Concept Paper

Disembodiment and Delusion in the Time of COVID-19

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Abstract: This article proposes an analytical framework that highlights embodiment's ontological complexities and the ways in which the securitization of the body, during the COVID-19 pandemic, brought our embodied existence under the scrutiny of the invasive gaze of multiple social authorities, framing public and private modes of being as existential security risks. It engages with the research developed by psychiatrist Iain McGilchrist and clinical psychologist Louis A. Sass on schizophrenia, tracing the extent to which COVID-19 reshaped reality displays a dynamic akin to this mental disorder, through its abnegation of embodied presence, retreat into virtual register, and abnormal interpretations of reality. To spotlight this dynamic's consequences, the article explores three interconnected features of schizophrenia, namely hyper-reflexivity, diminished self-presence, and disturbed grip on the world. These help to contextualize the ways in which a large segment of the population in the United States responded to the COVID-19 pandemic. To that end, the article highlights the development of a virtual universe of conspiracy theories, shaping a citizenry which, akin to schizophrenics are simultaneously cynical and gullible, manifesting a vehement distrust of aspects of life that need to be implicit, while readily embracing conspiratorial worldviews.

Keywords: COVID-19; embodiment; securitization; schizophrenia; conspiracy theories

1. Introduction

The COVID-19 pandemic caused the sort of radical social change that will endure and leave its deep imprint on the ways we think and connect with the world. In this paper, I invite a meditation on the COVID-19 pandemic's alteration of embodiment and on the societal repercussions this alteration brought about. Especially noteworthy is the fact that with the pandemic's onset, our bodies became security threats. The situation evolved rapidly, from affecting solely individuals living in restricted areas, to posing a risk to the entire humanity. We learned that we were "at war" with a virus, described as a "hidden enemy" and an "invisible killer". Because the virus appropriated and used our bodies to travel and multiply, fighting it required the development of new societal attitudes towards and regulations targeting our bodies. The COVID-19 pandemic emerges in the context of the recent association made between human bodies, disease, and national (as well as global) security, association constituted throughout several global health crises: HIV/AIDS, Anthrax, SARS, H1N1, Ebola, and Zika. With these events, disease becomes integral part of the national and global security discourse, envisioned as a threat not only to human security but also to the political, economic, and strategic interests of the state ([1], p. 2).

Securitization, as defined by Barry Buzan, Ole Wæver, and Jaap de Wilde, is a discursive practice that takes politics beyond the established rules of the game and frames an issue either as a special kind of politics or as above politics. Thereby, authorities, involved in securitization, claim the right to handle cases that are deemed national and global existential threats, such as the COVID-19 pandemic, through extraordinary means, and to break the regular political rules of the game [2]. Labeling COVID-19 as an existential threat, brings about emergency responses directed at surveilling and controlling the movement of bodies via expanded police powers, national lockdowns, and border closures ([1], p. 1). The securitization of the circulation of persons and social contact inevitably framed various

modes of being as dangerous. The resulting states of exception were simply rejecting the established ways of embodied presence and interaction in social as well as private spaces ([1], p. 4). The habitual ways in which our embodied selves comported, suddenly menaced the wellbeing of individuals and that of the community. Therefore, what was internalized as familiar implicit behavior had to be brought back into conscious awareness with the purpose of evaluating the forms of vulnerability it generated and rethinking our social routines. Hence, we witnessed the securitization of not only the COVID-19 virus and human bodies, but also of aspects of life that were before the pandemic considered intimate, private, and safe. Multiple forms of social authority, at the state and national levels, devised and quickly implemented thorough systems of regulations to manage and contain the risk posed by our embodied presence and interactions. These swiftly updating regulations include wearing masks; receiving vaccines and boosters; presenting a vaccine certificate at the place of work or during travels; maintaining the stipulated distance from other bodies (often marked with paint or tape on floors of airports or stores); regularly testing for COVID-19 and presenting the results for travel or attending school; abiding by quarantine rules; separating bodies through screens; refraining from handshakes and hugging; disinfecting surfaces touched by bodies; and interdicting gatherings beyond a limited number of people.

This article proposes an analytical framework that brings to the forefront the ontological complexities of embodiment and reveals securitization's potential impacts on the way we relate to our own selves, to others, and to the world. The analysis relies on the research developed by Iain McGilchrist [3,4] and Louis A. Sass [5,6] on schizophrenia, a condition involving a disconnect from the body, emotions, and practical (material) world as well as a retreat into an abstract (mental) existence. The COVID-19-reshaped reality shows a dynamic akin to schizophrenia, through its abnegation of embodied presence and withdrawal into virtual register. To spotlight this dynamic's social repercussions, the article further engages with three interconnected features of schizophrenia, namely hyper-reflexivity, diminished self-presence, and disturbed grip on the world ([7], p. 464), showing how these could help us contextualize the startling ways in which large segments of society understood and responded to the COVID-19 pandemic.

2. Embodiment's Ontological Intricacies

In this section, I invite a contemplation of the extent to which our bodies are essential to our existence, both in enabling the formation of a primordial sense of self and in forging our intimate connection with the world. Embodied cognition acknowledges the privileged role of the body, placing special emphasis on the body as a bridge between the mind and the world, as well as on the reciprocal relationship between bodily-motor and cognitive-emotional processes. Therefore, alterations of the body necessarily influence the acquisition of information, in addition to generating psychological changes ([8], p. 202). It is worth mentioning that while a sensible focus on embodiment emerges from research pertaining to psychology, neuroscience, and philosophy, social sciences showed limitations when it comes to including the human body in its theoretical analysis. Even when the focus is directed towards topics centering on the body, such as biopolitics and necropolitics, the theoretical approaches employed show an inability to acknowledge and integrate embodiment's complexities into their analytical models. Instead, these frameworks start their analysis from an initial unproblematic stable state of embodiment, which is subsequently dislocated, fragmented, and alienated through the inclusion of the body into the state or capitalist logic and systems of regulations. As the COVID-19 pandemic brought to the center of conversations in social sciences the body and our embodied existence, these analytical limitations became especially salient.

In this paper, drawing on insights from philosophy, clinical psychology, psychoanalysis, and neuroscience, I first bring attention to embodiment's complexities, as a human condition, within or outside a state-system or capitalist mode of production. I argue that acknowledging such complexities is a necessary step if one intends to further explore

the impact of the COVID-19 pandemic on our embodied experience. More specifically, I propose that we rethink our understanding of the body, moving away from conceptualizing it as a stable/static unit, that can be investigated as separate/severed from the world, to seeing it as a process that can only emerge at the intersection of (and inseparable from) various flows and processes part of nature, culture, and society. The body can only exist as a becoming (not static) and as integral (not severed) part of the world.

The psychoanalytical stance[1] [9], inspired by psychiatrist Jacques Lacan's ideas, helps us envision these intricacies. More specifically, it argues that the body is formed and exists simultaneously in three registers: the symbolical body, the imaginary (or ideal) body, and the real body. As these three registers present separate ontological groundings, the body itself shows intricacies emanating from its constitutive ontological tensions. For instance, the Imaginary register includes the field of fantasies and images. The imaginary body is the internalization of an image of our body, presented to us by social and cultural models ([10], p. 113). The imaginary representations of our bodies gained significant ground in contemporary society, especially during the COVID-19 pandemic, as the visual representation of our body came to be the principal way in which we presented ourselves to the world in virtual space. Furthermore, in public spaces, during the COVID-19 pandemic, the visual presence or absence of facemasks stirred up tensions, triggered heated debates, and marked bodies as safe/unsafe, liberal/republican, friendly/unfriendly, or insider/outsider.

The Symbolic register is concerned with the function of symbols and symbolic systems. As further discussed in this article, the mediation of the Symbolic register limits a direct pre-reflective connection to the body ([11], p. 66). We understand our symbolic body through the medical body maps that organize the body in systems, such as the digestive and the cardiovascular systems. During the current pandemic, the existential unpredictability and vulnerability with which COVID-19 faced us embodied beings, was encountered with an outpour of fast-changing statistical information about infection rates, death rates, incubation periods, etc. This information efflux could be interpreted as an attempt to organize and discipline in a system of meaning the traumatic event.

The third register, the Real, designates that which is impossible to symbolize. For Jacques Lacan explanation of the Real is always in terms of the impossible, the Real is that which is impossible to bear ([12], p. 104). The body pertaining to this register includes the visceral dimension, more specifically the "flesh" (la chair), a concept initially introduced by Jean-Paul Sartre, who pointed out its importance as "the pure contingency of presence" ([13], p. 343). It is the experience of flesh that gives rise to nausea, a reaction to an experience impossible to bear ([14], p. 42). The concept gains further depth in Maurice Merleau-Ponty's [15] writings, who addresses "flesh" as belonging neither exclusively to the subject nor to the world, instead as a primal element out of which both are born in mutual relation. Neither as a mind nor as material substance, the "flesh" is a kind of circuit which traverses the subject, but of which the subject is not the origin ([16], p. 201). The COVID-19 pandemic brought back into our consciousness the fact that despite our astonishing technological advancements and accelerated transfer of life onto the virtual register, our existence necessarily rests upon a visceral foundation of internal organs. In addition, the impossibility of halting the global spread of the COVID-19 virus, reminded us of the profound visceral connectivity that humans share at the global level. Like the Imaginary and the Symbolic, the Visceral cannot be properly said to belong to the subject, it is instead a power that traverses the subject, granting and molding life in ways never fully willed nor understood ([16], p. 203). As embodied beings, we emerge at the confluence of these three ontologically distinct flows: images, language, and flesh. As this framework shows, our embodied experience originates in the outer world, in a process of perpetual becoming, at the intersection of ontological registers that do not correspond fully to our actual being.

3. Disruptive Returns of the Tacit Body

The embodied experience is further complicated by the fact that the body can be perceived as both subject and object, both what I am and what I have. Our regular lives require maintaining the delicate balance between these two forms of embodied experiences. That is the case, because the body needs to remain tacit, undisturbed by the conscious mind, for most of its functions to take place normally. In this regard, Merleau-Ponty's [15] term *lived body* expresses one's primordial connection to one's own body and lived relation to the world ([17], p. 371). Merleau-Ponty further insists that one can only gain awareness of the world through the medium of the body, as one also becomes conscious of the body via the world ([15], p. 82). The lived body must remain consciously unacknowledged so it can facilitate, what we came to identify as a regular experience of being in the world ([18], p. 251). The body comes back into our attention most strongly at times of dysfunctions, which can emerge from within each of the three ontological registers discussed. For instance, during the COVID-19 pandemic, not wearing a facemask in a social context, in which a mask is expected, could generate heightened concerns not only about safety but also about the tightly regulated and politicized image (of the face with or without a mask) displayed in public settings. In such an instance, the body comes back into awareness, interrupting our normal functioning within the social space. Furthermore, bodies infected with COVID-19 also generate visual disruptions/tensions ([19], p. 187). This situation is best illustrated by COVID-19 patients visual encounters with health care professionals wearing "that moon-base equipment". A patient recalls the isolation felt when hospitalized with COVID-19: 'The porter pushing my bed calls as we enter the department "COVID on the way, COVID on the way!" There I felt extremely poisonous, and I see the nurses smile, and then they all disappear. I was driven into a room which was completely empty. I was left there, and the door closed. There I cried. There I was scared . . . ' ([19], p. 187).

Disruptive returns of the body could also originate in the Symbolic register. Here, it is important to stress that in social sciences, little attention has been directed towards exploring how exactly declaring our bodies and embodied existence as security threats, could alter human existence. The assumption appears to be that our bodies can be thoroughly scrutinized, regulated, and retrained, without these actions reverberating into the ways we think about ourselves and act in the world. Challenging this assumption, this article argues that when labeling the body as a national security threat, the body becomes closely linked to governmental and biomedical regulations and technologies. The intrusion of government scrutiny in areas of embodied existence that were prior considered not only safe but also intimate and private, could alter ordinary life radically. For instance, the pandemic made it imperative for a significant part of our repertoire of actions, managed within our practical consciousness to be brought back into conscious awareness. This is the case, because what we once mastered as safe came to be, in the current conditions, risky behavior. Bringing a large surfeit of actions into conscious reflection has the effect of overloading our minds and reconfiguring our lived experience of daily routines. At a societal scale, this process appears to be akin to cultural disorientation, emerging when socialized internalized culture that we carry "in our heads" or in the semi-automatic "habits of the heart" suddenly clashes with the cultural environment in which we find ourselves ([20], p. 454). During the COVID-19 pandemic, individuals are simply subjected to change that is too profound and that happens too swiftly, for them to be able to process and adapt to.

Yet, another form of return of the body, could be part of the visceral dimension, when, for example, a sharp unexpected pain interrupts our immersion in the world. If something breaks down or goes wrong, our body suddenly moves to the foreground of our attention ([18], p. 252). At that point we experience the body as the very absence of an ordinary state, and as a force that stands opposed to the self ([16], pp. 1–4). The most obvious form of visceral disruption, in the case discussed here, is that of bodies infected with COVID-19, when one's focus is suddenly directed towards difficulties in breathing, as well as the fatigue and fever experienced. Brought back into conscious awareness, our

body can no longer mediate a vital connection with the world, nor the formation of a sense of self.

The questions that arise in this context are: how has a focus on the body as security threat altered (if at all) our embodied experience? What characterizes an existence enabled by a body that is perceived as a threat to the individual and the world. How has the fear of other bodies reshaped our relations and understanding of others? A second point of interest is related to the tendency to transfer social life onto the virtual space, a space that is considered safe from the threat of our contagious bodies. I am interested in how this transfer, in turn, generated additional changes in our embodied experience and our perception of ourselves, others, and the world.

4. Ruptures in the Fabric of Reality and Schizophrenia

The securitization process brought embodied existence under the scrutiny of the invasive gaze of multiple social authorities. It also accelerated the speed and expanded the scope of the already established transfer of human existence onto the realm of representation. With the onset of the pandemic, the virtual plane has been increasingly appropriated, not only as a convenient but also as a safe register of human existence, while familiar modes of embodied presence and interaction in public space were rendered security risks. These transitional processes impacted human experiential stance, as they staged a confrontation with a rupture in the fabric of reality. Paul Eisenstein and Todd McGowan argue that ruptures occur at moments of interruption of the flow of social life, when the coordinates that organize existence, including one's experience and understanding of one's body and subjectivity, undergo a shift, that transforms the point from which we see ([21], pp. 3–4). The swiftness and pervasiveness of the changes implemented due to COVID-19 caused traumatic ruptures in the fabric of reality, as the COVID-19 virus entered ordinary reality and distorted it. Namely, it manifested its agency, as it repurposed to its benefit, to travel and multiply, human bodies and the various global assemblages (airports, factories, detention centers). As the world-for-humans was increasingly reorganized with the purpose of minimizing COVID-19 affronts, it inevitably harbored COVID-19 as a key signifier, bolstering its profound agentic capacity. This is reflected in its effects which reverberated throughout an expansive area of human life. It is not only our health/medical system that suffered rethinking and reorganization, instead our lifeworld at individual, national, and global levels, has been profoundly changed ([22], p. 222).

To understand the social impact of these changes, I engage throughout this article with the work of psychiatrist Iain McGilchrist [3,4] and clinical psychologist Louis A. Sass [5]. These two authors voice concerns about the ways in which ample transformations of everyday life, impact the brain and our understanding of and connection to the world. Their writings explore contemporary schizophrenic[2] [3,4] dispositions[3] [23] as affecting not only singular individuals but also the societal level. To that end, McGilchrist distinguishes between the left and right hemispheres of our brains' mode of engaging with the world. He argues that for us human beings, there are two fundamentally opposed realities (modes of experience), and that each one of them is of ultimate importance in bringing about the human social reality. The differences between the two are rooted in our bihemispheric brain structure ([4], p. 22). The right hemisphere perceives individual entities as belonging to a contextual whole from which they cannot be divided. Its broader field of attention is open and coupled with the ability of integration over time and space, making possible the recognition of broad and complex patterns. It also deals preferentially with subjective lived experiences. By contrast, the left-brain-hemisphere deals preferentially with a conceptually represented version of our embodied experience, containing static, separable, but essentially fragmented entities. This kind of attention isolates, fixes, and makes things explicit. In doing so it renders everything inert, mechanical, and lifeless ([4], p. 25).

McGilchrist investigates the extent to which our contemporary society, as it is increasingly colonized by the register of representation and hyper-rationalism, emerges into a world structured according to the logic of the left-brain hemisphere. Hence, transferring

human existence to an online two-dimensional reality, comes with noteworthy consequences. Instead of seeing what is truly present as primary, and the representation as a necessarily diminished derivative of it, we see reality as merely a special case of our representation ([3], p. 7). This is a world in which abstractions (words and images) are dealt with as more real and more consequential than what is that they represent.

Both McGilchrist [3,4] and Sass [5] share the concern that an increased reliance on the left hemisphere in everyday life, leads also to an increase in the prevalence of schizophrenia and of schizophrenic-like dispositions. McGilchrist and Sass are not arguing that humanity is dealing with a sudden epidemic of schizophrenia, but instead with an accentuated reliance on the world as delivered to us by the left hemisphere, meanwhile dismissing what it is that the right hemisphere knows and could help us understand ([3], p. 308). Sass highlights the fact that that we usually imagine madness as a place of mystery and uncontrollable passions, existing beyond the confines of civilized life ([6], p. 20). Contrary to this popular belief, schizophrenia, considered to be the quintessential form of madness, is far from resembling a primitive or Dionysian condition. Instead, schizophrenia's principal psychopathological features are hyper-rationalism as well as disengagement from emotions and embodied existence ([4], p. 261). In other words, schizophrenia manifests at the highest pitches of self-consciousness, when it separates from the body and passions, and from the social and practical world, and turns upon itself ([6], p. 12). What emerges is a world stripped of its usual meaning and sense of coherence ([5], p. 28). Reality appears peculiar and eerie ([5], p. 26). Subjects in this state say that they find themselves, akin to scientists, "not involved in the world, merely observing it from outside to understand its secret workings" ([3], p. 348). To understand the dynamic and consequences of schizophrenia, psychiatrist Juan P. Borda and clinical psychologist Louis Sass propose a study of three interconnected aspects of this condition, namely: hyper-reflexivity, diminished self-presence, and disrupted grip on the world ([7], p. 464). Throughout the remainder of this article, I investigate how each of these three manifested at the social level during the COVID-19 pandemic.

5. Hyper-Reflexivity: Everyday Life as a Strategic Endeavor

Louis A. Sass and Josef Parnas assure us that the formation of a sense of self, does not require a self-directed act of reflection, instead, this is a primordial experience that is tacit and assumed ([24], p. 432). In other words, acquiring a primordial sense of self is not something we willingly aim for to do but something that simply happens, as an unmediated feeling or sense of aliveness, that grounds our existence. It is also a necessary condition for more elaborate levels of self-awareness ([24], p. 430). Additionally, in an adequate proportion, processes of self-monitoring and self-reflection, are constitutive part of our regular existence [25]. Nevertheless, when these take over the domain of the pre-reflexive consciousness, extend for long periods of time, and manifest over extensive aspects of everyday life, they trigger significant and broadly reverberating effects ([24], p. 430). For instance, hyper-reflexivity renders internal mental events so absorbing and attention-grabbing that one is simply distracted from and can no longer remain fully entrenched in one's emotional and practical interactions with the world. Instead, one transitions to a predominantly mental existence ([26], p. 10), in which, despite heightened self-consciousness, a sense of self is lost. This is akin to schizophrenic self-disturbances, which entail the formation of a consciousness so salient, that it detaches from the experiential field and creates an illusory reality that appears to be more real than consensual reality ([27], p. 213).

As part of securitization processes, human bodies become paradoxically both vulnerable and threatening. More specifically, vulnerable to the affronts of COVID-19 and threatening to our own lives, the lives of those we care for, as well as to the national (and global) economies, and healthcare systems. Thus, the urgent need to bring back into conscious awareness, to rethink and reevaluate, internalized embodied modes of social interactions. These modes of social interactions were to be assessed against the fast-changing regulations and healthcare specialists' guidelines. These processes established

the profound hyper-reflexive character of the COVID-19 pandemic. Louis Sass argues that hyper-reflexivity involves an exaggerated self-consciousness and a focal attention directed toward what would normally be tacit parts of oneself and one's life, such as the lived body discussed earlier. When brought into the foreground of experience, the implicit parts of the self, acquire a distressing alien quality [5,28]. Through a similar process, the pandemic had the ability to turn the familiar into something uncanny, as both our public and private lives morphed into extensive strategical endeavors, requiring that each action be scrutinized. Falling back into the comfort of our tacit routines was not only considered risky but it simply became illegal and was punished by multiple social authorities.

For instance, at the university where I teach, students, faculty, and staff received explicit safety protocols that needed to be followed closely at all-times while on campus. These changed university life radically. Thus, what used to be a simple act of picking up a book from the library, developed into a process described step by step on a poster placed on the library's locked door. It involved calling the librarian from a cellphone, to provide the necessary information to retrieve the needed material, while being physically present in front of the library's building. The instructions stipulated that I had to stand at six feet distance from a desk placed outside, near the library's door, while also wearing a facemask. The librarian would come outside and place the book (packed in a plastic bag) on the desk, then walk away from it. When the librarian was at a safe distance, I had the permission to pick up the book. I recall wondering about the need to disinfect the book, once taken out of the plastic bag. I also recall the distress and mental fatigue experienced in public spaces, as I had to make constant conscious efforts to scrutinize my actions, to ensure that they complied with the new rules of conduit and that I kept myself and others safe. It felt as if everyday life transitioned into a foreign space, where I was not only unfamiliar with the laws and etiquette, but also with the threats it posed to life. On campus, cumbersome procedures were devised to replace multiple aspects of what we knew as university life. This continuous scrutiny of our bodies and of our repertoire of social actions transformed radically not only our professional lives but, even more distressing, our personal lives. For instance, spending time face-to-face with a friend involved a number of elements that needed to be consciously thought through and strategized, including: which is the safest venue for the meeting; should one discuss forms of safe interaction ahead of meeting time; how strictly was my friend following social distancing codes; how exactly would my friend feel about my reluctance to greet them with a hug or host the meeting at my house, as I usually did before the COVID-19 pandemic; how far away should we seat from each other; should I wear a mask; how should I respond if my friend does not wear a mask during our meeting; was I making my friend feel uncomfortable and uneasy; how was our friendship impacted by our awkward interactions.

The COVID-19 pandemic has been discussed as an unintended mass sociological and psychological experiment. One salient feature of this experiment is the imposition of hyper-reflexivity as the modus-operandi for a significant part of everyday-life and for extensive periods of time. According to McGhilchrist's [4] intuitions, this further tilts the brain hemispheres' balance towards the dominance of the left hemisphere, aggravating what he identified as schizophrenic-like dispositions of contemporary society. Hence, hyper-reflexivity not only alters our experience of being in the world but could also enable the onset of disconcerting psychological changes. This is the case because, during the COVID-19 pandemic, what were hidden, tacit aspects of life, are brought back into conscious awareness, so explicit and clear, as would happen in the case of perceiving an object or an external event. In the long term, hyper-reflexivity leads to perceiving oneself, one's own body, and one's own life as stubbornly distant and unfamiliar ([8], p. 205). Hence, the sense of inhabiting (feeling at home in) one's body, life, and world, is lost. This situation, according to Louis A. Sass and Josef Parnas, has further repercussions for one's sense of agency and ability to make sense of the world ([24], p. 430).

6. Diminished Self-Presence: Life in an Abstract World

Clinical psychology insists that our regular existence necessitates that we experience ourselves as the origin of our perceptions, emotions, actions, and thoughts. This primordial sense of agency and ownership, constitute what is referred to as *ipseity* (from Latin "ipse", meaning "self"). Ipseity is a pre-reflexive phenomenon, that does not dependent on linguistic representations but instead on a primordial unmediated contact with oneself. This is akin to the lived-body experience of inhabiting and being attuned to the world ([29], p. 56). According to Sass and Parnas ([24], p. 429) ipseity is the very foundation of and a necessary condition for other more complex levels of the self, such as the "narrative self" or "reflective self". When ipseity is disturbed, one acquires a peculiar distressing feeling of having lost one's own self as well as the attunement to the world, both conditions characteristic to schizophrenia ([18], p. 255).

The COVID-19 pandemic generated, on the one hand, increased circumspection towards and distance from embodied existence, which is deemed risky and, on the other hand, appropriation of the virtual world of representation, which by comparison appears safe and desirable. The distrust of the embodied existence imposed social distancing, hyper-vigilance towards the body, and hyper-reflexivity. The transfer of existence onto the virtual space also involved disembodiment and dematerialization. Through all these alterations, the pandemic reinforced contemporary society's commitment to the register of representation, at the expense of the material world. Thus, the world of representation acquired a privileged status, as most valuable and most real ([30], p. 133). This is once again akin to the world of schizophrenia, more specifically to a retreat from actuality, and a continuation of existence shaped by the ideological domain. Instead of a flesh-and-blood world, one exists in a mind's-eye world, where emotions, other people, even one's own body, one's own pain, and the pain of others exist as distant and purely conceptual phenomena, while actions are rendered thought experiments ([6], p. 46).

Well-acquainted with the perils of an existence taking place predominantly in this abstract realm, both McGhilchrist [3] and Sass [6] voice concerns about the accelerated transmutation of everyday life onto the virtual plane. In this imaginary realm, the other appears to me as a two-dimensional disembodied being, namely as an image, as I appear as an image to the other ([31], p. 160). The embodied, participatory, and immersed kinds of experience are replaced with passive forms of seeing ([32], p. 116). The world is transformed into something to be observed (looked at) instead of engaged with. This compels us to think of ourselves and our existence exclusively at the level of the Imaginary and Symbolic registers. It also gives the impression that our lives are infinitely more manageable. Namely, seated in front of our computers, we acquire an exhilarating feel of not only space and time transcendence but also of omniscience and omnipotence. The sense of control, that one has at one's fingertips in the virtual world, is simply not possible in the three-dimensional existence. The gained sense of agency and immediacy lures us into exchanging the depth and complexity of the embodied human existence for the two-dimensional plane of the visual register. However, the sense of agency gained is to a large extent illusory. Often, we confuse the passive consumption of fabricated information and our utter compliance with conspiratorial noxious logic, not only with agency but also with revolutionary behavior.

Contextualizing this ontological transition, Iain McGilchrist [3,4] and Louis Sass [5] argue that in schizophrenia one might feel that there is no access to an outside of the realm of thought and representation, as the world comes to lack the ultimate unknowability that exceed one's grasp. In such a world, one oscillates between two apparently opposite positions: impotence and omnipotence. Namely, either there is no self as all there is appears structured by the Imaginary and Symbolic registers of thought and representation; or all that the one sees appears to be in fact part of the self, as in this case the schizophrenic identifies with the very source (the mind) generating this world of representation ([4], p. 395). The oscillation between omnipotence and impotence, is accompanied by an emotional oscillation between euphoric exaltation and dysphoria, bringing about profound ontological insecurity ([5], p. 250) and ipseity disturbances.

7. Disturbed Grip on the World

According to Juan P. Borda and Louis A. Sass, disturbances at the primordial level of ipseity, further perturb the spatial and temporal structuring of the world as well as the experiential distinction between what is perceived versus what is imagined ([7], p. 465). As discussed earlier, when the tacit dimension of life becomes explicit, it can no longer perform its grounding and orienting functions ([24], p. 434). In this situation, one's very grip on the cognitive-perceptual world is impaired ([7], p. 465). In this last section, I invite an application of insights emerging from research on schizophrenia, to reflect on the unexpected ways in which a significant segment of the US population understood and responded to the COVID-19 pandemic. Psychologists [33], philosophers [34,35], and social scientists [36] alike expressed worries about parts of American society being in the grip of insanity, as people throughout the pandemic became adamantly committed to beliefs that appeared delusional.

Conspiracy theories, often addressed as part of the new wars of perception, are an important topic in social sciences, with several books [37–41] exploring them. These projects focus on how digital technologies facilitate the spread of conspiracy theories and misinformation as well as on the strategies and tactics employed in their dissemination. In philosophy, scholars writing on conspiracy theories, are split in two groups, namely generalists and particularists [42]. While generalists [43–45] are interested in highlighting conspiracy theories' epistemic problems, particularists [46–48] take issue with the pejorative use of the term conspiracy theory, insisting that there is nothing problematic about conspiracy theories per se and that each conspiracy theory needs to be evaluated on its own merits.

In this article, similarly to [45], I am interested in exploring COVID-19 conspiracy theories as a mode of thinking emerging during times of radical social change and social trauma. Instead of being concerned with whether these theories are true or false, whose interests they serve, or the mechanisms through which they are disseminated, my interest is directed towards their common structure of fantasy and the extent to which this structure of fantasy reflects schizophrenic social dispositions.

COVID-19 conspiracy theories include the denial that the pandemic was a real event, seeing it instead as a carefully coordinated hoax. Especially troubling was the dismissal of the physical suffering and of the reports on numerous hospitalizations and deaths, caused by the COVID-19 virus. The denial and dismissive attitude persisted when faced with multiple testimonies, about the severity of the pandemic, coming from family members, patients, nurses, and doctors, and even when those denying the existence of the pandemic, contracted COVID-19, and were hospitalized with severe symptoms. Delusional was also the attribution of malefic intentions to healthcare personnel and public servants, who were accused of propagating fear and confusion, with the underlying goal of inoculating the population with poisonous vaccines. These narratives were widely shared on social media, hailing millions of people. Thus, the pandemic exposed the virtual register's potential to develop into a universe of conspiracy theories, molding a citizenry that appears, similarly to schizophrenics, simultaneously cynical about aspects of life that need to be implicit and, as discussed further, gullible enough to espouse enormously improbable belief systems that are delusional ([3], p. 369). Indeed, large segments of society exhibited during the COVID-19 pandemic a profound sense of cynicism towards fundamental aspects of human shared existence, while eagerly embracing conspiracy theories.

The universe of COVID-19 conspiracy theories assembles an array of eclectic commonplaces, ranging from what are perceived as nefarious technologies, to business and government authority figures, to issues of international traffic of children, and enslavement of population. For instance, one recuring conspiracy trope is the harmful influence of 5G cell towers which are feared to either magnify the transmission of the virus or to cause COVID-19 symptoms. Succumbing to this conspiratorial universe of meaning, alters one's thinking and perception of the world ([22], p. 227). Here, it is instructive to acknowledge the fact that the clinical essence of schizophrenia includes an incapacity to be attuned

to (resonate with) the world and an inability to establish meaningful bonds with others. These are at the origin of one's difficulties in sketching a coherent and meaningful picture of the social world. What emerges is a world which looks terribly unfamiliar and strange ([49], p. 349), referred to in clinical psychology as "unreality vision". Louis Sass describes it a strange and enigmatic mood that infuses everything ([5], p. 26) and generates an oddly diminished feel of reality. Unreality vision situates one in an alien world of uniform abstract precision but devoid of dynamism, emotional resonance, and sense of human purpose that usually prevail in everyday life ([5], p. 28). It renders the very fabric of life flimsy and false, as people and places appear devoid of depth and authenticity. People could seem mere puppets or automatons, while objects could take on the look of stage accessories or pasteboard scenery ([5], p. 29). The particularities of unreality vision could help us comprehend conspiratorial worldview's circumspect attitude towards the physical suffering of those infected with COVID-19 and towards the high death toll inflicted by the pandemic. What especially stands out to me, are the multiple reports from doctors and nurses about COVID-19 patients who continue to deny their diagnosis or to denounce vaccines from their deathbeds. For instance, Dr. Matthew Trunsky, a pulmonologist and director of the palliative care unit at a Beaumont Health hospital, gained national attention sharing what his patience are telling him: "You're wrong doctor. I don't have COVID" and "I'd rather die than take the vaccine" [50]. Therefore, when confronted with inconsistencies between experiences in the embodied world and their representation, one privileges the world of representation, even at the expense of one's own wellbeing.

This emotional detachment and distrust of reality is in line with McGilchrist's observation that in schizophrenia there is a puzzling "demand for proof" for aspects of life that need to be implicit. When relying overwhelmingly on the left-brain hemisphere, what was once intuitively understood is forced out of its context and could be accessed only rationalistically. The tacit becomes focal, the implicit becomes explicit, and what should be intuitively grasped becomes a matter of calculation. Thus, the nature of the implicit subjective experience, at the core of human mode of being in the world, is rendered inaccessible ([3], p. 337) and human interactions acquire a feel of utter alienness. Characteristic to the COVID-19 pandemic is the overwhelming number of claims about various aspects of life being in fact fake, a hoax, simply acting, or staged. For instance, without concrete evidence, many appeared convinced that the pandemic was a sinister invention and that in fact hospitals throughout the United States were operating at their usual capacity, encouraging citizens to record videos of the hospitals' activity in their area and post them on social media under the hashtag #FilmYourHospital ([22], p. 226). Furthermore, COVID-19 conspiracy theories generally questioned or bluntly negated experts' claims about the origin, modality of spread, and cure of the virus, proposing instead that the pandemic was planned and launched to bring about a dystopic era of suppression, surveillance, and control ([51], p. 2). Paradoxically, but consistent with the working of schizophrenia's tolerance for upholding contradictory stands, the belief that the pandemic was planned and released onto the public, was often asserted simultaneously with the belief that COVID-19 was a hoax and that the dire statistical information on the number of deaths and infections were fake or at best exaggerated.

The imminent sense of doom permeating COVID-19 conspiracy theories, envisioning a catastrophic end of humanity as we know it, resonates with what German psychiatrist August Wetzel's described as "end of the world" experiences. These states are also associated with the sense of being somehow at the center of the dreadful happenings [52]. What particularly stands out here, is the chillingly detached attitude maintained when contemplating such catastrophic end of the world scenarios. For instance, the vision of humanity infiltrated by malefic technology, that would transform all of us into a collection of automatons. This noteworthy attitude, Louis Sass argues, is in line with the inner life of schizophrenic patients, which is often devoid of worldly emotions such as sadness and joy, and instead it is infused with cosmic euphoria, anxiety, and ironic detachment. It is not

uncommon for someone in this state of mind to describe the most horrifying catastrophes with utter indifference or even a trace of smile ([5], p. 227).

Disembodiment and the disruption of ipseity are often accompanied by a disturbed sense of agency, where patients describe: "I feel directed by alien forces", "I could no longer do what I intended to do, my movements and actions were directed and controlled. I felt like a tool, a puppet". Not only do patients report the illusion of external control over their motor actions but also call into question the intentional origin of their own thoughts ([8], p. 202). In COVID-19 conspiratorial thinking, Bill Gates, the founder of Microsoft, became a central figure, accused of planning to insert digital microchips in human bodies under the guise of a COVID-19 vaccine ([22], p. 227). This puzzling, popular belief reminds of the common fear manifested in schizophrenic patients, namely that of being controlled by an invasive technology that would render people merely automatons serving the malefic goals of social elites. The loss of a sense of inhabiting one's actions, thoughts, feelings, or perceptions, generates in schizophrenic individuals, the feeling that these are in the possession or under the control of some alien being or force ([24], p. 432).

The loss of a sense of self and one's own agentic capacity, is accompanied by attribution of hyper-agency[4] [53] and harmful intent to various individuals and institutions. This helps us place in context the fact that conspiratorial imaginaries construe the world as burdened by insidious, malevolent social authority figures who secretly control societal institutions to further their own selfish purposes ([54], p. 1). For instance, a prevalent commonplace in COVID-19 conspiratorial narratives is the US government, with the CIA blamed for having engineered the virus as a bioweapon and released it onto the Chinese people, and with public-servant scientists such as Dr. Anthony Fauci using the virus to make the North American populace dependent on a government vaccine. These attitudes had real-life-consequences. Leading scientists, medical personnel, as well as public figures and politicians (for example Dr. Anthony Fauci and Michigan Governor Gretchen Whitmer) were targeted by far right and militia groups as enemies of the people. These public figures become symbols of pure evil intent, entailing the use of the pandemic as an excuse to curtail individual freedoms, and spread sickness via vaccines ([22], p. 228).

Understanding the high receptivity to conspiratorial theories, could benefit from McGilchrist's observation that people with left-brain deficit show a tendency towards confabulating ([3], p. 308) and jumping to conclusions on little or no evidence ([3], p. 314). He argues that a failure of the right brain hemisphere to ground the self into the complexly unpredictable flow of life, generates a need for closure as well as an acute intolerance to ambiguity and uncertainty ([3], p. 352). Therefore, one of the appealing features of conspiratorial narratives, especially for those of us with acute intolerance to ambiguity and uncertainty, is the fact that they are akin to simple maps that claim to contain/expose the bare truth about human existence. Generally, COVID-19 conspiracy theories assume an apparent comprehensive knowledge and understanding of the functioning of the US as well global societies in past and present, as if it were transparent, where everything could be understood, nothing could remain hidden. This is akin to an illusion of transparency, where everything can be taken in by a single glance [55]. The explanations provided are delivered with absolute certainty, thus dismissing ambiguity.

COVID-19 conspiratorial imaginary exhibits multiple reasons for concern. When in its grip, people show an inability to experientially distinguish between reality and fantasy as well as an inability to acknowledge and empathize with the pain of others. The retreat away from embodied presence, and into the abstract register of representation, leads to a devitalization of the world, that suddenly appears fake. People express strange concerns about being transformed into automatons via vaccines as well as attribute hyper-agency and malefic intent to various public figures and institutions. The intolerance to ambiguity, predisposes this segment of society to adopt conspiratorial narratives that provide a simple clear picture of the world, a world that appears permeated by a sense of doom. Additionally disconcerting is the fact that conspiratorial imaginary is not associated solely with the COVID-19 pandemic; instead, it emerges as a societal response to other

recent events. I am referring here to the vehement denial, without any compelling evidence, that the most recent presidential election in the United States was rigged, and that the current president is not legitimate. A similar conspiratorial universe of meaning is shaped by the statements of Russian officials, convincing large segments of the Russian population, that the war in Ukraine is not real and that the suffering, injuries, and deaths of Ukrainians, are in fact performances of crisis actors.

All these speak of the unprecedented and highly problematic societal transformations, that could bring about the disruption of our national and global institutions as well as of our ways of life. In this article, I attempted to understand these transformations through a focus on schizophrenia as triggered by a disconnect from (and abnegation of) the body and a retreat in an abstract virtual world. Additional thinking is both encouraged and needed in addressing these issues, which scholars across academic disciplines ought to prioritize. More specifically, further research[5] should investigate the extent to which COVID-19 policies and lockdowns produced (or not) a general increase in the number of conspiracy theories. Specific attention should be directed towards determining whether the current pandemic triggered significantly more conspiracies theories when compared to the number of such theories circulating before the pandemic, and, equally important, whether there were more conspiracy theories in areas with strict COVID-19 policies and lockdowns when compared to areas with more relaxed attitudes towards the virus.

Institutional Review Board Statement: Not applicable.

Informed Consent Statement: Not applicable.

Data Availability Statement: Not applicable.

Conflicts of Interest: The author declares no conflict of interest.

Notes

1. The Lacanian analytical framework used in this article was initially developed in my article "Opening up bodies for harvest: Embodiment and global capitalism" published in 2018 in Theory & Event [9].
2. According to Iain McGilchrist (2019; 2021) schizophrenia is a condition that is associated with hyperactivity in the left-brain hemisphere and impairment of the right brain hemisphere [3,4].
3. The analytical framework on schizophrenia was initially developed in my article "Rethinking intimacy in psychosocial sciences" published in 2020 in Psychotherapy and Politics International [23].
4. In this regard, social deafferentation hypothesis posits that, like amputees experiencing the phantom limb syndrome, social disconnections could lead to false detection of social agents through neural re-organization. When one is severed from the social world, compensatory increase in activity of the social brain network could prompt social cognitive programs to hyperactivate, resulting in hallucinatory social agents [53].
5. Many thanks to my reviewer for making these helpful suggestions.

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