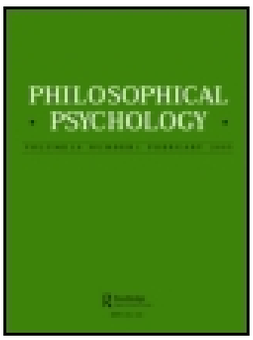

Routledge
Taylor & Francis Group

Philosophical Psychology

ISSN: (Print) (Online) Journal homepage: https://www.tandfonline.com/loi/cphp20

Delusional mood and affection

Jae Ryeong Sul

To cite this article: Jae Ryeong Sul (2021): Delusional mood and affection, Philosophical Psychology, DOI: 10.1080/09515089.2021.1988546

To link to this article: https://doi.org/10.1080/09515089.2021.1988546

Published online: 11 Oct 2021.

PHILOSOPHICAL PSYCHOLOGY
https://doi.org/10.1080/09515089.2021.1988546

Routledge
Taylor & Francis Group

Delusional mood and affection

Jae Ryeong Sul

Department of Philosophy, Durham University, Durham, UK

ABSTRACT

Delusional mood is a well-recognized psychological state, often present in the prodromal stage of schizophrenia. Various phenomenological psychopathologists have proposed that delusional mood may not only precede but also contribute to the later formation of schizophrenic delusion. Hence, understanding experiential abnormalities involved with the delusional mood have been considered central for the understanding of schizophrenic delusion. Ranging from traditional and contemporary phenomenological and neurobiological accounts, it has been often mentioned that the peculiar affective saliency of the world experience may underpin the emergence of delusional mood. In this paper, I employ Edmund Husserl's account of affection and affective syntheses to clarify the nature of such an experience and illuminate how this experiential abnormality contributes to the emergence of the delusional mood. I conclude by relating the phenomenological account I advance here with a neurobiological account of aberrant salience hypothesis and chart out a possible way toward mutual enlightenment for both approaches.

ARTICLE HISTORY
Received 16 July 2019
Accepted 28 September 2021

KEYWORDS
Temporal synthesis; Urdoxa; affection; affective syntheses; affective propagation; affective repression

Introduction

Delusional mood is a well-recognized psychological state often present in the prodromal stage of schizophrenia. Its notable characteristics include several experiential abnormalities. As identified by Karl Jaspers, the first characteristic of delusional mood is the global, atmospheric change. The sense of uncanniness of the world and the ineffable, oppressive tension that "something is going to happen" have been known to pervade and envelop a patient's life (Jaspers, 1997, pp. 98–100). The second characteristic, the most extensively studied by the Gestalt School, is the splintering of an object phenomenon and the bewildering, enigmatic manifestation of the world (Conrad, 1958; Matussek, 1987). An object is no longer perceived as a unified, whole object in its meaningful relation to its surrounding environment, but in its fragmented aspects and its surrounding acquires a peculiar saliency (Matussek, 1987, pp. 90–96). The third characteristic is

CONTACT Jae Ryeong Sul jsul58@gmail.com Department of Philosophy, Durham University, Durham, UK

the loss of the familiar, determinate meaning of an object, or its practical significance. In this state, "[the patient] does not know any more 'what it is all about', why the things he encounters are here at all, and what to do with them" and the determinate meaning of an object remains "abstract and arbitrary" (Fuchs, 2005, p. 136). These experiential abnormalities have been proposed to not only precede the development of schizophrenic delusion but also "prepare the ground for the entry into a delusional world" (Sass & Pienkos, 2013a, p. 642). Hence, the question of how the delusional mood emerges has been the central subject of enquiry in the discussion of schizophrenic delusional formation.

So far, it has often been mentioned that the peculiar affective saliency of the world experience, whereby every insignificant detail of one's surroundings become conspicuously salient, may involve the emergence of the delusional mood (Conrad, 1958; Jaspers, 1997; Kapur, 2003; Matussek, 1987; Sass & Byrom, 2015). This paper employs Husserl's account of affection to illuminate the underlying structure of such an experiential abnormality and map out how its structural alteration can implicate the aforementioned notable characteristics of the delusional mood. I conclude by relating the phenomenological account I propose here with the neurobiological account that also posits the affective salience experience as its target phenomenon, i.e., aberrant salience hypothesis, and advance a mutual enlightenment thesis. My argument proceeds as follows.

I begin by reviewing contemporary accounts of delusional mood. Husserl's phenomenology has been already employed to explain the emergence of the delusional mood. Most notably, Thomas Fuchs (2005) and Wiggins et al. (1990) have argued that the disturbance in "temporal synthesis" and "Urdoxa" underpins the delusional mood experience. Although this is a prevailing account endorsed and developed by various prominent figures (Sass & Pienkos, 2013b; Stanghellini et al., 2016), I contest it on the grounds that their disturbance results not in delusional mood experience but the impossibility in having any experience. Second, I appeal to Husserl's account of affection and affective syntheses (Husserl, 2001). This is to develop a new avenue for providing a more detailed and nuanced phenomenological account of the delusional mood *experience*. From the discussion of affection and affective syntheses, I glean two conceptual tools necessary for providing an alternative account of the delusional mood: affective repression and affective propagation. In short, the former regulates the prominence of a perceived object and its encompassing context, the latter enables the past experiential life of a subject to provide a framework of determinate sense and familiarity to the present experience. Third, employing those concepts, I identify the structural underpinning of delusional mood as the failure of affective repression. I argue that this structural alteration underpins the affective saliency experience and explicates how

such an experiential abnormality further implicates the notable characteristics of the delusional mood. Fourth, I relate the above finding to the aberrant salience hypothesis (Kapur, 2003; Kapur et al., 2005) and advance a mutual enlightenment thesis. I tentatively suggest that the neurobiological hypothesis can complement the proposed phenomenological account by identifying the neurobiological correlate of the failure of affective repression. In turn, the proposed phenomenological account can complement the hypothesis by illuminating how exactly it is that the peculiar affective saliency experience, or in neurobiological terms, aberrant salience phenomenon, can give rise to the delusional mood experience, and thereby resolving its enduring issue concerning the mind-level explanation of the delusional mood.

1. Delusional mood, temporality, and Urdoxa

According to Jaspers, schizophrenic delusion often originates from the alteration in the form of experience, that is, the manner in which one experiences time, the world, others, oneself and objects (Jaspers, 1997, pp. 58–59). As the term delusional mood suggests, the alteration Jaspers focuses on is the atmospheric change involved in the early stage of schizophrenia. In this state "patients feel uncanny and that there is something suspicious afoot [. . .] there is some change which envelops everything with a subtle, pervasive and strangely uncertain light" (Jaspers, 1997, p. 98). Not surprisingly, a fully formed schizophrenic delusion is often characterized by the conviction of being conspired against, surveilled upon, and persecuted. In contemporary phenomenological research context, Husserl's phenomenology has been constantly employed to better clarify the "transformation of our total awareness of reality" (Jaspers, 1997, p. 95). Most notably, Fuchs (2005) and Wiggins et al. (1990) argue that the delusional mood can be best regarded as the result of fundamental disturbance in the way one experiences one self and the world across time, that is, in "temporal synthesis" and "Urdoxa". In the following, I explain these technical concepts, presenting both authors' accounts. I then contest the disturbance claim regarding temporal synthesis and Urdoxa. Its rationale is as follows. Temporal synthesis and Urdoxa are the precondition of subjective experience. Therefore, their breakdown, collapse, fundamental disintegration implies the impossibility in having subjective experience, not delusional mood experience. After raising this objection, I chart out an alternative avenue for providing a more nuanced account that can accommodate delusional mood *experience*.

Temporal synthesis, in essence, refers to the automatic, self-intending feature of the present consciousness which constitutes the enduring identity of a given object and of one self across time (Wiggins et al., 1990, pp. 26–27). To take the current perception as an example, the basic idea here is that, in

every present moment, one's consciousness is not only aware of a given object (e.g., this computer) but also aware of (or 'retains') its own just-past consciousness. As such, one can be aware not only that this computer one perceives now is the *same* computer one perceived just before but also that it is one's consciousness that has been enduring, or that it is *me* who has been having this experience (Wiggins et al., 1990, pp. 26–27). Developing this understanding, Fuchs brings attention to the cognitive, or to be exact, "meaning bestowing" aspect of the temporally unified mental process and construes it as "synthetic intentionality" (Fuchs, 2005, p. 134). By highlighting the cognitive aspect of synthetic intentionality, Fuchs aims to suggest that our perception actively intends or means the object itself, such that, say, this computer can be perceived not simply as an object whose identity endures across time but also as computer that has a practical dealing to oneself, e.g., as an object I can simply take up and use it to type this sentence with.

In addition to the synthetic function of consciousness, the researchers highlight another dimension of experience which usually remains stable and goes unnoticed in everyday life case, that is, the take-for-granted belief *in* the existence of the world and one self, or as Husserl calls it, "Urdoxa" (Wiggins et al., 1990, p. 26, 28; Fuchs, 2005, p. 135). The researchers emphasize that such a belief is not a belief whose content can be canceled out by some corrective experiences. Instead, it is the background belief that enables such a canceling out (Wiggins et al., 1990, p. 25; Husserl, 1983, pp. 251–272). For instance, the belief one has toward the content of, say, a water bottle and its correlating attitude (in Husserlian terms, 'doxic positionality'), or the *certainty that* it is water can change to *doubting that* it is water as one starts drinking its content and tastes its fizziness. In the midst of this alteration, one nevertheless does not doubt that it is one self who has been drinking the content of the water bottle and that what one is drinking now is from the same water bottle one was just drinking from. Against the backdrop of this unquestioned certainty, the earlier positionality one took (the certainty that it is water) can be altered with respect to corrective experiences (that the same "it" is not water but soda). In other words, the unity of identity of object and oneself constituted by the temporal synthesis, and the absolute certainty one takes in such features, Urdoxa, remains invariant and must be so for doxic positionality to alter. Acknowledging this close connection between temporal synthesis and Urdoxa, Fuchs suggests that without temporal synthesis, Urdoxa, or "the normal perceptual belief in the existence of the world and self" would be "shattered" (Fuchs, 2005, p. 135).

Employing the above understanding, Wiggins and his colleagues argue that the initial stage of schizophrenia involves an alteration in what usually remains unaltered and invariant: temporal synthesis and Urdoxa (Wiggins et al., 1990, p. 28). As a result of the disturbance in the temporal synthesis, the

researchers claim that "objects and myself may appear splintered, inchoate, and fragmented" (Wiggins et al., 1990, p. 29). A patient of Chapman, describing this experience of fragmentation and disunity, writes: "Everything I see is split up. It's like a photograph that's torn to bits and put together again" (Chapman, 1966, p. 229). As the unity of identity of an object and self become unstable, so too does the Urdoxa. In this state, "the very being of the world and self", the researchers argue, becomes "dubious" and "uncertain" (Wiggins et al., 1990, p. 30), eliciting the atmospheric feeling typical of the delusional mood (Wiggins et al., 1990, p. 28). Similar to Wiggins and his colleagues' proposal, Fuchs argues that at the onset of schizophrenia, temporal synthesis is seriously disturbed to the point of its "fundamental disintegration" (Fuchs, 2005, p. 136). As a result, an object appears not only fragmented but also as meaningless "images", "surfaces". In this state, one "does not know any more 'what it is all about, why the things he encounters are here at all, and what to do with them" (Fuchs, 2005, p. 136). This radical disturbance in temporal synthesis, Fuchs argues, further implicates a disturbance in Urdoxa, eliciting the pervasive sense of uncanniness and unrealness of the world, characteristic of delusional mood (Fuchs, 2005, p. 136).

Although I have focused specifically on Fuchs' and Wiggins et al.'s account here, the disturbance claims with regards to the temporal synthesis and Urdoxa is a widely accepted view. Most recently, Sass and Pienkos (2013b), and Stanghellini et al. (2016) have proposed that the initial stage of schizophrenia involves a "total break down" (Stanghellini et al., 2016, p. 49) or "collapse" (Sass & Pienkos, 2013b, p. 140) in temporal synthesis. The researchers have proposed that such a disturbance results in the disunity of what they call "minimal self" or the basic experiential sense of existing as a self-identical subject across time, eliciting the fragmentation experience emphasized in Wiggins' analysis. This radical disturbance in temporal synthesis is postulated to further disturb the natural perceptual belief in the existence of the world, eliciting the above discussed atmospheric change. However, here we must reconsider this prevailing view.

1.1. Temporal synthesis and Urdoxa: Are they disturbed?

As Wiggins and his colleagues suggest, temporal synthesis essentially designates the automatic self-intending feature of the present consciousness (Wiggins et al., 1990, p. 27), intending its own temporal phases. Since the present consciousness intends *its own* temporal phases, on Husserl's account, one can immediately be aware *not only* of the temporal unity of experience *but also* of such a temporally unified experience being given to the subject as one's own, as my experience (Husserl, 1991, pp. 84, 361–363). To cut to the core, as the researchers themselves would have claimed, temporal synthesis constitutes the temporal unity of an

experience *and*, in so doing, its first personal givenness as well, thereby enabling one to be aware of oneself as the very subject of one's own experience across time, or the "minimal self[1]". This is exactly the reason that Sass and Pienkos correctly claim that "the microstructure of the minimal self or first-personal givenness *just is* the structure of inner time consciousness [temporal synthesis]" (Sass & Pienkos, 2013b, p. 138). Therefore, the disturbance in the temporal synthesis *is not* a disturbance in the structure of consciousness that *only* establishes the temporal unity of an experience. The disturbance in temporal synthesis *just is* the severe attenuation, fundamental disintegration, total breakdown, or collapse in the *same* structure that *also* enables the first-personal presentation of an experience: people with schizophrenia should not have had any experience.[2] Delusional mood *experience* as such should have been impossible.

Moreover, 'Urdoxa', or the passive, taken-for-granted belief in the existence of the world and one self, seems to remain undisturbed in the delusional mood. Consider the following vignette of Conrad:

> He got a peculiar feeling that "something was in the air"; what it was, he could not say [. . .] Suddenly, he felt that he was supposed to play some "role" during the night; perhaps his peers would come behind him and stamp him with a hammer and sickle. So he stayed alert in his bed, watching its immediate surroundings (Conrad, 1958, p. 8-9, as translated in Bovet & Parnas, 1993, p. 586).

Had it been that Urdoxa was disturbed – the primary belief upon which the doxic positionality *can* alter as the researchers have claimed – nothing should have been doubted nor affirmed. However, as the self-report indicates, although Karl cannot determine what exactly it is that has changed thus expressing the kind of 'dubiousness' and 'uncertainty' the researchers identified, he is *certain that* something is off in the air and something is going to happen to him. The implication being that Urdoxa still operates as the foundational belief in the existence of the world and oneself, providing a background sense that that the world and oneself *exist*. As such, Karl *can* affirm that something *about his surroundings* has changed and something is going to happen *to him*. Even in the case where the existence of the world and one self is doubted, this doubt has to presuppose the certainty in being. If one has no certainty in the existence of the world and self whatsoever, or if Urdoxa is shattered, one would not be able to doubt their existence. There would be nothing to be doubtful *of*. In other words, the ontological doubt, or "uncertainty" and "dubiousness" of the world present in delusional mood, necessitates the preservation of ontological certainty, the certainty in being: Urdoxa.

To clarify, my argument is not that the people with schizophrenia do not have the above discussed experiential abnormalities characteristic of delusional mood. I am not making the following argument:

(1) Temporal synthesis and Urdoxa are not disturbed.
(2) Therefore, people with schizophrenia cannot have anomalous experiences characteric of delusional mood.

I am arguing the other way around:
(1) People with schizophrenia have those anomalous experiences characteristic of the delusional mood.
(2) Therefore, the precondition of having an experience, that is, temporal synthesis, is not disturbed.

Specifically, with regards to the atmospheric change involved in the delusional mood, one can still affirm with certitude that something about their world has changed and something is going to happen to them. Therefore, the precondition of such an affirmation, Urdoxa, is not disturbed. My argument is leveled at the thus far provided a phenomenological explanation of the delusional mood – the claim that the disturbance in temporal synthesis and Urdoxa underpins its emergence. not at its explanandum, as this phenomenological explanation is too radical to accommodate the delusion mood *experience*.

For the present purpose of argument, we should acknowledge that Husserl's account of temporal synthesis and Urdoxa was only the first yet fundamental step toward his systematic inquiry into human subjectivity (Husserl, 2001, pp. 170–171). They take the "A" of the "ABCs" of phenomenology as they are "the basic, essential conditions of the possibility of subjectivity itself" (Husserl, 2001, p. 169), without which no subjective experience as such is possible. In contrast to the emphasis laid on the temporal form of experience, in the "BCs"[3] of his phenomenology, so to say, Husserl concerns with "the syntheses concerning the content that extends *beyond* a transcendental synthesis of time" (Husserl, 2001, p. 171, italics added), i.e., affective syntheses. Briefly put, these associations enable one to perceive an object against the backdrop of its encompassing context and interact with the world as a historical subject, as a subject whose past experiential life constantly informs and contextualizes one's life and imbues it with habitual expectation. Going back to the dialectic of the argument, since those associations are primarily concerned with the association of experiential content, not the temporal form of experience, their alteration would not necessarily implicate the impossibility of subjective experience. Instead, it would implicate a certain alteration in the affective dimension, that is to say, in the way one finds the world as a living, historical subject.

Therefore, it would provide us a new avenue of explaining the delusional mood, without having to posit that Urdoxa and temporal synthesis, which are the precondition of having an experience, are fundamentally disturbed.

Approaching delusional mood from its affective dimension can further help us clarify the nature of the peculiar affective salience experience so often mentioned in both phenomenological and neurobiological analyses of the delusional mood (Conrad, 1958; Jaspers, 1997; Kapur, 2003; Matussek, 1987; Sass & Byrom, 2015). This experience refers to the state in which insignificant details of one's surroundings become conspicuously salient, eliciting the feeling that somehow everything "turns around" or "looks at" an afflicted individual (Conrad, 1958, p. 161; as translated in Mishara, 2010, p. 10). By employing the concept of affective syntheses, I aim to illuminate the underlying structure of such an experiential abnormality and map out how its structural alteration can further implicate the above-discussed notable characteristics of the delusional mood. To carry out this task, in the following I discuss the conceptual tool necessary for the analysis of the delusional mood: affective syntheses.

2. Affective syntheses overview

Affective syntheses can be categorized into primordial, reproductive, and anticipatory association.[4] In essence, primordial association is responsible for the unity formation of sense data and object constitution. Reproductive association enables the lived past experience of a subject to constantly inform and contextualize the present perception of a subject. Anticipatory association, as founded upon reproductive association, establishes habitual expectation that guides one's everyday life interaction with the world. In the following, I detail these syntheses and glean the following two structural moments of consciousness from the discussion of primordial association and reproductive association: affective repression and affective propagation. The first will be necessary for the inquiry into the splintering of an object phenomenon and the bewildering, enigmatic manifestation of the world, the latter for the loss of the determinate, familiar meaning of an object and the global sense of uncanniness and the intoxicated anticipation that "something" is going to happen.

2.1. Primordial association

As a type of experiential content association, primordial association is responsible for the unity formation of 'what' one primarily experience through one's bodily organs, i.e., sensory data, and establishes the phenomenon of "affection" (Husserl, 2001, pp. 176–196). As opposed to the everyday life usage of the term affection suggests, on Husserl's account, it does

not strictly refer to emotion but the intrinsic impressional, receptive character of experience. In Husserl's term, "By affection we understand the allure given to consciousness the peculiar pull that an object [immanent sense data[5]] given to consciousness exercises on the ego" (Husserl, 2001, p. 196). Affection is a term reserved to designate the constant interaction between the "alluring" or "pulling" sensorial unity and the consciousness "pulled" into and "turned towards" it (Husserl, 2001, p. 196). By construing sense data as an affective sensorial unity, Husserl highlights that perception of an object always involves an interplay between the sensorial unity that passively solicits one's attention and the consciousness that actively responds to and turns toward such an attraction. Husserl contends that it is through such an interplay what makes one to turn toward, an affectively prominent sound can be given to oneself as a concrete, phenomenologically rich object, say, *as* the sound *of* a passing car outside (Husserl, 2001, p. 210). In short, affection is the precondition for the perception of an object. In what follows, I contrast two types of prominences of sensorial unity which pull us in (henceforth affective pull) and identify the phenomenon of "affective repression". This will be necessary for our analysis of the splintering of an object phenomenon and the bewildering, enigmatic manifestation of the world.

The first type of affective pull is the one whose relative intensity is strong enough to trigger the actual state of affection or make one turn toward it and grasp it as the direct object of perception (Husserl, 2001, p. 210, 1973, p. 108). A screaming sound, for instance, in the context of the general acoustic context of this building would belong to this type. In contrast, the second type of affective pull is the one whose relative intensity is not strong enough to yield the actual affection. Say, the general acoustics of this building, the smell of this room, the color of this desk etc. would belong to this type. Since the intensity of these pulls is weak compared to that of screaming and thus does not trigger actual affection, they are not apprehended as the direct object of perception. Instead, Husserl suggests that they are immediately experienced in their sensible organization as the surrounding environment of the apprehended particular object (Husserl, 2001, pp. -196–197, 201–203).

Important to our analysis, Husserl argues that what determines the intensity of affective pull is nothing but the dynamic interplay between the pulls themselves (Husserl, 2001, pp. 197–198). The intensity of the screaming sound is stronger than that of other pulls not because its intrinsic nature determines it to be so. Instead, it *can be* stronger than that of other pulls because, as it starts to become prominent, it represses the intensity of other pulls that has thus far attracted one's attention (Husserl, 2001, p. 197). As such, when I hear someone screaming, I can immediately (and quite literally) turn my head toward it without having to have my attention kept being captivated by this computer. Generally

put, it is thanks to such an affective repression, when a relatively prominent affective pull triggers actual affection and enables one to attentively grasp it as an object, the intensity of other pulls can be sensibly regulated. So that, to use an everyday life example, when I turn toward this computer and apprehend it as the direct object of my perception, the intensity of other pulls (e.g., that of its surrounding object, the lighting of this room, the sound of a passing car outside, etc.) do not all become prominent but experienced as the general background context of this computer. Therefore, a certain alteration in the affective repression would implicate dysregulation in the affective prominence that solicits one's attention. This dysregulation would entail the prominence of what usually remains unnoticed and a certain alteration in the experiential distinction between perceived particular object and its encompassing context.

2.2. Reproductive association

Reproductive association, in essence, enables a subject's past experiential life to constantly inform and contextualize his present experiential life. In the following, I discuss this association with respect to its structural moment in virtue of which the past experience can be implied in the present experience, i.e., affective propagation. This will be necessary for our analysis of the loss of the meaning of an object and the pervasive sense of uncanniness of the world.

In the above, I have suggested that in the state of actual affection we turn toward the pull whose prominence is relatively strong. Husserl suggests that when one turns toward the pull and attentively grasps it as an object, one gets to know about the grasped object "more closely" and also of our self:

> It is a pull that is relaxed when the ego turns toward it attentively, and progress from here, striving towards self-giving intuition, disclosing more and more of the self and the object, this striving towards an aspect of knowledge, towards a precise view of the object. (Husserl, 2001, p. 196)

The knowledge acquired from this relaxation of the pull (or turning toward the affective pull) is the everyday life, taken-for-granted self and object knowledge. The knowledge that, to put it in the broadest sense, I have a body capable of responding to the affective pull exercised by an object and that an object given to me is an object I can respond to and engage with. The affectively prominent present experience and the knowledge acquired therein, Husserl suggests, gradually lose their intensity as they slip away into the past and constitute the historicity of a subject, or "the affective past horizon" (Husserl, 2001, p. 204).

Relevant to our analysis, Husserl argues that the affective past horizon can inform and contextualize the present perception via affective propagation that constantly emanates from the present to the similar past experience (Husserl, 2001, p. 189). The basic idea here is that the affective pull that triggers actual affection does not simply attract one's attention to the object perceived in the present moment. Instead, it also travels toward the affective past horizon and calls to attention or "awakens" the similar past experience whose affective intensity is lost (Husserl, 2001, pp. 222–224). To take the present perception as an example, the affective pull of this computer propagates toward the sedimented similar past experience wherein I perceived and used a computer before. Through such propagation, Husserl argues, the past experience and the common-sense knowledge acquired therein can inform (or "impart" or "sketch in") its determinate, articulate sense to the present perception (Husserl, 2001, pp. 44, 224). So that, to stick to the example, this computer can appear to me as an object with its determinate, familiar meaning, as an object I can use to type this paper with. Husserl contends that this affective propagation is "constantly at work" (Husserl, 2001, p. 206) and enables the past experiences of a subject to be always-already "implied in the background consciousness, in the non-living form" (Husserl, 2001, p. 228), thereby providing a framework of determinate sense and familiarity to the present experiential life. Therefore, a certain alteration in affective propagation would implicate a change in the meaning manifestation of an object and the way one perceives the world as a familiar place.

2.3. Anticipatory association

Anticipatory association imbues the present perceptual experience with habitual expectations, enabling one to anticipate with a determinate sense how the present perception and the perceptual object will continue to unfold in the following moment (Husserl, 2001, pp. 139–140, 424). Habitual expectation essentially refers to the anticipatory aspect of our present perception that takes the form of certainty. For instance, when I perceive a chair, I anticipate with *certainty that* if I turn the chair around I will be able to see its back, that if I attempt to sit on the chair my bodily capacity will not fail and that the chair will be used as an object I can sit on, etc. This anticipation involved in the present perception can take such a form of certainty because, simply put, I have used chairs for many years. To put it otherwise, the determinate, articulate sense the anticipatory aspect of our perception has, the anticipatory *certainty that* I will be able to sit on the chair, is the one imparted from the affective past horizon via affective propagation (Husserl, 2001, pp. 424, 235). Therefore, a certain alteration in the affective propagation, in virtue of which the past experience can inform and contextualize the living present, would also implicate a radical alteration in the anticipatory style of perception.

2.4. Summary

So far, I have examined three different types of affective syntheses with respect to their structural moments: affective repression and affective propagation. In essence, affective repression enables one to turn toward a relatively prominent affective pull and attentively grasp it as an object with respect to its surrounding context. Affective propagation, in turn, enables one to turn toward an affectively prominent pull as a historical subject, whose past experiences constantly provide a framework of determinate sense and familiarity to the present experiential life and establishes habitual expectation. Below, I employ these concepts to provide a detailed phenomenological account of the delusional mood. I argue that firstly in the state of the delusional mood, there occurs the failure of affective repression whereby every experienced feature of an object and objects themselves become prominent. I demonstrate how this affective dysregulation experience can manifest in the form of the splintering of an object phenomenon and the bewildering enigmatic manifestation of the world. Afterward, I argue that the failure of affective repression adds something entirely new or bestows an alien affective prominence to the present experiential life that cannot be adequately accommodated by the affective past horizon. I then show how this phenomenological abnormality manifests itself as the loss of the determinate, familiar meaning of an object and the pervasive sense of uncanniness of the world and that of intoxicated anticipation. I conclude by relating this finding to the neurobiological explanation of the delusional mood, namely aberrant salience hypothesis, and sketch out a possible way toward the mutual enlightenment of both approaches.

3.1. Delusional mood: The bewildering, enigmatic manifestation of the world

Let us begin with the splintering of an object phenomenon. Consider the following self-reports. A patient of Chapman writes: "If I look at my watch, I see the watch, watch strap, face, hands, and so on, then I have to get to put these together into one piece" (Chapman, 1966, p. 229). Renee reports a similar sort of experience: "For I saw the individual features of her face, the teeth, then the nose, then the cheeks, the one eye and the other" (Sechehaye, 1970, p. 51). In the above discussion of affective repression, I have suggested that in everyday life case, if, say, the color of a door attracts one's attention and thus enables one to turn toward and attentively grasp it as the physical quality *of* the door, that color normally represses the prominence of other experienced features of the door. So that its other features, say, the contour, its size, etc., do not all become prominent and all attentively grasped as individual objects of perception. However, in the state of

delusional mood, the affectively prominent experienced features of an object seem to no longer *repress but bolster* the prominence of other experienced features.[6] Kapur details such an experience with the following self-reports: "my senses were sharpened. I became fascinated by the *little insignificant things around me*", "Sights and sounds possessed a *keenness* that he had never experienced before", "my senses seem *alive . . . Things seemed clearcut*, I noticed things that I had never noticed before", "It was as if parts of my brain awoke, which had been dormant" (Kapur, 2003, p. 15, italics added). In other words, as all of the experienced features of a given object become prominent, an afflicted individual feels as though one's sensory experience is "alive", "keen", "heightened", and those affectively prominent individual features are, in turn, attentively grasped and perceived as individuated and distinct parts of a given object, eliciting the splintering of an object phenomenon.

This affective repression failure may further implicate perceptual field disturbance whereby perceived surroundings look fragmented and 'turned towards' an afflicted individual. If affective repression fails such that an affectively prominent object no longer represses but bolster the prominence of the surrounding objects, the surrounding objects will be no longer perceived as such, as constituting the background context of a perceived particular object. Instead, they will be perceived as a set of individual objects in themselves. Recounting this kind of experience, Renee writes: "I heard the street noises – a trolley passing, people talking, a horse neighing, a horn sounding, each detached, immovable, separated from its source, without meaning" (Sechehaye, 1970, p. 29). Mattusek's patient similarly reports: "I only saw fragments: a few people, a kiosk, a house [. . .] They did not stand together in an overall context, and I saw them as meaningless details" (Matussek, 1987, p. 92). In other words, as every object that constitutes one's perceptual field becomes affectively prominent, those objects are, in turn, perceived as a collection of individual objects in itself, isolated, cut off from each other, no longer standing in meaningful relation to one another (Matussek, 1987, p. 92). Correlatively, as every object that constitutes one's perceptual field becomes affectively prominent and invites one's attentive regards, an afflicted individual simultaneously feels as though everything somehow 'turns around' or 'looks at' him/her. Renee, recounting on the encounter she had with her friend in which her friend's individual facial features captivated her attention, writes that she "sees" not only her friend's "brown eyes" but also her "shining white teeth looking at" her (Sechehaye, 1970, p. 37). Detailing this sort of experience, Conrad documents that one of his patients feels wherever his "glance falls, every "component of his experiential field" appears to stand in a special relation to him and "everything becomes conspicuously salient" (Conrad, 1958,

p. 161; as translated in Mishara, 2010, p. 10). In other words, correlative to the perceptual object abnormality wherein certain aspects of an object (or objects) acquire unusual prominence, there belongs a subjective side or perceptual act abnormality wherein one's attention is involuntarily captivated by such a prominence and feels as though something significant is weighted by it – as opposed to simply ignoring such prominence.[7]

In sum, in the state of delusional mood, there seems to occur the failure of affective repression whereby an affectively prominent feature of a given object or an object itself no longer represses but bolsters the prominence of other affective pulls. The prominence of which, in turn, is attentively grasped and perceived as distinct, accentuated features of a given object (for the splintering of an object phenomenon) and/or as an object in itself, isolated from its background context (for the perceptual field disturbance). And that same affective prominence is felt by an afflicted individual as if one has become the center of the attention of the world. The world, therefore, confronts an afflicted individual as an enigmatic place that constantly invites and allures one's attentive regards.

3.2. Delusional mood: The loss of the determinate, familiar meaning of an object

The above-discussed disturbance in perceiving an object and its surrounding context has been known to accompany the loss of the meaning of an object. The perplexing characteristic of this meaning disturbance is that an afflicted individual can still identify a perceived object, say a cup as a "cup", and recall and articulate its practical significance, that it is an object to drink from (Fuchs, 2005, pp.136). However, at the same time, afflicted individuals report the unfamiliarity and the loss of its meaning:

> I attempted to escape their hold by calling out their names. I said, "chair, jug, table, it is a chair" [. . .] I saw things, smooth as metal, so cut off, so detached from each other, so illuminated and tense that they filled me with terror. When, for example, I looked at a chair or a jug, I thought of not their use or function– a jug as something to hold and milk, a chair not as something to sit in– but as having lost their meanings, functions, and their names, they become "things" and began to take on their life, to exist (Sechehaye, 1970, pp. 55-56).

I have argued above that the failure of affective repression intensifies the prominence of every experienced feature of a given object and/or objects themselves, such that each feature is individually apprehended as accentuated parts of the perceived object and/or as individual objects themselves that seem isolated from its surrounding context. This affective prominence dysregulation seems to underpin the above-described anomalous experience whereby Renee saw objects as "alive" and "saw things, smooth as metal, so

cut off, so detached from each other, so illuminated and tense". Let us here further specify the nature of the failure of affective repression to systematically account for the meaning disturbance.

Firstly, as the self-reports indicate, the failure of affective repression does not split a perceived object into two different types: one that is given in its unity and the other that is given in its fragmentation. Had such been the case, the affectively prominent parts of an object would have been perceived as a collection of distinct objects in their own right, not as fragmentations *of* an object. Although Renee reports that objects appeared to her as cut off from one another, they were nevertheless still perceived as a single, distinct object. Even when she was describing the fragmentation experience she still saw "the teeth, the nose, the cheeks, the one eye and the other" as those *of* her friend's face. Similarly, Chapman's patient could still identify the fragmented aspects of a watch, as "watch strap", "face", "hands", and so on. In other words, the apprehended individual features of an object are still perceived as parts of a single object, albeit accentuated and distinct. The implication being that for any given object(s), the failure of affective repression intensifies the affective prominence of the experienced features of one and the same object, and those prominent features are apprehended as individuated and accentuated aspects *of* a single object.

Secondly, in 2.3. I argued that the past experience of a subject and the commonsensical, everyday life knowledge acquired therein is sedimented into the affective past horizon and constantly informs and contextualizes the subject's present perception. This is made possible by the affective propagation that continuously emanates from the present perception to the sedimented similar past experience. Similarly, in the state of delusional mood, the affective force of the perception that presents a given object as a single object, say a cup as *a* cup, still propagates toward the affective past horizon and awakens the similar past experience and the knowledge acquired therein, thereby enabling one to perceive it as a familiar object whose name one can recall and articulate its practical significance. However, the affective force of the *same* perception that presents the *same* object *at its intense vivacity* has no similar past experience to propagate toward. Within the affective past horizon, there just is no similar past experience in which every experienced feature of an object had become prominent and imposed its tantalizing vivacity on the subject. Recall: "my senses were sharpened. I *became* fascinated by the little significant things around me", "Sights and sounds possessed a keenness that *he had never experienced before*", "my senses seem alive. Things seemed clear-cut, *I noticed things that I had never noticed before*", "It was as if parts of my brain awoke, *which had been dormant*" (Kapur, 2003, p. 15, italics added). In other words, the failure of affective repression adds something *entirely new* or bestows an *alien* affective prominence to the living present that cannot be adequately

accommodated by the affective past horizon. Given the affective propagation fails with respect to this alien prominence exercised by the very same object that appears familiar, it follows that the perceived object will also paradoxically appear to oneself as an unfamiliar object, as an object whose precise meaning remains to be determined. In simple terms, the problem that underlies the meaning disturbance is not that an afflicted individual completely forgets the name, or the everyday life use of a given object. A person knows what a given object is, say, a cup is an object to drink from. The problem is that an afflicted individual perceives *alien something more* in a given familiar object that simply goes beyond the scope of what one already knows about the object.

This may closely correspond to David Hemsley's cognitive model of schizophrenia (Hemsley, 2005a, 2005b; Hemsley & Garety, 1986). As opposed to the total loss of past experiences and previously acquired perceptual knowledge, this model postulates that in the early stage of schizophrenia, impairment occurs in the "rapid and automatic assessment of the significance or lack of significance" (Hemsley, 2005a, p. 979), eliciting the above-discussed anomalous experience whereby every insignificant detail of one's surrounding becomes conspicuously salient. It has been further postulated that such an alien experience cannot be adequately processed by the stored memories of past experiences and perceptual knowledge (Hemsley & Garety, 1986, p. 54; Hemsley, 2005a, p. 979, 2005b, p. 48), leading to the experience wherein a familiar, everyday life object appear unfamiliar, as having acquired "properties different from those that exist when the normal contextual influences are operative" (Hemsley, 2005b, p. 47).

To put it in phenomenological terms, the affective force of the present perception still propagates toward the affective past horizon and awakens the past experience and previously acquired knowledge. However, the awakened past experience and knowledge, which still enable one to perceive a given object, cannot adequately inform and contextualize the peculiar affective prominence exercised by the object. Bluntly put, the perceptual knowledge that "a cup is an object to drink from" cannot explain just exactly why it is that every individual feature of a perceived cup, its lip shape, color, crack, handle, etc. have become prominent and captivate one's attention. Therefore, a perceived object not only appears to oneself as a familiar object whose name and practical significance one can recall and articulate, as "a chair", "a jug", "a table", etc. The same object also simultaneously appears as "alive", "smooth as metal, so cut off, so detached from each other so illuminate and tense" whose precise meaning is yet-to-be-determined, as an indeterminate, unfamiliar object. With this understanding in mind, let us now move on to the final characteristic of the delusional mood, the global sense of uncanniness and intoxicated anticipation.

3.3. Delusional mood: The pervasive sense of uncanniness and intoxicated anticipation

Consider the following vignette of Jaspers:

> Something must be going on; the world is changing, a new era is starting. Lights are bewitched and will not burn [. . .] the house-signs are crooked, the streets look suspicious; everything happens so quickly. The dog scratches oddly at the door. "I noticed particularly" is the constant remark these patients make, though they cannot say why they take such a particular note of things nor what it is they suspect. (Jaspers, 1997, p. 100)

In 3.1, I argued that the failure of affective repression underpins the affective dysregulation experience wherein every object that constitutes one's perceptual field becomes prominent and allures one's attention to its individual features and to the individual object itself. In the case of Jaspers' patient, this affective dysregulation manifests itself in the form of constantly noticing every detail of one's surroundings (hence the constant remark of "I noticed particularly"). As the self-reports indicate in this state, one can still perceive a given object as an object as such, a dog as a dog, a candle as a candle, etc., and one's surroundings as having been perceived before but somewhat different. Meaning, the affective force of the present perception still propagates toward the past experiences whereby one perceived given objects and their surroundings. In the above, I specified that the failure of affective repression bestows an alien affective prominence to the present perception. To go back to the case of Jasper's patient, a dog or a candle *not only* appear to oneself as mundane, familiar objects *but also* as something that constantly allure one's attention to insignificant details— for the case of the dog, to the way it scratches the door, and for the candle, to its flame that seems bewitched. This 'added on' affective prominence, I have argued, cannot be adequately informed and contextualized by the awakened past lived experience and prior knowledge, hence Jasper's comment that afflicted individuals "*cannot say why* they take such a particular note of things nor what it is they suspect". In other words, the affective prominence of the perceived familiar surroundings and objects therein not only attracts one's attention to meaningless details but that very attraction or allure is felt as an unfamiliar and indeterminate phenomenon. Therefore, not only not does an afflicted individual perceive his surroundings as a familiar environment but he also simultaneously experiences that "something" is different, "something" has changed, experiencing indeterminate unfamiliarity from the very same environment he finds familiar or, by definition, uncanniness.

This affective dysregulation experience can further radically alter the anticipatory aspect of perception. In 2.3, I argued that the habitual expectation that one takes for granted in everyday life interaction with the world is founded upon the subject's past experiences. To be specific, the affective

propagation that emanates from the living present toward the sediment lived past experiences and perceptual knowledge acquired therein determines the content of habitual expectation to a certain extent. In simple terms, thanks to my past experiences, I anticipate not anything at all but with *certainty that*, say, the glass will be shattered if dropped, that I will see the backside of the chair if I turn it around, etc. However, if affective repression fails such that it bestows an alien affective prominence to the living present that cannot be adequately accommodated by the affective past horizon, the content of habitual expectation will be radically underdetermined. Correlatively, as its content remains underdetermined, the perceptual expectation will no longer take the form of habitual certainty but that of dubiousness and uncertainty, hence eliciting the intoxicated anticipation or the oppressive tension that "*something*" must be going on, "*something*" is going to happen.

3.4. Summary

So far, I have examined delusional mood experience from its affective dimension. In contrast to the prevailing account that zeros in on the fundamental structure of subjectivity, I have shifted the focus of inquiry to the affective nature of delusional mood. This was to provide a phenomenological account that can accommodate the intricate nature of the delusional mood without having to posit that the basic, necessary constitutive dimension or the very precondition of having an experience is broken down, collapsed, fundamentally disintegrated, or shattered. The central tenet of the proposed account is the following: the failure of affective repression underpins the experience whereby every feature of an object (or objects) becomes prominent and captivates one's attention (viz. affective dysregulation experience). This experience, as demonstrated above, underpins the characteristic features of delusional mood. Of interest, this kind of experience has been also the target phenomenon for one of the most enduring neurobiological hypotheses, i.e., aberrant salience hypothesis. In the following, I conclude by relating this finding to a neurobiological account and suggest that exchanges between these two approaches may be possible and further points to mutual enlightenment for both approaches.

4. Conclusion: A possible mutual enlightenment

Aberrant salience hypothesis (Kapur, 2003; Kapur et al., 2005) postulates that the early stage of schizophrenia involves elevated presynaptic striatal and subcortical dopamine synthesis and release capacity (Howes & Kapur, 2009, p. 551). This dopaminergic dysfunction has been known to cause the "aberrant salience" phenomenon, whereby insignificant details of one's

experience acquire salience and captivate one's attention (Kapur, 2003; Kapur et al., 2005). The phenomenological equivalent of which is the above-discussed affective dysregulation experience. This neurobiological account may serve to corroborate the phenomenological analysis I have put forward by identifying the neurobiological correlate of affective repression failure as dopaminergic dysfunction. In turn, the proposed phenomenological analysis may serve to complement the hypothesis by providing a more detailed mind-level explanation of the delusional mood.

As pointed out by Mario Maj in the recent review of the hypothesis, the experiences described under the heading of aberrant salience only share a partial commonality with those described for delusional mood by Jaspers and other psychopathologists (Maj, 2013, p. 234). The aberrant salience, or as Maj terms it "heightened intensity of perception", is not the only experiential abnormality present in the delusional mood. As has been discussed so far with reference to the traditional phenomenological accounts, delusional mood is also characterized with the meaning disturbance and the global atmospheric shift (Maj, 2013, p. 234). In this light, Aaron Mishara and Paolo Fusar-poli claim: "How do the dopaminergic alterations affect the creation of a "new (psychotic) world"? There remains an explanatory gap between what we know about the neurobiology of early psychosis and what we understand about its subjective psychopathological experience" (Mishara & Fusar-Poli, 2013, p. 284). In simple terms, the question that has to be answered at the mind level for a more robust neurobiological explanation is: How does one go from having "heightened intensity of perception" to having a full-blown delusional mood experience? The phenomenological analysis I have advanced can help resolve this issue.

In the above, I argued that in the delusion mood there occurs the failure of affective repression whereby every experienced feature of a given object/objects become prominent, eliciting the affective dysregulation experience. In clarifying affective repression failure, I have argued that such a structural alteration bestows an alien affective prominence to the present perception that cannot be adequately accommodated by the affective past horizon. If the affective dysregulation experience can be identified with aberrant salience phenomenon, then it can be reasonably postulated that aberrant salience experience is not merely a heightened intensity of perception whereby one notices insignificant detail of one's surroundings. Instead, it is the generative disturbance that globally challenges the contextualization of the present perception with the sedimented past experience. The phenomenological abnormality of which underpins the characteristic features of the delusional mood.

If this is somewhere along the right lines, then it can be reasonably postulated that the aberrant salience experience necessarily implicates the meaning disturbance and the atmospheric change involved with the

delusional mood. If this mind-level implication holds, then it may be provisionally hypothesized that the dopaminergic dysfunction causes not only aberrant salience experience but also, by transitivity, the disturbance in the meaning manifestation of an object and the atmospheric change. In neurobiological terms, the dopaminergic dysfunction in the limbic areas (to be specific, amygdala and hippocampus) can be postulated to disturb the activation of appropriate stored context material from the long-term memory (MacLean, 1970; Pankow et al., 2012) for the meaning disturbance. This long-term memory deficit may be hypothesized to further implicate the disturbance in the generation of appropriate habitual expectancies (Corlett et al., 2010; Gray et al., 1991; Hemsley & Garety, 1986) to accommodate the global atmospheric change. In such a way, the phenomenologically informed neurobiological analysis can aim for a more detailed explanation of the delusional mood. Of course, there is much more to be said, and this is only a speculative outline. However, I have attempted to show that exchanges between phenomenological and neurobiological approaches may be possible and have sketched out what these exchanges would amount to, by providing a phenomenological account of the delusional mood *experience*.

Notes

1. "Inner consciousness", in Husserl's term (Husserl, 2001, p. 607).
2. I do not exclude the possibility that temporal synthesis can be disturbed. Another much-neglected aspect of the temporal synthesis is the affective modification carried out by retention, whereby the affective intensity of the retained just-past consciousness is constantly diminished (Husserl, 2001, pp. 217-221). 'Disturbance' may be attributed to affective modification as it is responsible for the temporal unity of experience, not, in its final analysis, the constitution of the formal identity of the stream of consciousness, i.e., its first-personal givenness (Husserl, 2001, p. 171, 173, 1973, pp. 177-178). Affective modification disruption claim may better accommodate the anomalous temporal and self experience present in schizophrenia (e.g., time stop, ante-festum, déjà vu/vécu, and time fragmentation). For a more elaborate discussion of the raised objection and its implication in the analysis of self-disorder present in schizophrenia, see (Sul, 2021). Concerning urdoxa alteration, what the above-mentioned researchers took to be the manifestation of urdoxa disturbance can be best understood as a disruption in habitual expectation. I discuss this shortly, in 2.3. and 3.3.
3. In accepted terms, "genetic phenomenology".
4. In this paper, these associations bear the title of "affective syntheses" because they function affectively (Husserl, 2001, pp. 213-214, 420-421). As I detail it soon, these associations can constitute what they constitute only through affective propagation and affective repression.
5. (Husserl, 1973), pp.77
6. In non-phenomenological terms, this disturbance may correspond to selective attention impairment. Selective attention involves the operation that "prioritizes the process of a subset of available sensory inputs while *suppressing* the processing of

other inputs" (Gold et al., 2018, p. 1227, italics added). Given, in the instance of delusional mood, the usually unattended features of an object and/or its surrounding become prominent, the involved attentional impairment may be specified as a dysfunction in the bottom-up attentional control (Carr & Wale, 1986; DR. Hemsley, 1975; Gold et al., 2018).

7. This correlative subjective side abnormality has been described as "prolonged gazing" by Matussek (1987, p. 93) and, most recently, "hype-reflexivity" by Sass and Byrom (Sass & Byrom, 2015, p. 161). If the above analysis is correct, it can be reasonably postulated that such a subjective side abnormality and the perceptual object abnormality are two sides of the same coin. They are distinct interdependent moments of one and the same modal alteration, i.e., affective repression failure.

Disclosure statement

No potential conflict of interest was reported by the author(s).

Notes on contributor

Jae Ryeong Sul is a PhD student in the Department of Philosophy at Durham University. He studies phenomenology and schizophrenia.

ORCID

Jae Ryeong Sul http://orcid.org/0000-0001-6679-9490

References

Bovet, P., & Parnas, J. (1993). Schizophrenic Delusions: A phenomenological approach. *Schizophrenia Bulletin*, *19*(3), 579–597. https://doi.org/10.1093/schbul/19.3.579

Carr, V., & Wale, J. (1986). Schizophrenia: An information processing model. *Australian & New Zealand Journal of Psychiatry*, *20*(2), 136–155. https://doi.org/10.3109/00048678609161327

Chapman, J. (1966). The early symptoms of schizophrenia. *British Journal of Psychiatry*, *112*(484), 225–251. https://doi.org/10.1192/bjp.112.484.225

Conrad, K. (1958). *Die beginnende Schizophrenie*. Thieme Verlag.

Corlett, P. R., Taylor, J. R., Wang, X. J., Fletcher, P. C., & Krystal, J. H. (2010). Toward a neurobiology of delusions. *Progress in Neurobiology*, *92*(3), 345–369. https://doi.org/10.1016/j.pneurobio.2010.06.007

Fuchs, T. (2005). Delusional mood and delusional perception—A phenomenological analysis. *Psychopathology*, *38*(3), 133–139. https://doi.org/10.1159/000085843

Gold, J. M., Robinson, B., Leonard, C. J., Hahn, B., Chen, S., McMahon, R. P., & Luck, S. J. (2018). Selective attention, working memory, and executive function as potential independent sources of cognitive dysfunction in Schizophrenia. *Schizophrenia Bulletin*, *44*(6), 1227–1234. https://doi.org/10.1093/schbul/sbx155

Gray, J., Feldon, J., Rawlins, J., Hemsley, D., & Smith, A. (1991). The neuropsychology of schizophrenia. *Behavioral and Brain Sciences*, *14*(1), 1–20. https://doi.org/10.1017/S0140525X00065055

Hemsley, D. R. (1975). A two-stage model of attention in schizophrenia research. *British Journal of Social and Clinical Psychology*, *14* (1), 81–89. https://doi.org/10.1111/j.2044-8260.1975.tb00152.x. PMID: 1122350.

Hemsley, D. R. (2005a). The development of a cognitive model of schizophrenia: Placing it in context. *Neuroscience and Biobehavioral Reviews*, *29*(6), 977–988. https://doi.org/10.1016/j.neubiorev.2004.12.008

Hemsley, D. R. (2005b). The schizophrenic experience: Taken out of context? *Schizophrenia Bulletin*, *31*(1), 43–53. https://doi.org/10.1093/schbul/sbi003

Hemsley, D. R., & Garety, P. A. (1986). The formation of maintenance of delusions: A Bayesian analysis. *The British Journal of Psychiatry: The Journal of Mental Science*, *149*(1), 51–56. https://doi.org/10.1192/bjp.149.1.51

Howes, O. D., & Kapur, S. (2009). The dopamine hypothesis of schizophrenia: Version III—the final common pathway. *Schizophrenia Bulletin*, *35*(3), 549–562. https://doi.org/10.1093/schbul/sbp006

Husserl, E. (1973). *Experience and judgment: Investigations in a genealogy of logic*. (J. S. Churchill & K. Ameriks, Trans.). Routledge & Kegan Paul. (Original work published in 1939).

Husserl, E. (1983). *Ideas pertaining to a pure phenomenology and to a phenomenological philosophy*, first book. F. Kersten, Trans. Martinus Nijhoff.

Husserl, E. (1991). On the Phenomenology of the Consciousness of Internal Time (1893-1917). In J. B. Brough (Ed.), *Husserliana: Edmund Husserl – collected works*. Springer.

Husserl, E. (2001). *Analyses concerning passive and active synthesis: Lectures on transcendental logic*. (A. J. Steinback, Trans.). Edmund Husserl—Collected Works, Springer.

Jaspers, K. (1997). *General psychopathology*. Johns Hopkins University Press.

Kapur, S. (2003). Psychosis as a state of aberrant salience: A framework linking biology, phenomenology, and pharmacology in schizophrenia. *American Journal of Psychiatry*, *160*(1), 13–23. https://doi.org/10.1176/appi.ajp.160.1.13

Kapur, S., Romina, M., & Ming, L. (2005). From dopamine to salience to psychosis—linking biology, pharmacology and phenomenology of psychosis. *Schizophrenia Research*, *79*(1), 59–68. https://doi.org/10.1016/j.schres.2005.01.003

MacLean, P. (1970). The limbic brain in relation to the psychoses. In P. Black (Ed.), *Physiological correlates of emotion*. Academic Press.

Maj, M. (2013). Karl Jaspers and the genesis of delusions in schizophrenia. *Schizophrenia Bulletin*, *39*(2), 242–243. https://doi.org/10.1093/schbul/sbs190

Matussek, P. (1987). *The clinical roots of the schizophrenia concept*. Cambridge University Press.

Mishara, A. L. (2010). Klaus Conrad (1905-1961): Delusional mood, psychosis, and beginning schizophrenia. *Schizophrenia Bulletin*, *36*(1), 9–13. https://doi.org/10.1093/schbul/sbp144

Mishara, A. L., & Fusar-Poli, P. (2013). The phenomenology and neurobiology of delusion formation during psychosis onset: Jaspers, Truman symptoms, and aberrant salience. *Schizophrenia Bulletin*, *39*(2), 278–286. https://doi.org/10.1093/schbul/sbs155

Pankow, A., Knobel, A., Voss, M., & Heinz, A. (2012). Neurobiological correlates of delusion: Beyond the salience attribution hypothesis. *Neuropsychobiology*, *66*(1), 33–43. https://doi.org/10.1159/000337132

Sass, L. A., & Byrom, G. (2015). Self-disturbance and the Bizarre: On incomprehensibility in schizophrenic delusions. *Psychopathology*, *48*(5), 293–300. https://doi.org/10.1159/000437210

Sass, L. A., & Pienkos, E. (2013a). Delusion: The phenomenological approach. In K. W. M. Fulford (Ed.), *The oxford handbook of philosophy and psychiatry*. Oxford University Press.

Sass, L. A., & Pienkos, E. (2013b). Space, time, and atmosphere: A comparative phenomenology of melancholia, mania, and schizophrenia, part II. *Journal of Consciousness Studies*, *20*(7–8), 131–152.

Sechehaye, M. (1970). *Autobiography of a schizophrenic girl*. New American Library.

Stanghellini, G., Ballerini, M., Presenza, S., Mancini, M., Raballo, A., Blasi, S., & Cutting, J. (2016). Psychopathology of lived time: Abnormal time experience in persons with schizophrenia. *Schizophrenia Bulletin*, *42*(1), 45–55. https://doi.org/10.1093/schbul/sbv052

Sul, J. R. (2021). Schizophrenia, temporality, and affection. *Phenomenology and the Cognitive Sciences*. https://doi.org/10.1007/s11097-021-09757–8

Wiggins, O. P., Schwartz, M. A., & Northoff, G. (1990). Toward a Husserlian phenomenology of the initial stages of schizophrenia. In M. Spitzer & B. A. Maher (Eds.), *Philosophy and psychopathology* (pp. 21–34). Springer.