s expectations in the present – one is one’s past and one’s future, as they are continuously being lived⁷.

Therefore, the distortion of temporality that takes place in addiction as described by von Gebsattel concerns the basic structure of human development at the existential (ontological) level and not the secondary (epistemological) experience of time. Addiction is not simply a situation of drug dependence, but a comprehensive state of being⁸. As Ryan Kemp puts it: “addiction is a way of being, a form of existence which is lived at all time, not just when satiating impulses. This satiating may be prototypical, but its

⁵ M. Boss, *Psychoanalysis and Daseinanalysis*, trans. by L. B. Lefebvre, New York 1963, p. 46.

⁶ M. Heidegger, *Being and Time*, Oxford 1962.

⁷ See also: E. Minkowski, *Lived Time. Phenomenological and Psychopathological Studies*, trans. by N. Metzger, Evanston 1970.

⁸ S. Peele, *The Meaning of Addiction: An Unconventional View*, New York 1998.

influence extends beyond the act itself into existence in the broadest sense. It insinuates itself into the life-world of the subject, and in particular into the temporality of the addicted subject⁹.

Aims of the article

What follows is an attempt to give an overview of distortions of temporal experience that take place in addiction in three dimensions (1) daily life, (2) drug ecstasy, and (3) recovery, by presenting and discussing ideal-typical qualities regarding each of them¹⁰. The article purposefully eschews any reference to mental disorders classifications (ICD-10 and DSM 5) and points out merely temporal experience distortions – a term that does not suggest any mental pathology *per se* (even if these distortions are undoubtedly statistically abnormal). An addicted subject may certainly live a pathological, suffering existence, but it does not necessarily stem directly from a person's unusual lived temporality. As a matter of fact – as I will point out at the end of this paper – one's struggle with time may be even seen as a healthy rebellion against the objectifying tendencies of the modern world, a rebellion that nonetheless usually ends up in a spectacular failure.

Temporal structure of addiction in daily life

It is known that addicted people live chaotic lives. The way that the usual rhythms of life are being affected by addiction is well observable from the outside perspective. But how does temporal experience in addiction look from the inside, i.e. from the viewpoint of the addicted subjects' own, unusual body-mind states?

Living in the present

Remaining in the present is certainly the most typical aspect of lived time in addiction. It has been termed “oppressive temporal dimension of the now”, and for good reasons¹¹. Being in the present “extends into the entire existence of the addicts. It becomes their temporal way of being”¹².

⁹ R. Kemp, *The Temporal Dimension of Addiction*, “Journal of Phenomenological Psychology”, 40 (2009), p. 2.

¹⁰ The findings concerning time lived in daily life and drug ecstasy are summarized formally in Table 1 and the findings concerning time lived in recovery in Table 2, both at the end of the article.

¹¹ I. Copoeru, *Understanding Addiction: A Threefold Phenomenological Approach*, “Human Studies”, 37 (2014), 348.

¹² R. Kemp, *The Temporal Dimension of Addiction*, p. 6.

Alcoholics Anonymous' collective wisdom recognizes this situation and recommends its members to focus on the present. This view is contained in therapeutic maxims such as "one day at a time"¹³. The therapeutic effect of this saying stems from the fact that despite living in the present, addicted people tend to lose connection with their immediate, contemporary surroundings. Apparently, this is a paradox, since it has just been stated that they are immersed in the present. The explanation is that lived present also requires an engagement with the past and the future, whereas the addicted subject's present remains highly constricted. The addicted way of being lacks proper temporal extension, whereas the concept of "one day" – as distinct from mere "now" – already implies it¹⁴. An addicted person lives in what has been metaphorically termed "the floating world" – he or she is "trapped in a sort of circular liquidity of lived time, and suffers the pure illusion of linear movement"¹⁵. Such a narrow present is the exact opposite of a healthy present. Instead of dialogue and interaction between past experiences and future anticipations¹⁶, there is no past as a reservoir of positive experiences to draw from and no future projects to pursue.

Having no future

The problem with the present in addiction is its lack of relationship with the future. Addicted people are "stuck in the "now" of consumption" and it is difficult for them to will because they "do not believe in the future"¹⁷. The phenomena of lack of patience, impulsivity, lack of life goals and the impossibility to foresee the negative consequences of drugs may be understood through reference to the constricted lived future. For example, the limited future entails a lack of consideration towards risky behaviors. As Gerda Reith noticed, for an addicted person "the notion of risk (itself defined by its relation to the future – what might happen as opposed to what has

¹³ *Alcoholics Anonymous. The Story of How Many Thousands of Men and Women Have Recovered from Alcoholism*, New York 2001; *Twelve Steps and Twelve Traditions*, New York 2012.

¹⁴ M. Moskalewicz, *Horyzonty Czasowe Erwina W. Strausa: pojęcie „dzisiaj”*, "Sensus Historiae" XIX (2015/2), 175–179.

¹⁵ G. Di Petta, *Psychopathology of Addictions*, "Journal of Psychopathology", 20 (2014), 476.

¹⁶ G. Reith, *In Search of Lost Time: Recall, Projection and the Phenomenology of Addiction*, "Time and Society", 8 (1999), 99–117.

¹⁷ I. Copoeru, *Understanding Addiction...*, s. 345. For an insightful analysis see also: L. Radoilska, *Addiction and Weakness of Will*, Oxford 2013. The author argues that addiction is a more radical category of unsuccessful agency than weakness of will. Both are failures of intentional agency, but addiction carries certain amount of compulsion and transcends mere pursuit of pleasure.

happened or is happening) can have little real meaning”¹⁸. The problem is clearly temporal and consists of the impossibility to imagine and make one’s future different from the past. As the basic temporal structure of moving towards the future is being distorted, an addicted person is incapable of quitting, since he or she cannot put an end to a series of repetitive “events” (fixes). Such a person cannot define the last moment in a series, and thus is unable to begin something new. In other words, one is unable to break away from the vicious circle of being determined by the past and continues to drink despite the side effects – a phenomenon that can be better understood precisely through reference to lived time.

To be sure, the predictability of the future being narrowed to the next hit can be securing, whereas free, spontaneous projecting of oneself in time into an uncertain future full of possibilities entails the feeling of anxiety. In short, predictability is comforting, unpredictability is uneasy. Yet, in the case of addiction, the collapse of the being towards possibilities in the abovementioned Heideggerian sense, characteristic of a “normal” human existence, is radical. In addiction, the future becomes fully predictable to the extent of its non-existence. There is no openness, no novelty, no spontaneity, all abandoned in favor of complete predictability, ultimately amounting to repetition of the same.

Repeating the past

The break in continuity (relative linearity) of lived time in addiction and its overall repetitiveness thus go hand in hand. This phenomenon was described in terms of regressive cycles¹⁹ and of circuits of reproduction²⁰. In the long run, the repetitiveness does not only damage the continuity of life and affects the realization of long-term goals, but it starts to resemble usual body sustaining behaviors, such as eating or breathing. It becomes a part of the embodied self. In the words of Jann E. Schlimme, “the time-structure of this repetitive behavior [...] mirrors the time-structure of bodily functions”²¹. One is, therefore, living a timeless existence of eternal recurrences of the

¹⁸ G. Reith, *In Search of Lost Time...*, p. 107.

¹⁹ M. B. Erdos, G. Keleman, Z. Brettner, *It’s High Time ... Time Experience of Drug-Dependent Persons in Recovery*, “Journal of Groups in Addiction & Recovery”, 2009, 202–18.

²⁰ M. Ruckenstein, *Temporalities of Addiction*, [in:] *Making Sense of Consumption. Selections from the 2nd Nordic Conference on Consumer Research 2012*, ed. by L. Hansson, U. Holmberg, and H. Brembeck, Göteborg 2013, pp. 107–18.

²¹ J. E. Schlimme, *Addiction and Self-Determination: A Phenomenological Approach*, “Theoretical Medicine and Bioethics”, 31 (2010), p. 54.

same, i.e. the next/former hit²². The only continuity being left is the continuity of becoming more and more addicted. The final outcome is a reduction to animality, what Hannah Arendt would have termed the life of a *animal laborans*, i.e. unpolitical or merely a physiological way of being²³.

Desynchronizing with others

Living in the purposeless, repetitive present detaches an addicted person from social-temporal structures and makes one a temporal outsider²⁴. In consequence, he or she experiences problems in synchronizing one's self-time with social and institutional time, as well as with natural cycles of sleep and awakesness²⁵. A person's spatiotemporal horizon of being in the world with others, feeling with others, synchronizing with others, sharing both past and future with others, is shaken.

Objectifying the body

The temporal distortion also has its corporeal counterpart. As Ryan Kemp argues, an addicted lived body no longer functions as such and becomes a mere *Körper*²⁶, i.e. a thing-body²⁷. In contradistinction to pre-reflectively conscious lived body, it is a painful, suffering object. Entering into temporal cycles of cravings and withdrawals, it becomes extreme, either being lost in ecstatic drug usage or by calling for relief. Restricted temporality and restricted spatiality are thus co-existing phenomena.

Such a severe state has been described as being in a "frozen world" or "being-in-nothingness", i.e. in a situation at which both time and the body are no longer lived. In such an extreme situation, time comes to a standstill and addicted people become mere bystanders of their existence²⁸. Such a severe stage – unlike the general structure of lived time in addiction – may be indeed termed pathological and even quasi-psychotic²⁹ in regard

²² G. Reith, *In Search of Lost Time...*, p. 114.

²³ H. Arendt, *The Human Condition*, Chicago 1958.

²⁴ M. B. Erdos, G. Keleman, Z. Brettner, *It's High Time...*, *passim*.

²⁵ M. Jarvinen and S. Ravn, *Out of Sync: Time Management in the Lives of Young Drug Users*, "Time & Society" Apr 10 2015 <<http://dx.doi.org/10.1177/0961463X15579577>>.

²⁶ On the distinction between lived body (*Leib*) and thing-body (*Körper*) see: J. Aho and K. Aho, *Body Matters: A Phenomenology of Sickness, Disease and Illness*, Lanham 2009.

²⁷ R. Kemp, *Lived Body of Drug Addiction*, "Existential Analysis", 20 (2009), 120–32.

²⁸ G. Di Petta, *Psychopathology...*, p. 476–477.

²⁹ Denoting exogenic psychosis, different from endogenic psychosis of schizophrenics – the patient is not psychotic *per se* since part of his ego remains a critical spectator of a situation: G. Di Petta, *Psychopathology...*, p. 475.

to time, with the reservation that such a radical situation does not normally take place³⁰.

Temporal structure of addiction in drug ecstasy

Up until now, we have described the essentials of the overall structure of daily-lived temporality in addiction. But what exactly happens – in the temporal sense – during intoxication? In order to find out, we will now move to the phenomenological interpretation of the core of the temporal experience during drug ecstasy.

Infinite future possibilities

It is said that the basic structure of normal temporality consists of smooth progress towards the future, progress through which one's personal becoming takes place. On the other hand, addiction (regardless of a particular substance) has been described as a blockage of the historical development of a personality, i.e. obstruction of possibilities of becoming³¹. In his phenomenological inquiry that was supposed to grasp the essence of addiction, Jürg Zutt considered it a universal prospect of men (and not simply a pathology), one consisting in a profound modification of human unintentional becoming (what he called vegetative existence) – a change that becomes most apparent precisely in an ecstasy. Zutt considered the latter a state in which one is overwhelmed with possibilities. These possibilities break the boundaries of usually lived future and open it to the extreme³². At the same time, their sheer abundance overweighs every actuality so that ultimately none of them can be realized. In this sense, despite imagining possibilities, one remains stuck in a vegetative, unhistorical cycle, and cannot accomplish anything intentionally, that is through a willing action. In other words, none of the experienced possibilities can take hold. In real life, one is unable to break away from an endless, almost physiological repetition.

In contradistinction to time daily lived in addiction, in ecstasy one experiences a deceptive feeling of power over the future. Ecstasy is the enjoyment of infinite future possibilities in a condensed form, whereas, in reality,

³⁰ On the phenomenologically conceived boundary between normal and pathological experience of time see: M. Moskalewicz, *Disturbed Temporalities. Insights from Phenomenological Psychiatry*, "Time & Society", 25:2 (2016), 234–252.

³¹ J. Zutt, *Über das Wesen der Sucht nach den Erfahrungen und vom Standpunkt des Psychiaters*, [in:] *Auf Dem Wege Zu Einer Anthropologischen Psychiatrie*, Berlin 1963, pp. 278–85.

³² J. Zutt, *Zur Anthropologie Der Sucht*, *passim*.

everything remains hopeless. It creates a feeling of independence from the necessities of life that normally enslave an addicted person, a feeling that can be compared to the experience of freedom³³. But again, despite those imagined possibilities, reality appears curiously empty. Gilles Deleuze, in his characteristically ambiguous way, described this profound deformation of time in an alcoholic ecstasy as living in two times at once³⁴.

Dissociated future

The remnants of infinite future possibilities lived in drug ecstasy might still be present in addicted people's daily life. During a field phenomenological study concerning lived time of addiction therapy newcomers diagnosed with multiple substance dependencies, a curious phenomenon has been noticed and termed the dissociated future³⁵. Despite suffering the past as more important than the future, as well as despite having very short temporal horizons, the addicted newcomers were found to be experiencing a distant, mostly abstract future, dissociated from their present circumstances, as if it was a real possibility. In other words, a future distant in objective time was experienced as being almost actual. It was more like a future dreamt in the present than the future fully calculated and planned, but it was no less expected to happen. Assuming that the state of intoxication may leave temporal traces on a "sober" daily life, such a dissociated future may be interpreted as a remnant of infinite future possibilities lived in drug ecstasy. In consequence, even at times of sobriety, an addicted person tends to live a utopian life. Despite having a broken horizon of expectations, losing temporal continuity of life and even moving in vicious circles, such a person dreams of escaping the meaningless present in an unrealistic manner.

³³ J. E. Schlimme, *Addiction and Self-Determination...*, p. 57–58.

³⁴ "Alcoholism does not seem to be a search for pleasure, but a search for an effect which consists mainly in extraordinary hardening of the present. One lives in two times, at two moments at once [...]. The other moment may refer to projects as much as to memories of sober life; it nevertheless exists in an entirely different and profoundly modified way, held fast inside the hardened present which surrounds it like a tender pimple surrounded by indurate flesh". G. Deleuze, *The Logic of Sense*, ed. by C. V. Boundas, trans. by M. Lester, London 1990, p. 158.

³⁵ For a detailed analysis of this phenomenon see: M. Moskalewicz, *Lived Time Disturbances of Drug Addiction Therapy Newcomers. A Qualitative, Field Phenomenology Case Study at Monar-Markot Center in Poland*, "International Journal of Mental Health and Addiction", 14:6 (2016), 1023–1038.

Temporal structure of recovery from addiction

Both ideal-typical pictures of lived time in addiction presented above concern the addicted, pre-recovery state of being, either under intoxication or in between of drug ecstasies. To complement the analysis, lived time in addiction will now be described from the perspective of recovery.

The paradox of recovery

Addiction is a lifelong ailment and recovery does not simply entail going back to some original, pre-addiction stage³⁶. This is also true of lived time. Being a self-diagnosable condition, addiction can be seen as such only with hindsight. This fact is described as addiction's greatest irony: feeling it from the inside, one is unable to see it, seeing it from the outside, one is no longer able to feel it³⁷. While in an addicted state the past is no different from the present to the extent that the distinction between them does not make sense (circular temporality), in recovery the newly emerging present starts to reshape the past, providing it with a totally new meaning. Lived experiences that previously seemed ordered and controlled appear now as nonsensical and destructive. As a matter of fact, the first sign of recovery is the momentary insight into the possibility of one's past being essentially different from what one used to think it was.

As Ariane Hanemaayer argued in greater detail, recovery from addiction is, at its very core, a paradoxical experience³⁸. Throughout their affliction, addicted people, even if without realizing it, are determined by the past and lack a self-determined future. In recovery, they start to re-evaluate their past and realize their previous determination, at the same time considering themselves to be presently self-determined. The paradox is that the good experiences of recovery are now treated as a result of agency (self-determination), while the bad experiences of addiction are now treated

³⁶ On the subject of recovery from addiction from a phenomenological perspective see: E. C. Hirschman, *Recovering from Drug Addiction: A Phenomenological Account*, "NA – Advances in Consumer Research", 19 (1992), 541–49; P. Shinebourne, J. A. Smith, "It Is Just Habitual": *An Interpretative Phenomenological Analysis of the Experience of Long-Term Recovery from Addiction*, "International Journal of Mental Health and Addiction", 9 (2011), 282–95; L. Rodriguez, A. Smith, Jonathan, "Finding Your Own Place": *An Interpretative Phenomenological Analysis of Young Men's Experience of Early Recovery from Addiction*, "International Journal of Mental Health and Addiction", 12 (2014), 477–90.

³⁷ A. Hanemaayer, *Temporality of the Phenomena of Addiction and Recovery: Phenomenology, Symbolic Interaction and the Meaning/Interpretation Debate*, MA Thesis, University of Waterloo 2009, chapters 4 and 5.

³⁸ *Ibidem*.

as a result of a lack of agency (determination). The clue to the temporal re-orientation is the moment of a break in the determination (we are speaking here of lived experiences, so it is the moment of a break in experienced determination, consisting in considering oneself from now on as previously determined and currently self-determined). The previous state of determination precluded one from seeing his addiction, but as the new, sober self emerges, the past starts to appear as the time of determination. The new, sober self does not simply deny the determined past but recognizes it as important for the formation of a new identity. As Hanemaayer puts it, there is “a tension between treating an event of the past as no longer part of a self-understanding or way of being, all the while it is that very way of being that allows for the present understanding”³⁹. In order to comprehend this crucial phenomenological tension, the last part of this essay will present it in terms of the sublime.

Sublime experience of dissociation

The sublime is primarily an aesthetic concept, denoting a particular form of experience that is different from the beautiful in terms of being more passionate and more profound. Contrary to the beautiful, which derives from pleasure, the sublime is closely related to pain. It is a paradoxical experience that unites these two extremes. In the classic account of Edmund Burke, the sublime is not only psychological but also a physiological experience, which is tightening the fibers of the body⁴⁰. Its delight is different from pleasure and stems from the possibility of horror and pain that are not directly experienced.

A comprehensive analysis of a sublime experience in terms of collective identity was conducted by Frank Ankersmit, resulting in his theory of the historical sublime⁴¹. In Ankersmit’s account⁴², the sublime historical experience is an ontological, historical phenomenon constituting both past and present as separate dimensions of time. It no less but precedes and makes possible the distinction between them. It is also a formative experience

³⁹ *Ibidem*.

⁴⁰ E. Burke, *A Philosophical Inquiry into the Origin of Our Ideas of The Sublime and Beautiful*, Adelaide 2014.

⁴¹ F. Ankersmit, *Sublime Historical Experience*, Stanford 2005.

⁴² Significant nuances of Ankersmit’s theory of sublime historical experience are being skipped here for the sake of clarity of the argument. The theory applies mostly to collective experiences but it also allows for an individualist interpretation. For a more popular exposition of this theory see also M. Moskalewicz, *Sublime Experience and Politics: Interview with Professor Frank Ankersmit*, “Rethinking History”, 2007, 251–74.

of a subject that does not exist prior to this experience; in short, it is an experience without a subject. Ankersmit claims that existential identity formation takes place by dissociating oneself from the past in a sense that one becomes what one is no longer. As far as the past is concerned, it is, therefore, an experience of loss. The only content of a new identity is the loss of a former one. The past is lost and forgotten (pain), yet this loss and forgetfulness are being remembered (pleasure). While the past and present are becoming two different, incommensurable worlds, the content of one's present identity is based upon remembering about forgetting the past.

Recovery as becoming what one is no longer

Coming back to recovery, the sublimity of the moment of a break in time through a momentary insight – in the sense of awakening – stems from the fact that it allows for the past to appear for the first time as both lost and different from the present. This awakening has the character of *kairos* that establishes a new relation to the world⁴³. A person undergoes a profound identity transformation, one having a great impact on lived temporality, a transformation that has been claimed to bear the characteristics of a rite of passage⁴⁴. One dissociates from one's past, while this dissociation defines one's present self that for the time being lacks any other content. Since a recovering addicted person has no self other than one's addicted self (from which he or she tries to break away), it is impossible to build on previous experiences. Therefore, in recovery, a negation of one's former life shapes one's present identity (at least at the beginning), as there is no previous sober identity to which a person might return⁴⁵.

The sublime duality illustrates well the phenomenon of a double identity of a recovering addicted person with regard to time, i.e. a situation when one no longer drinks but nevertheless remains addicted. A drunken, painful past appears for the first time at the very moment that it is lost. Its painful appearance is a source of dark delight stemming from the fact that one is no longer drinking. It is thus a paradox, both a pleasant and a painful experience. To use previously introduced terms, one is now able to see what one can no longer feel. One can never say: I am a drug user. One can only say: I have been a drug user. I am no longer taking drugs, but I will always remain addicted. In this sense, remembering about forgetting exemplifies the paradoxical situation of remaining a sober addict.

⁴³ G. Reith, *In Search of Lost Time...*, p. 108–109.

⁴⁴ M. B. Erdos, G. Keleman, Z. Brettner, *It's High Time...*, p. 202–203.

⁴⁵ G. Reith, *In Search of Lost Time...*, p. 111–113.

Summing up the foregoing claims on the temporal structure of recovery from addiction, it must be underlined that in the process lived time undergoes a deep transformation. Previously, an addicted person had no past different from the present and was living in vicious cycles. Now, he or she gains both the past and the future, as reshaping the past allows for new anticipations to emerge. While the meaning of the past and the future changes, the present appears in a novel, extended way, integrating all three dimensions of time. The time lost is not simply lost and left behind, but continues to shape the present – yet, again, it is lived in a sublime way since it can no longer be felt from the inside. It is both external (bygone) and part of the present. This is both a pleasant and a painful situation. Painful, because one is now aware of the horrors of the past, yet pleasant, since this past is now embedded with a new meaning that makes one's sober present possible. The sense of control and self-determination are regained at the very moment one realizes one's lack of control and determination.

Conclusions

At the end of his opus magnum, Medard Boss warned that mass addiction in industrial societies is a pathological human response to the deprivation of an authentic existence – it is an “inevitable reaction to the growing crimes perpetrated upon the human soul by the apotheosized spirit of technology. Addiction, whatever its form, has always been a desperate search, on a false and hopeless path, for the fulfillment of a human freedom”⁴⁶. As such, addiction may be seen as a sign of a healthy rebellion, even if destined for a spectacular failure. The failure stems from the fact that freedom experienced in ecstasy is deceptive, leading to the very opposite of what it was supposed to accomplish (to circular, repetitive existence of *animal laborans*, mirroring the physiological processes of the body). In a way, the circular, determined existence is the price being paid for undoubtedly rewarding, intensive experience of infinite possibilities and a boundless freedom. For, almost ironically, the rebellion ultimately becomes a counterpart to what it was supposed to oppose, namely, the technological age, where everything, including the human body, becomes determined and objectified.


From a phenomenological perspective, addiction is an inauthentic (but not necessarily pathological) existence in general, a way of being in the world characteristic of the growing amount of modern people⁴⁷. Tempora-

⁴⁶ M. Boss, *Existential Foundations of Medicine and Psychology*, trans. by S. Conway and A. Cleaves, New York, London 1983, p. 283.

⁴⁷ I. Copoeru, *Understanding Addiction...*, p. 337.

rily speaking, its inauthenticity stems from the distorted structure of lived time, with constricted present and limited future possibilities ultimately leading to a repetitive existence. This point of view is plainly based upon hidden, normative assumptions regarding temporality. Lived time, if it is to be “healthy”, must have a future dimension different from the present, and therefore the past different from the present. The future should be open to many possibilities, out of which only some will be realized, so that the past consists of possibilities that are taken advantage of. The sense of fatality of both the past and the future must be low, and the sense of self-determination high. Overall, a balance between three dimensions of lived time should be maintained and firmly grounded in the extended present.

Such a healthy temporality is slowly regained while in recovery, though with a very special attitude regarding the past. The latter is neither regretted nor simply accepted. It is being held in a sublime duality and seen as the past that constituted the present at the very moment one dissociated oneself from it. It is the painful past that allows one to peacefully dwell in the present⁴⁸.

The crucial effect of this new attitude is one’s reorientation to the future. Previously narrowed to (ultimately) one possibility – the next fix – it starts to expand, whereas its possibilities, unlike in previous states of ecstasy, can be actually realized. In recovery, one begins to re-animate the future and regain the overall structure of temporality⁴⁹. Thanks to leaving the terrible past behind and not allowing it to determine the present, a hope for the future different from the past arises. The actualization of possibilities in the process of becoming replaces previously experienced vicious circles. One is able to live a comprehensive temporal existence. 

⁴⁸ See also: B. C. Banonis, *The Lived Experience of Recovering from Addiction: A Phenomenological Study*, “Nursing Science Quarterly”, 2 (1989), 37–43.

⁴⁹ G. Reith, *In Search of Lost Time...*, p. 107–108.

Tables

Table 1. Lived time in addiction*

Past	Present/ relationship between past and future	Future
Axis of otherness		
Identical with the present	Narrow: short time horizon	Close future identical with the present/ dreamed distant future being fully other
Axis of possibilities		
Many unfulfilled possibilities	Circular mode: constant repetition of the past	One possibility (next fix) vs. infinitely many in drug ecstasy
Axis of determinism		
Fully determined and determining	Meaningless: determined by the past	Fully determined

Table 2. Lived time in recovery⁵⁰

Past	Present/ relationship between past and future	Future
Axis of otherness		
Totally other but shaping the present (sublime duality)	Extended: growing temporal horizon	Slowly becoming other
Axis of possibilities		
Previously unknown possibility of sobriety realized	Linear mode	New possibilities emerging
Axis of determinism		
Fully determined but no longer determining	Meaningful: break from the past is self-determined	Self-determined

⁵⁰ In tables 1 and 2, the reciprocal relation between lived past, present and future has been conceptualized on three distinct axes: (1) The axis of otherness, with its ideal-type extremes of identity and otherness; (2) the axis of possibilities, with its ideal-type extremes of infinitely many possibilities and none of them; (3) the axis of determinism, with its ideal-type extremes of self-determination (freedom) and determinism.

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