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Merleau-Ponty and the Foundations of Psychopathology

Maurice Merleau-Ponty was a 20th-century French philosopher who worked at the intersection of phenomenology and existentialism. Phenomenology, founded by Edmund Husserl and further developed by his students, including Martin Heidegger, is the study of human experience and existence. Traditionally, it describes the essential structures of consciousness—i.e., those features that hold for any experiencing human subject—including selfhood, intersubjectivity, affectivity, and temporality. Existentialism, in contrast with phenomenology, is not a systematic research program. Its themes originate in the 19th-century work of Søren Kierkegaard and Friedrich Nietzsche, though “existentialism” was not used as a philosophical label until Gabriel Marcel applied it to the work of Jean-Paul Sartre in the 1940s (Fulton 1999, 12–13). Like phenomenology, existentialism is the study of the nature of human existence and with how we experience a meaningful world. But existentialists are primarily concerned with human processes of self-creation—such as how we become who we are, or transform our identity—rather than with the unchanging *essence* of human being. In this respect, existentialists typically study contingent, rather than necessary, features of human existence.

In integrating these two apparently opposing lines of thought, Merleau-Ponty belongs in the company of other French phenomenologists, including Jean-Paul Sartre and Simone de Beauvoir, who were inspired by Heidegger’s application of phenomenology to the study of existential themes, such as death and authenticity. These philosophers continued phenomenology’s inquiry into the structures of experience, but turned their attention toward contingent and particular structures, rather than just necessary and universal ones. This

existential turn in phenomenology is perhaps best expressed by Sartre's famous line: "existence precedes essence" (Sartre [1945] 2007, 20). According to Sartre, the central feature of human existence is that we are free to decide who we are—we are radically free. I might see myself as a waiter, a mechanic, or a professor but, in truth, I am none of these. I am, first and foremost, the power of freely willing myself to become who I wish to be. (In an interview, Beauvoir claimed that Sartre even believed seasickness was the product of weak will; with enough willpower, anyone could overcome his seasickness [Simons 1992, 30]). Merleau-Ponty, a friend and colleague of Sartre and Beauvoir, also made human contingency central to his philosophical project—for him existence also precedes essence. But Merleau-Ponty was more concerned with how our natural and cultural circumstances shape us, than with how we freely shape ourselves.¹ To this end, he was especially interested in psychopathological conditions, from psychoanalytic neuroses to neurological disorders.

Merleau-Ponty's studies of psychopathology are often read as nothing more than instrumental examples in his studies of perception, including in his major work, *Phenomenology of Perception*; by examining how some aspect of perceptual experience goes awry (for instance, in schizophrenic hallucinations), we can gain insight into aspects of normal perception that we might have otherwise overlooked. This interpretation is not without merit (Merleau-Ponty does employ psychopathological examples instrumentally), but it would be inaccurate to characterize his interest in psychopathology as *merely* instrumental. Merleau-Ponty was interested in the psychopathological forms of human experience and existence because he aimed to construct a phenomenological program that adequately accommodated these conditions.

There are, of course, many phenomenologists who devoted themselves to the study of psychopathological conditions. Karl Jaspers first established psychopathology as an

interdisciplinary program employing the tools of natural science alongside philosophical phenomenology. In *General Psychopathology*, he draws a distinction between “explanation” and “understanding,” arguing that scientists can *explain* the causes of disorder, but only phenomenologists can *understand* the experience of disorder (Jaspers [1913] 1997). Only through the integration of natural science and phenomenology can we give an adequate account of mental disorders. Numerous phenomenological psychopathologists followed this line of thinking, including Ludwig Binswanger, Medard Boss, Frantz Fanon, Kimura Bin, Eugene Minkowski, Erwin Straus, and Hubertus Tellenbach. They developed novel accounts of mental disorders, including schizophrenia, melancholia, and various neuroses. With such a rich tradition of phenomenological psychopathology, why should we devote ourselves to the study of Merleau-Ponty’s approach?

Merleau-Ponty’s approach is distinctive because he seriously engages with the philosophical foundations of his own work. Most other phenomenological psychopathologists either took phenomenology’s ability to illuminate psychopathological experience for granted, or they integrated phenomenological and empirical approaches without considering the philosophical implications of these integrations.ⁱⁱ This is why we must turn to Merleau-Ponty, who explicitly developed metaphysical and methodological foundations for phenomenological psychopathology.

In this chapter, I outline some distinctive elements of Merleau-Ponty’s metaphysics and method, and show how his work can provide a foundation for contemporary phenomenological studies of mental disorder. In section 1, I argue that Merleau-Ponty developed a new *metaphysics* that accommodates psychopathology by challenging the traditional distinction between transcendental and empirical phenomenology. In section 2, I argue that Merleau-Ponty modified

the core of the phenomenological *method*—i.e., the reduction, or epoché—in order to critically engage with the human sciences. Each section is composed of three subsections: the first provides an account of Husserl’s phenomenology, and shows how it falls short of what we require for the study of psychopathology; the second describes Merleau-Ponty’s novel phenomenological approach; and the third provides examples of contemporary applications of Merleau-Ponty’s approach to psychopathology.

1 Metaphysics

It has been argued that Merleau-Ponty began his philosophical career as a phenomenologist, but by the end he had become a metaphysician—that is, a philosopher whose primary concern is with the nature of being, or reality. Merleau-Ponty certainly devoted himself to metaphysical questions in his later works, but he was concerned with metaphysics from the start. In this section, I outline Merleau-Ponty’s early phenomenological metaphysics, and show how he developed it with the aim of doing justice to psychopathological forms of human experience and existence.

1.1 Husserl’s Transcendental Idealism

Before jumping into Merleau-Ponty’s metaphysics, it will be helpful to outline the metaphysical position that he aims to overcome. Rather than criticizing a single philosopher, Merleau-Ponty criticizes a philosophical position called transcendental idealism. This metaphysical stance originated in Immanuel Kant’s *Critique of Pure Reason* ([1781] 1999), and had a major influence on the course of 19th- and 20th-century philosophy. While transcendental idealism takes various forms, we can focus on two elements that concern Merleau-Ponty specifically: First, it posits that the human subject constitutes or discloses a lived, orderly, and meaningful world—or makes the experiential world present—through some operation of the mind; second, it posits that

the structures of human subjectivity that constitute the world of experience are essential, unchanging, or innate mental structures—they are necessary conditions for the possibility of knowledge and experience.

Husserl, insofar as he aimed to uncover the *essential* structures of consciousness and the necessary conditions for the possibility of experience, espoused a metaphysics of transcendental idealism. In this respect, phenomenology was originally conceived as an eidetic science—a philosophical investigation into the *eidōs*, or essence, of human experience and existence. This approach is best exemplified in *Ideas I* (Husserl [1913] 2014), the first major work in which Husserl established phenomenology as a transcendental project inspired by the Kantian tradition. In this early work, Husserl was not concerned with human contingency, variability, or particularity. Instead, he concerned himself with necessity, invariance, and universality.

But soon his phenomenology became “genetic phenomenology,” a concrete investigation into the genesis—i.e., the origins and development—of human experience. This new phenomenology emphasized how our body and history shape how we experience and understand our environment. Developing phenomenology in this direction, Husserl explored physical disabilities, such as blindness and deafness, as well as cultural differences. He admits, for example, that some cultural groups have a cyclical—rather than linear—conception of time, and therefore experience the flow of time differently (Husserl [1935] 2008). But these studies introduced confusion into his philosophical project: How can we articulate the essential, invariant structure of experience if this structure differs across cultures, and for people with certain physical disabilities? This seems a contradiction. He resolved this concern in his final book, *The Crisis of European Sciences and Transcendental Phenomenology* (Husserl [1954] 1970), by arguing that there are both essential, unchanging structures of experience, and

historically contingent structures. Necessary structures are “transcendental”; contingent structures are “empirical.” Furthermore—and this is the key point in resolving the contradiction—the empirical structures are founded upon the transcendental structures. That is to say, despite our differences, there are basic structures of experience that we all share. If, for example, you and I grew up in different linguistic communities, then I will perceive certain symbols etched on paper as meaningful words, but you will perceive them as meaningless symbols (if you perceive them as symbols at all). You, on the other hand, will experience other kinds of symbols as meaningful words, while I will experience them as just meaningless symbols. Yet, in spite of this difference, we both have the capacity to acquire written language, that is, to experience symbols etched on paper as conveying multifaceted and complex meanings. In other words, while the linguistic structure of our experience differs *empirically*—perhaps I understand English and you understand Mandarin—we both have the same *transcendental* conditions that allow us to acquire and employ written language. In the same spirit, we could resolve the apparent conflict between different cultures’ experiences of the passage of time by suggesting that empirically different conceptions (e.g., of time as linear or as circular), are founded upon, or made possible by, the same transcendental structure of temporality.

This two-level approach seems to accommodate human difference, thereby allowing phenomenologists to investigate diverse forms of human life. But Husserl was not convinced that his solution could accommodate more profound changes in experience, such as the experience of the infant, or of the person with a severe mental disorder (Husserl [1954] 1970, 187–88). These conditions might involve alterations of the most fundamental structures of experience. The infant, for example, lacks the capacity for written language—not because she has not learned one, but because she currently lacks the cognitive conditions for learning a written language in

the first place (Heinämaa 2014). If these alterations occur not only in the course of normal development, but also in psychopathological conditions in adulthood, then this might undermine Husserl's claim that there are universal structures of experience shared by all human beings.

1.2 Merleau-Ponty's Metaphysics

Husserl does not resolve this tension in his own work, but he sets it out as a problem for future phenomenologists. Luckily, his challenge was not ignored. Merleau-Ponty was one of the first philosophers to acquaint himself with Husserl's late work and unpublished manuscripts, and took up Husserl's above-mentioned challenge. He resolved to develop a new metaphysics that accommodated the diversity of human life, including psychopathology.

In Merleau-Ponty's most famous work, *Phenomenology of Perception* ([1945] 2012), he introduces the case of Johann Schneider, a German World War I veteran who suffered a brain injury and whose condition was studied extensively by the psychologist Adhemar Gelb and the neurologist Kurt Goldstein. Schneider's condition involves a fundamental disturbance in his bodily motility. Schneider is unable to perform "abstract" movements with his eyes closed—that is, movements that take place in an imagined or merely possible situation, rather than the actual, concrete situation. Such actions might include anything from moving a limb up and down upon command to performing in a theatrical production to illustrating how objects move in an objective coordinate system. Yet, in spite of Schneider's inability to perform these movements, he can easily perform "concrete" movements—that is, movements that take place within his actual, or concrete, situation. While Schneider cannot move his arm up and down upon command, he can easily reach into his back pocket, remove his handkerchief, and blow his nose (Merleau-Ponty [1945] 2012, 105–12).

Merleau-Ponty argues that Schneider's behavior reveals a fundamental disturbance in how he experiences space. And this disturbance is the product of Schneider having lost the function of "projection," or of "conjuring up" meaningful situations ([1945] 2012, 115). Maintaining his habitual world of everyday engagements, he nevertheless cannot project other kinds of space, such as the objective space of a coordinate system, or the imagined space required for playing or acting. Schneider's loss of the capacity for "projection" reveals two ways that human beings engage with a meaningful world. As Merleau-Ponty argues, in much of our everyday life, we function within the concrete situation of our environment. When I enter the classroom, there is already a network of meaningful relations among myself, my students, the tables and chairs, and the whiteboard. I do not need to actively create this situation. It simply presents itself to me. But we also find occasion to play and act, to speculate, to theorize. And when we perform these activities, we do so within a situation that we ourselves project, or conjure up. Moreover, we do not convince ourselves that this new situation is real. Rather, we move within this situation precisely as fictional, or as imaginary: when I perform Shakespeare's *Hamlet*, I do not take myself to be the real Hamlet; I experience my performance *as a* performance. Likewise, if my friend and I watched *The Changing of the Guard* in London and I imitate the guard's march, I do not take myself to be the guard; we both experience my behavior precisely as an act of imitation, or play, that only makes sense within the particular imaginative context that we have projected for ourselves. Schneider, and those with similar conditions, cannot have this kind of experience. They can no longer project new situations around themselves. As Merleau-Ponty says, "The world no longer exists for these patients except as a ready-made or fixed world, whereas the normal person's projects polarize the world, causing a thousand signs to appear there" ([1945] 2012, 115). Schneider cannot even have political or

religious opinions—these domains do not reside in his concrete situation, and he cannot produce them himself.

Schneider's condition and Merleau-Ponty's analysis have received considerable attention (Dreyfus 2007; Matherne 2014; Romdenh-Romluc 2007). But much of this literature ignores how Merleau-Ponty used this case study as a catalyst and justification for his metaphysical project. Merleau-Ponty suggests that the transcendental idealist—including the Husserlian phenomenologist—could not account for Schneider's condition by appealing to the loss of projection. This is because for the transcendental idealist, “[o]ne thing alone is comprehensible, namely, the pure essence of consciousness” (Merleau-Ponty [1945] 2012, 127). The transcendental idealist posits an essential, invariant structure of consciousness, and therefore cannot appeal to changes in this structure when trying to make sense of the condition. In light of this metaphysical commitment, he is left with two equally implausible options when presented with the mentally ill person: this person either fails to count as an experiencing subject, or he is deceiving himself—“*Behind his delusions, obsessions, and lies, the madman knows that he is delirious, that he makes himself obsessive, that he lies, and ultimately that he is not mad, he just thinks he is*” (Merleau-Ponty [1945] 2012, 127). A metaphysics of transcendental idealism leaves no room for severe psychopathology because it posits in advance a universal structure of consciousness manifested by all human beings; one either manifests this universal structure, or one is not an experiencing subject at all.

In light of this shortcoming, Merleau-Ponty requires a new metaphysics that does justice to the possibility and diversity of mental illness (Fernandez 2015). This project of devising a post-transcendental metaphysics occupied Merleau-Ponty up to his final, unfinished work, *The Visible and the Invisible* ([1964] 1968). However, he set up the problem and provided an initial

sketch of his metaphysical solution in *Phenomenology of Perception*. He set himself the task of finding “the means of linking the origin and the essence of the disorder,” or of establishing “a *concrete essence* or a *structure* of the illness that expresses both its generality and its particularity” ([1945] 2012, 127). In other words, rather than seek the essence of consciousness as such, he seeks the general structure of each *kind* of consciousness, while also keeping sight of those features that are distinctive of each *particular* case. In so doing, he must acknowledge the generality of the illness (i.e., those features shared by everyone with this kind of condition), and the particularity of the illness (i.e., those features that are distinctive of the individual’s condition). For example, in a study of schizophrenia, the Merleau-Pontyan phenomenologist should articulate general features of schizophrenia (e.g., the general structure of hallucinations), while also attending to its distinctive manifestation in the subject in question (e.g., the particular objects that *this* subject hallucinates).

To develop this new phenomenological metaphysics, Merleau-Ponty aims to establish “a relationship that would be neither the reduction of the form to the content, nor the subsumption of the content under an autonomous form” ([1945] 2012, 128). In other words, we cannot appeal to an autonomous, transcendental structure of experience that determines the content of experience in advance. This wouldn’t leave any room for contingent experiences, or the accidents of human life, to alter the fundamental structure of experience—as they do in some cases of psychopathology. According to Merleau-Ponty, we can only resolve this problem if we admit an alternative metaphysical relation between the form and content of experience, one in which “[f]orm absorbs content to the point that content ultimately appears as a mere mode of form” ([1945] 2012, 128). He suggests, initially, that this will be a dialectical relationship between form and matter in which the two sides intertwine and mutually shape each other. But

this, he admits, is a poor characterization. It assumes that form and content are two independent phenomena that might come into contact. But, in actuality, each is an abstraction from the real phenomenon of “human existence,” which he redefines as “the perpetual taking up of fact and chance by a reason that neither exists in advance of this taking up, nor without it” ([1945] 2012, 129).

Merleau-Ponty’s approach seems promising, but it’s difficult to decipher—in part because he embraces contradictory formulations and paradoxical language. We can clarify his approach by drawing a parallel with Gestalt psychology, which had a major influence on his thinking. The Gestalt psychologists argued that our experience is self-organizing. I do not impose a form on the contents of my experience. Rather, the contents of experience form themselves into a self-organized, meaningful whole. It is always this whole that I am presented with, which is not simply a sum of distinct parts. Merleau-Ponty, inspired by this psychological insight, transformed it into a metaphysical insight about human existence itself. Human existence does not have some necessary form that is simply filled in by contingent content. Rather, what we call the “form” or “structure” of human existence is a description of the holistic organization that my experience and existence assume. Because this form is not independent or autonomous, it can be fundamentally reshaped by the content of life-experiences. Human existence is always shaped by its natural and cultural circumstances. This is not to say that the subject is passively constituted by her environment. She also constitutes the sense and meaning of her environment in turn. Merleau-Ponty’s point is to highlight that there is no autonomous, unchanging form of human existence that underlies our particularities and differences. Insofar as we are subject to the circumstances of life, we are radically contingent beings.ⁱⁱⁱ

In this formulation of human existence we find the metaphysical possibility of mental illness, or of the disordered subject. According to Merleau-Ponty, it is because our subjectivity is embedded in a material body and a concrete environment that we can become ill in the first place.

1.3 Metaphysics: Contemporary Applications

Of course, our goal is not simply to *understand* Merleau-Ponty's new metaphysics—our goal is to apply it. But how does one “apply” a metaphysics? Metaphysics seems the most abstract of philosophical inquiries, concerned with the nature of reality, not the practical study of mental disorders. Yet, the metaphysical system that we subscribe to always comes with a host of assumptions about our subject matter: What we choose to study, how we approach our objects of investigation, and how we interpret our findings are determined by our metaphysical presuppositions. As Merleau-Ponty points out, if a psychologist subscribes to transcendental idealism then he cannot take the possibility of mental disorder seriously. Rather than explain it, he explains it away; it has no place within his metaphysical system.

A phenomenologist who takes up Merleau-Ponty's metaphysics will interpret her subject matter differently; she will open herself to possibilities that might be neglected by a more traditional phenomenological metaphysics because she will not presume the necessity or invariance of any particular structure of subjectivity. We already found an example of this in Merleau-Ponty's study of Schneider, where he argues that Schneider's condition is best understood not as the projection of a distressing situation (as we find in neuroses), but as the loss of the capacity to project such a situation in the first place. This possibility, he suggests, is not open to the transcendental idealist because it conflicts with what one might take to be the pure essence of consciousness. It would have to be dismissed as a metaphysical impossibility. The

transcendental idealist, confining himself to those accounts that make sense within his metaphysical framework, is left with a much smaller range of possible alterations to appeal to.

How does this model play out in contemporary phenomenological psychopathology? Many contemporary phenomenologists still subscribe to some form of transcendental idealism, insofar as they take on some of the metaphysical commitments of Husserl or early Heidegger. Even in contemporary studies of psychopathology, phenomenology is often characterized as the study of *essential* structures of consciousness, which seems to draw an in-principle distinction between those structures of consciousness that can change, and those that cannot.

We can illustrate how these metaphysical presuppositions play out in two examples: affectivity in major depressive disorder (MDD) and selfhood in schizophrenia.

Phenomenologists often rely on first-person reports, whether from qualitative studies, memoirs, or face-to-face conversations. The phenomenologist examines these first-person reports, and then articulates how the structures of experience must have altered such that the world would be experienced in the way the subject describes it.

In the case of MDD, many people report changes in their moods and emotions. As a result, phenomenologists (and psychiatrists) often characterize depression as a distinctive mood, or way of being affectively attuned to the world—e.g., profound sadness, grief, guilt, or despair. Many of these phenomenologists also work within an early Heideggerian framework, which, like the Husserlian framework, assumes a level of essential, invariant structures of human experience. Heidegger, for instance, argues that affective attunement is essential to human existence, and that human beings are therefore always attuned to their world through some mood or other; it is impossible to be without a mood (Heidegger [1927] 1962, 172–79). However, many people describe their depression as a loss of moods and emotions *in general*, rather than as a certain

kind of mood, or even as a loss of particular moods, such as happiness or joy (Fernandez 2014).

In his memoir, *The Noonday Demon*, Andrew Solomon describes this experience:

The first thing that goes is happiness. You cannot gain pleasure from anything. That's famously the cardinal symptom of major depression. But soon other emotions follow happiness into oblivion: sadness as you know it, the sadness that seemed to have led you here; your sense of humor; your belief in and capacity for love. Your mind is leached until you seem dim-witted even to yourself [...] You lose the ability to trust anyone, to be touched, to grieve. Eventually, you are simply absent from yourself. (Solomon 2001, 19)

Reports like this—where one cannot feel sadness, cannot even grieve—pervade the literature on depression. Yet, in both the phenomenological and the psychiatric literature, these reports are often not explained; they are explained away. The reported *loss* of feeling is redescribed as a particular *kind* of feeling (e.g., a *feeling* of not feeling). At least in the phenomenologist's case, this tendency to redescribe a loss of feeling as a kind of feeling falls in line with Husserl's and Heidegger's metaphysical presuppositions. There are certain structures of experience that we presume to be *essential*. If we know in advance that they cannot be lost, then we need not consider such a possibility.

A similar debate plays out in the phenomenological literature on selfhood in schizophrenia and other disorders. Husserlian phenomenologists are generally committed to the claim that some sense of selfhood, at least in the minimal sense of “for-me-ness,” always accompanies experience. This aspect of minimal selfhood is part of the essence of experience; it would be impossible to have an experience without it. But, as Dan Zahavi points out, some philosophers argue that psychopathology provides an objection to this account (Zahavi Forthcoming). They argue that some experiences, such as thought-insertion and severe depersonalization—both symptoms of schizophrenia—are characterized by an experience without a basic sense of for-me-ness, or sense of mineness. Zahavi argues, in contrast, that if we adequately clarify our various notions of selfhood, we will find that even in these

psychopathological cases a sense of for-me-ness is retained, necessarily entailing that some sense of self and self-awareness remains intact.

There is, however, an important point to consider in Zahavi's approach. While he might begin his investigations within a Husserlian framework, he remains open to the possibility of deep contingencies and alterations in the structure of experience. He does not simply *assume* that we retain a minimal sense of self even in cases of thought-insertion and severe depersonalization. He carefully considers the evidence and provides arguments for his position. This, in the end, is not so different from Merleau-Ponty's approach to the study of psychopathology. While Merleau-Ponty would likely admit more contingency in the structure of experience than would a Husserlian phenomenologist, he sometimes makes essentialist claims about experience, and seems willing to defend them—e.g., that the perception of a figure is possible only if the figure is presented upon a background.^{iv}

By providing these examples, I am not arguing that it is necessarily incorrect to characterize the affective dimension of depression as a kind of mood, or to characterize experiences of thought-insertion and severe depersonalization as retaining a basic sense of selfhood. Rather, I want to illustrate how our metaphysical commitments predetermine how we interpret our evidence—what we dismiss, what we take seriously, what we feel justified in redescribing, and so on. This holds for evidence beyond self-reports, but contemporary phenomenological psychopathologists often rely on self-reports as a major source of evidence, so it is worthwhile to think about how we engage—and how we should engage—with such evidence.

Merleau-Ponty's metaphysical commitments—in contrast with Husserl's and the early Heidegger's—allow more leeway in how we interpret our case studies. And Merleau-Ponty

developed this metaphysical stance precisely because he was unsatisfied with classical phenomenology's inability to do justice to the phenomena. For Merleau-Ponty, we always need *some* metaphysical system to ground and guide our investigations. But this metaphysical system is only as good as the results it produces. As soon as it forces us to make absurd claims, to dismiss evidence, or to devise unjustified interpretations of the phenomena, it is the metaphysical system—and not the phenomenon itself—that we must dispense with.

2 Method

Despite differences among phenomenologists concerning the right metaphysical foundations for understanding human existence, there are broad methodological commitments that all phenomenologists share. One of these is the methodological commitment to critically evaluating and suspending our presuppositions and prejudices. If we do not critically evaluate our presuppositions, then we risk describing our phenomenon of investigation not as it is, but as we already believe it to be. Rather than accurately describing what Husserl calls “the matters themselves,” we might simply reiterate the current cultural or scientific conception of our subject matter. But while all phenomenologists agree that we should maintain a critical attitude toward our prejudices, they do not agree on how we should evaluate and suspend these prejudices. They employ different methods of evaluation and suspension, and they express varying degrees of optimism about how successful these methods can be.^v

2.1 Husserl's Reduction

In Husserl's case, the central element of his method is the phenomenological reduction. Depending on how we interpret it, there are either multiple reductions—the transcendental, the eidetic, and so on—or multiple stages of the reduction. Which interpretation we adopt here is not

especially important, but our focus will be on the epoché, which we might characterize as either the first reduction, or the first stage of the reduction, depending on the interpretation we employ.

Husserl borrowed the term “epoché” from the Greek skeptics, who argued that we should suspend judgment on any matter until we have considered all of the evidence. But for Husserl, the epoché isn’t so much a suspension of explicit judgments as it is a suspension of our tacit beliefs about the world and our experience of it. Moreover, Husserl’s epoché is first and foremost a change in attitude—a shift from the natural attitude to the phenomenological attitude. The natural attitude is the attitude of everyday life in which we take our experience of the world for granted; we do not reflect on how the world is presented to us through experience. This everyday attitude is problematic for the phenomenologist because she aims to articulate how we experience the world, and how our subjectivity plays a role in its presentation. She therefore shifts herself into a phenomenological attitude, focusing on *how* we experience, rather than *what* we experience. As Robert Sokolowski puts it, in the epoché “[w]e look *at* what we normally look *through*” (Sokolowski 2000, 50).

This shift into the phenomenological attitude requires that we suspend, or bracket, our host of presuppositions and prejudices about the world. For example, in order to attend to how an object of experience is presented to me—say, my coffee mug—I have to suspend my beliefs that the mug is already there, existing independent of me, taking up physical space, available to others, and so on. As a phenomenologist, I ask *how* the coffee mug presents itself to me *as* existing independent of me, *as* taking up physical space, *as* available to others, and so on. When producing these descriptions I cannot presume, for instance, that the world is already populated by physical objects and that my perceptual capacities merely present me with appearances of these physical objects. Even if this were an accurate natural-scientific account of perception, it is

not the kind of account the phenomenologist is after. It fails to describe *how* these objects are presented to me in the first place.

While Husserl remained committed to the importance of the epoché, his method evolved over his philosophical career. When his interest shifted from the necessary and universal structures of experience to the contingent and culturally relative, he developed new methods to accommodate his new subject matter. In his studies of the cultural constitution of experience, Husserl realized that our cultural prejudices shape our experience to such a profound degree that we cannot simply suspend these prejudices in one fell swoop. They are ingrained in us, shaping not just our beliefs about what we experience, but even *how* we experience. Therefore, when we try to enter the phenomenological attitude via the epoché, we often retain prejudices that we didn't even know we had.

This poses a problem for the phenomenologist, who wants to return to “the matters themselves.” If our presuppositions about our subject matter are so ingrained that we cannot bracket them through the epoché—i.e., through a shift in attitude—then how can we continue to do phenomenology? If we are incapable of extricating ourselves from our own prejudices, then we are condemned to describe what we already believe to be the case, and nothing more. In light of this problem, Husserl takes a methodological turn, although his goal remains the same. Rather than bracket his presuppositions through a change in attitude, he brackets his prejudices by actively seeking them out and analyzing them. Only through this process can he loosen his presuppositions to such a degree that he might attend to the matters themselves.

Some scholars argue that Husserl's late works usher in a different kind of epoché, what David Carr calls the “historical reduction” (2009). This new epoché aims at the same ends—the loosening and suspending of prejudices—but employs the means of historical inquiry. If we want

to understand our current prejudices and how they shape our experience, we need to discover the origins of these prejudices and find where they sedimented into our cultural lifeworld—i.e., the meaningful world of everyday life. To take one example, consider Husserl’s historical inquiry into Galileo’s “mathematization of nature” (Husserl [1954] 1970). He argues that Galileo’s major contribution to scientific thought was not his discovery of basic principles of the physical universe, but his reconceptualization of nature *as objective*. He claims that prior to this reconceptualization, we experienced the natural world as shared, as available to others in the way it is available to us. But we did not experience it as objective, in the sense of some independent reality existing behind the merely subjective appearances presented in our experience. It was Galileo’s novel conception of nature, he argues, that sedimented into our lifeworld—at least the European lifeworld—and became the normal way of experiencing our environment. According to Husserl, Galileo initiated a worldview in which we discount our everyday experiences in favor of the insights of a particular cultural practice—the practice of natural science.

While many celebrate this worldview, Husserl laments the fact that this Galilean insight covered over the richness of everyday experience. It is this experience that phenomenologists aim to describe, but that a natural-scientific worldview ignores. In order to get back to this experience, he argues, we must discover the prejudices that have reshaped our experience, and only then can we suspend them and return to “the matters themselves.” It is this new method, I argue, that inspires Merleau-Ponty’s approach to psychopathological experience and subjectivity.

2.2 Merleau-Ponty’s Incomplete Reduction

Merleau-Ponty famously said, “The most important lesson about the reduction is the impossibility of the complete reduction” ([1945] 2012, lxxvii). This is not a dismissal of Husserl’s reduction. Merleau-Ponty does not believe the reduction is impossible, only that its

completion is impossible. And this falls in line with Husserl's late approach, which requires that we remain open to the possibility of being misled by presuppositions and prejudices that we didn't know we had.^{vi} This is because we cannot fully extract ourselves from our embodied, historical context:

This is why Husserl always wonders anew about the possibility of the reduction. If we were absolute spirit, the reduction would not be problematic. But since, on the contrary, we are in and toward the world, and since even our reflections take place in the temporal flow that they are attempting to capture... there is no thought that encompasses all of our thought. Or again, as the unpublished materials say, the philosopher is a perpetual beginner. This means that he accepts nothing as established from what men or scientists believe they know. (Merleau-Ponty [1945] 2012, lxxvii–lxxviii)

We must subject both our everyday and scientific beliefs to critical scrutiny. And, whenever we are able, we must hold these beliefs in abeyance until we consider all of the available evidence and properly attend to our phenomenon of investigation.

But what does this have to do with psychopathology? When Husserl developed his historical epoché, he was concerned with how geometry and post-Galilean physics altered the lifeworld of scientists, as well as the lifeworld of everyday people. He was interested in how scientific advancements prompted us to reconceive the natural world as *objective* and, as a result, doubt our own experiences insofar as we conceive of them as *subjective*. Merleau-Ponty carries on this tradition, but with an eye toward the prejudices of the contemporary cognitive sciences, including psychology, psychiatry, and neuroscience.

We find one of the best examples of this approach in Merleau-Ponty's introduction to *Phenomenology of Perception*, entitled, "Classical Prejudices and the Return to Phenomena." Here, he undermines the prejudices and presuppositions that we might have about our subject matter—in this case, perception—in order to get at the "phenomena," or what Husserl would call "the matters themselves." But Merleau-Ponty does not ask us to slip into a phenomenological

attitude in which our “classical prejudices” fall away, leaving us with the untainted phenomena. Rather, he undermines prejudice by confronting it head on. He carefully analyzes standard concepts—including “sensation,” “association,” “memory,” “attention,” and “judgment”—to show how our typical understanding of these concepts misleads us, causing us to misconstrue the nature of perception. In his study of “sensation,” for example, he shows that the three competing theories—sensation as (1) impression, (2) quality, and (3) immediate consequence of a stimulation—actually share a problematic presupposition. They presume that perception is built up of little bits of sense data that the subject conglomerates into a holistic experience (even if they disagree on the nature of this sense data and how the subject conglomerates them). The trouble with these views is that they explain the *act* of perceiving by appealing to *objects* of perception; they neglect the *how* in favor of the *what*. In short, they beg the question—they do not tell us *how* we experience objects *as* objects because they presume the existence of experiential objects (i.e., bits of sense data) in their explanations. As Merleau-Ponty says, “[w]e thought we knew what sensing, seeing, and hearing are, but now these words pose problems. We are led back to the very experiences that these words designate in order to define them anew” ([1945] 2012, 10). What Merleau-Ponty provides us with in his introduction is not a new theory of perception, but a Socratic inquiry that makes manifest just how little we know about perception. Only by engaging in this negative inquiry, and discovering what we do not know, can we put ourselves in a position to develop a new and better theory of perception. This process, of course, can never be completed. There will always be more presuppositions and prejudices that we have missed. And we are therefore left with Merleau-Ponty’s incomplete reduction.

2.3 Method: Contemporary Applications

The application of method—unlike the application of metaphysics—is fairly straightforward: in order to apply a Merleau-Pontyan reduction to the domain of psychopathology, we should critically evaluate the basic concepts and presuppositions that ground this field of inquiry. If we fail to do this, we risk obscuring the psychopathological phenomena by describing what we already believe to be the case.

To illustrate this, we can consider examples of depression and bipolar disorder. As Giovanni Stanghellini (2004) points out, recent editions of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM) and the *International Classification of Diseases* (ICD) insufficiently describe mental disorders and fail to clearly delineate their boundaries. Consider one of the central diagnostic criteria for MDD: depressed mood. Is a depressed mood a kind of mood, or a loss of feeling? Is it qualitatively different from a normal, healthy mood, or is it simply a matter of degree? Is it a pathological form of sadness, or is it different from sadness? None of these questions are answered—or even addressed—by contemporary diagnostic classifications. This is not because the answers are exceedingly difficult to come by, but because it is presumed that we all know what we mean by “depressed mood.” We do not even realize it is a question that needs asking. But as phenomenologists have shown, when it comes to our own experience we know considerably less than we think.

A similar problem plays out in the psychiatric literature on bipolar disorder. The term “bipolar” suggests that the condition not only includes two distinct states—depression and mania—but that these states are polar opposites. This feature of the condition is contained in its label, and the term therefore predisposes us to think about the condition as a movement between these two poles. But if we look to the history of the concept of bipolar disorder, we find that the bipolar model—which succeeded the concepts of “manic-depressive insanity” and “manic-

depressive reaction”—was just one of three competing models. Other researchers put forward the “triangular model” and the “continuum model.” On the triangular model, there are three distinct states—depression, mania, and euthymia (i.e., a healthy, positive mood)—that are related like points on a triangle. This means that one can move from one state to any other without passing through the third state. One advantage of this model is that it allows us to explain mixed states—i.e., states in which symptoms of depression and mania manifest simultaneously—as a shift from depression to mania, or from mania to depression, that does not pass through euthymia. On the continuum model, the two poles are actually euthymia and mania, with depression in the middle. In this case, depression and mania are not conceived of as opposites, and mixed states are unsurprising because any move between euthymia and mania must pass through a state of depression. Importantly, there does not seem to be much evidence that supports the bipolar model over the other two models. For one reason or another the bipolar model caught on and is now the established label for this condition. In forgetting the history of this concept, it is all too easy to begin our investigations from the assumption that depression and mania are, in fact, polar opposites, and this can problematically predetermine how we describe the experiences of depression and mania (Fernandez 2016a).

Leaving aside the philosophical inquiry into “the matters themselves,” why should psychiatrists and those living with mental disorders be concerned about undefined or poorly defined diagnostic criteria? If psychiatrists already have a basic sense of what they mean by “depressed mood,” isn’t that enough for clinical practice? One problem is that there is no reason to think that psychiatrists agree on their definitions of diagnostic criteria. If this is the case, then they certainly do not agree on how and when to apply these criteria. Perhaps one psychiatrist believes that depressed mood is like severe sadness, another thinks it is a deep sense of guilt, and

yet another thinks it is a loss of feeling. These psychiatrists will hardly be able to agree on who should be diagnosed with MDD, which kinds of interventions should be made for which individuals, and when to deem someone cured, or healthy. And this is only in the domain of clinical practice. If we delve into psychiatric research we will find a host of new problems, such as disagreements in selecting who should be included in a study, or in how to assess the efficacy of an intervention.

But this risks confusing two important issues. Some of these problems might be overcome by stipulating clear definitions of each diagnostic criterion, and therefore clear definitions of each category of disorder. This would at least produce agreement among psychiatrists—they will diagnose the same patients in the same way, establishing what psychiatrists call “reliability.” However, phenomenologists should not be satisfied with clearly stipulated definitions. They should strive for definitions that get at the heart of the matter, clearly articulating the nature and boundaries of the condition in question. They should want their definitions and descriptions of disorders to be “valid.”^{vii} When it comes to “depressed mood” or “bipolar disorder,” the phenomenologist should not want the psychiatric community to simply put forward a definition. Rather, we should carefully attend to the experience that we are trying to point to with each criterion, discover whether it is in fact a unitary phenomenon (or perhaps diverse phenomena clumped under a common label), and articulate its essential features. Only by proceeding in this fashion can we ever hope to fully understand the psychopathological condition in question.

To enact Merleau-Ponty’s reduction, or epoché, phenomenologists need to attend to the concepts used in contemporary psychiatric research and practice, as well as in everyday discourse, and unearth what we are trying to refer to with these terms. In many cases, we might

discover that those who employ the term do not have a good sense of its meaning or its referent. Such an inquiry does not reveal the nature of the phenomenon in question, but it at least reveals how little we know, and thereby puts us in a better position to explore and articulate our phenomenon of interest. Only after interrogating our basic concepts will we be in a position to bracket out our presuppositions, and proceed in our phenomenological investigations of the psychopathological condition itself.^{viii}

3. Conclusion

The application of phenomenology to the study of mental disorders is by no means new, having been established at least as early as Jaspers' *General Psychopathology* (Jaspers [1913] 1997). It is, however, undergoing resurgence today, especially in the philosophical and psychiatric literature on schizophrenia, depression, and various neurological disorders. But much of this work, both historical and contemporary, applies classical phenomenological concepts—such as selfhood, affectivity, and temporality—without critically engaging the phenomenon of mental disorder itself. There is a general assumption that insofar as phenomenology inquires into human experience, it is equipped to investigate *any* human experience. As I have shown, however, the traditional Husserlian approach is not well equipped for the study of dramatic shifts from normal to pathological experience. Husserl's metaphysics presumes an essential structure of experience that is not susceptible to alteration. And his early version of the epoché overestimates our ability to suspend our presuppositions and prejudices (although his later method moves in the right direction). Merleau-Ponty, by contrast, offers a phenomenological approach that takes psychopathology seriously. He devises a new metaphysics that allows for contingency in the most fundamental structures of experience and existence. And his method acknowledges our human limitations, such as our inability to fully extricate ourselves from long-held beliefs. He

therefore recommends critical engagement with contemporary scientific concepts; only by discovering their shortcomings can we put them out of play and return to the phenomenon anew. Through his commitment to accommodating the contingencies of human life, Merleau-Ponty—more than any other phenomenologist—provides the metaphysical and methodological foundations for the contemporary study of psychopathology.

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ⁱ This contrast between Sartre and Merleau-Ponty is a matter of emphasis, rather than a strict divide between their interests and concerns. Moreover, it relies on a caricature of Sartre’s thought—albeit one that Merleau-Ponty himself perpetuated in some of his work. For a careful account of Sartre and Merleau-Ponty’s debate over the nature of freedom—and Beauvoir’s mediation—see Wilkerson (2010).

ⁱⁱ There are, of course, some exceptions. Binswanger and Boss, for instance, seriously considered the relation between their phenomenological approaches and biomedical models of psychopathology. Merleau-Ponty even drew on certain elements of Binswanger’s metaphysics, but I cannot go into this here.

ⁱⁱⁱ There are a host of problems that arise from Merleau-Ponty’s radical contingency, but I cannot address them here. Perhaps the most important is the difficulty of reconciling radical contingency with Husserl’s critiques of psychologism and historicism—i.e., the philosophical claim that mathematics and logic are relative to the structure of the human mind, or two particular cultural configurations, and are therefore only true for us. Husserl’s transcendental ego was meant to address this problem by establishing essential structures of experience. But Merleau-Ponty’s embrace of the radically contingent subject seems to dispense with this solution to psychologism. For an account of how Merleau-Ponty reconciles his account of human subjectivity with the possibility of mathematical truths, see Hass and Hass (2000).

^{iv} Some interpreters grant considerably more weight to Merleau-Ponty’s apparently essentialist claims, and have used these claims to argue that Merleau-Ponty is himself a transcendental philosopher. For an example of this position, see Sebastian Gardner (2015).

^v For accounts of the various roles that prejudices play in phenomenological research, see Fernandez (2016a, 2016b).

^{vi} This general stance seems to be shared by most post-Husserlian phenomenologists, including the hermeneutic phenomenologists, such as Heidegger and Hans-Georg Gadamer, and the existential phenomenologists.

^{vii} The psychiatric concept of “validity” is notoriously difficult to define, and there is not a currently agreed upon definition (see Tabb 2015).

^{viii} In this respect, the above characterization of applied metaphysics might be interpreted as one segment of applied method. That is, insofar as phenomenologists are methodologically committed to critically evaluating and suspending their full range of presuppositions and prejudices, they are necessarily committed to critically evaluating and suspending their *metaphysical* prejudices (e.g., the prejudices of transcendental idealism). Nevertheless, because of the all-encompassing nature of metaphysical presuppositions, I find it helpful to discuss these presuppositions independently.