

GRACE NOTES III

DR SALMA SIDDIQUE listens to the stories of the embodied voice.

GRACE NOTES offer additional annotated aspects to our life scripts. The stories we tell ourselves and the stories others tell us are usually limited to verbal transactions in the therapy room. Here, I look at how our bodies give us additional annotated notes. In my own work with survivors of torture I need to engage with the embodied voice. As I often work through interpreters, perhaps I am even more aware of the client's body, movement and gestures than the actual words spoken.

The body is not only a thing to feel through but also a thing to think with. As we know the body gets more attention for its presentation and can become alienated, 'de-humanised' and medicalised. We embody cultural knowledge which communicates experience on a sensory realm. Stories can be performed by and on the body eg the loss of a breast, or movement, loss of confidence and a sense of self. The body narrates from a subjective and inter-subjective space. Textures, sounds, shapes and odours that reside in and on the body can become the text from which we communicate emotions about our understanding of loss of the sacred object.

It seems as if we increasingly become less engaged with our bodies. In contemporary society the plastic surgeon fulfils a similar role to the psychiatrist through the creation of a new self for the patient. As a result the story (script) is not stagnant or fixed but creating and framing through the grammar of genetics and technology. In a society where body parts and organs are transferable across species this can give rise to moral and cultural questions of what constitutes a person and the meanings negotiated around self-identity, loss, death and dying.

In June the *Daily Mail* reported the creation of a robot known as the 'last moment robot' (Wrenn, 2012) to hold your hand as you die which was based on the baby seal robot – 'a padded caressing arm' (developed in Japan by Chen researching 'robotic intimacy technology') to offer comfort to people in later life, marginalised, the lonely and survivors of traumatic events such as tsunamis. Developments in technology and the body can give rise to issues of control and the nature of bodies and boundaries blurring which partially fulfils our psychological need to be held. As the story of science is constantly being rewritten, how does it impact on our collective stories written on the body and the acceptance

by the individual about what version fits their symptoms?

Turnbull (1972), an American anthropologist, reflected on how he admired the IK tribe from Uganda whose culture of individualistic survival has developed to address the harshness and scarcity of their environment on the border with Kenya. They had lean bodies with no adornments. The tribal group was honest and real about the individualist drive to survive. Turnbull's observation gave him greater insights about his own society's notions of OKness. Through looking at the stories others tell of their rituals, practices and behaviours, he wrote: "it is rather like suddenly catching sight of oneself, in middle age, stripped naked in front of the bathroom mirror. One is forced to admit that the paunchy body is no longer as beautiful as it used to be, if indeed it ever was, and one hastens to don clothes to restore the illusion...The beautiful human, like the beautiful body, seems to be a myth perpetuated by the game of self-deceit, at which humans are so singularly adept"(p32).

How does this affect us as therapists? Are we taking into account the whole person with their range of stories expressed through their body as well as verbally. Do we hold the in-between of the image and the reality in which the client (storyteller) and therapist (listener) sit?

I am reminded of a haiku by Spence (2010). He refers to a child's communication with her mother:

"it was this big!
the child tells her mother,
on the phone"

Spence's poem is an analogy for the complex challenge to actually hear what the client brings through their body, hand gestures and images, expecting us to grasp what they say. And when the therapist reaches out, what do they encounter? The client probably would like an authentic human touch or an embrace of acceptance.

References:

Spence, A., Prestige, L and Blackadder, E (2010) *Morning Glory London: Renaissance Press*

Turnbull, C.M. (1972) *The Mountain People*. New York: Simon & Schuster.

Wrenn, E. (2012) 'You are not alone, you are with me': *The Last Moment Robot*, source:

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