

A Critical Perspective On Second-Order Empathy In Understanding Psychopathology: Phenomenology And Ethics

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Abstract: The centenary of Karl Jaspers' *General Psychopathology* was recognised in 2013 with the publication of a volume of essays dedicated to his work (edited by Stanghellini and Fuchs). Leading phenomenological-psychopathologists and philosophers of psychiatry examined Jaspers notion of empathic understanding and his declaration that certain schizophrenic phenomena are 'un-understandable'. The consensus reached by the authors was that Jaspers operated with a narrow conception of phenomenology and empathy and that schizophrenic phenomena can be understood through what they variously called second-order and radical empathy. This article offers a critical examination of the second-order empathic stance along phenomenological and ethical lines. It asks: (1) Is second-order empathy (phenomenologically) possible? (2) Is the second-order empathic stance an ethically acceptable attitude towards persons diagnosed with schizophrenia? I argue that second-order empathy is an incoherent method that cannot be realised. Further, the attitude promoted by this method is ethically problematic insofar as the emphasis placed on radical otherness disinvests persons diagnosed with schizophrenia from a fair chance to participate in the public construction of their identity and, hence, to redress traditional symbolic injustices.

Keywords: radical empathy; schizophrenia; phenomenological reduction; incomprehensibility; social justice; Karl Jaspers; Edmund Husserl

In the first edition of *General Psychopathology*, published in 1913, the German philosopher and psychiatrist Karl Jaspers famously declared that certain schizophrenic phenomena do not evince meaningful psychological connections that can be grasped through ordinary empathic capacities: they are 'un-understandable'. With the resurgence of philosophical interest in psychiatry and psychology over the past twenty years, Jaspers' theorem of incomprehensibility has been challenged. Particularly influential in this respect has been the critique of phenomenological psychopathology. Appealing to philosophical phenomenology of 20th century Germany and France and to phenomenologically oriented psychiatrists of the same century, a number of contemporary authors have sought to demonstrate that schizophrenic phenomena are understandable but not through naive empathic capacities of the sort Jaspers employed. In a recent volume of essays dedicated to the centenary of his *General Psychopathology* [1], the consensus is that Jaspers operated with an unduly narrow conception of phenomenology and empathy, and that schizophrenic phenomena can be understood through a form of empathy variously referred to as 'radical', 'theoretical', and 'second-order'. In order to achieve this form of empathy, they argue, one must first suspend the natural attitude of everyday life and, second, acknowledge that the lifeworld of the "schizophrenic" is radically unlike one's own. One may then make use of theoretical and philosophical constructs to approximate the other's experiences and the way he finds himself in the world.

In this article, I present a critical examination of second-order empathy along phenomenological and ethical lines. First, phenomenologically, the overriding question is whether second-order empathy is possible. In order to address this, I revert to the primary move required for achieving second-order empathy, which is to suspend the natural attitude—to perform the phenomenological reduction—and analyse what that entails. I point out the problems with the *transcendental* reduction while maintaining that this is exactly what second-order empathy requires. On this basis, I conclude that second-order empathy is an incoherent method that cannot be realised. Phenomenological psychopathology, while it provides compelling theoretical accounts of schizophrenic phenomena, overreaches when it also claims that its method offers empathic—and not merely theoretical—understanding of these phenomena. Second, second-order empathy is, ultimately, a particular attitude which one takes towards others and, hence, raises questions over the ethical status of that attitude. I assess this status by asking whether an attitude that emphasises radical difference is the right one to hold towards people diagnosed with schizophrenia. I argue that emphasising from the outset the "schizophrenic's" radical otherness is antithetical to the demands for symbolic justice voiced by persons given this diagnosis. On this basis, I conclude that the second-order empathic stance is ethically problematic.

Before the critical arguments can be presented in detail, some background is required. The proposal for second-order empathy arises from a specific problem pertaining to the limits of empathic understanding of psychopathological phenomena. This problem was first articulated explicitly by Karl Jaspers in *General Psychopathology*. The first part of this article is concerned with outlining these issues and analysing the disagreement between Jaspers and contemporary phenomenologists and philosophers of psychiatry. The second part takes on the proposal for

second-order empathy, indicating the precise methodological moves required for achieving it. With the groundwork laid, the remainder of the article considers the phenomenological and ethical critiques.

1. Background and motivating problem

1.1 Jaspers on Empathy & Psychopathology

Psychopathological phenomena, argues Karl Jaspers in *General Psychopathology*, permit two kinds of connections: causal connections which may feature in inductive generalisations and explanations, and meaningful connections by which we understand how mental states 'emerge' out of each other:

In the natural sciences we find causal connections *only* but in psychology our bent for knowledge is satisfied with the comprehension of quite a different sort of connection. Psychic events 'emerge' out of each other in a way which we understand. Attacked people become angry and spring to defence, cheated persons grow suspicious. The way in which such an emergence takes place is understood by us, *our understanding is genetic*. [2, p.302]

Genetic understanding by empathy allows us to see the connections between mental states and, according to Jaspers, is the only true *psychological* understanding. It is complemented by the static understanding by which we make present and know what a mental state is like as experienced by the other. Such understanding is to be contrasted with the rational comprehension of the connections between thoughts and hence of what the speaker says. Empathy goes further and affords an understanding of the speaker him or herself; it 'leads directly into the psychic connection' and involves seeing 'how certain thoughts rise from moods, wishes or fears' [2, p.304]. Jaspers endorses a direct grasp as essential to this kind of understanding: 'we sink ourselves into the psychic situation and *understand genetically by empathy* how one psychic event emerges from another' [2, p. 301]. This may involve a simulation where the observer uses his or her emotional and cognitive resources to understand other people's mental states and psychological connections. In the case of psychopathology, the task is to '*extend our understanding* to unusual and remote connections which at first sight perhaps seem incomprehensible' [2, p. 313].

In delineating the parameters of empathic understanding, Jaspers considers legitimate those meaningful connections which are the 'subject of relatively frequent observation and form part of the ordinary equipment of everyday practical understanding' [2, p. 315].¹ Hence, willing observers should, in principle, be able to grasp such connections naturally or if they are pointed in the right direction. Jaspers spends a good deal of time demonstrating how understanding through empathy might be extended to psychopathological phenomena that otherwise may appear incomprehensible. For example, he writes that we can understand reactions that are a

¹ Jaspers rejects the over-interpretation of psychoanalysis, partly in that it abandons the pre-suppositional attitude necessary to let psychological phenomena 'speak for themselves', and partly because psychoanalysts, as he argues, refuse to acknowledge that there are limits to understanding and seek to 'understand' all psychic phenomena by transforming them into a symbol of something else—in Freud's case, a symbol for sexuality, an idea which he considers speculative and theoretically prejudiced [2, pp. 360, 539-540].

consequence of the failure of true instinctual gratification or are a defensive attempt to avoid facing 'reality'. Thus, we can understand self-denial, falsification, deception, and partially, 'reactive' psychoses and 'neuroses' as meaningful [2, pp. 317-330]. However, according to Jaspers, not all phenomena can be understood in this way; there are limits to empathic understanding. The psychology of meaningful connections halts before the 'the reality of *organic illness and psychosis*, before the elementary nature of these facts' [2, p. 363]. He clarifies:

On the appearance in an individual of a wish, a feeling, a judgement of something, an attitude, or alternatively when he acts, we usually 'understand' the content in terms of his previous traits, his basic nature and the presenting situation. Moreover if, in spite of the fact that we know him extremely well, our understanding fails us, we look to see whether the phenomena might not constitute the 'un-understandable' part of a morbid symptom. [2, p. 376]

The symptoms which Jaspers considers un-understandable are the primary delusions of schizophrenia. The contrast is with secondary delusions which arise 'comprehensibly from other psychic events and which can be traced back psychologically to certain affects, drives, desires and fears,' i.e., to the subject's personality [2, pp. 106-107]. On the other hand, primary delusions arise from a 'primary pathological experience'—a delusional perception, for instance—and hence, are psychologically irreducible. They cannot be understood empathically, and extra-conscious causes may be needed to explain them. Primary delusions, the argument would go, present a problem both of static understanding (it is not possible to know what the primary pathological experience is like) and of genetic understanding (it is not possible to understand the emergence of such beliefs in the context of the subject's personality and life situation).

Jaspers' claim that schizophrenic phenomena are un-understandable has been challenged. Two kinds of approaches can be found in the literature. The first attempts to extend Jasperian genetic understanding by empathy to delusions. These include accounts which demonstrate that delusions are understandable responses to unusual experiences [3, 4]. Other accounts understand the incorrigibility of delusions to arise from the fact that they have come to acquire for the subject the status of framework propositions, and hence, have become shielded from doubt [5]. Such approaches, however, have been criticised for actually failing to afford empathic understanding of delusional phenomena [6; 7, pp. 89-122]. The second approach arises from phenomenological psychopathology and starts with a different tack: it takes issue with the very notion of empathic understanding deployed by Jaspers and proceeds to offer an alternative account that relies on a more sophisticated empathic stance described as 'radical' and 'second-order'. So, according to the phenomenological psychopathologists, what exactly did Jaspers get wrong?

1.2 *The Critique of Jaspers*

In *Disembodied Spirits and Deanimated Bodies*, Giovanni Stanghellini critiques Jaspers' claim that schizophrenic phenomena are un-understandable. Stanghellini begins by pointing out that incomprehensibility may be a consequence of the observer's resistance to engage in empathic understanding: 'being empathically understandable is supposed to be an *intrinsic* characteristic of the state of mind of the person over there, not a feature of my own capacity to engage in an empathic relationship with him or her. What Jaspers wrongly ruled out here is that

incomprehensibility could be the effect of *my own* resistance to engage in empathic understanding' [8, pp. 28-29]. It is true that the observer's resistance may constitute a barrier to understanding others, a barrier that may be mistakenly interpreted to denote incomprehensibility. However, it is not the case that Jaspers was not aware of this: 'As an investigator into meaning I am conditioned by the sources of my understanding, by such confirmation as I find and by my own problems. These all decide whether I remain tied to banal simplifications and rational schemata or whether I endeavour to comprehend men in their most complex manifestations' [2, p. 314].

Jaspers points out that prejudices might prevent one from understanding others. He recommends the suspension of such prejudices and the enlargement of one's capacity for grasping meaningful connections which can guide understanding in a particular concrete case. 'In the case of every investigator,' he writes, 'it is a matter of his human stature as to what he understands and how far this understanding reaches' [2, p. 314].² He would have agreed with Derek Bolton and Jonathan Hill [9, p. 101], who note that while it might not be possible for me to perceive meaningful connections between the mental states of another person if I am not familiar with such connections in my own case, nevertheless, lack of familiarity does not necessarily signal lack of meaning.

With this point aside we can turn to the deeper disagreement between Jaspers and the psychopathologists.³ Jaspers held, as outlined above, that certain schizophrenic phenomena are intrinsically incomprehensible; that is, their incomprehensibility is not a function of the resistance or limited capacities of the observer but of the way such phenomena arise. And this is how he would have responded, one may conjecture, to German Berrios' point that 'the assessment of comprehensibility depends on the state of progress of psychological theory: delusions incomprehensible today may not be so tomorrow' [10, p.10]. Jaspers would have said that it was not; that these phenomena are incomprehensible by their nature. The psychopathologists rejected this claim. A helpful typology which can delineate the nature of the disagreement more accurately was introduced by Markus Heinimaa in an analysis of the concept of incomprehensibility [11]. He identifies three different kinds of failures of understanding: misunderstanding, not-understanding, and incomprehensibility. He then goes on to gloss each in terms of the kind of understanding involved [11, p. 221]:

- (1) misunderstanding as a form of understanding;
- (2) not-understanding as a privation of understanding;
- (3) incomprehensibility as an understanding that there is nothing to understand.

The disagreement between Jaspers and the psychopathologists can be characterised as a disagreement over the appropriate level at which to apprehend schizophrenic phenomena. Jaspers endorsed level 3, that is, he had a definite understanding that delusion proper is

² According to Jaspers, this 'stature' can be enhanced through engagement with those who have explored the human condition: he cites Shakespeare, Dostoevsky, Goethe and Nietzsche as representative [2, p. 314].

³ Henceforth, the term 'psychopathologists' will be used to refer to contemporary phenomenological psychopathologists whose theoretical background includes the work of philosophers such as Husserl, Heidegger, and Merleau-Ponty and psychopathologists such as Minkowski and Blankenburg.

intrinsically incomprehensible: there is nothing to understand. The psychopathologists disagreed and endorsed level 2: while there is a definite difficulty in determining meaning, this merely indicates that one needs to approach understanding differently. Confronting phenomena that appear un-understandable is tantamount to confronting the limits of one's world and method of understanding and not the 'objective' incomprehensibility of the phenomena.⁴ According to Stanghellini [8], Jaspers' method failed to take into account the unique life-world of the subject in understanding the emergence of delusions. Jasperian empathy cannot provide understanding of the 'connections between the other's single experiences and the whole world in which the other person lives' [8, p. 42], where this world is radically different to the observer's. What is needed is an alternative method that can overcome the limitations of ordinary empathy; this is the method of second-order empathy.

2. Second-order empathy

2.1 What is second-order empathy?

As the name suggests, second-order empathy is not a direct or spontaneous kind of empathy (of the form ordinarily employed). It is a more removed kind of empathy which requires the endorsement of certain theoretical constructs. The term 'empathy' here suggests that once the observer endorses these constructs, he or she may be able to understand the emergence of schizophrenic phenomena, much like grasping the connection between being attacked and becoming angry. The difference is that while it is possible to grasp this particular connection without much trouble, it is more challenging to take on the perspective of the person with schizophrenia without the aid of certain theoretical constructs. What is the theoretical background here and how is it to be employed towards achieving second-order empathy?

The psychopathologists developed their account of schizophrenia from the philosophical phenomenology of 20th century Germany and France, centrally from Edmund Husserl but also from Maurice Merleau-Ponty and Martin Heidegger. These philosophers, in different ways, turned attention away from the everyday, naive experience of the world to an appreciation and description of its conditions of possibility. In everyday experience, we exist in what Husserl called the 'natural attitude': the ordinary state of waking consciousness in which we find ourselves 'living naturally, objectivating, judging, feeling, willing', a state in which the world is '*simply there for me, "on hand"*' [12, p. 52]. We go about in the natural attitude with an implicit certainty in the reality of the world around us. Further, experience in the natural attitude has a horizon of intentionality. When we are directed towards an object in some mode of intentional regard, our directedness implies a horizon of possible meanings, perspectives, and affordances [13, p. 149]. It is on the basis of this prior certainty and embeddedness in the world that we conduct our everyday business of engaging with people and objects, judging, experiencing, anticipating, as well as practical activities. Yet, we never come to appreciate the achievement of having a sense of belonging and reality, primarily because it is fundamental and deep-rooted, and underpins everything that we do.

⁴ Doerr-Zegers and Pelegrina-Cetran [14, p. 63] make a similar point: 'Although the dichotomy comprehensibility / incomprehensibility is based on a "subjective" incapacity, not being able to understand is transformed into a diagnostic criterion pretending to be "objective"'.

Now, the psychopathologists incorporated such an understanding of phenomenology into their accounts of the development of schizophrenia.⁵ As pointed out in a recent volume of essays dedicated to the centenary of his *General Psychopathology*, Jaspers failed to do so and remained bound by a static, descriptive conception of phenomenological method [14, 1].⁶ That is, he restricted himself to subjective experience as reported by the patient (descriptive phenomenology) and did not take into account the pre-reflective, background dispositions and structures which underpin this experience and constitute the person's life-world. These include 'the more encompassing or horizontal aspects of human experience, such as the general sense or feeling of reality, the experience of time, or the implicit sense of ipseity or selfhood' [15, p. 102]. In order to understand psychopathological phenomena, the psychopathologist needs to see beyond 'superficial phenomenological changes' and examine such changes against the background of more global alterations to 'how we find ourselves in the world' [16, p. 235].

Consider, for example, radical scepticism occasionally seen in psychosis, when the person questions the reason behind there being objects in the world, such as cars or doorknobs, yet is not satisfied by any of the usual answers one may provide to such questions. According to the phenomenological approach, radical scepticism may be understood to emerge from disruptions to intersubjectively mediated bodily-intentionality by which objects ordinarily appear as practically meaningful, ready-to-hand possibilities. Radical scepticism can then be understood not as an interrogation of what cars or doorknobs are for (as a toddler may ask) but as an expression of one's fundamental detachment and distance from objects in the world. According to this perspective, schizophrenic phenomena can only be properly understood when seen to arise from fundamental experiential alterations to the general feeling of reality and belonging, and to the sense of self which are taken for granted in the natural attitude.

What is immediately striking about such a project of understanding is that it departs from the confines of Jasperian empathy by imaginative simulation, of transporting oneself into another's situation. As Louis Sass puts it in the context of commenting on the basic structures of human experience: 'it is unlikely ... that the patient himself will be able to describe this sort of feature in spontaneous fashion, and unlikely as well that the psychologist or psychiatrist will be able to discern or describe it without the benefit of a certain theoretical sophistication and the use of "constructs"' [15, p.102]. In contrast to Jasperian empathy, which is 'immediate or spontaneous and essentially non-intellectual', in order to grasp the 'fundamental mutations of pre-reflective self-experience', one needs a degree of theoretical speculation that goes beyond genetic understanding in Jaspers' sense [15, p. 102]. This may render incomprehensible psychopathological phenomena amenable to empathy, not of the immediate, naïve Jasperian

⁵ For accounts that seek to understand schizophrenia in terms of a genetic, constitutive phenomenology, see, e.g., Stanghellini [8], Sass [32], and Henriksen [19].

⁶ One reason put forward to explain why Jaspers operated with this restrictive conception of phenomenology is that he drew his conception from the early Husserl. Husserl's later works, Heidegger's *Being and Time*, and Merleau-Ponty's *Phenomenology of Perception* had not been published when Jaspers started writing *General Psychopathology*. He thus missed (ignored?) later developments in genetic and constitutive phenomenology (cf. [1, pp. xiv-xv; 15, p. 96]). Another reason has more to do with overall philosophical and ethical vision whereby Jaspers was recalcitrant to 'all kinds of all-encompassing understanding of human existence' [17, p. 169]. He wanted to maintain an irreducible character to human existence, and considered attempts to essentialise the latter to be metaphysical and hence unscientific [14, p. 58].

sort, but a kind of empathy variously described as ‘radical’ [16], ‘theoretical’ [15], or ‘second-order’ [17]. But how can second-order empathy be achieved? What is the method that needs to be followed?

2.2 Achieving Second-Order Empathy

Although psychopathologists do not frame second-order empathy as follows, a close reading of the recent philosophical literature on this issue will reveal that there are two basic moves essential for the possibility of achieving this form of empathy. The first move is to bracket the natural attitude. Stanghellini writes: ‘Achieving second-order empathy ... requires bracketing my own pre-reflexive, natural attitude (in which my first-order empathic capacities are rooted), and approaching the other’s world as I would do while exploring an unknown country’ [17, p. 169]. In his argument for ‘radical empathy’, Matthew Ratcliffe suggests something similar when he writes that achieving this kind of empathy requires adoption of the ‘phenomenological stance’, which involves ‘suspending our habitual acceptance of the world’ [18, p. 473], and realising that our feelings of reality and belonging, which we take for granted in the natural attitude, are phenomenological achievements that underpin intelligibility and the kinds of possibility experiences and objects incorporate for us. The second move—which requires the first—is to suspend the assumption that persons with schizophrenia share this deeper structure of experience with the observer. Thus, Stanghellini writes that in order to achieve second-order empathy, one must acknowledge the following:

The lifeworld inhabited by the other person is not like my own. The supposition that the other person lives in a world like my own - that he experiences time, space, his own body, others, the materiality of objects, etc. just like I do - is often the source of serious misunderstanding. In order to empathise I must acknowledge the radical difference that separates me from the way of being in the world that characterises the other. Any forgetting of this difference, paradigmatically between my own world and that of a schizophrenic patient (but I would say, also, *mutatis mutandis* between my own and an adolescent’s or an old man’s world), will be an obstacle to empathic understanding. [17, p. 169]

This methodological move and attitude towards the other finds agreement with other philosophers of psychiatry: Ratcliffe refers to the importance of recognising that the person with schizophrenia does not share one’s own phenomenological world—that there is variability and difference between the two worlds [16]. Sass refers to this as the ‘ontological difference’ [15]. Similarly, Mads Henriksen calls for recognising that the ‘schizophrenic world differs significantly from the world experienced in normal conditions’ [19, p. 126]. Jaspers was not aware of this difference and sought to understand schizophrenic phenomena as if that person over there shares the same pre-reflective structure of experience as the observer. So judged, for Jaspers, schizophrenic phenomena were incomprehensible. Second-order or radical empathy addresses this shortcoming by combining theoretical speculation with an effort to ‘approximate’ the patient [17].

In summary, the two moves required for achieving second-order empathy are as follows:

- (1) Suspend the natural attitude.
- (2) Suspend the assumption of uniformity of background experience (which requires the first-move).

Only after these two moves are accomplished, can one approach, without prejudice, the perspective of the person with schizophrenia. One can then begin to examine the ‘constitutive processes that build up subjective experience’ [1, p. xx], and may be able to grasp certain connections among another person’s mental states that had previously been elusive.

I am now in a position to assess the notion of second-order empathy in light of what I have been referring to as Jasperian empathy, henceforth, ‘first-order empathy’ (see table 1). The critical perspective that follows will attempt to address two questions: (1) Phenomenology: is second-order empathy possible? (2) Ethics: is the second-order empathic stance an ethically acceptable attitude towards persons diagnosed with schizophrenia? I must point out that the target of the critique is not the innovative and compelling *theoretical* accounts of phenomenological psychopathology offered by Sass, Stanghellini, Ratcliffe, and many others. Rather, I am concerned with the proposal for second-order empathy as a *method* for understanding schizophrenic phenomena. If second-order empathy is not possible, this does not entail that theoretical phenomenology is wrong, only that certain versions of it overreach when they claim to offer *empathic* understanding as opposed to theoretical elucidation. Further, my goal is not to defend Jaspers but to examine the method put forward as a corrective to his own. In fact, it is my view that both Jaspers and the psychopathologists were right in one sense and wrong in another. Jaspers was right to insist on an everyday notion of empathic understanding, but unjustified to claim definitively that there is nothing to understand.⁷ The psychopathologists rightly saw the problem to be one of privation of meaning rather than its intrinsic absence, but were wrong to propose a problematic method to seek that understanding, or so I shall argue.

Table 1: Comparison of first- and second-order empathy

	First-Order Empathy	Second-Order Empathy
Also described as	Naive, non-intellectual, spontaneous empathy	Radical, theoretical, intellectual empathy
Tools required	Using our emotional and cognitive resources to simulate another person's experiences and psychological connections	Approximation of another person's subjective experience with the aid of appropriate theoretical constructs
Understanding afforded	Psychological understanding: the psychology of meaningful connections	Philosophical/theoretical understanding
Attitude towards the other's 'world'	Sufficiently like 'ours'	Radically unlike 'ours'
Value prioritised	What is shared: Commonality	What is unique: Difference
Schizophrenic phenomena	Un-understandable	Understandable

⁷ One problem with this claim 'incomprehensibility as an understanding that there is nothing to understand' is that it indicates intrinsic meaninglessness, whereas the concept of incomprehensibility, and I agree with Heinimaa, 'is not a contentual expression ... it just points out where the limits of comprehension lie in giving itself to our use as this limit' [11, p. 225].

3. Phenomenology: is second-order empathy possible?

As indicated in the previous section, the possibility of achieving second-order empathy requires the initial move of suspending the natural attitude or, in technical terms, performing the phenomenological reduction. But what exactly does this primary move involve? In his various writings, Stanghellini is silent on this issue (see, e.g., [17, 20]). He repeatedly asserts that the pre-reflexive natural attitude must be bracketed but does not subject this claim to any sustained investigation. Ratcliffe is more explicit about this [18], but, as I will argue, his answers are not satisfactory. Given that second-order empathy depends on performing the phenomenological reduction, it seems essential to at least have some sense of what that involves and whether it is possible.

In Husserlian phenomenology, the phenomenological reduction is the means by which the world-constitutive activity of consciousness can be brought into view and become itself a subject for reflection. This reflection cannot be carried out in the natural attitude since what is at stake here is precisely the activity which makes that attitude possible—which effects and maintains the certainty, reality, unity of our everyday world experience—and, hence, cannot be apprehended from within our ordinary engagement with the world. The phenomenological reduction consists of two moments: the epoché⁸ and the reduction proper.⁹ The epoché is the ‘bracketing’, ‘suspension’, ‘putting out of action’ of the natural attitude: our naive acceptance of life as a pre-given horizon of understanding and praxis. In *Ideas Pertaining to a Pure Phenomenology* (first published in 1913), Husserl intended the natural attitude as a thesis—an implicit, pervasive, presumptive belief in the certainty and reality of objects in the world—to which the objective correlates are the being-on-hand and actuality of these objects [12] (see also [21, pp. 33-45]). Thus conceived, what are to be bracketed in the epoché are individual validities or ‘positings’: ‘In the phenomenological attitude in essential universality we prevent the effecting of all such cogitative positings, i.e., we "parenthesize" the positings effected; for our new inquiries we do not "participate in these positings." Instead of living in them, instead of effecting them, we effect acts of reflection directed to them’ [12, p. 114].

In the final work published in his lifetime *The Crisis of European Sciences and Transcendental Phenomenology* (written between 1934 and 1937), Husserl conceived of the epoché in a more radical way. This stemmed from his deepening understanding of the ‘style of natural, normal life’. Husserl emphasised the horizontal character of intentional acts: when we are directed towards an object in the world experiencing, judging, or valuing, the validities we effect are not isolated but imply ‘an infinite horizon of inactive ... validities which function with them in flowing mobility’ [13, p. 149]. Our directedness towards an object, say, a cup or a book, is surrounded by concealed

⁸ Etymologically derived from the ancient Greek ἐποχή, meaning to hold back, stop, or suspend.

⁹ There has been some debate over whether ‘epoché’ and ‘reduction’ are (1) synonyms for the same operation, (2) two moments of the same operation, or (3) independent and distinct operations; see [21, p. 148; 33]. In the *Crisis*, section 41, Husserl writes that the epoché makes possible the reduction, the latter being the ‘discovery of the universal, absolutely self-enclosed and absolutely self-sufficient correlation between the world itself and world-consciousness’ [13, p. 151]. Eugen Fink—Husserl’s student/collaborator—writes that ‘epoché and the action of the reduction proper are the two internal basic moments of the phenomenological reduction, mutually required and mutually conditioned’ [34, p. 41]. These comments, at least, exclude the first possibility and thus epoché and reduction can be considered separately.

yet always present possibilities, affordances, and meanings. Together, current and potential intentional acts make up a 'single indivisible, interrelated complex of life' [13, p. 149]. What is to be bracketed then, as a commentator puts it, is not a 'thesis, but a straightforward movement, the gesture of what it is to engage a world in general' [22, p. 182]. Bracketing natural world-life thus calls for a 'a total transformation of attitude, a *completely unique, universal epoché*' [13, p. 148].

Instead of this universal abstention in individual steps, a completely different sort of universal epoché is possible, namely, one which puts out of action, with one blow, the total performance running through the whole of natural world-life and through the whole network (whether concealed or open) of validities ... Through the abstention which inhibits this whole hitherto unbroken way of life a complete transformation of all of life is attained, a thoroughly new way of life. An attitude is arrived at which is *above* the pre-giveness of the validity of the world, *above* the infinite complex whereby, in concealment, the world's validities are always founded on other validities, *above* the whole manifold but synthetically unified flow in which the world has and forever attains anew its content of meaning and its ontic validity. [13, p. 150]

With the target of the epoché identified, one may ask whether it is possible to perform it. For Husserl, suspension of our total engagement with the world reveals absolute, transcendental consciousness and brings its constitutive function into view. This can be seen as a Cartesian tendency in Husserl's thought whereby the basis for ultimate evidence lies with the ego. Merleau-Ponty in *Phenomenology of Perception* (first published in 1962) had taken issue with Husserl's formulation of the reduction. He famously wrote that the 'most important lesson which the reduction teaches us is the impossibility of a complete reduction' [23, p. xiv]. The reduction, in Husserl's formulation, can only be possible if we are absolute, independent mind—only then can we gaze down and grasp in its entirety a world laid before us transparently [23, pp. xii, xv]. However, according to Merleau-Ponty, phenomenological reflection reveals the world's ultimate 'opacity' (it cannot be grasped in its entirety) and 'indeterminacy' (it cannot be grasped conclusively). Far from revealing pure consciousness, what the epoché reveals is a pre-given life-world that cannot be subjected to the transcendental analysis sought by Husserl. We are always 'in the world' and 'our reflections are carried out in the temporal flux on which we are trying to seize ... there is no thought which embraces all our thought' [23, p. xv]. The epoché, in this sense, is one mode of being-in-the-world among others, albeit one with a peculiar vocational interest.¹⁰

¹⁰ To be fair to Husserl, he had in *Crisis* and other manuscripts published since his death recognised another route into phenomenology, that of the life-world [35]. For instance, some comments in *Crisis* may help explain how someone may be *above* the world—as Husserl urges us to do through the universal epoché—without being *outside* it. In *Crisis*, Husserl had described the epoché as a 'newly established vocational interest, whose universal subject matter is called the "life-world"' and which 'finds its place among the other life-interests or vocations' [13, p. 136]: in this sense it is not 'outside' life. He also writes that achievement of the epoché is analogous to a 'complete personal transformation, comparable to a religious conversion' [13, p. 137]. The idea of a conversion offers a sense in which one can be above life without being outside it. A conversion is not merely a change in one belief or another but a 'shift that transforms the meaning of the whole' [22, p. 183]. In doing so, a conversion is *above* particular activities or vocations as it redefines the total meaning within which they are performed. In any case, Husserl's discovery of the life-world does not signal the death of his transcendental philosophy and he continued, as Luft comments, to regard the absolute ego as 'foundation and starting point of all reflection' [35, p. 224].

So, is the epoché possible? Some commentators of Merleau-Ponty have taken his views to indicate that he rejected the epoché altogether (see, e.g., [24]). Other more recent commentators suggest that what Merleau-Ponty rejected is the context in which Husserl practiced the epoché—i.e., transcendental idealism—and not the epoché itself now seen only as a methodological principle. As Smith notes, Merleau-Ponty's claim is not that we cannot bracket the world, but that 'we cannot give a fully transparent account of our experience and the world of ordinary life' [25, p. 562]. What, then, can be revealed by the epoché? Merleau-Ponty writes:

Reflection does not withdraw from the world towards the unity of consciousness as the world's basis; it steps back to watch the forms of transcendence fly up like sparks from a fire; it slackens the intentional threads which attach us to the world and thus brings them to our notice; it alone is consciousness of the world because it reveals that world as strange and paradoxical. [From this break with the world] we can learn nothing but the unmotivated upsurge of the world. [23, p. xv]

This can be interpreted to mean that the epoché de-familiarises the familiar thus allowing us to notice that which otherwise goes unnoticed. Merleau-Ponty's own analysis of bodily intentionality can be understood to arise from such a restricted epoché. But shorn of its transcendental basis, the investigations conducted following a restricted epoché are *within* the world. In Husserl's terminology, the phenomenologist would still be within the natural attitude only exploring a much less visited aspect of it. One implication of this is that the phenomenological thesis that consciousness constitutes the world—and a host of other related claims—can no longer be upheld, for it is a thesis that requires a complete reduction in order for it to make sense. And I have argued that a complete reduction can only be possible if we are absolute mind encountering transparent world, a notion that does not stand phenomenological scrutiny in addition to being epistemologically incoherent. In what follows, I will therefore consider granted that the transcendental reduction is not possible.

What are the implications of this for phenomenological psychopathology and for achieving second-order empathy? Recall that the first move required for achieving second-order empathy is to suspend the natural attitude. Hence, if what is required to do so is to perform the transcendental reduction, then second-order empathy is an incoherent method. It is my contention that this is precisely what is required, and in what follows I will demonstrate why this is the case.

In the previous section, I discussed the psychopathologists' proposal for second-order empathy and the two moves required for achieving it. In relation to the first, primary move, Stanghellini wants us to bracket our pre-reflexive natural attitude [17] and Ratcliffe [18] suggests we suspend our habitual acceptance of the world. We do so in order to realise that our sense of reality and belonging which we take for granted in the natural attitude is a phenomenological achievement. Once in possession of this insight, one can then proceed to the second move which is to suspend the assumption of uniformity of this background experience. However, to say that one's sense of reality and belonging is a phenomenological achievement is to say that consciousness constitutes the world, which, as identified previously, is a transcendental insight. That is, it can only be gained after performing a complete reduction. Let me explain.

What is a 'sense of reality'? It is not having the concept of reality, for to acquire that concept one need only have a non-veridical experience which is then appraised as such, and from this to grasp the colloquial idea that 'things are not always what they seem'. Which is another way for

drawing a distinction between how things appear to be and how things really are. Or it can be acquired deductively in the way that the Kantian thing-in-itself or the Platonic forms were derived. A sense of reality must be understood as just that: a sense, an experience. But how do we sense reality independently of all the objects we normally perceive in the world around us? This is where the transcendental reduction comes in. To talk about a sense of reality—as intended by the psychopathologists—is to interrogate not the world of objects around us, but the *having* of that world in the first place. As a Husserl commentator has noted, the question of the originary having of the horizon of the world ‘becomes possible only given an *experience* which is in turn made possible only by the epoché’ [22, p. 189]. This question can only acquire its meaning once we are able to see ‘where we are “naturally” blind’, that is, once we are able to perform the transcendental phenomenological epoché [22, p. 189]. A sense—an experience—of reality as a phenomenological achievement can only be gained from the vantage point of an independent consciousness in possession of a perspicuous vision of that world in its totality, a vantage point that cannot be realised.

It would appear then that the psychopathologists require the transcendental reduction in order for second-order empathy to work. If the argument above is correct, then Ratcliffe contradicts himself when he writes that his proposal does not require a ‘complete bracketing of the natural attitude, where the everyday world that we inhabit becomes an object of reflection for some mysterious, detached, observational consciousness’ [18, p. 482]. In fact, that is precisely what his method requires. Further, his advice on how the phenomenological stance is to be adopted is misleading. He writes: ‘I take the essence of the phenomenological stance to involve (i) recognition of an aspect of experience that our everyday concerns presuppose; (ii) a commitment to reflect upon it; and (iii) at least some appreciation of *what* the relevant phenomenological achievement consists of’ [18, p. 482]. Thus framed, one may be led to think that the phenomenological reduction is a logical deduction from phenomenal world (‘everyday concerns’) to necessary background conditions (what such concerns ‘presuppose’), when it should be understood as an experience of disengagement from the natural attitude on the basis of a radical reflection: it is a phenomenological and not a logical venture. But perhaps Ratcliffe is driven to treat the reduction as if it were a logical venture because if he considered it a phenomenological one, he would have to concede that his method requires the transcendental reduction. In any case, the upshot of this is that the dependence of second-order empathy on the performance of the transcendental reduction renders it an incoherent method.

4. Ethics: Is the second-order empathic stance an ethically acceptable attitude towards persons diagnosed with schizophrenia?

As indicated in table 1, the second-order empathic stance towards the other is that his or her life-world is unlike mine, and the value prioritised is that of uniqueness or difference. The psychopathologists quoted earlier all explicitly advocate that the first step to understanding a person with schizophrenia is to acknowledge that difference. This section examines the second-order empathic stance from an ethical standpoint: is an attitude that emphasises differences the right one to adopt towards persons diagnosed with schizophrenia? An objection that can be raised from the outset could be that the “schizophrenic” just is different in the relevant aspects. There is no question of an alternative attitude here as that would require denial of a fact about the world. Thus, bizarre beliefs, unusual experiences, and social ineptness stand as obvious

markers of difference. This would be true if the concern were to compare two entities, in which case it would be perfectly legitimate to note similarities and differences. However, the question here is not whether there are differences—of which there obviously are—but, rather, whether an attitude which emphasises differences is the right one to adopt. It could be further objected that this question assumes that one can as a matter of fact adopt an alternative attitude when in some cases that might not be possible, say, if the difference is too wide and there is literally nothing shared. Some brief reflections on how one ordinarily adopts such attitudes towards others should address this objection.

In interpersonal interaction, I may find myself focusing on what binds me to the other—what we share—or on what separates us, what makes each person in the interaction a unique being. The attitude which prevails is not always—though it often is—correlated with social and cultural distance: in the midst of the widest cultural gap one can sometimes be confronted with similarity in ultimate concerns and values, and amongst one's peers, one can sometimes see nothing but difference. This naturally raises the question of what it is that determines the attitude that will prevail towards the other. There are many factors here which may be relevant: prejudices, moods, purposes, and contexts can all condition my focus such that I am more attuned to similarity or to difference. The similarity or difference could be in relation to the other person's values, beliefs, habits, 'way of life', and so on. To see similarity is to perceive a shared space in the aforementioned aspects, whether directly ("they also bury their dead within twelve hours") or, in the absence of a similar practice, at a broader level of apprehension ("they also show respect to their dead"). Or I may decide to see none of this, and to describe instead the wide gap which separates me from the other. In both cases, the story we tell is already conditioned by a prior decision to focus on difference or on similarity. Reverse the decision and we may have a different story to tell. Put differently, the attitude we take towards other human beings is underdetermined by 'objective' measures of similarity or difference and is significantly influenced by prior and fundamental decisions pertaining to the focus which we allow to prevail. It will therefore always be possible to tell a different story. With this possibility established, I can now return to examine whether an attitude that emphasises differences is the right one to adopt towards persons diagnosed with schizophrenia.

I first consider what proponents of the second-order empathic stance would say in response to this question. They would argue that emphasising the differences between "our" and the "schizophrenic's" life-world is the right attitude to hold given that the end sought is to lend a measure of understandability to schizophrenic phenomena. Understandability would protect the "schizophrenic" from the de-humanizing position of lying outside the realm of meaning; he too, like others, inhabits a uniquely meaningful world with its own coherence (cf. [20]). The good by which the rightness of the attitude is maintained is the humanizing of the "schizophrenic" subject through understandability. The problem with this argument is that understanding does not entail humanising; a slave presumably could have been understood by his master while remaining a slave. Similarly, one may understand fully the motivations of a suicide bomber while still maintaining that he must be lacking in humanity to engage in such actions. The claim that the second-order empathic stance humanises the "schizophrenic" subject is an empirical hypothesis. It is even possible to put forward an alternative hypothesis, one where the second-order empathic stance can actually de-humanise rather than improve the lot of persons diagnosed with schizophrenia. It could go something like this: it is well-known that an important problem facing people diagnosed with schizophrenia is that they *are* different: the quintessential other, often

alienated and excluded. The second-order empathic stance draws too sharply and deeply that difference now not only at the level of behaviour but also at the level of the *fundamental structures of experience*, which are inaccessible to the patient, to the clinician, and to philosophers unacquainted with phenomenology, let alone the lay person. Given social perceptions and values almost everywhere in the world, it is problematic to launch a discourse that emphasises yet again how "schizophrenics" are different, now in a deeper, even obscure notion of difference. Thus, ironically, when philosophy finally discovered 'madness' and addressed Foucault's famous admonition of reason's monologue about unreason, it did—to be fair—start with the voice of those who had long been silenced but took that voice and launched yet another monologue about the other. The second-order empathic stance risks maintaining the "schizophrenic's" status as other, but now an other subject to the esoteric-philosophical gaze. Hence, it can be hypothesised, such a discourse can feed into the widely prevalent belief that "schizophrenics" are fundamentally alien, which will only serve to increase stigma and discrimination towards them.

As reasonable (or unreasonable) as these hypotheses may sound they still remain empirical hypotheses that need to be tested. The original question therefore remains: is an attitude that emphasises differences the right one to hold?

Before this question can be addressed from an ethical standpoint, one needs to step back and take note of the social and practical problems facing people diagnosed with schizophrenia. These include the reduction of their experiences to biomedical and cognitive models of illness, the absence of their voice from their own recovery, and the propensity to subject them to coercive treatment. Socially, there remains widespread stigma and disrespect towards those who are diagnosed with schizophrenia, including unjustified perceptions of dangerousness and deficit to discrimination in employment and other possibilities. These issues have been voiced at least since the late 1970s through growing mental health service-user movements initially active in the United States and North Europe. Such movements seek to redress injustices evident in material as well as symbolic inequalities and discrimination [26]. Philosophically, the justification for these demands can be understood in terms of the requirements for justice of the *redistribution* of resources and opportunities and the *recognition* of oppressed and stigmatised identities [27]. Persons diagnosed with schizophrenia are behind in society on both dimensions. Thus, the rightness of the second-order empathic stance is to be assessed in light of its relation to the two demands for justice: redistribution and recognition. For the purpose of this argument, I will assume that these demands are justified.

Redistributive justice requires restructuring of society in order to address endemic inequalities of an economic nature. For instance, claims of equal opportunities, rights and pay for women and racial and ethnic groups can be understood as demands for correcting disparities in income and access to resources that contribute to well-being. The normative underpinning for such claims is that people should not be discriminated against for features which can be justifiably described as morally irrelevant, such as gender, sexual orientation, race, or, in the case under discussion, experiencing and conceiving of self and world in ways that appear different to the majority. Thus, while it may be necessary to take into consideration the subject's background in order to adequately correct for the relevant injustices, the normative justification for such correction does not derive from the unique (or otherwise) nature of that background. In this sense, the extent to which the "schizophrenic" differs from or is like the majority in some specified way is irrelevant to the argument that justifies the demands for redistributive justice in

his or her case. This argument is grounded, instead, in an egalitarian outlook which ascribes equal worth to human beings.

With demands for recognition the issues are somewhat different. What needs to be addressed here are symbolic and cultural inequalities by which subjects are trapped in devalued, oppressed, and stigmatised identities. One way in which such demands can be justified normatively is the link between recognition and self-realisation. Thus, as Charles Taylor has noted, 'nonrecognition or misrecognition can inflict harm, can be a form of oppression, imprisoning someone in a false, distorted, and reduced mode of being.... Due recognition is not just a courtesy we owe people. It is a vital human need' [28, pp. 25-26]. Achieving recognition has been a major concern in racial and sexual identity politics as well as recently in mental health. Mental disorders, after all, remain *dis-orders*, and prior to the mental health service-user movements were primarily understood as negative, deficit states. Practically, demands for recognition can be satisfied in a number of ways (see [29, pp. 2-26; 26]). The groups in question can reclaim the stigmatised identity and, in conversation with the wider society, seek to re-pattern existing constructions and re-value devalued identities or traits. This can be seen in the various 'pride' movements, including gay pride and other celebratory discourses. Certain elements of mad pride discourse, for instance, reject notions of disorder and valorise 'madness' as a valued identity or condition with connections to art and spirituality (e.g., [30]). Alternatively, the groups in question can deconstruct the difference rather than transform its value and interpretation. They may proceed to show that the difference itself is constructed along with—rather than precedes—the value hierarchy in question (cf. [29, p. 15]). Identities, in this case, are not to be celebrated but deconstructed. This can be seen in queer theory (to be contrasted with traditional gay activism) which rejects categories such as 'straight' or 'gay' as historical/social constructs rather than fixed essences of identity. In mental health it can be seen in certain discourses within the hearing voices movement which seek to deconstruct the category of voice hearing and to normalise the phenomena by demonstrating its commonality in the population [31].

In short, there are many, many strategies and discourses available for achieving recognition.¹¹ Further, the very meaning of recognition in a particular instance will vary and cannot be assumed: some seek affirmation that they are no different to other people, others want to be recognised for what makes them unique, others still want to have more control over this process and its outcome. In emphasising radical difference, the second-order empathic stance does not allow such possibilities for persons diagnosed with schizophrenia: *they can only be different, and fundamentally so*. The discourse of phenomenological psychopathology can therefore end up itself as a form of misrecognition, 'imprisoning someone in a false, distorted, and reduced mode of being' [28, p. 25]. Whether or not some persons diagnosed with schizophrenia can recognise themselves in this discourse is beside the point, because even if some do, it remains ethically problematic to promote an authoritative, scholarly narrative concerning others that hampers their chance for a fair participation in the public construction of their identity by insisting from the start that "they" are not like "us". And it is for this reason that an attitude which emphasises the radical otherness of the "schizophrenic"—as required by the second-order empathic stance—is not the right one to hold.

¹¹ See Schrader and Jones [36] for an overview of the variety of discourses advanced by the mental health user movements.

5. Conclusions

The second-order empathic stance was proposed by contemporary psychopathologists and philosophers of psychiatry to address the Jaspersian claim that schizophrenic phenomena are not amenable to understanding by empathy. In this sense it is a well motivated proposal. However, as a method for understanding others, a close-analysis of the requirements for achieving second-order empathy revealed that it is an incoherent method and cannot be realised. In addition, the attitude required by the second-order empathic stance is ethically problematic in that it violates the conditions required for achieving symbolic and cultural recognition for persons diagnosed with schizophrenia. On those two points I maintain that the second-order empathic stance must be rejected. But where does that leave us in relation to the motivating problem? That is, what about the claim that schizophrenic phenomena are un-understandable; do we simply accept this claim?

One way to address this question is to see what remains once the transcendental reduction and the method of second-order empathy founded upon it are abandoned, namely, the possibility of a more restricted epoché. This epoché, as argued previously, does not take us outside the world; it requires that we bracket aspects of our experiences while remaining within the natural attitude. Thus conceived, the epoché begins to look a lot like what we are expected to do anyways in order to achieve empathic understanding of others. Achieving (first-order) empathy requires that we take on different perspectives, which requires that we suspend, as appropriate, some of our assumptions. People vary in their beliefs, in how they express emotion, in their prior experiences and attitudes. If I take my perspective for granted, then I may fail to achieve empathy. This, however, is not the same as saying that others are radically different from me, on the contrary. What it does say is that if we are to understand others, we cannot assume that they share our values and beliefs; we must get to know them. But ultimately, once we correct for our prejudices, we achieve empathy with others—if we are able to—through the framework of what is shared.

In the case of persons diagnosed with schizophrenia, the difference is that while we can without much difficulty suspend aspects of our values, beliefs, and prejudices, it is more challenging to suspend our everyday experiences of space, materiality of objects, and our own body. But it is not impossible. By reflecting on our experiences under different conditions and influences, including but not limited to experiences under sleep deprivation, performance anxiety, and psychoactive substances, we can know first-hand that time, space, and body can be experienced in alarmingly different ways. From this we may infer that others may not necessarily experience the world as we do. But the 'world' here is not some mysterious thing that can only be intuited by an absolute consciousness; it is the world of everyday life which we all share and which we can reflect upon. That is, it is the world in which our first-order empathic capacities are rooted. These capacities thus emerge not as the obstacle to achieving empathy—as proponents of second-order empathy would have it—but as the means by which it may be possible. In this sense, the work that needs to be done in order to have a degree of empathic access to schizophrenic phenomena is to interrogate the possibility, challenges and methods by which we can *expand* our ordinary empathic capacities without abandoning the world.

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References

1. Stanghellini, G., and T. Fuchs, eds. 2013. *One century of Karl Jaspers' General Psychopathology*. Oxford: Oxford University Press.
2. Jaspers, K. 1963. *General Psychopathology*. 7th ed. Trans. J. Hoenig and M.W. Hamilton. Manchester: University of Manchester Press.
3. Maher, B.A. 1999. Anomalous experience in everyday life: its significance for psychopathology. *Monist* 82: 547–570.
4. Davies, M., and M. Coltheart. 2000. Introduction : pathologies of belief. In *Pathologies of Belief*, ed. M. Davies and M. Coltheart, 1-46. Oxford: Blackwell Publishers Ltd.
5. Campbell, J. 2001. Rationality, meaning, and the analysis of delusion. *Philosophy, Psychiatry, and Psychology* 8: 89–100.
6. Thornton, T. 2008. Why the idea of framework propositions cannot contribute to an understanding of delusions. *Phenomenology and Cognitive Science* 7: 159-175.
7. Thornton, T. 2007. *Essential philosophy of psychiatry*. Oxford: Oxford University Press.
8. Stanghellini, G. 2004. *Disembodied spirits and deanimated bodies*. Oxford: Oxford University Press.
9. Bolton, D., and J. Hill. 2003. *Mind, meaning and mental disorder: the nature of causal explanation in psychology and psychiatry*. 2nd ed. Oxford: Oxford University Press.
10. Berrios, G. 1991. Delusions as “wrong beliefs”: a conceptual history. *British Journal of Psychiatry* 159(14): 6–13.
11. Heinimaa, H. 2003. Incomprehensibility. In *Nature and narrative: an introduction to the new philosophy of psychiatry*, ed. B. Fulford, K. Morris, J. Sadler, and G. Stanghellini, 217-230. Oxford: Oxford University Press.
12. Husserl, E. 1982. *Ideas pertaining to a pure phenomenology and to a phenomenological philosophy*. Trans. F. Kersten. London: Martinus Nijhoff Publishers.
13. Husserl, E. 1970. *The crisis of European sciences and transcendental phenomenology: an introduction to phenomenological philosophy*. Trans. D. Carr. Evanston: Northwestern University Press.
14. Doerr-Zegers, O., and H. Pelegrina-Cetran. 2013. Karl Jaspers' *General Psychopathology* in the framework of clinical practice. In *One century of Karl Jaspers' General Psychopathology*, ed. G. Stanghellini and T. Fuchs, 57-75. Oxford: Oxford University Press.
15. Sass, L. 2013. Jaspers, phenomenology, and the 'ontological difference'. In *One century of Karl Jaspers' General Psychopathology*, ed. G. Stanghellini and T. Fuchs, 95-106. Oxford: Oxford University Press.
16. Ratcliffe, M. 2013. Delusional atmosphere and the sense of unreality. In *One century of Karl Jaspers' General Psychopathology*, ed. G. Stanghellini and T. Fuchs, 229-244. Oxford: Oxford University Press.
17. Stanghellini, G. 2013. The ethics of incomprehensibility. In *One century of Karl Jaspers' General Psychopathology*, ed. G. Stanghellini and T. Fuchs, 166-181. Oxford: Oxford University Press.
18. Ratcliffe, M. 2012. Phenomenology as a form of empathy. *Inquiry* 55(5): 473-495.
19. Henriksen, M. 2013. On incomprehensibility in schizophrenia. *Phenomenology and the Cognitive Sciences* 12: 105-129.

20. Stanghellini, G. 2013. Philosophical resources for the psychiatric interview. In *The Oxford handbook of philosophy and psychiatry*, ed. K. Fulford, M. Davies, R. Gipps, G. Graham, J. Sadlar, G. Stanghellini, and T. Thornton, 321-356. Oxford: Oxford University Press.
21. McKenna, W. 1982. *Husserl's 'Introductions to Phenomenology': interpretation and critique*. *Phaenomenologica* 89. The Hague: Martinus Nijhoff Publishers.
22. Dodd, J. 2004. *Crisis and reflection: an essay on Husserl's Crisis of European Sciences*. *Phaenomenologica* 174. Dordrecht: Kluwer Academic Publishers.
23. Merleau-Ponty, M. 1962. *Phenomenology of perception*. Trans. C. Smith. London: Routledge.
24. Zaner, R. 1964. *The problem of embodiment: some contributions to a phenomenology of the body*. The Hague: Martinus Nijhoff Publishers.
25. Smith, J. 2005. Merleau-Ponty and the phenomenological reduction. *Inquiry* 48(6): 553-571.
26. Radden, J. 2012. Recognition rights, mental health consumers and reconstructive cultural semantics. *Philosophy, Ethics and Humanities in Medicine* 7(6): 1-8.
27. Fraser, N. 1995. From redistribution to recognition: dilemmas of justice in a 'post-socialist' age. *New Left Law Review* 212: 68-93.
28. Taylor, C. 1994. *Multiculturalism: examining the politics of recognition*. Ed. Amy Gutmann. Princeton: Princeton University Press.
29. Fraser, N., and A. Honneth. 2003. *Redistribution or recognition? a political-philosophical exchange*. London: Verso.
30. Dellar, R., T. Curtis, and E. Leslie. 2003. *Mad pride: a celebration of mad culture*. Truro: Chipmunka Publishing.
31. Corstens, D., S. Escher, and M. Romme. 2009. Accepting and working with voices: The Maastricht approach. In *Psychosis, trauma and dissociation: emerging perspectives on severe psychopathology*, ed. A. Moskowitz, I. Schafer, and M.J. Dorahy. Chichester, UK: John Wiley & Sons.
32. Sass, L. 2003. Self-disturbance in schizophrenia: hyper-reflexivity and diminished self-affection. In *The self in Neuroscience and Psychiatry*, ed. T. Kircher and A. David, 242-271. Cambridge: Cambridge University Press.
33. Spiegelberg, H. 1974. Epoché without reduction: some replies to my critics. *Journal of the British Society for Phenomenology* 5: 256-261.
34. Fink, E. 1995. *Sixth cartesian meditation: the idea of a transcendental theory of method*. Trans. R. Bruzina. Bloomington: Indiana University Press.
35. Luft, S. 2004. Husserl's theory of the phenomenological reduction: between life-world and cartesianism. *Research in Phenomenology* 34: 198-234.
36. Schrader, S., N. Jones, and M. Shattell. 2013. Mad pride: reflections on sociopolitical identity and mental diversity in the context of culturally competent psychiatric care. *Issues in Mental Health Nursing* 34: 62-64.