

Towards a Phenomenology of Projection Errors

As is rather obvious, the concept of subjectivity has long had deep connections with the concept of mistake. The author has had occasion to detail some of these connections and to lament some of their consequences as seen in applied phenomenology.¹ Therefore, for no particularly good reason, certainly not the one just given, interest arose in the phenomenology of mistakes. This paper will outline one class of phenomena for which the term 'mistake' or 'error' often stand as the appropriate descriptive title, namely projection errors.

The notion of projection is in most pervasive use in psychology in the description of motivated errors connected with mental disturbances and in social science, sociology in particular, as a format for the criticism of the research and theory of colleagues. We will reverse the previous order and introduce some features of projection by considering its operation as a programme of talk for producing criticism. We will be interested in these kinds of errors:

1. The projection error: the organisation of characteristics of the method of looking are reported as those of the objects looked at.
2. The bias error: the features cited were indeed features of the objects described, but these characteristics were noted as a consequence of the method of looking *selected*. This involved a personal choice not

warranted by the objects looked at. Moreover, the imagery conveyed by the reportage of these particular characteristics to the exclusion of other possibilities parallels the ideology, political purposes, sociological position, psychological biography or personal motives of the reporter.

Readers will recognise these two formats as productive of rainstorms of error-talk in professional literature. Importantly, both indictments are often capable of being made against a single piece of work. I will illustrate by bringing out some dirty linen from sociolinguistic research in ethnomethodology.

At one time undergraduate classes were treated to the better part of a semester devoted to the analysis of the following rather short story recited by a child:

The baby cried. The mommy picked it up.

Some observations about the story as it is heard were presented to the class: '[t]he hearer of that story when it was told and most of you in this class hear that two events occurred, that they were temporally ordered events, that one event serially followed the other, that the order of the utterances is the same as the order of the events.'² The task for the duration of the semester was to theoretically explain such observations as these about how the story was heard.

¹ 'Mental Disorder and the Study of Subjective Experience: Some Uses of Each to Elucidate the Other'. Unpublished Ph.D. dissertation: University of California at Los Angeles, Department of Sociology, 1971, pp. 156 – 180.

² Harvey Sacks, 'Personality and Society' lecture 1. Unpublished lecture notes: University of California at Los Angeles, Department of Sociology, 1967

So far things seem perfectly reasonable. However, the class had been deceived. The two kinds of errors which were mentioned had been committed as can be appreciated by considering alternative readings of the child's story:

'The baby,' cried the mommy, 'picked it up.'

The baby cried, 'The mommy picked it up.'

In fact this story was originally obtained in written form from a book which reported these children's recitations. What sequentially occurred was that after already performing a considerable amount of analysis these alternate ways of writing the above were discovered. If the alternative ways were the appropriate renditions of the actual utterances the initial observations about the presumed experience of the hearers became meaningless. We were attributing to the utterances, features produced by our written representation of them on the blackboard, in the case of the classroom presentation. This posed a general issue when considering the task of analysing what people 'hear.' Considering a transcription as a written model of an oral phenomenon, how could one discover which of several alternative and/or incompatible models of something orally spoken was correct in the sense that it corresponded to what was actually heard?

One could rely on the native competence of a typist to decide on the basis of what it 'sounded like.' However what the utterance sounds like is precisely the research issue which presumably depends on the social context in which the utterance is heard. Hearing an utterance off a tape as a typist doing his job and as an

active, on-the-scene, member of an interaction, comprise rather massively different social contexts for hearing something. Besides, relying on one's native linguistic competence to decide research issues had long been an ethnomethodological no-no anyway. Henceforth, the analysis of what was heard proceeded by developing ways to treat responses to a given utterance as well as remarks made previous to the utterance as evidence for who heard the utterance in what way, and thus as evidence for how to transcribe it off a tape. However, we need not go into the pros and cons of this procedure.

Consider the structure of the methodological difficulty which was just displayed. Consider it as a written (or oral) presentation. We were presented with a story. Then we were invited to consider this presentation not as the story, but as a presentation of the story. Two other presentations were offered, as two other presentations, not two other stories. The three were to be read as alternative representations of one factual, actual story, whereupon they became appreciable as incompatible. It was not simply that their contrasting characteristics were merely *their* characteristics, such as if the three consisted in the same story written in three different languages or if the three were read as three different stories with certain linguistic similarities. Rather, their characteristics were portrayed as projectionally intended, as characteristics as well of the phenomenon they represented. Whether the story reported two events or one event was such a characteristic. Having separated in your mind what is on the blackboard from what was actually said or actually heard a correspondence issue is set up. Data are treated as a selection between

incompatible alternative models of a phenomenon, only one of which is the 'real' model. If one of the alternative transcriptions corresponds to the actual story told rather than the one originally given, then the consequent analysis becomes wrong or meaningless.

If one were to consider ways to invalidate a piece of research the format just employed offers many advantages over others. One could, for instance, search for counter-examples to the observations offered. This, however, requires the actual gathering of additional, comparable data. The format we are considering is completely theoretical. All that is required is to find a way to pose some selection problem like the preceding. In general, the actual phenomenon is gone, having already happened. Only the record of it remains. So there is no particularly cogent way for the victim of such an indictment to demonstrate the correctness of what has now become his choice among other possible choices for the model of his phenomenon. If the alternatives are plausible possibilities for what actually happened in terms of common sense, nothing additional is required to demonstrate your 'mistake' or oversight—no additional data, no additional research, nothing. It doesn't even matter what actually happened or if you were correct. For this sort of critique trades on common sense reasoning and the plausibility of a written presentation. This can be illustrated by iterating the criticising process yet another time.

Given a child talking with sufficiently uniform, flat affect, as many children do during formal recitations, and the existence of several hearers of this story, perhaps all three versions of the story were actually heard by different listeners. Again, perhaps one could

only make out the story, or indeed even the words which the child uttered, by repeated listenings to a tape. With difficult acoustics and physical distance between child and listener, with only one opportunity instead of many to hear the child, with a child unskilled at articulation, perhaps all the actual hearers heard were mumbles.³

That is to say, the exclusiveness of our alternate versions of the story, indeed the very possibility that it was one of *these* alternatives which was the correct one, were themselves matters that were achieved in the here and now by reference to common sense talking and common sense reasoning.

Now let's abandon the methodological issue. Let's give up trying to figure out what other people heard at some other time and place. Consider something called 'what they heard' as a phenomenon occurring right now as you, the reader, consecutively read these comments. Then what does 'the actual story' come to? Obviously, it came to your first reading of 'The baby cried. The mommy picked it up,' not just as two sentences, but *as the story*. 'The actual story' was a way of reading something. As the demonstration of the projection error proceeded, what was called a selected representation of the real thing consisted of inviting you to read or construe those same identical sentences, which were previously the story, as *two sentences*. At that point

³ Aaron Cicourel uses procedures similar to the one considered here to generate an indefinitely long series of accounts of 'what really happened' in a given social setting. Each account stands as the definitive, factual version of what really happened until overturned by the next. He calls his procedures 'indefinite triangulation.' Examples can be found in his *Cognitive Sociology*, New York: Free Press, 1974, pp. 124 – 127.

what was the real thing, the real story? It consisted of phrases like ‘the utterances,’ ‘the actual story,’ not addressed as phrases intended to depict something else, but as the something else itself. For we could perfectly well iterate the process again by separating such phrases as ‘the utterances’ or ‘the actual story’ from something called ‘what really happened.’ After all, all we have is a tape. Who was there at the recording? There may have been no actual utterances at all but just a skilful editing job by a mischievous ethnomethodologist. Or again, why are we to assume that the child adequately understood his instructions so that it was a cultural object called a story which he was attempting to produce? Also, in the current discussion of what happened in this written presentation, I invite you to collaborate with me in understanding ‘what happened’ as what happened and not one of several possible versions of what happened. And on, and on, and on, ...

Let us take a preliminary inventory of the sorts of issues being raised. We are dealing with something that happens to a person in the here and now. Therefore, as the present example makes clear, ‘projection’ now stands as the label for a temporal sequence of events. Our present example deals with a programme of talk with accompanying ways of listening to the talk. The ordinary metaphor for projection is atemporal and spatial. Conceptually, one imagines some real object looked at and understands projection as the externalising of a feature of the looking, and assigning it to the thing looked at. In our case, we treat the real thing looked at as a subjective event that happens to a person at some point in the sequence of experiences we are calling a projection sequence; it may be a thought, a way

an utterance is heard or understood, and so forth.

Secondly, one of the nastiest features of these sequences is that they can be iterated indefinitely. This characteristic, potentially, follows from another, namely the reflexivity of projection sequences.⁴ That is, these processes are self-applicable. If we use projection as a programme of talk, as a method for producing critiques, then the method, once having produced a complete critique, can be focused on its own produce so as to produce a critique of the critique, etc. This feature has been amply illustrated in our linguistic case. However, notice that I used words such as ‘potentially’ and ‘can.’ You will notice at the end of the linguistic example that my suspicions that no utterances were spoken and so forth started to sound unreasonable and rather like nit-picking. The suspicions still made ‘sense’ in the terminology of Merleau-Ponty; they contained coherent meaning. However they were not as cogent as the original objections about alternate ways of writing the sentences of the story. This will be important. In a way it renders the phenomenon non-trivial. You will recall the comment that, as a format for criticism, projection trades on common sense reasoning and the plausibility of presentation. That is, persons generally do not address these presentations as presenting tentative possibilities. They are prepared to complete their assessment of the critique and its target within the setting in which it is encountered, using only the time available, the perceived plausibility of

⁴ I intend ‘reflexivity’ in the same sense as Garfinkel—the variety of ways that descriptions and accounts are part of what they describe. See, for example, his *Studies in Ethnomethodology*, Englewood Cliffs, NJ: Prentice Hall, 1967, pp. 7 – 9.

the argument in terms of common sense, and no additional such as data that would need to be gathered another time. They need not listen with an attitude of 'wait and see' but usually terminate the interactions involved with an identifiable position on the matter at issue. Therefore such cases present the researcher of common sense reasoning with concrete problems concerning what makes for cogency, what are the features of convincing remarks, and so on.

In general, a given concrete case will present problems specific to itself when one asks questions such as: can a projection procedure be iterated here? How many times? How can it be done? Why would it be done? What are the specific meanings of the experiences involved in the process?

The final characteristic of projection sequences to mention at this point might be considered their central ingredient. It consists in the specific way these sequences transform something which is treated at one point as a fact and at a later point as an interpretation or representation. The nature of this transformation is quite distinctive and delicate, and poses many descriptive and analytic problems.

It is to this kind of transformation that we now turn. Here, cases of projection in psychiatric settings will be of value.⁵ Interestingly enough, the most fruitful place to look is not at examples of mental disorder such as one of the

varieties of paranoia. The author had occasion to investigate the nature of the actions involved with various individuals diagnosed with one of the paranoid designations. These categories encompassed many varieties of heterogeneous phenomena and often, when investigated, conveyed as much information about the diagnoser and the practical situations of the diagnosing institution, as about the patient who was processed and labelled. The particular processes of thought and interaction which persons were picking up as evidence of paranoia turned out to involve neither the kind of spatial projection ordinarily thought of nor the sort of sequences we are considering here. Instead, an extremely interesting series of processes were taking place involving the interaction between what I term non-discursive reasoning processes and ordinary practical reasoning as used in everyday life.⁶

The most fruitful place to focus upon for the purposes of observing projection sequences turned out to be processes of recovery rather than those of disorder, specifically upon the achievement of patient insights. Frequently the vehicles for what therapists see as defences, delusions, and so forth, are not what we might call patients' theories of social structure—collections of hypotheses and proverbs about the structure of the world, the nature of people, or the course of one's own life. Rather, they are reports of definite, particular occurrences which sound distorted, incorrect or slanted. Here is an example:

This is another example of the defence of undoing. Thinking about killing had to be undone by the counterbalancing behaviour of thinking about doing good.

⁵ Data and examples presented here are taken from the author's research as a professional intern at the Langley Porter Neuropsychiatric Institute, San Francisco, CA, 1969. Data sources included tape recorded individual and group therapy sessions, and structured taped observations by staff on the ward.

⁶ *op. cit.*, Schwartz, pp. 249 – 276.

Associated material indicated that Robert's concern about his uncle served to cover his feelings about his father's death. In this exchange he was attempting to atone for murder, feeling that he had killed his uncle and had committed patricide when he was two.⁷

A general conviction of the variety, 'Everyone is trying to kill me,' can be subjected to empirical test. However, here we have a specific past event that is gone in the sense of experience. We have the therapist faced with a patient on a ward containing no persons, records or artefacts that could possibly bear on whether this patient killed his uncle or not. The therapist, typically, has no pertinent knowledge about the facts of such an event much beyond what the patient tells him and what he makes of that. And we all know, including the patient, what he is likely to make of that. The therapist is simply not going to conduct an investigation to determine the truth of the matter. A therapist is usually without the resources to bring empirical evidence to bear on such a story and his interest in such evidence borders on apathy. Patients are massively denied the role of reporter since, sociologically, the relevant roles are patient-therapist, not defendant-judge or victim-policeman. The relevant activity is treatment, not fact finding. It is not the doctor's business to investigate such stories and take appropriate action depending on what he finds. This is of course one of the ways that patients are robbed of the opportunity of being taken seriously as discussed by Laing and others. Their therapists are not about to listen to them in the way one listens to a reporter. They can't tell stories about

what happened to them or what happened in the world on the grounds that they are correct—and they know this. It's interesting in this context that when a sociologist investigates the claims of patients concerning conspiracies against them he validates these claims in many cases and arrives at a theory of paranoia which involves the existence of actual persecution.⁸

In any case, our much-maligned therapist merely has his intuitive conviction that a patient's report is both false and psychologically motivated, a conviction grounded in a native's common sense about the social world and his own psychiatric training. How can he make the patient see what he sees? How can an insight be achieved? In such cases this achievement vitally depends on the kind of process we are considering. The procedure begins with an event-as-described. It must be possible to propose that selfsame event as something else—as a description, interpretation, or proposal, and not an event. This is extremely important. Elsewhere I have explored the conceptualisations involved in thinking of something as a fact *versus* thinking of it as subjective in some way—as an appearance, interpretation, or description. Two characteristics of subjective objects were distinctive. You own them, and you do them, as some sort of activity. Interpretations are always somebody's; objective facts don't belong to anyone. Interpretations are made, are done, by those they belong to. They can therefore be done in particular ways and for particular reasons. If one is attending to, 'I killed my uncle,' as a fact, if one is attending from those words to their meaning as

⁷ K.H. Blacker, 'Obsessive-Compulsive Phenomena and Catatonic States: A Continuum', *Psychiatry: Journal for the Study of Interpersonal Processes*, 29(2), May, 1966.

⁸ The theory I am thinking of here is Edwin Lemert's (1962), 'Paranoia and the Dynamics of Exclusion', *Sociometry*, 25(1): 2 – 20.

an objective event and living in that real event as it is being thought of, one can only talk about 'it.' 'It' belongs to no one; 'it' didn't happen because of any psychological motivation of yours; 'it' has nothing to do with you or anyone else in terms of what its real characteristics were and what they were not. Thus if one wants to pose the possibility of an error, or to assign motivations to the telling of this event, he must split one thing into two things in the patient's mind. He must produce the description and the described, the interpretation and the thing interpreted, the subjective experience and the factual event. The interpretation can be wrong or motivated but not the objective event. Russell and others have discussed this problem when considering the implications of certain philosophical problems associated with theories of error. Without the transformation one is faced, conceptually, with a logically impossible object:

You know when you killed your uncle?
Well you didn't kill him because you use
an undoing defence.

At this point it is possible to ask some interesting concrete questions. Specifically how is one to effect this change in someone else's awareness? Consider our example from sociolinguistics again. There are many ways to invite a person to consider the original sentences as a description of a story rather than the story itself. For instance, the class could have been instructed to gaze at the sentences on the blackboard as aggregates of symbols so that words and letters of the alphabet were attended to instead of a story. If the topic were to turn to words and letters, we might be tempted to say that at one point the sentences were the story for the class and later they were aggregates of symbols. Here

we look in from the outside and allow ourselves to speak of the 'same' sentences being different things at different times. However we are interested in experienced *errors* of a certain type. Our transformation can not be merely that something is at one time the thing described and is later something different—some kind of description. We must split one thing into two. We must start with a fact at one point and later have in our awareness something called what I thought was the fact and something called the actual fact. Further we must do it in such a way that the possibility of a certain kind of error is posed. By addressing the sentences as aggregates of symbols we make available the possibility that a word might have been misspelled but not that we might have been mistaken about the story. Indeed it is easy to propose in a general way that what we had was merely some sentences and not the story told; so how did we know that the two corresponded? But clearly this would not have been cogent. It was necessary to find a concrete way to pose the issue of the correspondence of the sentences to the real story. The way we did this was quite specific to the case involved and concerned grammatical ambiguity in the sentences. This allowed for the exhibition of specific, concrete problems of correspondence. This sort of thing won't do for our psychiatric cases because these sort of insights often have to occur at a furious rate. What is needed is a rather general way to take all sorts of events reported by a patient and split them into two things for him, what he said and what happened, and to do so in a way that automatically exhibits to him specific, concrete possibilities for discrepancies between these two. The way this is done makes use of the notion of personal motive in an elegant way. It involves listening skills in the hearing

of one's own comments or that of another which patients either know or are taught during therapy on the ward. Let us approach the process involved in stages.

The first sort of listening skill involves what amounts to changing language levels during a conversation. Taking over the classical terminology we can speak of persons using the symbols of the natural language to mention something else. Then our present concern is with people listening to each other in such a fashion that they hear what is used rather than what is mentioned. Putting it in other ways, persons attend to the saying of things rather than what is said, or notice such things as how something is said or that it is said rather than what is said. This is the way people hear each other prior to engaging in what ethnomethodologists call formulations. Formulations are descriptions of utterances within a conversation which are themselves part of the conversation such as referring to a comment as a question, brag or answer within a conversation.⁹ As such, formulations are often done in all sorts of interactions and are not peculiar to psychiatric settings. However our concern is with the sort of thing Austin speaks about as doing things with words. We are concerned with patients hearing a description, not as something which is said, but as a verbal activity which does something. Consider the massive difference in listening to a comment such as, 'I want out with Jill,' and hearing an event that occurred on the one hand *versus*

hearing a brag having been made on the other hand. I am not implying however that these possibilities need to be mutually exclusive. But in any case there are two things involved so far, hearing the saying rather than the thing said which involves sort of situating one in a metalanguage, and treating this saying something as a verbal activity and recognising the sorts of things the activity 'does.' Here, a rather complex skill is involved. Years of technical training allow a psychologist to recognise elaborate and intricate psychological and interpersonal things which a verbal comment might be involved in 'doing.' These things are infinitely more sophisticated than doing bragging or doing complaining and so forth. Patients need to learn many of these intricacies as well. One of the vehicles for the teaching of the skills mentioned is the incessant formulating of a patient's comments by staff and other patients. A pervasive activity in natural conversation consists of displaying that one is listening; showing that one understands another's comment, displaying what one heard him say, indeed displaying to him that you heard the remark in general. An additional twist to these activities which the author has explored in other work is the ways the people show each other what they do not hear in a remark. In any case, a principal vehicle for accomplishing this conversational work is the use of formulations. Although we can't go into specifics about the way patients learn the skills of current concern, we can say in a common sense way that building competence in the correct interpretation of psychiatric formulations of one's remarks will simultaneously build competence in seeing social actions done in utterances, in listening metalinguistically, in acquiring a

⁹ Formulations are discussed briefly in Harvey Sacks and Harold Garfinkel, 'On Formal Structures of Practical Actions', in John McKinney and Edward A. Tiryakian (eds), *Theoretical Sociology: Perspectives and Developments*, New York, NY: Appleton-Century-Crofts, 1970.

vocabulary of motives. However, this would only account for persons coming to understand what others understand. A formulation of the type, 'You feel the earth is round,' might alert me to another's feeling about the matter, but it doesn't automatically pose for me a live possibility for a difference in the earth's shape compared to what I think it is. For that, more is needed.

More is provided when we add the use of personal motives to our equation. The following statement is going to be a bit hard to understand for a reader who has not had experience with it. In many psychiatric settings the notion of correct motivation replaces the notion of truth as the criterion used to determine the validity of descriptions. If it is determined that your motive for saying you killed your uncle is pathological, they you didn't kill your uncle. The doctor, and later yourself, don't believe the statement or, better, don't believe in the statement. We can say the statement is invalid, but it is close to the actual experiences involved to say the statement is false in a sense of false that transcends the usual epistemological hardware used to determine truth. Just substitute evaluative procedures that employ personal motives for those that employ what scientists think of as evidence; then retain the subjective way you feel about something when you think of it as true or false—and that's what it's like in many of these settings. I know many won't believe this. So I'm just going to leave the claim as blatant as it is, with no elaboration. To use this system of validity patients need to learn to see the personal motives involved in descriptions of events and situations. One of the important ways this happens consists of a patient being assigned a stable collection of personal motives as part of his personality in a

'looking glass self' fashion. Equipped with these, he is encouraged to learn to see these motives operating in the things he does and says.

When one combines these factors—the ability to listen metalinguistically, the ability to detect interpersonal actions 'done' by verbal comments, the ability to see personal motives for descriptions, the use of a logic of personal motives to assess truth—one has the outline of a rather general method to effect the transformation in awareness necessary in projection sequences. The same method can be applied to a diverse collection of heterogeneous descriptions, and when successful will replace a one-time fact with a personally motivated interpretation on the one hand and the real truth on the other. Simultaneously, difference between these last two, based on the particular motive involved, will be exhibited as live possibilities or actualities.

There are all sorts of technical ways that this sort of programme can run into snags. Clearly, specialised kinds of verbal fluency are involved together with particular ways of conceiving of one and the world. One would imagine such skills would vary considerably with sociological categories. Indeed, it is rather easy to discover that various types of people in these psychiatric settings have, what is clearly for me, technical problems in this regard. They don't know how to talk, think and listen in these ways. The technical learning problems involved tend to be overlooked in such settings where the model is illness, treatment and recovery rather than that of a school with students. Thus a patient's failure to recognise personal motives is more likely to be regarded as a psychic problem than a learning problem. A change in this ability is more likely to

be seen as a change in personal attitude or the growing of personal insight rather than a verbal skill having been acquired. A hilarious case of a patient just not knowing what to attend to involved the admission on a ward of, would you believe—a white upper-middle class, Protestant Christian mother. The Christian religion furnished the customary idiom she employed to formulate events in daily life. In particular it seemed impossible for her to think of herself as doing something for a personal motive, or at least to talk that way. To this woman, she was always a case of ‘somebody.’ When discussing an action of hers she immediately attended to morals instead of motives or feelings—should someone do that, was that a justified action, etc. If one proposed she did something out of fear she would launch into how individuals should learn to conquer their own fears, etc. the problem here was providing the woman with a conception of personal identity so that she could take personal possession of her actions, in a conceptual sense. She irritated the staff no end with this business and in the face of what they saw as blatant rigidity and repression they spoke of her prospective treatment in terms of ‘killing a Christian.’

At this point one might object that there is not phenomenology in all of this. Both our methodological example and our examples from psychiatric settings deal most directly with methods of talking and listening, reasoning and judgements, or conceptualisations. There are many good reasons to avoid the claim that we are directly speaking about experiences or phenomenological phenomena in such cases. To answer this objection we will attempt a somewhat technical description of the

abstract phenomena as it might be directly experienced.

We have a collection of phenomenological sequences which produce a special kind of experienced error or oversight. They are a special variety of what has been studied under the title of reflexive sequences.¹⁰ Reflexive sequences start with some describing activity as seen from the outside. In consecutive steps this describing activity turns into a recognised description for its doer. Using Husserl’s terminology the describing becomes an intentional object, a *noema*, as its doer becomes directly aware of it as an object of experience. This object is seen as a description, so that one becomes conscious of the doing as a done. There are two major explanatory problems for reflexive sequences. Exactly how does the doing leave behind a done or produce a done as an observable object for its doer? Second, what is the motivational, pragmatic or technical gas that makes these sequences happen? Why would people jump levels like this and observe their observing? Especially in mental disorder, reflexive processes are often iterated indefinitely. To stop such a process one desperately needs to know what is making it go. In everyday life we seldom find concrete cases of iterating such a process more than a small number of times. The reasons for this concern the reasons persons have for repeating the process and the methods they use to do it. Our discussion of the ‘selection from alternatives’ format and the psychiatric uses of motives were outlines of two methods that might answer the technical question of how projection sequences turn a describing activity into a recognised description. The

¹⁰ *op. cit.*, Schwartz, pp. 204 – 248.

question of why the process might be continued for some number of iterations is also easier to deal with for projection sequences than other reflexive sequences since they deal with the tremendously strong and well-known notions of truth, mistake, correctness, and so forth. Something like getting depressed about being depressed about being depressed presents far more thorny analytic issues.

However things are quite thorny enough in that I am faced with the messy job of trying to describe the much-publicised awareness transformation distinctive of projection. For simplicity let us have our human become aware of some event or situation in present time. We don't specify that his awareness seems genuine or factual to him; only that it does not seem illusory and thus suspect from the start. The transformation consists of an experience which contains all of the following recognitions simultaneously:

1. The recognition that what-was-taken-for-what-really-happened-was-actually-my-interpretation-of-what-happened, that what-was-considered-real-was-instead-an-appearance.
2. The recognition or presence of a new version of what-really-happened. This new what-really-happened is distinct from what is now regarded as the appearance.
3. A feeling of error, mistake, or oversight consisting in part of appreciating possible or actual differences between what was thought of as what really happened and what is now regarded as what really happened.

These recognitions were separated for descriptive purposes. In the actual

sequences they are fused in one single experience. The experience is pre-predicative and non-verbal. Most emphatically it does not consist of hearing a voice in one's head uttering conclusions such as 'it wasn't what you thought it was.' It is true, however, that, once undergone, the experience furnishes the necessary materials to articulate statements about what you once thought was the case, what you now see was the truth all along, and so forth.

This being only an outline of the main ingredients of these sequences many relevant details are not discussed. For example, in some cases the initial awareness of what is occurring can be widely separated by time and intervening events from the transformation; in other cases they occur adjacent to each other. In some cases the recognition of the error occurs later or remains as a live possibility. The transformation experience can have various predominant flavours to it such as a 'so-that's-what-was-going-on' or a 'was-I-ever-fooling-myself.'

Innumerable other specifics might be cited.

At this point I expect to get it from both sides. Most readers will be annoyed at what seems like unnecessary wordiness in the previous discussion. Classical phenomenologists will be outraged at the clumsy, intuitive language used to describe an experience in preference to the well-developed vocabulary of phenomenology. The present course of action was chosen for what seem to be two very good reasons. First, phenomenological vocabulary was tried as a way to describe these sequences; it just didn't work. There are some important reasons why. Consider the task of attempting

phenomenological description of the phenomenon, your projection. The describer undergoes the experience himself and is actually fooled initially. Clearly the phenomenon, somebody else's projection, looks different than that of your projection, and would be described differently. Someone looking in from the outside as another is never fooled himself. This outsider would not see or experience the transformation we spoke of and could not describe its nature. Further his consciousness of the phenomenon, somebody else's projection, would contain experiences concerning what he saw from the outside as going on all along. As the rules say, we can not use notions of what is going on all along as seen from the outside when describing the phenomenon, your projection. In your projection there is no outside. However, if we were outside looking in on someone undergoing a projection sequence it would be relatively easy to mention three things that happened to him in some sense of happened. The first concerns what I call variable-fixed-objects. A prototype for this term is something called a constant letter in mathematics. It can be any number but is to be read as if it is some specific number. In our case we see a person having one opinion of what really happened at one point and having another at a later time. 'What really happened' for him is seen to change. However, at each point, his current version of what really happened presents itself to him as fixed, definite, and unchanging. To do this the second version replaces the first as what really happened *all along*, relegating the first to the category of appearance. As we all know, appearances never really happened. Secondly, as we just mentioned, there is the retrospective recognition that something at an earlier time appeared to be one thing and was really another. Finally there is what we

have spoken of as one thing splitting into two things. Initially, there was just the thing happening, the 'it.' Later 'it' is retrospectively seen as having been 'them,' two things, a succession of real events and a succession of appearances.

The problem with these three phenomena is that if one plays by the rules and doesn't allow oneself to use notions of 'outside,' one can not describe them. When describing my projection experience, if I never allow myself to treat 'me' as 'him' in some way I can't talk about the three things mentioned in any adequate way using phenomenological vocabulary in particular or most any other language. The author was able to see this claim in an unusually clear way by setting up the problem with the aid of certain paradoxes in mathematical logic. So far this seems to be the best way to approach the specifics involved in this claim. For without the specifics, the three features which were mentioned appear to be standard and well-known features of certain types of consciousness which phenomenology has long since successfully dealt with.

There was, however, a more fundamental reason to avoid a technical description of projection. An extremely conservative phenomenological programme is being suggested here. We wish to simply expand the vocabulary connected with the word 'observation' so that we can talk and think of the observation of projection sequences in the same way one observes anything else. So clearly one would commence such a programme with the devising of ways to observe this thing called your projection. To this end the author has worked with several sorts of experimental procedures to produce the awareness required. An extremely

simple and effective procedure consists in a simple parlour stunt. It consists of seemingly bending and breaking a knife or fork on a table. After this the hands are lifted revealing what really happened and how the apparent breakage was affected. This revelation produces the required experiences in the onlookers, hopefully.

The general conjecture, however, is that most readers are rather unfamiliar with the experiences connected with projection sequences in any detail and are not used to observing such experiences for specifics. It is therefore the acoustical properties of the music that are in contention where all we presently have is the score. As with the usual vocabulary of observation, one can not fruitfully argue about the characteristics of a class of objects unless he has seen them. Therefore the intended function of my remarks about the nature of projection sequences were proscriptive instead of descriptive. They were not intended as propositions, correct or incorrect, but as blueprints to be met, as hints about how to find something in the world. Such features as the person's specific nature of projection sequences were features to build into the methods for observing these sequences for those who might hunt for them. Once able to formally produce these phenomena and thus have available the possibility of a large number of comparable observations of them, more ambitious phenomenological analysis might be fruitfully undertaken—hence the title 'Towards a Phenomenology of Projection Errors.'