Introduction

Although reading this book brings you close to an aporia at several moments, the title 'Real Hallucinations' is not meant as a contradiction. What Ratcliffe tries to do in his book is to provide an account of hallucinations that does more justice to the phenomenon as it *really* is, opposed to the typical understanding of the term. Generally, hallucinations are thought of as experiences that resemble truthful perceptual experiences, but in the absence of an appropriate stimulus. After conducting a phenomenological analysis of anomalous experiences, however, Ratcliffe concludes that *real* hallucinations (as those that arise in psychiatric illness) are rather conflicting experiences that don't fit the tidy categories of intentional states we have (i.e. perceiving, remembering, imagining). This makes them extra difficult to describe and prone to misunderstanding. Nevertheless, Ratcliffe attempts not only to understand but also to explain how hallucinations arise, by attributing these phenomena to changes in the way a person anticipates perception. In addition, he argues that the way we anticipate perception is interpersonally regulated and sustained.

Summary

Unfortunately Racliffe does not go as far as to provide a comprehensive analysis of all possible kinds of intentional states, but he does make a proper start by distinguishing many different anomalous experiences and describes in detail how they differ from each other and from the intentional states we know. While doing this he problematizes the current categories used in the literature, namely those of Auditory Verbal Hallucinations (AVH) and Thought Insertion (TI). Based on his analysis, he instead comes up with a new categorization for these specific experiences, such that the apparent distinct underlying mechanistic processes are reflected: internal, non-auditatory, hallucinations and external, auditory, hallucinations.

One of Ratcliffe's main contributions is a new explanation for the sense of experiencing thought content as alien. Individualistic theories attribute the sense of alienation of thoughts to a disturbance in the neural mechanism of the anticipation of one's own thoughts. Hereby the lack of anticipation, followed by surprise, renders the thought experienced as alien. This is not consistent, however, with the fact that many voice hearers actually do anxiously anticipate their

voices. It also does not explain the meaningful content of these verbal hallucinations, often related to specific interpersonal traumas, as emphasized by relational theories. Ratcliffe navigates a path between individualistic and relational explanations, by proposing that internal verbal hallucinations most likely arise during imagined internal conversations, where in the process of thought crystallization one anticipates a negative content, and, unable to escape it, starts to dissociate from it, such that he ultimately experiences it as alien.

To connect this explanation to the phenomenological tradition, Ratcliffe also introduces the work of Edmund Husserl. In a simple and straightforward way he describes the idea of the anticipation-fulfillment structure of perception. Our experience not only consists of perceiving things in the world, but is also colored by the possibilities we "see" in these things. These possibilities are felt in the body as a readiness for certain actions (i.e. seeing a cup of coffee can move us to grab it by its ear and bring it to our mouth). The fulfillment of one possibility leads to the next perception with new possibilities to follow. Most of the time this "unfolding" of experience progresses without problems, such that there is a basic feeling of certainty, confidence or trust in experience that is taken for granted by most people. Besides being fulfilled, however, a possibility can also be "disappointed". This gives rise to feelings of negation. The difference between fulfillment and disappointment of possibilities is the prerequisite for us to experience something as being present or not and to take something as being the case or not. From this follows that the anticipatory-fulfillment structure of experience is a precondition for having beliefs about existence and reality. Following the example of other phenomenologists, like for example Merleau-Ponty, Ratcliffe also takes chronic disturbances in this structure to be the cause of hallucinations and delusions.

Expanding on the account of Husserl, Ratcliffe argues that this anticipatory-fulfillment structure is interpersonally regulated and sustained. He uses examples from trauma and bereavement to show how the actions of other people, our relationships with them and their presence or absence changes and gives form to this basic structure of experience. The detailed description of the experience of grief and how the world appears to us after losing a loved one is especially illuminating. Ratcliffe brilliantly describes how one can experience the presence of someone in their absence or take the proposition that "B has died" to be the case but not quite believe it. This all shows that there is way more to anomalous experience besides simply having a false perception or belief and that interpersonal relations most likely play a crucial role in hallucinatory experiences.

Lastly Ratcliffe combines these insights about the anticipatory-fulfillment structure with the concept of Zahavi's minimal self. The minimal self is often taken to be disturbed in disorders like schizophrenia, which leads to symptoms like hallucinations. Zahavi's account of the minimal self, it being the subjectivity of experience, does not explain why and how these symptoms arise. If the minimal self would be reinterpreted as part of the anticipatory-fulfillment structure of experience, however, this would close that gap. Ratcliffe provides the following argument that the minimal self must be exactly this structure. The anticipatory-fulfillment structure is what makes it possible to distinguish between different intentional states, rendering us able to place ourselves in space and time. This convergence of experience to one locus of perception is exactly what subjectivity, the minimal self, entails. Reinterpreting the minimal self as part of the anticipatory-fulfillment structure that is interpersonally regulated, an interpersonal minimal self, connects the puzzle pieces of various dominant approaches in explaining hallucinations.

Evaluation

It was a challenge for me to write the summary up in a logical order. The book is structured in such a way that, to me, seemed illogical and unnecessarily confusing. For example, the part about grief is placed at the end, in the chapter where Ratcliffe discusses hallucination cases that don't fit his theory. This is unfortunate, as the analysis of grief is where Ratcliffe makes his most important arguments for the interpersonal regulation of the anticipatory-fulfillment structure of experience, which are key for his main argument. Another related annoyance are the countless references to other parts of the book where the argument would be continued. This gave me the feeling of "having many tabs open" in my head while reading. This could have been avoided, were the book structured differently. The complexity might also be due to the thoroughness of the author, making many side quests justifying choices made and explaining methodology.

The upside is that one does not need too much background knowledge to follow the thought process of Ratcliffe. Precise as he is, he explains all the different ideas he takes from other thinkers before building further upon them. The book seems to be written for a semi-wide academic audience. The analytic philosopher with an interest in phenomenology and psychiatry would be the most obvious reader, however the book is also intended to inform scientists from the cognitive sciences, professionals in the psychiatric field and philosophers interested in belief formation. Personally, I think that philosophers concerned with the ethical and political dimension of mental health could benefit from reading this book and even academically inclined people that struggle themselves with hallucinations, trauma and/or grief might find this book

illuminating and acknowledging of their experience. All in all an indispensable book that most likely will play an increasingly important role in the developments in psychiatry, embodying the changing attitude of society concerning mental health and its interpersonal character.

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