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„The Phenomenology and Linguistics of Schizophrenia:  
A Battle of Selves“

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## TABLE OF CONTENTS

|                                                                                                |           |
|------------------------------------------------------------------------------------------------|-----------|
| <b>INTRODUCTION.....</b>                                                                       | <b>4</b>  |
| <b>CHAPTER I: THE LINGUISTIC DIMENSIONS OF SCHIZOPHRENIA.....</b>                              | <b>6</b>  |
| PART I. UN-CARTESIAN LINGUISTICS: OVERCOMING THE LANGUAGE-THOUGHT DICHOTOMY.....               | 6         |
| I.1 The History of language.....                                                               | 6         |
| I.2 A human-specific cognitive type based on grammar.....                                      | 8         |
| I.3 The cognitive function of grammar: Grammaticalization of human reference.....              | 11        |
| I.4 Language as triangulation: The deictic frame between speech and thought.....               | 14        |
| I.5 Proto-grammatical structures in infant reference.....                                      | 16        |
| I.6 On the relationship between the grammatical 1st Person and the self.....                   | 19        |
| PART II. A NEW LINGUISTIC LENS ON THOUGHT DISORDERS: THE CASE OF SCHIZOPHRENIA.....            | 21        |
| II.1 The linguistic profiles of the core positive symptoms in schizophrenia.....               | 22        |
| II.1.1 Formal thought disorder.....                                                            | 23        |
| II.1.2 Auditory verbal hallucinations.....                                                     | 26        |
| II.1.3 Delusions.....                                                                          | 28        |
| II.2 Implications for therapy.....                                                             | 30        |
| <b>CHAPTER II: PHENOMENOLOGICAL PSYCHOPATHOLOGY AND THE MINIMAL SELF IN SCHIZOPHRENIA.....</b> | <b>32</b> |
| I. Different concepts of self.....                                                             | 32        |
| II. A phenomenological account of self.....                                                    | 36        |
| III. Phenomenological psychopathology: Schizophrenia as a disturbance of ipseity.....          | 42        |
| III.1 The phenomenological architecture of AVHs in schizophrenia.....                          | 44        |
| III.2 Delusions 2.0.....                                                                       | 49        |
| III. 3 Linguistic experiences.....                                                             | 53        |

## CHAPTER III: THE SENSE OF SELF AT BIRTH AND THROUGHOUT

### INFANCY – INSIGHTS FROM DEVELOPMENTAL PSYCHOLOGY.....60

|                                                                                    |    |
|------------------------------------------------------------------------------------|----|
| I. Hinzen's account of self revisited.....                                         | 60 |
| II. The infant's subjective experience and its importance for psychopathology..... | 64 |
| III. From infancy to adulthood: Stern's four senses of self.....                   | 66 |
| III.1 The sense of an <i>emergent self</i> .....                                   | 69 |
| III.1.1 Amodal perception.....                                                     | 71 |
| III.1.2 Vitality affects.....                                                      | 72 |
| III.2 The sense of a <i>core self</i> .....                                        | 73 |
| III.2.1 Self versus Other.....                                                     | 74 |
| III.2.2 Self with Other: The self-regulating other and evoked companionship.....   | 77 |
| III.3 The sense of a <i>subjective self</i> .....                                  | 79 |
| III.4 The sense of a <i>verbal self</i> .....                                      | 83 |
| III.4.1 Language and new ways of "Being-with".....                                 | 85 |
| III.4.2 Language: A double-edged sword.....                                        | 87 |

### CHAPTER IV: A BATTLE OF SELVES?.....91

|                                                                                       |     |
|---------------------------------------------------------------------------------------|-----|
| I. Critical clinical implications of the senses of self.....                          | 92  |
| I.1 Clinical aspects of the emergent sense of self.....                               | 92  |
| I.2 The sense of core self and psychosis.....                                         | 93  |
| I.3 Clinical implications of the intersubjective domain.....                          | 96  |
| I.4 The false self.....                                                               | 100 |
| II. Discussion: A proposed model of the relationships between the levels of self..... | 103 |
| II.1 A glimpse at animal models of schizophrenia.....                                 | 109 |
| II.2 The poetic use of language.....                                                  | 111 |
| III. Concluding remarks.....                                                          | 116 |

### References.....119

### Abstract.....128

## INTRODUCTION

In phenomenological psychopathology, schizophrenia is described as a disruption of *ipseity*, a primitive form of self-awareness which constitutes our primary presence in the world. Also referred to as the minimal self, it is not a linguistically mediated representation of oneself, but a pre-reflexive, implicit, non-conceptual sense of existing as a subject of awareness (Stanghellini 2009, 56). Though language is not excluded from the overall picture of schizophrenia, it is generally understood to be an effect or consequence of a disturbance of minimal self, rather than a cause of the disorder. This view has been the focus of criticism in the more recent works of linguist Wolfram Hinzen, who inaugurated the “Un-Cartesian hypothesis”. According to this hypothesis, thinking cannot happen independently of language, and grammar more specifically, and a concept of self cannot exist without thought, and as such with the capacity for language comes a specifically human type of cognition and a unique form of self, which I will refer to as the *linguistic self*. In contrast to the traditional view of schizophrenia as a thought disorder and the phenomenological claim that it constitutes a disturbance of minimal self, Hinzen maintains that, given the constitutive link between language, thought, and a concept of self, that language is fundamentally involved in schizophrenia. It is thus criticised that “a purely phenomenological account of self-disturbance, which were to see human experience as taking place in a completely prelinguistic experiential space, with language as only a secondary method of “translating” its contents for others, would be naïve,” and argue that the self-disturbance witnessed in schizophrenia is the result of a language pathology (Hinzen and Rosselló 2015, 8). Whereas phenomenologists regard the linguistic self as secondary to our primordial sense of self mediated by the lived body, language is here conceived as something over and above the minimal self. The result: a gaping abyss between the prelinguistic and linguistic self, which leaves it unsolved whether language is constitutive for the “I” affected in schizophrenia, and thus how to understand its pathogenesis in general. This could furthermore have repercussions on diagnosis and treatment methods.

The aim of this master’s thesis is an interdisciplinary comparison between linguistic and phenomenological dimensions of the self in schizophrenia to clarify the role language plays in this disorder: Is the self-disturbance in schizophrenia more fundamental than described by recent linguistic research? Or is it essentially and primarily a linguistic disorder?

To find answers to these questions, a critical assessment of their respective arguments will be necessary in order to approach the relationship between self, language, and schizophrenia.

This will eventually tell us whether the foundations of phenomenological research need to be revised, or whether linguistics continues to overestimate the role of language.

More concretely, I will proceed in four main steps divided into four chapters, of which I will now provide a summary. First, I will present in detail Hinzen's Un-Cartesian hypothesis, i.e. how it establishes a constitutive link between language, thought and self, and its implications for our understanding of the positive symptoms in schizophrenia, namely hallucinations, delusions and disorganised speech. Two aspects will be of particular relevance for the chapter to follow: (1) Hinzen's focus on the content of experiences, and (2) his understanding of self as a reflective construction or achievement.

In the following chapter, I will then provide an overview of the phenomenological literature on minimal self as a pre-reflective sense of self, which emphasises the subjectivity of experiences, rather than its content, followed by an overview of different theories on schizophrenia and its symptoms in the field of phenomenological psychopathology. Against this background, a first comparison between the linguistic and the phenomenological position will show that Hinzen's reliance on (1) ignores fundamental dimensions of experience involved in schizophrenia, and as such his framework is insufficient to account for the multifaceted and complex nature of schizophrenic symptoms. This will ultimately leave unexplained many characteristic aspects of the latter.

The third chapter then starts with a further development of (2) in order to get at a more complete picture of the linguistic self and how it relates to the minimal self. Given that the notion of self is subordinated to thought and language, Hinzen's account on self is very scarce. Mainly drawing on his criticism of the minimal self, a reconstruction of his understanding of the linguistic self and how it relates to the minimal self will suggest that the latter becomes linguistically structured with the emergence of language. Yet, insights from infancy research in developmental psychology, specifically from Daniel Stern's account, will show that this is not the case, thus supporting the existence of a minimal self that is preserved throughout life. However, despite the many commonalities between the phenomenological position and developmental psychology, Stern's account ultimately diverges considerably from the former in that it is implicitly suggested that the disturbance of minimal self requires more than just the latter, notably also the linguistic self. The concrete relationships or interactions between the minimal and the linguistic self now come to the fore. A discussion of this apparent problematic and future directions for phenomenological research will be the focus of the fourth and final chapter.

## CHAPTER I

### THE LINGUISTIC DIMENSIONS OF SCHIZOPHRENIA

#### Part I. Un-Cartesian linguistics: Overcoming the language-thought dichotomy

##### I.1 The History of language

The question about the nature of language, set as the human method of communication consisting of the use of words in a structured and conventional way<sup>1</sup>, is as old as philosophy itself and has haunted many great minds ever since. Every culture has undertaken its own studies on this so familiar, but yet so hard to grasp phenomenon, some dating back more than two millennia. In the Western tradition, inquiries into the nature of language have their roots in ancient philosophy and can be traced back to the Pre-Socratic writings of Heraclitus, Parmenides, Empedocles, Anaxagoras, and the atomists Leucippus and Democritus, who focused much on the related questions of the naturality or conventionality of names and to which extend language is a truthful representation of the world. Early analyses of language can also be found in the writings of the earliest poets, Homer and Hesiod, who reasoned about the significance and etymology of proper names (Kraus 1996, 18). The arbitrariness of language, as well as the relationship and the adequateness between language and world to whose objects we attribute different names, i.e. the epistemological status of language, continued to be the central topic of interest also in the philosophy of Plato, notably in his work *Cratylus*, where the main question discussed is whether the attribution of names by a so-called legislator was done in an arbitrary fashion or whether he had to orient himself toward a naturally given rightness (“*naturgegebene Richtigkeit*”) (Kraus 1996, 20). In light of his theory of Ideas, Plato was rather sceptical about the possible epistemological achievement of language, a scepticism that one can also find already in the Pre-Socratic period. Aristotle in contrast, did not share Plato’s theory, nor did he share his scepticism on the epistemological power of language and maintained that language represents the world just as it is (again, this interpretation is much influenced by his own theory about the *ideas* residing in the objects themselves). Both Plato and Aristotle had a great impact on the subsequent understanding of language in the Middle Ages and the problem of universals, where the fundamental controversy over the natural or conventional truthfulness of language continued to prevail. Even in the modern era, where the focus was largely on the cognising subject (Descartes’

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<sup>1</sup> A common definition of language can be found in: <https://en.oxforddictionaries.com/definition/language> (last accessed 2018-10-24).

famous *Cogito ergo sum*), this controversy continued to occupy the minds of philosophers like empiricist John Locke and rationalist Gottfried Leibniz, the former arguing that language is only an instrument allowing subjects to name single empirical impressions and communicate them, whereas the latter argued for a common universal structure between language and world. Later on, Immanuel Kant took the stage with his grande oeuvre *Critique of Pure Reason*, contributing to a large degree to the current philosophical reflections on the epistemological capacities and structures residing within the subject which he understands as determining both our empirical and intellectual confrontation with the world – however, he did so mostly without referring to language (Bertram 2011, 23). Critiques of this obvious rejection of a major role played by language in our relation to the world have led to the formation of a different perspective in the 19th century, one whose famous proponents are no less than the German philosophers Johann Gottfried Herder and Wilhelm von Humboldt, who argue that language is constitutive for cognition and our access to the world. Hence, apart from the epistemological perspective, language moves more and more into a focus of being constitutive for human nature as such. These thoughts are, as we will see throughout this chapter, also reflected in similar ways in the cognitive theory of language provided by linguist Wolfram Hinzen.

However, it was only in the twentieth century with the so-called *linguistic turn* that a philosophy of language as a separate philosophical discipline emerged (Bertram 2011, 24). The linguistic turn reflects the philosophical endeavour to understand language as the basis of all human cognitive activity, but it also involves a more methodological concern: given that philosophy itself only happens through language, the question arises as to which extent a reflection on language allows for self-criticism (Bertram 2011, 25). Though quite different theories of language appeared under the linguistic turn, such as analytic (e.g. Frege, Wittgenstein, Austin), hermeneutic/phenomenological (e.g. Heidegger, Gadamer) and structural (e.g. de Saussure) theories of language, it is the shared belief that language must constitute the centre of philosophical inquiry that led to the linguistic turn in the first place (Bertram 2011, 25). However, the second half of the twentieth century is marked again by an opposite orientation, leading to the emergence of different turns, such as the *iconic*, *performative*, or *cognitive* turn, in which language again loses its priority and slowly, but surely recedes into the background of philosophical inquiry (Bertram 2011, 26f.)

Naturally, a lot remains to be said about the history of philosophy of language, but this would go beyond the scope of the present thesis. Nonetheless, it makes evident a continued tension amongst philosophers regarding the nature of language, which divides the debate roughly into

two main camps: those that instrumentalise language and deny it any constitutive role in epistemology, and those that claim the opposite, namely that language is constitutive of our thinking, being and relating to the world. Of course, nuances exist and not every philosopher can be said to fit into this kind of pigeonhole thinking. However, it cannot be denied that, ever since people have been reflecting on the nature of language, these two poles have heavily marked the debate – a debate that continues to be very controversial.

## I.2 A human-specific cognitive type based on grammar

Having its roots in the philosophy of language, this general tension is also reflected in the study of linguistics – the scientific discipline uniquely dedicated to theoretical studies of language – which emerged only in the nineteenth century. And while today linguistics comprises a multitude of different research areas, expanding from theoretical and descriptive to applied and experimental linguistics, the science of language, like science in general, and parallel to the general tendency of the mid-twentieth century in philosophy of language, linguist Wolfram Hinzen diagnoses that it has not been spared from a Cartesian spell that fundamentally distorts our understanding of what language is. According to Hinzen, a dichotomy between language and thought is prevalent in linguistics and constitutes the basis of many linguistic research and theories, referred to as “Cartesian linguistics” or the “Cartesian framework of language and thought” (Hinzen 2017, 2014, 2013). Reminiscent of Descartes’ famous body-mind dualism, in which the mind is claimed to have an independent existence from the body, the term “Cartesian” reflects the linguistic assumption of an independent existence of thought from language, thus reducing the role of language to a tool for communication and an epiphenomenon of thought – a claim that has also been endorsed by many philosophers. As such, “Cartesian” is every view that sees language as not inherently involved in thought processes themselves, including those views that maintain that language can, in addition to its communicative function, enhance thought, and those claiming that thought is coded in a specific *language of thought* structuring human and animal mind alike (Hinzen 2017, 171).

Against this, Hinzen posits an “Un-Cartesian” linguistic framework (Hinzen 2017, 2014, 2013), in which the claimed cognitive function of grammar is meant to show, in the style of a Copernican revolution, that language is not merely an expressive tool for thought, but is inherent to thought processes themselves, ultimately yielding propositional and rational thought only present in humans. Thus language is not secondary to already existing thoughts but matures both in development and evolution along thought (Hinzen 2017, 174).

[S]ince no one would want to identify language with a system of pronunciation, and it is clear that language is (almost continuously in our waking lives) used internally for purposes of thought as well, in addition to being used for communication, it is a natural suggestion that the cognitive mechanism generating human-specific thought and those generating language should be the same. That they are is the Un-Cartesian thesis, and Un-Cartesian linguistics is the research program seeking to determine to what extent it holds. (Hinzen 2014, 227)

Note the emphasis on a “sapiens-specific” thought process, by which Hinzen cleverly bypasses the debate on animal thought, as he does not in principle deny the existence of non-linguistic forms of thought, but “only” that this is the form human beings think in, which he takes to be essentially propositional and rational. Hence, the suggestion is that with the capacity for language comes a distinct cognitive type that differentiates human beings from non-linguistic beings, i.e. animals.

Much of the flourishing field of animal cognition is based on a broad consensus that having a mind and thinking does not depend on having language. Does the [...] “lingualist” conception of thought conflict with this insight? The answer, hopefully, is no, and the reason is this: thought is not the same across species; in order to exist, it doesn’t need to obey the same systemic format. All that the above hypothesis predicts is that thought not driven by a grammatical system will be of a different kind. (Hinzen 2013, 16)

In contrast, Cartesian linguistics would maintain that an animal that lacks language could still have the same mind and the same thoughts as a human being does because the thought system exists independently of the capacity for language and remains unaffected by it.

Hinzen (2017, 173-4) illustrates the absurdity of such a claim on the example of an ape, who, while not possessing the capacity for language, could in principle still think like us. Thus, its predicament would be similar to that of locked-in patients, who are unable to operate speech or sign due to brainstem lesions (i.e. non-vocal), but still have minds like ours, as eye-controlled, computer-based communication technology shows (Hinzen 2017, 173). However, there is a crucial difference between the ape and the locked-in patients, namely that the latter,

while not being able to externalise their thoughts through speech, are not language-less (i.e. non-verbal), and thus their minds continue to be structured through language, unlike the mind of the ape. It is this crucial difference that, according to Hinzen, justifies the claim that locked-in patients, but not apes, have minds like ours.

Further support comes from comparing the mind of an ape to a human mind that is both non-vocal and nonverbal, namely that of children from the low-functioning end of autism-spectrum. Around twenty-five per cent of children affected by this disorder fail to develop language in either production or comprehension in any modality, in the absence of any physical impairment preventing language learning or articulation (Hinzen 2017, 174). In contrast to locked-in patients, they do not have a verbal mind, i.e. they do not have a mind like ours. Now, still supposing that the mind of the ape is just like the human mind, it follows that the ape's mind too must be different from that of autistic children (although both are considered to be non-vocal and nonverbal). But how could the Cartesians explain this difference? If the ape's mind is supposed to be the same as the human mind, and the reason for the difference between the "normal" human mind and the mentioned case of autistic minds lies in the presence or absence of language, then what other reason could there be for the Cartesians to name except for exactly that same one? To prevent their downfall, they would have to come up with an explanation that did not rely on language, since the independence of the mind from the latter is at the heart of the Cartesian argument. For Hinzen, there is no such reason to be found. And if they were to concede that the difference lies in language, which would be a contradiction, this would entail that the ape would be, just like the locked-in patient, certainly speechless, but not language-less. However, as we have seen above, Hinzen maintains that unlike the ape's mind, the locked-in patient's mind is constituted of verbal thoughts, and it is clear that apes do not/ cannot acquire language nor use it as humans do. Thus language does make a difference – a difference that has cognitive effects. "In other words, where speech or sign are present, this is not merely contingently so (i.e., a fortunate accident), but speech/sign is foundationally significant for cognition" (Hinzen 2017, 174).

But how exactly is language supposed to organise thought and distinguish it from its non-linguistic forms? That it is, should be clear by now, but just why and how this is the case remains to be clarified. As we will see in the following section, the answer lies in two core functions of language which are claimed to be based on grammar, namely *reference* and the *propositional meaning* resulting from it (Zimmerer et al. 2017, 1-2).

## I.2 The cognitive function of grammar: Grammaticalization of human reference

Thoughts are inherently intentional – they are always about something, they always refer to something, and are thus referential by nature. But as we came to see earlier, thought is not the same across species, and so isn't reference. While animals can exhibit different forms of functional reference (as opposed to *intentional* reference), e.g. alarm calls, they differ crucially from human reference in that they a) do not involve meaning in the sense of a predicative concept providing generalisable information about the referent in an instant of a kind and b) do not involve lexicalised concepts that could be retrieved and recombined through grammar, independently of stereotyped stimulus contexts causally triggering their use (Hinzen 2017, 189).

The referential capacity of linguistic beings is thus essentially constituted of two ingredients: concepts, that are identified by a lexeme (i.e. a word that constitutes a minimal meaningful unit, hence lexicalised concepts), and grammar relating those words in different types of referential expressions or “formal ontologies of reference” (Hinzen 2014, 235). The latter ranges from simple object reference, to events and finally propositions, which constitute the basis of human rationality.

While the concepts provided by our language capacity are essential for reference, the pivot of the Un-Cartesian hypothesis is grammar, because a) without it no specifically human act of reference can be successful as concepts themselves are referentially inert and b) depending on how grammar relates the words, reference changes and with it the meaning of the thought expressed. Thus, reference in humans is grammaticalized: “The core cognitive function of grammar is to turn lexicalized concepts, which as such do not refer (but are categories of perceptual experience encoding general concepts encoding semantic memory), into referential expressions (of different types, [e.g. objects, events, or propositions]) on an occasion of language use” (Hinzen 2017, 179, my addition).

Think for instance of the concept DOG: taken as such it does not refer to any particular dog, but only captures a general lexical concept which contains no information whatsoever about which dog we are referring to.<sup>2</sup> Moreover, concepts cannot explain the referential differences

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<sup>2</sup>While Hinzen does not explicitly deny the existence of “non-linguistic concepts”, i.e. concepts that exist independently of language, he certainly isn't enchanted by the idea of attributing conceptual thought to non-linguistic animals and prelinguistic infants. Concepts, according to Hinzen, do not and cannot exist independently of language:

we see in the example<sup>3</sup> below, in which the same lexical concept (namely DOG) is used to refer in different grammatical ways, with different grammatical and propositional meanings:

- a. I had (some) **dog**.
- b. I like **dogs**.
- c. I want to be **a dog**.
- d. I saw (some) **dogs**.
- e. I once had **a dog**.
- f. I saw **the dog** (again).
- g. I like **this dog**.
- h. I like **him** (i.e. the dog)

What enables reference in the first place and the differences in how one refers to the concept DOG is determined by the creation of a grammatical edge, i.e. which Hinzen refers to as material without substantive lexical content which is added to the lexical concept in order to function referentially in a way that the latter by itself, i.e. as a mere lexeme or general concept or category, cannot (Hinzen 2017, 189). While reference certainly depends on the lexicalised concept DOG, as we wouldn't know what is meant by the edge without at least implicit reference to a lexeme (e.g. "I like *him*"), it falls on the grammatical side and is technically a grammatical concept that cannot be located in any non-linguistic conceptual-intentional system (Hinzen 2017, 189).

Moreover, the differences in reference in the noun phrases a) - h) are hierarchical with an increase of referential strength as it becomes less dependent on the lexical concept, thus less lexical or descriptive, and increasingly more grammatically complex in nature. The grammatical complexity of reference is thus hierarchically structured and regulated by the nature of the grammatical edge ranging from being necessarily lexically zero, as in a) where the edge is empty, i.e. allowing only for one interpretation, namely that I had some dog-meat, to a referentially weak, indefinite determiner exemplified in b) - e), to one with an obligatory strong and definite determiner like "the" in f), to one with a deictic determiner or pronoun

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"Concepts of some kind can be found in infants that do not yet articulate language, and in non-human species. Yet it is clear and widely accepted that the 'concepts' available to non-linguistic and prelinguistic beings are not the same. The question therefore again arises whether speaking of concepts in a narrowly human sense, on the one hand, and of words, on the other, really makes an empirical distinction. For every concept that we know or have, there is a word that identifies this concept, and that is identified by it. If there was no word or phrase to identify it, how would we know a concept existed and what that concept was?" (Hinzen 2014, 231).

<sup>3</sup> See example in Hinzen, W. (2017). Reference across pathologies: a new linguistic lens on disorders of thought. Target article with peer commentary, in *Theoretical Linguistics* 43 (3-4),190.

that can occur without the lexical restriction as in g), to finally a deictic pronoun that must occur without such a restriction (Hinzen 2017, 190). Reference is thus strongest where the edge is definite and *deictic*, a synonym for *indexical* (“I like *him*”), for the reason that what or who is referred to in the deictic act of reference depends entirely on the context in which it is used. However, while grammatical complexity changes, grammar does not change anything to the conceptual content of DOG, rather it changes their *grammatical meaning* or else their *formal ontology of reference*, i.e. “whether DOG comes out as a *mass*, a set of non-specific individual *instances* of a kind, one *particular* individual, a *part* of an individual, etc.” (Hinzen 2014, 239).

Moreover, while such referential distinctions cannot be encoded by the words themselves, they can also not be determined by the external world, as we can refer to the same perceptual input in different ways, e.g. “Mary smiles” vs. “Mary’s smile” (Hinzen 2017, 2013). Whereas the sentence “Mary smiles” refers to the event of Mary smiling, the sentence “Mary’s smile” has a different meaning and the thought expressed through it has a different formal ontology, as reference is to an object and not an event. This difference in meaning and hence in reference cannot lie either in the words making up the sentences, as both sentences are constituted of the same words, i.e. “Mary” and “smile”, nor in the perceptual stimulus, because what is perceived by the eye is the same thing in both situations, i.e. a woman that is smiling. Instead, the difference in meaning is again mediated by how grammar organises these words in sentences.

Finally then, this gives us a deeper insight into what Hinzen’s Cartesian framework understands grammar to be: grammar is not about words, and the meanings it creates cannot be reconstructed from the content or feature specifications of words either, rather it constitutes an independent structuring principle of such content with cognitive effects (Hinzen 2014, 230). Thus, when Hinzen talks about grammar, he primarily refers to syntax, which is taken to constitute “the formal language of semantics” (Hinzen 2013, 12). This is what we referred to earlier as the cognitive function of grammar, which allows human concepts to combine productively and yields, rather than expresses, a form of meaning that is unavailable lexically and non-linguistically (Hinzen 2017, 182; 2014, 228).<sup>4</sup> As grammatical complexity builds up, a formal ontology of reference falls into place which ultimately ends in

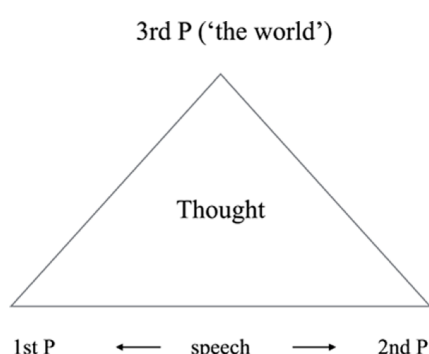
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<sup>4</sup> However, this does not preclude the existence of meaning at a non-linguistic or prelinguistic level, which is exemplified for instance by perceptual categories, which are not specific to humans (Hinzen 2017, 182). Hinzen repeatedly insists that the Un-Cartesian hypothesis is not about depriving non-linguistic beings from having a mind or cognition, but to make plausible how grammar is constitutive for a specifically human form of cognition based on the kind of unique referential and propositional content it provides.

propositions, whose purpose is the establishment of facts about the world (Hinzen 2014, 241). As such, they necessarily include a notion of truth which can only be established grammatically. Indeed, Hinzen (2014, 239-241) claims that “truth is [...] the maximally *extensional* form of reference that is possible in grammar” and that “everything in grammar sub-serves this goal of reaching the truth value (the establishment of facts that, once asserted, can be de-indexicalized and re-enter semantic memory as truths about the world)”. Under the Wittgensteinian assumption that the world is nothing else than a totality of facts and that facts, as a particular formal ontology of reference, can only arise with grammar, Hinzen claims that it is grammar, and language more generally, that gives us a sense of what there is, i.e. a sense of reality (Hinzen 2014, 235).<sup>5</sup> And, as we will see, it is this sense of reality mediated through language that Hinzen sees at the heart of psychosis.

#### I.4 Language as triangulation: The deictic frame between speech and thought

Human reference has yet another crucial characteristic: it is *triangular*, i.e. with the grammatical 1st, 2nd and 3rd Persons labelling the corners of the triangle (Hinzen 2014, 245; see figure 1 below, from Hinzen and Rosselló 2015, 3).



**Figure 1.** The deictic frame between speech and thought

The idea behind this triangulation is rather simple: in all acts of reference, a grammatical first Person, i.e. the speaker (me), refers for a 2nd Person (the listener, you) to an object or event, i.e. the grammatical 3rd Person or Non-Person (if what is referred to is not actually a person), thus expressing a thought (Hinzen 2014, 245). Hence, grammar is inherently integrated with speech not only because of the kind of propositional content inherent to every utterance we make but because propositions need to be embedded in this deictic frame as a requirement for the well-formedness of sentences – sentences that ultimately express our thoughts. However,

<sup>5</sup> This understanding of reality as a totality of facts is at the heart of phenomenological criticism, as it neglects the subject as a fundamental part of the process of reality constitution.

“without fixating [...] Person, no thought content can be fully determined either. Thought content, too, therefore, depends on speech, which is not an accidental and fortuitous extra appended to an otherwise already functional thought system” (Hinzen 2017, 186). This is what Hinzen refers to as the deictic frame between speech and thought. Whereas the Cartesians might well acknowledge that the communication of thoughts is mediated by speech, which itself requires grammar for its content to be well-formed and adequately express what we think, they would still deny that grammar is an inherent part of thought processes themselves. However, similar to what we have seen in the previous sections, the Un-Cartesian claim is that speech (as the primary manifestation of language) is more than merely a tool for externalising our thoughts. To say it in the words of Merleau-Ponty (1945/2002, 207, 211), speech is not merely the envelope or clothing of thought, rather it accomplishes thought.<sup>6</sup> And because speech cannot be separated from thought, since it is (almost continuously in our waking lives) used for purposes of thought as well, in addition to being used as a tool for communication, it is the Un-Cartesian thesis that the cognitive mechanism generating human-specific thought and those generating language are the same (Hinzen 2014, 227). Just what those cognitive mechanisms are or could be is the hot topic of neurolinguistics (e.g. Crow 2000, for an evolutionary account of the origin of language and thought).

To summarise the argument presented thus far: reference in both thought and speech is grammatically structured and involves Person distinction, i.e. a difference between who is the one who thinks/speaks, who is the addressee, and what is the content of thought/speech, which can only be mediated by the grammatical 1st, 2nd and 3rd Person. Hinzen refers to this triangulation of language also as “deictic anchoring” designating an inherent part of the process by which we make references to aspects of the world, including entities, events, locations, time, and most importantly a sense of who is the speaker and who is the addressee (Zimmerer et al. 2017, 2). Hence, Person distinction crucially involves a fundamental sense of self, and in part 2 of this chapter, we will see how a disturbance in the deictic frame comprising one or several corners of this triangulate relationship creates an imbalance in

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<sup>6</sup> “If speech presupposed thought, if talking were primarily a matter of meeting the object through a cognitive intention or through a representation, we could not understand why thought tends towards expression as towards its completion, why the most familiar thing appears indeterminate as long as we have not recalled its name, why the thinking subject himself is in a kind of ignorance of his thoughts so long as he has not formulated them for himself, or even spoken and written them, as is shown by the example of so many writers who begin a book without knowing exactly what they are going to put into it.” (Merleau-Ponty 1945/2002, PoP, 206).

normal language functioning, leading to disruptions of thought processes and the sense of self.

Meanwhile, before concluding the first part, we need to have a closer look at the case of prelinguistic infants, that have not yet acquired language or use verbal communication, to fully grasp the scope of the Un-Cartesian hypothesis.

### I.5 Proto-grammatical structures in infant reference

According to Hinzen, the human-specific process of deictic anchoring is visibly manifested already in infants at the age of around ten months through declarative pointing as a communicative act of reference, in which the infant (1st Person) points to an object (e.g. 3rd Person, Non-Person) accompanied by an exchange of eye gaze with a 2nd Person in order to draw her attention to the object (Hinzen 2017, 186). Moreover, it is claimed that these gestural communicative acts, often understood as non-verbal or pre-verbal, are actually not so, due to the co-presence of words in declarative gestures, if only in the form of incomprehensive babbling taken to symbolise the acquisition of the child's first words. According to Hinzen (2017, 187), this co-presence of first words indicates that what the infant is pointing to is identified as being of a particular kind, i.e. as falling under a specific description or general concept as captured by the word uttered, and hence the presence of lexicalised concepts, which are combined with the declarative gestures.

In section I.3 we have seen that human reference is essentially grammatical, which meant that apart from lexicalised concepts, we need grammar to combine them, a requirement not yet in place in infants. But because reference in infants takes already a shape quite similar to that of “grammaticalised” human beings, in that it possesses the characteristic Person distinction, Hinzen claims that the verbally reinforced gestures are early manifestations of the grammatical nature of human reference, which he refers to as “*proto-grammatical configurations*” (Hinzen 2017, 188, my emphasis). As such, reference as first manifested in declarative pointing in infants is correlated with grammar and differs from animal reference. Evidence for this comes from our closest relative, the chimpanzee, who, while being able to understand gaze and head movements, following an experimenter's line of sight, does not understand nor uses declarative pointing in the same way as infants spontaneously do (Hinzen 2017, 189; Tomasello 2008).

However, a problem emerges when Hinzen claims that the earliest manifestations of this language-specific form of reference can be seen long before infants produce referential gestures, for instance in the fact that attention in newborns is preferentially tuned to language, e.g. they prefer listening to speech rather than non-speech analogues (Vouloumanos and

Werker 2007), and very early exhibit referential expectations for speech but not backwards speech (Marno et al. 2015), ”ensuring that from the beginning language is there to structure the infant’s learning and social interaction, drawing its attention to the communicator long before its visual capacities mature” (Hinzen 2017, 188). Thus the claim is that “a deictic space involving a baseline of language connecting two persons and a referential content is being set up from the day humans are born” (Hinzen 2017, 188).<sup>7</sup> What seems to be suggested here is that humans do not just become linguistic creatures at a certain point, but are linguistic throughout. In other words, they do not just start to be linguistic when they are full-fledged language speakers, nor when they acquire their first words, not even when they produce incomprehensible babbles, but they are so *from the very beginning*. And according to Hinzen, this is to be taken quite literally, meaning that he is not referring to the beginning as the moment of birth, but already before that, claiming that the process of language development starts already with auditory learning in the uterus (Hinzen 2017, 188). Although nowhere stated explicitly, it is at least insinuated here that the notion of “prelinguistic” infants makes as less sense as the aforementioned notion of “non-conceptual” thought. As far as “linguistic” entails at least the existence of a deictic space enabling a form of reference unique to human beings based on grammar – a space that is thought to be already set up when we are born – the infant’s world would be linguistically shaped throughout, even if only in a very primitive way. Then, with language developing and grammar becoming more elaborate, the transition from the aforementioned proto-grammatical configurations to fully grammatical ones is slowly but surely prepared. The difference then between infants and all of us that have fully acquired the capacity of language, is not a pre-linguistic/linguistic distinction, but rather a proto-grammatical (not *pre*-grammatical)/grammatical distinction, i.e. a matter of the level of grammatical development. But, while, by the age of ten months, this deictic space is being expressed through proto-grammatical configurations, nothing is said about how that space is expressed in the period before those ten months are reached. Again, all we know is, that if the kind of reference Hinzen takes to be human-specific precisely because it is grammatical in nature, and this language-specific form of reference can be seen long before infants produce referential gestures, i.e. long before the mentioned manifestation of proto-grammatical configurations, then language and, consequently, some kind of grammatical structures must also be already in play from the beginning, otherwise it would just not be human-specific and thus not, in its primitive form, depend on language. However, no evidence is given to

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<sup>7</sup> Both the phenomenological position and insights from infancy research in developmental psychology presented in chapter 2 and 3 suggest otherwise.

underpin this claim. Consequently, we are faced with a confusion of how to understand the case of prelinguistic infants if infants are taken to be linguistic from the beginning anyway. For, what else could they be, if the language-specific form of reference is already in place from the day of birth (and even before that)?

Apart from this confusion, there is a contradiction regarding Hinzen's general separation between the group of those that have already acquired language, and those that have not yet or cannot acquire it – the group that traditionally includes, and which also Hinzen takes to comprise, prelinguistic infants and non-linguistic animals – and his attempt to shift infants to the linguistic group. Besides this constituting a rather strange move, for which he does not provide valid evidence, there is only one paper in which Hinzen does make such a move (namely in Hinzen 2017), though a quite recent one.

The latter also undermines the difference between infants and full-fledged language speakers, which has motivated the designation of infants as prelinguistic in the first place, as they classically differ from animals in their potential to develop language, yet also considerably differ from those that have already acquired it. While we might even acknowledge that language development has its beginning in the early days or months of infancy, this does not imply that language is the only, not to say the predominant form of interacting with the world available to the child (see the following chapters). I agree with Hinzen that we are surrounded by language from the very beginning, starting already in the uterus, being embedded in a community that predominantly uses language as a medium of communication. But this is something that also applies to many cats and dogs.<sup>8</sup> Additionally, the way this language is perceived by infants bears, in my opinion, a much greater resemblance to non-linguistic animals than to full-fledged language speakers, being less about the words uttered, but the bodily aspects of the language, e.g. the tone in which they are used, and the facial expression and the bodily posture they are accompanied by. This is also why prelinguistic infants are often taken to belong to the group of non-linguistic animals, differing from the latter only in their potential to develop language, a classification that also Hinzen takes over in his account, indeed even in his most recent paper from 2017. Yet it is also in the latter, that he suddenly becomes boisterous and claims something he has not done previously, namely that the human-specific form of reference mediated by grammar is in place right from birth on. However, we have seen that this claim is not only confusing and inconsistent, but

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<sup>8</sup> Most of us talk to our dogs and cats, and when we do not, they are still constantly surrounded by an environment of people that communicate predominantly through language. This equally applies to unborn puppies.

counterintuitive as well. Moreover, as we will see again in the second and third chapter, his thoughts are generally much more consistent with a view that does not understand infants as linguistic throughout, and thus upholds a difference between those that are already full-fledged language speakers and those that have not yet developed (i.e. prelinguistic infants) or cannot develop language (i.e. non-linguistic animals). It is also for this reason, in addition to the fact that it is counterintuitive, that in what follows, we will not further pursue this line of thought. However, one might ask what motivated him to such counterintuitive claims in the first place. Without wanting to anticipate too much of the following chapters, I have the strong suspicion that his most recent attempt to localise language at the earliest stages of human existence was born out of a pressure to be able to compete with phenomenological accounts of a prelinguistic minimal self, much of whose support comes from infancy research in developmental psychology. In other words, it could also be understood as an attempt to counter their argument by exposing that the minimal self is already linguistically structured. However, apart from the fact that such a move is counterintuitive and constitutes a contradiction in his account, we will go in chapters 2 and 3 into the many reasons why the minimal self is not linguistic.

## I.6 On the relationship between the grammatical 1st Person and the self

In section I.4 we briefly came across a notion of self involved in the deictic frame of speech and thought, in the form of 1st Person reference, i.e. reference to oneself as the one who is making an utterance. It follows that every speech content is subordinated to a self as identified in the 1st Person, and all our utterances are embedded in at least an implicit “*I think/say to you that*” structure (Hinzen 2017, 185). However, specifically against the phenomenological account on the nature of the self, which argues for a self that is independent and prior to language, the Un-Cartesian claim is that selfhood, while required in order to distinguish between who is the speaker, who the addressee, and what is the object of the communication or thought, does not precede grammatical threefold Person distinction, but can only arise through it. The grammatical 1st Person is thus “not merely a contingent feature of external linguistic expression but essential to the phenomenon of consciousness and *human-specific* selfhood itself” (Hinzen 2017, 194, my emphasis). Hinzen maintains that the meaning of the word “I” cannot be separated from the grammatical 1st Person and every attempt to interpret the meaning of the “I” without reference to the 1st Person entails not only a difference in meaning, i.e. a difference in the propositional content of a thought, but a cognitive difference as well, e.g. “I”, even when uttered by myself, never means the same as

“Julie”, “she”, “this body” etc... (Hinzen 2017, 194). This is so, because the 1st Person pronoun “I” is maximally grammatical in nature, involving mainly deixis and the grammatical Person system (Hinzen 2017, 194). In other words, the “I”, together with all the other personal pronouns (e.g. you, he, she, it, we, they, me, him, her, us, and them) takes up the highest place in the hierarchy of reference, which goes from being maximally descriptive (lexical) and indefinite (hence, reference is minimally grammatical here, predominantly determined by a lexicalized concept), to being maximally grammatical and definite (i.e. exclusively determined by grammar). It follows that no 3rd Person descriptions of oneself could ever fully catch the meaning of “I”, nor replace it without any change in meaning. “Knowing oneself under a description, including one’s own proper name, is not enough to know that one is identical to that person, in the sense that one would know: ‘I am that person’” (Hinzen 2014, 247). This is what Hinzen and Schroeder (2015, 157) refer to as “essential” indexicality, which they claim to be closely related to what is usually characterised in non-linguistic terms as “de se thought”, i.e. thought about oneself as oneself. Hence, there is a direct relation between essential indexicality and self-knowledge. As such, the kind of self Hinzen is talking about is the result of reflection and thus intrinsically bound up with self-knowledge requiring the use of the pronoun “I”, which in turn requires language. This understanding of the self has been classically opposed by many phenomenologists claiming that we do not need to reflect upon ourselves in order to find a self. Because the kind of self Hinzen has in mind, which I refer to as the linguistic self, appears to be an intellectual achievement, he does not concern himself with any form of self that might exist prior to and on a lower level of human experiencing. This, however, makes his account of self very scarce and vague the moment we will compare it to the phenomenological account of self and want to dive deeper into the debate on the self – a struggle we will have to face both in the second and the third chapter, where we will try to reconstruct a more complete account of self from the bits and pieces Hinzen offers. Nonetheless, for now, let’s keep in mind that the kind of self Hinzen is talking about, depends on essential indexicality, which in turn is fundamentally grammatical.

That reference to oneself as “I” is minimally lexical and maximally grammatical in the sense that no description can substitute the 1st Person pronoun also explains what the philosopher Sydney Shoemaker (1968) called the immunity-principle, i.e. the traditional epistemological observation that self-reference is immune to error of misidentifying the first-person pronoun (Hinzen 2017, 195. “There can be no error, when no description is involved that can be wrong (Hinzen 2017, 195).

However, granted that selfhood does indeed depend on language, the immunity-principle can only apply to the case of intact language functioning, as it is obviously not true in the case of schizophrenia, the paradigmatic example of a disturbance of the self, in which the affected individual misidentifies the 1st Person most often with a 3rd Person, resulting in various clinical symptoms such as hallucinations and delusions. According to the Un-Cartesian framework, grammar lies at the heart of a disturbance of the self: with the characteristic deictic frame of human reference falling apart, the threefold Person Distinction in referential acts is no longer maintained and the propositional content of thought pathologically altered. Therefore, cases in which reference is the most vulnerable, such as in schizophrenia, are taken to present strong support for the Un-Cartesian framework of language and thought by allowing to link grammar to forms of thought and selfhood which are critical to normal cognitive functioning (Hinzen 2017, 169).

## Part II. A new linguistic lens on thought disorders: The case of schizophrenia

In the previous sections, we came across different formulations of the Un-Cartesian hypothesis, at the core of each residing the claim that the organisation of grammar systematically reflects the organisation of a uniquely human mode of cognition (Hinzen 2014, 253). At a more general level, the claim is that human thought and language arose together, and not, as is commonly maintained, that a thought system is already in place prior to language development, with the ultimate aim being “to return a role to language that it has lost, but that could inspire philosophy as much as it could inspire linguistics, neurology, and psychiatry” (Hinzen 2014, 254). It follows the prediction, that if the human-specific form of thought and language arose together, they should also fall together, implicating that schizophrenia, as a classic thought disorder, could be re-conceptualised as manifesting a breakdown of the linguistic frame of thought and hence that it can be illuminated in linguistic terms (Hinzen and Rosselló 2015, 2). This is the second part of the Un-Cartesian hypothesis and the one underlying part 2 of this chapter. In other words, the application of the Un-Cartesian framework leads to the following statement:

The hypothesis [...] is that schizophrenia is a breakdown of how language configures thought in the normal brain, viewed against an un-Cartesian background theory of what language is. Language circuitry in the brain is disturbed, resulting in forms of thought that cannot be shared anymore and lose objectivity, including thoughts about other minds, leading to a breakdown

of normal social cognition and communication that depend on the linguistic frame of thought being intact. (Hinzen and Rosselló 2015, 2)<sup>9</sup>

The aim of part 2 is to allow for a new linguistic lens on schizophrenia, opening up new directions in the research on the linguistic nature of thought and self.

## II.1 The linguistic profiles of the core positive symptoms in schizophrenia

While qualitative analyses of schizophrenic speech have been conducted for centuries now, and have recently been expanded to quantitative studies using innovative computer programs (cf. Deutsch-Link 2016), the research so far has remained rather descriptive in nature, mainly reporting different forms of language dysfunctions without further investigating the role of language in the pathogenesis of thought disorders. However, this neglect is not an accident, but at least in part a reflection of an underlying Cartesian conception of what language is and what role it plays in human cognition (Hinzen 2017, 170).

Hence, it does not come as a surprise that the current DSM-5 criteria for the diagnosis of schizophrenia underlie the same Cartesian conception. Accordingly, the DSM-5 (2013, 99) states that the diagnosis of schizophrenia requires the presence of at least two or more of the following symptoms (1)-(5), of which at least one must be (1), (2), or (3) (i.e. a positive symptom): 1) Delusions, 2) Hallucinations, 3) Disorganised speech (e.g. frequent derailment or incoherence), 4) Grossly disorganised or catatonic behaviour, 5) Negative symptoms<sup>10</sup> (i.e. diminished emotional expression and avolition). Although especially (or at least) the symptom of disorganised speech intuitively bears a relationship to language, none of the above-mentioned symptoms are thought to be inherently linked to language and hence be the result of a disturbance of the core features of language, namely referentiality and propositional meaning. That they are, is the argument made in the second part of the Un-Cartesian hypothesis.

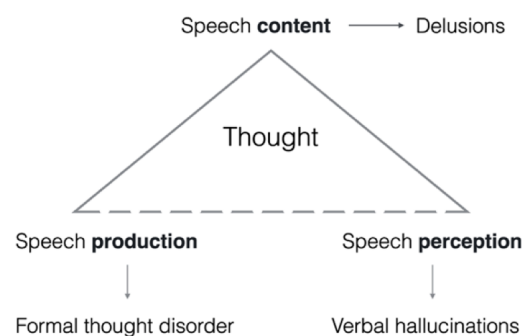
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<sup>9</sup> Note that although Hinzen and Rosselló aim at criticising the classical assumption that schizophrenia is a thought disorder, their account does not actually depart from such an assumption. The focus of their account on schizophrenia remains on thoughts, however they criticise that most theories so far have overlooked the constitutive role of language in thought processes. Consequently, their account focuses on thought content and grammar, as the structuring principle of such content – an issue highly problematic according to the phenomenological tradition, as it completely leaves out the subjective dimensions of schizophrenic experiences. This topic will be addressed in the following chapter.

<sup>10</sup> While in Hinzen and Rosselló (2015) negative symptoms of schizophrenia are not discussed due to space limitations, they remain undiscussed in recent publications as well, only poverty of speech and content being shortly mentioned along the lines. To judge it a weakness of the theory would perhaps be premature, as the research on the link between language and schizophrenia is rather new and far from being completed. Hence, I will limit the analysis and critique of the Un-Cartesian hypothesis on the alleged evidence provided by the positive symptoms.

We have seen that Hinzen depicts language as a triangle involving a threefold Person distinction. A different, though equally valid, way to describe the triangle is to organise it by the function of the 1st, 2nd and 3rd Person, resulting in a triangulation of language with the following three corners (as illustrated in figure 2 below): language production (the 1st. Person produces speech), language perception (the addressee perceives speech), and content (the 3rd Person or Non-Person represents the content of the speech). According to Hinzen and Rosselló (2015, 3), depending on which corner is disproportionately affected by the disease process, we are in a position to give a linguistic characterisation of the three core positive symptoms of schizophrenia according to the above mentioned DSM-5 criteria in the following way (see also figure 2 below):

- (1) *Formal thought disorder (FTD)* as a disorder of speech production, leading to disordered speech without feedback control.
- (2) *Auditory Verbal Hallucinations (AVHs)* as a disorder of speech perception leading to a conflation of thought and speech.
- (3) *Delusions* as a disorder of content formation leading to distorted meanings that cannot be true.



**Figure 2:** The triangulation of language and its disturbance in schizophrenia (from Hinzen and Rosselló 2015, 3)

Because the linguistic profiles of the positive symptoms in schizophrenia largely constitute the attractiveness of the Un-Cartesian framework of language in thought, the remainder of this chapter will be dedicated to the question of how each of the positive symptoms originates in a disturbance of how grammar organises meaning.

### II.1.1 Formal thought disorder

In FTD, the connection to language is the most obvious, as it manifests itself through disorganised speech, which is traditionally thought to reflect, rather than being constitutive of disorganised thinking (Hinzen and Rosselló 2015, 4; Hinzen 2017, 208). While such speech must not necessarily be unproductive (i.e. no poverty of speech) and persons affected by FTD can be fully cooperative communicators, much of such speech remains due to its lack of coherence hardly comprehensible (i.e. poverty of content) (Hinzen and Rosselló 2015, 4). Yet, it has been suggested that it is debatable whether conveying a message/meaning is at all the intended purpose of such speech (Sass and Pienkos 2015). The following example by McKenna and Oh, in which a schizophrenic person is asked about his stay in the hospital, gives an idea of the nature and difficulty to understand such speech:

Q. How do you like it in hospital?

A. Well, er... not quite the same as, er... don't know quite how to say it. It isn't the same, being in hospital as, er... working. Er... the job isn't quite the same, er... very much the same but, of course, it isn't exactly the same. (McKenna and Oh 2015, 10)

In addition to the difficulty of understanding what thought the patient tries to convey here, FTD can exhibit derailment (i.e. loss of initial topic) and tangentiality (i.e. unresponsiveness to questions), as exemplified in the case below:

Q. How are you?

A. To relate to people about new-found talk about statistical ideology. Er, I find that it's like starting in respect of ideology, ideals change, and ideals present ideology and new entertainments new, new attainments. And the more one talks about like, ideal totalitarianism, or hotelatarianism, it's like you want new ideas to be formulated, so that everyone can benefit in mankind, so we can all live in our ideal heaven. Presumably that's what we still want, and with these ideas it can be brought about. I find the... it's like a rose garden. (McKenna and Oh 2015, 43)

While in the first example, the patient somewhat replies to the posed question in that the content of his response is directly related to the content of the question, despite the meaning of his answer remaining unclear, this is not the case in the second example. Instead the initial question is not even addressed (i.e. tangentiality), rather another topic is set, i.e. that of ideology, but the speaker derails, and the discourse is carried forth more on the basis of lexical associations (i.e. clang-associations: ideology - ideals - ideas; entertainments -

attainments; totalitarism - totalitarianism) than propositional meaning, with no point or message emerging (Hinzen and Rosselló 2015, 4).

Linguist Elaine Chaika (1974, 275) suggested that the anomalies found in FTD result from a disruption in the ability to apply those rules which organise linguistic elements, such as phonemes, words, and sentences, into corresponding meaningful structures, namely words, sentences, and discourse. Grammar, as that which combines words, and the propositional meaning emerging from the grammatical organisation is thus fundamentally affected in FTD. Accordingly, Zimmerer et al. (2017, 3) interpret FTD as a loss of the ability to form coherent propositions. As a consequence of a disruption in the normal functioning of grammar, words start to appear in strange grammatical contexts in which the sounds produced do not match common meanings, both at the more general level of discourse (see examples above) and often, but not always, at the level of individual sentences as well, as can be observed for instance in clang associations – the phenomenon of combining similar sounding words: e.g. “I had a little goldfish too, like a clown...Happy Halloween down” (Chaika 1974, 261; 269), “Dr. Malmberg you are an ice woman an iceberg a lettuce”; “Mystery history” or “I’ll never be sick like a tailor even though my dad was a tailor even though my dad was a sailor” (Cutting 1997, 481). Other characteristic phenomena of FTD at the sentence level are sound combinations without any discernible meaning, e.g. “He still had fooch with teykrimez” (Chaika 1974, 261, 271) and neologisms such as the previous “hotelatarianism”, invented derivations, e.g. “plausity”, “puterience”, “amorition” (Chaika 1982, 170) or words that appear in unusual compounds, e.g. “night-illuminating object” for “lamp” (Hinzen and Rosselló 2015, 4). The fact that the speakers themselves are not aware of such anomalies in their speech, similar to what can be observed in patients suffering from Wernicke’s aphasia, suggests an impairment in meta-reflexive or self-monitoring capacities, i.e. a feedback loop from production to thought is missing (Hinzen and Rosselló 2015, 4).

Finally, Hinzen and Rosselló conclude that language is written into the clinical representation of FTD, and thus cannot be otherwise identified and characterised than through the abnormal linguistic patterns of which it consists (see above) and as which it is diagnosed (Hinzen and Rosselló 2015, 5). This conclusion itself is not ground-breaking, as already Chaika (1974) argued for a distinct linguistics of schizophrenia, which has inspired and fueled much of the subsequent qualitative research on schizophrenic language. Moreover, psychiatric theorists like Crow (2000) and Lacan (1981/1993) have seen either schizophrenia or psychosis more generally as fundamentally linked to disturbances in the use of, or abnormalities in the attitude toward, language (Sass and Pienkos 2015, 481). What is innovative about the Un-

Cartesian hypothesis though is the particular role it gives to such a linguistics of schizophrenia, as it is taken to not only reflect the disturbance of thought and self in schizophrenia but to constitute its cause based on the cognitive role language is given on this account. In other words, what we are presented here with, is a transition from the claim of a distinct linguistics of schizophrenia to the more radical argument that schizophrenia is a language pathology.

However, not everyone suffering from schizophrenia needs to have FTD. The question thus arises whether apart from FTD, the Un-Cartesian hypothesis is lacking support, as no other of the positive symptoms, namely hallucinations and delusions, seem to involve language and grammar in the way FTD is claimed to do. Though they also have to involve language in a different way, otherwise one could not explain the difference between symptoms based on abnormal language patterns. Just how hallucinations and delusions are thought to implicate language will be the topic of the following two sections.

### II.1.2 Auditory verbal hallucinations

In the DSM-5 (2013, 87), hallucinations are described as “perception-like experiences that occur without an external stimulus”, and while there exist different types of hallucinations, such as olfactory or visual ones, auditory hallucinations are identified as the most common form in schizophrenia. Consistent with this, a study conducted by Baethge et al. (2005, 136) with 4972 hospitalised persons not only found that auditory hallucinations constituted the most frequent type of hallucinations across schizophrenia, bipolar and unipolar disorder, but also that they were the most severe and least visual in hallucinating schizophrenic patients. These, in turn, prototypically take the form of speech, i.e. they talk to them using words and can be understood, as Bell (2013) suggested, as hallucinated acts of communication, and thus are inherently linguistic experiences. Hence, the most clinically prominent form of hallucinations takes an auditory verbal form (AVHs = **A**uditory **V**erbal **H**allucinations). What is central to their phenomenology is the fact that the thoughts in question have a linguistic articulation (whether or not sound accompanies the articulation), that they come with a content given by such articulation, and that such thoughts/voices often appear as acts of linguistic communication to the recipient (Hinzen 2017, 209; Hinzen and Rosselló 2015, 5). And what causes this particular phenomenology of AVHs is an anomaly of speech perception by definition (Hinzen and Rosselló 2015, 5), with the contents of that speech being perceived as distinct from the individual’s own thoughts (DSM-5, 87). Distinguishing one’s own thoughts from hallucinations, which are nonetheless thoughts produced and belonging to one

and the same person and as such are no less one's *own* thoughts, implies a loss of the patient's ownership over his own thoughts, a loss which is identified with the failure to implicitly subordinate every thought or utterance under the phrase "I think that" (Hinzen and Rosselló 2015, 5). In other words, AVHs result from a misidentification of what is generated by oneself (the 1st Person) as something that belongs to another person, namely a 2nd or 3rd Person, changing the implicit "I think" underlying my thoughts into a "He/she thinks". We are thus faced with a pathological re-configuration of the deictic frame of reference or breakdown of the deictic anchoring of utterances, "where the voice hearer becomes a grammatically second person or third person of the voice's speech, when in fact he is no such addressee or topic, and he does not himself take part in the conversation with what is effectively a disembodied speaker" (Hinzen 2017, 217). For instance, Hinzen and Rosselló (2015, 5) give the example of the thought "*I am weak*", which in hallucinations transitions to the thought that in healthy persons would be expressed by another person's utterance, namely "*He is weak*". The schizophrenic person thus does not perceive himself as the thinker of the AVHs (1st Person), but as the one they are addressed (2nd Person) and referred to (3rd Person, even if the AVHs are nothing else than his own thoughts). What happens in schizophrenia is thus a "deictic shift" (Hinzen and Rosselló 2015, 5) from the 1st Person to either the 2nd or 3rd Person, in which the voice hearer does not make the identification *he = I* or *you = I*. It is this misidentification, which is also referred to as "Person Confusion" (Hinzen and Rosselló 2015, 6) that is, in fact, crucial to the phenomenology of hallucinations, because the deictic shift as such, i.e. transition from the 1st Person to the 2nd or 3rd Person, is not yet enough. For instance, although rather uncommon, we can refer to ourselves in the 2nd or 3rd Person, which, as long as we know that the 2nd or the 3rd Person is the same as the 1st Person, remains unproblematic in the sense that it does not lead to experiences of hallucinations, i.e. thoughts that are experienced as utterances by a different person than ourselves. This can only happen when one fails to make such an identification, as is the case in schizophrenics suffering from hallucinations. However, while AVHs are the result of a failed identification of 1st and 2nd or 3rd Person, we will see that delusions constitute the opposite case, i.e. in which an identification between 1st and 3rd Person is wrongfully made. Finally, according to Hinzen and Rosselló (2015, 6) the distinctive feature of AVHs is a disorder in the interface between speech and thought, which is taken to constitute a linguistic index for the disintegration of the self, for whose integrity it is essential that one's first-personal thoughts are one's own and private to oneself.

It is a defining phenomenological feature of normal 1st Person thoughts that they are silent: we can voice them, if only by moving our lips, but if we don't, we don't hear them. If we utter them and they become overt, they become also different, being necessarily addressed to a grammatical 2nd Person (not "I think..." but "I say to you..."). In AVHs, thoughts become perceived as speech when they should be silent. (Hinzen and Rosselló 2015, 6)

In contrast to FTD, the problem with AVHs does not lie in the propositional content conveyed, i.e. in a disturbance of speech production, but in a confusion of who is the producer and who the addressee of such content, i.e. in a disruption of speech perception. Both constitute thus different instances of a breakdown of grammatical reference and the propositional meaning resulting from it. In the following, we will see that the case of delusions constitutes yet another instance of it.

### II.1.3 Delusions

Delusions concern beliefs, which have a specific content – content that, according to the Un-Cartesian hypothesis is, like any other thought content, linguistically articulated in the form of propositions. However, in delusions, beliefs become fixed and are held with an incontrovertible certainty, i.e. they come with a quasi-perceptual force, which propositions not only lack but which truth does not require, as things can be true even if their truth is not evident (Hinzen and Rosselló 2015, 6). Furthermore, delusions are often held onto despite them being contingently false, leading to a reality distortion expressed through, for instance, assertions such as "I am Jesus" (i.e. propositional delusions) or the pathological belief that everyone and everything refers to the patient (i.e. referential delusions). Other related forms of delusions include thought withdrawal, i.e. the removal of one's thoughts by an external force, and thought insertion, which stands for the conviction that thoughts not belonging to the self have been inserted in one's mind (i.e. thought insertion).

Against the commonly held view that none of these delusions are inherently related to language, Hinzen (2017, 209) claims that "these delusions couldn't be the ones they are if they were not internally linguistically articulated in the way they are, containing the lexical concepts and grammatical relations that they do", and thus delusions consist of a disturbance on the level of content arising from such relations, especially of how such content is brought into relationship with the patient himself. Thus, just as we saw in AVHs, grammatical Person distinction will be of central importance in determining the nature of delusions.

As such, propositional delusions like “I am Jesus” are not about the words, but about how these words, i.e. the predicate (“being Jesus”) and the subject (“I”), are grammatically related. While the patient still uses the proper name “Jesus” correctly to refer to Jesus and not Napoleon or Descartes, he does not use the “I” properly to locate himself in deictic space, as the bearer of the property of being Jesus (Hinzen and Rosselló 2015, 7). This leads to a “distortion of deictic space” (Hinzen 2017, 210), in which the patient misidentifies the 1st Person with a 3rd Person, which in this case leads to the delusion that I = Jesus. Just as in the case of AVHs, there is a shift in the 1st Person to a 3rd Person, followed by a misidentification (the failure to identify the 1st with the 2nd or 3rd Person in hallucination constituting just as much a case of misidentification). What we are left with in delusions are contents, that, though still identifiable (in contrast to FTD, in which no contents might not even be discernible), are judged not to be possibly true (Hinzen and Rosselló 2015, 7). And thus what is lost in delusions is the kind of content intrinsic to linguistic utterances in general, namely propositional content.

Furthermore, it is claimed that “I am Jesus” is different from “I think I am Jesus” or “I will be Jesus” or statements like “Napoleon is Jesus”, for the reason that only the first statement involves an actual identification of a 1st Person with a 3rd Person predicate characteristic for delusions. If this is indeed the case, then we could conclude that if changes in grammar determine whether a sentence is a delusion or not, then delusions must be inherently related to language. However, it remains highly questionable, whether this grammatical difference between “I am Jesus” and the other assertions is genuinely indicative of delusions.

Furthermore, there is a difference in meaning involved when “I am Jesus” is uttered by a delusional person as compared to a healthy person: in the latter case it could be interpreted as a joke or a metaphor or maybe it refers to one’s role in a play, in the former however no such thing is intended (Hinzen and Rosselló 2015, 7). Quite the contrary: for the delusional person being Jesus is not a joke, it is his identity. According to Hinzen and Rosselló (2015, 7) this act of fixing one’s 1st Person identity via a 3rd Person description is impossible in mental health, where no such description ever accounts for our 1st Person identity as selves, as any such descriptive properties we ascribe to ourselves, we can in principle lose again. The reason for this lies in the grammatical complexity of personal pronouns (see section I.6). Given that the delusional person fixes his identity through a 3rd Person description, he does not have any identity outside the delusion. Not being Jesus then would mean his non-existence, implying that the sentence “I am Jesus” is given a whole new meaning, one that it usually does not

have, namely existential meaning. And this change of meaning is taken to be caused by changes in how thoughts, in contrast to utterances in AVHs, are deictically anchored.

Referential delusions also involve a disturbance in grammatical Person Distinction or deictic anchoring, in which the patient mistakenly identifies himself grammatically as a referent in the 2nd or 3rd Person from the point of view of the speaker, while in reality, he is no such referent: acts of reference and communication about the patient are assumed to exist, where there are actually none (Hinzen and Rosselló 2015, 7).

Finally, just as propositional and referential delusions, so do delusions of thought control, i.e. thought withdrawal and thought insertion, involve a fundamental distortion of deictic space, though, as is the case with all the other types as well, in its own distinctive way. As such, the particular phenomenology of delusions of thought control is caused by the patient's failure to deictically anchor his thoughts in any of the three grammatical Persons. However, if thoughts are not deictically anchored, it cannot be determined whether they are mine, yours or a 3rd Person's, or maybe even nobody's thought (Hinzen and Roselló 2015, 8). As a result, the patient does not know anymore whose thoughts he is thinking, i.e. he does not have control over them anymore, leading to experiences of thoughts being removed or inserted into one's mind.

## II.2 Implications for therapy

In the first part of the chapter, we have developed an account of Hinzen's Un-Cartesian framework according to which grammar is constitutive for a human-specific form of thought, but also for a human-specific sense of reality. In the second part, this framework is then applied to schizophrenia, with the purpose of showing that grammar, and language more generally, is fundamentally involved in the pathogenesis of its positive symptoms, i.e. FTD, AVHs, and delusions, and more generally in the reality distortions seen in psychosis. More specifically, it is argued that these disturbances are caused by a breakdown of the two inherent aspects of grammar: deictic anchoring and propositional meaning. Accordingly, a new therapy model that proceeds in three steps is proposed to (1) restore deictic anchoring, (2) restore propositional meaning, and (3) increase propositional complexity (Zimmerer et al. 2017, 4). Just as the Un-Cartesian framework it is based on, this therapy model challenges the widely held view that language is only a tool for communication, and instead assumes a more nuanced understanding of the relationship between language and thought, in which language contributes to the shaping of thought (Zimmerer et al. 2017,4). However, the proposal is yet quite vague, as, for instance, no further information is given regarding how (1) and (2) should

be realised. The only element of the therapy model that receives somehow more attention is (3). Adding propositional complexity is thought to be of particular value for the treatment of delusions, which would involve turning delusional assertions like “I am Jesus” into a non-delusional one, such as “I feel I am Jesus” (Zimmerer et al. 2017, 4). However, as we have seen already above, it seems quite questionable to assume that what counts as a delusion and what not, can be merely reduced to these linguistic nuances, not to mention that delusions could indeed be curable through adding propositional complexity.

Finally, there are two main aspects of Hinzen’s theory that are relevant for the following chapter and discussion. These are (1) his focus on thought content, and content more generally, and (2) his view of a self as a reflective achievement. In the next chapter will be introduced an account that radically differs from these claims, namely that of phenomenology. Insights into the phenomenological theory of minimal self and its involvement in the pathogenesis of schizophrenia according to phenomenological psychopathology, will allow for a first evaluation of Hinzen’s Un-Cartesian framework. Paramount will be in this context especially his reliance on (1). More concretely, a comparison between the phenomenological emphasis on the subjective dimensions of experience and Hinzen’s account that is largely content-based will show that the latter ignores fundamental dimensions of experience involved in schizophrenia and is thus insufficient to account for the multifaceted and complex nature of schizophrenic symptoms.

## CHAPTER II

### PHENOMENOLOGICAL PSYCHOPATHOLOGY AND THE MINIMAL SELF IN SCHIZOPHRENIA

#### I. Different concepts of self

Despite the fact that schizophrenia is now commonly recognised as being or at least involving a disturbance of the self, the latter has seldom been seen as playing a pivotal role in the pathogenesis of schizophrenic symptoms, more often treated on par with other characteristics of this multifarious illness, such as for instance the various abnormalities of thought, perception or belief (Sass and Parnas 2003, 427). The reason for this lies, I think, largely on what concept of self is taken to be involved, i.e. depending on how one defines the nature of self, it will determine its pathogenic consequences as well, ranging from being fundamental in phenomenological psychopathology to one of many others witnessed in schizophrenia. In the following, I want to give a short overview of some of the leading theories on the nature of self. What is it? And who has it? Questions that beg answers, and there are indeed various, but also conflicting, answers to be found, which reflects the multidimensionality of the self.

Let's start perhaps with yet another question: When we talk about a self, do we even talk about something real? And if not, does it even make sense to talk about it all? These are the kinds of questions asked by ontological anti-realism or the so-called no-self view, which, while acknowledging that there is something like an experience or sense of self (i.e. subjectivity), would nevertheless deny the reality of a self, claiming that there is a fundamental difference to be made between the phenomenology and the metaphysics of self as the former does not guarantee the latter (Zahavi 2014, 3). The no-self view does not constitute a unified position, but instead comprises a broad range of theories that deny the reality of the self viewed as an unchanging and ontologically independent entity (Henriksen and Parnas 2017, 1). In a nutshell, we are misled by our sense of self into thinking that something like a self exists for real, where no such thing is the case – a claim also endorsed by many Buddhist schools. What about the implications for the alleged self-disturbance in schizophrenia? Given the assumption of what the self is on this account, we would have to deny, against the accumulating amount of evidence from empirical studies, that schizophrenia is or involves a disturbance of self, a disturbance not seen in other mental disorders. But what about a disruption of our sense of self, whose existence is not denied by the no-self view? This, however, begs the question of how differences in self experiences could be possible or could be explained without the sense of self being grounded in anything real.

But, as stated above, most accounts of schizophrenia nowadays do include a disturbance of self in some way or another, i.e. in not all of them is the self at the roots of the pathogenesis of schizophrenia. Among those we also find Hinzen's Un-Cartesian linguistic framework, which focuses primarily on a linguistic interpretation of schizophrenia as a thought disorder yet also wants to include the current empirical findings concerning a disturbance of self in schizophrenia as well. Though he rarely talks about the *self* and a *self-disturbance* (preferably using expressions like *1st Person*, *Person Confusion* and alike) the self turns out to be an essential part of his linguistic analysis of schizophrenia for the reason that it is understood as the result of a breakdown of the deictic frame of thought due to grammar, which crucially involves a threefold Person Distinction. The latter requires, and in hallucinations and delusions essentially so, the grammatical 1st Person, which Hinzen identifies as the self. However, he does not clarify much his use of the concept of self beyond this identification. Thus, though somewhat in an odd fashion, the self is omnipresent in Hinzen's linguistic account and yet it is not given a prime role in the pathogenesis of schizophrenia, as the *relevant* kind of self, which also is the self affected in schizophrenia, is taken to depend exclusively on language (see quote below). The self-disturbance in schizophrenia is thus only a consequence of a breakdown of language and not the other way around, as is suggested by the idea of a minimal self in phenomenology.

The unity of the person or self [...] is normally rooted in the person's 1st Person conscious self. '1st Person,' however, is a grammatical notion, defined through its contrast with the grammatical 2nd and 3rd Person. Explications of what selfhood or 'first Person subjectivity' are, standardly invoke reference to oneself in the grammatical 1st Person, and we know of no account of such self-reference that does not explicitly or implicitly invoke the 1st Person pronoun, a crucial and universal element of linguistic organization. (Hinzen and Rosselló 2015, 8)

And he continues to say that:

It is plausible that our intuitive notion of self is layered and not all forms of selfhood require language. Yet a full human self, as the subject of creative thought in the 1st Person and with a content of thought that is objective and shareable, depends on language development. It is language that gives us a self-narrative, a past and history, a shared culture, and imaginary worlds to contrast the actual world with. (Hinzen and Rosselló 2015, 8)

Apart from the primacy of language over the self and its dependence on the former, we learn from the latter quote that a further requirement for the *relevant* kind of self is the ability for creative thoughts whose content is objective and shareable, which is assumed to be only possible through language. As exemplified in this quote, though the self is a recurrent element in Hinzen's account, it is not the leading actor in it. Instead, the theory is about a specific kind of content – content that is linguistic by nature, and a particular self capable of such content is added to it. Moreover, with its features of the primacy of language and the intersubjective context in which language unfolds and a self emerges, Hinzen's account bears a certain affinity to accounts that understand the self as socially or narratively constructed, to which I will turn now.

A long tradition in philosophy has claimed that selfhood is socially constructed and that self-experience is intersubjectively mediated, i.e. that there is no self prior to entering in relationships with others (Zahavi 2014, 10; Mead 1962, 182). Hegel, for instance, argued that selfhood can only arise in a social context and that it is grounded in a process of intersubjective recognition rather than immediate self-familiarity (Zahavi 2014, 10). Related views were adopted, among others, in the United States by Josiah Royce (1898) and George H. Mead (1962). Similar ideas were also advocated for by French linguist Emile Benveniste (1966), who claimed that the subjective character of experience, i.e. the first-person perspective, was the result of a discursive or narrative praxis, i.e. that it was something that could only be acquired through participating in a linguistic community (Zahavi 2014 10; Benveniste 1966, 258-66). The common idea behind these different theories is that the self and self-experience are acquired through interactions with others, from which follows a primacy of the intersubjective dimension over the subjective one. However, it should be noted that not every formulation of such a view takes intersubjectivity to happen solely in the realm of linguistic communication, but take it to primarily involve bodily attunement.

Yet, a strong emphasis on language can also be found in the narrative account of self, which maintains that the self is either partly (e.g., MacIntyre 1981) or wholly a narrative construction (see, e.g. Dennett 1991), i.e., the product of stories told, both by myself and by others (Henriksen and Parnas 2017, 1). According to the narrative account, and similar to some extent to the no-self view, the mere subjectivity of experience is perhaps a necessary, but not a sufficient condition for selfhood. Though the reality of the self is not denied, it is essential to make a distinction between being merely conscious or sentient, a qualification also applying to non-linguistic animals, and being a self. The requirements that have to be

met to qualify for the latter are considerably higher (Zahavi 2014, 53).<sup>11</sup> These essentially include interactions with others, predominantly understood in the form of linguistic interactions, which matches Hinzen's triangulation of reference, that become sedimented in my explicit and implicit memory, but also in my dispositional repertoire, my "habitus", thus making up the self that I am (Henriksen and Parnas 2017, 2). Moreover, the primacy of intersubjectivity over subjectivity is again reflected in the fact that, while we are the narrator of our personal narrative, we are not the sole authors:

The beginning of my own story has always already been made for me by others, and the way the story unfolds is only in part determined by my own choices and decisions. Thus, as has often been claimed, one cannot be a self on ones [sic] own, but only together with others. To that extent selfhood is something that constitutively depends on others. (Zahavi 2015, 55)

Similarly, Henriksen and Parnas (2017, 2) claim that personal narratives are not solely of our own making, as they are historically situated in and dependent upon a context of pre-existent socio-cultural narratives. This also seems to coincide with Hinzen's view, emphasising, of course, the role of language in those personal and socio-cultural narratives: "It is language that gives us a self-narrative, a past and history, [and] a shared culture" (Hinzen and Rosselló 2015, 8). However, due to the lack of clearness in Hinzen's account, there's much room for speculation, and we should be cautious not to draw too many links between the two accounts. The narrative account of self is mostly concerned with the issue of long-term diachronic identity and persistency, a topic also figuring in Hinzen's quote on page 33, and insists that the experience of a self as unified across a lifetime relies upon one's ability to situate one's memories, personality traits, goals and values within a coherent narrative structure (Zahavi 2014, 56). As such, the focus of the narrative account is the self as a reflective construction and bears a close relationship to self-understanding. However, while narrativity is undoubtedly constitutive for self-knowledge, which on both the narrative and Hinzen's account is linguistically mediated, it does not seem to play such an important role in the constitution of the self according to Hinzen's own theory, as he, with the exception of the quotes on page 33, does not generally talk or refer to narrativity (though he does not speak much about the self in general). Whereas language and specifically grammar are certainly the crucial ingredients for narrativity, they play a more fundamental role: by first establishing a

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<sup>11</sup> This excludes the existence of an animal self, a claim Hinzen himself would deny. Instead, he is concerned with the *relevant* kind of self, which is the human-specific form of self and which is to be distinguished from any other form or layer of self possibly existing.

deictic frame of reference, in which a grammatical 1st Person, i.e. a self capable of telling stories about itself, emerges through differentiation from a 2nd and 3rd Person. Nevertheless, what all the views described above have in common, including Hinzen's own account, is that they picture the self as something that requires the fulfilment of certain conditions defined by the respective accounts. In other words, the self is viewed as something that has to be achieved rather than something constituting a given, that is innate and automatic (Zahavi 2014, 11).

## II. A phenomenological account of self

A totally different understanding of the nature of self and its pathogenic consequences can be found in abundance in the continental phenomenological tradition, which focuses on the subjective dimensions of experiences. According to this tradition, what Hinzen and other accounts of self are fundamentally missing out is the first-personal perspectivalness of experiences: the fact that experiences not only come with a certain content (*what* is experienced?) but also with a particular form (*how* is it experienced?). This how is mediated by what Sartre (1943/2011) in *Being and Nothingness* called "pre-reflective self-consciousness", and Zahavi (2014) "for-me-ness" or "mineness"<sup>12</sup>. Apart from these, various other designations have been proposed to refer to this first-personal character, such as "first-personal givenness," "subjective presence," "self-presentational awareness," "intransitive self-consciousness," "reflexivity," or "operative intentionality" (Zahavi 2014, 29), that each and every experience is necessarily accompanied by. However, it does so not as a particular experiential content but as an intrinsic feature of what it means to have an experience *of* something in the first place, or else, as Sass and Parnas (2003, 429) claim, to be the subject of intentional directedness to the world, that is, as the subject *for* the world. Sartre (1943/2011, 278) defines this pre-reflective consciousness as the very being of consciousness. For, "if anything ever *appears* at all, it always appears through the medium of consciousness" (Sass and Parnas 2003, 429), and anything that appears can only appear *to me* and *for me* in the first-personal perspective. In contrast to reflective self-consciousness, which underlies the accounts of self mentioned above, it is a permanent feature of consciousness, being "one with the consciousness of which it is conscious" and thus determining itself at one stroke "as consciousness of perception and as perception" (Sartre 1943/2011, 101). Many thinkers

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<sup>12</sup> I will mainly use these two designations to refer to the first-personal perspectivalness of experience, as they combine its core features. It constitutes a type of consciousness, which is pre-reflective, hence not the result of reflection or introspection, and which is constitutive for phenomenal consciousness, as experiences cannot appear unless they appear for me or as mine.

(including Aristotle, Descartes, Arnauld, Locke, Brentano, Husserl, Sartre, Gurwitsch, Merleau-Ponty, Henry, and Henrich) have taken self-consciousness in this sense to be an integral part of intentional experience and draw a close connection between this kind of self-consciousness and selfhood (Zahavi 2014, 30). Hence, against a debate on self that is strongly marked by views that label this pre-reflective self-consciousness as insufficient for selfhood, they have maintained that it possesses a basic dimension of selfhood necessary for something to be present to *me*, which precedes the mastery of language, the ability to form full-blown rational judgements and propositional attitudes, and characterises (phenomenal) consciousness as such (Zahavi 2014, 12, 14, see also chapter 3). Michel Henry's claim that the most basic form of selfhood is the one constituted by the very self-manifestation of experience gets to the heart of the phenomenological concept of selfhood, which is commonly referred to as the minimal self or *ipseity* (from Latin *ipse*= self: "selfness", "Selbstheit"), an expression originally coined by Sartre and Henry (Henry 1963, 581; Henry 1965; Sartre 1943/2011; Zahavi 2014, 16). It denotes the "vital and self-coinciding subject of experience or first-person perspective of the world" (Sass and Parnas 2003, 428), a primordial, immediate and tacit experience of myself or *self-affection*, which does not show up in our experiences as a sort of object or quasi-object, but only manifests itself as subjectively lived through, and in which resides and is realised a union between an experiencing and experienced self (Stanghellini 2009, 56; Henry 1963, 581). "[I]ipseity is the implicit, pre-reflexive, immediate, non-conceptual, non-objectifying and non-observational sense of existing as a subject of awareness. It is prior to, and a condition of, all other experience" (Stanghellini 2009, 56). As such, it signifies that I am always already aware of myself and have no need for introspection, self-observation or self-reflection to assure myself of being the one who entertains these thoughts and undergoes these experiences (Henriksen and Parnas 2015, 241). Instead, my sense of self is rooted in my own bodily experiences, and its situatedness amongst worldly objects and other people mediated through the lived body, essentially through kinaesthesia and intercorporeality, which enables the experiential differentiation between self and non-self (Merleau-Ponty 1945/2002, Stanghellini 2009, 56). Hence, being self-present and present in the world of others and objects (the self-world structure) are two sites of the same coin (Nelson et al. 2014, 479), or as Merleau-Ponty (1945/2002, 475) said himself:

In so far as, when I reflect on the essence of subjectivity, I find it bound up with that of the body and that of the world, this is because my existence as subjectivity is merely one with my

existence as a body and with the existence of the world, and because the subject that I am, when taken concretely, is inseparable, from this body and this world.

This furthermore entails considerations about the intersubjective dimensions of the minimal self, given that it is always already pre-reflectively and pre-linguistically embedded in and related to a world that is both shared and co-constituted by others. There exists, however, a certain disagreement among phenomenologists whether the minimal self is a condition for and thus precedes intersubjective relations or whether such social ties are constitutive for the minimal self. Zahavi for instance strongly argues for a primacy of the subjective dimensions of the self over its intersubjective ones: “the very idea that intersubjectivity should give rise to subjectivity must be rejected as conceptually confused. Intersubjectivity designates a relation between subject(ive)ities, and the former consequently cannot precede the latter” (Zahavi 2014, 30). Introducing the notion of an interpersonal self, Zahavi wants to differentiate this social dimension from the minimal self, which he considers to be pre-social, but also from the narrative self, which “most certainly does include the social dimension, but it does so by emphasizing the role of language” (Zahavi 2010, 6), whereas there exist pre-linguistic and pre-reflective forms of sociality. Against this, some phenomenologists have tended in a different direction, claiming that the minimal self is already a social or interpersonal self and that its ecological and social relations are equiprimordial (De Haan 2010, Ratcliffe 2017, but also Neisser 1988). Evidence from developmental psychology (e.g. Neisser, Rochat, Stern) is often taken to support this view. However, one should be aware of the fact that, while there exists great evidence from developmental psychology (see chapter 3) showing that there exists a primitive sense of self from the day we are born (indeed, scientific evidence for the existence of a minimal self does ultimately rely on developmental research), the same evidence is not unequivocal when it comes to the question of intersubjectivity. Accordingly, developmental psychologists hold differing views regarding the relationship between subjectivity and intersubjectivity. The debate in both disciplines pertains to the question of whether relating to the world and others is always already social relating. And here opinions diverge. While this debate does have consequences for how phenomenologists interpret the nature of schizophrenia, i.e. whether it is primarily a self-disorder that *implies* changes in how others are experienced or whether the self-disorder is manifested and rooted precisely in changes in our pre-reflective and pre-linguistic relations to others, it does not threaten as such the core idea of the phenomenological concept of minimal self, which maintains that

[...] self-consciousness is not something that only comes about the moment one scrutinizes one's experiences attentively, let alone something that only comes about the moment one recognizes one's own mirror image, refers to oneself using the first-person pronoun, or is in possession of identifying knowledge of one's own character traits. Rather, self-consciousness is a many-layered phenomenon. It comes in many forms and degrees, and whereas one of the most advanced forms might involve contemplating one's life as a whole and reflecting on the kind of person one is and on the values one holds dear, the most primitive form of self-consciousness is a question of the ongoing first-personal manifestation of one's own experiential life. This kind of self-consciousness is not something unique to, or distinctive of, adult human beings, but something all phenomenally conscious creatures possess. (Zahavi 2014, 14)

However, according to yet another account of self first advocated for by Hubert Dreyfus, this is to fall prey to the so-called refrigerator light fallacy: thinking that the light is always on merely because it is always on whenever we open the door of the refrigerator (Schear 2009, 101, Zahavi 2014, 26). Hence, the phenomenological claim of a pre-reflective self-consciousness or "mineness", is only the result of a post hoc fabrication: just as in the refrigerator fallacy we wrongly conclude from the fact that whenever we reflect our capacity for self-consciousness is actualised, that it must have been in play all along. "Accordingly, self-consciousness is more justly construed, on phenomenological grounds, as a potentiality – generally unactualised, but always actualisable – of the world-immersed experience of someone capable of first-person thought" (Schear 2009, 99). It is only this capacity of first-person thought, which Schear, in accordance with Shoemaker, takes to essentially involve self-reference through the 1st Person pronoun, that "puts one in a *position* to know immediately about one's own conscious mental life *as* one's own" (Schear 2009, 98). This claim also reflects to some extent Hinzen's view. Self-consciousness, again, is taken as something that needs to be achieved, something that, according to Dreyfus and Schear, can only arise through reflection. Yet, a significant downside of such an account is that it denies conscious mental states to anyone not possessing the capacity for first-person thought, which includes infants and most non-human animals.

However, it is of utmost importance to understanding the phenomenological concept of minimal self to make a difference between pre-reflective self-experience and self-knowledge or self-understanding resulting from reflection, a distinction that is generally either denied or ignored by the accounts mentioned above. From the criticism that a minimal conception of self is not enough for first-person knowledge, it cannot follow that it is therefore also

unnecessary if such knowledge is to obtain (Zahavi 2014, 37). “Quite the contrary, it is the non-reflective consciousness which renders the reflection possible; there is a pre-reflective cogito which is the condition of the Cartesian cogito” (Sartre 1943/2011, 100). Hence, though the minimal self might not amount to authoritative first-person knowledge, it is nevertheless a precondition for it, as it provides for an experiential grounding of any subsequent self-ascription, reflective appropriation, and thematic self-identification, and is to that extent epistemically enabling (Zahavi 2014, 37).

Phenomenology can agree that indeed a *full* human self requires more than what a conception of a *minimal* self can offer – not without reason is it precisely called *minimal*. But while Hinzen focuses exclusively on the kind of content such a linguistic self is or has to be equipped with, he completely ignores the form, i.e. the first-personal presentation, the form-ness, the pre-reflective consciousness of such content without which we would not be conscious of it. The self is not just constituted of content, instead our first and most fundamental contact with ourselves resides in our very having of experiences. The linguistic self is grounded in a more primordial sense of self which provides the prelinguistic condition of possibility for the kind of self Hinzen is arguing for, and which he sees fundamentally affected in schizophrenia.

However, before moving on, I would like to draw attention to a criticism of the concept of minimal self from its own ranks, namely by phenomenologist Matthew Ratcliffe (2017). We have already seen that different authors highlight different aspects of the minimal self, e.g. some emphasise its character of mineness and others more its bodily dimensions. We have also seen that there exists a certain tension among phenomenologists whether interpersonal relationships are constitutive for the minimal self or not. Nevertheless, most phenomenological accounts of self and self-disturbance, as we will see shortly, are based on the concept of a minimal self that involves a prelinguistic and pre-reflective sense of first-person givenness that is necessary and thus inseparable from being in an intentional state of one or another type (Ratcliffe 2017, 27). We have also seen that for most accounts of minimal self it does not matter to have a sense in which intentional state one is, e.g. whether one perceives, imagines or believes something, as they focus on the condition of possibility for intentionality more generally. However, according to Ratcliffe, this leaves out a crucial phenomenological achievement, namely that we not only possess a sense of being in an intentional state *x* or *y*, but also a sense of which state we are being in, i.e. we have an immediate sense of whether we are perceiving, imagining, remembering or believing something, which he also refers to as the modal structure of experience. This sense is so

straightforward and unproblematic that it usually passes unnoticed (Ratcliffe 2017, 20). For instance, Ratcliffe (2017, 19 f.) claims that the experience of perceiving involves a pre-linguistic and pre-reflective sense that an entity is “here, now,” whereas an experience of remembering involves an immediate sense that something is past, rather than present. This sense of which type of intentional state one is in is not an addition to our core sense of self but is fundamental for it. As Ratcliffe (2017, 27) claims himself:

If our experience did not respect the distinction between perceiving and remembering, we would have no sense of temporal location. And, if we could not distinguish imagining from perceiving, experienced boundaries between self and environment would break down, to the extent that we would lack any sense of spatial location. Without some sense of spatiotemporal location, it is difficult to see how any experience of being a singular, coherent locus of experience could be sustained. Hence minimal-self experience has to discriminate between types of intentional state.

Moreover, the modal structure of intentionality and its integrity is taken to depend on interpersonal relationships, i.e. of how others are experienced and related to, both developmentally and constitutively, and thus, to repeat a point made already on previous pages, the minimal self is also an interpersonal self (Ratcliffe 2017, 29). Because Ratcliffe takes the modal structure of intentionality to be an integral part of the minimal self, a claim that is denied by Zahavi, who continues to argue for a pre-social self and a more fundamental sense of having an experience, he claims that “if we want to pin down what, exactly, minimal selfhood consists of, I think the most promising approach is to focus on the modalities of intentionality” (Ratcliffe 2017, 19). Thus rather than referring to his account as one of minimal self, he prefers to call it an account of the modal structure of intentionality, which also provides a new perspective on the kind of disturbance present in schizophrenia.

In the following, I will provide a mixed overview of the traditional phenomenological interpretations of schizophrenic symptoms in order to give an insight into how the adoption of a phenomenological standpoint can help illuminate and understand the nature of the symptoms we are dealing with in schizophrenia.

### III. Phenomenological psychopathology: Schizophrenia as a disturbance of ipseity

The idea that schizophrenia fundamentally involves profound transformations of ipseity – the foundational, immutable core necessary for our sense of existing as a self-present, bodily, demarcated and persisting subject of awareness – is not a recent phenomenological discovery,

but finds its more or less explicit articulation in all classical texts on schizophrenia (Henriksen and Parnas 2015, 235-6, 241). Very generally, it is based on the observation of anomalous experiences of self occurring selectively in schizophrenia, and first psychopathological descriptions of it appeared in the early twentieth century, for instance in Kraepelin (1896), Bleuer (1911/1950), Jaspers (1913/1997) and Schneider (1950/1959). Continued endeavour to analyse and describe the disturbances of self in schizophrenia have been shown in the interdisciplinary research field of phenomenological psychiatry, prominent figures in that field being, for instance, Wolfgang Blankenburg, Josef Parnas, Louis A. Sass, Thomas Fuchs, Giovanni Stanghellini, Borut Škodlar, and Matthew Ratcliffe. The contemporary interest in and research on disorders of self in schizophrenia was initiated by the publication of two independent, explorative-qualitative studies of first-admission schizophrenic patients in Denmark (Parnas et al. 1998) and Norway (Møller and Husby 2000), that were later followed-up by various, more systematic empirical studies, collectively showing that schizophrenia is a disorder involving subtle, though pervasive and persistent alterations of subjective experiences (Henriksen and Parnas 2015, 237, Sass and Parnas 2003, 428).

The most influential model of the disorders of self involved in schizophrenia has been developed by Sass and Parnas (2003), which is commonly referred to as the IDM (ipseity-disturbance model). On this model, the disturbance of ipseity or minimal self has two fundamental and complementary aspects, namely (1) hyperreflexivity, and (2) diminished self-affection.

Hyperreflexivity denotes forms of heightened and exaggerated self-consciousness “in which a subject or agent experiences itself, or what would normally be inhabited as an aspect or feature of itself, as a kind of external object” (Sass and Parnas 2003, 428). In other words, hyperreflexivity implies bringing to the foreground and objectifying aspects of experience that are usually tacit, transparent and quietly lived through. Such aspects concern for instance our thoughts, feelings and sense impressions: in the typical case we would not differ between the thoughts and the act of thinking them, the same applying to feelings and sense impressions, instead thoughts simply are experienced as what we are thinking, feelings as what we are feeling and sense impressions as what we sense, in short: there is a union between the how and the what of experience. In schizophrenia, however, these experiences disintegrate creating a split between the subject of experience and what is experienced in which the former becomes the centre of awareness.

Related to these experiences is also the second component of the IDM, namely the diminishment of self-affection or auto-affection, which according to Sass and Parnas (2003, 428) denotes a diminishment of the basic sense of self-presence, that is “the implicit sense of existing as a vital and self-possessed subject of awareness.” It is related to hyperreflexivity in that the objectification of the lived dimension necessarily involves a progressive distancing from one’s core self as that through which an experience is subjectively lived through with the consequence “that what *was* once tacit is no longer being inhabited as a medium of taken-for-granted selfhood” (Sass and Parnas 2003, 430).

These complementary processes of hyperreflexivity and diminishment of self-affection are necessarily accompanied by a third aspect constitutive of the disturbance of ipseity in schizophrenia, namely the disruption of the subject’s “grip” or “hold” on the perceptual and conceptual field of awareness (Merleau-Ponty 1945/2002, 304) – that is, of the sharpness or stability with which figures or meanings emerge from and against some background context (Nelson et al. 2014, 479; Sass and Parnas 2003, 428).

Furthermore, given that the sense of self and the sense of immersion in the world are inseparable, disturbances of minimal self involve a diminished attunement and immersion in the world, due to a loss of transparency of the lived body mediating our relationships with the world and others. Especially Fuchs (2005) and Stanghellini (2009) have emphasised the distortion of the bodily corporeal dimensions of the self and see the disembodiment of the self as the fundamental trait of schizophrenic existence.

However, the IDM has recently been criticised by Mishara et al. (2014) who claim that the disturbance of self seen in schizophrenia involves more complex structures than those available to a minimal self. Their account differs from the IDM in that it seems to characterise the disturbance of ipseity to exist primarily on the level of the narrative self – a recurrent disagreement and contrast we see coming back in the debate on the nature of self – and is as such fundamentally grounded in a disruption of the process with which complex ideas of self and others, i.e. narratives, are formed (Nelson et al. 2014, 480). In response to this, empirical data on the IDM suggest that disturbances of the narrative self are not indicative of the kind of disturbance of ipseity observed in schizophrenia, but rather a prominent feature of borderline and other personality disorders, which in turn do not primarily affect one’s moment-to-moment sense of existence, which is the minimal self, and as such do not constitute a disturbance of minimal self, but reflect disturbances at more sophisticated, self-representational or narrative levels of selfhood (Henriksen and Parnas 2015, 241; Nelson et al. 2014, 480; Nelson et al. 2013; Sass and Parnas 2003, 430).

Furthermore, Nelson et al. (2014, 480) maintain that both research and theory in cognitive neuroscience, phenomenology, and philosophy of mind suggest that disturbances of ipseity will affect narrative self and metacognition far more than the reverse (see for instance Damasio 2000, Goldman 2006, Parnas 2011, Sass et al. 2011).

Last but not least, the IDM has been used as a new tool for the qualitative assessment of schizophrenia, commonly referred to as EASE (=Examination of the Anomalies of Self-Experience) (Parnas et al. 2005). However, despite the existence of an abundant corpus of literature on altered self-experiences, and the empirical support offered by the IDM, the notion of self, not to say its disturbance, has to this day not been acknowledged as a valid diagnostic criterion of schizophrenia. The implications of such an attitude towards an understanding of schizophrenia as involving a disturbance of self, and more specifically of the minimal self, are significant, as it has been shown that the adoption of a phenomenological approach is especially fruitful for early detection and differential diagnosis of schizophrenia.

In the following, I will provide an overview of how phenomenology and phenomenological psychopathology approaches schizophrenic symptoms, though limiting the scope to those focused on in Hinzen's framework, namely AVHs, delusions, and disorganisation symptoms.

### III.1 The phenomenological architecture of AVHs in schizophrenia

In the first chapter we have seen that hallucinations are commonly described as perceptions that occur in the absence of external stimuli and, although they can occur in all sense modalities, they are mostly auditory in schizophrenia. However, Henriksen et al. (2016), as well as Ratcliffe (2017), argue that this definition of hallucinations and their categorisations are too simplistic, ignoring their phenomenological diversity. Henriksen and al. (2016, 166) for instance criticise the claim that hallucinations essentially happen in the absence of perceptual stimuli, and instead argue that often they involve certain experiential precursors, mostly arising at teenage age and puberty, that do not necessarily happen in the sense modality involved in the actual hallucination and are furthermore indicative of the development of full-blown AVHs at a later age. Moreover, it is criticised that the definition above misleads many clinicians and scientists into thinking of AVHs as errors of source or reality monitoring – the predominant cognitivist conception of AVHs (Henriksen et al. 2016, 167). It is misleading because it assumes that patients take their hallucinations to be real, an assumption that does not apply in most cases, as is evidenced by numerous subjective reports but also by empirical research. Zucker (1928) for instance found that schizophrenics were

able to distinguish between their hallucinations and a real analogue of their hallucinatory experience created by the experimenter, as well as to identify which one was the real hallucination (Henriksen et al. 2016, 167). Together the empirical data and the subjective reports show that the sense of reality remains mostly intact in schizophrenia or, as Ratcliffe (2017, 63) claims, hallucinations arise against the backdrop of a modal structure of intentionality that remains at least to some degree functional. However, as becomes visible here, while Henriksen et al. (2016, 168) focus their account on the widespread phenomenological notion of minimal self, Ratcliffe prefers an interpretation of the nature of AVHs in terms of fundamental changes in the modal structure of intentionality. In the following, I will provide a short account of both positions.

Henriksen et al. (2016, 172) base their account largely on experiential precursors of AVHs, which are to be found in the schizophrenia-specific alterations of self-awareness (ipseity) and disorders of cognition caused by an experiential distance between the sense of self and the flow of consciousness. This experiential distance, it is maintained, brings about pathological changes in the experience of space and an incipient morbid objectification of inner speech, both of which are essential to the formation of AVHs (Henriksen et al. 2016, 168, 172). They also refer to this experiential distancing as a disturbance of *primordial presence*<sup>13</sup> ((Henriksen et al. 2016, 172-3), a primordial presence in the world that renders everything I experience my experience, or, as inalienable (Merleau-Ponty 1945/2002, vii). The following description of their account highlights some recurrent aspects of the ipseity disturbance we covered already in the previous section, and will as such serve both as a kind of recapitulation and further illumination of this phenomenological concept.

There are three critical elements to the phenomenology of space that need to be elucidated in order to understand how alterations in the experience of space are involved in the pathogenesis of AVHs (see Henriksen et al. 2016, 172-3). First, according to phenomenological analyses (especially Husserl), all spatial objects are perspectively incomplete, i.e. they can only appear from a certain point of view, and their appearance requires the existence of a subject to whom it can appear and who can discover different features of the objects by moving around and taking up different perspectives. Second, the subject does not merely live in that space but is constitutive of it, that is, the subject's spatiality, which signifies the subject's involvement and orientation in the shared world,

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<sup>13</sup> Which is just another way of denoting the disturbance of ipseity we have seen in the previous section.

enables perceptual objects to appear in their spatiality (Henriksen et al. 2016, 172). This is also nicely described by Merleau-Ponty (1945/2002, 499):

We have no way of knowing what a picture or a thing is other than by looking at them, and their *significance* is revealed only if we look at them from a certain point of view, from a certain distance and a certain *direction*, in short only if we place, at the service of the spectacle, our collusion with the world.

And third, our most basic relation to space is constituted by corporeality, i.e. the idea that perceptions presuppose and co-occur with a form of bodily awareness, which Husserl (1997) referred to as kinaesthetic sensations (Henriksen et al. 2016, 172). It furthermore constitutes the key element of the lived body, which is the medium through which we experience and serves as the background against which reflective intentionality or self-consciousness is possible.

A disturbance of this primordial presence, however, leads to various pathological changes in the experience of space that are characteristic of AVHs. More specifically, it “enables a construction of a sort of persistent, inner space that continuously articulates itself, thereby allowing schizophrenia patients to experience their own interiority as a space and their thoughts and feelings with spatial qualities” (Henriksen et al. 2016, 174). In other words, the changes in the experience of space amount to objectification or spacialisation of lived space, of the subject’s own spatiality. This spacialisation is reflected for instance in reports that thoughts are spatially located at a particular part of the head or thought pressure (e.g. the sense of pressure on the inside of the skull caused by rapid, parallel thought tracks or rapidly changing thoughts), and is implicated in the beginning stages of the internal *Gedankenlautwerden* witnessed in AVHs (Henriksen and Parnas 2015, 238). Moreover, Henriksen and Parnas (2015, 238) report that one patient distinguished between “being thoughts” and “having thoughts”, where the latter was experienced as an object-like thing, in contrast to being one with the subjective experience of thoughts. The consequences of such an alteration in lived space can extend to the degree that the schizophrenic patient has to introspect, listen to or perceive his own thoughts in order to know what he or she is thinking (Henriksen and Parnas 2015, 238). Moreover, as should be obvious by now, their account is compatible with the IDM model introduced by Sass and Parnas (2003), as the changes in the experience of space imply hyperreflexive self-consciousness and diminished self-presence, which essentially manifest in objectification of lived space.

The second, and related, characteristic feature of AVHs entailed by the disturbance of primordial presence, is the dissociation between the sense of self and the inner speech characterising our thoughts, which manifests in a morbid objectification of the latter and introduces an unbridgeable gap between the ordinarily unified dialoguing parts of inner speech (Henriksen et al. 2016, 175). Instead of functioning as an implicit medium of self-representation, a hyperreflexive awareness towards inner speech develops, which is also involved in the objectification of thoughts, and which leads to various experiences of intruding voices that either command, comment, or dispute.

As we have mentioned before, a different account is provided by Ratcliffe, who focuses his interpretation of AVHs specifically on the fact that many patients report that the voices they hear do not necessarily have a clear acoustic or auditory quality or cannot decide whether they actually hear them or only think them, which he considers being of great importance for understanding the phenomenon of hallucinations. Basing his account on hallucinations on the modal structure of intentionality rather than on a notion of minimal self, he maintains that hallucinations, and in this particular case AVHs, are intrinsically strange experiences, primarily involving an unfamiliar kind of intentionality, in which the content of an experience continues to resemble that of a thought, but somehow affects one more like that of a perception and hence involves a disturbance of the wider-ranging modal structure of intentionality (Ratcliffe 2017, 63). The reason for its unfamiliarity does not lie in the fact that one intentional state is mistaken for another, i.e. which in the case of hallucinations would imply a confusion between the intentional state of imagining something and that of actually perceiving it, nor does it reflect an “in-between” state, but rather an experience which does not fit into any familiar categories, in which “aspects of one kind of experience are paired with the sense of having another kind of experience” (Ratcliffe 2017, 62). This unfamiliar kind of intentionality arises through a disturbance or diminishment of what Ratcliffe calls “the sense of presence”, i.e. our sense of being “here, now”, which manifests itself in a breakdown of experiencing the “here, now” as different from the “not here, not now”, and which consequently “reduces the phenomenological gap between perceiving and imagining, rendering the person more vulnerable to experiences that fall between the two” (Ratcliffe 2017, 44, 48). In her book *Autobiography of a schizophrenic girl*, Marguerite Sechehaye offers an example of the often reported experience of “hearing without hearing”, that has become paradigmatic for the phenomenon:

I did not hear them as I heard real cries uttered by real people. The noises, localized on the right side, drove me to stop up my ears. But I readily distinguished them from the noises of reality. I heard them without hearing them, and recognized that they arose within me. (Sechehaye 1970, 59)

It is important to note that the phenomenological accounts presented here differ largely from the rather simplistic linguistic account. First of all, and most crucially, Hinzen's account of schizophrenic symptoms is an account about a certain content, and not so much about how such content is experienced. Indeed, as we will see later, what he has to say about experiential content is mainly contained in his criticism of it and the phenomenological approach in general, arguing that it would be naive to base an account of schizophrenia on the experiential form alone. However, we must keep in mind that this is a wrong interpretation of the phenomenological claim: its claim is not that schizophrenia exclusively involves a disturbance of minimal self or the modal structure of intentionality, but it is conceived as the origin of a process that in its progress can affect other layers of self as well, such as the linguistic self. Hence, by taking up a standpoint that is wholly observatory and descriptive and thus basing his account mainly on content, he misses out on the whole subjectivity of the symptoms, i.e. how they are lived through, and consequently fails to account for and convey the relevant experiences. What patients describe is far less content bound than precisely that strange and unfamiliar feeling of relating to others and the world reflecting a fundamental shift in one's being-in-the-world (Ratcliffe 2014, 2017). However, Hinzen could reply that he does include the experiential dimension in that what he tries to explain in linguistic terms is the pathological experience of voices distinct from normal inner speech, which is precisely what AVHs are made of. Indeed, we have to concede that this is what he is doing, at least as far as this experience of objectification is necessarily reflected in some experiential content. Yet, constituting just the general manifestation of AVHs, any account striving to explain them has to take this manifestation as the starting point, but this itself does not make an account phenomenological, and it does for sure leave out many aspects of that experience – aspects that are relevant to a deeper understanding of what hallucinatory experiences are ultimately about, such as the phenomenon of hearing without hearing. Though Hinzen mentions it himself as a characteristic of hallucinations, his own account does not provide any explanation of it. Furthermore, as we have seen above, numerous evidence exists that in many cases, patients are able to distinguish their hallucinations from what is real, even when faced with a real analogue of their hallucinatory experience. How could Hinzen explain this

from a grammatical point of view and from one that is based on the experiential content only? No answers are to be found in his account regarding this question, because just as many other accounts, he simply assumes that patients take their hallucinations to be real, a misunderstanding that applies far more to the clinicians than to the patients themselves. The difference does not lie so much in content, but in the form, i.e. in how the hallucinatory content is experienced in contrast to the experiential analogue created by an outside source. I do not see how an account based on grammatical Person Distinction can account for the fact that patients are able to distinguish their hallucinations from real voices and even can sometimes acknowledge that the voices are their own (Henriksen et al. 2016, 175)? The differences seem to be more subtle than suggested by a confusion of grammatical Person: rather than radically mistaking the grammatical 1st Person with a 2nd Person, we are presented with reports of patients that are more nuanced and complex, involving a paradox experience of hearing without hearing and a certain intact sense of reality. Ratcliffe's introduction of an unfamiliar kind of intentionality seems to be particularly enticing here, as it makes clear that the experience of hallucinations signifies not merely a perspectival shift of experiences as Hinzen would maintain with his account of a confusion of grammatical Person, i.e. it is not simply a matter of wrongfully attributing content to a 2nd or 3rd Person, but also does not represent an in-between state, but a new form of experience that does not fit our preexisting categories. Hinzen could probably maintain that this unfamiliar kind of intentionality arises from a specifically linguistic malfunctioning of the deictic frame of reference, but, first of all, he does not do that, and second, there remains a more general doubt concerning how a disturbance in the function of grammar can amount to or be constitutive of such a kind of intentionality.

The next section will be devoted to some phenomenological accounts of delusions that show that a focus on the delusional content is not sufficient for understanding its nature and development, not to say convey the relevant experiences.

### III.2 Delusions 2.0

The phenomenological literature on schizophrenic delusions is, in general, more versatile than the one on schizophrenic hallucinations. Though not necessarily constituting incompatible accounts, I like to think of them as highlighting different aspects, maybe even different perspectives on a shared object of analysis, which is the subjective dimension of delusions, with a common goal and a common method: to give an account of delusions that is more accurate than the one offered by traditional psychiatric analyses focusing on delusional

content through uncovering the complexity of the experiential structure of delusions. My decision to rely on several different accounts is precisely motivated by the complexity of the phenomenon of delusions. On the one hand, a multi-sided description of phenomenological accounts will reflect that complexity and furthermore emphasise that also in the discipline itself there does not exist a single account which all phenomenologists agree on. On the other hand, it will also emphasise how much Hinzen's account of delusions is missing out, i.e. that it is, same as in the case of AVHs, too simplistic.

I will start with a phenomenological account by Pierre Bovet and Joseph Parnas from 1993, to which I will add aspects highlighted by Stanghellini (2009), Ratcliffe (2010) and Schwartz and Wiggins (1992).

In short, Bovet and Parnas view delusions as primarily involving the transformation of the structure of experiencing – the patient's being-in-the-world – which consists of a defective attunement to the world and others (referred to as *autistic vulnerability*; Bovet and Parnas 1993, 582) and involves the specific overstepping of the me-not-me boundary arising from a disturbance in the intersubjective constitution of the sense of self. Apart from a characteristic overstepping of the me-not-me boundary, which can lead to various types of delusions more generally regrouped under the term delusions of reference (e.g. delusions of control and delusions of omnipotence), the transformation of the patient's being-in-the-world, which at the same time means being-with-others, implies a disturbance in or complete loss of common sense. A defect in common sense manifests itself in a lack of taste and feel for what is adequate in addition to a lack of sense for the rules of the game of human behaviour, causing perplexity over the most self-evident issues (Bovet and Parnas 1993, 583). However, it is often observed, that the ability to solve abstract and intellectual problems remains intact, which in some cases leads the patient to compensate the lack of common sense by a hypertrophied devotion to logical solutions (Bovet and Parnas 1993, 583, Blankenburg 1969). This is also compatible with the concept of hyperreflectivity used by Sass and Parnas (2003). A similar situation can also be observed in understanding word meanings: in some cases, not in all, patients start to question the use and meanings of different words in a hyperreflective fashion (Sass and Pienkos 2013). According to Stanghellini (2009, 59), this reflects a disembodiment of language in which words get an object-like existence, indistinguishable from real objects:

Words are no longer used to share a world, but to create an alternative one, or a world on its own. Therefore, words and objects may become interchangeable: paradigmatically, metaphors

become flesh-and-blood things, the catachresis (concrete expression) of metaphors flings open the door to delusions. (Stanghellini 2009, 59)

Focussing on the embodiment of the self, Stanghellini emphasises the disintegration of the person on a bodily level and sees abnormal bodily sensations, commonly referred to as cenesthopathy (from cenesthesia: the internal perception of one's own bodily sensations), to be at the roots of psychotic symptoms, especially hypochondriac delusions and delusions of control (Stanghellini 2009, 57). These abnormal bodily feelings are generally characterised by feelings of extraneousness, numbness, non-existence of parts of the body, and sensations of paralysis, heaviness, unnatural lightness, of shrinking or enlargement etc. (Stanghellini 2009, 57). However, the abnormality is less defined by the nature of the bodily feelings and sensations involved, than by the hyperreflective manner schizophrenia patients attend to them, resulting in an experience of increasing distance between subjectivity and bodily experience (Stanghellini 2009, 57).

Ratcliffe (2010, 2017) proposes yet another interpretation of delusions. Focusing, as we have seen before, on a disturbance in the modal structure of intentionality, he claims that delusions consist of a confusion between the intentional state of imagining and that of believing (in contrast to a confusion between imagining and perceiving in AVHs). This causes existential changes in the structure of experiencing and hence results in a shift in one's being-in-the-world and with others – experiences that cannot be captured by the traditional definition of delusions as false beliefs, which is commonly taken to result from two different impairments: an anomalous perception, and defective reasoning processes that should reject such perceptions as veridical (Ratcliffe 2010,1). According to Ratcliffe (2010, 1), approaches endorsing such a definition of delusions tend to presuppose a rather impoverished conception of experience, where the latter is construed as a kind of input system that presents the subject with assorted perceptual contents, which are then fed into belief-forming processes. In contrast to this type of approaches, phenomenologists maintain that experiencing is not just a matter of content, propositional or not, but argue instead that it incorporates a sense of belonging to the world mediated by our bodily capacities and dispositions (Ratcliffe 2010, 1). This sense of belonging to the world, or, to be more precise, of *me* belonging to a shared world, also offers a valuable tool for understanding yet the most crucial feature of delusions to be addressed, namely the certainty with which such delusions are held. Reasoning is not something that happens independent from how I find myself in the world, residing exclusively in my head, but is, just as the self, embedded in a world shared with others,

meaning that it occurs in a social world and involves various interpersonal checking procedures, which are used to change our beliefs in response to the testimony of others (Ratcliffe 2010, 10 f.). If this background sense of belonging to a shared world is lost, these interpersonal checking procedures do no longer take place, leading to a progressive blurring of the boundary between the intentional states of imagining and believing, thus giving delusions the immense power of persuasion that they have as “imagination are insulated from requirements such as consistency with a person’s various beliefs” (Ratcliffe 2017, 38).

However, according to Michael A. Schwartz and Osborne P. Wiggins (1992, 309), this power of persuasion delusions apparently have is deceptive, as the certainty with which delusions are held is motivated by the need to combat doubt. Referring to Jaspers (1913/1997), they argue that schizophrenic patients have a “double orientation to reality”, in which they are plagued by a conflict between the psychotic world and the shared world. Most importantly, however, though schizophrenics can at times be consumed by the psychotic world, they also remain part of the shared world, because they continue to experience the latter as well. Hence, it is claimed that “the schizophrenic [...] both believes and disbelieves in the reality of the consensually validated world, and he or she both believes and disbelieves in the reality of the delusional world” (Schwartz and Wiggins 1992, 308). Consequently, to overcome doubt, certainty and order is strived for in a hyperreflexive fashion, whereby the delusional world is favoured (Schwartz and Wiggins 1992, 317). However, this certainty remains only something devoutly sought, but never experienced, and as such it would be wrong and misleading to claim that delusions are characterised by certainty and incorrigibility of belief (Schwartz and Wiggins 1992, 317).

Finally, these phenomenological accounts on AVHs and delusions show the many facets Hinzen is merely ignoring, but which are nevertheless essential to understanding the phenomena in question in the first place and thus necessary to consider if one wants to come up with a plausible explanation of their origin. And because Hinzen does not take these aspects to be important, the first question that arises is precisely how the Un-Cartesian framework could explain what is actually left unexplained, namely the various subjective dimensions of schizophrenic symptoms. It is a returning problem we have seen in the case of AVHs and which we are also confronted with in the case of delusions. In fact, Hinzen does no more than state the obvious: in AVHs, voices are perceived as different from oneself, and in delusions, the patient mistakes himself for someone or something else. Based on this, he develops his linguistic account which ends with the insight that some Person Confusion is taking place – though a confusion that is fundamentally grammatical, as his analysis of the

linguistic content of AVHs and delusions is meant to show. But again, this only covers the *what*, but not the *how*. The phenomenological accounts show that the content of experiences is insufficient for describing and, most importantly, explaining the experiences in question. This might even be more obvious in the case of delusions than in the case of AVHs. For, the difference between me saying “I am Jesus” and a delusional person claiming “I am Jesus”, does not lie in a difference in content itself. Even Hinzen acknowledges a difference in meaning despite their content being the same. Accordingly, the meaning of the sentence in my case could be a joke or a metaphor for instance, whereas, in the case of the schizophrenic, it has existential meaning: a denial of the truth of this proposition would amount to a denial of his or her own existence. The difference then is not one based on a specific kind of content, but one based on *how* the same proposition is experienced. But can Hinzen’s diagnosis of a grammatical Person Confusion from 2nd or 3rd Person to 1st Person capture this difference? There are at least considerable doubts, given that his analysis of delusions, and schizophrenic symptoms in general, is heavily based on content and quite explicitly ignores the subjective dimensions involved, not to say how these are related to language, a topic we will revisit in the third chapter. But before moving on, I think it is essential to call attention to recent phenomenological work on language in schizophrenia, specifically because Hinzen criticises that the role of language is not taken seriously enough in research on schizophrenia. It is true that phenomenology and phenomenological work on schizophrenia rather rarely discusses the role of language in experiencing. However, it does not have to deny language a constitutive role for what kind of experiential content we have, but focuses, as we have seen throughout this chapter, on the lived dimensions of such content, i.e. the focus is on a subject for whom and to whom such content is present. Ironically enough, Hinzen does not tell us much about this role of language either. Somewhat recently however, Sass and Pienkos (2013, 476) published a paper focusing on how language is experienced in schizophrenia and other mental disorders in order to give an account of how language is affected, and how these experiences may link with other themes central to schizophrenic psychopathology, including altered experiences of self, body, and the social world.

### III. 3 Linguistic experiences

The reason why I covered disorganised speech or formal thought disorder (FTD) prior to the other core positive symptoms in schizophrenia in the first chapter but only last in the present one is because the disturbance of language is the most obvious in FTD, but the least

mentioned in phenomenology. However, in their paper *Beyond words – linguistic experiences in melancholia, mania, and schizophrenia*, Sass and Pienkos (2013) offer a comparative-phenomenological analysis of linguistic experiences in classical forms of mental disorders in order to provide a long due phenomenological contribution to the linguistic anomalies they present. At the same time, they offer a more thorough analysis ‘beyond words’ of these anomalies that are mostly only considered under “an externalist or structuralist perspective, with an emphasis on linguistic behaviour, syntax, or the like” (Sass and Pienkos 2013, 476). For reasons of relevance and lack of space, I will leave out their discussion of the more superficial differences and similarities of linguistic experiences between schizophrenia and severe mood disorders<sup>14</sup> and instead, focus on more subtle differences that allow for a more accurate and differential characterisation of linguistic experiences in schizophrenia. According to Sass and Pienkos (2013, 484), these more delicate distinctions concern (1) Interpersonal orientation, (2) Attention and context-relevance, (3) Underlying mutations of experience, and (4) Meta-attitudes toward language.

Although the frequency of language disorder in schizophrenia and severe mood disorders may be similar, it is argued that there are subtle, but crucial differences in the severity of the disorder which are indicative of a different interpersonal orientation. In mania, for instance, it is maintained that the manic patient provides the listener with more to relate his sentences together than the schizophrenic person does (Wykes and Leff 1982, 123), suggesting that the former is more likely “to experience greater awareness of the social aspects of speech and greater concern for the needs of the interlocutor” (Sass and Pienkos 2013, 484). In contrast to the manic patient, the schizophrenic is either incapable or reluctant to convey intended meaning and to use language as a means of communicating and interacting with other people (Sass and Pienkos 2013, 484), which is reflected for instance in statements like “We are already standing in the spiral under a hammer” (Kraepelin 1919/1971, 56) and “Death will be awakened by the golden dagger” (Sass 1992, 177).

Apart from the fact that a lot of patients are not aware of the poverty of the content conveyed, it has been observed (Bleuer 1950; Laing 1965; Liddle and Barnes 1988; Sass 1992) that, at least in some cases, this meaninglessness is intended by the patients, possibly to avoid difficult interpersonal experiences, but also to emphasise their uniqueness and their privileged access to a world, as well as language, denied to ordinary people that, in contrast to

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<sup>14</sup> For a detailed account on this topic see: Sass, L. A. and Pienkos, E. (2013). Beyond words, linguistic experience in melancholia, mania, and schizophrenia, in *Phenomenology and the Cognitive Sciences* 14, 475-495.

themselves, cannot overcome conventionalities. Nevertheless, whether done on purpose or not, such behaviour reflects a fundamental alienation and disembodiment from a shared world and a shared language that is characteristic of schizophrenia.

This distinctive alienation from language is furthermore specified by an autonomisation of language, in which the schizophrenic patient experiences a partial or complete divorce of meaning from word, or of signifier and signified, such that words can begin to appear absurd or meaningless, or perhaps meaningful in radically unconventional ways (Sass and Pienkos 2013, 485). This loss of common-sense meaning is the result of a disturbance in the expressive aspect of language, in which the schizophrenic patient exhibits a hyperreflexive attention to or awareness of the look or sound of a word, the latter being typical in clang associations, leading to a total disappearance of all sense of intended or potential meaning (Sass and Pienkos 2013, 485). At the same time, this hyperreflexive attention to words is also experienced as revealing, i.e. as allowing the schizophrenic patient to uncover new aspects and meanings of the words and sentences that are left unnoticed by conventional language use, leading to an unconstrained proliferation of semantic pathways. Although clang associations are also manifest in mania, they always remain context-embedded shiftings, whereas in the case of schizophrenia, words are experienced in the void, in a perplexing “context of no context” (Trow 1997, quoted in Sass and Pienkos 2013, 486), resulting from a “loss of any orienting perspective to anchor or fix the meanings of either words or things” (Sass and Pienkos 2013, 486). This loss of orienting perspective also allows for a better understanding of the loosening of associations observed by Bleuler (1911/1950): “without any definite project or goal for speech, word storage loses the schema necessary to appropriately organise cognitive associations” (Sass and Pienkos 2013, 487).

Other differences between schizophrenia and severe depressive disorders pertain to the underlying type of experiences that preoccupy the patient or that he or she might wish to express: whereas in melancholic patients, language seems to be inadequate to capture their pain, sadness and profound sense of emptiness, the case is more severe in schizophrenia, where language does not only fail to express a particular kind of experiences but generally becomes useless, reflecting a more basic discontinuity between language and experience (Sass and Pienkos 2013, 487). It is furthermore claimed that this discontinuity between language and experience is reflected in various complaints of unreality, which in turn may indicate a subtler, but profound disturbance of minimal selfhood, in the form of hyperreflexivity, which reveals to the patient aspects of experience that as such must not necessarily consist of anomalous experiences, but rather experiences that do not usually enter

the focus of our attention. In fact, the authors argue that the phenomenon of hyperreflexivity *transforms* experiences into something distinct from what other experience (Sass and Pienkos 2013, 487) and for which there are no ready-made linguistic expressions. Together, these distinct experiences and the lack of possibility to linguistically pin them down and communicate them to others constitute the motivation for a kind of private language – a language that only the patient can use and understand. Hence, as one schizophrenic sums it up, language in its conventional form and use, is not only “inadequate in degree, but rather in kind” (Sass and Pienkos 2013, 489).

Finally, an analysis of linguistic experiences reveals that schizophrenia is characterised by a particular meta-attitude toward language involving a more general alienation from language-as-such, manifested in the fact that schizophrenic persons often perceive language as absurd and arbitrary, an implication of hyperreflexivity. To illustrate the extent to which language is experienced as absurd or ridiculous, Sass and Pienkos (2013, 489) provide the example of a young man who, while holding up a cup, asks his friend: “Is this a cup? Or is it a pool? Is it a shark? Is it an airplane?”, which reflects a rejection of the fundamental rules of language. In an effort to overcome this felt arbitrariness of semantic conventions and in an attempt to communicate something that seems unavailable through conventional meanings, it becomes understandable why many people with schizophrenia resort to neologisms – the creation of new words.

On the other hand, schizophrenia is also marked by an experience of words as omnipotent, sacred objects imbued with magical powers that can create entirely new realities or are experienced as taking on a life on their own, “responsive, almost in possession of some sort of intrinsic agency or intentionality” (Sass and Pienkos 2013, 490). In contrast to the creation of neologisms and a private language, in which the powerlessness of language motivates the patient to create his or her private language, it is the subject that is powerless here and not vice versa. Hence, schizophrenia is marked by certain paradoxes of omnipotence and powerlessness, which we do not only see reflected in schizophrenic experiences of language but also of other people: at times feeling that everyone and everything is controlled by them, and at other times experiencing themselves as automatons or puppets of an omnipotent, alien force (Sass and Pienkos 2013, 490).

Again, a comparison between a phenomenological analysis of linguistic experiences and Hinzen’s linguistic account of disorganised speech shows to which extent the latter is incomplete as it leaves out crucial aspects of schizophrenia that are nonetheless crucial to its understanding. Apart from the fact that phenomenology provides a much richer account of

the what-is-it-likeness of schizophrenia, including the existential shifts and altered interpersonal relations we have encountered throughout the present chapter, the analysis of linguistic experiences also provides a deeper insight into how language is involved in these changes. Furthermore, it shows how language can be intentionally manipulated by the patients to respond to an environment they no longer feel connected to, which is reflected in a shift in the normal functioning of language as creating a shared identity to a medium for differentiation and exclusion. These insights into the role of language we cannot get from an account that focuses solely on content and its linguistic structure. But it is particularly the element of intentionally producing disorganised speech, that I think is problematic for Hinzen's account. Although it is often the case that schizophrenics are not aware of their disorganised speech, this is definitely not the rule. As such, just as we have seen in the case of hallucinations, where patients are often able to differentiate between their own thoughts and their voices, the fact that schizophrenics can intentionally produce disorganized speech remains unexplained by Hinzen's account. And this does constitute a problem. For, it begs the question whether disorganized speech is indeed primarily a matter of a disruption of grammar. Sure, as a matter of fact, the linguistic structure of schizophrenic speech is disturbed, but, at least in some cases, it can be intentionally so.

Another feature of schizophrenic experience that strikes me as problematic for Hinzen's account is its ineffability many patients complain about, which I find hard to understand in terms of a malfunctioning of grammar. What is experienced is not something that was describable before, and then, through a disturbance of grammar, becomes suddenly indescribable and unshareable. Instead the ineffability of schizophrenic experiences has its roots in, as Ratcliffe (2017) calls it, an unfamiliar kind of experiences – experiences that have never been experienced before, and that cannot be assigned to any type of experiences we commonly have. Hence they evade attempts to be pinned down by language.<sup>15</sup> There are no words that can accurately describe these experiences because they are not part of those experiences that can be shared. Already Wilhelm von Humboldt argued that language is rooted in dialogue, and many theorists have maintained that language could not even be referential were it not also shared (Sass and Pienkos 2013, 477). On the hand, language thus

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<sup>15</sup> However, we need to be aware that phenomenological psychopathology relies heavily on subjective accounts given by patients. As such, while these reports might not be felt by the patients as an accurate account of their experiences, we are still able to distill some common features and get a glimpse at the kind of experiences they are having. I think this is important to mention, because it relativises the expression of ineffability, given that at least bits and pieces can be somehow shared by the patients, even if it is only its ineffable character. If there was no effort done to make those experiences intelligible to a certain degree, phenomenological psychopathology, and all the insights into the nature of various mental illnesses it has brought about, would be useless.

presupposes a shared ground of experiencing in order to function, which is not just established with the acquisition of language. On the other hand, language also makes things shareable and both determines and limits how and to which extent they can be shared.<sup>16</sup> The ineffability of schizophrenic experiences then certainly involves a breakdown of the function of language, as Sass and Pienkos (2013) have already suggested, but it does not arise from it. Instead the problem lies in the fact that schizophrenic experiences are not shareable to begin with as they fall out of the spectrum of the experiences we commonly have.

The ineffability of schizophrenic experiences also touches upon a more general question about language's possibility or inadequacy to convey the subjective character of experiences. We do not need to take the example of schizophrenic experiences to think of events in our own lives that might be very hard to convey through language, e.g. falling in love, grief, and emotions in general. Poetry and art are good examples of our attempts to capture what seems to evade our ordinary use of language. However, even if language can never fully grasp the subjectivity of my experiences, e.g. the grief that makes my heart ache, the way I felt when I fell in love etc., people can still in general relate to these experiences, even if my experience of those emotions might not be the same as their experience of them. Why is that so? Because at a general level, they constitute common experiences we all have. This, however, is, as we have said before, not the case in schizophrenia. The ineffability of schizophrenic experiences is not merely due to a here assumed inherent inadequacy of language to convey lived experience in general. Rather, since the kind of experiences schizophrenics have do not belong in the realm of experiences we commonly have and thus cannot be (easily) shared. However, what cannot be shared, cannot be expressed by language either, at least not in its conventional form. But what about its artistic, poetic use? Is it possible, that poetry represents a key to accessing the schizophrenic world, to touch upon a realm of experiences that cannot be grasped by the conventional use of language? Furthermore, is it possible that the poetic use of language can reverse the split between the subject and the object of experience? We will address these questions in chapter 4.

But before that, we will have a closer look at yet another essential research area on the nature of self, namely that of developmental psychology. As we have alluded to earlier, infancy research in developmental psychology offers strong support for the existence of a primitive, prelinguistic form of self and self-knowledge. As such it does not come as a surprise that

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<sup>16</sup> However, though language is the medium we most often revert to, at least as adults, it is by far not the only, and certainly not the most primitive form of sharing and communicating experiences, as we will see in more detail in the following chapter on the developmental stages of infancy.

phenomenologists often refer to evidence from that research area to support the phenomenological concept of minimal self. So far, so good. Yet, this alone, cannot put the minimal self out of risk, as it remains to be analysed how it relates to the linguistic self. As such, the critical question is whether with the acquisition of language the minimal self is transformed into a linguistic self, or whether it survives the emergence of language and continues to exist alongside a linguistic self. However, if the latter is the case, and this is indeed the argument of the third chapter, the further question arises as to how they relate to each other beyond the mere fact that one develops prior to the other. In other words, the problem is whether and to which extent they might mutually influence each other, and what it implies for our understanding of schizophrenia. This will be the main topic of the forth chapter. But before we can move on to this chapter, we need to establish first that the minimal self is not transformed into a linguistic self with the acquisition of language. For this, in turn, we need to have a closer look at Hinzen's understanding of the linguistic self in the first place.

### CHAPTER III: THE SENSE OF SELF AT BIRTH AND THROUGHOUT INFANCY – INSIGHTS FROM DEVELOPMENTAL PSYCHOLOGY

#### I. Hinzen's account of self revisited

The big issue with Hinzen's account of self is that it is not really an account at all. As I have said on several occasions, he basically ignores the whole subjective dimension of experience. This, in turn, makes it hard to identify any other feature of self beyond its dependence on language and its equation with the grammatical 1. Person. This leaves us with more speculations than actual information. For instance, as we have seen in the first chapter, it is unclear at which stage of human development language emerges and whether and how differences between stages are made. Moreover, it remains unclear whether Hinzen sees the first-person perspective as something that is only *achieved* through language, as suggested by the following quotes:

The “first-person perspective”<sup>17</sup> is stressed in its importance, yet the Cartesian assumption appears to be that such a “perspective” is somehow available independently of language, through introspection—despite the fact that “first person” is a grammatical distinction: The notion “first person” cannot here have a non-grammatical sense, as in “the first person entering the room”. (Hinzen 2014, 246)<sup>18</sup>

And:

The very fact that we speak of a “first-person perspective” indicates that the notion of a perspective as such is insufficient to capture the required distinction: Grammar has to be added. Zahavi<sup>19</sup> stresses that self-awareness involved in conscious states cannot be construed along “subject-object” lines, yet it is the grammar of self-reference that precisely tells us how this is the case: The grammar of 3rd-person object reference (“the/my self”, “my body/brain”) is different from that of 1st-person reference (“I”).<sup>20</sup> The grammatical distinction is essential: We would worry about an English-speaking child who never referred to itself in the grammatical 1st person. (Hinzen 2014, 246)

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<sup>17</sup> Zahavi, D. (2006). *Subjectivity and Selfhood*. Cambridge, MA: MIT Press.

Lowe, E. J. (2008). *Personal Agency*. Oxford: Oxford University Press.

<sup>18</sup> This quote shows that Hinzen misunderstands the phenomenological concept of minimal self as he claims it to be the result of introspection, which is exactly not the case: it is not the result of reflection nor do we have to be aware of it in any way. In Zahavi's own words (2015, 36): “Self-consciousness is not something that only emerges the moment one scrutinizes one's experiences attentively; rather, in its pre-reflective form it is present the moment I consciously experience something. It does not exist apart from the experience, as an additional experiential state. It is not brought about by some kind of reflection or introspection or higher-order monitoring, but is an intrinsic feature of the primary experience.”

<sup>19</sup> Zahavi (2006), 27–29.

<sup>20</sup> Bianchi, V. (2006). On the syntax of personal arguments, in *Lingua* 116, 2023–2067.

Martin, T. and W. Hinzen (2014). The grammar of the essential indexical, in *Lingua* 148, 95–117.

Or whether it is something that exists already prior to language, though nevertheless insufficient for “real” selfhood, which seems to be suggested for instance in the claim that different layers of self exist, and the acknowledgement that not all must necessarily involve language. At first glance, that seems to be a contradiction in Hinzen’s account. However, we have also seen that Hinzen constantly reminds us of the difference between humans that have acquired language and prelinguistic and non-linguistic animals. Though, as we have seen in the first chapter, it remains unclear at what point Hinzen understands infants to differentiate from animals, and details concerning the transition from a prelinguistic to a linguistic stage are missing<sup>21</sup>, Hinzen claims suggest that with the acquisition of language something new is born, something that is unique to those that possess the capacity for language, thus something that radically changes our previous mode of existing. Consequently, rather than a contradiction in his account, I think that what Hinzen is suggesting is that our previous pre-linguistic structures that we might share with animals are radically transformed, including the subjective dimension involved in experiencing. It follows from this, that language not only changes the content of experience but the way it is experienced as well, which consequently differs from the way of experiencing we might initially share with animals. A similar idea has also been suggested by a variation of the narrative account by Marya Schechtman (2011) and Anthony Rudd (2012). Both argue for a qualitative difference in the first-personal character of experiences between narrators and non-narrators, and as such a transformation of how something is experienced, without denying that a more primitive form of subjective experiencing shared with non-human animals and notably seen in prelinguistic infants, exists. In other words, Schechtman’s argument is, that

the kind of phenomenological self-consciousness that makes a self is a qualitatively different kind of consciousness than the brute first-personal awareness we presumably share with many animals, and that this different kind of consciousness requires narrative. The idea would be that the character (and not just the content) of first-personal experience is different for self-narrators than for non-narrators. (Schechtman 2011, 410)

Similarly, Rudd claims that

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<sup>21</sup> Though it seems that he sees the differentiation to emerge quite early, as becomes evident in his claim that the human-specific form of reference is in place from the day of birth. However, another important point to keep in mind, is that the differences Hinzen describes in the first chapter do not concern the experiential dimension of experiences, rather what and how content is communicated.

infants do not have a narrative sense of self, but they do presumably have some sort of basic experiential selfhood; they are at least mental subjects. But it is not as if this basic infantile non-narrative subjectivity persists into adulthood, alongside the developed narrative sense. Rather, as the child grows and starts to develop self-consciousness, his or her basic subjectivity develops into narrative selfhood. (Rudd 2012, 195)

As should be evident from both accounts is the claim that, while something like a basic non-linguistic subjectivity can well exist at a prelinguistic stage, it does not so with the progression in development. Instead, it becomes radically transformed through language and socialisation. This seems to fit quite well Hinzen's emphasis on the *relevant* kind of selfhood, we saw earlier in the first chapter.

Though Hinzen himself does not explicitly claim this, it is the best that we can make of his contradictory account, and there are clues in his works that support the interpretation at hand. For one there is the apparent contradiction, which of course might be just a weakness of his account, a consequence of his scarce analysis of self, but I think that it is rather suggestive of a wholly different understanding of subjectivity, one that we also see reflected in Schechtman's and Rudd's account. Furthermore, Hinzen and Rosselló give an example of a self-disturbance that precisely seems to endorse a view on which experiencing itself is mediated by language. Given this rare opportunity, let me once again quote this passage in its authenticity:

Consider an example of a "self-disturbance" reported as: "I often feel that it is not I who is thinking." Could a structurally rich and meticulously articulated thought such as this reflect "experiences" that are as such non-linguistic and prior to language, yet described correctly by this sentence? How could the "experiences" *be* correctly described, if they did *not* exhibit the structural distinctions the sentence encodes? Having the experiences in question takes *thought*, it is not like seeing a flash of red. A person of whom the above sentence is true is richly reflecting on his or her experiences as and when these occur, activating the conceptual network<sup>22</sup>, and combining its element into meaningful thoughts. The sentence in question could not be true, in particular, without such a person at the moment of such experiences having a *notion* of "thought"; or a sense that a thought can be *mine* or *yours*; or that a thought is not a *fact*. (Hinzen and Rosselló 2015, 8)

We can acknowledge that the report of experiences requires language and that everything we know of what it is like to have a mental disorder, such as schizophrenia, has been reported by

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<sup>22</sup> Binder, J. R., Desai, R. H., Graves, W. W., and Conant, L. L. (2009). Where is the semantic system? A critical review and meta-analysis of 120 functional neuroimaging studies, in *Cerebral Cortex* 19, 2767–2796.

patients through language. This alone is an element often overlooked or simply tacitly taken for granted. This holds true for phenomenological psychopathology as well. However, this is about using language as a tool, and as such not what Hinzen is centrally implying in the quote. Rather it seems to imply that having the experience reported would not be possible without language in the first place, as it is claimed to take thought, and thinking does not happen independently of language. This furthermore underlies his understanding of self as a reflective construction, which is also exemplified in his wrong interpretation of the phenomenological concept of minimal self as something we get to through introspection (see first quote on p. 33). While again we do not exactly know when the linguistic structuring of experience actually starts – though, as we have seen in the first chapter, that Hinzen takes it to start quite early in the child’s development, I suggest that we can make the most sense of Hinzen’s account if we interpret it as implying that with language not only the content but also the first-personal form of experiences is radically changed. Only if we assume this, we can make sense of the apparent contradiction. It is a possibility we at least have to consider, given the fact that Hinzen himself does not go into the topic of the subjectivity at all. Instead, the most we can get from his account are hints pointing in a certain direction, and even here we are not given them straight away, but through his criticism of the phenomenological account, which he simply judges to be naive: “A purely phenomenological account of self-disturbance, which were to see human experience as taking place in a completely prelinguistic experiential space, with language as only a secondary method of “translating” its contents for others, would be naive” (Hinzen & Roselló 2015, 8).

If we assume the interpretation at hand to be true of Hinzen’s account, it raises an important question, one that is crucial and decisive regarding whether schizophrenia fundamentally involves the minimal self or the linguistic self, namely whether experiential selfhood, i.e. the minimal self, remains invariant through development or whether it is actually transformed and altered through language acquisition. In other words, is the linguistic self only a layer on top of a pre-existing structure, a minimal self that necessarily precedes any subsequent layers of self, or does the language radically transform the latter, “just as dye mixed with water leaves no water uncoloured” (Zahavi 2014, 62)? However, even if we grant that concepts and language radically change and pervasively shape our experiences and that we experience the world and ourselves differently because of our capacity for language, we have to wonder how we got there and what made this transition from a prelinguistic to a linguistic level possible. We should not make the mistake of overlooking the difference between the what and the how of experience: what we experience might well be different, but that doesn’t show or imply

that the basic first-personal character of experience is also different (Zahavi 2014, 62). And it is precisely the latter, which enables us to *have* experiences in the first place, that constitutes the continuous link between the different layers of self and thus the common ground between the “proto-subjectivity” of animals and infants and “the full-fledged subjectivity” of those that have already acquired language (Zahavi 2014, 62). If we, however, take the view argued for by Schechtman, Rudd, and suggested by Hinzen, and maintain that the first-personal character of experience differs between layers of self, especially here between the minimal self and the linguistic self, then we take away that common ground and are faced with the mystery of how we got where we are today. According to Zahavi (2014, 62) this leaves us with an unbridgeable dualism between the non-conceptual sentience of the infant and the conceptualised mind of the adult, which he considers to be intolerable, claiming that one must be able to account for the difference between the two that does not make their developmental connection completely unintelligible.

A more in-depth look into infancy research in developmental psychology will help to clarify the developmental progression from primitive to more elaborate levels of self and further illuminate, in addition to the criticism raised by Zahavi, why the account of self we have reconstructed from Hinzen’s account ultimately has to fail. The main argument that will be developed throughout the remainder of the chapter comes from Daniel Stern’s work on the self in infancy, and pertains to the idea that different levels of self coexist, instead of being transformed with the emergence of subsequent layers. Ultimately, Stern’s account will show that the minimal self is not transformed into a linguistic self with the acquisition of language, but continues to exist throughout life.

## II. The infant’s subjective experience and its importance for psychopathology

“How do infants experience themselves and others? Is there a self to begin with, or an other, or some amalgam of both? Posing these questions is something like wondering what the universe might have been like the first few hours after the big bang?” (Stern 1998, 3). These are the central questions of Daniel Stern’s book *The Interpersonal World of the Infant* (first published in 1985), and they are the central questions of this chapter as well. Why looking at infant experiences, if we want to know whether schizophrenia is fundamentally a disturbance of minimal self or linguistic self? After all, it is commonly argued that the disease onset is typically post adolescence (16-25 years) (Jones et al. 2011, 1163). It seems there is a discrepancy between the two groups of people we are addressing here, the group of schizophrenics and those of newborns and infants, that do not suffer from schizophrenia.

Thus, one might question the underlying method or strategy of the present thesis. However, as we have seen throughout the previous chapters, the debate on the nature of the self disturbance in schizophrenia necessarily leads to a debate on whether the minimal self – a primitive form of self-awareness already present in infants – persists throughout development or whether the acquisition of language forever transforms this kind of self into one that is linguistically structured essentially. Reaching an understanding of what infant experience is like, what kind of self is involved, how it is being shaped, and whether it persists or will be transformed throughout development, is crucial for clarifying what kind of self is involved in schizophrenia, and what role language plays in the constitution of this self. The resolution of this debate is of crucial importance, as our whole understanding of the pathogenesis of schizophrenia and choice of treatment methods depend on it. It will furthermore have consequences for the two main disciplines involved in this debate, namely phenomenology/phenomenological psychopathology and linguistics.

To summarise the importance of infant experience in understanding mental illnesses, Stern writes:

Since we can never crawl inside an infant's mind, it may seem pointless to imagine what an infant might experience. Yet that is at the heart of what we really want and need to know. What we imagine infant experience to be like shapes our notions of who the infant is. These notions make up our working hypotheses about infancy. As such, they serve as the models guiding our clinical concepts about psychopathology: how, why, and when it begins. (Stern 1998, 4)

While the phenomenological account of minimal self is inspired by the work of developmental psychology, and often refers to research on infancy to support the concept of a primitive form of self-awareness, a more detailed account of how this minimal self relates to possibly other senses of self, like the linguistic self posited by Hinzen, is missing.<sup>23</sup> The same applies to Hinzen's Un-Cartesian framework as well. However, in order to answer the question on what kind of self is essentially affected in schizophrenia, we need to ask first whether and how the minimal self and the linguistic self might be related, and whether multiple senses of self can coexist. Otherwise, we cannot convincingly argue for one or the other. Because Stern's analysis is one of the most influential and exhaustive accounts of subjective experiences in infancy up to this day, most of the remainder of this chapter will be

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<sup>23</sup> This will ultimately turn out to be problematic for the phenomenological position, see chapter 4.

dedicated to a more detailed presentation of his theory. At the same time, I will try to situate the phenomenological concept of minimal self and Hinzen's linguistic account in it.

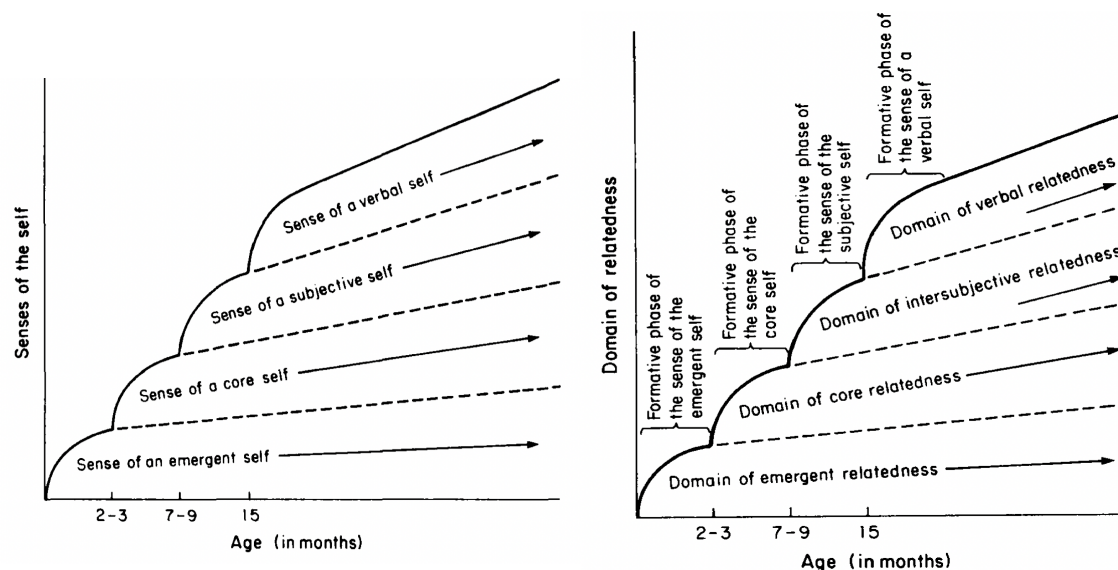
### III. From infancy to adulthood: Stern's four senses of self

What exactly is the self and how much do we actually know about it? The previous chapters have shown that an agreement on what the self is, is far from being a closed case. This disagreement has its roots primarily in the fact that, in contrast to the linguistic position, phenomenology argues for a self beyond self-reflexive awareness and language, and as such posits an object of investigation that is not as readily observable as the kind of sense of self we arrive at in the former case, i.e. a conceptual, *explicit* (cf. Rochat 2003, 2010) knowledge of self as the result of reflection or stepping back from immediate experience. In accordance with the phenomenological position, it is a basic assumption of Stern's book that some senses of self do exist long before explicit self-awareness and language. However, Stern is not alone in his endeavour to reconstruct the ancestry of reflexive awareness by means of developmental psychology. Extensive work on the origins of the self has been conducted, to mention only a few, by psychologists Philippe Rochat (2003, 2010) and Ulric Neisser (1988, 1991, 1995), who, similar to Stern, also argue for the existence of multiple layers of self, Alan Fogel (1993, 1995), Michael Lewis (1999), Andrew N. Meltzoff and M. Keith Moore (1995), Eleanor J. Gibson (1988, 1995), and James J. Gibson (1979). Although differing in their concrete formulation of the origin of the self, they all share the belief that there exists a sense of self from the outset of development which precedes and is constitutive for the emergence of a conceptual sense of self. According to Rochat (2010, 326), a major aspect in regard to the differences in theories of the origin of self is that infancy researchers distinguish between different kinds of preconceptual knowledge pertaining to this self, namely knowledge that infants develop in the physical domain (as for instance Neisser's ecological self, Stern's emergent sense of self, but also to some extent his core sense of self) and the interpersonal domain (Neisser's interpersonal self, Stern's core, subjective and verbal sense of self). Some infancy researchers emphasise the interpersonal domain, claiming that the infant self is being fundamentally shaped by interactions with others (e.g. Fogel 1993, 1995; Lewis 1999, Meltzoff 1995), whereas others, notably also Zahavi himself, argue for a primacy of the physical domain over the interpersonal domain (to some extent Stern 1998/1985 and Neisser 1991), and still others see the domain of physical and interpersonal domain as equiprimordial (E.J. Gibson 1988, 1995; J.J. Gibson 1979). However, it should be noted that it is sometimes controversial where to localize different theories in the debate. For

instance, Rochat (2010) and De Haan (2010) disagree on Neisser's position, the former interpreting Neisser's ecological self as pertaining to the physical domain exclusively, whereas the latter argues it to belong to both domains. At the heart of this disagreement lies the question of whether the infant's relating to the world is always already social relating (see discussion in De Haan 2010). Similarly, it is not entirely clear where to put Stern in this debate. His view is somehow particular, as he primarily focuses on the infant's experience of its interpersonal world, and hence reflects largely on those senses of self that are essential to daily social interaction, and not to encounters with the inanimate world (Stern 1998, 7). Yet, at the same time, he argues that in the period between birth and two months, the infant develops a sense of self in the physical domain, which he refers to as the emergent sense of self, that does not depend on interpersonal relationships per se, but rather on intermodal capacities it is equipped with from the beginning. As we will see, the physical domain remains also central in his descriptions of the level of a core sense of self (which is the one closest to the phenomenological concept of minimal self), where the development of the infant's sense of a body distinct from others is furthered, yet with the difference that this is mostly achieved now through interpersonal interactions, which Rochat (2010, 324) refers to as "primary intersubjectivity", which mainly refers to the infant's sense of shared experience manifested in dyadic face-to-face interactions.. As such, for Stern, the physical domain is also mingled with the interpersonal domain and the latter is, to at least some extent, constitutive for the physical domain. The core sense of self also constitutes a transitional level between an exclusively physical domain and a "truly" intersubjective domain, which includes more than just "primary subjectivity". It should be noted, that there is a certain ambiguity involved in the use of the term "interpersonal" or "intersubjective", as becomes already evident with the expression of a *primary* intersubjectivity. This ambiguity is also confirmed by Stern when he introduces the domain of *intersubjective* relatedness as the successor of the domain of core relatedness. Though this shows that intersubjectivity is taken to come in degrees, the core self is already a social self, as Stern himself maintains that it is only the emergent sense of self that is asocial (see next section). This is an important claim, as it supports an interpretation of minimal self as being already social, though not yet in the full sense of the term.

But first things first, let me start by giving you a short overview of the theory, partial aspects of which have already been anticipated above, that will be analysed in more detail below. Stern argues for the existence of four different senses of self, each with its respective domain of relatedness, that emerge "in quantum leaps" (Stern 1998) from birth to the age of around 2 years, and mark, according to Rochat (2010) the transition from an implicit, prelinguistic to

an explicit, conceptual, and linguistic sense of self: (1) the sense of an emergent self forming from birth to the age of two months; (2) the sense of a core self, which forms between 2-6 months of age and which is the one closest to the phenomenological concept of minimal self; (3) the sense of a subjective self arising between 7-15 months; (4) and the sense of a verbal self, which forms after that, and which is the only sense of self, which is not preverbal (Stern 1998, 11). Throughout the developmental progression of the senses of self from emergent to verbal, the infant acquires new behaviours and new capacities that are reorganised to form new organising subjective perspectives on self and other that are necessary for the emergence of the subsequent sense of self. However, according to Stern, it is not the case that the previously developed senses of self are simply replaced by the subsequent ones, rather, while the infant develops and discovers new senses of self and other, the previous senses of self coexist with the new ones and constitute distinct forms of experiencing self and other. “Once formed, each sense of self remains fully functioning and active throughout life. All continue to grow and coexist” (Stern 1998, 11).<sup>24</sup> As such, we are not just dealing with successive phases, but also with simultaneous domains of self-experience (Stern 1998, 29). Figure 3 and 4 nicely illustrate how Stern envisions the developmental progression of the senses of self and how they continue to be active as distinct forms of experiencing.<sup>25</sup>



<sup>24</sup> However, the idea of growing, i.e. becoming more elaborate over time, and coexistence raises the question of how the different senses of self might influence each other in their further development. While we will see that Stern offers a detailed account on the different senses or layers of self in human beings, and the chronological order in which they develop from birth on, he does not provide a straightforward account of the possible relationships between them. But this is precisely what we need, in order to understand how the minimal self and Hinzen's linguistic self are involved in schizophrenia. See chapter 4 for a continued discussion.

<sup>25</sup> Figures 3 and 4 can be found in Stern 1998, 32f.. Note also the dashed lines between the different layers of self, which suggest that each level is subject to being further shaped by the other levels of self. This will also be relevant for chapter 4.

**Figure 3 and 4:**

The four levels of self and their developmental progress. (From Stern 1998, 32f.)

In the following sections, I will give an overview of the four senses of self that emerge as the maturation of the infant's capacities in the progress of development allows for new subjective perspectives on the self and the other.

### III.1 The sense of an *emergent self*

Having a sense of self is crucial for organising and unifying the multitude of experiences we are confronted with when coming to this world. However, as was alluded to in the section above, Stern argues that the way we organise these experiences changes qualitatively throughout development, and with it are changed the experiences of self and other. Infants undergo a first quantum leap or qualitative shift at the age of two months, where they start to make direct eye-to-eye contact with the caregiver (Stern 1998, 37), an event referred to by Rochat (2010, 324) as “primary intersubjectivity”, suggesting that by the age of two months infants already have an implicit sense of others and themselves as reciprocating (social) agents. However, what about the time before the infant reaches this age? What about the processes that lead to this qualitative shift in the sense of self and other in the first place, i.e. what Stern (1998, 47) calls the coming-into-being of organisation? Here within resides the motivation to posit a sense of an emergent self. According to Stern (1998, 45), infants cannot only experience the sense of an organisation already formed and grasped, but also the coming-into-being of organisation and self, and this is what he refers to as the sense of an emergent self: it is an experience of a process as well as a product. In contrast to Rochat, who identifies this kind of self as being part of our implicit knowledge of ourselves, or as an implicit self-concept, Stern prefers to refer to it as an experiential self (hence the use of *sense* of self), which operates outside of awareness, and not as a concept or knowledge of self – terms that by their nature are generally related to reflection. It is during the period from birth to the age of two months, that the infant is actively developing such a sense of an emergent self, i.e. an experiential sense of organisation in formation, that will remain active for the rest of its life (Stern 1998, 38). Furthermore, it is because of this experience of a self coming-into-being, that Stern claims that there is no moment in the life of the newborn, where it would be in a total state of undifferentiation: “there is no confusion between self and other in the

beginning or at any time during infancy” (Stern 1998, 10).<sup>26</sup> Conversely, because in the period between birth and the age of two months, a self is only in the process of emerging, there can also be no moment (yet) in which the infant experiences a total state of differentiation. This will only become possible with the development of the subsequent senses of self.

The idea of an emergent sense of self assumes that a formed sense of self that organises experience is not given from birth on, but yet forming from the very beginning. Following this line of thought, there is reason to assume then that also the phenomenological concept of minimal self is not something that is simply given to us, but something that only comes into existence as the result of a prior process of formation.

In order for the infant to have any formed sense of self, there must ultimately be some organization that is sensed as a reference point. The first such organization concerns the body: its coherence, its actions, its inner feeling states, and the memory of all these. That is the experiential organization with which the sense of a core self is concerned. Immediately prior to that, however, the reference organization is still forming; in other words, it is emergent. (Stern 1998, 46)

As we will see in the next section, the minimal self is the closest related to Stern’s descriptions of a sense of core self, in which this organisation of the body allowing for the characteristic experience of mineness has already been achieved – an achievement that is not to be confused with the intellectual, self-reflexive achievement of a sense of self underlying different social or narrative accounts, as well as Hinzen’s account.

Regarding the emergent sense of self, the question arises as to how the newborn experiences self and other in the absence of a pre-given organisation of experiences. Conversely, one might ask wonder whether infants are able to experience non-organisation? According to Stern, while infants at that age have many different, but separate experiences that remain unrelated, they are not aware of this lack of connection between them.<sup>27</sup> Hence, the sense of an emergent self has two components: the product of forming relations between isolated experiences and the process of coming-into-being of these relations (Stern 1998, 47).

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<sup>26</sup> Stern is here arguing against the widespread belief among developmental psychologists of his time (e.g. Mahler, Pine, and Bergman 1975; Piaget 1952; Wallon 1942/1970), namely that there exists an initial state of undifferentiation from the environment. Apart from Stern, many other infancy researchers (e.g. DeCasper and Fifer 1980; Rochat and Hespos 1997; Walton et al. 1992) have argued that this view needs to be revised in light of the evidence of the abilities infants have been observed to have from birth on, such as instrumental learning, social attunement, as well as differential responding to self and nonself stimulation (Rochat 2010, 325).

<sup>27</sup> From a phenomenological viewpoint, this boils down to the claim that the infant does not yet experience what it experiences as belonging to itself, i.e. as being “mine”.

Now, let's turn to the processes involved in the formation of a sense of an emergent self and other. The most important processes that Stern mentions in detail include amodal perception and vitality affects. Because both represent recurrent themes in his analysis of the infant's developing sense of self and other, I will now give a brief outline of each of them.

### III.1.1 Amodal perception

How do infants learn to connect experiences? And how do they coordinate information that comes from several different modalities but emanates from a single external source (Stern 1998, 47)? In other words, how do they come to know that different perceptual experiences like, for instance, visual, tactile, or auditory experiences etc., might be elicited by one and the same thing? The answer is: amodal perception – the infant's innate general capacity to take information received in one sensory modality and translate it into another sensory modality (Stern 1998, 51). For instance, an experiment by Meltzoff and Borton (1979)<sup>28</sup> has shown that infants are able to visually identify shapes they have previously only had a tactile experience of “by performing a cross-modal transfer of information that permits them to recognize a correspondence across touch and vision” (Stern 1998, 48), without requiring an initial familiarisation with both sensory experiences. Furthermore, it has been shown that infants are equally able to perform audio-visual cross-modal matching (e.g. infants are able to match levels of sound intensity to levels of light intensity, see Lewkowicz and Turkewitz 1980) and translate temporal information across modalities (e.g. match auditory temporal pattern to visual temporal pattern)<sup>29</sup>. Finally, the same applies to auditory-visual cross-modal matching (e.g. infants are able to match speech sounds to the correspondent articulatory movements of the mouth; e.g. McGurk and MacDonald 1976) and to the modality of proprioception (e.g. correspondence between what infants see and what they do, such as imitation of facial expressions; see Field et al. 1982). Regarding the modality of proprioception, Rochat and Hespos (1977) found that newborn infants that were only a day old were able to discriminate between double touch stimulations and external stimulations by a non-self object, “showing evidence of an early sense of their own body, hence an early

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<sup>28</sup> The experiment conducted by Meltzoff and Borton (1979) consisted of giving initially blindfolded infants, aged between 26 and 33 days, one of two pacifiers, each having a differently shaped nipple. Because they were blindfolded, the sensory experience of the pacifier was limited to the tactile experience of the mouth touching the nipple. After some tactile exploration of their respective shape, the nipples were removed from their mouth and placed side by side and the blindfold was taken off. Results have shown that infants were looking considerably more at the nipple they had just been sucking some moments ago than the one they did not have a previous tactile experience with, demonstrating that infants under the age of one month were capable of intermodal matching.

<sup>29</sup> E.g. Allen et al. (1977); Dermany et al. (1977); Wagner and Sakowitz (1983).

perceptually based sense of themselves” (Rochat 2010, 327). This cross-modal matching of perceptual properties is thought to be based on information that as such does not belong to any particular sensory mode, but transcends it and exists as abstract representations of qualities of perceptions, also referred to as *amodal* representations, that can be recognised by any of the sensory modalities (Stern 1998, 51). This entails, that what an infant primarily experiences are not “sights and sounds and touches and nameable objects, but rather shapes, intensities, and temporal patterns – the more ‘global’ qualities of experience” (Stern 1998, 51). Other such global qualities of experience include number, motion, and rhythm. All of the above referenced experiments have shown, in one way or the other, that infants are capable of intermodal matching already in the first weeks of their lives, suggesting that they possess a capacity to yoke experiences from different perceptual modalities that is innate, and hence does not require initial learning or repeated world experience.

Finally, we might ask how this cross-modal matching of perceptual experiences is experienced by the infant? The most accurate would be to compare it to an experience of *déjà-vu*, i.e. this mysterious feeling of being already familiar with a certain experience. As such, to take the example of tactile-visual matching, when seeing for the first time the object that has previously only been touched, the infant recognises that the visual experience elicits something experienced already before in the tactile experience, namely a shape.

### III.1.1 Vitality affects

According to Stern, another central quality of experience that infants can sense immediately from encounters with others are vitality affects, which are “those dynamic, kinetic qualities of feeling that distinguish animate from inanimate and that correspond to the momentary changes in feeling states involved in the organic processes of being alive” (Stern 1998, 156). Vitality affects do not constitute a limited lexicon of affects and as such can be manifested in any behaviour. Precisely for this reason, vitality affects do not provide the infant with the kind of information signalling a particular emotional state, e.g. being happy, sad, angry etc, but rather capture the more subtle qualities that such a state can be accompanied with. These are, according to Stern (1998, 54) better described in dynamic, kinetic terms, such as “surging”, “fading away”, “fleeting”, “explosive”, “crescendo”, “decrescendo”, “bursting”, “drawn away”, and so on. In other words, vitality affects describe the different ways in which a certain emotional state and other acts that are not directly connected to any type of emotion can be experienced both by the self and by others. The nonverbal experiences of infants are as such not only characterised by amodal perception, but also by vitality affects that they

experience both within themselves and in the behaviour of others. For instance, a smile can be experienced as “explosive”, or one can see someone getting out of a chair “explosively”, whereas in the latter case we do not necessarily know whether this explosiveness is arising out of anger, surprise, fear, and so on (Stern 1998, 56). These and many other ways of exhibiting an emotion and performing an act constitute the primary way in which the infant experiences the world it is embedded in and surrounded by. As such, similar to the case of amodal perception, the infant does not in the first instance perceive some categorical affect, but the more subtle and universal qualities that any of these affects can be accompanied with. Hence, diverse sensory experiences that express the same vitality affect can be experienced as corresponding and are yoked by the infant to create an organisation. Stern (1998, 58) illustrates this on the example of a mother who is trying to soothe her baby: on one occasion she might do so by saying “There, there, there...”, giving more stress and amplitude on the first part of the word and trailing off towards the end of the word, while on a different occasion she is only stroking the baby’s back or head with a stroke analogous to the rhythm of the aforementioned “There, there, there”, similarly applying more pressure at the onset of the stroke and less towards the end. Although the mother performs different acts, the infant recognises the same vitality affect in both situations, as the way the mother performs is analogous. As such, the infant is able to yoke both experiences and recognises them as an instance of soothing.

Both amodal perception and vitality affects are among the most important processes involved in the formation of an emergent sense of self and other. They constitute a form of direct, global perception, in which the yoking of diverse experiences that share amodal features, is accompanied by distinctive subjective experiences – experiences of various organisations in formation – which make up the sense of an emergent self and which lie at the basis of early human subjectivity (Stern 1998, 60). “This domain of experiences remains active during the formative period of each of the subsequent domains of sense of self. The later senses of self to emerge are products of the organizing process” (Stern 1998, 67 f.). And the first of these subsequent senses of self to emerge is the sense of core-self, to which we will turn now.

### III.2 The sense of a *core self*

As we have seen earlier, a first quantum leap in the development of the infant is noticeable at the age of two months. With the newly achieved organisation of experience, the infant’s orientation towards itself and others gains a new perspective. While, we have also mentioned already that, according to Stern, there is never a moment in the infant’s life, not even right

after birth, where it would be in a total state of undifferentiation, it is also not the case that infants at that age have already drawn a clear-cut boundary between themselves and others. With the development of more sophisticated senses of self however, new senses of individuation pertaining to the sense of their own body will form alongside new senses of belonging with others. In the following, we will see how the sense of a core self introduces new ways of individuation and being with others through the establishment of the physical and sensory distinctions between self and other.

### III.2.1 Self versus Other

The core self is the first organised sense of self that infants experience from the age of two months. And this experience is drastically different from the subjective experiences of an emergent self. The list of self-experiences, also referred to as *self-invariants*, now available to the infant, and necessary for the formation of an organised sense of core self and other essentially includes: (1) self-agency, (2) self-coherence, (3) self-affectivity, and (4) self-history (Stern 1998, 70f.). A large part of Stern's account of the sense of a core self is dedicated to a detailed analysis of (1) and (2), especially the different subcategories of invariants they require. I will not go into these in detail<sup>30</sup>, and instead only provide a rough overview. However abstract, it will nonetheless help to get a more complete picture of all the different processes involved in the formation of a core sense of self.

To begin with, Stern breaks the experience of self-agency down into three different invariants of experience: (1) the sense of volition that underlies a motor plan, of which we can but must not be aware of and which precedes a motor act; (2) the proprioceptive feedback (i.e. the sense of the position of our limbs), which in combination with the sense of volition leads to various experiences of the self that the infant is capable to differentiate, i.e. it can differentiate between an action of the self that is willed by the self, an action performed by someone other than the self, and an action of the self that is carried out by someone else (the latter constituting a common symptom of schizophrenia), e.g. the infant's limbs are moved by the mother; (3) the predictability of consequences following the act, which describes the infant's capability to discern consequences caused by itself and those by others in terms of their variability and certainty.

However, the experience of agency would not be possible without the experience of being a single, coherent, bounded physical entity (i.e. the problem of unifying experiences, to which

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<sup>30</sup> For a detailed account, see Stern (1998), 76- 94.

the minimal self is taken to be the solution). Several features of experience are suggested to help the infant achieve self-coherence: (1) unity of locus: describes the infant's capability to identify the actions of others as emanating from a different locus; (2) coherence of motion, i.e. the capability to experience a moving object or person against a stationary background as a coherent entity, as belonging together (Stern 1998, 83); (3) coherence of temporal structure: enables the infant to experience its own movements as sharing a different temporal structure than those emanating from another source (Stern 1998, 84); (4) coherence of intensity structures: describes stimuli emanating from the self (versus other) as sharing a common intensity structure, meaning that the modulation in the intensity gradient of one behaviour or modality generally matches the gradation in the intensity of another behaviour, e.g. as the infant's cry builds in intensity, so do the proprioceptive sensations in the chest and vocal cords (Stern 1998, 86); and (5) coherence of form, which enables the infant to experience form as surviving changes induced by distance, position and expressions. Taken separately, none of these features is sufficient for self-coherence. Only together can this be achieved.

Now, what about self-affectivity and self-memory? The former denotes the infant's capability to categorise the uncountable amount of experiences it already had with many affects through recognising and expecting certain things to happen when experiencing a certain affect, so-called invariant self-events, including proprioceptive feedback, internally patterned sensations of arousal, and emotion-specific qualities of feeling (Stern 1998, 89). Self-history then enables the infant to memorise the three major self-invariants (agency, coherence, affect) and as such allows for continuity of experience through motor and affective memory systems. Finally, agency, coherence, affectivity and continuity embedded in lived experience are being integrated through episodic memory using Representations of Interactions that have been Generalized (RIGs) as its basic memory unit. RIGs are the result of the infant's capacity to aggregate experiences and distil, i.e. abstract out, an averaged prototype (Stern 1998, 98). As an averaged representation of a specific type of experiences, the content of RIGs is not equivalent to any instance of that type, though it also cannot contain anything beyond these instances.

All of the above mentioned self-experiences are mainly achieved through separation and individuation from the other, rather than through experiences of being with others. Nonetheless, they are experiences that are intrinsically interpersonal, in the sense that the formation of the core self requires interactions with others (usually the primary caregivers), such as face-to-face interactions, which we have earlier referred to as a form of early intersubjectivity. The reason for this is that, in contrast to the capacities of the emergent sense

of self, those of the core sense of self are not innate per se, but are formed as the result of the innate capacity for amodal perception plus interpersonal interactions. Conversely, at the level of an emergent sense of self, interpersonal relatedness does not yet exist as distinct from relatedness to things, and as such, by virtue of being indiscriminate (and not by virtue of being unresponsive, because the infant is responsive to both), the infant is considered to be asocial until the age of two months (Stern 1998, 63). Nevertheless, as we have already seen in the context of the emergent sense of self, the sense of a core self constitutes an experiential sense structuring our experiences of self and other, that we are usually unaware of:

A crucial term here is “sense of”, as distinct from “concept of”, or “knowledge of”, or “awareness of” a self or other. The emphasis is on the palpable experiential realities of substance, action, sensation, affect, and time. Sense of self is not a cognitive construct. It is an experiential integration. This sense of core self will be the foundation for all the more elaborate senses of self to be added later. (Stern 1998, 71)

As we have already mentioned earlier, Stern’s understanding of a core sense of self corresponds quite well with the phenomenological concept of minimal self. As such the present analysis of the sense of core self might also be seen as expanding the scope of the phenomenological account of minimal self, for the reason that it provides a detailed insight into the different processes involved in the formation of such a self, i.e. the different self-invariants that it requires and the amodal capacities it presupposes. Further support for the correspondence between the sense of a core self and the minimal self comes from the fact that the former can be shared with many higher nonhuman animals (Stern 1998, 71), and, most importantly, from the relationship between the core self sense of self and psychosis, which includes schizophrenia. As such, Stern claims that the core self is essential for psychological health, as “it is only in major psychosis that we see a significant absence of any of these four self-experiences [that constitute the core self]” (Stern 1998, 71, my addition). In chapter 4, we will see that Stern furthermore identifies psychosis as fundamentally a disturbance of the core self. However, we will also see that the disturbance itself requires more than just the latter.

Yet, there are also differences between Stern’s account of a core sense of self and the phenomenological concept of a minimal self. For one, while considered as minimal by phenomenologists, we could question whether this kind of designation would indeed not be misleading given that according to Stern’s analysis an emergent sense of self precedes the

formation of the minimal self. We have already alluded to this point earlier. In fact the minimal self is taken to allow for a kind of self-experience that is already organised, and as such already contains a certain achievement. The particular kind of self-experience it allows for is that of creating a reference point for the manifold experiences we have, and as such the minimal self is the phenomenological answer to the problem of the union of perception. But in contrast to Stern, phenomenologists have not taken into account the subjective experiences involved in the formation of the minimal self. However, I do not think that this is enough reason to withdraw from a designation of the phenomenological self as minimal, because we should not forget that the emergent sense of self denotes primarily the process of the formation of a self, and as such is not itself an actual self. Hence, to the extent that the phenomenological self does represent this first sense of a formed self, it is indeed minimal. And this minimal form of self is, according to Stern, already a social self.

The core sense of self is not only the result of a certain achieved reinforced separation of self from other, quite the opposite: it is also the result of new ways of relating to the other, new ways of togetherness that have not been possible before. And these are just as much of importance for understanding the many ways in which schizophrenic persons experience themselves and others. This being said, let's turn then to the new ways of self-other relationships that characterise the core sense of self.

### III.2.2 Self with Other: The self-regulating other and evoked companionship

From an objective point of view, it is maintained that one of the most crucial relationships between self and other at that stage is that of a *self-regulating other* that regulates the infant's self-experiences, essentially including the regulation of arousal (like in playing peek-a-boo), affect intensity (e.g. the caregiver's increasing smile intensity elicits an even bigger smile on the infant's face, Stern 1998, 102), what kind of affect is experienced (e.g. interpreting infant behaviour by asking questions like: "Is that cup-banging to be taken as amusing or as a sign of anger?", Stern 1998, 102), but also of security and attachment. All of these experiences are almost continuously regulated by caregivers and they are among the most totally social of our experiences for the reason that they can never occur unless elicited or maintained by the action or presence of another, i.e. they cannot exist as a part of known self-experience without another (Stern 1998, 102). At the same time, they are conceived as mutually created experiences.

But the question Stern is much more interested in is how this self-regulating other is experienced subjectively. In contrast to other theories that label this subjective experience as

one of merging or fusing, in which the infant is unable to differentiate itself from the self-regulating other, Stern (1998, 105) maintains, that while the experience is indeed dependent upon the presence and action of the other, it still belongs entirely to the self of the infant and as such the sense of core self is not breached: the other is still perceived as a separate core self. Instead, how the infant experiences this self-regulating other is simply the infant's experience of being with someone, such that its self-feelings are importantly changed (through regulation of the other) (Stern 1998, 105). The relationship between this altered self-experience and the self-regulating other can sometimes take up our entire attentional field, a paradigmatic case being that of fear (e.g. the calming voice of the other can regulate the intensity of the feeling of being afraid), or in situations when the need for regulation is not met, while at other times it goes unnoticed. This is not only true in infancy, but in adulthood as well. As such, the presence of a self-regulating or nourishing other is a need we do not only have in infancy but one that persists throughout life. As E.S. Wolf (1980, 128) claimed, this psychological need for a self-regulating other is comparable to the physiological need for an environment containing oxygen. And although this self-regulating presence of others goes often unnoticed, "as long as a person is securely embedded in a social matrix that provides him with a field in which he can find, but does not have to be actually utilizing [it] [...], he will feel comfortably affirmed in his total self and, paradoxically, relatively self-reliant, self-sufficient, and autonomous" (Wolf 1980, 128). In terms of the sense of core self, the self-regulating other is constitutive for its integrity, which in turn is necessary for mental health.

But, the necessity for the presence of a self-regulating other leaves yet unanswered the question of how this relationship between the change in self-experience and the regulating role of the other, whether obvious or unobtrusive, is experienced by the infant. That there is a relationship created by the infant is explained by their joint occurrence in repeated lived experiences. As such, lived experience includes the following features: (1) significant alterations in the feeling state that belong to the self; (2) the other person as seen, heard, and felt at the moment of the alteration; (3) an intact sense of core self and other; and (4) a variety of contextual and situational events (Stern 1998, 109f.). These features are then yoked together into *lived episodes*, i.e. actual episodes of life as lived, which lock the different attributes of the experience into relationships with one another, and which become the specific episodes for memory (Stern 1998, 110). Through repetition of these lived episodes, e.g. repeated situations in which the infant is crying or fearful and the mother regulates these emotions by embracing the child, stroking and rocking it in her arms, they become saved as RIGs of being with an other in a particular situation, just as we have seen in the previous

section with the infant's acquisition of RIGs that encode experiences of differentiation of a core self and a core other. Whenever the child is sad or fearful, it will call into mind the specific RIG in which the mother regulates its sadness or fear through embracing, stroking or rocking the child, and thus reactivate some of the original lived experience with the mother as active memory. Stern also refers to this activation of a particular RIG of being with someone as encounters with an *evoked companion* – “an experience of being with, or in the presence of, a self-regulating other, which may occur in or out of awareness” (Stern 1998, 112). Moreover, after an infant has formed a RIG of being with someone, the experience of a self-regulating other can be reactivated in the presence or absence of that person in the form of an evoked companion. For instance, if a six-month-old, when alone, plays with a rattle, it can easily activate the RIG that encodes for all the different instances of mother and child playing with it, and quickly turn initial pleasure into extreme delight and exuberance, expressed in smiling, vocalisations, and general body wiggles (Stern 1998, 113). But again, evoked companions are not only present in infancy, in fact, they never disappear. According to Stern (1998, 116), they lie dormant throughout life, but they remain always retrievable, yet their degree of activation is variable: in cases of great disequilibrium such as loss, for instance, the activation is very manifest.

To wrap this section up, I want to conclude with a quote by Stern that emphasises the pervasiveness and the importance of experiences of being-with for behaviour and mental health:

The notion of self-with-other as a subjective reality is thus almost pervasive. This subjective sense of being-with [...] is always an active mental act of construction, however, not a passive failure of differentiation [...]. Seen in this way, experiences of being-with are not something [...] that one needs to grow out of, dissolve, and leave behind. They are permanent, healthy parts of the mental landscape that undergo continual growth and elaboration. They are the active constitutions of a memory that encodes, integrates, and recalls experiences, and thereby guides behaviour. (Stern 1998, 119)

### III.3 The sense of a *subjective self*

With the acquired physical and sensory distinctions between self and other on the level of the sense of core self or core-relatedness, the conditions are met for the next quantum leap in infant development. In addition to the overt behaviours and direct sensations that marked the core sense of self and other, the infant, now aged between seven and nine months, becomes gradually aware that the inner experiences of others might be similar enough to its own for

them to somehow communicate this and experience intersubjectivity (Stern 1998, 124). Hence a new way of relating to others emerges that catapults the infant from the domain of core-relatedness to that of *intersubjective relatedness*. The kind of mental states that have been observed to be communicated by infants at that point of life and that serve as evidence for the quantum leap in the infant's development are (1) affective states ("This is exciting"), (2) a focus of attention ("Look at that toy")<sup>31</sup>, and intentions to act ("I want that cookie") (Stern 1998, 124). The difference then to what we have previously referred to as primary intersubjectivity is that the infant's repertoire of social interactions is now much broader than before, where it was limited to face-to-face interactions. More concretely, intersubjectivity at the level of the subjective sense of self includes (1) interaffectivity (sharing affective states), which is also emphasised in phenomenology, (2) inter-attentionality (sharing attention), and (3) interintentionality (sharing intentions). Though protolinguistic forms of communication have their first manifestation at that period of time as well, it is maintained that the communication of the above mentioned mental states does not require language, nor does language constitute the primary medium of communication (against Hinzen). Instead, it has been shown that the primary medium and the primary subject of communication are affects and thus most protolinguistic exchanges involving intentions and objects are at the same time affective exchanges (Stern 1998, 133). Furthermore, Trevarthan and Hubley (1978) have commented that the sharing of affective moods and states appear prior to the sharing of mental states that reference objects (Stern 1998, 133). It is thus the exchange of affective states that primarily constitutes intersubjective relatedness. This also parallels the phenomenological literature on nonverbal communication through intercorporeality and interaffectivity, which are inherent to the lived body (Stanghellini 2009, Fuchs 2005/2013). Intercorporeality describes the link between bodily beings through which mutual affection, i.e. interaffectivity, is generated.

The remainder of Stern's analysis of the subjective sense of self is dedicated to the underlying processes of interaffectivity, namely, *affect attunement*. However, in order to understand what affect attunement is the answer to, we might want to know what the actual question is. According to Stern, it is rather unclear how interaffectivity, i.e. the sharing of affective states, works. Accordingly, the question he poses is the following: "What are the acts and processes that let other people know that you are feeling something very like what

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<sup>31</sup> Note that Hinzen interprets the infant's capability to draw attention to something as a proto-grammatical achievement, and as such as the result of language development. Yet, according to Stern, language is neither the primary medium through which such communication takes place, nor is it required for this form of communication, see below.

they are feeling?” (Stern 1998, 138). And how can this be achieved without using linguistic communication? Or else, now referring specifically to infants: how can an infant know that the other person has an inner experience similar to its own? One answer that readily comes into mind is imitation. Indeed, not only developmental psychologists, but also phenomenologists have often referred to imitation and its relation to mirror neurons to constitute the primary mechanisms of interaffectivity. As Fuchs (2005, 98) points out, through intercorporeality the body functions as a “tacitly ‘felt mirror’ of the other”, which allows us to nonverbally understand the current emotional state someone is in through a transfer of his or her felt emotions onto my very own body by mimicking posture, gestures and/or facial expressions. But, according to Stern, this is not sufficient. For, why should the infant infer from a mother imitating, for instance, its facial expression that she is feeling the same thing? The only information the infant can get from such imitating behaviour is that the mother understood what it did, and while she can reproduce the same overt behaviour, this does not imply that she is expressing a similar inner experience (Stern 1998, 139). In other words, the problem with imitation is that it focuses on external behaviour, and not on the inner experience behind that behaviour. Hence, strict imitation won’t do. Instead, what is needed are parental responses that as such do not constitute strict imitations, but still correspond to the original feeling experience of the infant, such that the infant is able to recognise the parental response as a sign of a shared inner experience rather than simply a case of imitating behaviour. This is what Stern (1998, 142) calls affect attunement, “the performance of behaviours that express the quality of feeling of a shared affect state without imitating the exact behavioural expression of the inner state”. Also often referred to by Stern as attunement behaviours, their focus does not lie on the external behaviour, but on the quality of feeling that is being shared. The underlying mechanism of attunement behaviours that makes such sharing possible is essentially cross-modal matching between the infant’s original expression of a feeling state and the parental response behaviour, reflecting the possibility to nonverbally reproduce the same feeling state through different modalities. As such, affect attunement recasts behaviours by way of nonverbal metaphor and analogue (Stern 1998, 161). An example of affect attunement or an attunement behaviour is for instance reflected in the mother’s voice matching the infant’s bodily movements:

A ten month old girl finally gets a piece in a jig saw [sic] puzzle. She looks towards her mother, throws her head up in the air, and with a forceful arm flap raises herself partly off the ground in a flurry of exuberance. The mother says “YES, thatta girl.” The “YES” is intoned

with much stress. It has an explosive rise that echoes the girl's fling of gesture and posture.  
(Stern 1998, 141)<sup>32</sup>

Had the mother only imitated the infant's external behaviour by throwing her head up in the air and raising herself partly up with a forceful arm flap, there could not have occurred an intersubjective exchange of an affective state. However, the mother does not do that. Instead, her behaviour corresponds qualitatively to that of her child in a different modality with the purpose of "interpersonal communion", i.e. participating in the infant's experience, instead of simply imitating it. Generally, Stern (1998, 146) identifies three different (amodal) aspects that can be cross-modally matched: intensity, timing, and shape, which can be broken down into six more specific types of match: absolute intensity (same overall intensity of mother's behaviour compared to the infant's behaviour), intensity contour (changes in intensity over time), temporal beat (matching of a regular pulsation in time), rhythm (matching of pulsations of unequal stress), duration, and shape. These make up the *how* of experience. As such, what it attuned to is not just categorical affects e.g. how an infant expresses joy, but essentially vitality affects which all behaviours manifest, e.g. the way a child picks up a toy.

It is furthermore claimed, that affect attunements occur largely out of awareness, both in the case of the infant and the parent. In fact, it has been shown, that the infant only becomes aware of attunement behaviours when they fail, i.e. in cases in which the parental response does not correspond to the infant's original experience, which, according to Stern (1998, 151), is an indication that infants indeed have some sense of the extent of matching. However, in cases of successful affect attunement, the infant continues its activity uninterrupted. Because they occur mostly out of awareness, attunement behaviours are also considered to significantly differ from empathy. While both share the initial process of emotional resonance (as neither can occur without it), affect attunement does something different with it: it automatically recasts the experience into another form of expression and thus does not proceed towards empathic knowledge or response, but constitutes a distinctive affective transaction in its own right (Stern 1998, 145).

Finally, affect attunement not only plays a crucial role in coming to know which of the infant's subjective experiences can be shared, and thus attuned to by the other, but also which of them can only be experienced by themselves. "What is at stake here is nothing less than the shape of and extent of the shareable inner universe" (Stern 1998, 152).

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<sup>32</sup> Other examples of affect attunement can be found in Stern (1998), 140f.

What about the relationship between the core sense of self and the subjective sense of self? Intersubjectivity requires the physical autonomy (in the sense of bodily individuation, separation from the other) that has been achieved by the sense of core self, since the possibility of sharing subjective experiences can only be possible against the backdrop of a physically distinct and separate self and other (Stern 1998, 125).<sup>33</sup> This physical autonomy, however, is not something that, once it has been established for the first time, is immune to change. To the contrary, the physical boundary between self and other is something that the infant and later the adult needs to continuously keep up. And this is fundamentally achieved through the core sense of self, which remains active throughout life, maintaining our sense of agency, self-coherence, self-affectivity, and self-history intact. As such the sense of a core self and the sense of a subjective self coexist. But they also interact and “each domain affects the experience of the other” (Stern 1998, 125). However, he remains somehow vague on how this interaction and mutual affection is to be understood. One way to interpret this, and the one I suggest here as the most plausible, is to say that with the emergence of the sense of a subjective self, new ways of relating to self and other become possible, of which the sense of core self is certainly the precondition, but it also needs to adjust to a realm of new experiences not available the moment of its own emergence, and thus it is faced with new challenges to remain intact.

Moreover, this detail of mutual affection, that Stern adds here, will be of major importance for chapter 4, as it raises the further questions as to whether such mutual affections do also exist between the yet to be discussed verbal sense of self and the core sense of self, and whether they are constitutive for the kind of disturbance of the core or minimal self characteristic to psychosis, and schizophrenia more specifically. Yet, before moving on to these pressing questions, we first need to know what the verbal sense of self consists of. This being said, let me finish Stern’s account with the emergence of the verbal sense of self.

#### III.4 The sense of a *verbal self*

During the second year of the infant’s life, a new quantum leap in the development of the self in infancy is about to happen which is marked by the capacity to make the self the object of reflection, to engage in symbolic play and language acquisition. These, in turn, are rooted in the infant’s revolutionising ability to coordinate mental schemas with operations existing externally in actions or words (Stern 1998, 165). The sense of a verbal self is born, and with

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<sup>33</sup> Yet remember, that we also find at the level of core self a form of “primary intersubjectivity”.

it a new organising subjective perspective on self and other that opens up a whole new domain of relatedness, for which all the previous senses of self, i.e. emergent, core, and subjective, have set the ground for. It is a developmental progression from imitation of behaviours through metaphors and analogues to symbols (Stern 1998, 61), from affects to symbols as the dominant medium of communication. The ways of being-with increase enormously, and the infant for the first time begins to construct its own narrative. In the following, I will give a short summary of the three new capacities available to the infant.

Plenty of evidence suggests that infants start to perceive themselves as an external or objective entity at the age of eighteen months. Among others, the following cases have been thought to prove the point: the infant's realisation that what it sees in the mirror is its own reflection (i.e. mirror self-recognition, see also Rochat 2003, 2010), its use of verbal labels (names and pronouns, e.g. "I", "me" "mine") to designate itself, and acts of empathy (Stern 1998, 165). It has been concluded from these that infants at the age of eighteen months are able to make a distinction between an "existential self" and "categorical self", or a "subjective self" and an "objective self", or an "experiential self" and a "conceptual self", where the existential/subjective/experiential self belongs to the domain of core and intersubjective relatedness, and the categorical/objective/conceptual self to the newly achieved domain of verbal relatedness (Stern 1998, 165).

Together the capacity for self-objectification and its underlying ability to coordinate mental and action schemas, i.e. the ability to adjust external behaviour to mental representations and vice versa, enables, according to Stern (1998, 167) the infant for the first time to entertain and maintain a formed wish of how reality ought to be in contrast to how it is. Because infants at that age are not yet able to verbally express their wishes, they often switch to symbolic play as an alternative way to encode what they know and wish for.

Similarly, infants are able to point to the rouge on their own noses when they see it in the mirror before being able to say "me", "mine", or "nose" (Stern 1998, 168, Rochat 2003/2010). Stern concludes from this that:

[T]here is a stretch of time in which rich experiential knowledge "in there" is accumulated, which somehow will later get assembled (although not totally) with a verbal code, language. And at the same time, much new experiences will emerge along with the verbalization of the experience. (Stern 1998, 168)

However, language is more than just enabling the verbalisation of previous gathered world knowledge. Accordingly, Stern (1998, 168f.) claims that “words have an existence, a life of their own that permits language to transcend lived experience and to be generative”. At the same time, as we will see later, the ability of language to transcend lived experience also entails a certain alienation from it. Understanding the relationship between experience and language is crucial here, “because the essence of the question is how language may change the sense of self and what the acquisition of language, and all that it implies, makes possible between self and others that was not possible before” (Stern 1998, 169). However, it should be noted, that Stern tackles this question from the point of view of interpersonal relatedness rather than the equally enormous subject of language acquisition, and thus his focus will be on the interpersonal motivational or affective context of language learning (Stern 1998, 169). This focus is also taken to be of particular clinical relevance since it is directly connected to the question as to which extent interpersonal relationships can trigger mental disorders and to which extent these ways of being-with are made available through language. As has been emphasised by Stern’s (1998, 168f.) claim that language does not only create a one-to-one relationship to things and events in real experiences, language here is not merely viewed as a tool for communicating something that has already been there before. Though it is still about communicating, as this is an undeniable function of language. Yet it is about a way of communication and of relating to others that is only made possible through language.<sup>34</sup> The following will be an analysis of the effects of language on self-other relatedness.

#### III.4.1 Language and new ways of “Being-with”

The problem of language becomes a problem of interpersonal relationships, when we ask the question of who owns meaning, in the sense of the linkage between world knowledge or thought and words (Holquist 1982): is it an “I” or a “me”, or maybe no one? Or maybe a “we”? The latter is the position taken by Stern: meanings are owned by a “we”, they do not reside in the self, nor are they to be found somewhere outside in the world. Instead, meanings are mutually negotiated, and in this case primarily between the parent and the child. Hence, “meanings result from interpersonal negotiations involving what can be agreed upon as shared. And such mutually negotiated meanings (i.e. the relation of thought to word) grow, change, develop, and are struggled over by two people and thus ultimately owned by *us*” (Stern 1998, 170). This understanding of meanings as emerging out of a negotiation between

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<sup>34</sup> It is however not, as far as Stern’s analysis goes, about the communication of *something* that is only possible through language.

two people allows for the possibility of meanings that are unique to the dyad, such as the “private speech” of twins for instance (Stern 1998, 170). And new meanings that differ from those negotiated between parent and child will arise throughout development when children begin to engage with other socialising mediators than the parents. Hence, the interpersonal aspect of language is highlighted.

Taking this point further, Stern, in referring to the work of Dore (1985), suggests that the main motivation of the infant to switch from affective communication to linguistic communication lies in their wish to deepen their bond with others, especially the primary caregivers, through the mutual creation of meanings that enable the sharing of personal experiences. In this sense, the acquisition of language does not only constitute a major step in the achievement of separation and individuation but is equally potent in the service of union and togetherness (Stern 1998, 172). Hence, the level of verbal relatedness does not differ from the previously mentioned domain of core and subjective self, in which bodily sensations and affects functioned both as mediators for separation as well as togetherness.

Stern furthermore suggests language to initially form a “transitional phenomenon”, an expression he borrows again from Dore (1985), which refers to the transition from an already existing, prelinguistic thought to one that is linked to words, i.e. linguistically structured:

The word is given to the infant from the outside, by mother, but there exists a thought for it to be given to. In this sense the word, as a transitional phenomenon, does not truly belong to the self, nor does it truly belong to the other. It occupies a midway position between the infant’s subjectivity and the mother’s objectivity. [...] It is in this deeper sense that language is a union experience, permitting a new level of mental relatedness through shared meaning. (Stern 1998, 172)

The underlying assumption is that infants are already in the position to think and have thoughts prior to the acquisition of language. This is what Hinzen previously referred to as nonconceptual thought. However, we have also seen, that Hinzen does not genuinely believe in the idea of nonconceptual thought, and instead argues on many occasions that thinking necessarily requires language, thus denying the view expressed here in Stern’s account.<sup>35</sup> Though Stern does mention that language *in the beginning* functions as such a transitional

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<sup>35</sup> In contrast to Stern, Merleau-Ponty’s view is more differentiated: although he does not imply that a thought is determined by language, and more specifically speech, as would Hinzen do, Merleau-Ponty (1945/2002, 207) argues that language does not presuppose thought, but accomplishes it. As such, although something is already there before verbalisation (as Stern claims), this something requires language in order to have a more definite shape and be shareable. In other words, thoughts require linguistic expression to be what they are.

phenomenon, it remains unclear to which extent (if at all) language might be involved, at a later stage, in the creation of thoughts or whether thoughts are generally taken to exist prior to their verbalisation. As such, we can only speak for the case of infants, in which the linkage between an already existing thought and a matching word enables the creation of new ways of being with an other, even if the latter is not present, that have not been possible before.

Albeit language constitutes a new means for individuation and togetherness, its primary purpose is a different one, namely that of achieving the next developmental level of relatedness, in which all existential life issues will again be played out (Stern 1998, 174). Ultimately, language enables the creation of a life narrative, including the stories we and others tell about ourselves. Accordingly, Stern (1998, 174) subdivides the domain of verbal relatedness into a sense of a categorical self that is able to objectify and label, and a sense of a narrated self that weaves into a story elements from other senses of the self (e.g. agency, intentions, causes, goals, etc.) It is here then, that we are faced with the emergence of what we previously referred to as a narrative self, which has frequently been identified as the emergence of a sense of self in the first place. However, both phenomenological theories on self and Stern's analysis of the different senses of self suggest that long before the emergence of a narrative self, a self, though far from being complete, already exists and is constitutive for the narrative self.

Yet, the gains of language acquisition do not come without its losses.

### III.4.2 Language: A double-edged sword

In accordance with the phenomenological view on language, Stern perceives language as a double-edged sword:

It drives a wedge between two simultaneous forms of interpersonal experiences: as it is lived and as it is verbally presented. Experience in the domain of emergent, core- and intersubjective relatedness, which continue irrespective of language, can be embraced only very partially in the domain of verbal relatedness. And to the extent that events in the domain of verbal relatedness are held to be what has really happened, experiences in these other domains suffer an alienation. Language, then, causes a split in the experience of the self. (Stern 1998, 162f.)

Although language opens new doors to the interpersonal world, it also closes others. This is, however, as is suggested in the quote, not the consequence of some malfunctioning of language. Instead, the split of the self, i.e the split between lived experience and its verbal representation, and the distancing from the personal to the impersonal, is a natural

consequence of language itself. Similarly, Sass and Parnas (2003) have also explicitly noted that language causes a split between what is experienced and who is experiencing, the two components that make up lived experience, i.e. the minimal self. However, if language already naturally causes a split in the experience of the self, how can we explain the alienation or split in the self in schizophrenia through language? After all, we are not all schizophrenic, and as such there must be a difference between a normal split in the experience of self, as a simply natural consequence of language, and the pathological splitting of the self we witness in schizophrenia. Can language be at the roots of both the natural and the pathological splitting of self?

Elsewhere, Stern describes the split that language causes more in terms of a partial transformation of the experiences of the core- and subjective sense of self. As such, he claims that, although the verbal sense of self does not eclipse the sense of a core- and subjective self, which continue as ongoing forms of interpersonal experience, it does have the capacity to recast and transform some of their original experiences, so that they lead two lives – their original life as nonverbal experience and a life as the verbalised version of that experience (Stern 1998, 174). “The piece that language takes hold of is transformed by the process of language-making and becomes an experience separate from the original global experience” (Stern 1998, 174f.). Different relationships can exist between this verbalised part and the original global experience as lived through by the core- and the subjective sense of self in the following form: the linguistic representation can either well or poorly reflect the original experience, and accordingly, the relationships can theoretically range from strong to weak. Sometimes language is indeed able to capture the original experience perfectly, and we are generally drawn to think of language in this ideal sense. However, as we have already seen earlier, we do not need to refer to the case of linguistic experiences of schizophrenics in order to know that language often and maybe even rarely functions that ideally. Accordingly, Stern argues (1998, 175) that the verbal representation and the original experience often do not coexist well, leaving the latter to lead a misnamed and poorly understood existence, whereas some global experiences of core- and subjective selfhood elude linguistic expression altogether, destined to lead an unnamed, possibly even unknown, but still very real existence. Especially the latter should remind us of the ineffability of schizophrenic experiences. Art has been generally thought of as a medium to bridge these gaps in ourselves. And while we might think here particularly of nonverbal art, such as painting and dance, Stern (1998, 175) maintains that poetry and fiction can sometimes claim some of this territory for language, though not in the usual linguistic sense. This adds a new dimension to the debate on the

fundamentality of language in schizophrenia. More specifically, it adds the question to which extent language, or more specifically, the poetic use of language might enable the schizophrenic to connect again with others, to find his way back to being-with others. The therapeutic relevance of poetry will be further addressed in chapter 4.

However, before moving on to the final chapter of this thesis, you might wonder, what exactly does language do to the original experience? So far, we have only been talking about the consequences the verbalisation of language implies. In order to understand how or what language is transforming about the original experience, let me remind you again about an essential feature of that experience. Both in the domain of core- and intersubjective relatedness, the interpersonal world of the child has been characterised by amodal perception – that is, the infant experiences primarily those aspects of experience that can be part of any sensory modality, like intensity, shape, rhythm etc. – which Stern also refers to as the primary qualities of experience, in contrast to those aspects of an experience that are specific to the different modalities, such as the experience of colour is specific to vision. Stern (1998, 176) illustrates this amodal perception of the infant with an example of perceiving a patch of yellow sunlight: the infant experiences its intensity, warmth, shape, brightness, pleasure, and other amodal aspects of the patch, but it does not experience it as yellow – in fact, it must ignore this aspect in order to maintain this highly flexible and omnidimensional perspective on the patch. However, the moment someone says “Oh, look at that beautiful *yellow* sunlight!” (Stern 1998, 176), it is forced to narrow its omnidimensional perspective down to one, namely vision, in order to become aware of the yellowness of the patch. Hence, according to Stern, language pulls the infant out of this omnidimensional perspective, and by binding the experience to words, it is forced “to separate out precisely those properties that anchor experience to a single modality of sensation” (Stern 1998, 176). And as such, “by binding it to words, they isolate the experience from the amodal flux in which it was originally experienced. Language can thus fracture amodal global experience. A discontinuity in experience is introduced” (Stern 1998, 176). This discontinuity is what we above referred to as the split between lived experience and the verbalised representation of that experience. Finally, with the advent of language and symbolic thinking and the gap that is created between our lived experiences and the verbalised representation of it allows the infant for the first time to transcend, but also distort what it previously was confined to reflect the impress of, namely interpersonal reality. Such distortions of reality include the infant’s ability to elaborate a wish contrary to present facts or to create an expectation contradicting past experiences (Stern 1998, 182), but also his later mentioned account of false self (see chapter

4). From this, it is furthermore suggested that the newly acquired capacity to transcend and distort reality provides the soil for “neurotic behaviour”, “neurotic constructs”, or else simply neurosis (Stern 1998, 182).<sup>36</sup>

However, what seems most puzzling here is the fact that he mentions neurosis, but not psychosis in the context of reality distortions, which, at least intuitively, seems to fit way better the phenomenon of reality distortions given that the latter but not the former entails a loss of touch with reality. Even if we concede that neurosis entails some sort of reality distortion in the sense that certain aspects of reality are manipulated through for instance repression of unpleasant experiences and emotions (in the Freudian sense), it remains unclear what exactly Stern means by “distortions of reality” as no information is provided to which extent these distortions include the kind of distortions we see in psychosis, or whether they only concern neurosis. As such, we are left with the pressing question of how the capacities of the verbal sense of self could be related to psychosis.

Moreover, this is so far the first time in his analysis of the different senses of self that he mentions a pathological implication. This is important, as it constitutes a first hint, though a modest one, in the direction that language plays a more important or at least a different role in Stern’s account than it does in phenomenological accounts, despite the many commonalities between the two positions. This suspicion is reinforced when having a closer look at some of the clinical implications of the other senses of self, to which we will turn now.

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<sup>36</sup> It should be mentioned that it is not always immediately clear what “neurotic” is meant to refer to in Stern’s account, i.e. whether it refers to neurosis, generally denoting maladaptive coping strategies driven by fear and anxiety, consciously or unconsciously (Henriques 2012), or neuroticism, which is defined as an universal personality trait denoting negative affectivity, but does not constitute a pathology. Both can, but do not have to be related. However, because Stern mixes terms like “neurosis”, “repression”, “pathologies”, “character traits”, and “personality types” all in one and the same pot, it remains often unclear whether he is talking about a pathology (neurosis), that could, but does not have to be the result of neuroticism, or about a personality trait (neuroticism), that again could, but does not have to result in neurosis. Given the developmental context, I suspect that Stern is more often referring to neuroticism as a personality trait of the infant resulting from problematic interactions with parents, that can but do not have to become critical for a subsequent development of a mental pathology, such as neurosis, the beginning of which Stern sees largely fuelled by the capacities of the verbal sense of self. As such, I argue that when Stern is talking about the capacities of the verbal sense of self as providing the soil for neurotic constructs, he is referring to the pathology of neurosis and not (anymore) talking about a personality trait. Hence, I will be mainly referring to neurosis in the following chapter. Nonetheless, it should also be noted that the question of the relationship between the verbal sense of self and psychosis remains unaffected by the neurosis/neuroticism distinction, as they stand in a very similar relationship to psychosis for the reasons that they both represent a risk factor to develop a psychotic disorder (see for instance Kotov et al. 2010; Van Os and Jones 2010), and do not involve the kind of reality distortions characteristic for psychosis..

## CHAPTER 4: A BATTLE OF SELVES?

The main problem that we will unfold in this chapter is that the commonalities between the here developed phenomenological perspective and the one from developmental psychology are limited to the existence of a primitive form of self, or pre-reflexive awareness, that exists prior to the linguistic self and explicit self-knowledge. Developmental psychology offers strong empirical evidence for the existence of the phenomenological concept of minimal self. However, Stern's account also raises new questions – questions about the relationships between the different layers of self, that are not sufficiently addressed by phenomenology and pose a problem for the minimal self. More concretely, the problem revolves around an understanding of the senses of self that become more elaborate and grow throughout development, and its underlying suggestion of relationships of mutual interactions, and even transformations, in between these levels. As such, I argue, that it is implicitly implied by his account that the core or the minimal self is open to being shaped by subsequent levels of self, while still constituting a distinct level of self with a distinct function, namely that of enabling and maintaining a core sense of self-agency, self-coherence, self-affectivity, and self-history, i.e. the four self-invariants of the core sense of self, throughout development and life. However, it should be noted that Stern's account so far lacks crucial information not only about how to understand these mutual interactions in more detail but also about their existence more generally. Yet this is precisely what we want and need to know. As such, in the context of the present debate over what kind of self is fundamentally involved in schizophrenia, we are faced with the pressing questions of whether such mutual interactions exist between the verbal sense of self/linguistic self and the core/minimal self, and what implications this entails for our understanding of schizophrenia. At least a partial insight into the answers to these questions can be found in a reconstruction of his subsequent analysis of the clinical implication of the different levels of self, which, as we will develop below, indeed suggests that there exist mutual relationships between the core and the verbal sense of self. I furthermore argue that Stern understands these to be constitutive for the disturbance of core self, which is characteristic for psychosis (see chapter 3, section on core sense of self). Hence, a significant divergence is introduced between the phenomenological account and Stern's interpretation of psychosis more generally, and schizophrenia more specifically. Consequently, phenomenology is faced with a problem when using developmental psychology, and particularly Stern's account, to support their claims about the minimal self that go beyond its mere existence. The following analysis of Stern's account of the clinical

implications of the different senses of self will show how Stern diverges from the phenomenological position and how this divergence shifts the discussion from a disturbance of the minimal self as characteristic for schizophrenia to the question of whether this disturbance itself involves more than just the minimal self.

## I. Critical clinical implications of the senses of self

### I.1 Clinical aspects of the emergent sense of self

Already at the first page of chapter 9, Stern starts off with a critical claim, namely that “the initial period of formation will prove relatively more sensitive than subsequent periods for later functioning” (Stern 1996, 185). Hence, from this, we can entail that earlier senses of self are more sensitive to disturbances, and thus more critical for later development of mental disorders. What is most decisive in the way the different senses of self are formed is the interpersonal relationship between the infant and its parents. It is emphasised that the disturbances in the infant’s behaviour are primarily due to disturbances or problems in these relationships.<sup>37</sup>

This counts for all the senses of self, except for the emergent sense of self. The capacity to yoke experiences from different sensory modalities, which is central to the integration of perceptual experience is, according to Stern, largely genetically determined (Stern 1998, 188). Due to a central nervous system that is not intact, disturbances in this capacity can be at the origin of many different deficits, such as learning disabilities, which require cross-modal transferring of information and the lack of which could furthermore entail social and emotional deficits. Relevant for the clinical implications of emergent sense of self are also individual differences in the infant’s tolerance for stimulation, which can be a risk factor for anxiety disorders (i.e. low tolerance for stimulation leads to poor coping with stressful situations), and for different kinds of stimulation, as seen for instance in autistic infants that are thought to present a very low tolerance for human stimulation (Hutt and Ounsted 1966), both of which Stern also assumes to be pre-given. In the most extreme case, disturbances in cross-modal yoking of experiences, low tolerance for stimulation, and low tolerance for specific kind of stimulation could be highly detrimental for the formation of subsequent senses of self, and as such would constitute a pervasive disorder. However, because the

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<sup>37</sup> Yet, if one conceives the minimal self as asocial, and as such as independent of interpersonal relationships, like Zahavi does, a disturbance of minimal self could not reside in these very relationships.

emergent sense of self is mainly unrelated to the analysis of the subsequent senses of self and the relationships between them, it will not be part of the discussion to follow.

## I.2 The sense of ore self and psychosis

We have seen earlier that for the formation of a core sense of self the mutual regulation of the infant's arousal is paramount. Particularly the self-regulating presence or absence of parents becomes the centre stage for clinical implications here. Parents shape and guide the infant's level of arousal, and consequently, the way they attune to the infant's arousal is essential for how they will generally cope with the environment. While failures to adjust to the infant in the form of overshooting or undershooting the infant's arousal are integral parts of the dynamic nature of an interaction, there exist several ways of attuning or not attuning to the infant which can change the nature of infant-parent interactions to a considerable degree, and which in turn can be very critical for personality formation. These include forms of intolerable overstimulation and understimulation. Infants that are continuously exposed to these kinds of stimulation develop coping and defensive mechanisms that can decisively influence the formation of their personality.

In overstimulation, the parent tends to push the infant beyond its tolerable limit of stimulation, which is generally the case with parents that overcontrol the interactions with the infant, e.g. forcing face-to-face interaction (the case example of Stevie), or controlling the infant's interactions with toys, e.g. which toy to play with, how to play with it, when to stop, and what to do next (the case example of Molly). In the case of forcing face-to-face interactions, Stevie tries to escape the mother's gaze through aversion in an attempt to avoid overstimulation. When not successful, he gets upset and starts to cry. But most of the time, he is able to successfully escape the mother's face through aversions. These repeated experiences of overstimulation are memorized as experiences of a self-dysregulating mother and lead to the formation of the following RIG: a high level of arousal, maternal behaviour that tends to push him beyond his tolerable limits, the need to self-regulate downwards, and the usually successful self-regulation by persistent aversions (Stern 1998, 195). While originating in the dysregulating presence of the mother, the RIG involves a generalisation of that experience that impacts interactions with people more generally: when Stevie begins to approach his upper level of stimulation when with another person, the RIG of his overstimulating mother gets activated (Stern 1998, 195). This can result in his execution of potentially maladaptive behaviour as he will unnecessarily avoid stimulation that threatens to exceed or has just surpassed his tolerance and furthermore misses or does not stay open to the

adjustments of the other that would help him either to stay engaged or re-engage (given that from his experiences with the mother, he does not believe that the other is willing to do this) (Stern 1998, 195). As a result, Stevie, like many other infants experiencing similar controlling parents, tends to become relatively overavoidant with new persons, which can pave the way to becoming a loner. In contrast to this, the example of the mother that overcontrols Molly's interactions with toys, and as such the infant's interest and excitement more generally, constitutes yet another, however an extreme form of intolerable overstimulation. It was observed, that Molly adapted to this by becoming very compliant and let herself be regulated entirely by the mother. "She seems to have learned that excitement is not something that is equally regulated by two people – the self and the self-regulating other – but that it is mainly the self-regulating other that does all the regulating" (Stern 1998, 197). This ultimately led to an overall dampening of her affectivity.

Another form of dysregulation can be caused by understimulation of the infant's arousal, which in Stern's book is exemplified by the infant called Susie that was most of the time unsuccessful in getting her depressed mother to interact with her. Susie was left constantly understimulated due to her mother's failure to up-regulate, which, according to Stern (1998, 197), left her without a certain range of experiences, as she could only experience a very narrow range of pleasurable experience. In contrast then to the example of Stevie and Molly, the RIG she formed was quite different from those formed in cases of overstimulation: hungry for attention, she did not dread interactions with others (e.g. Stevie), and also did not have to tune them out (e.g. Molly), but learned that in order to get other people involved, i.e. to get them to interact with her, she needed to put all her effort in drawing attention to herself she possibly could. Accordingly, she was already a "Miss Sparkle Plenty" and precociously charming (Stern 1998, 198). However, it is important to note, that not every child copes the same way with understimulation as Susie does: those endowed with less persistence and spark, follow a depressive rather than a performance-oriented route (Stern 1998, 198).

We have already seen that individual differences in the infant's tolerance for stimulation at the level of the emergent sense of self can be relevant for later issues with anxiety disorders. Here, at the level of a core sense of self, we now find that different infant-parent interactions shape the infant's subsequent interactions with others and impacts the development of its personality: depending on the kind of problematic interactions with the parent, the infant might dread social contact, become emotionally numb, an attention-seeker, or depressive.

Things become more interesting as Stern now draws a direct connection between the four self-invariants he identified at the level of the core sense of self, which have also been

identified in a similar vein by phenomenologists as characteristic of the minimal self and its disturbance in schizophrenia, namely agency, coherence, affectivity, and continuity. Accordingly, Stern (1998, 200) describes psychosis as “pathological experiences of fragmentation (rupture of coherence), paralysis of action and/or will (rupture of agency), annihilation (rupture of continuity), and dissociation (ruptures in ownership of affectivity).” We encountered a similar claim already in the previous chapter, where Stern claims that it is only in major psychosis that we can see a significant absence of any of these four self-experiences (Stern 1998, 71). Apart from the fact that he mentions psychosis only in his analysis of the core self, which constitutes a first, though modest, indication that psychosis involves precisely those interpersonally founded relationships found at the level of the core sense of self, we find strong support for this in the fact that Stern identifies psychosis as a disturbance of the four self-invariants of the core sense of self. While phenomenologists might readily agree with Stern on this point, thinking themselves already on the winning side, enthusiasm quickly drops when the latter suddenly proclaims that “[i]n fact, at these early ages there are no mental disorders in infants, only in the relationships in which infants participate” (Stern 1998, 203). Hence, Stern is somewhat reluctant to see the disturbances at these levels, i.e. the emergent, but particularly the core sense of self, as constituting the beginning of a pathology of the self<sup>38</sup>, although he does not deny that they can represent a certain risk. Because he introduces a distinction between the initial period where the sense of core self is first forming (between 2-6 months), which is the only time span in which no other level of self has yet begun to form (see figure 4, chapter 3) and at which there are no mental pathologies yet, and later periods of its formation, where at least the subsequent domain of intersubjective relatedness has emerged, we have to wonder whether and how the following senses of self might be involved in the disturbance of the core self that ultimately characterises psychosis. Although Stern’s account is again very scarce and only allows for a tiny glimpse at what seems to be the underlying thought behind this distinction, there are nevertheless several hints that together guide the reader in a specific direction. The first one, and the most explicit one, can be found in Stern’s answer to the question of why he introduces such a distinction in the first place: since the formation of the core sense of self is not at all completed in these early months, there is yet the possibility to compensate for these initial problematic interpersonal interaction. If, on the other hand, these are not compensated for in the months to come and as such amplified, the initial risk for developing pathological

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<sup>38</sup> Except for mental retardation, Down’s syndrome, and autism, which represent at least partial exceptions (Stern 1998, 203).

symptoms is considerably raised to the degree that the initial disturbances in the parent-child interactions can now evolve into a self-pathology. The crux of the matter is that in contrast to the phenomenological view, it is suggested that psychosis, although being characterised by a disturbance of the self-invariants formed at the level of core relatedness, is not just the result of the core sense of self alone. It remains, however, to be determined whether it requires both the intersubjective and the verbal domain and, if so, to which degrees, or whether it requires only one of them. That we can indeed accredit this line of thought to Stern is furthermore evidenced by his descriptions of the clinical implications of the subjective sense of self, to which we will turn now. This will also allow us to uncover further hints on how Stern may view the relationships between these senses of self.

### I.3 Clinical implications of the intersubjective domain

As we have seen in the third chapter, the quantum leap from a core sense of self to a subjective sense of self is reflected in a shift from the regulation of behaviourally overt self-experience by the other to the sharing of subjective experience between self and other and the influencing of one another's subjective experience (Stern 1998, 203). The central element in the clinical picture of the subjective sense of self is now no longer over- and understimulation, i.e. the physical presence of the caregiver, but rather disturbances of interaffective sharing of experiences between the infant and the parent, i.e. the mental presence of the caregiver. These are essentially cases in which the latter either does not attune at all (e.g. the case of a psychotic mother unable to share in her daughter's experiences, but also the case of Susie), or only attunes very selectively to some of the infant's experiences, but not to others (e.g. the case of Molly). In contrast to Stern's view that the first months (2-6 months) in the formation of the core self do not constitute the seat of self-pathologies, this changes with the progression to the subjective sense of self after the age of six months, where different forms of potential psychopathologies, essentially including pathologies of the self, become visible for the first time (Stern 1998, 223). The formative period of the intersubjective relatedness is in fact taken to constitute the pivot between compensating for the various over- and understimulations at the level of core self and aggravate them in the sense of an overgeneralization of the coping strategies resulting from disturbed interactions with the mother, which ultimately can lead to a pathology of the self. Accordingly, Stern (1998, 223) writes that "these kind of adaptations can become maladaptive, and in that sense pathological, when they are used in new contexts and with new people, so that the infant's own patterns are no longer responsive to the new realities." While those coping strategies are the result of the

infant's accurate perception of the interpersonal reality created by the primary caregiver, they are not so in the case of an overgeneralization, in which case the infant does not use the coping mechanisms formed at the level of core self simply as one form of adaptation to new social interactions, but is defined by and limited to them (Stern 1998, 223). Let us have a closer look at some case examples again.

In the case of a mother suffering from a paranoid schizophrenic condition, it was observed that, although she could respond to the physical needs of her daughter, she was exclusively attentive to detecting potential dangers of the external environment (e.g. the hard edges of the desk, sharp things on the floor, sounds from outside) and thus provided her child with no experience of intersubjectivity. It is also this lack of interaffective sharing that Stern (1998, 204) sees as central to psychosis. Similarly, we can assume that in the case of Susie, who was permanently being understimulated by her mother, though still different from the case of total non-attunement, would have only minimal access to such experiences of intersubjectivity. Probably because of this difference in degree of non-attunement, both infants developed different strategies to adapt to their situation. Whereas Susie developed into a "Miss Sparkle Plenty", the daughter of the schizophrenic mother adapted to this situation by becoming very compliant at the level of core-relatedness, similarly to the case of Molly. However, this coping mechanism is again a response to a very different situation, i.e. whereas the example of Molly is a case of selective attunement, the other is one of non-attunement. As such, the clinical implications resulting from these coping mechanisms are different, depending on the specific context they developed from. In the case of non-attunement, Stern argues that if the mother could not change and if no others were available that would balance the infant's lack of intersubjective experiences, this could lead to a pervasive feeling of aloneness – not loneliness, because it would never have experienced the presence and the loss of subjective sharing, which would drastically impact her ability to form interpersonal relationships (Stern 1998, 207).

In the case of Molly, Stern argues for a different development. Parents always exert some degree of selective bias in their attunement behaviours, and in doing so, the infant learns what experiences are shareable, that is, which subjective experiences are within and which are beyond the pale of mutual consideration and acceptance (Stern 1998, 208f.). Hence, selective attunement is paramount in shaping the infant's interpersonal world. Though not necessarily bad as such, being too selective in the kind of behaviours the primary caregiver decides to attune to, as in the case of Molly, the infant accurately perceives that not only do these selected behaviours have a special status, but also that they may be one of the few ways of

achieving intersubjective union (Stern 1998, 209).<sup>39</sup> It is here that Stern mentions for the first time the creation of a “false self”, in which “the center of gravity was shifting from inside to outside” (Stern 1998, 209). It constitutes the official, public, or social version of the self that is essentially shaped by the wishes and needs of the parents, and not those of the infant itself (the “true self”), implicating that those self-experiences that are not attuned to by parents, either consciously or unconsciously, recede into the background and remain hidden from the public eye. This false self, as we will see later in this chapter, is not something pathological *per se* (although it is implied in the case of Molly, that the false self resulting from the extreme selectiveness of the mother would indeed be detrimental), as parents are always biased in their attunement behaviour, and also sometimes missattune or fail to attune. However, for that same reason, the creation of a false self is inevitable, and it is further ratified in the domain of verbal relatedness. It is also in the context of the clinical implications of the verbal sense of self that the account of a false self is further developed. As we will see later in this chapter, the connection between the case of Molly, that initially reaches from the domain of core relatedness to the domain of intersubjective relatedness, and the verbal sense of self, established through the false self, raises the possibility to construct a model of how Stern views the relationships between the different senses of self.

An essential difference between the case of Susie and Molly, that Stern already mentioned in the context of the core sense of self, and the present case example, concerns the direction of the relationship between the core self and the subjective self. Though it remains unclear to which extent (if at all) the mother could indeed be able to self-regulate her daughter, so that she does not already present disturbances in the domain of core relatedness, the example suggests that the kind of disturbed interactions in the intersubjective domain have a direct influence on the shaping of the core sense of self. But even if we question the plausibility of this example, given that it actually makes little sense to assume no initial disturbances in the interactions in the domain of core relatedness, the idea that remains preserved, which is also integral to the case of Molly, is the following: that the emergence of self-pathologies depends on the nature of the interactions in the domain of intersubjective relatedness, i.e. whether they constitute repairing relationships that compensate the initial “damages” at the level of core self or ones that aggravate and consolidate them (or cause these damages in the first place, as suggested in the case of the schizophrenic mother and her daughter). This furthermore corroborates what we have already indicated earlier, namely that Stern views the

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<sup>39</sup> However, apart from noting that this kind of behaviour has probably negative consequences for future interpersonal relationships, a more concrete perspective is missing.

relationships between the different domains of relatedness not merely in a bottom-up fashion, where disturbances of the preceding domain of core relatedness are transferred and implemented by the subsequent domain of intersubjective relatedness, and which ultimately ends in the kind of view integral to the phenomenological perspective, namely that disturbances at the fundamental level of self simply affect the higher levels of self. Instead, at least in the case of the domain of intersubjective relatedness (as there is no single mentioning of the verbal sense of self in the context of the presented case examples), we can say that it has a direct influence on the further shaping of the domain of core relatedness which seems to be decisive for the development of self-pathologies. However, it should be noted that, apart from drawing a direct link between psychosis and the lack of interaffective sharing, the former does not find further mentioning in the context of the subjective sense of self. Instead Stern prefers to speak more generally about self-pathologies, but it remains unclear what else falls in this category apart from psychosis.<sup>40</sup>

So far we have only been considering the connection between the core and the subjective sense of self. However, we have to wonder whether and to which extent this kind of relationships also exist between the subjective and the verbal sense of self, which raises the further question of whether the latter could stay in similar relationships to the core self as does the subjective sense of self, either directly, or indirectly through the medium of the domain of intersubjective relatedness. As we have alluded to earlier, no clues regarding such relationships between either the subjective and the verbal sense of self, or the verbal and the core self are to be found in the context of self-pathologies.

However, we have mentioned before that self-pathologies are not the only possible psychopathology that become first visible at the level of intersubjective relatedness. Accordingly, Stern claims that “neurotic-like symptoms” make their first appearance here as well (Stern 1998, 223). Though unrelated to the case examples mentioned above, he argues that infants before the age of twelve months and in advance of the capacity for symbolisation can develop symptoms that have many characteristics of neurotic symptoms, especially the condensation and displacement of diverse experiences into one particular object (Stern 1998, 224). In this context, Stern (1998, 224-26) provides a case, where the infant would manifest violent adverse reactions to the feeding bottle, as a result of bottle symbolising the conflicts

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<sup>40</sup> Attention should also be drawn to the fact that Stern is less concerned with an actual detailed description of what these self-pathologies consist in, than to make explicit how the domain of intersubjective relatedness is involved in their pathogenesis. One reason for this could be the fact that such a description has been provided in the previous section in the context of psychosis as a disturbance of the core self, which allows Stern to focus now on how the sense of a subjective self is related to these disturbances of the core self.

the parents had regarding the distribution of roles in caring for their child, especially who should feed the infant at what time.<sup>41</sup> As such, while full-blown neurosis might not already exist at the level of intersubjective relatedness, neurotic-like symptoms that can act as potential precursors of actual neurosis seem to have their roots in the interaffective relationships of the infant. Though it would go beyond the scope of the present thesis to engage in a more in-depth discussion on neurosis and the plausibility of Stern's positions regarding this case, it is important to note that the transition from neurotic-like symptoms to neurosis requires symbolisation, meaning the acquisition of language. Stern has been quite explicit on this point already in the previous chapter, where he claims that neurotic constructs or neurotic behaviour only emerges at the level of verbal relatedness. As such, without having yet determined what the progression to symbolisation does to the neurotic-like symptoms of the subjective self, it is suggested that the domain of verbal relatedness is not something that is simply affected alongside the domain of intersubjective relatedness, but its affection is what makes neurosis possible in the first place. However, if we want to know exactly how the verbal sense of self is involved, we need to know what it does (in contrast to what is done to it) to these neurotic-like symptoms, i.e. disturbances of the intersubjective self. Again, an account on this matter is missing. However, in his analysis of the clinical implications of the verbal sense of self is reflected a recurrent idea, namely that of consolidating or ratifying something that emerged at earlier domains of relatedness. And this something is the false self.

#### I.4 The *false self*

Picking up on a defining aspect of the verbal sense of self in his previous chapter, namely the split between lived experience and its poor verbal representation, Stern now focuses on the creation of a *false self* in contrast to a *true self* and the two different versions of reality that it is closely related to. In this creation, personal experience becomes split into two types: some self-experiences are selected and enhanced because they meet the needs and wishes of someone else (primarily the parents), i.e. the false self, regardless of the fact that they may diverge from self-experiences that are more closely determined by internal design, i.e. the true self (Stern 1998, 227). As such we have already mentioned earlier that what is chosen by the infant to be said and what to be left unspoken is profoundly shaped by the kind of interactions and relationships the parents entertain with the child. Moreover, we have seen that the false self, also referred to as the "social self" (Stern 1998, 228), is not something that

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<sup>41</sup> A full account of this example is given in Stern 1998, 224-226.

is pathological per se, but rather something inevitable, i.e. a consequence of the fact that parents always exert some degree of bias in their attunement behaviours. However, the case of Molly, where Stern first introduces the notion of a false self, shows that the creation of such a self and hence a splitting between two realities, i.e. between those self-experiences that are enhanced by the parents' attunement and those that are misattuned or not attuned to at all, is not something that only starts to form at the level of verbal relatedness, but fundamentally involves the domain of intersubjective relatedness, and, to a lesser degree, the domain of core relatedness as well (as overstimulation and understimulation are also forms of attuning to the infant). This seems to reflect quite well the underlying thought in the following quote:

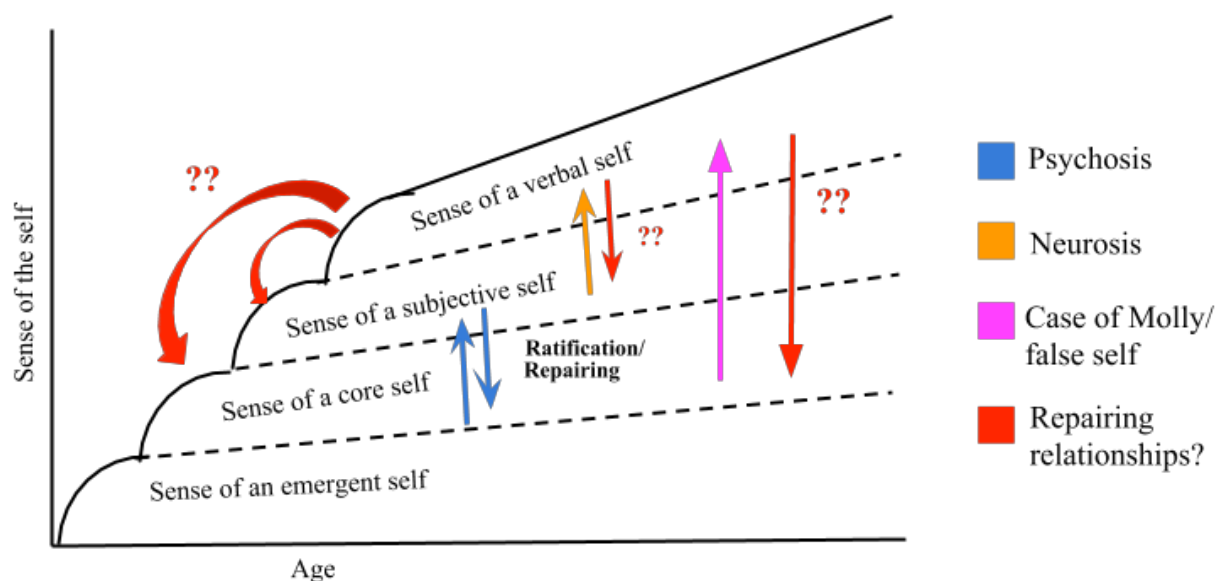
We have seen how this process of splitting begins during core-relatedness and is greatly furthered during intersubjective relatedness through the use of selective attunement, misattunement, and nonattunement on the part of the parent. *What happens at the level of verbal relatedness is that language becomes available to ratify the split and confer the privileged status of verbal representation upon the false self.* (Stern 1998, 227, my emphasis)

Hence, it is in the domain of verbal relatedness that the false self receives its final shape and is institutionalized, as the “false self becomes established as a semantic construction made of linguistic propositions about who one is and what one does experience, [while] the true self becomes a conglomerate of disavowed experiences of self which cannot be linguistically encoded” (Stern 1998, 227, my addition).

What is here only implicitly touched upon, is later more explicitly brought into focus, namely the relationship between the false self, language and self-knowledge. We can readily identify the two central claims in Stern's account of a false self. First, the verbal sense of self stands for the quantum leap from, what Rochat (2010) referred to as, implicit to explicit self-knowledge, and second, the false sense is the joint result of processes at the level of core, subjective, and the verbal sense of self, i.e. its formation is not to be localised in one single domain, although it seems to go back as far as the core sense of self. What does that tell us about the role of the verbal sense of self? First, it is through the capacity for symbolisation at the domain of verbal relatedness, that infants “acquire a concept of self which can be held outside of immediate experience for reflection” (Stern 1998, 228), and as such they acquire explicit self-knowledge. Second, this process of symbolisation is described as a final process of ratification or consolidation of, but also, similar to the role of the subjective sense of self in

the context of disturbances of the core self, of repairing or compensating earlier developments at the level of intersubjective relatedness. We have seen earlier in the context of psychosis, that Stern understands these compensating and consolidating relationships between the core and the subjective sense of self as necessary for the disturbances in the domain of core relatedness, that are characteristic for psychosis, to emerge in the first place. Similarly, Stern argues that the transition from neurotic-like symptoms in the domain of intersubjective relatedness to neurosis requires, as we have already seen in the third chapter, the progression to the domain of verbal relatedness, and as such requires symbolic consolidation or ratification. Though it is more than unclear, how the verbal sense could also have a repairing influence on the subjective sense of self. However, given what Stern has said before in the context of psychosis and the fact that he does mention the possibility of repairing (though only once, and without going into any further details, see Stern 1998, 226) in the domain of verbal relatedness as well, it seems at least plausible to insinuate similarities in the relationships between core relatedness/intersubjective relatedness and intersubjective relatedness/verbal relatedness. However, it remains to be determined, what this repairing function of language could consist of.

Finally, it is the case of Molly that enables us to connect three different domains of self through the mediation of the intersubjective domain: (1) the domain of core relatedness, where it was first mentioned; (2) the domain of subjective relatedness, where the case of Molly serves both as an example for the compensating and repairing relationship between subjective and core self, and as the creation of a false self; (3) the domain of verbal relatedness, where the false self is further ratified. Both Stern's account of a false self vs. a true self more generally, and the case of Molly more specifically, illustrate the progression of a (pathological) process that connects all three domains of relatedness, which enables us to establish relationships between all levels of self. We can thus come up with the following model:



**Figure 3.** A model of the relationships between the 3 central domains of relatedness developed from Stern's account.

## II. Discussion: A proposed of the relationships between levels of self

Before moving on to a discussion of this model, let me make clear some of its limitations and why we should nevertheless discuss it. First, we should keep in mind, that the model is a reconstruction of many different indications in Stern's account, that are not consistently, or not at all, put into explicit relations. Yet together, they are suggestive of a model of the relationships between the different levels that is reflected in figure 3. I do not want to claim this model to be entirely accurate. This would require much more information from Stern himself, and this, as mentioned at multiple occasions, is just not the case. The reason for this, I think, is rather simple: it is not what Stern's account is about. It exceeds the scope of Stern's argument, which focuses mainly on the establishment of different levels of self. It is not about psychosis or schizophrenia, nor how the different senses of self are involved in what we here are most interested in. Still, the question of how the different levels of self interact and might mutually influence each other follows naturally from the claim that there indeed exist different levels of self. And as such, it is something that needs to be analysed, if we want to understand the mechanisms involved in the pathogenesis of schizophrenia. This matter is barely touched upon in the phenomenological tradition of the minimal self, and also in different accounts of self in developmental psychology. The problem more concretely is, that we need to know more about the relationships between the different layers of self than their chronological order in order to understand what kind of role language plays in schizophrenia. Though the establishment of such a chronological development is the primary

purpose of Stern's account, it also contains several hints that lead to a specific understanding of the relationships among the different levels as proposed in the model. Yet, it cannot be denied, that the latter is founded on a shaky ground. The question that naturally arises next is: Why should we even consider it then in the first place? Reasons for not considering it evolve precisely around the fact that it has been artificially construed out of a small number of clues. Yet, we should not forget that there have been enough clues, sufficiently related, that have motivated the construction of such a model in the first place. However vague it might be in its details, it raises important questions that are highly relevant in the context of an analysis of schizophrenia and the role the minimal self and the linguistic self take in it. A closer look at the model will help to understand what those questions are and how they arose.

The model is composed of four examples indicative of certain relationships between the different senses of self: (1) the case of psychosis, (2) the case of neurosis, (3) the case of Molly, and (4) the account of a false self.

- (1) Although psychosis is taken to be essentially a disturbance of the four self-invariants of the core self, it is claimed that the disturbance itself requires consolidation/ratification (blue arrow) at the level of intersubjective relatedness in order to be what it is. In other words, the affection of the subjective sense of self is not an implication of the disturbance seen at the level of core self, but a requirement for it. The question that naturally arises next is whether and to which extent the same could apply for the verbal sense of self, i.e. is consolidation at the level of verbal sense of self also constitutive for the disturbance at the level of core self?
- (2) This suspicion is further reinforced by the case of neurosis. Although not being related to that of psychosis, Stern makes it clear that without the transition to the symbolic level, i.e. without ratification of the neurotic-like symptoms in the domain of verbal relatedness, there is no case of neurosis (orange arrow). Again, we have a pathological process that begins at a lower level but requires consolidation at a higher level.

So far the relationships established in the case of psychosis (core-subjective) and neurosis (subjective-verbal) exist quite unrelated to each other. The visualisation of these relationships in the model, however, suggests the question whether they could not be connected, thus allowing for a connection between core, subjective, and verbal sense of self. It is here, where the case of Molly and the account of the false self come in.

(3) and (4) The case of Molly and the account of false self constitute two instances in which

we have a direct progression from the core to the verbal domain of relatedness (hence the pink arrow from core to verbal self). As we have seen before, Stern claims that the creation of a false self starts already at the core self, and is further ratified at the level of the subjective and the verbal self. Although the case of Molly is no longer figuring in his description of the clinical implications of the verbal sense of self, we have seen that the false self is first introduced here, and later further developed in the domain of verbal relatedness. As such, the case of Molly also connects all three levels of self.

A first question that thus arises from (1)-(4) can be put as follows: Is the verbal sense of self indirectly (through mediation by the domain of intersubjective relatedness) constitutive for the disturbance of the core self? And the answer suggested in (1)-(4) is that psychosis involves all 3 levels of self constitutively. More concretely, the answer is composed of two claims:

- (1) Psychosis is a disturbance of the four self-invariants of the core self.
- (2) However, the disturbance itself is the result of all 3 levels of self. In other words, it is *caused* by the joint and mutual affection of all three.

What Stern is implicitly arguing for here differs both from the linguistic and the phenomenological account. In fact, it could be coined an “in-between” position, as the role language is given on this account is less fundamental than Hinzen claims, but yet more important than phenomenologists argue it to be. It is less fundamental in that psychosis involves much more than language and more fundamental levels of self than assumed by Hinzen. It also differs more generally from Hinzen’s account in that Stern argues that the different levels of self are not merely transformed into a linguistic self with language acquisition (see the beginning of chapter 3). Furthermore, and most importantly, Stern defines psychosis as resulting from a disturbance of the capacities of the core self, and not a disturbance of capacities that are specifically linguistic.

So far, this fits quite well the phenomenological argument we have developed in the second chapter. However, Stern’s in-between position suggests that the disturbance of the core self requires more than just the latter. In contrast to Zahavi, who stipulates a minimal self that remains the same throughout development, Stern argues that it continues to grow and

becomes more elaborate throughout development. Though it remains a distinct domain of relatedness with a distinct function that is neither transformed into nor taken over by the intersubjective, nor the verbal domain of relatedness, but rather coexists with them, the question of the possibility of mutual interactions between the different levels is fairly justified. And indeed this is what we see in the model proposed above. Yet, it should be noted that some aspects of these mutual relationships have already been alluded to in the previous chapter, i.e. the mutual affection between core and subjective domain of relatedness (see p.83) and the partial transformation of these by the verbal domain of relatedness (p.88).

While phenomenology has been mostly busy proving the existence of a minimal self that contrasts the existence of a linguistic self, Stern's account suggests that this alone is not enough. Instead of just stacking different layers of self one above the other, it is necessary to determine whether and how these layers are connected in between each other. And it is mainly in the context of the clinical implications of the different domains that Stern offers a partial insight into the existing relationships. These are mainly ratifying/consolidating and repairing/compensating, and it is only when the latter fail, that a self-pathology truly emerges. This has been explicitly argued by Stern regarding psychosis and its involvement of the level of the core and subjective self. More concretely, the claim was that the relationships in the domain of intersubjective relatedness could repair the initial damages caused by insufficient regulating/stimulating behaviours in the domain of core relatedness. The same however does also apply between the domain of intersubjective and verbal relatedness. And if not repaired, whatever has developed on the previous level gets consolidated at the subsequent level. Yet, it is precisely because there is always the possibility to reverse the preceding developments, that the emergence of a pathology requires all three levels of self, as suggested by the model. As such, in contrast to the phenomenological position, subsequent layers of self, specifically the layer of the linguistic self, are not simply passively affected, but they play a more active role. Moreover, as we have already mentioned before, the affection of the subsequent domains is here not understood as a consequence of a disturbance of the core or minimal self, i.e. it is not something that is also affected, but rather their affection is taken to be constitutively involved in the formation of a disturbance of the core self in the first place. This also tells us something about the relationships between the different layers of self beyond the context of clinical implications, namely that the core sense of self, while it is growing and becoming more elaborate, is being shaped by the different kinds of relationships it encounters throughout development. As such, the specific shape the self-invariants of the core self can take are open to being consolidated or repaired throughout development, which

means throughout the progression to subsequent senses of self. But what does all of this entail for the analysis in the present thesis, which started with the question as to whether schizophrenia is fundamentally a disturbance of minimal or linguistic self. As an in-between position, the answer to this question is the following: It is both and neither of them. It is both because psychosis is identified as a disturbance of core or minimal self, but the disturbance itself requires more than just the latter. For the same reason, however, schizophrenia is also neither of them, i.e. it requires not one of them exclusively, but all two or three of them. Ultimately then, language cannot be taken out of the discussion.<sup>42</sup>

Phenomenologists could of course attack the argument just made. One immediate threat to the model is again its shaky ground, since the different examples are not consistently related to each other. A glimmer of hope could be precisely the fact the case of psychosis is not directly being related to the others, or at least, we do not know how they could be related. As such, there is no apparent link between psychosis and what is described in the case of Molly. But there is also no information on whether and how it could be related either to neurosis or the account of false self. Regarding the latter, we could of course start to speculate, however, relevant information, if only in the form of clues, is literally non-existent. Accordingly, everything we could come up with would be too far away from anything substantiated in Stern's account. Though, the same does not apply to the proposed model.

Regarding the case of neurosis, things are slightly different. Phenomenologists could criticise that the kind of reality distortions relevant to neurosis are different from those we see in psychosis, as it has been commonly argued that the former does not entail a loss of touch with reality. While a sound argument for the claim that neurosis needs symbolisation is also missing in Stern's account, it can be argued that the kind of reality distortions involved in psychosis do not require the progression to the domain of verbal relatedness. As we know from chapter 3, Stern speaks of reality distortions in terms of transcending a previously established impress of reality by the senses of self preceding the verbal sense of self. Because

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<sup>42</sup> There is a second issue that the concept of minimal self has to face. Even if we grant the minimal self a form of "primary intersubjectivity", there remains a domain in between the minimal self and the linguistic self that is assumed to be constitutive for the disturbance of minimal self, namely the domain of intersubjective relatedness (which, as we have seen in chapter 3, contains a much richer and elaborate repertoire of social interactions than does primary intersubjectivity). Hence, the same issue would apply to the relationships between minimal self and Stern's subjective sense of self, as it does to the relationships between the minimal self and the linguistic self. However, because our main concern in this thesis is to examine whether the linguistic self is fundamentally involved in schizophrenia, we will be focussing exclusively on the relationships between the minimal self and the linguistic self and the question of whether the latter is constitutive for the disturbance of minimal self. Yet, the constitutive link between the minimal self and the subjective sense of self is an additional issue that needs to be addressed and clarified by phenomenologists.

an analysis of neurosis goes beyond the scope of this thesis, we will have to leave it open as to whether neurosis does indeed involve these kinds of reality distortions, or whether this understanding of the latter is more generally questionable. However, at least in the case of psychosis, we can raise the question whether it would not make more sense to conceive of the loss of touch with reality as the result of precisely those senses of self that are responsible for the creation of an impress of reality in the first place. If so, language would not be required for the kind of reality distortions we see in psychosis, and notably also in schizophrenia. However, this could only constitute a counterargument to the proposed model, if schizophrenia developed already in the months before the emergence of the verbal sense of self, because it is just in this period between birth and before reaching the age of two years, where the sense of core self is free from any influences of the verbal sense of self. Yet, current phenomenological work does not provide any support for this claim. At this point in the discussion, we are then no longer questioning what kind of role language plays in the pathogenesis of schizophrenia, but rather whether it plays a role at all. Put more radically, this would ultimately amount to the question of whether schizophrenia could develop in the absence of language.

A first intuition plays in favour of Hinzen, who more generally emphasises the linguistic structure of schizophrenic symptoms. As such, he reminds us of the fact that hallucinations, delusions, and disorganised speech (FTD) are dependent on language, for, what would a hallucination, a delusion, and, most certainly, FTD be without it? How could schizophrenia as we know it not depend on language? This is precisely the intuition on which Hinzen's account is ultimately based. However, we have seen throughout the chapters, that the jump from this intuition to the claim that schizophrenia is fundamentally a disturbance of language is quite problematic. As such, the phenomenologists have argued that just because language is indeed an inherent aspect of the positive symptoms as we know them, does not mean that language must be ultimately the cause of such disturbances. Instead, it is maintained that schizophrenic symptoms have their roots in a disturbance of a much more fundamental level of self. Yet, this disturbance expresses itself in symptoms that require the progression to the domain of verbal relatedness. It has to express itself at this level, because schizophrenia is traditionally defined in terms of symptoms that depend on language. If this would be the only claim made by the proposed model above, then it would not constitute much of a problem for the phenomenological account, as the latter does not deny language to play a role in schizophrenia, in fact that would be counterintuitive, but more so as an effect, rather than a cause. However, the suggested interpretation of Stern's account goes way beyond that claim.

It does not question the disturbance of minimal self as the cause of schizophrenia, but instead it asks about the causes that cause this disturbance. It is in this context, where it has been suggested that language might play a more constitutive role. And this is the crux of the matter. While we can criticise that Stern himself does not provide enough evidence for his claim, this should not distract us from the fact that phenomenology does not provide enough, if any, evidence against it either. A more thorough analysis of the relationships between the levels of self is necessary.

## II.1 A glimpse at animal models of schizophrenia

When asking whether schizophrenia can develop in the absence of language, it might be interesting to have a look at animal models of schizophrenia. These are developed through modelling psychotic-like symptoms in rodents, under the assumption that their underlying neuropharmacological mechanisms are shared with humans. The purpose of modelling schizophrenic symptoms on animals is twofold: (1) increase our understanding of the neurobiological mechanisms that cause schizophrenia, and (2) develop more efficient drugs based on the insights gained from the models. Although in the context of the present thesis, we have been referring to schizophrenia mostly in a developmental context, it can also be induced by other factors, i.e. through genetic predisposition or drugs. Accordingly, animal models of schizophrenia fit into different induction categories, depending on which risk-factor is being analysed: developmental, drug-induced, genetic manipulation, but also manipulation through lesions (Jones et al. 2011, 1162). Given the methodological differences between these categories, the results also differ across the models, each emphasising different disturbances. Yet, most rodent models have behavioural phenotype changes that resemble positive-like symptoms of schizophrenia in the form of a limbic dopamine dysregulation manifested for instance in locomotor hyperactivity or disruptions in sensory gating, but fewer models also show that altered social interaction, and learning and memory impairment that are analogous to negative and cognitive symptoms respectively (Jones et al. 2011, 1162). A detailed review of the different models is at this point not possible as it would go beyond the scope of my thesis. Yet, we do not need to do so, as the aspect most relevant to our discussion is the fact that schizophrenic-like symptoms are reproduced in non-linguistic animals.

It is evident that the research on animal models of schizophrenia works under, what Hinzen calls, a Cartesian framework, as it is an underlying presupposition of these models that language is not fundamentally involved in the pathogenesis of schizophrenia. If it were, it would not make sense to embark on a project to model schizophrenic symptoms in non-

linguistic animals in the first place. Yet, this is certainly also one of its weaknesses, because, obviously, rodents cannot be made to have hallucinations, delusions, or FTD. However, we have seen above and also throughout the chapters, that reference to the linguistic structure of schizophrenic symptoms does not justify the claim that language is fundamentally involved in the pathogenesis of schizophrenia. As such, the crucial point is that animal models of schizophrenia assume, just as the phenomenological tradition does, that the origins of schizophrenic symptoms are to be found somewhere completely different, at a much more fundamental level – a level that ultimately does not even require the capacity for language at all. Although differing from the phenomenological position in that the research on animal models of schizophrenia focuses mainly on the neurobiological basis of symptoms, they share an overall approach of analysing schizophrenic symptoms beyond their dominant linguistic manifestation. For, this is ultimately all that language is taken to be: it constitutes a linguistic manifestation of underlying prelinguistic, even non-linguistic disturbances. Again, that this manifestation is an inherent part of the standard definition of schizophrenia does not mean that language is necessarily involved in the pathogenesis of the disease, nor does it entail the opposite, that anything beyond the domain of verbal relatedness could not be the cause of it.

But what about Stern's account now? As we have seen before, both the phenomenological position and Stern's proposed model are ultimately lacking strong enough evidence to exclude the other. The reason why I wanted to bring in animal models of schizophrenia, is because it adds support to the phenomenological argument as it suggests that the cause for the disturbance of minimal self does not involve language. (Remember that the central claim of the above-proposed model was that although schizophrenia is a disturbance of minimal self, the disturbance itself requires the verbal/linguistic self constitutively). However, a more thorough analysis of animal models of schizophrenia is necessary in order to evaluate the strength of the argument that language does indeed not play any role in the pathogenesis of schizophrenia. We can here only point at the potentially fruitful, interdisciplinary cooperation between phenomenological research and neurobiological research on animal models of schizophrenia.

There is yet another criticism that phenomenologists could raise against Stern's model. Based on his account, many of our original experiences cannot be grasped by language. Much is lost with the transition from amodal perception to symbolisation. This not only explains why many of our experiences cannot be accurately described by language but also the ineffability of schizophrenic experiences we have already encountered in the second chapter. There, we also argued that the particularity of schizophrenic experiences is not only their ineffability

(indeed, it was claimed that this ineffability is also shared with more common experiences) but the fact that they do not constitute common experiences more generally. As such, they cannot be easily shared at any level. The question then is the following: if the kind of experiences that are characteristic to schizophrenia are beyond the scope of linguistic expression, why and how should language, not to say a disturbance of it, be essentially involved in its pathogenesis? What would a consolidation at the level of the verbal self add to schizophrenic experiences? And what would be consolidated? We could answer that what is being consolidated is the schizophrenic's realisation that his experiences are not shared with others. Ineffable is what cannot be described in words, and as such, language is constitutive for the ineffability of schizophrenic experiences and the alienation from the interpersonal world it consolidates. And according to the model, the ineffability and the further alienation it implicates are not only a consequence or effect of a disturbance of minimal self but a constitutive element of the disturbance itself.

In order to exclude one of the two positions, both would have to come up with stronger arguments for their claims. To begin with, both disciplines need to become aware of the disagreement in question and work out arguments that specifically address the issue of why the other has to be wrong. As such, further research into the concrete relationships between the different levels of self is necessary.

Yet again, the phenomenological position seems to be supported by research on animal models of schizophrenia. If the latter assumes that the pathogenesis of schizophrenia does not require language, it follows naturally that the experiences language adds to schizophrenia cannot be relevant either. Developmental models seem to be particularly suggestive in this context. Accordingly, it has been shown that rat pups that are being deprived of social interactions from mother and siblings manifest alterations in brain development that cause behavioural deficits in adults (see for instance Lapiz et al. 2003; Fone and Porkess 2008) collectively referred to as the isolation syndrome, several features of which resemble some core symptoms of schizophrenia (Jones et al. 2011, 1169). Hence, it is suggested that schizophrenic symptoms do indeed not involve language. However, as we have said already earlier, a much more thorough analysis of these models is necessary in order to evaluate them and determine to which extent they can support the phenomenological claim.

## II.2 The poetic use of language

So far, we have only discussed the consolidating/ratifying relationships between the domain of core and verbal relatedness. Yet, what about the repairing relationships Stern is talking

about? Is there a way in which the verbal sense of self or the linguistic self could indirectly (mediated through the domain of intersubjective relatedness) repair damages caused at the level of core self (see figure 3, red arrows with question marks)? This question is composed of the following three hints in Stern's account:

- (1) We know from the case of psychosis that Stern believes that the level of the subjective sense of self is in a position to repair initial damages caused at the level of core self (blue arrow).
- (2) This repairing relationship is further emphasised in the case of Molly: if the mother does not change her behaviour towards her daughter and as such repairs the relationship with her at the level of intersubjective relatedness, this will probably influence her developmental progress negatively.
- (3) Stern also mentions in his account of the clinical implications of the verbal self, that language has a repairing characteristic and as such there exists at least a repairing relationship between the verbal and the intersubjective domain of relatedness. Yet it remains unclear, what this repairing capacity should consist of (red arrows with question marks).

If we consider again the fact that language causes a split between lived experiences and their verbal representation, we have to wonder how on earth language could have a repairing quality? In the following, it will be argued that this repairing quality of language is indeed not to be found in its usual sense, but rather in its poetic sense.

Although the verbal representation often only poorly reflects our lived experiences, we have seen in chapter 3 that Stern sees in poetry, alongside nonverbal art, an alternative way to access and express the richness of these experiences. In order to understand precisely how the poetic use of language enables this access to preceding domains of relatedness, we should remind ourselves of what language does to the original experience. To summarise what was already said in the previous chapter, language causes a narrowing of our initial amodal experiences into ones that are restricted to a single sense modality (see the example of the yellow sunlight). Yet the poetic use of language functions in the opposite direction. Indeed, the purpose of art more generally is often to express something that cannot be simply

communicated with words. As such, poetry allows for a renewed broadening of experience. Stern illustrates this on an extract from Baudelaire<sup>43</sup>:

There are odors fresh as the skin of an infant,  
Sweet as flutes, green as any grass,  
And others, corrupt, rich and triumphant.

(Baudelaire 1957, *Correspondences*)

In just these three lines, smells are related to experiences in the domain of touch (i.e. skin of infants), sound (i.e. flutes), colour (i.e. green grass), finance and power (i.e. corruption, rich, and triumphant) (Stern 1998, 155). Hence, the extract shows how poetry enables cross-modal experiences of smells, where ordinary language could only describe them with words belonging to the same sensory modality. This is just one example of how poetry enables an access to the richness of our original experiences. In fact, cross-modal analogies and metaphors constitute an inherent part of most poetry.

Yet, in what sense can this be related to psychosis? Is there a therapeutic value inherent to the poetic use of language? And if so, which one? These questions deserve much more attention than we can do here, but we can at least outline a certain line of thought that might be developed further in the context of future research.

Let's perhaps start with a reminder. We have seen in chapter 2 that schizophrenia should not be understood only in terms of loss of meaning, e.g. loss of common sense, loss of self-evidence. To the contrary, schizophrenia is also a matter of excess of meaning, e.g. excessive self-awareness and thinking (hyperreflexivity) or the omnipotence or magical power of words (see linguistic experiences). Hence loss of meaning is always accompanied by an excess of meaning as well. For instance, a loss of self-evidence does not go without excessive self-awareness. This bidirectionality between loss and excess is also well established in linguistic experiences, where conventional language becomes meaningless, but at the same time, a whole new dimension of word meanings emerges. I do not want to claim here that one necessarily comes before the other, and instead only point out that they mutually condition each other.

There exists a certain parallel between amodal experience and the excess of meaning we see in schizophrenia in the sense that in both is involved a certain openness, richness, but also uniqueness of experience that cannot be grasped by ordinary language, which consists of a

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<sup>43</sup> In Baudelaire, C. (1857/1982). *Les fleurs du mal*. Trans. by R. Howard. Boston: David R. Godine.

narrowing of these meanings. In each case, the verbal expression is inaccurate and entails a loss of the richness of the original lived experience. Accordingly, the suggestion I want to put forward here is that poetry might constitute a way to access and express these excessive meanings that are yet different from merely living this excess. As such, poetry enables a transition from being held captive or being determined by this excess of meaning (since the excess is only lived through) to a conscious and deliberate expression of it.

The resulting poem also constitutes a certain objectification of this lived excess in the sense that it no longer just lives in the patient but also on paper. On the one hand, this might enable the patient himself to create a certain distance to his experiences, to view it, as Helmuth Plessner called it (1982), with the eyes of a stranger (germ.: *Mit anderen Augen*), which ultimately might evoke a change, though what exactly this change could be cannot be answered here. As such, for instance, Dan Hoeweler, whose poems about his experiences of living with schizophrenia have been published in various journals, writes the following about poetry: “I think one way I cope with this problem [i.e. schizophrenia] is by trying to write and rationalize the things I have experienced in the past. Writing poetry about my psychotic experiences helps me to see these psychotic episodes for what they truly are: the product of a mind that wants to destroy itself.”<sup>44</sup> Similarly, Hankir et al. (2012,1) claim that poetry is not just the product of psychopathology, but that it can also be used as a form of therapy as an adjunct to pharmacotherapy.<sup>45</sup>

On the other hand, however, the poem written on a piece of paper can also be shared with someone else. As such, the poem constitutes a medium for the schizophrenic person to communicate her experiences to someone else. While we might not be immediately capable of understanding, we are still given an insight into the world of schizophrenia that we might not be able to get when having the patient describe to us in the conventional form of language what his/her experiences are like. Hence, therapists, phenomenologists, friends and family members too are given the possibility to view schizophrenia with the eyes of a stranger, which might improve our understanding of this disorder. In the definition of art therapy, the British Association of Art Therapists (1989) describes this process more generally in the following way:

The focus of art therapy is the image, and the process involves a transaction between the creator (the patient), the artefact and the therapist. As in all therapy, bringing unconscious

<sup>44</sup> D. Hoeweler, in <http://schizophrenicwriter.com/sample-page/blogevents/> (last accessed 2018-10-24).

<sup>45</sup> Note that poetry requires self-narrative, and as such explicit self-knowledge, which, as we have seen both essentially depends on language.

feelings to a conscious level and thereafter exploring them holds true for Art Therapy, but here the richness of artistic symbol and metaphor illuminates the process. (Quoted in Waller and Dalley 1992, 4)

But more importantly, the poem creates the opportunity to share something that has not been shareable before. As such, it might enable the schizophrenic person to reconnect with others, to find a way back to being with others. And this is, I argue, the repairing quality of language. But how should we interpret the therapeutic value of poetry? Does the degree to which it has an influence on repairing the disturbance of minimal or core self depend on whether we see the domain of verbal relatedness as constitutive or only as a consequence of the disturbance? The answer to this question is twofold: that it has therapeutic value does not depend on either of them, yet its implications do depend on the choice of theory.

If, as Stern has been suggested to argue, the domain of verbal relatedness is constitutive for the disturbance of minimal self, then poetry can also indirectly, through mediation by the level of intersubjective relatedness, have a repairing effect on the disturbance. This would then amount to a top-down therapy model. Yet, one that differs considerably from Hinzen's treatment method presented in the first chapter in that (1) it is not about changing language, i.e. establish deictic anchoring and propositional complexity, but about using language in a specific way in order to gain access to a more fundamental level of self and as such to experiences that cannot be touched upon by ordinary language use, and (2) the domain of verbal relatedness constitutes only the first step (and not the only one) in a treatment procedure that essentially involves the preceding levels of self as well.. As such, parallel to the claim that schizophrenia involves all three levels of self, its treatment too involves all of them. However, because the pathogenesis itself starts with the core sense of self, and consolidation works from the bottom to the top, it would, in contrast to the direction of the treatment method, constitute a bottom-up process. Indeed, there is a certain plausibility to the thought that in order to treat the disturbance of minimal self, we should start with the level that was affected last and progressively work our way down to more primitive levels of self. But what if we go with the phenomenological position? If language is not involved in the pathogenesis of schizophrenia, of how much therapeutic value could it then be? There is a certain tendency to say that its therapeutic value could not be the same as in the former case for the reason that what is not part of the cause, cannot eliminate the cause. And again, Stern's account shines through as an in-between position, neither claiming language to be the cause nor to be the one that eliminates it. Instead, the claim is that it is part of both. Yet, the

phenomenological position cannot imply that poetry could not have any therapeutic value. For, as suggested above, it (1) constitutes a way for the patient to express and grasp his own experiences in a way that has not been possible before, which (2) can be shared with others, and as such creates a first step in establishing or restoring relationships of being-with and (3) might improve our understanding of schizophrenia. Hence, that poetry has therapeutic value cannot be denied. To which extent, however, points (1)-(3) ultimately influence the disturbance of minimal self has to be left open here.

### III. Concluding remarks

Is the self-disturbance in schizophrenia more fundamental than described by recent linguistic research? Or is it essentially and primarily a linguistic disorder? These were the questions we raised in the introduction and which guided us throughout this thesis. Though we have not been able to answer all aspects of these questions, we are able to present 3 main results: (1) the linguistic account of schizophrenia is problematic and insufficient in many ways; (2) yet the phenomenological position also lacks evidence to refute the claim that language is at least partially involved in the pathogenesis of schizophrenia; and (3) the therapeutic value of the poetic use of language.

The most unequivocal result of the thesis pertains to Hinzen's linguistic framework of schizophrenia, whose weakness is mainly due to its radicality. Based on the apparent fact that schizophrenic symptoms have a linguistic structure, it is argued that a disturbance in how grammar configures thought and self must constitute the cause of such symptoms. Yet, as we have said already before, the jump from this fact to the conclusion he draws from it is very problematic. As such, the phenomenological analysis in chapter 2 has shown that his exclusive focus on content and a concept of a self which is implied from the constitutive link between language and thought, ignores the subjective dimensions of schizophrenia that are not only essential to our understanding of its pathogenesis, but also to the description of the phenomenon in the first place. Thus, Hinzen's reliance on deictic anchoring and propositional meaning is insufficient to account for the complex structures and multifarious features that are inherent to schizophrenic symptoms. Moreover, the insights from developmental psychology in chapter 3 also undermine his account of self, showing that there exist more primitive, pre-linguistic forms of self which remain active throughout life and do not become obsolete with language acquisition. With the introduction of Stern's model of the relationships between the different senses of self and its underlying suggesting that schizophrenia is not a disturbance of capacities that are essentially linguistic, but instead of

those belonging to the core sense of self, Hinzen's account is further weakened. The reason for this does not merely lie in the fact that both the phenomenological position and the one Stern has been suggested to endorse see the capacities of the core or minimal self as fundamentally involved in schizophrenia, but more so in the fact that Hinzen does not even consider these dimensions of the human self to be in any way related to schizophrenia. Ultimately, the preliminary conclusion is that Hinzen's linguistic account can neither show that schizophrenia is fundamentally a disturbance of grammar, nor can it show that nothing beyond language could constitute its cause.

A stronger opponent to Stern's account is the phenomenological tradition, because both share the idea that schizophrenia is a disturbance of core or minimal self. Yet, despite this agreement, they fundamentally differ in their view of the kind of role language has in schizophrenia, and with it the question about the specific relationships between minimal self and linguistic self take centre stage. According to Stern and in contrast to the phenomenological position, these are constitutive for the disturbance of minimal self. This, in turn, leads to a shift in the discussion from the question of what kind of role language plays in the pathogenesis of schizophrenia to that of whether it plays a role at all. However, both positions cannot provide strong enough evidence to exclude the other, as (1) phenomenology does not provide any evidence in support of the claim that schizophrenia can develop in the absence of language (because it does not even consider the possibility of constitutive relationships between minimal self and linguistic self), and (2) Stern's account of the relationships between the core self and the verbal sense of self are too vague to argue for the opposite. As such, further research on the relationships between minimal self and linguistic self is required. Yet, an interdisciplinary cooperation between phenomenological research and neurobiological research on animal models of schizophrenia has been suggested as a potentially valuable source in support of the phenomenological claim. However, as far as the argument of the present thesis goes, no final answer can be given to the conflict between the phenomenological position and Stern's account. Yet, this does not leave us without any insight. There are two main conclusions we can draw from the debate between phenomenology and Stern's account from developmental psychology: (1) phenomenology is faced with a problem when using Stern as support for any claim that goes beyond that of proving the existence of a minimal self; and (2) whereas many arguments have been provided against the claim that language is the one and only factor relevant to the pathogenesis of

schizophrenia, the same arguments cannot be re-used to show that language cannot even be partially involved in it.

Finally however, beyond the debate on whether the verbal domain of relatedness is constitutively involved in the disturbance of minimal self, a specific form of language has been suggested to have a therapeutic value, namely its poetic use. Although there exists a rich corpus of literature on the relationship between schizophrenia and creativity, and the therapeutic benefit of art therapy more generally, lots remains to be said about the more concrete function and value of poetry in schizophrenia. Three aspects of poetry have been identified as being of high therapeutic relevance: it (1) constitutes a way for the patient to express and grasp his own experiences in a way that has not been possible before, which (2) can be shared with others, and as such creates a first step in establishing or restoring relationships of being-with and (3) might improve our understanding of schizophrenia. It is up to future research to further investigate and evaluate the ultimate magnitude of the impact it could possibly have on the disturbance of minimal self.

Finally, I want to conclude the thesis with the following poem by the American poet Charles Bukowski, who described poetry as “the ultimate psychiatrist”:

Writing often it is the only thing between you and impossibility. No drink, no woman's love, no wealth can match it. Nothing can save you except writing. It keeps the walls from failing. The hordes from closing in. It blasts the darkness. Writing is the ultimate psychiatrist, the kindest god of all the gods. Writing stalks death. It knows no quit. And writing laughs at itself, at pain. It is the last expectation, the last explanation. That's what it is.<sup>46</sup> (Bukowski 1991, *Writing*)

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<sup>46</sup> Charles Bukowski (1991). Writing, in *Black Gun Silencer 2*, in: <https://allpoetry.com/poem/8509533-Writing-by-Charles-Bukowski> (last accessed 2018-10-24).

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The definition of language used in chapter 1 can be found online in:

<https://en.oxforddictionaries.com/definition/language> (last accessed 2018-10-24).

## Abstract

In phenomenological psychopathology, schizophrenia is described as a disruption of ipseity, the “vital and self-coinciding subject of experience or first-person perspective of the world” (Sass and Parnas 2003, 428). Also referred to as the minimal self, this primitive form of I-awareness is not a linguistically mediated representation of oneself, but a pre-reflexive, implicit, non-conceptual sense of existing as a subject of awareness, which constitutes our primary presence in the world (Stanghellini 2009, 56). Against this, drawing on a language-based account of human-specific forms of thought, reference, and selfhood centred on grammar, Hinzen and Rosselló (2015) argue that the disturbance of self as witnessed in schizophrenia has its origin in an impairment of language. Not only do they deny the traditional definition of schizophrenia as thought disturbance, but also and more importantly here, that the self-disturbance in question is a disturbance of a fundamental and pre-reflective awareness of self, situated at a prelinguistic level. The aim of this master thesis is an interdisciplinary comparison between linguistic and phenomenological dimensions of the self in schizophrenia, in order to clarify the role language plays in this disorder: Is the self-disturbance schizophrenia essentially a linguistic disorder, or is it more fundamental than described by recent linguistic research?

In der phänomenologischen Psychopathologie wird Schizophrenie allgemein als eine Störung unserer empirischen Subjektivität verstanden, die unseren primären Zugang zur Welt bildet. Diese primitive Form von Subjektivität wird in der Phänomenologie auch als eine minimale Form eines Selbst bezeichnet, die keine sprachlich vermittelte Abbildung von uns selbst ist, sondern ein präreflexives, implizites und vorbegriffliches Selbstbewusstsein darstellt (Stanghellini 2009, 56). Demgegenüber tritt die sprachwissenschaftliche Theorie von Wolfram Hinzen, in welcher er behauptet, dass Sprache, Denken und Selbst konstitutiv miteinander verbunden sind. Dementsprechend wird argumentiert (Hinzen & Rosselló 2015), dass die Selbst-Störung, wie wir sie in der Schizophrenie antreffen, ihren Ursprung in einer Sprachstörung haben. Damit wird nun nicht nur die traditionelle Definition der Schizophrenie als eine Denk-Störung geleugnet, sondern vor allem, der phänomenologische Grundgedanke, dass sie eine Störung unseres präreflexiven Selbstbewusstseins ist, die auf einer vorsprachlichen Ebene verankert ist. Durch einen interdisziplinären Vergleich zwischen den sprachlichen und phänomenologischen Dimensionen des Selbst in Schizophrenie soll

verdeutlicht werden, welche Rolle Sprache nun tatsächlich in Letzterem einnimmt: Ist die Selbst-Störung in Schizophrenie wesentlich eine sprachliche Störung? Oder umfasst sie fundamentalere Aspekte des Selbst?



