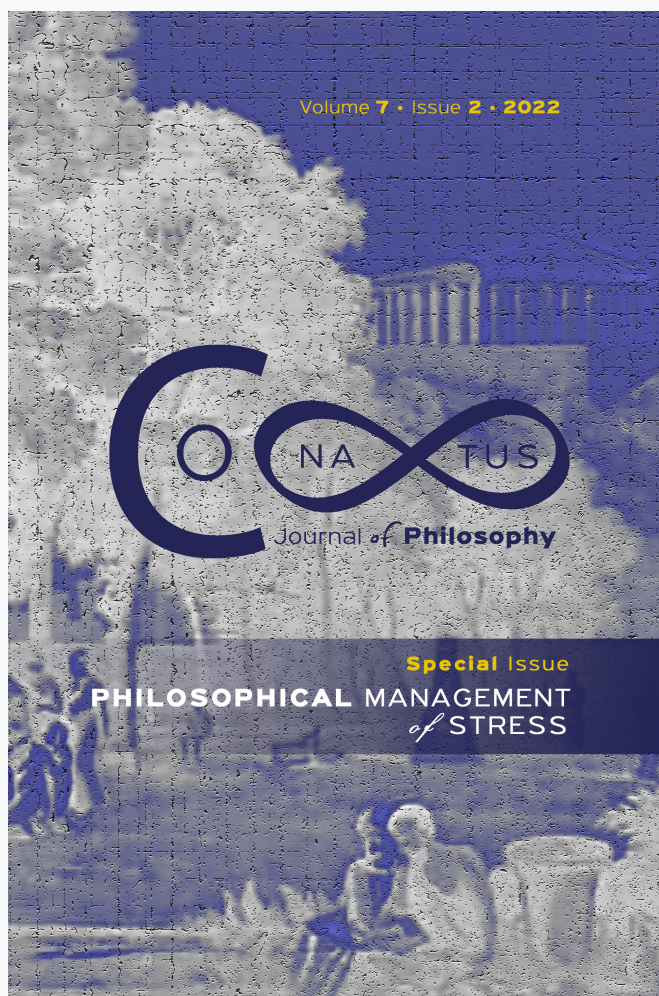


Conatus - Journal of Philosophy

Vol 7, No 2 (2022)

Conatus - Journal of Philosophy SI: Philosophical Management of Stress



Stoic Cognitive Theories and Contemporary Neuropsychological Treatments

Panagiotis Kormas

doi: [10.12681/cjp.31706](https://doi.org/10.12681/cjp.31706)

Copyright © 2022, Panagiotis Kormas



This work is licensed under a [Creative Commons Attribution-NonCommercial 4.0](https://creativecommons.org/licenses/by-nc/4.0/).

To cite this article:

Kormas, P. (2022). Stoic Cognitive Theories and Contemporary Neuropsychological Treatments. *Conatus - Journal of Philosophy*, 7(2), 87–102. <https://doi.org/10.12681/cjp.31706>

Stoic Cognitive Theories and Contemporary Neuropsychological Treatments

Panagiotis Kormas

National and Kapodistrian University of Athens, Greece

E-mail address: pkormas@philosophy.uoa.gr

ORCID iD: <https://orcid.org/0000-0001-7767-567X>

Abstract

During the Hellenistic period the value of philosophical systems was to be judged by a meta-philosophical criterion, i.e., by their ability to lead practitioners towards the pursuit of good or happiness, albeit treating pain and sorrow, since all human beings are supposed to be able to reach the state of happiness via their own efforts. By emphasizing the role of thoughts or judgments, Stoics placed cognition in the intermediate phase between an event and the reaction that somebody has due to the event, rendering it both the cause and the cure of emotional disorders. This viewpoint is also fundamental in modern cognitive psychotherapy, although the parallelism goes beyond theory to the practical character in both approaches. Rational and non-rational aspects of human psychology cannot be isolated from each other, allowing thus adults to actively engage in their moral development by altering their beliefs. In this frame, cognitive distancing, the practice of awareness, attention to the present moment, and the Socratic dialogue become valuable tools in structuring emotional self-regulation.

Keywords: *Stoics; psyche; mind; reason; emotions; philosophical exercises; cognitive therapy*

I. Introduction

In recent times, philosophers' interest in empirical approaches and neuropsychologists' engagement in using philosophical theories to assess well-being and happiness has been growing. Cognitive factors are enjoying an increasingly important role in understanding and treating psychological symptoms. This healing procedure often addresses the cognitive impairments associated with each illness.

The cognitive theory, ethics and physics developed by philosophers of the Hellenistic period have been studied in modern era to reveal the relevance of Hellenistic thought to contemporary issues, including psychotherapy.¹ Stoic philosophy in particular, has experienced great popularity with an increasing number of reports suggesting that the “art of life” cultivated by the tenets of this school may be an important component in combating the stress imposed by modern life. A parallel between the modern psychotherapist and the ancient Stoic philosopher has been drawn; both recognise reason as a mediator between environmental stimuli and human emotional responses.²

While eudaimonia was one of the themes that preoccupied philosophers of the 4th century BC, the search for personal salvation became more dominant and persistent in the Hellenistic period. The Stoics and Epicureans emphasized the treatment of pain and sorrow over the pursuit of good or happiness,³ leading to the birth of psychiatry.⁴ One could describe that time with patients on waiting lists for emotional healing outside philosophical schools, waiting for a quick cure.⁵

Hellenistic philosophers also spoke for ataraxia and apathy, both integral parts of eudaimonia. Ataraxia and apathy call for the transcendence of desire, passion or commitment. They also indicated that the process of transcendence that remains inherent does not seek human perfection at a supernatural level. The path to ataraxia is the elevation above a state of unhappiness and despair, with all Hellenistic schools to seek for the creator of this unhappiness not in external circumstances, but within the individual. Thus, ataraxia and apathy require self-confidence and fortitude which become necessary conditions for moral action.⁶

Rhetorical arguments can only formulate abstract theories, and are of actual value only when they persuade the individual to engage in psychological activities. The philosophical act transcends the order of knowledge and passes into the order of *self* and *being*. On this basis, the philosopher’s work is sizeable and multifaceted.

¹ Kelly Arenson, *The Routledge Handbook of Hellenistic Philosophy* (New York: Routledge, 2020), 2-8.

² Andrea Cavanna, “Back to the Future: Stoic Wisdom and Psychotherapy for Neuropsychiatric Conditions,” *Future Neurology* 14, no. 1 (2019): 2.

³ For a quite similar Aristotelian approach see Purissima Emelda Egbekpalu, “Aristotelian Concept of Happiness (Eudaimonia) and Its Conative Role in Human Existence: A Critical Evaluation,” *Conatus – Journal of Philosophy* 6, no. 2 (2021): 75-86.

⁴ Iason Xenakis, *Epictetus: Philosopher-Therapist* (New York: Springer Publishing, 1969).

⁵ David Sedley, *The Cambridge Companion to Greek and Roman Philosophy* (Cambridge: Cambridge University Press, 2006).

⁶ Pascal Massie, “Ataraxia: Tranquillity at the End,” in *A Companion to Ancient Philosophy*, eds. Sean D. Kirkland, and Eric Sanday, 245-262 (Evanston, IL: Northwestern University Press, 2018).

The Stoics attach great importance to practical logical ability. Philosophy, taking the role of a compassionate doctor, should respect the rational capacities of the individual. In this way, the patient has an active role, becoming his own therapist. According to the Stoics, a human subject has the ability to choose because it possesses the “divine” element of rationality.

Thus, it turns out that the essential aim of the philosopher is the liberation from every pain that affects the soul. Otherwise, philosophical activity proves to be meaningless, since it does not contribute to human mental health. Health, therefore, concerns not only the body but also the soul, and this recognition, together with the importance of philosophical practice, places medicine and philosophy on parallel paths sharing goals of healing both physical illnesses and soul wounds. Ethics, as a branch of Philosophy is not limited to the recognition of the principles governing moral choices, but constitute an educational and existential path towards the transformation of individual identity.

II. Cognitive therapy

In the international literature, the relationship between Stoicism and psychotherapy has been repeatedly noted.⁷ More specifically, modern psychology’s cognitive theories converge with the ones that Stoics have expressed for emotions and passions. To that extent, the Stoics place enormous value on the practical reasoning ability of each individual and this approach provides the guideline for Stoic therapy. Healing possesses a cognitive nature and is sufficient to remove disease.

The study of mind functions (in this context, also of the soul, Greek: *psyche*) begins in ancient philosophy, especially in Hellenistic philosophy, although, as a separate discipline, psychology was established at the end of 19th century.⁸ Recently, developments in the field of psychology had as a result the emergence of a new interdisciplinary field known as cognitive science. Psychologists, philosophers, linguists, neuroscientists, and computer scientists are all implicated in this field and deal with distinct or overlapping cognitive processes related to sensory perception and knowledge. Cognitive scientists consider the human mind as a complex system that receives, stores,

⁷ Robert Montgomery, “The Ancient Origins of Cognitive Therapy: The Re-emergence of Stoicism,” *Journal of Cognitive Psychotherapy* 7, no. 1 (1993): 5-19; Arthur Still, and Windy Dryden, “The Place of Rationality in Stoicism and REBT,” *Journal of Rational-Emotive & Cognitive-Behavior Therapy* 17 (1999): 143; Donald Robertson, *The Philosophy of Cognitive-Behavioural Therapy* (London: Karnac Books, 2010); Andrea E. Cavanna. “Back to the Future: Stoic Wisdom and Psychotherapy for Neuropsychiatric Conditions,” *Future Neurology* 14, no. 1 (2019).

⁸ Gary Hatfield, “Psychology, Philosophy, and Cognitive Science: Reflections on the History and Philosophy of Experimental Psychology,” *Mind & Language* 17, no. 3 (2002): 207.

retrieves, transforms, and transmits information. The historical origins of cognitive science include the interest of the ancient Greek philosophers in productive reasoning.⁹

Cognitions can be described as future-oriented expectations, past-oriented causal determinations, attitudes towards the world, estimates of inputs and outputs, and finally aspirations. They are neither information nor processes but are “constructs” and “knowledge.” They have the ability to direct and intensify behaviour, anticipating goals and purposes.

The basic assumption of the cognitive therapeutic approach is that cognitive parameters mediate the influence of external stimuli and contribute to the development of emotional and behavioural disorders. Hence, it is thoughts rather than external events that influence the way one feels or behaves. Epictetus’ much-quoted work illustrates the close relationship between Stoicism and modern cognitive therapy: “It is not things themselves that trouble people, but their opinions about things.”¹⁰

Aaron Beck, who has been called the father of Cognitive Therapy, has openly acknowledged the Stoic origin of this theory, citing Zeno, Chrysippus, Seneca, Cicero, Epictetus, and Marcus Aurelius.¹¹ Albert Ellis identified the ancient philosophers as the inspiration for the therapeutic value of logic, as a cognitive mediator between environmental challenges and emotional responses. He also claimed that one of the key philosophical aspects of Rational Emotive Behaviour Therapy (REBT) is its emphasis on hedonism and eudaimonia, with the main therapeutic goal being to minimize irrational anxiety, depression, and anger. At the same time, he argued that the therapist following REBT should encourage each patient to adopt the view that living well is good for the self and to decide to continuously strive for more pleasure than pain.¹²

Maladaptive cognitions involve general beliefs and generate specific and automatic thoughts about situations. The feedback that individuals get from

⁹ Paul Thagard, “Cognitive Science,” *The Stanford Encyclopedia of Philosophy* (Winter 2020 Edition), ed. Edward N. Zalta, <https://plato.stanford.edu/archives/win2020/entries/cognitive-science/>.

¹⁰ Anthony A. Long, *Epictetus: Encheiridion. How to be Free: An Ancient Guide to the Stoic Life* (Princeton, NJ: Princeton University Press, 2018), 11. See also Anthony A. Long, and Despina Vertzagia, “Antiquity Revisited: A Discussion with Anthony Arthur Long,” *Conatus – Journal of Philosophy* 5, no. 1 (2020): 111-122.

¹¹ Donald Robertson, and Trent R. Codd, “Stoic Philosophy as a Cognitive-Behavioral Therapy,” *The Behavior Therapist* 42, no. 2 (2019): 5.

¹² Albert Ellis, *Humanistic Psychotherapy: The Rational-emotive Approach* (New York: The Julian Press, 1973), 23; Maurits Kwee, and Albert Ellis, “The Interface between Rational Emotive Behavior Therapy (REBT) and Zen,” *Journal of Rational-emotive and Cognitive-behavior Therapy* 16 (1998): 15.

themselves and their environment plays an important role in their vulnerability when they are confronted with psychologically complex situations. According to cognitive theory, thoughts exist at the margins of our consciousness that are the results of direct interpretation of each situation and that occur both spontaneously and instantaneously. These are called automatic thoughts and are different from the normal flow, which takes place in reflective thinking or free association. Most of the times, the presence of automatic thoughts is not something we are aware of, unless we are trained to be able to monitor and identify them. The basic model suggests that treatment protocols for maladaptive cognitions ultimately modify emotional disturbance and problem behaviours.¹³

Cognitive factors are gaining an ever-increasing role in understanding and treating psychotic disorders. For many human subjects, treatment involves the cognitive impairments associated with each disease. Cognitive behaviour therapy for psychosis, of which early guidelines instructed the use of automatic thoughts for the change of symptoms, is strongly acknowledged by scientific and professional bodies.¹⁴

Rational and non-rational beliefs are also considered deep knowledge, similar to schemas or nuclear beliefs, which are difficult to access consciously. They are complex structures that represent a person's constructed conceptions of reality,¹⁵ and also their behavioural responses to that reality.¹⁶ Schemas are beliefs and rules (the most solid and durable part of the mind's construct). Mostly they are not visible and they reside in the unconscious. Additionally, they are products of genetic predispositions coupled with acquired learning processes.

Negative bias patterns, as well as patterns that contribute to the development of mental disorders such as depression and anxiety, generate through a complex process involving genetic factors, selective allocation of attention, storage in memory, and adverse events during life.¹⁷ The fact that the patterns – residing at the subconscious – are difficult to identify and determine, brings limitations to patients' treatment. Schemas are so nuclear

¹³ Stefan G. Hofmann, et al., "The Efficacy of Cognitive Behavioral Therapy: A Review of Meta-analyses," *Cognitive Therapy and Research* 36, no. 5 (2012): 427-440.

¹⁴ Steffen Moritz, et al., "Psychosis: Metacognitive and Cognitive-Behavioral Interventions," *Dialogues in Clinical Neuroscience* 21, no. 3 (2019): 311.

¹⁵ For an out-of-the-box discussion on the processes involved in the construction of several among even the most 'inner' realities of ours, see David Menčík, "Identity Theft: A Thought Experiment on the Fragility of Identity," *Conatus – Journal of Philosophy* 5, no. 1 (2020): 71-83.

¹⁶ Daniel David, et al., "A Synopsis of Rational-emotive Behavior Therapy (REBT): Fundamental and Applied Research," *Journal of Rational-emotive & Cognitive-behavior Therapy* 23 (2005): 180.

¹⁷ Aaron T. Beck, and Emily A. P. Haigh, "Advances in Cognitive Therapy: The Generic Cognitive Model," *Annual Review of Clinical Psychology* 10 (2014): 1-24.

in the individual's perception that they often cannot be verbally expressed.¹⁸ However, as with cognitive therapy, schemas can be identified and modified through more accessible cognitions. This therapeutic "intervention" is the methodology followed by Stoicism; the therapeutic effect comes through the rational judgments which are part of the functions of the ruling faculty (*hegemonikon*). Passions or emotions are inextricably related to beliefs or reasoned judgments and involve conceptual constructs from the person's interpretation of the impressions (*phantasiai*) presented through the senses.

Patients can be taught to recognize distorted thoughts and instruct them to tests in order to correct and replace them with new adaptive thoughts. Nuclear beliefs and cognitive distortions are treated similarly, although cognitions respond better in the short term since they are easier to access and less reinforced through time. In contrast, schemas persist and require more time to change, since cognitive distortions operate aiming to maintain and reinforce the initial signal.¹⁹

In this therapeutic framework, suffering becomes *per se* irrational, while the aspiration is essential to address the question "what constitutes a good life?" Therefore, the patient follows the path of a long-term type of hedonism, whereby instant gratifications are abandoned for the favour of future benefits, in accordance with the philosophical values. Psychotherapy is the product of philosophic thought, intimately linked to human emotional, mental, and moral suffering. Psychotherapists are called upon to offer rational explanations for suffering but also to counsel on how someone can achieve happiness in life.²⁰

III. Potential for logical remodelling

The scope of Stoic psychology is closely related to the theory that no separation exists between the rational and non-rational parts of human psychology. This means that emotions and desires can be continuously shaped via changes in beliefs. It is this possibility that provides the capacity for moral development over a person's lifetime, and this is independent of differences in inherent tendencies or the upbringing.

Rational beliefs produce positive emotional outcomes while irrational beliefs produce the opposite, which is psychological distress potentially involving

¹⁸ Stefan G. Hofmann, and Mark A. Reinecke, *Cognitive-behavioral Therapy with Adults. A Guide to Empirically-informed Assessment and Intervention* (Cambridge: Cambridge University Press, 2010), 3.

¹⁹ Keith Milligan, *Cognitive Distortions as a Mediator Between Early Maladaptive Schema and Hopelessness* (PhD diss., Philadelphia College of Osteopathic Medicine, 2013), 27.

²⁰ Edwin E. Gantt, "Hedonism, Suffering, and Redemption: The Challenge of Christian Psychotherapy," *Issues in Religion and Psychotherapy* 24, no. 1 (1999): 61-62.

– among others – anxiety or depression. Irrational beliefs are pathological factors within this system, and therapeutic techniques are aimed to challenge these “elements” and replace them with more logical ones, so that a new emotional outcome can be generated.²¹

The impression is more than solely raw data. It is a sensory experience, already placed in a propositional context. This experience can be external when perceived by the senses, or internal when it arises from memories. For Stoics, the proper use of impressions requires a true appreciation of the impression supplemented with a correct judgment of it. Impressions alone cannot lead to happiness neither distance ourselves from it.

Individuals, as they pass through life, form opinions about the world around them based on both previous experiences and previous beliefs. This process ends up becoming so integrated with the personal existence, making it difficult to reject an impression/representation. It is precisely this point that philosophy can amend. For Stoics, an impression/representation with propositional content is not a sufficient condition of consequent consent and action. The job of the philosopher is to urge the individual to turn his gaze inward, to defer the usual reaction to any external stimulus, and to carefully and critically analyse each impression received. The psychological interaction is deep and involves memories, fears, and habits that define the way each one perceives.²²

Philosophical practice of good life is a life-long effort in order to reconstruct the use of impressions as well as of cognitive and behavioural habits. The goal has two axes: to react to the maladaptive pattern of thoughts resulting from the misuse of impressions and to practice their correct use to develop adaptive habits.

Hellenistic philosophy is not limited to finding answers for the nature of the world but is, first and foremost, a way of living, aiming to differentiate the way one perceives him/herself existence. Wisdom is thus personalised and requires subjective transformation. In Stoic philosophy, what is of value is living outside the boundaries of individuality, as part of a Cosmos which is governed by Reason (Greek: *logos*). In this frame, philosophy becomes significant when it has a therapeutic role. Spiritual exercises become catalytic in achieving the therapeutic purpose. In order to describe this trend, scholars have used the terms spiritual exercises (Pierre Hadot), art of living (Michel Foucault),²³ therapy of emotion (Martha Nussbaum), and spiritual guidance (Paul Rabbow, and Ilstraute Hadot).

²¹ Don Woolen Jr., “A Preliminary Study of Stoic Philosophy as Psychotherapy,” *Frontiers of Philosophy in Practice* 6, no. 2 (2003): 31-42.

²² Martha Nussbaum, *The Therapy of Desire. Theory and Practice in Hellenistic Ethics* (Princeton, NJ: Princeton University Press, 1994), 367-370.

²³ For a brief, but quite informative, analysis on Foucault’s view on the art of living, but also for Nehamas’ very own approach, see Alexander Nehamas, et al., “A Good Life: Friendship, Art and Truth,” *Conatus – Journal of Philosophy* 2, no. 2 (2017): 115-121, especially 119ff.

IV. Questioning

Epictetus uses Socratic ‘control’ in a ‘positive,’ creative, and regulative form, with the primary aim to encourage students applying control to themselves. Since knowledge for the Stoics is a fixed unwavering set of cognitive apprehensions (katalepsis), the person who assumes that knows something, cannot be forced – in the course of the dialectic method – to consent to what contradicts the things he knows. That is, the Stoic notion of knowledge itself diligently reflects the “survival” from a Socratic dialogue. Today, the Socratic method of questioning is considered a powerful tool in cognitive psychotherapy. The therapist asks a series of gradual questions with the goal of having the examinee develop and apply skills that focus on the therapeutic outcome, such as developing alternative responses to negative automatic thoughts.²⁴

Through the use of Socratic control, the therapist avoids the simple didactic method of convincing the examinee which course should take, and instead instils in him/her a sense of curiosity through a sequence of questions that leads him/her to consider alternative scenarios of thoughts and behaviours, develop new perspectives and eventually find answers on his/her own, based on existing experience.²⁵ The interaction between therapist and examinee therefore has benefits in the context of persuasion and negotiation.

The Socratic method of dialogue aimed at confronting, challenging, and denying beliefs by the human subject is not possible if he or she cannot firmly support own beliefs. Testing helps to direct with slow and steady steps the individual towards discovery and new knowledge. This method fosters the individual in active engagement and critical thinking, cultivating a collaborative relationship and helping in the process of guided discovery.

V. Cognitive distancing (decentralization)

The quote from Epictetus “men are disturbed not by things, but by the views which they take of things” is but a technique of separating judgments from

²⁴ Harlene Anderson, and Harold Goolishian, “The Client is the Expert: A Not-knowing Approach to Therapy,” in *Therapy as Social Construction*, eds. Sheila McNamee, and Kenneth J. Gergen, 25-39 (London: Sage Publications, 1992), 29-30. See also, Donald, Meichenbaum, “Stress Inoculation Training: A Preventative and Treatment Approach,” in *Principles and Practice of Stress Management*, eds. Paul M. Lehrer, Robert L. Woolfolk, and Wesley E. Sime (New York: The Guilford Press, 2007), 502; Justin D. Braun, et al., “Therapist Use of Socratic Questioning Predicts Session-to-session Symptom Change in Cognitive Therapy for Depression,” *Behavior Research and Therapy* 70 (2015): 32-37; Anthony Roth, and Stephen Pilling, “The Competences Required to Deliver Effective Cognitive and Behavioural Therapy for People with Depression and with Anxiety Disorders,” *Semantic Scholar*, September 2007.

²⁵ James C. Overholser, “Collaborative Empiricism, Guided Discovery, and the Socratic Method: Core Processes for Effective Cognitive Therapy,” *Clinical Psychology: Science and Practice* 18 (2011): 64.

the facts themselves. This technique proposed by Epictetus is the starting point to the other therapeutic strategies of Stoic philosophy. Having first taken the initial step backwards to gain a psychological distance from our thoughts, we can then adopt a philosophical attitude towards them and – through reason – challenge them. In modern psychology, it has been argued for decades that the process of distancing oneself from personal experiences and examining them from a distance is important for mental health.²⁶ This metacognitive capacity was described by Beck as “cognitive detachment,” which is the individual’s ability to treat his/her own thoughts as assumptions, thus taking a step back and observing his or her thoughts from a distance. In a later publication, Beck has defined distancing as a metacognitive process, a transition to a level of awareness that involves “thinking about thinking.”²⁷

Similarly, in many ‘third wave’ therapeutic CBT approaches, such as Mindfulness-Based Cognitive Therapy (MBCT), Acceptance and Commitment Therapy (ACT), or Dialectical Behaviour Therapy (DBT), it is emphasized that decentering is a prerequisite in order for therapeutic approach to actually have an impact.²⁸ The concept of decentering has also been expressed as cognitive defusion, meta-cognitive awareness, distancing. Common among these terms is the ability to control and think of mental processes as well as finding ways to develop them. When individuals adopt the objective self-perspective, they stop inner events from influencing emotions at a disproportional rate.²⁹

In the Stoic philosophy, the technique of decentering initiates when the individual is aware of the subjective experience of the present moment, regardless of the content of thoughts active. Attention is directed towards the experience itself, posing the subject as an observer. In this way, the opinions formed about certain events are treated only as interpretations, thus having a reduced impact on the emotional status. Cognitive detachment is also directly linked to an additional exercise known as the “view from

²⁶ Andrea E. Cavanna, “Stoic Philosophy and Psychotherapy: Implications for Neuropsychiatric Conditions,” *Dialogues in Philosophy, Mental and Neuro Sciences* 12, no. 1 (2010): 15-16; Amit Bernstein, et al., “Decentering and Related Constructs: A Critical Review and Metacognitive Processes Model,” *Perspectives on Psychological Science: A Journal of the Association for Psychological Science* 10, no. 5 (2015): 599.

²⁷ *Ibid.*, 142.

²⁸ Zindel V. Segal, et al., *Mindfulness-based Cognitive Therapy For Depression: A New Approach To Preventing Relapse* (New York: Guilford Press, 2002), 36; John D. Tesdale, et al., “Metacognitive Awareness and Prevention of Relapse in Depression: Empirical Evidence,” *Journal of Consulting and Clinical Psychology* 70, no. 2 (2002): 275-277; Ozlem Ayduk, and Ethan Kross, “From a Distance: Implications of Spontaneous Self-distancing for Adaptive Self-reflection,” *Journal of Personality and Social Psychology* 98, no. 5 (2010): 811.

²⁹ Marc P. Bennett, et al., “Decentering as a Core Component in the Psychological Treatment and Prevention of Youth Anxiety and Depression: A Narrative Review and Insight Report,” *Translational Psychiatry* 11, no. 188 (2021): 1.

above.” In this exercise, individuals are encouraged to re-evaluate their lives and actions as if presented from a magnified, cosmic perspective, so as to counteract the false importance that personal interest and passions attach to particular events.³⁰

VI. Attention

Attention has been described as the fundamental spiritual exercise of the Stoics.³¹ It is about constant readiness, contemplation in the present moment, and accompanies virtually every spiritual practice. Attention is a constantly vigilant self-consciousness, a spiritual readiness, a constant intensity of mind.³² It is essentially what allows the philosopher and each apprentice to apply the fundamental philosophical principles to every event that may occur in life. It is the unceasing attention of the individual, regardless of the particular task he is performing, that enables him to always have philosophical principles “ready for use.”

The goal of applying these principles is for the individual to be autonomous and free, essentially to live a good life. The absence of practice in developing attention can lead to mental disorders, in which external events have the power to upset the emotional stability of the individual.³³

The Stoic philosophers’ “attention” is paralleled to concentration in the present moment and has been characterised the precursor to modern “mindfulness.”³⁴ Similarly, it has been suggested that Stoicism is a philosophy of the “here and now” centred on the notion of attention to the self, which can also be expressed as mindfulness or self-awareness.³⁵ In modern cognitive psychology, attention refers to the means by which we select information available to us through our senses, or stored in our memory, and through our other cognitive functions. This selection allows a direct and accurate response to the stimuli of interest.

³⁰ Federico Testa, “The Great Cycle of the World: Foucault and Hadot on the Cosmic Perspective and the Care of the Self.” In *The Late Foucault. Ethical and Political Questions*, eds. Marta Faustino, and Gianfranco Ferraro, 53-72 (London: Bloomsbury Academic, 2020), 64-65.

³¹ Pierre Hadot, *Philosophy as a Way of Life: Spiritual Exercises from Socrates to Foucault*, trans. Michael Chase (Oxford: Blackwell, 1995), 84.

³² Ibid.

³³ John Sellars, “Roman Stoic Mindfulness: An Ancient Technology of the Self,” in *Ethics and Self-cultivation Historical and Contemporary Perspectives*, eds. Matthew Dennis, and Sander Werkhoven (New York: Routledge, 2018), 11.

³⁴ Cavanna, “Back to the Future.”

³⁵ Donald Robertson, *The Philosophy of Cognitive-behavioural Therapy* (London: Karnac Books, 2010), 153.

On the basis of the Stoic model of human action, mental representation is distinguished from consent to it. Consent is a complex process that spans the entire mental spectrum from the moment the representation is imprinted until it is fully appropriated by the mind. For philosophical teaching to be available in practice at any time and under any circumstance, it must become part of the individual himself. It must infuse the individual through repetition. Just as the human body can be strengthened by repeated exercise, so the *psyche* can be healthy and strong. Beliefs, desires and urges are the subject of psychic exercise. If, therefore, we exercise our *psyche* by controlling our desires (and performing our duties), the *psyche* improves. The eradication of passions, ideally, should be a habit, some kind of addiction for the philosopher. Addiction is the process by which the physicality of the soul is changed, and improved if a person consistently exercises control over his desires and the performance of his duties.³⁶

VII. Focusing on here-and-now

This exercise is closely related to attention, since it essentially refers to attention in the present moment. It is an exercise that suggests the synergy between two cognitive functions: attention and vigilance (inward, introspective). Omitting of course questions about the entity of the present moment and whether reality actually consists of discrete parts (past, present, future), the focus on the here-and-now for the purposes of this analysis is related to the ethical implications of such an attitude.

The Stoics argued that eudaimonia can be sought in the present moment and cannot be postponed for another. In other words, happiness lies in the acceptance of the inevitable.³⁷ For the Stoics, the present moment is the only one that matters because it is what we control, since the future is yet to come, and the past is now a given. Only in the present can we act in accord with nature, accepting providence and immanent reason.

The importance of the here-and-now is reflected in the CBT approach where the therapist focuses on the problems faced by the individual at the present time, ignoring the past experiences.³⁸ Moreover, it reflects the observation that immediate, pressing demands of disturbing passions are all responses to worries about either future or past actions (guilt, shame, or anxiety about how others perceive our words or actions). However, the only

³⁶ Peter A. Brunt, *Studies in Stoicism*, eds. Miriam Griffin, and Alison Samuels (Oxford: Oxford University Press, 2015), 24.

³⁷ Hadot, 217-237.

³⁸ British Association for Behavioural & Cognitive Psychotherapies, "What Is CBT?" <https://babcp.com/What-is-CBT>.

thing one can accomplish is located in the present moment, where decision, action, and freedom are found. Consequently, passions, or their immediate demands, are non-rational. This reasoning forms the basis of Stoic teachings concerning the non-rationality of the passions. We must learn to quiet our passions down so that we can clearly appreciate what is happening in each moment, correct our intentions, and calmly accept what happens regardless of our will.³⁹

Orientation in the present moment can be defined in psychology, especially cognitive psychology, as hedonism. Individuals with a hedonistic focus on the here-and-now are able to take advantage of changes in their environment to maximize pleasure and individual benefits. This behaviour results from a lack of thoughtfulness toward the past and future. They do not try to intervene in the changes taking place and are determined to avoid stress. The philosophy of “here-and-now” also implies an increased awareness of what the individual is experiencing and the value of the present moment.⁴⁰

The activated concentration and focus on the senses lead to the perception of a much richer reality. Individuals who adopt such an attitude examine the past only from the lenses of the present, freeing themselves from the burden of the past. Moreover, it facilitates future planning. A person who is able to focus on what he or she feels and desires is now more likely to choose goals that will be rewarding and that he or she prefers to achieve. In addition, he/she will experience negative emotions, especially fear, less often and will be able to interact more effectively with other people since he/she will be able to better interpret behaviours and interpret their emotions.⁴¹

VIII. Concluding remarks

Philosophy has undoubtedly played a clear role within the discipline of psychology with many recent direct incorporations into therapeutic approaches, such as CBT or MBCT. Hellenistic philosophers acknowledged the gravity of emotional disturbances and their contribution in man's psychological health. Philosophy extends beyond theoretical discussion on the nature of knowledge and existence, towards being a guide to living a good life. Cognition becomes central in understanding emotions and the development of cognitive faculties goes hand-in-hand with ethical character.

³⁹ Matthew Sharpe, “Pierre Hadot,” *Internet Encyclopedia of Philosophy*, <https://iep.utm.edu/hadot/#SH5>.

⁴⁰ Malgorzata Sobol-Kwapińska, “Hedonism, Fatalism and ‘Carpe Diem’: Profiles of Attitudes Towards the Present Time,” *Time & Society* 22, no. 3 (2013): 374.

⁴¹ *Ibid.*, 374.

Stoic psychology is fundamental to Stoicism as a whole. The Stoic approach towards cognition has drawn direct comparisons highlighting the benefits of integrating the philosophical doctrines when seeking to address psychological diseases and related conditions. Stoic psychology acknowledges no non-rational components of the adult mind, thus rendering such conditions as erroneous arrangements of the vicious agent's rationality.

If attention plays an important role in how we describe to ourselves and others, how things are, and what we know about them, then the way of understanding and distributing our attention represents a critical ethical issue. The Stoic stance on "attention to self" was about examining thoughts so that the content and nature of consciousness is not subject to repression by desire, anger or anxiety. One advantage of Stoicism is that it refers to an inner settlement of man with himself and not to an arrangement with the external environment. Being essentially a philosophy of life, Stoicism promotes a life-long process in which the individual is responsible for using reason, a power offered by the central commanding faculty, *hegemonikon*. Rational and non-rational aspects of human psychology are not separate, thereby permitting active engagement in logical remodeling and moral development.

References

Alford, Brad A., and Aaron T. Beck. *The Integrative Power of Cognitive Therapy*. New York: Guilford Press. 1997.

Anderson, Harlene, and Harold Goolishian. "The Client Is the Expert: A Not-knowing Approach to Therapy." In *Therapy as Social Construction*, edited by Sheila McNamee, and Kenneth J. Gergen, 25-39. London: Sage Publications, 1992.

Arenson, Kelly. *The Routledge Handbook of Hellenistic Philosophy*. New York: Routledge, 2020.

Ayduk, Ozlem, and Ethan Kross. "From a Distance: Implications of Spontaneous Self-distancing for Adaptive Self-reflection." *Journal of Personality and Social Psychology* 98, no. 5 (2010): 809-829.

Beck, Aaron T., and Emily A. P. Haigh. "Advances in Cognitive Therapy: The Generic Cognitive Model." *Annual Review of Clinical Psychology* 10 (2014): 1-24.

Bennett, Marc P., Rachel Knight, Shivam Patel, Tierney So, Darren Dunning, Thorsten Barnhofer, Patrick Smith, Willem Kuyken, Tamsin Ford, and Tim Dalgleish. "Decentering as a Core Component in the Psychological Treatment and Prevention of Youth Anxiety and Depression: A Narrative Review and Insight Report." *Translational Psychiatry* 11, no. 188 (2021): 1.

Bernstein, Amit, Yuval Hadash, Yael Lichtash, Galia Tanay, Kathrine Shepherd, and David M. Fresco. "Decentering and Related Constructs: A Critical Review and Metacognitive Processes Model." *Perspectives on Psychological Science: A Journal of the Association for Psychological Science* 10, no. 5 (2015): 599-617.

Braun, Justin D., Daniel R. Strunk, Katherine E. Sasso, and Andrew A. Cooper. "Therapist Use of Socratic Questioning Predicts Session-to-session Symptom Change in Cognitive Therapy for Depression." *Behavior Research and Therapy* 70 (2015): 32-37.

British Association for Behavioural and Cognitive Psychotherapies. "What Is CBT?" <https://babcp.com/What-is-CBT>.

Brunt, P. A. *Studies in Stoicism*. Edited by Miriam Griffin, and Alison Samuels. Oxford: Oxford University Press, 2015.

Cavanna, Andrea E. "Back to the Future: Stoic Wisdom and Psychotherapy for Neuropsychiatric Conditions." *Future Neurology* 14, no. 1 (2019).

Cavanna, Andrea. "Stoic Philosophy and Psychotherapy: Implications for Neuropsychiatric Conditions." *Dialogues in Philosophy, Mental and Neuro Sciences* 12, no. 1 (2010): 10-24.

David, Daniel, Aurora Szentagotai, Kallay Eva, and Bianca Macavei. "A Synopsis of Rational-emotive Behavior Therapy (REBT): Fundamental and Applied Research." *Journal of Rational-Emotive & Cognitive-Behavior Therapy* 23 (2005): 175-221.

Egbekpalu, Purissima Emelda. "Aristotelian Concept of Happiness (Eudaimonia) and its Conative Role in Human Existence: A Critical Evaluation." *Conatus – Journal of Philosophy* 6, no. 2 (2021): 75-86.

Ellis, Albert. *Humanistic Psychotherapy: The Rational-emotive Approach*. Edited by E. Sagarin. New York: The Julian Press, 1973.

Gantt, Edwin E. "Hedonism, Suffering, and Redemption: The Challenge of Christian Psychotherapy." *Issues in Religion and Psychotherapy* 24, no. 1 (1999): 52-79.

Hadot, Pierre. *Philosophy as a Way of Life: Spiritual Exercises from Socrates to Foucault*. Translated by Michael Chase. Oxford: Blackwell, 1995.

Hatfield, Gary. "Psychology, Philosophy, and Cognitive Science: Reflections on the History and Philosophy of Experimental Psychology." *Mind & Language* 17, no. 3 (2002): 207-232.

Hofmann, Stefan G., Anu Asnaani, Imke J. J. Vonk, Alice T. Sawyer, and Angela Fang. "The Efficacy of Cognitive Behavioral Therapy: A Review of Meta-analyses." *Cognitive Therapy and Research* 36, no. 5 (2012): 427-40.

Hofmann, Stefan G., and Mark A. Reinecke. *Cognitive-Behavioral Therapy with Adults. A Guide to Empirically-informed Assessment and Intervention*. Cambridge: Cambridge University Press, 2010.

Kwee, Maurits, and Albert Ellis. "The Interface Between Rational Emotive Behavior Therapy (REBT) and Zen." *Journal of Rational-emotive and Cognitive-behavior Therapy* 16, no. 1 (1998): 5-43.

Long, Anthony A. *Epictetus: Encheiridion. How to be Free: An Ancient Guide to the Stoic Life*. Princeton, NJ: Princeton University Press, 2018.

Long, Anthony A., and Despina Vertzagia. "Antiquity Revisited: A Discussion with Anthony Arthur Long." *Conatus – Journal of Philosophy* 5, no. 1 (2020): 111-122.

Massie, Pascal. "Ataraxia: Tranquillity at the End." In *A Companion to Ancient Philosophy*, edited by Sean D. Kirkland, and Eric Sanday, 245-262. Evanston, IL: Northwestern University Press, 2018.

Meichenbaum, Donald. "Stress Inoculation Training: A Preventative and Treatment Approach." In *Principles and Practice of Stress Management*, edited by Paul M. Lehrer, Robert L. Woolfolk, and Wesley E. Sime, 497-516. New York: The Guilford Press, 2007.

Menčík, David. "Identity Theft: A Thought Experiment on the Fragility of Identity." *Conatus – Journal of Philosophy* 5, no. 1 (2020): 71-83.

Milligan, Keith. *Cognitive Distortions as a Mediator Between Early Maladaptive Schema and Hopelessness*. PhD diss., Philadelphia College of Osteopathic Medicine, 2013.

Montgomery, W. Robert. "The Ancient Origins of Cognitive Therapy: The Re-emergence of Stoicism." *Journal of Cognitive Psychotherapy* 7, no. 1 (1993): 5-19.

Moritz, Steffen, Jan Philipp Klein, Paul H. Lysaker, and Stephanie Mehl. "Psychosis: Metacognitive and Cognitive-behavioral Interventions." *Dialogues in Clinical Neuroscience* 21, no. 3 (2019): 309-317.

Nehamas, Alexander, Despina Vertzagia, Triseugeni Georgakopoulou, Jenny Pavlidou, Katerina Plevridi, and Fotis Stamos. "A Good Life: Friendship, Art and Truth." *Conatus – Journal of Philosophy* 2, no. 2 (2017): 115-121.

Nussbaum, Martha. *The Therapy of Desire. Theory and Practice in Hellenistic Ethics*. Princeton, NJ: Princeton University Press, 1994.

Overholser, James C. "Collaborative Empiricism, Guided Discovery, and the Socratic Method: Core Processes for Effective Cognitive Therapy." *Clinical Psychology: Science and Practice* 18, no. 1 (2011): 62-66.

Robertson, Donald. *The Philosophy of Cognitive-Behavioural Therapy (CBT). Stoic Philosophy as Rational and Cognitive Psychotherapy*. London: Karnac Books, 2010.

Robertson, Donald, and Trent R. Codd. "Stoic Philosophy as a Cognitive-Behavioral Therapy." *The Behavior Therapist* 42, no. 2 (2019): 42-49.

Roth, Anthony, and Stephen Pilling. "The Competences Required to Deliver Effective Cognitive and Behavioural Therapy for People with Depression and with Anxiety Disorders." *Semantic Scholar*, September 2007.

Sedley, David. *The Cambridge Companion to Greek and Roman Philosophy*. Cambridge: Cambridge University Press, 2006.

Segal, Zindel V., Mark J. G. Williams, and John D. Teasdale. *Mindfulness-based Cognitive Therapy for Depression: A New Approach to Preventing Relapse*. New York: Guilford Press, 2002.

Sellars, John. "Roman Stoic Mindfulness: An Ancient Technology of the Self." In *Ethics and Self-Cultivation: Historical and Contemporary Perspectives*, edited by Matthew Dennis, and Sander Werkhoven, 15-30. New York and London: Routledge, 2018.

Sharpe, Matthew. "Pierre Hadot." *Internet Encyclopedia of Philosophy*, <https://iep.utm.edu/hadot/#SH5>.

Sobol-Kwapińska, Malgorzata. "Hedonism, Fatalism and 'Carpe Diem': Profiles of Attitudes Towards the Present Time." *Time & Society* 22, no. 3 (2013): 371-390.

Still, Arthur, and Windy Dryden. "The Place of Rationality in Stoicism and REBT." *Journal of Rational-emotive & Cognitive-behavior Therapy* 17 (1999): 143-164.

Teasdale, John D., Richard G. Moore, Hael Hayhurst, Marie Pope, Susan Williams, and Zindel V. Segal. "Metacognitive Awareness and Prevention of Relapse in Depression: Empirical Evidence." *Journal of Consulting and Clinical Psychology* 70, no. 2 (2002): 275-287.

Testa, Federico. "The Great Cycle of the World: Foucault and Hadot on the Cosmic Perspective and the Care of the Self." In *The Late Foucault. Ethical and Political Questions*, edited by Marta Faustino, and Gianfranco Ferraro, 53-72. London: Bloomsbury Academic, 2020.

Thagard, Paul. "Cognitive Science." *The Stanford Encyclopedia of Philosophy* (Winter 2020 Edition), edited by Edward N. Zalta, <https://plato.stanford.edu/archives/win2020/entries/cognitive-science/>.

Woolen, Don Jr. "A Preliminary Study of Stoic Philosophy as Psychotherapy." *Frontiers of Philosophy in Practice* 6, no. 2 (2003): 31-42.

Xenakis, Iason. *Epictetus: Philosopher-Therapist*. New York: Springer Publishing, 1969.