

Void and Anxiety within the Onlife world

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The problem Hyper connected world brings to surface new anthropological matters. A leading one refers to the experience of de-realization, a symptom of anxiety and of several mental diseases, which should be completely rewritten in the light of offline and online interrelations. This paper aims to focus on void as a phenomenon that belongs to both domains, although according to different features and the author suggests that it is a key issue for a better understanding of the Onlife world, where the real and the digital are melted together. After having sketched some main traits of it, it will be argued that de-realization (offline) and disconnection (online) are rooted in a common ground: the lack of contact with the world of life. This conclusion is highly fruitful for either psychiatry and philosophy. This paper seeks to sketch an enlarged ontology that connects de-realization to disconnection and highlights on anxiety.

First and foremost the experience of void is an under researched topic, although it belongs to many psychological and psychic diseases, as it results from the DSM V: depression, schizophrenia, Narcissistic Personality Disorder, Personality Borderline Disorder and the Alimentary Behaviour Disturbances, just to quote some of them (Fisogni and Fisogni, 2020). Related to the experience of emptiness void, on a neuronal level, is the consequence of the incapacity to cope with reality; on a phenomenological ground it is a symptom of deprivation of being; in a metaphysical perspective it reveals a deficiency in assuming reality ad a source of meaning and value. Since the web environment became part of our lives, this classical frame revealed fragile and the notion of 'reality' was felt worn and inadequate. An enlarged ontology was due, in order to introduce the Onlife phenomena within human life. But it was only in 2015, when the term Onlife was coined by Oxford scholar Luciano Floridi that it became clearer how the two grounds of 'reality' could be interrelated: the world of life/offline and the digital are melted together, they continually interact, in virtue of the use of the digital devices that are part of our lives (smartphone, Pc, notebook, iPad, et). Hence it could be assumed that the several diseases related to the loss of reality, in the 'offline' world can be found also in the online world. Void and anxiety take also a relevant part in the digital environment (Fisogni, 2019), where disconnection can be equated to de-realization.

Disconnection as a source of anxiety I take in consideration 3 types of disconnections which often occur in the Onlife world. The first one is social disconnection, which depends on the unwilling lack of the connection to the network, or 'digital divide', due either to economic gap or to the incapacity of the user to become acquainted

with the digital technology. The second type of disconnection is the consequence of an individual choice, when the user feels too much pressure due to the online activities (work, relations). As Jauréguiberry notes, disconnection «in this case is purely reactive» (2014: xiii) not properly voluntary but automatic. Generally it means that the person overwhelmed by the pressure of the digital stops working. Finally the third type anxiety that derives from the lack of reality in the Onlife age is the consequence of a double movement: 1) derealization/loss of offline reality and 2) over-connection to the digital.

Digital connection as a source of intimate frustration of the Self, as a consequence of lower interactions with the offline/real world has been deeply investigated by Pope Francis in his Encyclical Letter *Laudato si. On the Care of the Common Home* (2015). The lack of physical contact – Pope Francis underlines it in § 150 – can lead to «a numbing of conscience» of which the consequence relies on «tendentious analysis which neglect parts of reality» (Francis, 2015: 35). Pope Francis' text suggests that the voluntary closeness to the environment may give rise to a wide range of spiritual diseases of which the symptoms do not radically differ from the ones of mental illness.

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