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**DASEIN CAPITULATION AND THE EXISTENTIAL  
EXPERIENCES OF PATIENTS SUFFERING FROM  
SCHIZOPHRENIA**

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***Abstract***

The presented study relies on the L. Binswanger's concept of Dasein Capitulation and C. Riff's concept of Psychological well-being. Research shows how patients suffering from paranoid schizophrenia experience their being-in-the-world. This study used the original techniques: "10 fairy tales" (for determining the level of capitulation phenomenon); "Questionnaire for solving problems by patients suffering from schizophrenia", "Scales of psychological well-being" (C. Riff). The number and type of capitulation scenes at the completion of fairy tales and stories by patients demonstrates a level and the forms of existential retreat. The most used plots were "ignoring" (not recognizing the fact of the existence of difficult situation), "failure" (the desire to simply withdraw from situation) and "overwhelmed by supernatural forces" (the problem is solved in a "magical way"). The presented study revealed contradictions in the experience of psychological well-being of patients with paranoid schizophrenia. They consider themselves as psychologically successful, capable of positive functioning in society. The existential meaning of such a position is to create illusory supports in life, the mythology of one's own existence. At the same time, negative affect dominates in their experiences, dissatisfaction with the circumstances of their own lives, a sense of their worthlessness and powerlessness. Patients with a high level of surrender are more likely to encounter situations of frustration of needs of different levels, more sensitive to them, more often experience difficulties in overcoming them, and when such situations occur in their life, they are much more likely to seek voluntary hospitalization.

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**Keywords:** Dasein capitulation phenomenon, psychological well-being, attitude to life problems.



## **1. Introduction**

The main directions of scientific research of a special social formation - people with mental disorders, - are: the study of the image of a “mentally ill person” in various societies and cultures, attitudes towards them of various social and age groups, groups differing in the level of education, the nature of value orientations (Shevelenkova & Tverdokhle, 2015). At the same time, the experience by schizophrenic patients of their being-in-the-world, their own understanding of how they live in the society they are in today, their experiences and attitude to their own functioning are practically not investigated. Modern psychiatry, like clinical psychology, inheriting the attitude towards insanity that developed in the 19th century, still ignores the inner world of the patient, since, in the words of Foucault (1997), the healing of the madman lies in the mind of another - for his own mind is only the truth of insanity.

Our study seeks to characterize exactly how patients suffering from paranoid schizophrenia experience their existence in the world.

### **1.1. The Dasein capitulation phenomenon as an experience of their being-in-the-world by patients suffering from schizophrenia**

Experiences of their existence in the world by patients suffering from schizophrenia were described in the psychopathology of Binswanger (2001). He describes the phenomenon, which, in his opinion, is the ‘core’, the central ‘idea’ of this disease - the phenomenon of Dasein capitulation which can take many forms, but in any form, it is the result of the patient's desire for a problem-free existence (Binswanger, 1999).

According to Binswanger (1999), the development of capitulation begins with a violation of the consistency of natural experience, with the impossibility of “allowing things to be. Patients are unable to come to terms with the inconsistency and disorder of their existence and are constantly looking for a way out, seeking to restore order (Binswanger, 1999, 2001). There is a state of hopelessness that engenders a desire for an ‘end’. Also, patients form what they make for a position in life — extravagant ideals, for the preservation of which, and following them, patients lead a hopeless struggle. The ideal is extravagant, because it does not at all correspond to the whole life situation of the patient and, he is only one side of the alternative, the other embraces everything that contradicts this ideal. The patient balances for some time between him and his opposite, which gives rise to a “Sisyphean effort” to hide the other side of the contradiction that is intolerable for Dasein, and thereby support the extravagant ideal (the patient hides from himself the horrors of anxiety caused by another side alternatives). The last stage of capitulation is the stage of erasing the existence, which is a refusal or renunciation of the entire antinomic problem as such and takes the form of an existential retreat (Binswanger, 1999).

### **1.2. Experiences of psychological well-being and existential retreat of patients suffering from paranoid schizophrenia**

The existential retreat of patients suffering from paranoid schizophrenia is associated with both the particular nature of their psychological well-being and attitudes towards life problems and how to solve them. We define psychological well-being as an integral indicator of a person's focus on the implementation of the main components of positive functioning (personal growth, self-acceptance,

environmental management, autonomy, life goals, positive relationships with others), as well as the degree of realization of this orientation, which is subjectively expressed in the feeling of happiness, satisfaction with oneself and one's own life (Shevelenkova & Fesenko, 2005, 2013).]

## 2. Problem Statement

There is a lack of theoretical work in the present area of research. The productive concepts of existential retreat in schizophrenia were created in psychiatry as early as the first half of the 20th century in the framework of existential analysis of Binswanger (1999) and Daseinsanalyse of Boss (1994). There are also no empirical studies of the Dasein capitulation phenomenon. No attempt has been made to create empirical methods that capture the reality of existential retreat. In this paper, we propose a method, which aimed at studying the surrender of Dasein, which will be discussed below.

The very statement of whether a patient suffering from schizophrenia feels psychologically safe seem to be somewhat strange. Traditionally, the personal characteristics and experiences of these patients are viewed through the prism of purely negative manifestations, deviations from the norm. However, patients suffering from schizophrenia can demonstrate high rates of psychological well-being. In this regard, it is necessary to understand what the meaning of the experiences of their existence in the world as very prosperous and happy, for the most part lonely, with obvious difficulties related to their social functioning and economic status.

There is no research devoted to the study of the peculiarities of the attitude of patients suffering from schizophrenia to the problems they have in life associated with the frustration of the needs of different levels.

## 3. Research Questions

We assumed that there is a connection between the Dasein's capitulation level of patients suffering from schizophrenia and the specifics of experiencing their own psychological well-being. In the early stages of the development of capitulation the patient may feel extremely psychologically dysfunctional. As the 'erasure of existence' continues, the feeling of one's own well-being begins to increase, and capitulation patients should feel themselves highly psychologically safe. Moreover, as the 'erasing of existence' should change, the attitude towards life problems should also change.

In connection with the above, it can be assumed that:

- 3.1. Patients suffering from paranoid schizophrenia, identifying with the characters of fairy tales and stories proposed by him in the study and choosing different (capitulate or non-capitulation) subjects, will reveal different degrees of existential retreat.
- 3.2. The experience of psychological well-being by these patients will be extremely controversial, and patients who reveal a high level of existential retreat will position themselves as more psychologically successful.
- 3.3. Patients with a high level of existential retreat will more often seek to resort to voluntary hospitalization when they experience life-related problems associated with the frustration of the needs of different levels.

## 4. Purpose of the Study

The study is aimed at identifying the connection between the level of existential retreat of patients with paranoid schizophrenia and the feeling of their own psychological well-being, as well as the peculiarities of their attitude to the life problems they have associated with the frustration of the needs of different levels.

- 4.1. Based on the study of the choice of patients suffering from paranoid schizophrenia, mainly capitulation scenes ending fairy tales and stories, to identify a group of patients who demonstrate in their choices a high level of existential retreat.
- 4.2. To characterize the peculiarities of the experience of patients suffering from the paranoid form of schizophrenia, their own psychological well-being and to reveal its existential meaning.
- 4.3. To characterize the differences in relation to the problems of life and their solutions to patients with different levels of existential retreat.

## 5. Research Methods

### 5.1. Study participants

The study was conducted in 2018 and involved 50 patients in the rehabilitation department of the Psychiatric Clinical Hospital No. 1 named after. A.N. Alekseeva suffering from paranoid schizophrenia (28 men and 22 women aged 30 to 52 years).

### 5.2. Research methods

- "10 fairy tales" (Timofeeva-Gerasimova & Ilizarova, 2013). The technique is that the subject is offered 10 versions of the beginning of fairy tales and stories, that is, 10 unfinished stories that break at the moment where the main character needs to somehow cope with the situation. The subject is invited to continue the story, putting himself in the place of the protagonist. Each story has 9 variants of endings in accordance with the plots described below. All plots are divided into two groups: 'plots of the norm' and plots 'capitulation'.  
There are four plots of the norm for each fairy tale or story: "Independent struggle"; "Fighting with the help of others"; "Compromise"; "Fighting without a solution".  
The second group combines the plots of 'surrender' (the forms of surrender highlighted by Binswanger):  
"Death"; "Refusal"; "Ignoring"; "Passive suffering"; "Overwhelmed by supernatural forces".
- The Russian version of the questionnaire "The scales of psychological well-being" (Ryff, 1989, 1995) is adapted by Shevelenkova and Fesenko (2005, 2013).
- "Questionnaire for solving problems by patients suffering from schizophrenia during the frustration of the needs of various levels", developed by Shevelenkova and Kazantseva (2017). The technique consists of 20 problem situations that describe situations of frustration of needs at various levels. Patients choosing how to solve each of the situations (independent decision, contacting specialists in the day hospital, voluntary hospitalization). It was also necessary to

assess how often they encountered such a situation; how sensitive they are to it and how difficult it is to cope with this kind of situation

- Statistical data analysis was performed using the computer program SPSS Statistics 19.0.

## 6. Findings

### 6.1. The results of the study of the Dasein's surrender phenomenon

All patients who participated in the study (the technique "10 fairy tales") were divided into two groups: if there were less than 5 capitulation scenes for 10 tales of the subject, he/she was assigned to the group with a low capitulation index (Group 1), and if the subject had between 5 and 10 capitulations for 10 tales, he/she was assigned to a group with a high index of surrender (Group 2). Thus, 32 persons (out of them: 20 men and 12 women) were assigned to group 1 - with a low index of surrender, and 18 persons (8 men and 10 women) to group 2 - with a high index of surrender. The percentage ratio of the frequency of occurrence of different capitulation plots in the total volume of these plots in each of the groups with low and high capitulation was calculated (Table 1).

**Table 01.** Percentage ratio of the frequency of occurrence of different capitulation plots in the total volume of these plots

Plot / Group	Group 1 Low level of surrender	Group 2 High level of surrender
Death	2,6%	9,8%
Renouncement	2,6%	18%
Ignoring	<b>43,6%</b>	<b>52,5%</b>
Passive suffering	17,9%	6,6%
Overwhelmed by supernatural forces	33,3%	13,1%

Main form of existential retreat used by patients of both groups is 'ignoring', and this plot is significantly more often used by patients with a high level of existential retreat. These groups quite often resort to such forms of Dasein surrender as the desire to get out of a conflict situation ('refusal') or to expect that the arisen problem will be resolved 'in a magical way' ('capture by supernatural forces'). Such methods of conflict resolution and escape from difficult life situations should contribute to forming the notion that they are psychologically safe enough in patients suffering from paranoid schizophrenia.

### 6.2. The results of the study of psychological well-being on patients suffering from paranoid schizophrenia

The study revealed that most of the patients examined, positioned themselves as psychologically prosperous (62% of patients with a low level of existential retreat and 67% of patients with a high level of existential retreat). The result obtained in that study contradicts the characteristics of the patients real functioning in society: the overwhelming majority of them are out of work, have a feeling of loneliness, loss of interest in life, apathy, insecurity, stress, etc. (Petrankova & Shevelenkova, 2013). The ways patients with different levels of existential retreat experience their psychological well-being are presented in Table 2.

Among patients with a low level of existential retreat (group 1), on a scale of ‘positive relationships with others’, the low rate prevails in 50% of subjects and the moderate and high ratio in the remaining 50%. Subjects with a high level of existential retreat, (group 2) more often, in 67% of cases, assess their relationships with others as positive. On a scale of ‘Balance of affect’ (indicating the predominance of negative affect) 88% of subjects in both groups indicate their dissatisfaction with the circumstances of their own lives, negative attitude towards both the world and themselves, as well as a sense of worthlessness and powerlessness. 81% of capitulating patients show an extremely low degree of self-attitude. At the same time, in the group with a low level of existential retreat, 81% of the subjects believe that they maintain positive relationships with others, consider that they are ‘personally growing’ and open to new experiences. The majority of patients assess their high and moderately- expressed ability to autonomous existence, to control the environment, to personal growth.

We consider the revealed contradictions in the experience of psychological well-being of patients with paranoid schizophrenia as a reflection of the antinomic tensions arising from their inability to find at least some way out of difficult life situations. The fact that the patients studied by us still strive to position themselves as psychologically prosperous testifies to an existential retreat, both the desire to protect oneself from suffering and the desire to create ‘existential supports’, ensuring the very possibility of maintaining existence in the world, giving a person the feeling of the fullness of existence. Schizophrenic patients experiencing themselves as psychologically fairly high-successful (especially those who are socially maladjusted, in dire need of professional, medical, social, and simply human assistance) are likely to be illusory, protective, and reflect the desired degree of well-being.

Such inconsistency in the experience of their ability to function positively is associated with the special nature of the decision by patients with a high level of surrender to resolve their own life problems.

**Table 02.** The percentage of the severity of high and medium psychological well-being in each of the groups

<b>Scales / Group</b>	<b>Group 1 Low capitulation rate</b>	<b>Group 2 High capitulation rate</b>
Positive relationships with others	50%	67%
Autonomy	75%	78%
Environmental management	69%	56%
Personal growth	56%	66%
Presence of goals in life	62%	67%
Self-acceptance	<b>81%</b>	<b>12%</b>
Balance of affect	88%	88%
Meaningfulness of life	69%	67%
Man, as an open system	56%	78%
General index of psychological well-being	62%	67%

Statistically-significant differences between groups were obtained only on the “Self-Acceptance” scale ( $p < 0.05$ ).

### 6.3. The results of a study of ways to solve problems for patients suffering from schizophrenia during the frustration of the needs of various levels

It was found that patients with a high degree of existential retreat were significantly less likely to resolve life problems on their own or relying on the family. These patients would be significantly more likely statistically to seek voluntary hospitalisation if they had a situation of frustration with problems than patients with a low level of severity of this phenomenon. The study also revealed different percentage of choice of the option ‘voluntary hospitalization’ as a way to resolve life problems in each of the studied groups (Table 3).

The patients with a high degree of existential retreat also believe that most often they are experiencing situations associated with dissatisfaction with social and prestigious needs; they are most sensitive to problems in meeting physiological needs and security needs, and the greatest difficulty for them is resolving problems caused by the frustration of social and spiritual (existential) needs. Although less likely, these patients encounter frustration of physiological needs in their own lives, security needs and spiritual (existential needs), while it is the problems arising from difficulties to meet these particular groups of needs that make them seek voluntary hospitalisation.

**Table 03.** The percentage of choice of the option ‘voluntary hospitalization’ for the frustration of the needs of different levels of patients in each group

Plot / Group	Group 1 Low level of surrender	Group 2 High level of surrender
Physiological needs	-	3,7%
Security need	2,5%	4,4%
Social needs	2,5%	2,2%
Prestigious needs	4,2%	-
Spiritual (existential) needs	2,1%	3,7%
Physiological needs	-	3,7%

## 7. Conclusion

The study allowed us to identify two groups of patients suffering from paranoid schizophrenia - with high and low levels of surrender Dasein, as well as to establish the prevailing forms of existential retreat in each of the selected groups. The main form of existential retreat used by patients of both groups was ‘ignoring’ - the simplest way to avoid a difficult situation, not recognising the fact of its existence, and continuing to act as if nothing violated the normal course of life. This plot is significantly more often used by patients with a high level of existential retreat, along with such forms of Dasein surrender as the desire to get out of the conflict situation (‘rejection’) or the expectation that the problem will be resolved ‘magically’, (‘capture by supernatural forces’). The increase in the number of capitulated scenes at the

end of fairy tales and stories to some extent reflects the ways patients suffering from paranoid schizophrenia resolve life problems.

If the above is true, then one way to ignore the problems of life, to expect their magical resolution without the patient's involvement is a way of positioning the patients as psychologically prosperous. The study showed that indeed the majority of patients suffering from paranoid schizophrenia consider themselves sufficiently and highly well-to-do psychologically. It means that these patients create illusory life supports and, form a specific mythology about their own existence and turn their perception of surrounding reality into illusion, which in turn reveals the existential meaning of psychological well-being in patients with paranoid schizophrenia.

This conclusion is confirmed by the fact that simultaneously with positioning themselves as fairly successful psychologically most of the patients we studied have a negative affect associated with dissatisfaction with the circumstances of their own life.

The validity of the above conclusions is also confirmed by the fact that patients with a high level of surrender believe that they are more likely to encounter situations of frustration of needs of different levels, they are more sensitive to situations of frustration and more often have difficulty overcoming them, and they would seek voluntary hospitalisation, significantly more often than patients with a low level of severity of this phenomenon.

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