Between Sympathy and the Glitch: A Study of Magic, Magicians and the Disruptive Subject

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Dedication

This thesis is dedicated to my family:

Leonard J
Valmai-Anna
Vicki
Pete
Fiddy
Becca-Jean
Benjamin
Bubby
Brandon
Lukey
Gracie
JellyBean
Baby William
and
Nicholas
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The work presented in this thesis is, to the best of my knowledge and belief, original except as acknowledged in the text. I hereby declare that I have not submitted this material, either in full or in part, for a degree at this or any other institution.

C. A. Barrow
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Abstract

This dissertation examines the potent presence of sympathy in popularised discourses that seek to construct and/or position the contemporary western subject. I develop a concept of modern sympathetic magic derived from anthropological literature, where it has been predominantly associated with the laws of primitive cultures, and re-contextualise it within the contemporary western world. In particular, I focus on an analysis of sympathetic magicians, or masters of sympathy, with the aim of showing how sympathy is a driving force behind popular uses of the body, mimesis and affect in the construction of the idealised or normalised subject and the disruptive other in the form of the glitch.

I analyse four case-studies which embrace sympathetic magic, albeit unintentionally. In Chapter Two, I address a Cartesian sympathetic model produced by Dr Phillip McGraw, aka Dr Phil, in his self help text *Self Matters* (2001), where the ideal subject is understood in terms of a discrete and pre-determined ethereal mind. In Chapter Three, I examine the dissolution of origin and singularity in the becoming of the imagistic celebrity artefact, Michael Jackson. In Chapter Four, I discuss neuropsychologist, Dr Oliver Sacks’, medical biography *Awakenings* (1993). My discussion involves an examination of Sacks’ construction of post-encephalitic Parkinsonism as a series of bodily glitches that exile the patients in isolated territories of altered function or neuropsychological Wonderlands. In Chapter Five, I analyse neurophysiologist, Dr Jonathan Cole’s, medical biography *Pride and a Daily*
Marathon (1995). In this case, I examine a subject, Ian Waterman, who experiences a pathological and antipathetic Cartesian experience as the result of a sensorial breakdown. I explore how Waterman implements ingenious sensorial and cognitive sympathetic substitutes in order to affirm himself as a sensate subject.
Chapter One

A Concept of Modern Magic: Defining the Glitch and Sympathy

This is the face, the face of the Other in its purest distillation, that Other to whom one’s oneness stands in debt and to whom one submits one’s being.

(Taussig 1999, 224)

Little freak, who made you? Dost thou know who made you? Genes made you. Disease and illness made you. Religion made you. Show business and science made you. History made you: the norms and needs of your time and place made you. Your family and your psyche made you.

(Jefferson 2007, 27)
Introduction

The idea for this dissertation arose after I was introduced to anthropological studies of magic, in particular the work of Sir James Frazer and his seminal, yet controversial, study of magical cultures in *The Golden Bough: A Study of Magic and Religion* (1957), originally published in 1890. After studying ancient and ‘primitive’ magical cultures, Frazer concluded that sympathetic magic assumes ‘that things act on each other at a distance through a secret sympathy’ (16). He believed magical theories functioned as pre-religious and pre-scientific theories of cause and effect. In his analysis, he asserted that magic is based on two basic principles:

first, that like produces like, or that an effect resembles its cause;

and, second, that things which have once been in contact with each other continue to act on each other at a distance after the physical contact has been severed.

These two principles of magic were labelled by Frazer as imitative/homeopathic and contagious magic, respectively. One example of contagious magic he offered is a Cherokee practice, which involved the burial of a baby’s navel-string. A girl’s navel-string was buried under a corn-mortar, so she would become a good baker; and a boy’s was hung in a tree in the woods, so that he might become a good hunter (52). The navel-string was connected to the child whilst in the womb and therefore, according to the principles of contagious magic, whatever happens to the navel-string will likewise affect the child. In this case, being placed close to a corn-mortar will promote a girl child’s affinity with baking practices and instruments; and being
placed in a tree in the woods will promote a boy child’s affinity with the elements of
the woods, and place him above his prey in a power position. According to Frazer,
the laws of imitation and contact do not just pertain to material objects; they also
extend to life in the spiritual world/s, including dreams. The images in dreams have
affects on the waking life of the individual. Frazer reported that a Macusi Indian who
was unwell reproached his master for having made him carry a canoe up difficult
cataracts in his dream (239). Presumably, this poor man felt as though his master had
actually forced him to suffer this physical burden. His reduced physical state
worsened by the emotional toll of his dream journey.

While Frazer’s study was an endeavour to encode the logic, or lack thereof, of his
cultural others, I found something else in his work. After being exposed to Frazer’s
theories, along with those of his contemporaries and descendants, I began to see
magic everywhere in the contemporary western culture. I am not referring to the
explicit magic that is ever-present in popular entertainment mediums and media such
as the Harry Potter literary and filmic franchises and the illusions of performers such
as Criss Angel. These incarnations of magic embrace, albeit implicitly, Frazer’s
sense of magic as artifice. Harry Potter is a make-believe boy from a make-believe
magical world, and a similar statement could be made regarding Criss Angel. Angel
is a showman; he performs the persona of a master of mystery cross-bred with a rock
star. On his website, his biography reads, ‘beginning when he was six years old,
Criss Angel immersed himself in a multitude of art forms, from performance artist
and musician to mystifier and provocateur’ (http://www.crissangel.com/bio). He
describes himself as an ‘artist’. He is a character of illusion. But the magic I now saw
was not from the realm of the cultural or fantastical other, it was the magic belonging
to the selves of ‘my’ world. I began to see magic as a dominating force in the constitution of the contemporary popular western subject. I felt like anthropologist Michael Taussig, who after being confronted with magical theory pondered over its revelations, writing:

I want to dwell on this notion of the copy, in magical practice, affecting the original to such a degree that the representation shares in or acquires the properties of the represented. To me this is a disturbing notion, foreign and fascinating not because it so flagrantly contradicts the world about me but rather, that once posited, I suspect if not its presence, then intimations thereof, in the strangely familiar commonplace and unconscious habits of representation in the world about me.

(1993, 47-48)

For Taussig, sympathetic magic opened up new possibilities for understanding mimesis. The logic of magic is the logic of the representational act and demonstrates how ‘copies’ become active agents - subjects and objects of power in meaning making systems.

After my exposure to these theories, my initial interest and task was to identify, with some clarity, the potent presence of sympathetic magic in popularised discourses that seek to construct and position the contemporary western subject. In particular, I wanted to look at discourses which had not hitherto declared themselves as proponents of magical theory; but were seemingly built upon its foundations. And beyond this, I aimed to define a concept of modern magic and to argue its undeniable
and unassailable force in multiple systems of meaning, to identify the contemporary subject as a constituent of modern magic, fully submerged in sympathetic meaning.

This dissertation explicates my findings on the search for modern magical systems. Beginning with Frazer’s theory that posits ‘things act on each other […] through a secret sympathy’, I have developed a concept of modern magic as systems of meaning, of truth, of scientific law which are founded on the conviction that representational acts actually change the nature or constitution of things, including subjects. I am in agreement with Taussig’s contemporary magical realisation that the representational acts analysed by Frazer and his brethren reveal the secret of mimesis. Furthermore, my investigations have lead me to conclude that contemporary western subjects manifest themselves and are manifested by others through magical mimesis, or the sympathetic act. But what does this really mean? What are the roots of modern magic that underpin the mimetic act and sympathetic subject? My ultimate aim is to answer this question. I shall propose the concept of magic pertains to networks of complex connections. Magic creates the nature of subjects through connecting subjects with others in the practices of imitation and appropriation. As such, a primary supposition of this dissertation is that the magical act is a contagion where one can only be understood in terms of the acts of others. Recognising the ‘acting’ self and other as necessary magical components also positions my understanding of magic as founded on the belief that movement equals substance. Furthermore, I shall argue that affect is a primary component of this representational movement. The affective drive of the subject is the conduit for contagion. It is these contagious and affective elements of magic, which realise it as a logic and series of systems which are sympathetic in nature. The reader will find
the words ‘sympathy’ and ‘magic’ repeatedly interchanged in this dissertation. I use sympathy here to guide the reader towards my particular concept of magic, to always remind the reader that it is a system of affective and mimetic connection.

I believe this affective, contagious, dynamic and mimetic concept of modern magic influences various popular and dominating discourses shaping the modern subject. However, a study of the full scope of magic in contemporary western culture is beyond the limits of this project, particularly because I believe magic is a prevalent influence in multiple contemporary discourses. Therefore, my aim to understand the formations of modern magic must necessarily be localised, focusing on select case-studies, which I believe figure as powerful and popular examples of the re-appropriation or evolution of magic. I have chosen to draw my case-studies from two dominating paradigms the western world uses to understand and represent the human subject. I will be focusing on discourses surrounding the fields of medicine (encompassing a broad therapeutic culture) and mass media production. I use these contexts to argue magic exists as a product of the ethereal mind, a tool in the formation of mediatised subjects and technobodies, and as a basic principal in neurological and psychological dissections of the human. The chosen case-studies present popular and differing magical structures, revealing the dominance and diversity of modern magic.

I am particularly interested in exploring ‘stand-out’ magical experts, who not only play, work and surround themselves with the theories, practices and processes of sympathy magic; but figure as masters of sympathy, or sympathetic magicians. I intend to show that these magicians use sympathy to identify and also to construct
ideal subjects and their others. I have chosen to focus on five primary magicians: the Cartesian sympathy of self-help guru Dr Phillip McGraw (aka Dr Phil); the highly dispersed and rhizomatic sympathy of the celebrity phenomenon, Michael Jackson; the sympathy of an embodied pathological Wonderland as presented by neuropsychologist Dr Oliver Sacks; and the study of dynamic and embodied sympathy in the work of neurophysiologist Dr Jonathan Cole and his patient Ian Waterman.

As part of my analysis of sympathetic magic and the sympathetic magician, I aim to uncover instances of sympathetic disruption, antipathy or the ‘shadow-side’ of sympathy in each of the case-studies. I will address the flip-side of sympathy as the ‘glitch’. My purpose for investigating the glitch is to further understand the othered-subject by which the ideal is measured in these contemporary popularised discourses. This is of particular importance because, as I have previously mentioned, I contend the magical subject is only understood in terms of his/her relation to the active and forceful other.

**Case Outlines**

In Chapter Two, I pursue a manifestation of magic that relies on a long-standing sympathetic model. I examine a case where the magical philosophy that gives power to the representation becomes a neo-Platonic, ‘mind-over-matter’, construction of the ideal subject as an agentic self. I explore the work of talkshow host, self-help guru, advice writer and pop-culture icon, Dr Phil. Specifically, I focus on his book, *Self Matters: Creating Your Life From the Inside Out* (2003), a guide to understanding and instituting the ‘authentic self’. *Self Matters* offers a platform for the concentrated
gathering of ideas upon which Dr Phil bases his understanding of the agentic self. This self, following in the footsteps of Descartes and Plato, is defined as a universally unique, spiritual, mind-based and discrete entity.

Sprung from Descartes’ enduring statement, ‘I think therefore I am’ (1968, 53), Cartesian philosophy revolves around the argument ‘that thought is the essence of the ego, a claim that can be taken to mean that neither the body nor relations with others constitute a person in any significant way’ (Wilkin 2008, 101). Descartes believed the body was not the origin of the mind. He also identified the mind-self as a pre-determined entity pre-existing the corporeal. Descartes theory of innatism posits that each person is born with a pre-existing knowledge of certain essential truths such as the knowledge of God. He wrote, ‘the perception of the infinite is somehow prior in me to the perception of myself’ (2006, 25).

Descartes’ self is hierarchical and bifurcated through the process of elevating the insubstantial mind which is distinct and independent from the corporeal vessel of the body. He wrote, ‘thought exists; it alone cannot be separated from me’ (2006, 15). It is also a self that heralds Individualist fulfilment over a collective stability. I argue these sentiments and theories of the self also run through the sympathy of Dr Phil.

As an antithesis to Dr Phil’s perception of an idealised self, I will examine the collective sympathetic force of the mass social other as a pollutant which threatens the boundaries of the individual self. This will involve a discussion of the collective force as a kind of possession, in Barbara Creed’s terms a transgressed body boundary, resulting in an abject body (1992, 32). Creed writes, ‘the very act of
constituting another is ultimately a refusal to recognise something about the self’ (37). In the work of Dr Phil, the sympathetic ability of the other to imprint upon the discrete self is realised as a potential glitch in universal individuality and the Individualist must raise a fortress against this threat. As such, this first case-study will reveal a contained magical production or perhaps even a misapplied magical theory, through Dr Phil’s aversion to and expulsion of some of the complex multiplicities inherent in the structure of the magical subject.

In Chapter Three, I move to a case of magic that is undeniably modern in its make-up, resulting from the new pathways to subject formation created by a mediatised world. It is also a case of magical production which contrasts Dr Phil’s discrete and controlled sympathy. It is a sympathy based on chaotic and uncontained multiplicities which result in an unstable and ambivalent subjecthood that excites both desire and disgust. I explore the sympathetic presence of the celebrity, Michael Jackson. I intend to argue that Michael Jackson is constructed by the spectacular mass sympathetic practices of global image production and consumption.

Using the work of Alfred Gell (1998) and his anthropological examination of the art object as a subject of significant social relations, I shall argue that Jackson is a human artwork who is used as a tool to construct, maintain and challenge existing cultural orders of identity. In particular, I am interested in identifying Jackson as epitomising a culture of self-distribution and re-construction through analysing his overwhelming sympathetic presence within a global and heterogeneous audience. I will investigate Jackson as a ‘distributed person’, a person ‘distributed in the milieu, beyond the body-boundary’ (Gell, 104). I argue that the representations of Jackson
act as ‘exuviae’ (Gell, 103) or sympathetic vessels that transport parts of Jackson to a dispersed and consuming audience. Furthermore, it is this process of shedding, transportation and individual subjective consumption which serves to identify Jackson as a multiplicity, a controversial and indeterminate figure.

In addition, I shall explore Jackson’s unstable subjecthood (and the unstable reactions to him) via a discussion of Deleuze and Guattari’s concept of ‘becoming’ (1988). Jackson epitomises Deleuze and Guattari’s subject of becoming who exists as a fluid identity, sharing in elements of existing molar-identities, but always remaining ‘in-between’ (293). While Dr Phil’s modern magic reveals a claustrophobic containment, Jackson’s becomes frightening as a result of representation and interconnection without delineation or cohesion. Jackson reveals our obsession with the magical act and our fear that its limits may be unapproachable.

In Chapter Four, I move to a study of sympathy that more fully realises the embodied foundations of magic I endeavour to affirm. I transition from sympathies based on mental representations and image production to a sympathy that uses the physical body as its source of power. I investigate subjects who exist as bodily glitches, exiled in pathological Wonderlands. I will argue neuropsychologist Dr Oliver Sacks’ famous medical biography, *Awakenings* (1999), is an exploration of embodied sympathies and incongruities. *Awakenings* is a record of Sacks’ experience as a physician at a hospital for the chronically ill, where he treated a group of people suffering from a little known and incurable illness, post-encephalitic Parkinsonism. In his book, Sacks focuses on his patients’ unpredictable responses to the drug L-
DOPA. Ultimately, what Sacks reveals is a group of people who struggle to maintain a consistent sense of embodied sympathy. They make apparent our reliance on magical cohesion, our need to live in synchrony within ourselves and with the other objects and subjects of our environment. For Sacks, the physiological status and environmental factors of the patients are fundamental determinants of the self. For example, he refers to one patient, Rolando P., who always suffered from depression on his return to the hospital after visiting his family. Rolando P. exclaimed, ‘What a goddamn relief to get out of this place! […] I’ve been shut up in places since the day I was born […] I’ve been shut up in illness since the day I was born (125).

I will address the bodily and territorial nature of Sacks’ model of sympathy by using Lewis Carroll’s *Alice’s Adventures in Wonderland* and *Through the Looking-Glass* (1998) as guides. As Alice is subjected to the nonsense of Wonderland, bombarded with an alternative logic and a fluid and unpredictable body, she asks, ‘Who in the world am I?’ (18). Carroll critic, Nina Auerbach, writes that in Alice’s Adventures the little girl ‘turns her eyes inwards from the beginning, sensing that the mystery of her surroundings is the mystery of her identity’ (1992, 336). According to Auerbach, Alice ‘carries the threatening kingdom of Wonderland within her’ writing:

Alice becomes ‘curiouser and curiouser’ as she moves more deeply into Wonderland; she is both the croquet game without rules and its violent arbiter, the Queen of Hearts. The sea that almost drowns her is composed of her own tears, and the dream that nearly obliterates her is composed of fragments of her own personality.

(336-37)
Auerbach describes the Wonderland experience as a metaphorical exploration of Alice’s own dynamic and chaotic identity and body. Likewise, in Chapter Four, I shall examine subjects as bodies in chaos, understood in terms of alien territories. These unfamiliar lands of the post-encephalitic identities are not governed by singular and static laws. The post-encephalitic patients, like Michael Jackson, are faced with multiplicities and fluidity, which threaten their sense of being stable subjects. However, unlike Jackson, these multiplicities are not due to an external distribution, a peeling off of skins which are absorbed and transformed by consumers – a consequence of limitless sympathetic representations and distribution. In *Awakenings*, the multiplicities arise as a result of internal tensions between the patient, illness and drug treatments. As such, they are consumed by their internal or personal struggles to maintain stable subjecthoods, having been cut-off from the world around them, displaced in Wonderlands. The patients are also understood as isolated subjects, not in Dr Phil’s terms, where the boundaries of the ideal self are clearly delineated and fortified; but in terms of a sympathetic perversion wrought by illness, making them ultimately incompatible with the world around them. Sacks’ patients are subjected to their own worlds of logic and experience askew. As a response to this displacement, Sacks seeks to uncover forms of sympathetic realisation and unity between the patients and the normal world, hoping to bring the patients back out of the realm of the glitch. Sacks and his patients implement magic to deal with the chaos of the patients’ multiplicities and their indeterminable Parkinsonian natures.
A study of Sacks’ work will confirm my contention that the most complex and effective forms of modern magic rely on a bodily logic and force. I wish to encourage magical manifestations that are territorial, where magical subjects are determined by the interplay of subjects and objects in space and time. I argue that this kind of magical cohesion and effective sympathetic embodiment offers the greatest insight into the contemporary world’s complex efforts at easing chaos and escaping the void of the unknown.

In Chapter Five, I move to what I believe is the most multifaceted and fully realised construct of modern magic. I continue my investigation of medicalised corporeality as an arena for sympathetic understanding and practice through the examination of neurophysiologist Dr Jonathan Cole’s medical biography, *Pride and a Daily Marathon* (1995). In this medical narrative, Cole follows the life experiences of Ian Waterman. The sensory nerves in Waterman’s skin were destroyed as were the deeper muscle, tendon and joint sensory nerves which transmit information about the position and movements of the limbs. Essentially, he lost touch sensation and proprioceptive function from the neck down. Cole investigates Waterman’s extraordinary sympathetic ingenuity in the face of an irrevocable sympathetic breakdown. He identifies the sensate body as the foundation for any feeling of sympathetic subjecthood and endeavours to understand the ramifications when two of the sensory ‘entryways’ or ‘portals’ to subject creation are severed.

I will argue that Cole theorises Waterman’s sympathetic construction and losses in terms of complicated systems of sympathetic ‘flow’ (as termed by Mihaly Csikszentmihalyi 2002). Cole understands the foundation of the subject in terms of a
ceaseless flow of bodily transmissions and movement writing, ‘in even the smallest movement we make hundreds of unconscious postural adjustments to keep ourselves in the best position’ (58). I shall contend that Waterman also views his own subjecthood as being dependent on the sympathetic flow of bodily movement (sensorial, motoric, and affective). Consequently, when he is denied the flow of touch and proprioception he relentlessly pursues new pathways of flow in order to bring back movement and self.

I believe Cole’s study also forces one to question the sources and actions of the embodied affective subject. With Waterman unable to feel the pressure, texture, weight and movements of other bodies as they connect with his body, one must wonder whether he is denied a primary source of affective ignition and experience. Is Waterman affectively isolated by his neurological dysfunction? To aid in this discussion, I will use the work of Georges Bataille and his study of eroticism as an essential passion in the human experience (1984). Bataille is not a foreigner to the practice and theory of sympathetic magic, having produced a study on ‘primitive’ magic in his work Prehistoric Paintings: Lascaux or the Birth of Art (1995). I maintain that his study of death and sensuality also includes complex sympathetic sentiments, which also embrace the glitch. In his study he writes, ‘[e]roticism involves a breaking down of established patterns […] of the regulated social order basic to our discontinuous mode of existence’ (18). In this statement, he blends together both sympathy, in terms of the dissolution of the discontinuous being, and the glitch, in terms of a breakdown in the social order. His work provides an intriguing source for studying this last case-study. In particular, it will allow for a
discussion of the glitch as an essential disruption of individual sympathy and a tool for transcending the self; as well as providing a counterpoint to Dr Phil’s affirmation of the benefits of transcending the other.

A discussion of Cole’s work and Waterman’s life shall make apparent the complex, dynamic, mimetic, and affective character of what I believe to be the most potent case of modern magic in this dissertation. Waterman is able to re-construct his life by striving for and embracing sympathy. Furthermore, his struggles to re-connect as a sympathetic being realise the significance of the glitch, not just as a source for the disruption and dissolution of a cohesive subjecthood, but as an affectively charged ignition and/or pathway that can catapult the subject into a new and unpredictable connected sympathetic experience.

**Sympathetic Knowledge**

In constructing a theory of modern magic, the anthropological studies of magic which first introduced me to the subject are invaluable sources, particularly in light of the fact that there is a distinct lack of this kind of magical theory outside of the field of anthropology. Frazer’s work, as already noted, is of primary significance. This is in spite of the fact that Frazer concluded that these magical theories were founded on a misapplication of ideas (12). He was in agreement with his predecessor, E. B. Tylor, who believed magic ‘belongs in its main principle to the lowest known stages of civilisation, and the lower races’ (1958, 112). Philosopher R. G. Collingwood notes, the term magic still continues to function as a vague ‘term of abuse’, without fixed meaning, which is used to denote the practices of ‘uncivilised’ or ‘uneducated’ peoples (1958, 57). However, I shall argue that magic is not ‘hocus-
pocus’, a theoretical foundation based upon irrational links and deservedly dismissed by dominating bio-medical discourse. It is important sympathetic theory and practice. I shall argue that sympathetic magic, in its various manifestations, is a fundamental source in the contemporary construction and maintenance of the subject.

Frazer’s work provides three main principles, which I have incorporated into my understanding of modern magic. The first, which I have already outlined, is the primary ability of representations to affect the ‘nature’ of things. The second is his realisation of interconnectivity as the pathway for magical production and the third, is his construction of an embodied understanding of sympathy. In Frazer’s magical structure there are strands that connect all elements of being, inanimate and animate, physical and abstract; positioning the magical subject as inexorably within networks of bodies. These strands could equally be understood as membranes. A membrane is, ‘a thin, pliable layer of tissue covering surfaces or separating or connecting regions, structures, or organs of an animal or a plant’ (OED). It is also a term used by Frazer and Taussig. Taussig cites an example of magical theory referenced by Frazer in relation to the production of the photographic image. Taussig writes, ‘he explained the phenomenon of the photographic image as being the result of membranes lifting off the original and being transported through the air to be captured by the lens and photographic plate’ (1993, 21). Taussig is fascinated by this reference to membranes because it combines the laws of ‘contact’ and ‘copy’ in Frazer’s theories of magic, where there is a ‘bodily involvement of the perceiver in the image’ (21). Taussig writes, there is ‘a palpable, sensuous, connection between the very body of the perceiver and the perceived’ (21). The word, membrane, refers to living tissue that separates and connects other living tissues. It encourages the sympathetic
understanding of the body, the living organism, as the centre of power. Connected bodies (and I use bodies in the broadest sense of the term, referring to both the concrete and abstract), are laced together with fleshy membranes via the process of representation and contact. And it is this grotesque and glorious representation of interconnectedness, which I find important in Frazer’s work despite its critics (Malinowski 1992, Mauss 1972, Taussig 1993, Radin 1957). This idea of the embodied representation will be addressed further, in later discussions of Alfred Gell’s notion of ‘exuviae’.

In addition to Frazer’s work, various post-Frazerian descendents and critics have been instrumental sources in building my understanding of magic. Anthropologist Bronislaw Malinowski has identified magic as the need to provide familiarity to experience and consequently faith in the ability to overcome, endure and survive the seemingly uncontrollable aspects of life. Malinowski writes that ‘religion and magic are ways men must have being men, to make the world acceptable, manageable, and right’ (1992, 10). Likewise, my modern magicians implement magic to offer meaning in place of the cavities in our knowledge of the self.

Alfred Gell has used the work of Frazer (and other anthropology predecessors) to produce a sympathetic understanding of the social artefact – the artefact that is manufactured not for aesthetic reasons, but to function as a tool and participant in social relations (1998). His work provides innovative insights into the relationships between the subjects and objects of magic. According to anthropologist Nicholas Thomas, Gell is concerned with how artefacts occupy space within the processes of society. Thomas notes that Gell suggests art is about ‘doing’, and understands
artefacts ‘simply as material entities which motivate inferences, responses or interpretations’ (1998, ix). What is particularly interesting is that Gell unites subjects and objects, allowing them to occupy the same magical space. He writes:

In fact anything whatsoever could, conceivably, be an art object from the anthropological point of view, including living persons, because the anthropological theory of art (which we can roughly define as the ‘social relations in the vicinity of objects mediating social agency’) merges seamlessly with the social anthropology of persons and their bodies.

(7)

I hope to further this discussion of the human subject as art object. I assert the magical subject is also always an object, in some sense, created and acted upon by the other. The subjects in this dissertation often function in a similar manner to the magical object, and thus they themselves become social artefacts – tools for a broader magical production.

Gell also clarifies the significance of representations. He believes that images are parts of things (105-06). They are the parts that have left the object of the body creating representations that have a sympathetic connection with the original body or prototype. Gell refers to Lucretius’ poetic writings which articulate his understanding of nature, and in particular the nature of mind and body. Lucretius wrote:

There exist what we call images (Imagines and simulacra, or effigiae) of things; which, like films drawn from the outermost surface of things, flit about hither and thither through the air;

[...] I say, therefore, that resemblances and thin shapes of things
are thrown off from their outer surface, which are to be called as it were their films or bark, because the image bears a look and shape like the body of that from which it is shed to go in its way.

(1966, 251)

Lucretius goes on to cite examples of shedding ‘films’, such as when ‘wood throws off smoke and fire heat; [...] and when calves at birth throw off the caul from their outermost surface, and also when the slippery serpent casts off his vesture amongst the thorns’ (251-253). Undoubtedly, Gell was drawn to Lucretius’ work because he creates a potent sympathetic image of interconnection, where one substance (e.g. smoke) becomes a peeled away but ever-linked element of another (wood). Objects or substances which may seem stagnant in form and position may multiply, disperse and spread across space. Gell applies this theory to the role and substance of representations. According to Gell, images are exuviae, and they allow for the possible proliferation of subjects or ‘distributed personhood’. The concept of distributed personhood will be instrumental in the discussion of Michael Jackson, in particular, and his presence as a globally recognised accumulation of images. The concept of the image as exuviae is also a useful tool to aid in the conceptualisation of the physical presence and force of the representational act in modern magic.

I have also found Gell valuable because he affirms intent as a driving force in magical action and addresses the relationship between cause and effect in sympathetic processes. Gell criticizes Frazer’s dismissal of magical theories as misdirected cause and effect structures. He believes we need to re-think the concept of ‘cause’ and writes, ‘[m]agic is possible because intentions cause events to happen in the vicinity of agents’ (101). Or in more simplified terms, Gell realises the magical
act to be a process of acting out one’s desire and focusing intent. Thus for Gell, a magical act such as creating a representation of an intended victim and then destroying that image with the intent of destroying the victim, is a performance of sympathy. One becomes focused on the enemy and confirms the desire to destroy that enemy (in whatever form the destruction takes, whether it means losing a battle, the loss of prestige or wealth etc) through acting out the destruction. Thus one’s resolve is confirmed and the movement towards the destruction of one’s enemy has at least begun. It is a mimetic and affective sympathetic ‘acting out’, a sympathy between intent and action. The relationship between ‘cause and effect’ is an integral component of this dissertation. Each magician constructs causal structures resulting in pathways to both the idealised subject and its other. For Dr Phil, sympathy is a linear cause and effect structure, where subjects’ thoughts are translated into literal realities. In the case of Michael Jackson, his position as ambivalent icon is dependent on a rhizomatic becoming, where there are multiple causes and unpredictable results. A similar sense of multiplicity and unpredictability is present in the othering of the Awakenings patients, which Sacks has sought to address via a discussion of chaos theory writing, chaos ‘refers to the behaviour of a system – biological, physical, or mathematical – with extreme sensitivity to small […] changes in the initial condition of the system’ (355). According to Sacks, chaos refers to non-linear, but also non-random, complex systems, which he saw mirrored in his patients’ reactions when they were started on L-DOPA (356-57). Cole and Waterman find themselves with an unknown cause and an irreversible result with the loss of touch and proprioceptive function. Thus, Waterman’s search for a sense of sympathetic re-embodiment involves starting from an unfamiliar point in a structure of cause and effect. I will
argue that this is not a futile position for a complex sympathetic subject. There are always new potentialities for the development of the subject even if it involves travelling down unfamiliar paths.

Gell’s work also embraces the disruption, the glitch (which will be defined in detail below), that I argue is always present within sympathetic worlds. One example he addresses is the vandalising of Diego Velazquez’ painting, ‘The Rokeby Venus’. The painting was slashed by Mary Richardson, in 1914. Richardson was protesting against the arrest and sufferings of a fellow suffragette, Emmeline Pankhurst (64). For Gell, the transformation of the artefact makes the image more powerful, ‘because the image bears traces which testify directly to […] the violence women endure’ (64). When Richardson defaced the image, she endowed it ‘with a life it never possessed before by “killing” it and turning it into a beautiful corpse’ (64).

Throughout my studies, I shall refer to disruptive sympathetic subjects as sharing a particular bond with popular constructions of the dead, dying and undead. As previously noted, part of my aim in exploring the sympathetic magic of Dr Phil, Jackson, Sacks, Cole and Waterman is to reveal the shadow-self of the sympathetic ideal. The glitches which appear could also be thought of as beautiful corpses imbued with special significance when they are marked by the violent power of sympathy. In addition, I have chosen to address the dead, dying and undead in my discussion of modern magic in order to show that the void, I have previously referred to, which is covered or bordered by magic is often the void created by the unknown of death. Moreover, the subject and status of ‘death’ is always present in sympathetic structures of life.
The work of Taussig is also an important resource in the construction of a theory of modern magic. As I have already mentioned, Taussig expands his view of sympathetic magic, focusing on the mimetic faculty that drives the sympathetic act. According to Taussig, the mimetic faculty is ‘the nature that culture uses to create second nature, the faculty to copy, imitate, make models, explore differences, yield into and become Other’ (1993, xiii). He is fascinated by the ability of the copy to draw on the power of the original, whereby it may even assume that character and power (xiii). This ability to flow into the other, and for the other, in turn, to become part-self is a critical element in the sympathy discussed here. For example, in my analysis of Sacks’ post-encephalitic patients, I refer to their attempts to partake of the flow of the ‘healthy’ other. They desire to be a part of the healthy world and to embody the movements and states of its bodies. Sacks believes that some of the patients attempt this unity through such sympathetic and imitative acts as being in close contact with healthy subjects (such as hospital staff members) and walking and dancing as they do, sharing in their kinaesthetic melodies (61). Thus, they become one of Gell’s living artefacts, incorporating the exuviae of the healthy body.

Taussig’s work is also beneficial because he realises the ‘meaningful’ substance of the sympathetic act. By analysing mimesis and alterity, he finds himself in the strange position of coming to the conclusion that everything is made-up, yet realising both he and all those around him force themselves (ourselves) to forget. He believes the mimetic faculty is instrumental in this continuation and persistence of life and meaning making in the absence of any real meaning. As Taussig notes, ‘mimesis sutures the real to the really made up and no society exists otherwise’ (69). When the
copy is given the power of the original, as with the image of Jackson, it gives meaning to being and one loses the sense of the arbitrary or disconnected elements of the constructionist view of being.

I have also drawn inspiration from Taussig’s understanding of the shadow-side of sympathy in the form of the taboo. He writes that taboos hold back the violence (31). According to Taussig, taboos separate the violence of the scientific from the ‘theatre of profane and everyday operations’ (32). He asserts that the scientific hand and/or eye transgresses the taboo surrounding discrete and fortified individual bodies. The scientist invades, ‘the surgeon’s hand entering the body and cautiously feeling its way around the organs’ (31). Taboos provide fortresses against the violation, dissection and destruction of the individual and social body in the profane world. Frazer also acknowledged the presence and even necessity of the taboo in sympathetic practice, believing that magic comprises prohibitions, and it is the taboo that regulates culture (25). Taboo subjects violate the borders and become secret-selves, or glitches, of a magical culture. In the following section, I explicate my understanding of the glitch and its presence within sympathy. Here it is suffice to say that the subjects of the glitch, in this dissertation, function as taboos or as violations of taboos. They are warnings against the disintegration of the subject. As Taussig notes, sympathy is about taking ‘us out of ourselves’ and embracing the other (38). A consequence of this merging is the danger of collision and repulsion.

In addition to anthropological studies, I have drawn on works which are not predominantly anthropological in nature but are clearly inspired by the concept of sympathy, even unconsciously. They are used to explicate my understanding of
modern magical constructs and to confirm its dominating presence in various contemporary fields. This has resulted in a necessary theoretical collage, as the net for appropriate sources must be cast wide when there is not a delineated field of cultural studies of sympathy.

Neurologist Antonio Damasio’s anti-Cartesianist study of a body sympathy and embodied self is a useful guide to understanding the modern medicalised sympathetic subject. His work functions well as a counterpoint to the Cartesian sympathetic model presented by Dr Phil and will aid in my affirmation of physiological forms of sympathy. Damasio writes, ‘[t]he soul breathes through the body, and suffering, whether it starts in the skin or in a mental image, happens in the flesh’ (2000, xvii). He places the soul, the mind, the self as elements which arise from and are dependent upon the corporeal. Damasio views Descartes’ ultimate error as the separation of the mind and body. He writes:

This is Descartes’ error: the abyssal separation between body and mind, between the sizable, dimensioned, mechanically operated, infinitely divisible body stuff, on the one hand, and the unsizable, undimensioned, un-pushpullable, nondivisible mind stuff; the suggestion that reasoning, and moral judgment, and the suffering that comes from physical pain or emotional upheaval might exist separately from the body.

(25)

According to Damasio, we must ‘move the spirit from its nowhere pedestal to a somewhere place, while preserving its dignity and importance; to recognize its humble origin and vulnerability, yet still call upon its guidance’ (252). This
dissertation follows Damasio’s path and begins with a segregated and transcendent self, postulated by Dr Phil as the ideal, and slowly brings it down into the complex, interconnected and often messy realms of the lived experience identified in the works of Oliver Sacks and Jonathan Cole.

Another source of contemporary sympathetic theory comes from Mihaly Csikszentmihalyi’s study of optimal experience, or flow, in which he offers insight into the art, process and state of sympathy (2002). Like Gell, Csikszentmihalyi presents a view of the sympathetic act as intentional force. He writes:

> Intentions arise in consciousness whenever a person is aware of desiring something or wanting to accomplish something. Intentions are also bits of information, shaped either by biological needs or by internalized social goals. They act as magnetic fields, moving attention toward some objects and away from others.

(27)

Csikszentmihalyi describes a sympathetic understanding of flow where the direction of consciousnesses is a force which brings the world to the subject and also brings the subject’s intentions to act in the world closer to realisation. His work shall be most beneficial in analysing the post-encephalitic patients and Waterman. The post-encephalitic patients were denied the flow of normal cognitive, affective and motor activity; while Waterman is a man who has permanently lost the flow of automatic bodily knowledge and movement.
Flow is an essential concept for understanding the play of forces between objects and subjects in magical systems and structures. In particular, it will be used to argue that systems, such as the one presented by Sacks, that embrace multi-directionality allow for greater magical effect than models like Dr Phil’s which attempt to restrain flow.

I am also interested in studies that approach the relationship between sympathetic knowledge and the unknown realised at the moment of the glitch. Deleuze and Guattari’s studies of dynamic and unpredictable structures bare a strong resemblance to my understanding of magic and the glitch. These theorists present complex constructions of sympathetic structures in their study of the ‘rhizome’, the ‘assemblage’ and ‘becoming’ (1988). They explore processes of contact and growth, where bodies and subjects collide, merge, replicate and fragment.

Theories which focus on affect and contagion are also valuable sources. The philosopher R. G. Collingwood has explicitly identified magic as a tool for social cohesion and affect contagion (1958). Collingwood uses the example of war dances. Where Frazer would see a fruitless exercise, which has no bearing on the outcome of the forthcoming battle, Collingwood sees an act of communal affect contagion, the building up and spreading of strength, power and hope that the warriors will be successful (66). According to Collingwood, at least part of the aim in magic is to intensify and focus emotions so they may be directed to tasks in practical life (66). Collingwood believes a community partaking in a war-dance is stilling its fears and strengthening their resolve and courage in order to direct those emotions effectively in battle. Collingwood recognises the affective and communal role of magic.
Various fields and theories will come together in this dissertation to create a new understanding of magic, or at least to explicate a new realisation of the presence of magic within these discourses. By juxtaposing the anthropological with other discourses such as those pertaining to psychology, philosophy and neurology, I hope to uncover pertinent sympathetic links in popular modern knowledge.

**The Magicians**

As previously noted, my aim is not just to highlight the sympathetic presence in the theories, work and actions of Dr Phil, Jackson, Sacks, Cole and Waterman, but to identify how these figures function as modern magicians. I am interested in how anthropological theories on representation, contact and contagion can provide a foundation for understanding contemporary western ‘civilised’ magicians’ attempts at mapping meaning and the subject (the term ‘map’ is taken from Steve Pile and Nigel Thrift’s study in ‘mapping the subject’ which will be discussed in further detail later (1995)). I use the term ‘magician’ to denote expertise and mastery with respect to sympathetic knowledge and practice. My contention is that magical systems are systems of power and the magicians who govern these systems are enforcers of the ‘truths’ of subjectionhood.

The magicians addressed in this dissertation are figures of authority. They are subjects of political significance and force. As Malinowski notes, magic tends to be specialised and exclusive (46). In primitive clans, this power is often kept within a single family (46). Those select few who carry the ‘mantle’ of magician are sacred bodies and contain essential cultural wisdom. According to sociologist and anthropologist Marcel Mauss, the magician is a locus for concentrated magical force,
‘his words, his gestures, his glances, even his thoughts are forces in themselves’ (1972, 33). And Frazer writes, the magician possesses an ‘unusually high degree’ of sympathetic knowledge. Frazer purports, that magical cultures believe that a magician’s ‘whole being, body and soul, is so delicately attuned to the harmony of the world that a touch of his hand or a turn of his head may send a thrill vibrating through the universal framework of things’ (79-80). Frazer contends that the magician uses these powers to maintain the stability of his/her community such as ensuring the food supply and securing his/her own position of power (80). The magicians, as they are defined in this dissertation, are subjects/selves/vessels composed of magical power, thus their acts and ideas determine the structure and boundaries of magic and the subjects shaped by magic. As masters of their particular domains, they identify and maintain the borders of their communities.

However, as previously mentioned, in popular western culture the magician is commonly a particular kind of entertainer or fictional character. Entertainment magician Peter Leonard believes magic, ‘is an entertaining mystery, or a mysterious entertainment’ (cited in Reed 1978, 13). Commonly, the magician is a mystifying artiste, a master of the inexplicable. In this dissertation, the magicians also broach the inexplicable, opening up pathways unseen by others. However, I do not use the term to denote any kind of trickery or the fantasy of illusion. These magicians are masters of sympathy. As will be made clear they, like Frazer’s magicians, are the brethren of Kings, Chieftains and Priests. Frazer contends:

In many lands and many races magic has claimed to control the great forces of nature for the good of man. If that has been so, the practitioners of the art must necessarily be personages of
importance and influence in any society which puts faith in their extravagant pretensions, and it would be no matter for surprise if, by virtue of the reputation which they enjoy and of the awe which they inspire, some of them should attain to the highest position of authority over their credulous fellows. In point of fact magicians appear to have often developed into chiefs and kings.

(111)

Like Frazer, I will examine magicians who are the custodians of knowledge, makers of law, keepers of peace, and givers of life. In my analysis of Dr Phil, I endeavour to uncover a neo-Cartesian magician who restores a stable and pre-existing perfection through advocating the mastery of mental representations. For Dr Phil the mind is the sympathetic spark for creating a fulfilling life. With respect to Michael Jackson, I intend to analyse him as god-like in his media-musical representations as the ‘King of Pop’. However, he is a troubled or disintegrated god who has suffered at the hands of his audience through their interpretations of his representations. He is a dangerous magical vessel, a star that headed for a supernova explosion, mesmerising us and forcing us to cower at the release of its power. With the work of Oliver Sacks, I move to a magician who is intrigued by the ‘otherworlds’ of neuropsychologically lost souls. Sacks seeks out an array of forces which connect this world and the world(s) of his patients, both through medically quantifiable and alternative means. And finally, I shall explore Cole and Waterman as examples of public and private magicians, respectively. Cole is a public magician, a person of authority whose knowledge of the systems of life and human perseverance is used for the betterment
of his community. Waterman is a private magician who has sought corporeal sympathy to ensure his own personal survival after experiencing a sympathetic disconnection.

**Gendered Magic**

It must be noted that upon gathering my case-studies, it became very apparent that I had brought together a collection of contemporary western male magicians. This patriarchal line-up is most definitely deserving of further examination in terms of the roles gender and sexuality play in contemporary magical discourses. As shall be argued in this thesis, sympathy is a tool for meaning making, for preserving subjects and life in the face of uncontrollable obstacles. As such, it will necessarily encompass the struggles of the peoples who use it, including the continuing debates surrounding gender and sexuality.

Gender has been realised as a fundamental tool for classifying the self and other. The importance of gender discourse as a powerful cultural and political structure has been realised amongst feminists (and others) who have endeavoured to question and debate theories on ‘gender’, pushing the issue into the public domain and producing a great deal of change in gender relations and identities. In the twentieth-century these changes included women gaining the right to vote and taking on a ‘greater and less unequal share of waged labour’; women also commanded an increased freedom to control reproduction and began placing a greater focus on the recreational experience of sexuality; and genders outside of the male/female dichotomy gained greater visibility and acceptance (Sowerwine and Grimshaw 2004, 586). Of course, the masculine heteronormative hierarchy of gender still remains a dominating
structure and feminist theorists such as Catherine Harnois, who has studied contemporary feminist movements, realise the continuing and ever-present struggle for gender equality in contemporary society (2008). As Harnois points out, present and past generations of feminists agree that women, and other gender minorities, continue to be treated less fairly by society (130).

Part of the contemporary western examination of gender has included investigations into how contemporary spaces and cultures shape the gendered body. Petra Doan, has explored the tyranny of gendered spaces, and argues that ‘those who transgress gender norms experience a tyranny of gender that shapes nearly every aspect of their public and private lives’ (2010, 635). Doan investigates how minority bodies, particularly transgendered bodies, are shaped through public and private performances and spaces, as the individuals move in and with spaces, objects and people. As she notes ‘gender is fluid and performative […] and transcends the boundary of the human body’ (638). For those who are oppressed, who live outside the gender norm, gendered spaces make them vulnerable to assault and/or apply overwhelming pressure to conform to the norm.

Doan’s study is of particular significance here because it identifies gender as a primary way in which we use our bodies to display and perform our self-constructions and enforce cultural identities. A study of sympathy is also a study of the co-dependent relationship between, and the fluid constitution of, bodies and spaces. Consequently, the tyranny wrought by particular dominating bodies and spaces would be of great significance. Studies like Doan’s force one to consider whether magicians who are not identified as white male heteronormative subjects can
hold the same positions of power as their dominating and powerful counterparts, or whether ‘other’ gendered sympathies are treated as kinds of antipathetic glitches that need to be ‘re-wired’ or expelled from the sympathetic systems they inhabit.

In pursuing a feminist critique of sympathetic magic one might address the issue of whether gender minorities run the risk of being accused of ‘witchcraft’, becoming taboo subjects of magic, when exerting their ‘othered’ identities. Do ‘other’ gendered magicians remind us that the western world’s seventeenth-century Puritan ancestors are not so distant? In Elizabeth Reis’ study of Puritan society and the Salem witch trials, she notes ‘womanhood and witchcraft were inextricably linked both to each other and to Puritan interpretations of evil and sin’ (2003, 11). Reis noted that it was most often women who were accused of and who confessed to witchcraft because it was the female body that was identified as impure and frail, open to the corruption of Satan. The female’s body open to sympathetic influence was considered to be a ripe and easy object to be acted upon in a magical manner. This image is in contradistinction to the forceful image of the magician as cultural sympathetic leader and a centre of flow as it is discussed in this thesis. While a key element of this thesis involves positioning the magician as an object in a larger system of magical forces (and consequently acted upon by other bodies), the magician is also always a subject, an instigator, an originating source of magical flow. Therefore, a feminist study should consider how the magical female (and other gender minorities) body is construed in contemporary society, whether it is still identified as being sympathetically weaker and open to corruption. Furthermore, if this is indeed the case one must pursue how the female magician must present herself in an ‘altered’ manner to avoid being identified as sullied or a threat and marked as ‘witch’. If one
were to investigate sympathy and gender in the popular field of therapeutic television, one might examine how Oprah Winfrey has positioned herself as the ‘Queen of Daytime talkshows’. One might explore how she has constructed herself differently to Dr Phil and whether she would have enjoyed the same success if she had taken Dr Phil’s ‘hard-edge’ and authoritarian approach. Does the female magician need to present herself as a less overwhelming figure, less dangerous? Or perhaps, a study of the celebrity might involve an analysis of ‘feminising’ aspects of the celebrity makeover culture and what role these aspects play in creating the ambivalent famous magician.

Ultimately however, investigations such as those briefly listed above would constitute an entirely distinct research project, perhaps the next step in the exploration of the modern magical world. The main aim of this project is not a feminist critique of a previously established study of cultural sympathies; rather it is to identify the, hitherto largely unacknowledged, strong presence of sympathetic magic in the contemporary western world via the exploration of selected popular magical manifestations, examining how sympathetic structures have been appropriated by contemporary practices of self-creation. Nevertheless, I will make note of the important cultural and political presence of gender in the evolution of sympathetic practice at certain key points in the project. Following, I refer to the paternalistic tradition of medical discourse and in Chapter Two I identify some gender issues that figure in sympathetic structures that support the patriarchal ideal of the agentic self. Also, in Chapter Three, I identify the possibility of Michael Jackson becoming-minorititarian, in part through his becoming-woman and becoming-
androgynous. In endeavouring to broach issues of gender and sexuality in these cases, I hope to provide a foundation for future localised and intimate studies of magic.

*Paternal Magic*

Dr Phil, Sacks and Cole assert their power as doctors and medical writers in a medicalised world. They are knowledge keepers, and part of what Medical and Philosophical Scholar, Michael H Kottow, describes as the paternalism or medical deontology that ‘has played a predominant role in medicine and still remains’ where the doctor dictates ‘what was beneficial, which clinical outcomes were possible and desirable, what to tell the patient and to which risks he/she could be submitted’ (2002, 82).

However, I do not insist that these magicians are unimpeachable figures. These doctors are controversial figures of wisdom, as academics and popular writers. For example, freak show manager Ward Hall informed Robert Bogdan, when Bogdan was researching freak shows, that academics, ‘authors and the news media’ are as exploitative as freak show managers, except managers pay the freaks (1990, 268). Medical and Academic writers use the anomalous as specimen in the desire to better understand the subject. Some of us comfort ourselves with our apparently altruistic reasoning of contemporary medical morality, where the studied specimen becomes the known and embraced subject. In the case of Sacks, Daniela Mergenthaler contends that he ‘behaves paternalistically as the wise doctor philosophicus who has the right and skill for all kinds of interpretation and narration’ (283). In part, this is true. The subjects in *Awakenings* are a voiceless community who are defined by
others (such as Sacks) for others (the readers of his books). Sacks acknowledges that he is creating the patients through his writing as much as transcribing their lives.

(371). He realises that he is a visitor in the worlds of his post-encephalitic patients, with limited access to their worlds and attempts to justify his presence through their approval and encouragement. He writes:

I hesitated very greatly in regard to the original publication of our patients’ ‘story’ and their lives. But they themselves encouraged me, and said to me from the first, ‘Tell our story – or it will never be known’.

(xxxxviii)

Without Sacks their stories would not have been told, for they were literally incapable of the task. These people had been forgotten because they suffered from a mysterious, rare and incurable illness. They showed no signs or hope of recovery, and many of them remained trapped in an illness which allowed them little ability for movement or communication.

Likewise, Cole seeks to confirm his respect for and approval from Waterman. The Preface to *Pride and a Daily Marathon* is provided by Waterman, in which he writes:

It has been a strange feeling looking back over past events so analytically with Jonathan Cole as he researched for the book. At first I was not keen on the prospect of such a searching exercise, but as time progressed I warmed to the idea. In fact I think some good has come out of it for me. First I feel that at last there is someone who really does understand the complexities of my condition. Secondly I have had to look
closely at myself: not only at the physical side of how I manage my disability and the tricks I use but, more important, my motivation, strengths and weaknesses. It has done much to help me understand myself and organise my thoughts.

(xv)

The Preface serves to show the reader that Cole respects the thoughts and words of Waterman, as they worked together, and he has received his approval in proceeding with his study. Cole has also helped Waterman gain some insight and wisdom as a consequence of this process. The magician, addressed in this dissertation, is an influential partisan voice, but it is often a voice needed or desired in place of confusion and/or silence.

Dr Phil’s medical advice is also tendentious because he is a ‘self-help’ authority. Dr Phil is a qualified clinical psychologist, but the ‘medical’ advice he dispenses that has brought him fame is in an arena where he counsels a general and generally ‘non-pathological’ audience. This is the arena of self-help. The field or genre of ‘self-help’ can be broadly described as information which is produced with the specific intent of instructing the individual on how to help himself/herself. A third party offering instruction on how the individual should help himself/herself has resulted in the genre being viewed as a paradoxical paradigm (McGee 2005, 11). The paradox of self-help is that this genre, which seems to connote a sense of self-empowerment, self-regulation and general independent agency, actually refers to a discourse which relies on strict hierarchical structures. In the case of Dr Phil, this hierarchy re-
enforces the paternalistic image of medical knowledge. Thus, Dr Phil is a contentious figure as a clear authority, a guru, in a field where individuals are instructed to be their own authority.

I find that Dr Phil, Sacks and Coles’ complicated and sympathetic medical spectacles are exemplary case-studies for this dissertation because they engage in the struggle for authorship of magical law. They are part of the process that creates the other and the self in a sympathetic chain of ‘myth’ and ‘truth’ that underlies cultural knowledge. Furthermore, as doctors, as leaders, they are primary carriers of the magic contagion.

**The Power of the Patient**

The role of the patient is of great significance in studies of medical discourse. Sociologist, Antonio Melechi, discusses the role of the patient and the expert/doctor in the biographies of illness, in particular schizophrenia (2003). He notes that some view a ‘sick’ person’s autobiography as questionable because he/she may not be able to see clearly from his/her place of illness. But many clinicians in history, including Freud, have seen that ‘[t]o understand the true nature of insanity, as opposed to its nosography its definition and place in the general scheme of mental infirmities – personal testimonies were vital’ (Melechi, 4). This complicated issue surrounding authorship and autonomy is similar to the previously mentioned issue of authority and meaning in Taussig’s understanding of sympathetic magic, where myth and truth collide.
Waterman’s position as both patient and magician signifies an important element of Cole’s manifestation of medical and academic magic. Waterman demands and is granted autonomy within this dominating contemporary medical hierarchy that often seeks to pacify the patient. His magical strength promotes my assertion that the final case-study in this dissertation offers the most complex, broad and dynamic model of sympathy, where all participants are realised as forceful agents.

_Power of Stars_

Jackson, Dr Phil, and to a lesser degree, Sacks, are also positioned as powerful subjects of a celebrity culture. They are part of a culturally significant and adored minority. In the contemporary western culture, celebrity discourse ‘shifts between humanizing the subject and at the same time exalting it’ (Langer 1998, 49). However, fascination and exaltation are not the only responses to celebrities; celebrities also incite ambivalent emotional reactions. Sofia Johansson, in her study of the penchant for tearing down celebrities, notes that celebrity discourse provides an important function namely to ‘stimulate debates about fundamental moral and social issues, contributing to create an experience of community’ (349). For example, she notes that discussing fidelity and David Beckham is easier than approaching politics as it is a familiar topic and person. When the world looks to celebrities for the definition of the ideal and other, the famous’ performances of subjecthood are consequential. Therefore, these magicians do not simply function as an eclectic gathering of masters of sympathy, but as figureheads for the continued cultural distribution of sympathetic faith.
The Glitch

Conceptualising the ‘glitch’ will be an important tool in my analysis of sympathy and the aforementioned magicians. The glitch provides a space for approaching the subject of magic as a participant in a larger network of subjects and objects. The glitch will function as a source for understanding the magical measurement of the self in terms of its other. The term ‘glitch’, as it is used here, is taken from George Alexander’s fictocritical piece, *Glitches or Falling off the Face of the Earth* (1992). Alexander describes the glitch as:

> Familiar, yet ungovernable, it sabotages the uniform flow of time. In the midst of the flow, there is an eddy, that momentary still-centre. A minute ago we were settled in our world, moving naturally and easily among things. Suddenly the world becomes alien, the earth drops, we’re up in the air like Wily E. Coyote, suspended over a precipice.

(44)

The glitch is a disruption of the ‘uniform flow’ of the subject. It ‘sabotages’ one’s sense of stability. It is ‘ungovernable’. It lends itself to theories of chaos and the unknown, perhaps leaving its origins and cure shrouded. The glitch can be explosive and unpredictable. In Jonathan Cole’s study of spinal chord injuries, he quotes one patient, Graham, who said:

> I do accept that my mind has changed. My total viewpoint and mental processes are different, and these cause a major change in personality. Everyone changes as they grow, age, and
experience life. But this is more like a landslip; everything changes in one go.

(2004, 35)

Cole’s patient is picturing the glitch, not simply as change or a dynamic understanding of subjecthood, but a violent and unpredictable shift.

Yet, as I shall argue, the glitch is also ‘familiar’. The form and process of the glitch are not completely foreign. There is something recognisable in its makeup. It may be the secret-self. The secret-self is a term used by Leslie Fiedler in his seminal study of carnival/sideshow freaks of the nineteenth and early twentieth centuries in his book, *Freaks: Myths and Images of the Secret Self* (1978). Fiedler notes that freaks are ‘oddities, malformations, abnormalities, anomalies, mutants, mistakes of nature, monsters, monstrosities, sports, “strange people”, “very strange people”, and *phenomènes*’ (16). According to Fiedler, the Freak ‘challenges the conventional boundaries between male and female, sexed and sexless, animal and human, large and small, self and other, and consequently between reality and illusion, experience and fantasy, fact and myth’ (24). These freaks, these subjects of the glitch, confront the borders of normality as they stand on the outside of its edges. They are secret or shadow selves that threaten familiar and comforting myths of the self. The glitch is present in my analyses as both a counter-element to and inherent force within sympathy. I shall argue the most multifaceted and affective magical structures embrace the inherent presence of the glitch in sympathy, and at times even embrace it as an alternate pathway in the mapping of the subject – albeit an unpredictable one.
Alexander discusses the glitch largely in terms of the breakdown of faciality. He refers to moments of de-stabilisation when one looks in the mirror or at a photograph and one feels ‘a little shock or surprise’ (44). According to Alexander, these moments shake the conviction that you are maintaining the self (the ‘You’) you desire to pass yourself off as ‘in the world of tables and chairs, of men and women’ (44). Alexander’s ‘self’ is a subject with agency, a subject in control of his/her own destiny and performances of identity. The glitch challenges this agency and brings to the foreground those elements which do not fit neatly into the projected self. Alexander realises the discrepancies between the internal and external, the individually defined and socially accepted subject. In addition, he is alluding to what I believe is the essential component of performance in the construction of the sympathetic subject. Each of these elements will be important aspects in my examination of subjects of the glitch. In Chapter Two, I will discuss Dr Phil’s contention that a struggle exists between an internal truth and externally performed fiction. In Chapter Three, I examine Jackson’s ultimately futile attempts at total self-authoring, endeavouring to combat the multiple retellings of his subjecthood. In Chapters Four and Five, I analyse subjects who embrace the internal and external, biological and social, physiological and psychological in their accommodation of embodied glitches. I contend the fully sympathetic subject is both agent and recipient – a necessary consequence of the multi-directional flow of sympathy.

**Technical Glitches**

In Alexander’s piece he also refers to the technical glitches that can arise in the production of photos including fogged lenses, emulsion problems, stray lines across
the image, short stools, and blinking eyes (48). He writes:

This glitch is something like a de-surfacing, like the drop-outs
on a proof sheet, strange photochemical portents. The face looks
like the face in a waterfall of eroded nitrates, a crashing
hieroglyphic. Premonitions of mortality, as though a dark angel
or shadow passed overhead; of immanent disaster. The grey
curtains in the photo-booth, as seemingly solid as stone
columns, recall those in an aeroplane with four engines out.

(48)

Again, the certainty of the face as a stable signifier of a desirable self is ‘eroded’. In
this instance, it is the act of re-production that is responsible for the discrepancy of
display. The glitch in the machine makes visible the ‘myth of photographic truth’
(Barthes 1982). The found photos, the throw-away images, are reminders of the
fallibility of the photographic process. The glitch in the machine reminding the
viewer that the photograph is not a mirror, but a representation, the end result
susceptible to chaos, including ‘eroding nitrates’. The technical production, re-
production and dissemination of the subject are important components in my study. I
will be discussing how technology and image production effect constructions of the
subject. This will be of primary significance in the analysis of Michael Jackson.

**The Glitch as Creativity**

In the above passage, Alexander is also making reference to the glitch as a signifier
of mortality. Its disruptive nature, disturbing perfection or flow, signals the
impermanence of life – once again leading back to the presence of death. However, I
shall propose the glitch is not simply a foreshadowing or an embrace of eventual
decline and death. It is also represents moments of novelty and re-creation.

Alexander refers to one of his favourite books, *Found Photos* (1981), by Dick Jewell.

He describes the book as:

a collection of rejected photobooth portraits. Abandoned for various reasons: not the epiphany selected from the print-out slot, but the glitch. For there is within the reaches of temporality more than one may want to know. Good news? Bad news? Monsters? Angels?

(48)

Alexander sees the rejected photobooth portraits as alternative paths in subject construction and performance. The rejected photos are undesirable or unintended virtualities which are momentarily captured and often denied. Oliver Sacks has realised the creative potential of the glitch in his studies. He writes:

Defects, disorders, diseases, […] can play a paradoxical role, by bringing out latent powers, development, evolutions, forms of life, that might never be seen, or even imaginable, in their absence […]. [T]he paradox of disease, […] is ‘creative’ potential.

(cited in Cole 2007, 323)

Likewise, Nikolas Rose, in his analysis of the field of psychology, notes it is often in times of medical de-stabilisation that we become most aware of ourselves. Rose writes:

Our vocabularies and techniques of the person, by and large, have not emerged in a field of reflection on the normal individual, the normal character, the normal personality, the
normal intelligence, but rather, the very notion of normality has emerged out of a concern with types of conduct, thought, expression deemed troublesome or dangerous.

(1996, 26)

According to this concept of illness, one is offered the possibility of knowledge as a result of dramatic and affectively-charged change – a glitch.

I shall propose the subject of the glitch becomes a participant (active and passive) in a creative process of the dynamic construction of identity. These moments when the productions and performances of the subject go astray create new possibilities or ‘entryways’ to the self. The term ‘entryways’ is taken from Deleuze and Guattari’s concept of the rhizome (12, 1988). The concept of the rhizome, a heterogeneous and map-like structure without a nucleus, is a useful sympathetic guide, as it allows for the presence of multiplicities in the organisation of the subject. A rhizomatic structure embraces creative, unpredictable and fluid subject constructions.

Spectacles and Spaces of the Glitch

With the creative production of novel and dynamic forms of the subject, I am necessarily drawn to consider the element of the spectacle in the glitch. The spectacle of the disruptive subject is epitomised in the nineteenth and early twentieth century sideshows and carnivals. Carnival goers could view exhibits like the pin-heads or ‘Ancient Aztecs’ (microencephalics) at shows such as the Ringling Circus or Sells-Floto Circus Sideshow (Bogdan 1990, 132). The viewer could watch in disgust and delight at these small-statured (dwarf-like) people with very small heads and high sloping foreheads. The pin-heads and their ‘freak’ brethren were perversions of the
ideal subject, but contained and segregated from the sphere of day-to-day life and thus their threat neutralised. Just as today one can sit safely in front of the television and watch the report ‘Crash Burn’, the story of Jacqueline Saburido, on *Sixty Minutes* (aired 14 March 2004), who was horribly burned in a car accident. You can view the ‘before’ photos of a beautiful 20-year-old girl and then move to the interview with this young woman who was so badly burned that she lost her nose, eyelids, fingers, hair, part of her mouth and is now blind. You can be horrified and moved by this vision of beauty destroyed. You can view the results of drunk-driving. Yet, you can remain comforted by the fact that the story is not yours. The pin-heads and Saburido are the disconcerting, yet neutered, possibilities of the glitch.

In my exploration of subjects of the glitch, I will focus on media and medical-generated spectacles that retain Fiedler’s sense of the freak as message-board for performances of the secret-self. It is a popular practice in contemporary western culture to bring the medical and media together in explicit showings of aberrant subject-creation. Such is the case with the abovementioned *Sixty Minutes* report and also in shows like *Medical Incredible* and *Extreme Makeover*, which are devoted to the glitch as spectacle. *Medical Incredible* offers stories on human curiosities including: people with the Lobster Claw syndrome (ectrodactyly); a man who lost his fingers in an industrial accident and in a medical ‘cure’ had toes fused onto his hands; and people who suffer from Progeria, a genetic condition that accelerates aging. *Extreme Makeover* takes the ugly and makes them beautiful, or at least makes them obvious subjects of the medical makeover culture, with the standard and explicit markers of this culture. The show’s beauty experts use such methods as porcelain veneers to replace rotten or crooked teeth; laser treatments for blemished
skin; collagen and fillers for wrinkles; liposuction and quick weight-loss training to
drop fat; surgical procedures such as facelifts, browlifts, tummy tucks and body lifts
to pull out wrinkles and rid the body of excess skin; and beauticians, hairdressers and
stylists present one in the most up-to-date fashions. At the end of each episode the
viewer is treated to full body before and after shots, so that the audience can view the
‘potential’ that can be realised by engaging in the makeover culture, which ‘valorises
and rewards processes of working on the self’ (Jones 2008, 11).

These above examples point to the visual aspect often associated with the spectacle
of the glitch. Fiedler explores the visual element of the freak through an analysis that
focuses primarily on scale, discussing the aberrant scale of the midget and giant.
Likewise, Frank Gelya has examined embodiment and congenital limb deficiency,
and he agrees with Fiedler’s view that ‘physically variant members of the culture,
simply as a consequence of their appearance, serve as metaphors for fundamental
issues of human consciousness and evoke powerful feelings’ (1986, 216). He
believes the freak is an embodied metaphor for cultural anxieties surrounding
identity and the glitch. However, visuality will not be an essential component in all
discussions in this dissertation. Obviously, with subjects like Michael Jackson, a
discussion of the grotesque must necessarily include an examination of the visual
with his physical appearance being of intense focus and interest. Jackson biographer,
Margo Jefferson writes:

Was he man, boy, man-boy or boy-woman? Mannequin or
postmodern zombie? Here was a black person who had once
looked unmistakably black, and now looked white or at least un-
black. He was, at the very least, a new kind of mulatto, one created by science and medicine and cosmetology.

(2007, 14)

Jackson’s visual appearance is fluid, confusing and arousing. The dynamic visuality of Jackson is crucial to a discussion of him as a contentious and rhizomatic construct.

Dr Phil also has a strong visual (and auditory) presence as a result of his popular weekday talk show. He is a man accustomed to the kind of contemporary media spectacles described above. For example, in one episode he explored the issue of ‘Plastic Surgery Nightmares’ (aired 11 December 2007), where he invited disgruntled patients on the show to reveal their plastic surgery disasters. And in the episode the ‘The Ultimate Weightloss Challenge Finale’ (aired 24 May 2004), Dr Phil revealed the weightloss results for a group of overweight people he had selected to train and counsel. The finale included the ‘Extreme Makeover’ reveal of one his weightloss group, Monika. After losing 55 pounds, Monika, appeared on the show ‘Extreme Makeover’ (aired 5 May 2004) and had multiple cosmetic procedures including a tummy tuck, liposuction, breast augmentation, a face lift and a chin implant. Dr Phil affirmed her choice noting:

there is a right reason and a wrong reason to get plastic surgery.

When I heard Monika say to me that she wanted to look as good on the outside as she now felt on the inside, I knew she wasn't trying to heal her life with cosmetics. She had healed so many aspects of her life, and she wanted to celebrate it with cosmetics. And that's a good reason.

In this instance, Dr Phil affirms the spectacle of the medical makeover culture.
However, Dr Phil’s televisual spectacles are not the primary foci in my research on this popular media communicator, educator and entertainer. I have chosen to focus on the sympathetic model outlined in his text, *Self Matters*, in which he describes a primarily internal and camouflaged disruption. This text offers a concentrated gathering of Dr Phil’s sympathetic theories which underlie the advice he dispenses on his show. But I must recognise that this text accompanies a larger media spectacle.

Accordingly, part of my study will concern the variations in the surfaces and spaces of the glitch and sympathy. The magic defined and analysed in this dissertation is not necessarily or primarily a visual display or an overt performance of the spectacle. Ultimately, the glitch, as it is used in this dissertation, refers to moments and subjects who disrupt the flow of stable and often unanalysed subjectivity. The glitch is a novel, exciting and terrifying reminder of the malleability of life.

Each of the magicians have their own way of dealing with the glitch, whether it be an expulsion of disruption present in Dr Phil’s work; a grotesque yielding to the glitch, present in Jackson’s ‘distributed personhood’; seeing it as an awe inspiring counter-force in the movement of life, as will be evidenced in Sacks’ work; or a cessation of flow which must be compensated for in order to preserve a connected link in existence, as well as a desire for the disruption of the discontinuous flow of singularity as presented in the study and experiences of Cole and Waterman. In each of these cases, it is the glitch working with the self that gives sympathy and antipathy their visibility.
Through a discussion of popular and influential discourses of the subject, I aim to explore how the glitch makes visible particular ‘truths’ of subject-construction. In particular, I am interested in exploring the evolution of dualist (mind/body) theories, contemporary contentions regarding Individualist versus Collectivist perspectives, the perception of the body and its malleability in an age of mass image re-production, embodiment, the relationship between the biological and social, and differences in linear and rhizomatic narratives of selfhood. I will use these discussions to assert that the most complex, cohesive and effective forms of modern magic incorporate the creative virtualities offered by the glitch and are dynamic and malleable enough to adapt to its disruption.

**Mapping the Subject**

Each of the magicians addressed, identify, construct, and/or chart particular positions and movements of the subject. As previously mentioned, they are masters of the laws which govern the communities they oversee. They function as important figures in deciphering the ideal, the status quo and the other. In the following chapters, I will be dealing with moments of crisis at the borders of the magicians’ realms. In each case, one comes face to face with subjects that challenge the stability of the given territory as well as give shape to it. These challenges take the form of overwhelming social collectives and toxic mental representations (Dr Phil), simulacra as essence and disintegration of the global identity (Michael Jackson), the body and pathology as chaotic and subjective life forms (Oliver Sacks’ Parkinsonian patients), and the literalisation of the Cartesian homunculi, a mind severed from particular sensory inputs (Ian Waterman). In order for me to address the way selves, bodies, minds,
pathologies and representations are positioned in modern magic; I require some kind of stabilised referent for these murky terms that designate the borders and make-up of the individual. I have chosen to draw on the work of Steve Pile and Nigel Thrift in *Mapping the Subject* (1995).

From the outset, Pile and Thrift realise the difficulty in mapping the human subject. They insist that there are no precise boundaries; that the subject cannot be counted as singular, taking up multiple subject positions; the subject is always a being on the move; and is only partially located in time and space (1). Such an understanding of the subject is crucial to this dissertation and the study of these sympathetic magicians, each of them grappling with the evasiveness of the subject in their attempts to stabilise meaning in their respective contexts.

As evidenced by the above quotation, Pile and Thrift’s theories also embrace the malleability of the borders of subjecthood. Such a theory supports my assertion that sympathetic magic challenges the borders between singularity and multiplicities.

Pile and Thrift take on the mission of understanding some of the ways in which others have attempted to construct the subject. They refer to two dominating paradigms commonly used in defining the essence or source of the subject - agency and structure. Those who affirm the structured subject believe the body/self has no meaning outside the system(s) in which it resides, i.e. the circumstances of life restrict the choice and development of the subject (2-3). However, according to the agency perspective, each subject has his/her own individual and internal meaning, irrespective of the dominant social systems which surround him/her (3). Pile and
Thrift incorporate both perspectives, asserting that the ‘individual acts in time and space – located, moving, encountering, interpreting, feeling, being and doing’ (3). They affirm a subjecthood that is clearly anchored within the physical milieu, but is granted the complexity of subjective perception. It seems to me that this is a sympathetic mapping of the subject. In this dissertation, each of the subjects (both the magicians and their subjects) struggle with agency and structure and I intend to show how they use sympathy in both contexts to create the meaningful subject. In Chapter Two, I investigate Dr Phil’s construction of the authentic self. The use of the term ‘self’ in his work, connotes the subject as agentic. As I will argue, the self-subject of Self Matters is a unique agent who is idealised, above and beyond the enforced limits of the socially structured subject. In fact, Dr Phil identifies the socially structured subject as a loss of self or a ‘fictional self’. In Chapter Three, with the analysis of Michael Jackson, I am interested in investigating a subject who cannot be understood in terms of an agentic self and exists as a construct of multiple and heterogeneous structures. In Chapter Four, I examine subjects who struggle to maintain a self-subject, in light of multiple internal forces vying for dominance; and who use the structure of the outside world to help stabilise the individual self. Finally, in Chapter Five, I examine a subject who is denied two of the basic sensory inputs, or interfaces, between the subject and the world which (arguably) structure the subject. Cole and Waterman explore this segregation between subject and world and come to the conclusion that the agentic subject also suffers a breakdown as a result.

In Pile and Thrift’s study, they search for a more comprehensive and less static way of addressing the subject and come up with the idea of a kind of a three-dimensional
map. Even with the freedom of the concept of the map – always growing, always changeable, without centre or end – it also frames and fixes the world within discursive practices of power (48). Pile and Thrift work with ways of mapping the subject in terms of space, movement, position, place and bodies. They are intrigued by a web of interactions that highlight ‘power-ridden discursively-constituted identities’ (44). The image of a map is helpful to my definition of magic as it outlines the subject as territorial, a consequence of ceaseless travel and expansion, but contextualised by the structure of the map.

My work, at least in part, takes up Pile and Thrift’s attempts at mapping the subject. I intend to investigate how others have shaped particular subjects in popular and dominant contexts. As previously noted, it is not just sympathy which unites the case-studies in this dissertation. They are also brought together as being representative of popularised and influential contexts of the contemporary western world. They are representative of a medical makeover culture. These subjects have been made possible by the technology of image production and the spectacle of the celebrity that has given birth to the multiple and simulacra subjects\(^1\); and/or dominating bio-medical/psychological discourses that have anatomised and pathologised the human organism\(^2\).


This dissertation aims to explore mappings of contemporary western subjects with the aim of uncovering sympathetic laws which dictate the growth and territories of the maps. In particular, these mapping of magic and magicians will help to highlight the roles of affect, mimesis, interactivity and multiplicity in sympathetic systems. Furthermore, by focusing on the path/s of the othered subject, I aim to identify the mapping of chaos within each case-study. Understanding how the subject of the glitch is mapped and responded to reflects how each invocation of sympathy responds to the incorporation of the unpredictable and fluid subject within the ideal and how the ideal subject, in each context, is defined.
Chapter Two

Self Matters: Maintaining the Discrete Mind-Self and Resisting the Collective

He who lets the world, or his own portion of it, choose his plan of life for him, has no need of any other faculty than the ape-like one of imitation. He who chooses his plan for himself, employs all his faculties. He must use observation to see, reasoning and judgment to foresee, activity to gather materials for decision, discrimination to decide, and when he has decided, firmness and self-control to hold to his deliberate decision.

(John Stuart Mill 2008, 70)

We are the Borg […]. We will add your biological and technological distinctiveness to our own. Your culture will adapt to service us […] Resistance is Futile.

(Star Trek VIII: First Contact 1996 [Film])
Introduction

In this chapter, I examine the presence of sympathy in the self-help text *Self Matters*, written by psychologist, author and talkshow host, Dr Phillip McGraw, aka Dr Phil. I have chosen the work of Dr Phil because I consider him to be a figurehead in the contemporary western self-help culture. He is the host of a self-titled top-rating daytime talkshow that has an American audience of 6.5 million (Salerno 2005, 65). He informed his Australian audience at a recent seminar in Sydney (8 August 2009) that he has sold over 24 million books. He has firmly embedded himself in the western cultural consciousness, as evidenced by his various cameos in pop culture productions such as the spoof flick *Scary Movie 4* (2006) and the *Simpsons* episode, ‘Treehouse of Horror XVII’ (2006). He even has his own Muppet counterpart, Dr Feel.

Dr Phil is a celebrity and medical advice expert in a mediatised and medicalised contemporary western culture. As I have previously discussed, our society is obsessed with the attainment of ‘health’, a health that stretches beyond the physiological, beyond the ‘absence’ of disease or bodily injury. Our obsessive quest for ‘health’ extends to all aspects of our lives, including the want of financial and emotional health. The healthy individual is one who ‘succeeds’ at all the chosen areas of self-determination. According to Lennart Nordenfelt, in his study of ‘disease’ and ‘health’ as medical, scientific and social concepts; ‘health-concepts’ such as ”health”, “illness”, “sickness”, “defect”, “injury”, “impairment”, and

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3 All Dr Phil citations refer to *Self Matters* (2001) unless otherwise indicated.
“disability” no-longer simply belong to medical contexts. Nordenfelt writes:

although they now also have technical uses these concepts
basically belong to the discourse of ordinary life. They are
frequently used in our day-to-day affairs, when we report on our
bodily and mental states and the state of our fellow human
beings. […] Health is a part of our welfare.

(1993, 17)

As such, ‘a person may be intuitively healthy, without fulfilling the biostatistical
criteria for health; and he may be intuitively ill, without fulfilling the biostatistical
criteria for disease and illness’ (22). Even the World Health Organisation defines
health as ‘a state of complete physical, mental and social well being and not merely
the absence of disease or infirmity’ (1946, 100). People have come to recognize
happiness, fulfilment, and success in terms of biology, function, and dysfunction.

Self-help has catered to the mass craving described above, offering guides to varying
and sometimes abstract forms of healthy living and being. Dr Phil has established
himself as an important figure in this self-health society through the production of his
immensely popular show which addresses various manifestations of the desire for
health. With his academic credentials in hand, having earned a PhD in clinical
psychology, he affirms his standing as a medical expert in a medical world.

Dr Phil uses his position of note, as a ‘health authority’, in conjunction with
commanding self-performances as a televisual communicator, entertainer and
educator on his show. He holds a strong visual and auditory sway with western
society, standing six-feet and four-inches tall, with a broad frame, bald crown, bushy
moustache and southern accent. He has branded himself with his notorious ‘Dr Philisms’ such as:

- Get Real!
- Anger is nothing more than an outward expression of hurt, fear and frustration.
- If you want more, you have to require more from yourself.
- It's better to be healthy alone than sick with someone else.
- Life is a marathon, it's not a sprint.
- We teach people how to treat us.
- It is never a good idea to substitute anyone’s judgment for your own.
- The best predictor of future behaviour is past behaviour.
- I want to get you to the point that trying to slip a lie past you will be like trying to smuggle sunrise past a rooster.
- It doesn’t matter how flat you make a pancake, it always has two sides.

He is known for his common sense, no-nonsense, sometimes aggressive, sometimes sarcastic tone. He has identified himself as a ‘good ol’ boy’, a southern boy from humble backgrounds who has gained wisdom through experience and past mistakes. This is intermingled with his position as an accredited medical professional and forceful paternal figure. His success at meeting the wants and needs of his society in a novel and authoritative manner has brought him fame. In a celebrity-obsessed culture, where the famous are figureheads for dominating cultural desires, Dr Phil’s rise to super-stardom becomes further proof of his worth. Consequently, a study of his sympathetic structures becomes a study of successful sympathies in a popular mediatised and medicalised society.
In addition to his show, Dr Phil has produced written companions, containing concentrated gatherings of his theories of the self. In particular, *Self Matters* represents Dr Phil’s most concerted effort at describing his understanding of the ideal human subject, which he views as an ‘authentic self’. This text aids Dr Phil in meeting the ‘higher’ needs of his followers. Beyond bio-statistical health, *Self Matters* focuses on the healthy self, a self with an Individualist notion of purpose and fulfilment.

I am interested in using Dr Phil’s guide to the authentic self in *Self Matters* to explore the fundamental process of representation in the magical act. As an extension of this, I would like to examine the role of will and desire as magical ignitions. I believe Dr Phil creates a clear model of sympathetic representation where desire forms the image, which in turn shapes the constitution of things, or the reality of subjects and objects. He uses this process to meet his audience’s need for a comfortable, stable and achievable state of being. However, I shall argue that Dr Phil’s sympathetic constructions are often ‘contained’ and ‘partial’ through his refusal to acknowledge the full scope of sympathetic structures, particularly in terms of their social, bodily and affective components.

However, identifying Dr Phil’s model for attaining the agentic self as imperfect, or perhaps inconsistent, in terms of its sympathetic practices and theories is in no way an implication that his model is any less significant than those of the other magicians’ in this dissertation. Dr Phil as communicator, entertainer and doctor provides easily understandable and digestible information regarding the attainment of
an ideal self. The information, or guide, that he offers fills a definite need of his audience. It is a need born of the particular sympathetic structures of the self created by the contemporary western world, a need to attain an individualised, fulfilled and transcendent state of selfhood. At the start of this thesis I included a quote from Jackson biographer Margo Jefferson, part of which read ‘the norms and needs of your time and place made you’ (2007, 27). Jefferson’s comments were in relation to attempts to understand the development of Jackson as a glitch. However, the same comment could be made in relation to Dr Phil, as answer to a popular glitch. His sympathetic model is, without question, commanding and a necessary rhetoric born of the contemporary western culture.

**The Authentic Self**

According to sociologist and cultural critic Micki McGee, ‘discovering or uncovering an authentic, unique, and stable self’ is a staple of self-improvement literature (16). For example, in Sonia Choquette’s, *The Time Has Come to Accept Your Intuitive Gifts!* (2008), she encourages people to focus on intuition as the source for the ‘Higher Self’. She writes ‘[i]f you were to lose all your five sense faculties but still had your intuition, you’d be safe and find your way’ (80). And, in Sarah Ban Breathnach’s, *Simple Abundance: A Daybook of Comfort and Joy* (1995), she aims to help other women access their inner authentic worlds (January 28 2008). According to Breathnach, once you find your authentic self you will discover ‘that

4 The role of the senses in self-creation will be examined in detail in Chapter Five.

5 There are no page numbers in *Simple Abundance: A Daybook of Comfort and Joy*. The book is sectioned according to dates.
she’s such a positive, upbeat woman. She’s always smiling. She’s always calm. She’s always reassuring. She exudes confidence’ (February 3 2008). In Hale Dwoskin and Lester Levenson’s, *Happiness is Free* (2002), and Echkhart Tolle’s, *A New Earth* (2005), the authentic self is always present. In Tolle’s guide, he offers advice on how to ‘awaken’ and proceed upon your path of ‘inner purpose’ to become the ‘experiencer’. He writes:

> So who is the experiencer? You are. And who are you?
> Consciousness. And what is consciousness? This question cannot be answered. The moment you answer it, you have falsified it, made it into another object.

(242)

Tolle’s abstract definition identifies the experiencer/you/consciousnesses as without need of being defined, because it cannot be defined. Thus his readers are offered an ideal teacher, without fault. And why is he without fault? Because his definition of the self cannot be proven wrong if he provides no definition. Furthermore, his followers are offered the comfort that while the self may be indefinable or even recognisable through introspection, it is most assuredly real.

Through acknowledging and defining an authentic self that is attainable, or perhaps omni-present, one is offered the stability and comfort of a confirmed reality and salvation from a belaboured self, which McGee describes as:

mutable, protean, autotelic and evolving, multiple,

marginal, postmodern, narcissistic and minimal, hungry
and empty, saturated and seeking, invented and
enterprising, well-tempered, playing, and ‘decentred’.

(16)

McGee’s belaboured self, which she believes to be the prevalent manifestation of the
contemporary self, is subjected to multiple theories or truths. It is without borders or
consensus. To succumb to this ‘truth’, or lack thereof, is to lose faith in the
inscrutably divine, singular and static subjectivity of a Cartesian ethos of self-
possession. In such an instance, one must necessarily realise theories of the self as
evolving, as disputable; and McGee would likely argue that such an understanding of
the self works against the ‘requirements’ of self-help. As she writes, people ‘turn to
self-improvement literature for inspiration in times of despair, for specific advice on
how to conduct their lives, and for reassurance in the face of enormous social,
political, and economic changes’ (17). They do not seek to be further de-stabilised by
submitting to an irresolvable quandary of being.

Dr Phil, like his aforementioned contemporaries, has sought to resolve the
contestation of the self. As such, he has partaken in the magical need to confirm
meaning and the substance of the individual – to fill the gaps in our knowledge. As
professional communicator and medical expert he has had to create his own rhetoric
that is consumable. In Self Matters, he has fashioned an easy-to-follow guide for
achieving a most desirable Individualist self. According to Dr Phil there is an
‘authentic self’ and a ‘fictional self’. In Self Matters, the authentic self is conceived
as a natural state of being. It is:

The you that can be found at your absolute core. It is the
part of you that is not defined by your job, or your
function, or your role. It is the composite of all your unique gifts, skills, abilities, interests, talents, insights, and wisdom. It is all of your strengths and values that are uniquely yours and need expression, versus what you have been programmed to be believe that you are ‘supposed’ to be and do.

(30)

An integral element of Dr Phil’s Individualist self is its pre-determined and destined nature. He writes, ‘FACT: Your authentic self is there, it has always been there, and it is fully accessible to you […]. There are no exceptions’ (42). Dr Phil would likely disagree with Jacque Lacan’s claim that ‘the self is understood to be spoken in discourse rather than the self being the sovereign agent of enunciation’ (cited in Halliwell 1999, 10). Instead of viewing the self as originating from human practices of ‘making meaning’, Dr Phil identifies it as a priori, existing before action (including discursive) and acting as the source of personal meaning. In defining the authentic self, he writes:

It is the you that existed before and remains when life’s pain, experiences, and expectancies are stripped away. It is the you that existed before you were scarred by your parents’ divorce or wounded when that cute boy in school made fun of your braces or your dress. It is the you that existed before your spouse demeaned you in argument
after argument, while you just took if for fear of being left.

It is the you that existed before you were in fact left abandoned by your spouse or children.

(30)

For Dr Phil, the subject’s self is not informed or developed through ‘pain’ and ‘experiences’. It does not locate any of its origins with your relationships. It was fully formed before you experienced life. Such a self, such a truth, is undeniably compelling and desirable. A pre-existing and ultimately indestructible self that can always be uncovered and placed above the undoubtedly crushing scars left by the traumas of life offers hope when one is overwhelmed with pain and/or disappointment. In a sense, this kind of self allows one to believe in time travel, the ability to travel back to a better time, a better self. It permits the ‘truth’ that pain CAN be overcome and no scar is everlasting.

This concept of a pre-destined, authentic (or real) and static self as described in therapeutic literature such as Self Matters, has met with severe criticism. Psychiatrist Sally Satel and philosopher Christina Hoff Sommers critique what they term the ‘doctrine of the Real Me at the heart of therapism’ (2005, 87). They cite psychiatrist Anthony Daniels’ work with British Prisoners as a study which highlights the problems of ‘Real Me’ philosophies (2001). Daniels discovered many prisoners tried to absolve themselves of responsibility by claiming they were not themselves when they committed crimes. For example, he refers to a car thief who pardoned himself by describing his thievery as an uncontrollable addiction. Daniels writes, because ‘his behaviour is a manifestation of illness, it has no more moral content

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6 Daniels writing pseudonym is Theodore Dalrymple.
than the weather’ (8). The prisoners implied there was a more authentic self that had been corrupted by some kind of pathological imposter. Daniels found the doctrine of the real me preposterous. He said these prisoners would claim:

The Real Me has nothing to do with the phenomenal me, the me that snatches old ladies’ bags, breaks into other people’s houses, beats up my wife and children […]. No, the Real Me is an immaculate conception, untouched by human conduct: it is the unassailable core of virtue that enables me to retain my self-respect whatever I do.

(9)

According to Sommers and Satel, Daniels came to the conclusion that ‘one’s actions are the best guide to the “Real Me”’ (88). Furthermore, it was through taking responsibility for their actions, that the inmates were more likely to make progress.

Philosopher Michel Foucault has questioned the presence of a destined self writing, ‘[f]rom the idea that the self is not given to us, I think that […] we have to create ourselves as a work of art’ (1983, 237). He finds himself opposed to what he describes as ‘the California cult of the self’, where one is ‘supposed to discover the true self, to separate it from that which might obscure or alienate it, to decipher its truth thanks to psychology or psychoanalytic science’ (245). Foucault believes that modern western cultures have lost ancient Greek and European Renaissance practices where people were not obliged by civil law or religion to ‘work on the self’, ‘[p]eople decide[d] for themselves whether or not to care for themselves’. For the individuals who did make the choice to ‘care for themselves’, they made their lives ‘into an object for a sort of knowledge, for a techne—for an art’ (244-245). While Dr
Phil makes the discovery or uncovery of the self seem like a necessary step in the attainment of health, Foucault considers self-analysis and self-focus to be an ever-developing work of art.

While the idea of a pre-destined authentic self may offer comfort and purpose, it disregards the multifarious influences and components in the construction and maintenance of one’s self and life. It seems to me that a pre-destined, pre-formed self can be anti-sympathetic, in some respects. It does not allow for the dynamic movement of self-creation, or the presence of a fluid sympathetic structure. Nor does it embrace the primary magical presence and actions of the other.

**The Cartesian Glitch**

In *Self Matters*, Dr Phil offers a guide to treating and eliminating threats to the authentic self. He diagnoses and treats what he believes is a deterioration of authentic selfhood prevalent in western culture. He contends, ‘that you, me, all of us, have in the past and/or are currently “screwing up” in this game we call life’ by living superficial and passionless lives that are dictated by others’ desires (11-12). By living your life according to others’ (parents, friends, persons of authority, enemies etc) desires or rules, instead of following your personal interests; he believes you are submitting to the perversion of socialisation, i.e. forfeiting a unique subjectivity in favour of a socially acceptable one. For Dr Phil, submitting to the mass social other is the source of the glitch. He explicitly and implicitly re-affirms this on his show. For example, he has explored the problem of troublesome ‘in-laws’ on his show, often informing the ‘in-laws’ that they are not permitted ‘inside’ someone else’s marriage, even if they are related to one member of the married couple. In the
episode, ‘Inappropriate In-Laws’ (aired 1 May 2008), a daughter, Kendra, tells of how her mother, Bambi, tried to control her life and when Kendra started making her own decisions and got married Bambi disowned her and even created a memorial site for Kendra, because she was dead to her. Dr Phil sides with Kendra, telling the mother, ‘You’re not the queen of the forest’, noting her mother acts inappropriately because she has lost control over her daughter and it is her daughter’s right to dictate her own life.

According to Dr Phil, the glitch created by the force of the other presents as a kind of trauma which he describes as ‘psychic disfigurement’. He writes:

> Psychic disfigurement can best be understood through the analogy of a burn to the skin. When people are traumatically burned, often the incident itself [occurs over a short period of time] […]. Yet we know that the injury is far from over. They become far more uncertain about going out into the world. In other words, the same disfigurement they have suffered physically has also affected their psyche. There is a visible scar on their face, they say, ‘I cannot and will not go out there and present myself’.

(91-92)

Dr Phil believes a similar result applies to those who suffer from a ‘traumatic injury that leaves no physical scars’ (92). ‘[Y]ou may be living as if your skin had been burned’, but you are the only one who can see the scars (92). The crux of Dr Phil’s philosophy, in *Self Matters*, is ‘that psychic disfigurement may be just as crippling and debilitating to your self-concept as physical disfigurement would be’ (92). This
concept is presented as a spectacle on the show. For example, in his show on ‘Bullies’ (aired 26 January 2007), Dr Phil brought several young girls on the show, both bullies and victims, to explore the emotional pain that was affecting all their lives. According to one young bully’s grandmother, her aggression came from the loss of her mother. And one of the victims had taken to physically harming herself to deaden the pain of the assaults from the bully. Ultimately, Dr Phil was concerned with uncovering the internal trauma that caused these abusive actions. According to Dr Phil, it was the emotional scarring that was the source of greatest pain.

**The Mind-Self**

Ultimately, the self which Dr Phil argues is at risk of psychic disfigurement is the mind-self, shaped by the laws of Cartesian dualism and embracing a Cartesian conception of a discrete sympathy. René Descartes wrote:

> I am a thinking thing, or a substance whose whole essence or nature consists in thinking. And although [...] I have a body to which I am very closely united [...] what I am, is entirely and truly distinct from my body, and may exist without it.

(156)

Descartes constructed a self whose ‘essence’ is thought. This thought-based or mind-based self is not a product of biological function, such as the neural firings in the brain, for it can ‘exist without it’. The self lies somewhere beyond the corporeal. The body functions not as the source of life and subjectivity but as a vessel in which to house it, at least in this life or plane of existence. This is in contradistinction to the magical manifestations I shall explore throughout the rest of this dissertation.
Dr Phil outlines a dualistic structure of the self through his construction of ‘internal’ and ‘external’ factors. The external factors are the events and persons that have influenced one’s self-perception. Dr Phil outlines these factors in quantifiable terms, identifying them as 10 defining moments, 7 critical choices and 5 pivotal people (90). In a Cartesian light, these external factors remain important regardless of the self being a thinking substance. This is because Descartes defined the mind as more than a ‘pilot in his ship’. The mind and body are intermingled (159). The body sends the necessary information to the mind so that it may react to preserve the body (166). The external factors described in *Self Matters* adhere to philosopher Frank Dilley’s definition of substance dualism. Dilley contends that the mind uses the body to gather information (2004). He writes, ‘[s]ouls need bodies in order to gather information and to interact with other souls, and it may well be that bodies are needed for souls to develop’ (146). However, the interaction between the souls of others and the external world offers the possibility for distortion according to Dr Phil’s paradigm (this possibility will be discussed in detail below). Such a view is also expressed by Descartes. He writes that he does indeed believe in the reality of corporeal things, however ‘they are perhaps not exactly as we perceive them through the senses, for perception by the senses is very obscure and confused in many ways’ (158). Therefore, he concludes that ‘it seems to me, the function of the mind alone, and not of the composition of mind and body, to know the truth of these things’ (161). The sensorial body acting as a faulty filter between self and world is Platonic in nature. In one of Plato’s dialogues, *Phaedo*, he tells the tale of Socrates awaiting his execution, which he in fact welcomes because his soul will be released from his body (1959). Socrates considers this to be a desirable state because the soul cannot attain real truth or knowledge whilst in the body. Plato writes, ‘for in attempting to
consider anything in company with the body [the philosopher] is obviously deceived’ (78). He continues:

> thought is best when the mind is gathered into herself and none of these things trouble her – neither sounds nor sights nor pain nor any pleasure – when she takes leave of the body, and has as little as possible to do with it, when she has no bodily sense or desire, but is aspiring after true being.

(78-79)

For Plato, and Socrates in this tale, the ‘body is a source of endless trouble’ with its need for food, its vulnerability to disease, love, lust, fear, fancies and endless foolery (80). According to Plato, ‘purification is the separation of the soul from the body’ (81). Likewise, Dr Phil asserts that it is the external factors, one’s relations with the world, which create the fictional infection.

Dr Phil’s neo-Cartesianist view is most apparent in his construction of the internal factors. He describes the internal factors as ‘all of the internal dialogue that shapes your self-concept’ (78). As with the external factors, Dr Phil seems to limit the sympathetic relationships by selecting a limited, manageable and specific range of internal elements. He identifies key internal factors, or mental processes, that create psychic disfigurement, such as: ‘Internal Dialogue’, ‘Tapes’, ‘Labels’ and ‘Fixed Beliefs/Limiting Beliefs’. Your Internal Dialogue is the real time conversations you have with yourself (79). Tapes are ‘deeply ingrained’ and ‘overlearned’ ‘values, beliefs, and expectancies that constantly “play” in your head and program you to behave in a certain fashion’ (80). Labels are your attempts at organising yourself and others by slotting everyone into different categories (80). Fixed and Limiting Beliefs
are entrenched beliefs about your capabilities and self-concept that prevent you from broadening your perceptions and life (81). In order to heal yourself, you must create accurate and beneficial internal dialogue. You must measure your internal responses ‘against a standard of rationality and truth and authenticity’, to determine if they are fictional and detrimental (260). According to Dr Phil, upon discovering your life transcript you are able to see where you have distorted the self and write a new script and create an ‘Authentically Accurate Alternative’ (AAA).

At first glance, Dr Phil may seem to construct holistic sympathies through his use of internal and external factors, but ultimately he retains the essence of dualist doctrines. According to Dr Phil, the power for change lies with the internal factors because ‘there is no reality; only perception: What is true about you in your mind, you will live’ (78). Such a statement not only reflects elements of the Cartesian separation of mind and body but negates any true significance of physicality. While the self may have an important relationship with the body; it is ultimately beyond its physicality.

Dr Phil creates a mind-based sympathy. He takes the magical premise that creating a representation ‘modif[ies] a given state’ (Mauss, 61), and gives it an internal impetus. Unlike the magical peoples in anthropological literature who mould and/or perform their images of desire, Dr Phil’s subject imagines the image. For example, Dr Phil writes that your self-concept (the personal truths you believe about yourself) is the ‘‘DNA’ of your personality’ (24). DNA ‘is the fundamental genetic material of all CELLS’ and ‘acts as the carrier of genetic information’ (Black’s Medical Dictionary 2005, 206). On a biological level, DNA determines the outcome of each
life form. Therefore, when Dr Phil posits that one’s self-perception is equivalent to mental DNA, he is arguing that thoughts are the fundamental elements that determine self and experience. He also uses such clichéd truisms as, ‘[i]f you think you can or you think you cannot, you are probably right!’, to enforce his stance (78). Dr Phil offers his readers the authority of the mind as the governing source of reality.

Of course, it is doubtful that Dr Phil set out to implement a neo-Cartesianist sympathetic philosophy. When he created *Self Matters*, he developed an informational guide that was easy to follow, seemed quite commonsensical and was helpful in meeting the needs of his audience. Nonetheless, his advice perpetuates a long standing history of Cartesianist philosophy. Furthermore, the popularity of his rhetoric indicates the ever present and prevalent need for such philosophies in the endeavour to develop the ideal self.

The mind as origin also provides a sympathetic stance that is crucial for the format of Dr Phil’s show and the advice he dispenses. While each show focuses on specific topics and individuals, such as those mentioned previously, Dr Phil is primarily advising a broad and faceless audience. However, he is able to create a sympathetic connection, an intimacy between himself, his guests and his audience through tearing down social and physiological bodies revealing a perceived unity of nature or spirit.

**Willpower**

Dr Phil privileges the role of will above all else, identifying it as the source for disfigurement and authenticity. Others can will us into living fictional lives and we can will ourselves to live AAA’s. Descartes also offered reasons as to how the
primary power of will can distort the self and how this can be rectified. He argued that the will (the freedom to make choices – ‘to affirm or deny, to pursue or to flee’ (136-37)) is not enclosed by any limits. However, such faculties of the mind as understanding may be enclosed – one may not have attained a high level of knowledge. Hence the will strays, it spreads out (without the company of wisdom) and chooses ‘the false instead of the true’ (37). According to Descartes, ‘knowledge of the understanding must always precede the determination of the will’ (139). In this light, Dr Phil’s readers can be viewed as subjects who have chosen their life paths without the necessary wisdom; as such, the solution lies in broadening the mental faculties that manage the force of the will. On his show and in the media, Dr Phil presents himself as a ‘self’ that has attained this necessary wisdom and instated an authentic self. He does so through displaying the necessary cultural markers of success such as: his academic credentials, wealth, fame, professional success, and apparent emotional success with the repeated presence of his wife and two children at his shows and appearances.

Once the individual is set upon the right path of ‘thinking’ authenticity (via attained wisdom and re-directed will), his/her life falls into place. As such, Dr Phil encourages a selective and infallible construction of sympathetic force. He informs the reader, ‘I’m talking about controlling virtually every aspect of your experience in this world’ (10). According to his rhetoric, people can pick and choose the factors that shaped them – keep the good and re-write the bad. Perhaps if the self were a homunculus such a task might be simpler. The little surveyor, ‘I’, could distinguish himself/herself/itself from the pollution of the physical realm and its events. Such is
the case with dualist doctrine, which Dilley contends acknowledges the influence of
the body, but maintains that the self/soul would remain the same even if one’s
memories or body should alter (147-48).

Undoubtedly, it is an enticing view that you can think your happiness and fulfilment
into being. It makes solutions seem simpler and within you control. According to
Salerno, it is a common element of SHAM (Self-help and Motivational Movement),
to establish ‘a climate wherein people not only felt “empowered” to “take charge of
their lives” but also honestly believed that the cure to all things physical resided
somewhere in the psyche and was under their conscious control’ (214). Salerno has
noted that Sportstthink (sports oriented models in self-help and motivational genres)
often refer to ‘character’, ‘confidence’, ‘wanting it more than the other guy’ and
other mental foci as the keys to success (95). Salerno writes that baseballer David
Bell, is able to hit balls travelling at 96 miles per hour clean over the fence because
he has excellent hand-eye coordination (95-96); not simply because he wanted it
more than the pitcher wanted to strike him out.

In Chapter Five, I shall return to concepts surrounding the mastery of the body via
the mind. Jonathan Cole presents a kind of forced or pathological Cartesianism in the
figure of Ian Waterman. Waterman literally cannot feel his body or his position in the
world. Without the primary sense data of touch and proprioception he is unable to
move in the fluid and seemingly automatic manner of the functional person. He
requires exhaustive mental activity and focus to guide every action from holding a
piece of paper to walking up stairs. His cognitive ability is the clear master of his
bodily function. If Waterman were to appear on the ‘Dr Phil Show’, he would likely
be encouraged to overcome his disability and would be heralded for his mental
conviction and will power. However, such a bifurcation of mind/brain and body is
not transcendental; it is far more complex and can be debilitating, resulting in a life
plagued by tiredness, frustration and isolation.

**Hold Your Emotions at Bay**

Part of the exaltation of the will of the Cartesian mind, in *Self Matters*, involves a
bias against emotion in favour of a more traditional understanding of objectivity and
reason. Dr Phil writes, ‘[k]eep a cool head, hold emotions at bay! Do not let your
passions interfere with your judgement’ (52). An integral element of Dr Phil’s
focused analyses of past events/relationships is the necessity for objective analysis.
He writes, [a]s we move forward, you absolutely must deal with nothing but hard,
objective *facts*’ (38). He believes that one can be an objective observer of one’s own
life. Dr Phil creates a kind of sympathetic magic which finds will and non-emotional
reason as the foundations of its efficacy in maintaining the authentic self. He
performs this identity himself. On his show you would rarely find Dr Phil crying
with his guests, hugging them or even holding their hands. He does not present
himself as an empathetic individual, who shares in the experiences of his guests’
emotional stress, unlike other talkshow hosts such as Oprah Winfrey.

In Dylan Evan’s study of emotion he writes, ‘[e]ver since Plato, many Western
thinkers have tended to view emotions as obstacles to intelligent action, or, at best, as
harmless luxuries’ (2001, 32-32). Evans calls this the ‘negative view of emotion’. Of
course, this view has been countered by theorists such as Damasio who, in his
critique of Cartesianism, has explored faith in reason and the suppression of emotion.
He comes to the conclusion that while emotion can ‘cause havoc in the processes of reasoning under certain circumstances’ it is also ‘indispensable for rationality’ (xii-xiii). He finds that reason and emotion are no more segregated in a functioning human being than mind and body.

It is Damasio’s view that is more in keeping with the magical philosophies espoused in this thesis. As stated in the previous chapter, will (and/or intent) is a primary element in the magical act described in anthropological literature (Gell, 101). However, it is a will built upon the subjective and affective needs of the magical persons and cultures, such as the example of war-dances presented by Collingwood. Affect drives the magical act. In the proceeding chapters, the discussion of sympathy and the subject would be impossible without recognising the role of affect and subjectivity, whether it be the potent ambivalent perceptions of Michael Jackson’s audience shaping his heterogeneous subjecthood, or the flow of bodily movement functioning as a power source in the affective experience and construction of Ian Waterman’s subjecthood. In this dissertation, part of my goal is directed towards developing an understanding for the necessity of subjectivity and affect in sympathy, exploring sympathy as a process for using affect and emotion as primary tools in the construction of the subject. Therefore, I must necessarily view Dr Phil’s attempts at distinguishing a Cartesian sympathy, exempt from emotion, as a flawed sympathetic model.
True Forms

Dr Phil focuses on the ‘messiness’ of the body and emotions. He presents them as objects of distortion and the goal of his will-based objective analysis is to achieve a Platonic truth, to which I previously referred, a truth that is enduring and non-corporeal.

Dr Phil’s authentic self is a static and enduring construct however, it is vulnerable to a kind of mutiny. He writes, ‘you have only one “self”, but it is one that, like a chameleon, takes on the emotional colours of the history and environment in which it has existed’ (24). His theories are reminiscent of Plato’s theory of Forms. In Book VII of ‘The Republic’, Plato presents the allegory of the cave (1952). In the story, Socrates creates an allegory to reveal to Plato’s brother, Glaucon, that there is a truth, an essence of things beyond that which we sense. He argues that we are in fact fooled by the ‘truth’ offered by our senses. In the story, Glaucon is asked to imagine a group of people have been chained in a cave all of their lives. They are shackled in such a manner that they have never been able to turn around, only ever able to face one wall of the cave. ‘Above and behind them a fire is blazing at a distance, and between the fire and the prisoners there is a raised way; and […] a low wall built along the way’, upon which people pass, carrying objects and sometimes talking. All the prisoners ever see are the shadows the fire throws onto the wall. Socrates says of the prisoners’ knowledge of the world gained via the shadows, ‘if they were able to converse with one another, would they not suppose that they were naming what was actually before them? […] To them […] the truth would be literally nothing but the shadow of images’. Socrates then proceeds to ponder the results of releasing one of the prisoners. He declares that as the prisoner stood up and turned around, heading
towards the light of the cave entrance, he would surely be distressed and pained by
the light and what he now saw. Indeed he would need considerable time to take it all
in. Plato writes:

He will require to grow accustomed to the sight of the upper
world. And first he will see the shadows best, next the
reflections of men and other objects in the water, and then the
objects themselves; then he will gaze upon the light of the moon
and the stars and the spangled heaven.

(388)

Plato’s allegory presents the immediate world of objects, of knowledge gained
through the senses, as shadows, or ephemeral images, which only reflect or allude to
a transcendent and unchangeable truth of things. True knowledge is an ascent beyond
the senses, beyond the corporeal. This concept is further emphasized throughout
Plato’s works. In another Book of ‘The Republic’, Plato explicates his understanding
of the ‘Forms’ as unchangeable and incorporeal truths. He writes:

You are aware that students of geometry, arithmetic, and the
kindred sciences assume the odd and the even and the figures
and three kinds of angles and the like in their several branches
of science; these are their hypotheses, which they and everybody
are supposed to know, and therefore they do not deign to give
any account of them either to themselves or others; but they
begin with them, and go on until they arrive at last, and in a
consistent manner, at their conclusion?

Yes, he said, I know.
And do you not know also that although they make use of the visible forms and reason about them, they are thinking not of these, but of the ideals which they resemble; not of the figures which they draw, but of the absolute square and the absolute diameter, and so on – the forms which they draw or make, and which have shadows and reflections in water of their own, are converted by them into images, but they are really seeking to behold the things themselves, which can only be seen with the eye of the mind?

(1952, 387)

Plato argues that what we sense, and our consequent perceptions achieved from these sensations are but partial images or muddied reflections of an ultimate truth.

In R. E. Allen’s study of Platonic Forms he writes, ‘Forms affect the career of the world: they are the real natures of things, and the world is what it is because they are what they are’ (1970, 68). Allen notes that the true and ‘holy’ ‘Form’ of things is contrasted against the visible, sensorial, ‘form’ of things:

The World of Knowledge, whose contents are eternal Forms, stands to the World of Opinion, whose contents are sensible and changing, as the more real stands to the less real, as originals stand to shadows and reflection.

(68)

According to Platonic theory, the physical forms of things, which are perceived via sensorial experience, are really kinds of shadows which mimic the reality of things.
While the lower case ‘form’ is an ephemeral representation, the upper case ‘Form’ is the enduring and static substance or essence of the object/subject, which exists beyond the physical realm. Dr Phil’s concept of the self partakes of this Platonic theory via his construction of the fictional self. For Dr Phil, the self while always present, can be tainted by a perverted impostor. This impostor is described by Dr Phil as the ‘fictional self/infection’. Dr Phil informs the reader of *Self Matters*, ‘[i]f you are choosing what you do, what you think about, and put at the top of the priority list based on what you think others expect instead of what matters to you, then you have the “fictional infection”’ (17). The fictional infection is a diseased mental state, which leads to psychic disfigurement. The perverted person, living a lie, embodying the form of an impostor is a transitory representation that mimics the turmoil of the Form of the authentic self.

Dr Phil often examines forms of the fictional infection on his show. Some episodes are dedicated to blatant acts of impersonation. In the episode, ‘Alter Egos’ (aired 26 February 2007), he talked to, Deb, a 52 year-old grandmother who pretended she was a 35 year-old with no children in order to achieve success as a booker for bands. In this episode, Dr Phil treats Deb’s appearance on the show as a cathartic step, a public ‘self-outing’, owning up to her authentic identity. In another episode, ‘What Do You Fear?’ (aired 21 October 2008), Dr Phil spoke with a woman, Kathleen, who suffered from dozens of phobias. As part of their discussion, Dr Phil wanted Kathleen to talk through her worst case scenarios and ask herself what would really happen if her worst fears came true. He believed this would help to show Kathleen that what she was telling herself was not really accurate and the possible and likely outcomes of her fears were not so dreadful. Overall, Dr Phil’s show is dedicated to presenting
people who are living fictional lives; this is why almost all of them require Dr Phil’s advice. We can sit back and watch with disgust and condescension in judging their behaviour and lives, or empathise with their pain, or experience our own shame or pain rising as we see ourselves mirrored on the television. Dr Phil presents his audience with case studies of inauthentic living. *Self Matters* is a guide to help his audience avoid this fate or escape it.

**The Threat of the Collective**

Dr Phil realises the multi-directional flow of magic, through his discussion of the fictional self. He confirms the power of the other (the will of the other) to shape (or in this case, distort) the self. However, instead of embracing its force, which I shall affirm in the second half of this dissertation, he realises the possible dangers. He instils a fear of the representative power of the other.

In *Self Matters*, the fictional infection is a state where one has sacrificed the ideal of Individualism for the needs of the Collective. Susan Leigh Anderson describes the Collectivist paradigm as ‘the view that the individual should be thought of as subservient to society. Individuals should be required to act for the benefit of society as a whole’ (1995, 308). Such a philosophy can be construed as an affirmation of a collective will and a surrendering of individual desire. Dr Phil asserts that people have succumbed to Collectivist doctrine through statements such as the following:

> there’s a high likelihood that there has been a whole lot less *conscious* self-determination in defining who you are and a
whole lot more input that you have automatically adopted. It’s as if you’ve got this vessel called ‘self’ that people can come by and throw things in.

(72)

For Dr Phil, a subject defined by the Collective, has open borders which can be violated by others. He offers his own life as an example. Dr Phil became a psychologist because he believed it was what his father expected of him. He felt pressured to make his family proud and follow in his father’s footsteps. He accepted ‘the roles assigned by an insensitive and sometimes hurtful world’ (4). As a result he felt as though he was ‘running out of life energy’ (6). He conformed to the expectations of others. He opens *Self Matters* with this personal story and his eventual decision to start living for himself as opposed to living the desires of others’. The readers can see the proof of his eventual success by tuning into his show.

Dr Phil believes conformity can even place people in mortal danger. In his famous sarcastic tone, he provides an alternative obituary for someone who lived a fictional life, again reinforcing the concept of the body as a vessel for the self:

Mr. Robert Jackson died yesterday of complications from doing a lifetime of crap that he didn’t really want to do. His condition was further complicated because he also failed to do much, if any, of what he did want to do. Experts report that he died from cramming someone else’s idea of life into his body, his brain, and his life. Attempts by Mr. Jackson to fill the voids with work, cars, excessive eating, alcohol, three wives, two
thousand rounds of golf, and meeting everyone else’s
expectancies but his own, were dismally unsuccessful.
Unfortunately, this all took so much out of Mr. Jackson that he
was just worn flat out and died about twenty years too soon.
Miserable in his last years, he passed unpeacefully yesterday at
his home. He was surrounded by colleagues from the job he
hated, and family members who were all just as miserable as he
was.

(17-18)

What is made apparent by Dr Phil’s sample obituary is that he believes the individual
finds figurative and literal death when he/she succumbs to the will of the group.

_Self and Soul_

Dr Phil does make a convincing argument for his ‘contained’ form of sympathy by
highlighting the possibly deadly influence of the social other. However, he does
encourage one form of sympathetic interconnectedness, the connection between self
and God. He creates a religious sympathetic structure, where the individual’s self is a
representation of God’s perfection, the image taking the form of the soul.

Dr Phil asserts that people have lost soul and self due to the expectations to
assimilate to the demands of the human social environment. He states, ‘[n]ot living
faithfully to your authentic self creates a void […]. It’s as if there is a hole in your
soul (31). In this context, inauthentic living (which is a result of conceding the
authentic self in favour of others’ expectations and assigned roles (31)) is imbued
with biblical significance, the soul being the seat of human essence in biblical law. St
Augustine proposed the soul’s origins lay with ‘God Himself by whom it has been created’ (1950, 14). He believed the soul does not come ‘from those common and familiar natures with which we come in contact by means of these our bodily senses’ (14). Augustine followed the Platonic dualist notion of holiness. For St Augustine, the soul is the non-corporeal and immortal element of the human subject, made from God. This understanding of the soul is often played with in various contemporary pop culture narratives. In the television show *Buffy the Vampire Slayer*, vampires are soulless demons. When they are turned from human to vampire, they retain their bodies and memories but the soul is dead, replaced by the essence of a demon. As a consequence of this, the vampires are burnt by all objects of faith such as crosses and holy water. They shriek in pain at the touch of symbols of faith, of God. They are ‘Godless’. They are without the highest element of the human, at least according to Judaeo-Christian beliefs. As the *Bible* proclaims, God ‘spreads clouds over the sky; he provides rain for the earth and makes grass grow on the hills’ (Psalms 147:8). God is perfection - ‘He will be called, “Wonderful Counsellor”, “Mighty God”, “Eternal Father”, “Prince of Peace”. (Isaiah 9:6). And it is this perfection upon which the human is moulded, as ‘God created man in His own image, in the image of God He created he him; male and female he created them’ (Genesis 1:27). Therefore, to lose one’s soul, and one’s God, is to lose human essence.

Dr Phil’s choice to align the self with the soul, and in turn the self with God, also strengthens his position as a Neo-Cartesianist. Descartes’ self is also created in the image of God (Descartes, 130). Descartes contended that within him are the

7 All Bible references are from the *Good News Bible*. Australian bicentennial ed. Canberra: Bible Society in Australia, 1988.
established (pre-existing) concepts of perfection and infinity, even though he realised himself as both imperfect and finite (124). Thus, he asked himself the question - from where do such concepts arise? He concluded that he could not identify himself as the origin of these concepts or as the author of his being, because if he had such power of creation he would have made himself perfect (127). He also argued that his body, his senses, could not be the source of such knowledge because there is no sensorial experience of perfection and the infinite (130). Nor could it be the fiction of his mind, because he could not create a substance out of elements which are not already known to exist (130). Therefore, he must be the creation of some other perfect and infinite being, namely God. Furthermore, this knowledge of God ‘was born and produced with [him] at the moment of [his] creation’ (130). God is the Cartesian creator and he is the author of the individual’s thinking self; a self that acknowledges and strives for God’s transcendental perfection from the point of creation.

**The Advancing Other**

The ‘evil’ that destroys the soul is presented by Dr Phil as an overwhelming, advancing and conquering other. Various contemporary fictional contexts and media productions, deal with the fear of the assimilation of the discrete individual by the threatening other. Anxiety over individuality is particularly common in science-fiction and horror films, played out through the creation of such figures as the vampire (as previously discussed), werewolf and zombie; all of which traditionally signify the surrender of the discrete individual in favour of the contagious Collective. When the human becomes a vampire in *Thirty Days of Night* (2007), a werewolf in *An American Werewolf in London* (1981), or a zombie in *Dawn of the Dead* (2004);
he/she loses those characteristics which made him/her uniquely human. Common elements surrendered are the strengths of familial bonds and ethical boundaries, as the newly formed horrific identity tortures and kills those around him/her becoming part of the monstrous Collective. In *Dawn of the Dead*, when the character Luda turns into a zombie, her first inclination is to literally lash out and try to consume her beloved husband Andre, wanting to devour or assimilate him into the zombie collective. These horror collectives are powerful, whether it be the combined force of the zombie horde surrounding their human victims; the coven of vampires whose laws, affinities and ageless progression stretch across centuries; or the ravenous wolf pack that cannot be controlled by the ‘human’ society.

Barbara Creed has explored the horror genre and the horror identity in her study of the ‘monstrous-feminine’ (1993). Creed contends that the horror subject, or monster, is an abject subject which calls into question the boundaries between the human and non-human (5), the function of the horror film being to cross or threaten those boundaries (11). One form of the threatening other, the ‘Archaic mother’, who is identified by Creed as a figure of the monstrous-feminine, is the ‘sole origin of all life’ (18). The Archaic mother is without partner. She does not require a male counterpart or copulation to create life (18). She is the source of all life and as the giver of life she is also capable of devouring all life. For Creed, when variations of the Archaic mother appear in horror texts they represent a desire to ‘return to the original oneness of things’, where there is no differentiation between beings (28). Creed uses examples such as the alien Queen in the *Alien* movies\(^8\) to discuss this

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\(^8\) The movie series consists of *Alien* (1979), *Aliens* (1986), *Alien*\(^3\) (1992), and *Alien Resurrection* (1997)
horrific figure. However, I would like to discuss one of the most famous sci-fi
eamples of a non-differentiated collective (a whole, or ‘hole’), the ‘Borg’ from the
television show Star Trek: The Next Generation. I believe the Borg could be
construed as figuring the Archaic mother, in addition to offering striking similarities
to the fictional impostor identified by Dr Phil. The Borg are a race of part-human,
part-robotic creatures, who have a ‘collective consciousness. There are no
individuals’ (Star Trek VIII: First Contact 1996). Their goal is to ‘assimilate’ all life,
by turning all creatures into Borg, erasing their old identities and lives. In the episode
‘Best of Both Worlds, Part I’ (aired 18 June 1990), Captain Jean Luc Picard is taken
by the Borg and they inform him that they will add his biological distinctiveness to
theirs and he will function to service them⁹. They state, ‘[f]reedom is irrelevant. Self-
determination is irrelevant. You must comply’. It is ‘futile’ to fight the Borg. In the
film, Star Trek VIII, the Borg are also identified as locating their origins with a
female-like figure, a Borg Queen, turning the collective essentially into a hive, ruled
by a mother who wishes to make all forms (and Forms) of life as one¹⁰. When she is
first introduced to the plot she declares, ‘I am the beginning, the end, the one who is
many’.

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⁹ This statement became the mantra of the Borg and is re-iterated in the film Star Trek VIII: First
Contact (1996). The quote at the start of this chapter is taken from the film.

¹⁰ Interestingly, her downfall comes about when she attempts to assimilate the male-android character,
Data, as a kind of equal or mate. Thus, from a feminist perspective one is able to view the Borg’s
failure as the necessary re-balancing of power in a patriarchal system which fears the devouring
feminine.
The mother who devours the individual has special significance as a horrific figure within the realm of self-help as it has often been criticised as a therapeutic genre which heralds the patriarchal notion and delusion of self-mastery. McGee contends that the Western ‘mythology of the self-made man’ finds its origins in classical Greece:

where the citizen’s capacity to master himself was premised on the fact that the labour of women and enslaved persons supported his leisure. Self-mastery was a value to be cultivated in a citizen but was deemed an impossibility for those whose labour produced the necessities of life—for those who were subject to orders imposed by others.

(7)

Self-mastery has been identified as patriarchal and illusory because the concept of self-mastery espouses that the ideal and powerful subject creates himself, often without any recognition of those who aid in the construction, development and maintenance of this ideal self. This is the case with various male icons of self-mastery such as Dr Phil. In the preceding reference to his own experience of being repressed by the Collective, in the form of familial expectations, he does not seem to recognise that had it not been for his father ‘paving the way’ as a psychologist, and supporting Dr Phil’s own efforts, he may not have had the success and confidence to ‘pursue his own destiny’. Nor does it take into consideration Robin McGraw, Dr Phil’s wife, who is described in Self Matters as unfailingly supportive in whatever decisions Dr Phil made. Robin was also a ‘stay at home’ mother who took on the primary caregiver role to both of their sons and still attends every one of Dr Phil’s shows, sitting in the audience and leaving the stage with him, hand-in-hand at the
end of each telecast. In McGee’s self-help critique, she includes the text from Roz Chast’s humorous Mother’s Day cartoon that was published in *Ladies’ Home Journal*. The cartoon depicted a card from a mother to her children:

Here’s all the food I lugged home from the store;
Here’s the apartment we rented;
Here’s all the clothes and the shoes that you wore;
Here is the ‘self’ you ‘invented’.

—Mother

Chast’s cartoon realises the mother figure as the unacknowledged ‘inventor’ of her children’s selves. She is a denied origin in (male) self authority. Thus the mother who wishes to make all as one threatens this patriarchal dream of idealised ‘male’ individuality.

The Borg also represent what Leslie Fiedler describes as ‘an updated version’ of the freak, in the form of human Mutations (19). According to Fiedler, Mutations are an evolved and technologised form of the freak. He writes, ‘a cast of natural monstrosities is supplemented by others produced in the laboratory—as if to make clear our current sense that science creates new terrors rather than neutralizes old ones’ (19). The Borg are an ever growing Collective (or culture), conceived by imperialist advancements in technology\(^{11}\). They embody the concern described by Erik Erikson as ‘industrial man’s attempt to identify with the machine’ having lead to

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\(^{11}\) Propogation which does not involve filiation and heredity will be further discussed in Chapter Three and Deleuze and Guattari’s theories surrounding the pack animal.
'the question as to what [...] is left of a human “identity”’ (cited in Halliwell 1999, 6). The borders of the contemporary self are not only vulnerable to human others but the human-made objects populating the subject’s world. I will return to this fear of the technologically advancing world in Chapter Three and the discussion of Michael Jackson. There I shall explore a subject that is dispersed by technology. However, Michael Jackson, in submitting to the mediatised multiplication of himself, is not absorbed by a homogenising collective but is dispersed via the scope and reproductive capabilities of contemporary image technologies.

Stories regarding the dangerous advancing other propose our very lives are in danger by succumbing to the collective mind. I use the term mind to indicate how these horror identities imply the substitution of one’s individual desires and intentions in favour of the mind-set and body contagion of the other. In the case of the horror identity, the individual loses one’s desire for the preservation of life and individuality in favour of a desire for destruction and a hive mentality. Alternatively, these fictional narratives and figures may also reveal a truth which Dr Phil realises. Perhaps they identify a continuing fear of our ultimately sympathetic constitutions. If the essence of the human is the collective mind and contagious body rather than the discrete Cartesian and liberal individual, it is conceivable we fear there is something beyond (or another side to) the ideal of Collectivism where ‘[w]e are necessarily dependent upon one another, and this feature of our existence is not viewed as weakness’ (Anderson 1995, 310). These fantasy genres explore this dread – that perhaps the interconnected sympathetic subject must face the possibility of the infinite, becoming part of an overwhelming hole or whole. This dread will be investigated in greater detail in the following chapter.
*To Be One or Many*

Dr Phil is alarmed by the dangerous other which threatens self-structure and preservation; therefore the ‘anti-self’ must be guarded against. It is the taboo subject. His contempt for conformity, a conformity achieved via the absorption of the other and the repression of the self, reveals a disdain for particular potentialities made possible through sympathetic relations. Sympathy, as it is used in this dissertation, refers to the practice of developing and manipulating particular affective, imagistic and mimetic relationships between self and other (both human and non-human) for the purpose of understanding and maintaining the subject. In Alfred Gell’s analysis of sympathetic magic and art he refers to the ‘secret of mimesis’. He writes ‘to perceive (to internalise) is to imitate, and thus we become (and produce) what we perceive’ (31). People internalise particular constructions of selfhood and become them; in essence the image shapes the object. Frazer reports that Marcellus of Bordeaux (the court physician to Theodosius the First) is purported to have used the root of vervain to cure tumour growth (22). He would cut the root in half and tie one end around the patient’s neck and place the ‘other in the smoke of the fire’ (22). ‘As the vervain dries up in the smoke, so the tumour will also dry up and disappear’ (22). The patient imitates, internalises, the drying process of the root. In sympathetic magic, the other is neither inherently positive nor negative; the other can be both a source for and a danger to self-sustenance.
However, Dr Phil instructs the reader to focus only on himself/herself in order to regain the authentic self (10). Conversely, Salerno questions the ultimate efficacy of this kind of ‘selfishness’ through distancing the self from the other. He asks:

Does it make sense that a society in which everyone seeks personal fulfilment might have a hard time holding together?
That such a society would lose its sense of community and collective purpose? That the self-centred individuals who compose that society would find it difficult to relate to, let alone make sincere concessions to, other self-centred individuals?

(39-40)

Here, Salerno identifies problems with guides that focus solely on individual fulfilment as the key to an ideal agentic subject. Such a self-absorbed subject risks his/her own disintegration through refusing to acknowledge and accept social structuring forces. In *Mimesis and Alterity*, Michael Taussig contends that mimesis needs alterity, the self and the anti-self each feed off the other (1993, 65).

Taussig describes the Western capitalist world as a kind of Individualist and antimimetic culture, which is poorer for its refusal to incorporate the other. He writes:

Unlike the mimeticized world, this disenchanted one is home to a self-enclosed and somewhat paranoid, possessive, individualized sense of self severed from and dominant over a dead and nonspiritualized nature, a self built antimimetically on the notion of work as an instrumental relation to the world within a system wherein the self ideally incorporates into itself
wealth, property, citizenship, and of course ‘sense-date,’ all necessarily quantifiable so as to pass muster at the gates of new definitions of Truth as Accountability.

(1993, 97)

Taussig identifies the self-enclosed subject as a lesser construction of selfhood, having sacrificed the sympathetic experiences available to the mimetic subject. The mimetic subject incorporates the properties of the living other (both human and non-human), becoming a beating or pulsating subject in a massive network of living interconnections. For Taussig, the antimimetic subject is an isolated and narcissistic creature incorporating, not life, but the quantifiable ‘truths’ of individual ‘production’ and success.

Proponents of Existentialist psychotherapy also support a sympathetic social understanding of the subject. This psychotherapeutic field provides a unique system of meaning through which to compare the work of Dr Phil. There are striking similarities between proponents of self-help and existentialism, with both being able to trace their philosophies back to twentieth century therapeutic thinkers such as Arthur Maslow (1968) and Erich Fromm (1956). Existential psychotherapist, Irvin Yalom, realises the importance and even necessity of merging with a greater communal self. He affirms the theories of religious philosopher Martin Buber, who famously declared, ‘in the beginning is relation’, in his spiritualist definition of selves/subjects as entities that ultimately exist as interconnected elements of the cosmos (2004, 22). Yalom takes from Buber’s work the belief that the human subject ‘does not exist as a separate entity’, he/she ‘knows of no other state of being than
relation’ (364). Yalom believes the goal of relationships should not be to lose oneself to the other or be isolated in narcissism but to fully experience the other. He writes:

To care for another means to relate in a selfless way: one lets go of self-consciousness and self-awareness; one relates without the overarching thought, What does he think of me? Or, What’s in it for me? One does not look for praise, adoration, sexual release, power, money […]. Mature caring flows out of one’s richness, not out of one’s poverty—out of growth, not out of need. One does not love because one needs the other to exist, to be whole, to escape overwhelming loneliness.

(373)

For Yalom, relationships are an essential element of the human experience, allowing one to release and yield to the other, and to offer one’s own abundance as a source for fulfilling others’ desires. He also notes that people are often driven to pursue relationships because of the fear of isolation, which is one of the most powerful driving forces in human experience. For Yalom, relationships offer respite from existential loneliness. He writes ‘we yearn for autonomy but recoil from autonomy’s inevitable consequence—isolation’ and this ‘groundlessness beneath isolation, is a powerful instigator of one’s efforts to fuse with another’ (251). People often merge with others in order to fend off our mortality and meaninglessness. According to Yalom, whether from fear or an evolved desire to experience something beyond the self, people are driven to partake in a collective sympathetic tendency. Yalom, Taussig and Salerno identify the appropriation and incorporation of the other into the self as a tool for self-preservation and success in an unavoidable shared human network.
Dr Phil does acknowledge that ‘[w]e humans are social beings’ (89). However, he seems to focus on the vulnerabilities of such a position. He notes that others ‘change who we are’ in a primarily negative context (89). He enforces his exclusionary stance by identifying the subject as ‘special’. He positions the unique individual as being in danger of losing one’s ‘specialness’ by incorporating the other. He writes:

> You entered this world with certain core qualities and characteristics, but almost immediately the world began to write on the slate that is you. You have been both an active and a passive participant in its creation. To some extent, your self-concept was forced on you by others, and to some extent you have just automatically accepted it, even elicited it.

(86)

The reader/sufferer is identified as unique, as a discrete victim and/or empowered individual who must be a fortress against the forces of the other. In such instances, Dr Phil situates power with antipathy rather than sympathy.

It should be noted that it is not my intention to expel the concept of individuality from sympathy. A collective force or structure that does not incorporate individual action and the possibility for creative chaos and dynamicity is not sympathetic. The actions and being of the individual are the ignition for modern magical creation. The same is true in classical cases of sympathetic magic. Malinowski notes that magical practice places the individual as a centre of power and meaning. He states that the individual body is ‘the receptacle of magic and the channel of its flow’ (76). However, magic does not signal the individual as discrete or capable of instigating
sympathy in a uni-directional flow. The individual is an active agent and conduit in a larger dynamic system. Through sympathy the individual can fortify him/herself but not via the utter expulsion of the other. For example, Malinowski contends that all magic can be countered (82). And Frazer offers various examples of counter-spells, counter-forces and taboos in his work. He testifies that Madagascar soldiers were forbidden to eat particular ‘foods lest on the principle of homeopathic magic they should be tainted by certain dangerous or undesirable properties which are supposed to inhere in these particular’ foods (28). For example, they were forbidden to eat hedgehog as the animal’s practice ‘of coiling up into a ball when alarmed’, may make the soldiers timid (28). The properties of the hedgehog can be imparted to the human. Such a belief and set of practices is based on the sympathetic presupposition of multi-directional flow. Thus the taboo other is an unavoidable potential for sympathetic beings who must open themselves up to interconnectedness in order to benefit from the appropriation of the desirable other – i.e. one must acknowledge his/her mimetic faculties in order to benefit from the healing properties of the drying vervain root, even in the face of dangerous others such as the flesh of the hedgehog.

In Chapter Four, I will return to the concept of counter-forces and wills in my analysis of Oliver Sacks’ post-encephalitic patients. However, in the case of the post-encephalitic patients I will argue the glitch of counter-forces comes not from the pressure and will of external others but appears as competing internal wills of the ‘sick’ individual. I will argue that Sacks creates a sympathetic struggle between the ‘I’ of the patient and a kind of abstract individuality of the illness, the illness attempting to drive the patient to act against his/her own will. For example, many of the patients suffered from mutated actions. The patients would intend to complete
actions such as walking down the hall or brushing their hair, however their illness would work against their intents forcing restrictions upon the actions – commonly making them a great deal slower or faster. Sacks realises that counter-forces are an inherent part of the neuropsychological subject and attempts to help his patients not through denying multi-directionality but embracing it.

Ultimately, Dr Phil creates selves as truly individual entities, divined by God and vulnerable to being sullied by collective humankind. He disparages the sympathetic force of the social other and relies on it in his practice. And, as shall be discussed, the force of this dangerous other is emphasised via a relationship with literal pathologies. However, at times, I have found Dr Phil’s ‘anti-social’ sympathy described above problematic because sympathy, as it is fully understood in this dissertation, embraces the fluidity of individual bodies and the connected other who gives shape to the individual subject. The other does not completely replicate itself through a possession of the self, creating a network of clones or a degenerated vessel. The other is not inherently damaging or beneficial. As I will argue, particularly in the case of the post-encephalitic patients, the other is necessary for constituting the individual self.

**Metaphors of Pathological Discontent**

In exploring Dr Phil’s realisation of the sympathetic danger of the other and its ability to de-rail the self, it is worth discussing some of the metaphors he uses and how they position Dr Phil’s work as part of the dominating therapeutic and health oriented contemporary western culture. The use of metaphors is particularly
important because metaphor is a key tool used by contemporary therapeutic practitioners, and metaphors are, in general, key to human acts of meaning making.

In George Lakoff and Mark Johnson’s study of ‘metaphors we live by’, they argue that ‘metaphor is pervasive in everyday life, not just in language but in thought and action. Our ordinary conceptual system, in terms of which we both think and act, is fundamentally metaphorical in nature’ (1980, 3). Self-help gurus create and use explicit and powerful conceptual metaphors in their quest to explain and decode life. In fact, McGee asserts that self-help is notorious for its reappropriation of metaphors and icons:

The metaphors include life imagined as a battle, a game, a sport; a journey or adventure; or a business enterprise. In these cases, individuals are imagined as combatants, contestants, or players; travellers or explorers; and entrepreneurs, salespersons, or managers. For the combatants, contestants, and players, winning is the goal, while power and wealth are typically the prizes. For the traveller or explorer, rewards tend to be experiential, nonmaterial, and spiritual; the traveller is encouraged to ‘travel light’ or ‘let go of extra baggage’.

(51)

Self-help gurus employ images commonly associated with one kind of discourse (e.g. baseball) and apply it to how one lives one’s life (e.g. you need to step up to the plate, life will throw curve balls at you, don’t be caught out, don’t strike out, how to make your life a home run etc). If one describes life like a game, the people involved
become players, the rituals become rules, and the outcomes become scores. Furthermore, if life is a game, a person can conceivably win the game. One can achieve everything he/she desires by learning the rules, practicing and outplaying other opponents. For example, in *If life is a Game, These are the Rules*, Chérie Carter-Scott offers ‘the guidelines to playing the game we call life’, so that the reader may find his/her true path and attain fulfilment (1998, 5).

Of course, sports models are not the only popular self-help metaphors. A more eccentric set of metaphors can be found in John Gray’s extremely popular, *Men are from Mars, Women are from Venus* (1993). In this relationship guide, men and women become Martians and Venusians who, as literally different species, must learn to accept each other’s ‘foreignness’ and ‘unique’ qualities. Gray begins:

> Imagine that men are from Mars and women are from Venus.

> One day long ago the Martians, looking through their telescopes, discovered the Venusians. Just glimpsing the Venusians awakened feelings they had never known. They fell in love and quickly invented space travel and flew to Venus.

(9)

Initially, the Venusians and Martians were excited by and cherished each other’s differences, until they moved to Earth and suffered amnesia. Now, the Venusians and Martians are frustrated by each other’s differences. Gray offers insight into what these differences are and how to accept and respect them. Alternatively, in Spencer Johnson’s, *Who Moved My Cheese?*, life is imagined as a maze and our desires are cheese (1999). The readers are asked to identify with one of the four characters searching for cheese: Sniff the mouse ‘who sniffs out change early’, Scurry the
mouse ‘who scurries into action’, Hem the little person ‘who denies and resists change as he fears it will lead to something worse’, or Haw the little person ‘who learns to adapt in time when he sees changing can lead to something better’ (12). Ultimately, Johnson insists the cheese will always be moved and one must prepare for and accept the movement of cheese. He uses a light-hearted metaphor to encourage readers to realise that failures and frustrations aren’t the end of the world, but a part of life.

Similarly, Dr Phil uses novel, memorable and potent metaphors that are re-contextualised in order to motivate a new context for recovery. As previously noted, he is famous for his repeated incantations of certain ‘Dr Philisms’. However, here I am interested in the more complex metaphors he uses, beyond the catchphrases. In Self Matters, Dr Phil’s metaphors primarily revolve around the concept that happiness=physiological health. He follows in the footsteps of Abraham Maslow, the father of humanistic psychology, and his famous or infamous hierarchy of needs. Maslow believed, ‘[h]uman needs arrange themselves in hierarchies of pre-potency. That is to say, the appearance of one need usually rests on the prior satisfaction of another, more pre-potent need’ (1943, 370). The primary basic needs are the ‘physiological needs’, such as food (372). Physiological needs are followed by ‘safety needs’, ‘love needs’, ‘esteem needs’, and ‘the need for self-actualization’. According to Maslow, the search for love, self-respect, the respect of others, and the desire to fulfil a purpose and achieve potential, become the needs of the healthy individual. As has already been mentioned, the view that such things as esteem and fulfilment are health needs have become increasingly popular and mainstream.
Toxic Thoughts

In Dr Phil’s work, people have degenerated from an ideal of individual humanity into otherness. He asserts that denying one’s authentic self is giving ‘in to the distortions of life’ (85). He outlines how this distortion occurs and its ramifications through the magical act of image creation. He uses mental metaphors as images of destructive tangible forces, when describing the potential threats to the self. In particular, he uses metaphors which equate physiological illness with perverted mental activity in order to emphasise the consequences of the abstract concept of psychic disfigurement. For example, according to Dr Phil, living without passion, living with high stress, and being involved in tumultuous relationships drains your life energy and could literally reduce your life span by up to 32 years (33-34).

Dr Phil uses mental toxins as metaphors at key points in Self Matters. He informs readers that they must rid themselves of toxic internal messages so that they can define their own self-concept (87). What one takes away from Self Matters is that to live a fictional life creates toxicity in your life through self-deception, negative internal dialogue and restrictive boundaries on the self. In such instances, Dr Phil is using what Lakoff and Johnson would describe as an ‘ontological metaphor’, where experience can be understood as a substance that can be categorized and quantified (25). One’s self perceptions become poisonous, destroying both self and body in a myriad of ways. Dr Phil uses the previously referenced ‘sample obituary’ to suggest the force of the fictional life. Poisonous thoughts have great power according to a Cartesian construction of the self. As previously noted, Descartes describes the individual as a thinking thing; it is the mind that is the substance of self and reality. If one’s mind is consumed by toxic thoughts, then his/her reality is poisoned.
Dr Phil is not unique in his choice to equate particular relationships and behaviours with toxins. Salerno believes it is a key metaphor used to enforce the idea that socialisation sullies a natural and innocent self (138). He notes ‘they’re big on toxicity in Recovery circles’ (139). As Salerno has identified, there are numerous self-help books dedicated specifically to toxic relationships. One has only to do a quick search on a bookseller website such as ‘Amazon’ to find titles including: Toxic parents: Overcoming Their Hurtful Legacy and Reclaiming Your Life (2002); Raising Children in a Socially Toxic Environment (1999); Toxic Coworkers: How to Deal with Dysfunctional People on the Job (2000); Coping with Toxic Managers, Subordinates, and other Difficult People (2003); and How to Hug a Porcupine: Dealing with Toxic and Difficult to Love Personalities (1999)

Cancerous Ideas

Metaphors associated with cancer are also used in Self Matters. Dr Phil instructs the reader to be really honest when analysing the external factors that have shaped the self writing, ‘[b]e real, or you will forever be stuck due to misdiagnosis of what cancer is eating away at your authentic self’ (154). Cancer is personified in another use of ontological metaphor. The disease can be understood as a discrete entity attacking another discrete entity; pathological illness is equated with bad psychic forces. Chaotic cell growth becomes out-of-control thought processes in a Cartesian flip of the disease, where the illness begins not in the cells of the body but the thoughts of the ethereal mind. In the above instance, Dr Phil wants his readers to be ‘honest’ about the people who have affected the readers’ lives. Therefore, the cancer appears as negative psychic imaging resulting from traumatic relationships.
According to Susan Sontag, cancerous metaphors have a particular catastrophic resonance (2002). She writes:

The language used to describe cancer evokes a different economic catastrophe: that of unregulated, abnormal, incoherent growth. The tumour has energy, not the patient; ‘it’ is out of control. Cancer cells, according to the textbook account, are cells that have shed the mechanism which ‘restrains’ growth […]. Cells without inhibitions, cancer cells will continue to grow and extend over each other in a ‘chaotic’ fashion, destroying the body’s normal cells, architecture, and functions.

(64)

Cancer is chaos and threatens the structure of the subject’s life. Cancer becomes another form of the advancing other, the destructive collective. Dr Phil uses fear of illness, disfigurement and death as motivator for a change in sympathy.

Dr Phil uses quasi-professional medical terminology to show the reader how mental and emotional turmoil ‘changes your physiology’, writing:

Your immune cells are closely related to your nerve cells and there is instant communication between the two types of cell. For every thought you have, you have an instantaneous change in your physical body. If you are thinking negative and self-defeating thoughts about yourself, you will have a corresponding negative and defeating physiology. It might take the form of increased
endocrine activity, chronic adrenaline arousal, elevated blood pressure, or even a heart attack.

Thus, what begins as cancerous thoughts becomes toxic brain activity and physiological function. He creates a Cartesian model where the mind infects the body. As Dilley argues, substance dualism realises that ‘the contents of thoughts and thinking activities as well as memories, beliefs, desires are mental states’ that can ‘be correlated with brain processes’ (146).

**The Distance between Thought and Death**

Dr Phil’s antipathetic metaphors find their classical magical counterparts in negative magic. One example of negative sympathetic magic provided by Frazer involved Melanesian warriors and the use of arrow tips after the tips had pierced their enemies. The warriors would do such things as keep the offending tips in fire so that they would ‘inflame and irritate the wound[s]’ (54). Thus the enemies were poisoned via the will of the warriors, through sympathetic actions performed at a distance. In the philosophies of Dr Phil, mental force, desire and sympathetic practice regain their literal force and acceptance.

Michael Taussig discusses the force of ‘mental’ representation in *Mimesis and Alterity*. According to Taussig, mimicry is the art of copying, the ability to authentically (but not necessarily accurately) represent an object (1993, 52). When a copy is created, it is imbued with the power of the original. The ‘representation shares in or takes power from the represented’ (2). The copy is both other and self and draws on the original for its power just as the original may absorb it. Taussig
describes the magical ritual as a mutually consumptive act. Taussig also contends that thoughts can be tangible. In his exploration of the mimetic faculty, he argues that even a mental image such as a daydream ‘counts as an entity’, to which one wants to yield and become part of (61), in a sympathetic process of representation and appropriation. Dr Phil gives a literal and physiological force to the power of mental images and mimesis as described by Taussig. In Self Matters, the psychically disfigured create a mental imitation of cancer (or some other deadly pathogen or substance) – a copy that draws on the deadly power of the physiological original.

Dr Phil’s references to the literally deadly effects of psychic disfigurement raise some questions. Does every ‘bad’ thought shorten our lives? How many ‘negative’ emotions must we experience before we give ourselves a heart attack? The people who choose to buy and read Self Matters are already individuals who view their issues, sorrow, and anxiety (etc) as pathological problems to be cured; otherwise they would not be seeking Dr Phil’s help. His statements regarding toxicity, cancer and so on are likely created to inspire action and convince the readers to rid themselves of the thoughts that concern them. However, there must be a clear danger of inciting the already paranoid. Encouraging the readers to believe that bad psychic sympathies equate with and cause physiological peril also threatens to place blame on people who do succumb to illnesses such as cancer. As Christopher Boorse writes, ‘[t]he trouble with calling physical or mental or moral excellence health is that it tends to unite under one term a value-neutral notion, freedom from disease, with the most controversial of all prescriptions—the recipe for an ideal human being’ (1977, 572).
In Neuroscientist Antonio Damasio’s examination of mind-over-matter philosophy, he also explores the mind’s relationship with physiological illness. Damasio doesn’t deny that mind function effects body function such as bereavement leading to a ‘depression of the immune system’. But he also notes that the body affects the mind such as through the release of chemicals from body to brain which effect one’s mood and mental state (120). Paul Ekman has also explored how the body alters emotional states. As part of his ongoing study of emotions and expressions, he and Wally Friesen ‘were developing [a] technique for measuring facial movements’ (2003, 36). This involved videotaping themselves systematically making different expressions. During these experiments, Ekman declared, ‘that when I made certain expressions, I was flooded with strong emotional sensations’. Ekman’s colleague had the same experiences. Consequently, Ekman and several of his colleagues tested this hypothesis over the following ten years. He came to the conclusion that making the expression of certain universal emotions did provoke the physiological experience of these emotions (37). These researchers allude to a more complex relationship between thought and bodily function (including affective) than Dr Phil. They make the sympathetic connection between self and body as indissociable and inter-dependent.

Dr Phil’s choice to encourage the fear of ill-health (and its ultimate end without treatment – death) brought on through negative internal dialogue is also in stark contrast to a more existentialist view, where one is encouraged to realise his/her mortality as part of the path to achieving authenticity. According to Yalom the fear of death is a primary human fear and it is ‘the individual’s burden […] to deal with personal finiteness’ (109). Yalom believes that western culture equates death with
failure (212). He argues that we must face our mortality and integrate the knowledge of our inevitable death into our lives, which shall ultimately enhance our experiences (33). As has oft been stated in various ways – life is, in all cases, terminal. Death cannot be avoided. Death cannot be overcome. In fact, Yalom would likely argue that many of the fears that Dr Phil encourages people to analyse and re-construct are the results of displaced anxiety over their inevitable death. Facing those fears in existentialist terms, would ultimately not prevent physiological decline and death, as such avoidance is impossible, but would ideally bring acceptance of one’s mortality.

Dr Phil’s metaphors seem to rebel against an existentialist embrace of human fragility and the acceptance of mortality. He encourages his readers to embrace what Kristeva would describe as a pre-existing horror/disgust at the decaying body. The decaying body, the body of death par excellence is of course the corpse, which according to Kristeva shows me ‘what I permanently thrust aside in order to live’ (1982, 3-4). According to Kristeva, death represents a state when ‘a non-subject, a stray, […] imagines nothingness’ (25). Here, she is describing the antithesis of Dr Phil’s ideal individuated agentic subject; an eternal subject crafted by God and imprinted with purpose. A follower of Dr Phil’s construction of such an authentic self would necessarily be terrified by the distorted body which sleeks towards the totalising realm of the dead.

Ultimately, Dr Phil’s text aims to comfort our fear of death and meaninglessness. His metaphors have resonance because we are sympathetic subjects and we believe in the power of the image to shape us and we wish to use it to create an ideal self and to stop ourselves from realising our own nightmares. However, we are perhaps not
always aware, or do not have a sophisticated understanding, of sympathy and follow blindly when we should show more consideration towards the actual ramifications of our mimetic constitutions. Perhaps we should be more aware of the beneficial possibilities offered by the sympathetic force of the social other, affective logic, embodiment and the unavoidable presence of the glitch.

Dr Phil’s self-guide, *Self Matters*, heralds an Individualist and eternal sympathy and identifies the dangers of bodily social sympathies. In Chapter Three, I will argue that Jackson’s subjecthood is a realisation of Dr Phil’s fear of sympathy, but it is a subjecthood that shows greater acknowledgement of the broad scope of sympathy. Unfortunately, for Jackson, his submission to the multiple virtualities of sympathy is totalising. As such, he presents different sympathetic issues. In Jackson’s case, I move to a grotesque and abject subject who exists as an unstable, unpredictable and disconcerting distribution of images.
Chapter Three

Michael Jackson: The Distributed Person

I am a thousand winds that blow.
I am the diamond glints on snow.
I am the sunlight on ripened grain.
I am the gentle autumn's rain.

(Do Not Stand At My Grave and Weep\textsuperscript{12})

My name is Legion, for we are many.

(Mark 5:9)

We had him.

(Jesse Jackson, 2009\textsuperscript{13})

\textsuperscript{12} The authorship of this poem is disputed, however it is commonly regarded to be written by Mary Elizabeth Frye in 1932.

\textsuperscript{13} These words were spoken by Reverend Jackson at Michael Jackson’s memorial, 7 July 2009.
Introduction

This chapter explores the re-contextualisation of magic in the contemporary acts of image production and celebrity construction, by a western makeover culture obsessed with mass representations and malleable performances of the subject. In this chapter, I will be exploring the figure of Michael Jackson as epitomising such a society. He was and is a subject who is multiple and contentious, forever being re-made by his own hands and at the hands of others. Michael Jackson is a cultural experiment in realising the expansive and chaotic power of the image.

Through an analysis of Jackson’s complex imagistic constructions, I aim to show how sympathetic knowledge and practice enable the popular and circuitous acts of devouring, expelling and creating the celebrity icon. I shall examine how Jackson’s highly rhizomatic construction and re-construction(s) are a consequence of the contemporary western sympathetic culture’s epidemical lust for engaging in mass rituals of cultural identity construction through manipulating the famous.

Furthermore, I aim to discuss how this craving for and creation of multiple and contrasting Jacksons, through the consumption and re-duplication of his media representations, reveals a popular structure of a chaotic sympathy that embraces the tangential.

In addition to functioning as a coveted cultural artefact, this chapter also presents the celebrity as a powerful magician, or agentic subject. Celebrities are able to ignite our glutinous desires and enter into complex sympathetic relationships with us (their audience) through manipulating the decentred, heterogeneous and multi-directional
possibilities provided by magic. Jackson in particular, embraced a makeover culture that allowed him to become-hybrid, ever shifting his self-performances.

It should be noted that my study of Jackson began several years before his death on 25 June 2009, and upon his death I looked back at my research to see what changes this new event brought. However, as I sat and watched TV special after TV special, and read multiple reviews, obituaries and biographical stories, I realised that his death was another evolution or mutation in his becoming. Some may have wished to close the borders of his rhizomatic movements of subjecthood. The hosts of the Channel 9 morning show, Today (aired 26 June 2009), declared upon the morning of his death that he would be remembered for his extraordinary musical talent and all the other controversial elements of his identity would be let go of or forgotten. However, he has continued to be and become the multiple and the diverse. There is no final statement, an ultimate truth, to sum up Michael Jackson. Consequently, there is a confusion of tenses to be found in this chapter when referring to Jackson – sometimes relegating him a subject of the past, while at other moments implying a continuing presence as active agent. Jackson is both past and present, dead and still becoming, and the mixture of past and present tenses played out in this chapter reflect the non-linear subject of study.

Ultimately, I am investigating Michael Jackson as a distributed person, a subject who is fluid, multiple and dispersed. As such, I will be working with a subject who is the antithesis of Dr Phil’s agentic subject discussed in Chapter Two. As previously argued, Dr Phil’s idealised subject, the authentic self, must be fortified against the mass social other that threatens its unique and singular nature. The mass other can
pervert the individual subject through a kind of sympathetic infection or incorporation, where the individual is forced to take on the qualities of the multiple other. Or, in Kristeva’s terms, Form is threatened by formlessness, as the borders of the subject bleeds and spreads - where the dejected strays into multiple places, no-longer asking ‘who am I?’, but ‘where am I?’ (8). In the case of Michael Jackson, I am dealing with a subject whose construction and becoming is founded on the boundless movement and presence of the collective. Therefore, the study of Jackson will also include a discussion of the fear of sympathy first realised by Dr Phil. If the perceptions of the other can shape the subject (in this case the audience’s perceptions dictating the subjecthood of Jackson), then there are seemingly limitless points of origination for creating a truly multiplied subject. Furthermore, while I shall argue that Jackson exists as a glitch in terms of the discrete and fortified self, his position as a paradoxical figure, adored and reviled, is not simply the result of a glitch, but due to the multiplicities offered by sympathy. He is a consequence of the ambivalent celebrity culture, where contentious media subject identities are created through the interplay of desire and disgust, and the inhalation and expulsion of images.

*Loving and Hating the Celebrity*

I chose Jackson as a case-study in this dissertation because of his seeming obvious relationship with sympathy and the glitch. He has created an undeniable sympathetic bond with his audience/s since the 1960s as a musical icon. The song ‘We are the World’, co-written and co-performed by Jackson has become a soundtrack for expressions and performances of togetherness and charity. ‘I’ll Be There’, performed by Michael and his brothers, is one of the classic love ballads of the late twentieth century. The *Thriller* album still holds the ‘Guinness World Record’ for best selling
album in history and contains the widely known, remembered and re-played hits ‘Thriller’ and ‘Billie Jean’ (http://community.guinnessworldrecords.com). After Jackson’s death, 35 of the top 100 songs on the 6 July 2009 Aria Charts were Michael Jackson songs (http://www.ariacharts.com). It is undeniable that his music has made a sympathetic connection with an enormous audience.

Despite his extraordinary musical influence, and being idolised as the ‘King of Pop’, he is also a subject of the glitch. He has not been able to retain his crown, or keep his image as a prodigious talent free from scandal. Pulitzer Prize winning journalist and Michael Jackson biographer, Margo Jefferson, writes the following review of public responses to Jackson during his 2003 paedophilia trial:

Those convinced of Jackson’s guilt see him as a pop Count Dracula who invites families into his castle, then lures the children away to frolic, feast and develop a taste for the forbidden. Once they fall under his spell, he has his way with them […]. Those convinced of his innocence see a man who gives of his talent and his love unceasingly; a charitable man who works to end war, help children and set an example of universal understanding; an innocent man who saves lives and brings joy to troubled souls around the world. His oddness is his wound.

(2007, 111)

Jackson typifies the contemporary ambivalent icon, inspiring both adoration and disgust. He is far from being the only celebrity who is a contentious subject. As has previously been mentioned, he is part of a larger celebrity culture. This culture is
complex, and while the famous are often idealised, fame is not strictly bestowed on those individuals who are considered to embody the highest elements of the human subject. David Schmid notes in his analysis of celebrity culture and serial killers, society no-longer perceives the celebrity culture to be a strict meritocracy, where one becomes famous for exhibiting great skill, and representing an ideal. According to Schmid, fame is based on visibility, which can be the result of ‘good’ or ‘bad’ acts (2006, 298). Holmes and Redmond in their review of ‘fame damage’, the negative discourses integral to the culture of fame write, ‘stardom and celebrity, and indeed public visibility more generally, clearly offer a more contradictory set of associations’ (2006, 289). Even those celebrities who have become famous due to some performance of ‘excellence’ are contentious subjects as the public’s relationships with celebrities are not generally stable. As Sofia Johansson concludes in her study of fame, the fan often vacillates ‘between identification, disassociation and even aggression’, both identifying with and attempting to reverse the power balance (2006, 352). However, my aim when analysing Jackson is not to simply continue the established discussions surrounding the image of the ambivalent celebrity. I am interested in how the subject, Michael Jackson, is formed within the contentious spectacle of celebrity in terms of sympathetic practice. Thus, I have chosen to access anthropological, artistic and philosophical theories to explicate and substantiate my findings. As I have argued in the preceding chapters, these theoretical fields allow for a unique understanding of the subject as an entity that is formed and understood in terms of his/her position as an energised centre of flow within a sympathetic network.
The Celebrity Assemblage

I begin with the aforementioned realisation of Jackson’s ambivalent presence.

Jefferson writes:

Is he a good man or a predator? Child protector or paedophile? A damaged genius or a scheming celebrity trying to hold on to his fame at any cost? A child star afraid of aging, or a psychotic freak/pervert/sociopath? What if the ‘or’ is an ‘and’? What if he is all of these things?

(18)

Like Jefferson, I embrace rather than attempt to solve Jackson’s multiplicities. He is both the ‘damaged genius’ and ‘scheming celebrity’. I contend that Jackson exists as a heterogeneous collection of representations and is consumed by a massive and heterogeneous audience. He adheres to Deleuze and Guattari’s concept of an ‘assemblage’, which is a multiplicity that has ‘lines of articulation or segmentarity, strata and territories; but also lines of flight, movements of deterritorialization and destratification’ (3-4). Jackson is a subject who maintained a forty-year career image as a phenomenal pop music singer, writer and dancer; however his subjecthood has also been founded on tangents and contradictions as heralded philanthropist and possible paedophile (Kent 2009), civil rights pioneer (Pareles 1984, 11) and racial deserter (Kelley 2009).

Alfred Gell’s anthropological study of art offers an intriguing way to access the subject as an assemblage. Gell explores the artefact that consists of heterogeneous multiplicities through the discussion of ‘distributed personhood’, which is a fractal identity created through image construction and distribution, a ceaseless creation and
dispersal of images without origin or end. Gell describes artefacts that consist of ‘the reduplication of skins, outwards towards the macrocosm and inwards towards the microcosm, […] there is no definitive “surface”, there is no definitive “inside”, but only a ceaseless passage in and out’ (148). This multiplicity and centreless construction of subjecthood as dynamic movement is useful when engaging with the figure of Michael Jackson who is reproduced ad infinitum through various media from CDs, DVDs, M-PEG 4 files, chocolate bars, t-shirts, photographs and so on.

Furthermore, Gell’s distributed person can be understood as an ‘artwork with agency’, an artwork that has a social role or impact. He believes there is ‘an insensible transition between “works of art” in artefact form and human beings: in terms of the positions they may occupy in the networks of human social agency’ (153). Gell’s theories allow me to investigate relationships with Jackson which position him as an object that is only known to his audience via the process of cumulative representation; but also as an object/image that is perceived as a subject with whom the audience can form an affiliation. He is an object that has a social role and impact. Gell’s theories aid in my analysis of Jackson as artist and art object, sculpted and consumed for the pleasure of many. His theories also aid in my questioning of the object/subject dichotomy in magic. It seems to me that the subject is always an object at some point and in some relations – constituted by the actions of others. This is of course accelerated and exaggerated in the case of Jackson.

Understanding Jackson as a heterogeneous, distributed and assembled set of images shall also lead to a discussion of his subjecthood in terms of Deleuze and Guattari’s theories of the ‘rhizome’ and ‘becoming’. According to these authors, the rhizome is
a heterogeneous and map-like structure, without a nucleus or linear point-to-point structure (7-12). They note, the ‘rhizome as subterranean stem is absolutely different from roots and radicles. Bulbs and tubers are rhizomes’ (7). A rhizomatic structure offers the possibility for multiple ‘entryways’ (12), or images, a creative and imaginative system of subjecthood. The rhizome is a helpful concept for understanding the dynamic possibilities open to the sympathetic subject. The concept of the rhizome also makes possible the subject without borders or a subject of ‘becoming’. According to Deleuze and Guattari, ‘becoming is a rhizome’ (239). It involves the deterritorialization of subject and medium (292), without origin or end; it is a line of flight that frees itself from the point (293-294). Deleuze and Guattari also believe that ‘all becoming is a becoming-minoritarian’ (292). This is an interesting statement to consider when analysing a black man (minority) who became white (majority). Thus, a discussion of Jackson as a fluid and proliferating becoming also provides the opportunity to re-examine the political process of becoming itself.

In addition to examining Jackson as rhizome, a distributed person and an artwork with agency, I shall endeavour to discuss Jackson as a god in Frazer and Gell’s anthropological terms. There is something unique in the grand and extreme nature of his multiplicities and fluidity. He is hero and villain, the best and the worst of us. As such, he bears a significant resemblance to Frazer’s understanding of the King, and/or the god in human or artefact form, as a taboo subject. Frazer notes that the ‘divine person is a source of danger as well as of blessing; he must not only be guarded, he must also be guarded against’ (267). Frazer offers examples such as the Nubas of Eastern Africa who believed ‘they would die if they entered the house of their priestly king’; and the servants of the Mikado who cooked his food in new pots
every day, breaking them and laying them aside afterwards in order that no one else should eat or drink from them at the risk of their throats becoming ‘swollen and inflamed’ (266-267). The ‘divine person’ represents the power of the people and the danger of that power, taking up a position of cultural significance. I contend that Jackson is divine. I will argue that Jackson embodies a force and subjecthood that inspires mass sympathy and antipathy. He is consecrated through the powerful and violent response to his being, or more accurately, his becoming. A study of Jackson will disclose that magicians are positioned as extreme cultural identities, containing the broad knowledge that comes with this status. Jackson as god embodies the sympathetic power we crave and straddles the void (the otherworld) we fear.

As part of the exploration of Jackson’s rhizomatic development as an image-based god will be a discussion of his face. The transformations of Jackson’s faciality and the consequences this has had on the perceptions of his subjecthood is of primary significance. The becoming of Jackson’s face exemplifies his subjecthood as a contentious blend of multiple sympathies and antipathies. His becoming also enforces his position as an artwork with agency, as his own facial re-workings highlight his own authority.

Ultimately, this chapter seeks to understand a contemporary distributed subject. Jackson’s becoming without boundaries creates a grotesque construct of sympathetic desire. His grand and ambivalent subjecthood is a consequence of the power of mimesis and identifies the awesome sympathetic force of the representation in a world devoted to mass production. Jackson is a spectacular form of the contemporary western subject, capable of becoming limitless artworks, distributed globally.
Distributing Michael Jackson

I own pieces of Michael Jackson. A tape of Bad sits in my big dusty box of tapes with sunflowers on the side. His two quite appalling biographies, Moonwalk (1988) and Dancing the Dream (1992) can usually be found on the floor of my computer room. My iTunes playlists are filled with Jackson hits. I like to spend the extra money for music video versions, because my relationship with Jackson is more than auditory, it is most definitely visual. ‘Thriller’ has been my favourite Jackson song for as long as I can remember and it is still the most played in my collection, with ‘Smooth Criminal’ and ‘Ben’ following up in second and third places respectively. I need the Jackson of the fast paced and strong beat of ‘Smooth Criminal’ when I am excited and jumping out of my skin. I need the cheesy melancholia of Jackson and ‘Ben’ when I am feeling sorry for myself. I have moments, snippets, cuttings, productions, bits of Jackson scattered around my home and my life. But now he has died and he is everywhere. He doesn’t wait to be invited into my life. He is just there – on the cover of papers and magazines, in documentaries and televised memorial services, on posters and on the tip of friends’ tongues. I must admit that I am sick of him.

Gell, in his analysis of art, magic and the distributed person, examines the phenomenon of multiple indexes/selves and image production as sympathetic constructs. He offers the example of idols which challenge the distinction ‘between one and many, and also between inner and outer’ (139). He uses two examples. The first is the Polynesian sculpture entitled, A’a, a human-like figure covered with miniature versions of itself – ‘[t]his god sprouts little gods all over its surface’ (138).
‘[T]his image of a “singular” divinity represents divinity as an assemblage of relations between (literally) homunculi’ (139). Gell also uses the simpler example of Russian dolls; each doll is opened up only to find a smaller version of the same doll inside. Gell is fascinated by the construction of subjects without centre or singularity. In his analysis, he includes lines from Henrik Ibsen’s play, Peer Gynt, which read:

   Why, you’re simply an onion—
   and now, my good Peer, I’m going to peel you
   and tears and entreaties won’t help in the least.
   
   [Taking an onion, he strips it skin by skin]
   There goes the battered outer layer—
   that’s the shipwrecked man on the dinghy’s keel.

   This layer’s the passenger—scrawny and thin,
   but still with a bit of a taste Peer Gynt.

   Next underneath comes the gold-mining Self—
   the juice, if it ever had any is gone.

   This rough skin here, with the hardened patch
   is the fur-trapping hunter from Hudson’s Bay.

   We’ll throw that away without a word.

   Next the archaeologist, short but vigorous;
   and here’s the prophet, juicy and fresh—
   it stinks of lies, as the saying goes,

   and would bring the tears to an honest man’s eyes.

   […]
He pulls the whole onion to pieces.

No, I’m damned if we do. Right down to the centre there’s nothing but—smaller and smaller…

Nature is witty!

(1974, 191)

These lines indicate the discovery of a self without centre. Gynt is reflecting on his life lived, his ever-changing roles and identities. Gell cites this excerpt from Ibsen’s work because it poetically depicts his theory that an influx of ‘copies’ (or identities) results in a dissolution or dissipation of a centre/origin. A subject who exists as a multiplicity of images is a subject of the assemblage. The character, Peer Gynt, recites these lines himself, describing a life without cohesion or purpose. Gynt is absent of a singular self. There is no possibility of peeling away all the layers, all the facades to reach an ‘un-peelable’ centre, a truth that cannot be unwrapped and discarded, because there isn’t one. As each skin is peeled away, there are only ever more skins to be peeled. Peer Gynt exists as layers wrapped within and around other layers. However, the dissolution of the centre does not mean that the layers are meaningless, superficial skins surrounding a void. Gell posits the (multiple) meaning(s) of the subject in the skins. The subject consists of layers of skin. The qualities of each skin and its relationship with the other skins form the structure and substance of the subject.

The above passage from Peer Gynt also reflects another important idea put forward by Gell, which is that multi-layered subjects and objects can be dispersed. He believes layers are able to detach and consequently spread the subject. He calls the
detached skins or images exuviae, to denote that an index is part of a prototype and not just a representation (104), in contrast to semiotic theory. In semiotic theory, the index is a signifier that is not arbitrary, but can be inferred or observed, such as a photograph. Semiotician Charles Peirce describes indices as representations ‘whose relation to their objects consists in a correspondence in fact’ (1991, 30). A ‘prototype’ denotes the referent in a system of signs. For Gell, the act of image production is not simply a constructionist act of meaning making through the production of signs but an act of social relations, where the image becomes a social agent, a social body. According to Gell:

   We suffer, as patients, from forms of agency mediated via images of ourselves, because, as social persons, we are present, not just in our singular bodies, but in everything in our surroundings which bears witness to our existence, our attributes, and our agency.

(103)

He contends that images are ‘sources of, and targets for, social agency’. They are distributed skins peeled away from the body of the prototype. He believes they are ‘person-like’, in other words they can act and in so doing effect others (98). Therefore, Gell uses the term ‘index’ to denote any image which also functions as a secondary agent in social relations. The index is a secondary agent because it is a patient ‘with respect to the agency of the artist’ (the form of the index is shaped by the artist) and an agent with respect to impacting the victim/recipient (51). The ‘prototype’ functions as a primary agent and recipient of the act of image production. The prototype acts as a primary agent because it is the source from which the image takes its form. It acts as a primary recipient, because Gell posits that the image can
affect the construction/perception of the prototype. According to Gell, ‘[t]he prototype of an index is bound to the index by resemblance, and is thus subjected to control’ (114). Gell gives the image a physicality and power to change the subject, which I believe is necessary for magical effect. And his understanding of the image as part-self allows for numerous and varying possibilities in the expansion of the sympathetic subject.

As I previously mentioned in Chapter One, Taussig has also realised the substance of image production. Taussig came to the conclusion that the copy has the power to draw on the character of the original in the process of re-production. This is a fundamental truth of magic, as it is addressed here. Essentially, Taussig’s concept of the image is equivalent to Gell’s exuviae. For both theorists, the image is not simply a copy but an object that is imbued with the qualities of the subject. In this sense, the visual, auditory, textual images of Jackson act as both representations and parts of Jackson. His music encoded onto CDs has captured a part of Jackson. His voice having risen up inside his body has been exhaled and imprinted, relayed by these little discs. The photographs taken of him, not only illustrate his personhood, but seemingly capture dispersed particles of his body on memory cards or light-sensitive film.

_Taking In Jackson_

Each Jackson image peels away from his mediatised body and floats out into the atmosphere. Those of us who stand around this virtual being breathe parts of him in – in an assuredly grotesque process. His audience to absorb what falls away as Jackson is unable to be contained by corporeal bodily form. Off goes 8-year-old Jackson,
with big baby-doll eyes singing ‘I’ll Be There’. Away floats the little boy on the cover of *Rolling Stone* in 1971. Drifting is Jackson on an ambulance stretcher with his sequin gloved hand raised in the air after being burned in a Pepsi commercial shoot. Swirling above is his acceptance speech for the ‘Legend’s Award’ at the 1993 Grammy Awards, where he talks of a deprived childhood. Spinning are the clips of him arriving late to his child molestation case wearing pyjamas. Jackson hysteria sleeks into our lungs as he mesmerises hundreds-of-thousands in stadium concerts. And so on the process goes.

As Walter Benjamin wrote in his analysis of ‘The Work of Art in the Age of Mechanical Reproduction’:

>a work of art has always been reproducible. Manmade artefacts could always be imitated by men. Replicas were made by pupils in practice of their craft, by masters for diffusing their works, and, finally, by third parties in the pursuit of gain. Mechanical reproduction of a work of art, however, represents something new.

(1999, 212)

We live in a uniquely mechanized world filled with images, images which can be reproduced and distributed globally. This is the world that has captured Jackson, reproduced him and created him in an anthropological process of sympathetic control over his being. The power over Jackson’s being arises from the consumers’ ability to subjectively construct the subject Michael Jackson. Each consumer is exposed to a different series of Jackson images and he/she applies his/her own subjective perceptions and judgements to these images in order to determine Jackson’s
subjecthood. Each individual’s understanding of him is predicated upon the specific Jackson images the person has been exposed to and how they have been consumed. As previously noted, according to sympathetic theory, the way an index (representation) is constructed and received can change both the recipient of the index (viewer/consumer of Michael Jackson) and the prototype (Michael Jackson). Gell uses the example of photographs to address the power of the artefact. He notes that we don’t need to raise magical theories to explain that:

persons are very vulnerable indeed hostile to representation via images, not just to cruel caricatures, but even via perfectly neutral portrayals, if these are treated with contumely or ridicule. It is not just that the person represented in an image is ‘identified’ with that image via a purely symbolic or conventional linkage; rather, it is because the agency of the person represented is actually impressed on the representation. I am the cause of the form that my representation takes, I am responsible for it. [...] I can blame the photographer for taking the picture, but I cannot blame him for the way the picture came out.

(102)

Images of ourselves are bound up with our agency. They are our exuviae. Each image of Jackson, no matter how divergent, is ultimately the ‘truth’. This is due to a continuing cultural habit of viewing the photograph as a ‘message without a code’ (Barthes 1982, 196). While one could argue the average contemporary viewer is more aware of the constructed nature of images, there is a ‘lingering belief that the face captured in a photograph reveals, however unintentionally, the person rather
than the mask’ (Silver 1999, 140). How the viewer uses these ‘mirrors’ of the subject, how they interpret them, how they communicate their understanding of Jackson images, also creates Jackson. The process of image production functioning as a sympathy between Jackson and his audience in the creation of his subjecthood.

Michael Jackson is a chameleon-like brand, imprinted on an array of objects to be consumed. In addition to his face and voice appearing on numerous album covers, songs, magazines and video clips; he has been produced in doll form (Grant 2001, 84), in cartoon form in the *Jackson 5ive*, in wax form (82), there is a Michael Jackson chocolate bar (138), Michael Jackson soft drink (189) and more. Brenda Silver examines the consumption of celebrity images through an analysis of Virginia Woolf as icon and says of her visual reproduction:

> When Virginia Woolf’s face began to appear on T-shirts and then postcards and posters, it signified the most distinctive and perhaps the most powerful aspect of her iconicity. Visual images of Virginia Woolf have from the beginning played a central role in the production of her star image, evoking responses that transform her features into a mirror of the viewer’s own.

(1999, 128)

What Silver is describing here is a kind of sympathetic union between consumer and icon via the medium of image production. As previously stated, Frazer’s anthropological construction of sympathetic magic is founded on the belief that the representation is able to effect the agents connected to the representation, as is the modern theory of magic outlined in this dissertation. The agents may be the intended recipient (the consumer) or the prototype and/or magician (Woolf or Jackson). The
representations alter the perceptions and the relationships of the agents. Jackson, like Woolf, is re-produced infinitum across multiple media and genres, connecting with his viewers in unique and subjective ways. To each person who knows Jackson and identifies with him, he is an accumulation of specific texts made to become what his audience needs him to be. He is a distributed person. Jackson, or elements of Jackson, are produced with the goal of being consumed. His consumers take these images and use them in the sympathetic act of appropriation, such as using his exuviae to identify their affiliation and affection for Jackson. This might be achieved through wearing his t-shirt or embodying a desirable element of Jackson by following in his footsteps – if he endorsed a particular chocolate and the consumer buys that chocolate, the consumer is sharing in Jackson’s being through a shared act of liking the same chocolate (whether perceived or actual).

Someone who grew up in the same era as Jackson and was a fan of his music might experience Jackson as a musical pioneer and prodigy. Such a person might hold memories of the Jackson 5 performing on the *Ed Sullivan Show* (aired 14 December 1969), and Michael’s first televised moonwalk on the Motown Reunion Special, *Motown 25: Yesterday, Today, Forever* (aired 16 May 1983). They may consider his revolutionary approach to music videos with theatrical style films such as ‘Thriller’. An established Jackson fan may forever interpret images of Jackson with the personal truth that he is the ‘King of Pop’. This is evident in such adoringly constructed biographies as Adrian Grant’s *Visual Documentary* (2001). However, someone who is concerned with discussions regarding the construction and manipulation of the human form may find a different use for Jackson. He/she may focus on and consume images of Jackson, having determined that he is a model for
the mutability of form and identity, like Meredith Jones who views Jackson as an unpredictable, novel, and dynamic subject; a monstrous subject who represents the possible future of a makeover culture (2006, 2008). Or perhaps a teenager who is too young to remember Jackson’s last great hit (at least prior to his death and the renewed mass circulation of his music) and is predominantly aware of his tabloidesque escapades, may see him as some ‘old freak’. What they ‘know’ is that Michael Jackson dangles babies off balconies, wears surgical masks, lets boys sleep in his bed and so on. Such is the case with my 14-yr-old niece, who after watching part of the *Living with Michael Jackson* (2003) documentary, started laughing and said, ‘this guy’s a nut job’. Jackson himself could not control the plethora of images that circulate the various mediums which create the virtual world of the celebrity. He could not dictate how his audience chooses to consume him, each of us tainting his images with our personal history, bigotry and sympathy.

**An Artwork with Agency**

In describing Jackson as a distributed person, a subject consisting of multiple and dispersed representations, consumed by his audience, I do not intend to imply that he is in total a passive ‘man-made’ object or artefact created entirely by others. Nor do I argue that a sympathetic subject like Jackson is in total the realisation of Dr Phil’s fears – a ‘will-less’ clone. Jackson is what Gell describes as an ‘artwork with agency’.
In Gell’s discussion of imitative magic, he writes that the intended victim (in this case Jackson) of an act of magic:

appears twice; once as the prototype who causes the index to assume its particular form, and once as the recipient, whose injuries stem from the injuries that the index has received. The victim is ultimately the victim of his own agency, by a circuitous causal pathway.

Arguably, the most commonly recognised and mythologised magical practice which relies on this supposition is the voodoo doll. The victim is used as a model, the magician re-creating some of the distinguishing features of the victim when making the doll. In this respect, the victim is the prototype. In turn, when the magician harms particular parts of the doll in specific ways (e.g. sticking a pin in the doll’s leg), the victim is also intended to feel the same injuries in the same locations (a sharp pain in the leg). In this respect, the victim is shaped by the index. Jackson’s form influences the forms of Jackson images. In this respect, he is an agent. His images are also agents, helping to shape his audience’s perceptions, and in turn his audience become agents when their perceptions create new representations, new constructions, of Jackson. Jackson has played a dominant role in the production of his multiplicities. He has performed for his audience’s ambivalent delight for over four decades. He has created and re-created himself repeatedly, most notoriously through cosmetic surgery (which will be discussed later in reference to ‘becoming’). The viewers are not the only masters of Jackson’s fate.
Jackson himself realised the agency of Jackson artefacts and fought to both create his own and determine how his images should be used by others. He actively sought to perform his own representations of the ‘real’ Michael Jackson through the expository media of talk show interviews and autobiography. In *Michael Jackson Talks to Oprah* (1993), he talked about how he was a sad and lonely child off-stage/screen. He told of how his father teased, beat and frightened him; despite which Michael continued to love him and forgave him. He begged to be viewed as a misunderstood victim of tabloid media who was innocent of outlandish claims. He also admitted to limited plastic surgery, justifying it by stating that he was one of countless people in Hollywood who have had cosmetic procedures.

In Jackson’s infamous documentary style interview with Martin Bashir, *Living With Michael Jackson* (2003), Bashir opened the program with the following statement:

8 months ago I put a proposal to Michael Jackson – show me the real man, but show me everything. Make nothing off limits. He thought about it and then he said, *yes, come to Neverland.*

However, Jackson believed this attempt at self-creation was a failure; that Bashir had held up a false mirror. Therefore, Jackson once more sought to produce his own set of Jackson representations with, *The Michael Jackson Interview: The Footage You Were Never Meant To See* (2003)\(^{14}\). He used unused footage from the Bashir interview along with new footage to refute the distortions aired in the first documentary.

\(^{14}\) The footage used for this second documentary was provided by Michael Jackson, much of it shot by his staff, and given to reporter and talkshow host, Maury Povich and his staff. However, at the start of the documentary Povich claims that Jackson had no influence over the production of the documentary.
Jackson was in continual competition with his creators/audience to take control over his representations, to take command in causing the Jackson indices to assume their particular forms. His efforts, such as the interviews mentioned above, were attempts to tell the audience, *this is how you should interpret Michael Jackson images; this is how you should construct Michael Jackson*. According to Jackson’s testimony in these interviews one should realise that he is innocent of paedophilia charges, that he is a heterosexual man, and that any eccentricities attributed to him are because he was a man robbed of the normal rituals and environments of child development and thus he is a victim. However, ultimately his interviews, biographies and all other manner of self-authored or self-directed representations of Michael Jackson are representations; images which are produced, and re-produced, distributed and consumed by a subjective and heterogeneous audience. They are peeled off and digested creating new and varied constructions of Jackson. Reporter Alison Borshoff described Jackson as shocking and bizarre, his antics as chilling, and his version of fatherhood as disturbing after viewing the *Living With Michael Jackson* documentary (2003, 19). Whereas, another reporter, Kate De Brito, berated those who stood in judgement over Jackson after watching the documentary. She believed that he was a naïve victim in a freakshow and his condemners to be insatiable bigots who despise all those who ‘deviate from society’s accepted norms’ (2003, 91). Jackson undoubtedly had power in his own creation, but he could not create an unassailable ‘truth’.
**Horrific Artworks**

What also makes Jackson a particularly interesting subject was his contradictory responses to the realisation of his vulnerability as a ‘distributed person’ and his force as an artwork/s with agency. He made various efforts, such as those mentioned above, to present himself as a stable and predictable subject, one who can be fully understood and empathised with – a subjecthood maintained by him. However, he used his most powerful and enduring medium for the expression of Michael Jackson/s to re-confirm himself as a dynamic being, whose subjecthood is rhizomatic. He was a music artist and he used his musical artworks to distribute himself as shapeshifter.

Jackson’s music videos seem to act as explicit and intense displays of his own re-working of his subjecthood. His videos openly play with the glitch and the horror of the hybrid or ‘monsters’ which are ‘boundary crossers that inspire fascination and dread’ (Nishime 2005, 34). As Jefferson notes, in the ‘Thriller’ music video he ‘turns from a beautiful young man into a hairy, red-eyed werewolf’ (16), who then pursues his girlfriend. In the course of this music video he returns to boyhood before becoming a zombie, returning to boyhood once more and then flashing yellow demonic eyes at the camera as the video ends. In the music video for ‘Black or White’, he morphs from black panther to human. In this video, there is also a sequence of face morphs, the morphs shifting between different races, ages and sexes. While Jackson is not personally part of this morphing sequence, the lyrics, ‘I’m not gonna spend my life being a colour’, seems to indicate that the sequence is a reflection of his own transformations. In ‘Do You Remember the Time’, he is an ancient Egyptian magician, who escapes enemies by turning into swirls of sand.
carried through the wind. In ‘Ghosts’, he is a magician who shoots ectoplasm out of
his hands which then transforms into ghosts. He also pulls off his face, and then
smashes the skull underneath with his own hands to reveal his fleshy face again; he
strips off his flesh and becomes a dancing skeleton; he becomes a demonic creature
with fangs, prominent and heavily wrinkled brow and yellowish eyes; and he faces
off against himself dressed as a white middle-aged overweight man. He becomes the
fantastic and monstrous figure.

Patricia Ferrer-Medina studies monstrous figures in the form of ‘Wild Humans’. She
describes part-human creatures from the realm of horror fiction, such as Jekyll-Hyde,
who are exemplary models of subjects-of-becoming (2007). For Ferrer-Medina:

> The part-human, part-animal character refers to a semi-bestial
> being that lives between the human and the natural world. […]
> Since the character is composed of two different and contrasting
tendencies, each corresponding to a specific disposition and
environment, the human/animal character is caught between two
personalities.

(67)

Ferrer-Medina follows in the footsteps of Richard Bernheimer who argued the Wild
Human expresses a repressed desire for ‘unhampered self-assertion’ which persists:

> And may finally be projected outward as the image of a man
> that is free as the beasts, able and ready to try his strength
> without regard for the consequences to others, and therefore able
to call up forces which his civilised brother has repressed in his
effort at self-control. In contrast to civilised man, the Wild Man
is a child of nature upon which hidden resources he can depend
since he has not removed himself from its guidance and tutelage.

(1970, 3)

Jackson is the Wild Human, calling up his ability to transmogrify, an ability unavailable to his ‘civilised brother’. He can be man and other. This freedom is also a source of isolation as Ferrer-Medina notes:

The figure of the Wild Human is an ambiguous projection of civilised man. On the one hand, his life is unfettered and free. He is strong and derives his knowledge and strength directly from the natural environment. On the other hand, the Wild Man or Woman is childlike and egocentric, unable to exercise self-control and thus to live in community.

(69)

Ferrer-Medina believes the Wild Human is a libidinous, egocentric and remote character. Jackson reflects this in videos such as ‘Ghosts’, where he is shut up in the haunted mansion, hunted by the town’s people. He also becomes the Wild Man by straddling two environments, between the human and other, in his music videos. In ‘Ghosts’, he is both life and death. As ghoul, ghost and skeleton he performs the freedom and the fear of a subject beyond the constraints of life. In ‘Do You Remember the Time’, he is the magician who flaunts established laws of cause-and-effect and the limits of the human body through his ability to transform into sand, calling upon the ‘hidden resources’ of nature. He is in and of the desert, a territory which Ferrer-Medina highlights as a realm of the other, which is uncultivated, dangerous and beyond human control (68). And in ‘Thriller’, Jackson enacts the
most literal Wild Human when he becomes a wolf-man. The presence of the animal and/or ‘nature’ in these performances is a significant aspect in Jackson’s becomings which shall be discussed in further detail later and his becoming-hybrid.

A Fun Park Full of Jacksons

Jackson diverged upon multiple paths, re-presenting and re-creating himself through acknowledging the non-linear construction of a sympathetic being. He took advantage of the various tangents open to the mimetic subject. He recreated himself through fashioning ever new and divergent images to be consumed and used as new inspiration for new Jacksons. Jackson as active artwork seems to embrace the element of the spectacle in his identity and the cannibalistic behaviour of his audience. This is most clearly seen in his music video for the song, ‘Leave Me Alone’, where Jackson’s body literally becomes a fun park, which he himself travels through. He shows the viewer that he is aware of his ‘freak status’ through the shots of newspapers strewn throughout the park. The front-page headlines read ‘Michael’s Space-Age Diet’, ‘Bubbles the Chimp Bares all about Michael’, ‘Michael Proposed to Liz’, ‘Michael’s Cosmetic Nose Surgery’, ‘Michael and Diana Same Person’, ‘Jackson’s Third Eye Starts Sunglass Fad’, ‘Michael Weds Alien’, ‘Michael Frozen for 50 years’ and so on. A miniature Jackson rides through the world in a fun park carriage in the shape of a rocket with Jackson wearing a WWI aviator’s cap and goggles. He rides towards giant chomping dentures, ready to be consumed. He is surrounded by surrealist creatures, such as dog-headed business men. There are of course over-sized cameras going off in his face. We see the giant sized arm, of the fun park Jackson, being tied down by another dog-man. The Jackson in the carriage rides through an Elizabeth Taylor exhibit, with images from her Cat on a Hot Tin
Roof (1958) era. He rides out a door which turns out to be his own ear as we now see the giant fun park Jackson lying on his back. This Jackson lies on a dock by the water, with a rollercoaster reaching across his stomach. There is a Ferris wheel beside his ribs, and a parachute ride coming down from his left arm which is raised in the air. There are various shop fronts running along the ground, with what seems to be a shooting gallery between his legs. We enter back into the park and are now presented with a ‘freak show’ type arena with a two-headed goat on display, a chained chimp and an alligator spinning a grand piano on its nose. Finally, we find a third Jackson and the bones of the Elephant Man (with a literal elephant’s head) dancing together on stage. The Elephant Man, according to Joan Ablon, has become ‘a metaphor for the grimmest extreme of ugliness’. He is ‘the “other” […] a horrible, a pathetic and not quite human presence’ (1995, 1482). He epitomises the dejected subject displayed as a horrific delight, and in this music video Jackson is his compatriot.15 There are prison bars behind them and Jackson is attached to a ball and chain. Finally, the giant fun park Jackson breaks free and demolishes the carnival built around, on and inside him. He stands up and closes his eyes with a look of relief and freedom.

While this song and music video may be one of Jackson’s attempts at raging against his freakish identity, he simultaneously confirms himself as other through his fantastic creations. He also re-confirms that he has a distributed identity. It is not a fan, an other, who rides through the Michael Jackson fun park. It is Jackson himself. Like the god A’a, the fun park Jackson sprouts multiple miniature Jacksons that 

15 I shall continue the discussion regarding Jackson’s bond with the Elephant Man in the proceeding section, ‘Becoming-Hybrid’.
appear inside and outside, creating a body and subject of mirrored multiplicities. He is also an object (a fun park) which houses multiple others from Elizabeth Taylor to an alligator. They are all represented as being parts of Jackson. Jackson created artistic images which have the power to give shape to his identity. He identifies for his audience that he is ‘other’ than human, that he is malleable and transformative. In life, he was an agentic artwork who repeatedly sought to distribute himself as a shapeshifter.

Celebrity as god

In Latoya Jackson’s 2009 interview with Barbara Walters, which aired on *Sixty Minutes* (20 September 2009), she said that Michael wasn’t a god but he was god-like and he was closer to a god than anyone she had ever known. Latoya’s words could easily be dismissed as the ramblings of a mourning sister, who seeks to idealise her dead brother. However, the analysis of Jackson as artwork and distributed person presents a kind of rationale for understanding Jackson as god. Furthermore, an exploration of Jackson as god is integral to my analysis of modern magic and magicians as it produces increased understanding of the magician as a culturally and politically significant subject.

Previously in the chapter, I referred to Gell’s examination of the god A’a in artefact form, constructed as a human figure covered in numerous identical human figures. A’a consisted as a proliferation of subjects, embodying the representation of a god as multiple and boundless. Gell also contends that people can be gods in artefact form. They can be the focus of ritual and ceremonial adornment, just as objects can form part of social relations. Gell cites the example of the *kumari*, a young virgin girl who
is worshipped as a goddess, and goes through a process of consecration similar to that of wood or stone idols (151-52).

Jackson can be thought of in similar terms to A’a or the kumari girl. As an artwork, he exists as an unconfined multiplicity. He is a multi-layered image that has been ‘endowed with awareness, intentions, and passions akin to our own’ (Gell, 96). Furthermore, this artwork or series of artworks are imbued with the highest and most extreme limits of human attributes. Jill Neimark writes that ‘[c]elebrities are our myth bearers; carriers of the divine forces of good, evil, lust and redemption’ (1995, 56). In Giles and Maltby’s examination of the culture of celebrity worship they note the long history of this manner of adulation writing:

> a small group of human beings idolised by a much larger number – has existed in most societies to some extent through history. Very often those idols are never seen by their admirers because they only exist as legendary figures in oral narratives, so it doesn’t matter whether they’re real or not. Or they may be known, like monarchs or great military figures, largely through their representation on money or portrait paintings. For most people, the idols are just part of the cultural fabric, some of them superhumans to emulate, perhaps with moral significance.

(2006, 82)

Giles and Maltby also refer to the academic penchant for describing the relationship between the public and the celebrity as parasocial, ‘because [celebrities] exist beyond the person’s social network (though some social psychologists seem reluctant to acknowledge that they are different from ordinary relationships, while others think
they are not relationships at all)’ (82). The authors’ description of idols, both media and otherwise, bare a strong resemblance to religious deities. Deities are distant, unapproachable and/or unseeable minorities who are adored by the mass. The famous are abstract subjects who embody in a singular identity the multiple needs and desires of their worshippers. They are also subjects who are in some sense, consecrated. According to the *Oxford Encyclopaedia of World Religions*, ‘consecration is the act or ritual which invests objects, places, or people with religious significance, often by way of power and holiness’ (2000). Consecration involves the move from a secular context to the sacred. This is where the celebrity resides, in a world beyond ours, but one that informs and influences our world. It is a desirable world and the focus of great attention.

Jackson as god is a distributed series of artefacts; artefacts which represent extreme and significant cultural identities. Some of these artefacts are explicit images of Jackson as divine. In the first few minutes of the *Moonwalker* (1988) film, we see Jackson at the centre of a blacked-out stadium surrounded by thousands of sparkling lights/candles as though a god at the centre of his universe. As he begins to sing ‘Man in the Mirror’, the crowd erupts in an orgiastic response complete with wailing and collapsing followers, worshippers exhausting themselves in a devotional affective spectacle. We are also treated to various clips during the song, such as flashing images of Jackson leading military troops. This is in addition to clips of political leaders followed by images of third-world children accompanying the lyrics ‘I’m looking at the man in the mirror. I’m asking him to change his ways’. Jackson is a caring and merciful god who wants all of his children to be cared for. But he is also a powerful god, who brings force behind his words. And he is speaking to the ‘man
in the mirror’, his children who are made in his image. Of course the lyrics have a fairly obvious alternative interpretation, where one could view them as a conversation solely between Jackson and himself encouraging himself to be a better person. However, the context of this film seems to deny this. The song ends with his stock-standard messianic pose, feet together, arms out wide and his head facing up to the heavens. He is a prophet, or god in artefact form, bringing a message to his people. He is a mirror of Christ. His fans are mirrors of him. Copies of copies, accumulating sympathetic force. The sympathetic magician encapsulates the potentially ‘divine’ power that can be realised through magic and the figure of Jackson reveals the contemporary gods that are created through the technology of global media.

As previously mentioned, gods can also be feared or even detested, as well as adored. Frazer claims that some cultures killed their man-gods when their bodies and powers began to decay with age or sickness, as the status of the divine persons reflected the status of their people (349-50). Consequently, the passionate and ambivalent reactions to Jackson can be further understood in terms of his position as divine figure. Perhaps his unstable becomings ignited a fear that his dangerous power was pouring out through the tears in his subjecthood. The fluidity and openness of magical structures must lend themselves to the possibility of fissures and bleeding. A master composed of enormous sympathetic force must be a dangerous possibility, with loose borders there may be a tidal release of magical energy. There is also the possibility that if the master, as magical vessel, loses his power; it signals a broader
dissipation or destabilisation of magic. If this were the case, Jackson’s instability could have been a sign of his magical decay. This latter possibility seems particularly fitting considering his recent death.

However, it should be noted that identifying Jackson as magician and god is problematic, according to Frazerian theory. Frazer concluded that magic and religion were two distinct realms, magic being the realm of the pre-scientific uncivilised subject who sought to place fate in his/her own hands – i.e. through magical ritual he/she could produce the desired result and reality. Whereas, Frazer contended the religious subject was a submissive subject who needed to placate a higher-power in order that this higher-power would produce the desired results (63-64). However, the worshipping of distant and abstract idols seems to be a sympathetic act, enacting Frazer’s primary description of magic as the belief ‘that things act on each other at a distance through a secret sympathy’ (16). The sculpting of gods, whether it be the A’a or kumari girl or Jackson, are acts of creation and control, defining the gods’ form and power. It places, at least to some degree, the limitless power of the transcendental in the hands of the people – that is an act of magic.

The Rhizomatic Subject

The subjecthood of Jackson as an assembled, layered, distributed and contrasting god described above adheres to the concept of a rhizome. Sermijn, Devlieger and Loots, in their study of rhizomatic narratives of the subject, note that the rhizome narrative does not have an all seeing eye or centre to the subject (2008, 638). The subject created through the narrative is a result of the multiple gazes and subject positions present in the telling (639). There are a multitude of tellings, and any attempt to
attach unity to a rhizome is an illusion (641). Likewise, Jackson is a seemingly chaotic series of representations, some of which he assigned himself as author, others created by his consumers using his exuviae.

One of the most interesting elements of a rhizomatic understanding of the subject is how it embraces multiple and unpredictable virtualities. It seems sympathetic in nature, a structure of endless possibilities via limitless connections and growth. This structure of subjecthood is in contradistinction to the ideal subject in Chapter Two. According to Dr Phil, each person is pre-programmed with particular skills and a god given destiny. In order for one to reach fulfilment, happiness, authenticity, he/she must find this authentic path and follow it from point-to-point. Jackson is clearly excessive to this linear and singular path. He is a glitch in the linear path, or the birth of an unpredictable rhizomatic entryway, and this is one reason why he has taken up the position of a god.

One of the primary ways Jackson has been identified as a glitch in linearity is via the development of his face. There are widely circulated images of how ‘Michael Jackson would look without plastic surgery’ (See Figure 1), created by forensic artist Stephen Mancusi (http://www.forartist.com). They are computer generated images, created with the software used for producing adult images of missing children. This age progression technology is used to help people find long-lost loved ones by taking the kept images of childhood and advancing them using the known and predictable trends of aging.
Figure 1: Computer Generated Age Progression Images of Jackson. Images created by Stephen Mancusi http://www.forartist.com
The Jacksons at ages 45 and 70 (Figures 1b and 1c) are the artistic progressions of the original image of the Michael Jackson child (Figure 1a). Figures 1b and 1c are designed to show the viewer how Jackson should have looked. These adult Jacksons follow the logic that if a child has a wide nose, so does the adult. If the child has thick eyebrows, so does the adult. And the same applies for the large front teeth and the birthmark or mole on the right cheek. These images also clearly adhere to the linear reasoning that if the child has dark skin, so will the adult. Figures 1b and 1c are essentially the child Jackson with sagging skin, wrinkles and greying hair. They are the rhizomatic potentialities of Jackson that were never realised. These images are produced using the technologies created, in part, to help find missing children (and catch criminals), and it seems it is used for the same reason with respect to Jackson. The illustrations of Jackson at ages 45 and 70 are looking for a lost boy seen in the original image.

The Jackson/s who actually developed from the child in the ‘original scan’ has not adhered to Mancusi’s illustrations. The image of Michael Jackson pictured in the This Is It film (2009) (See Figure 2) could not have been created by Mancusi using only the image in Figure 1a and no other knowledge to guide him.
The realisation of this Jackson is a rhizomatic process. Sermijn, Devlieger and Loots write:

A rhizome is an underground root system, a dynamic, open, decentralized network that branches out to all sides unpredictably and horizontally. A view of the whole is therefore impossible. A rhizome can take the most diverse forms: from splitting and spreading in all directions on the surface to the form of bulbs and tubers. The most important characteristic of a rhizome is that it has multiple entryways. From whichever side one enters, as soon as one is in, one is connected. There is no main entryway or starting point that leads to ‘the truth.’ ‘The truth’ or ‘the reality’ does not exist within rhizomatic thinking.

Figure 2: Michael Jackson in the documentary, *This Is It* (2009).
There are always many possible truths and realities that can all be viewed as social constructs. The existence of multiple entryways automatically implies *multiplicity*.

(637)

According to these authors, what makes the rhizomatic narrative of the subject so important is that it frees itself from the singularity of truth and the point-to-point linear structure of cause and effect. A rhizomatic Jackson can have ‘multiple entryways’. There are a plethora of sources or causes that have enabled Jackson to blossom in unexpected ways. With no identifiable singular cause ‘or starting point that leads to “the truth”’ of Jackson’s subjecthood, he cannot be expected to ‘become’ the Jacksons pictured in *Figures 1b and 1c*. They are the products of the singular starting point *Figure 1a*. The rhizomatic Jackson pictured in *Figure 2* embraces the possibility of a subject without origin or ‘a view of the whole’, where there are no identifiable limits in his becoming. With the presence of ‘multiple entryways’, one can form an understanding of the subject, Michael Jackson, only through grasping on to, witnessing, or consuming small elements (selected images) of Jackson.

**The Face as Sympathetic Centre**

Jackson’s face is not only important as an effective signifier of his rhizomatic subject, the human face, in general, holds an incomparable position in the visual world as signifier of the subject, and as a sympathetic platform for performances of the self. And, as previously mentioned, part of the magical act often involves play and performance – representation through the dynamic transformation of the body.
In psychologist Silvan Tomkins’ study of affect, he comes to the conclusion that the face is the most singularly familiar and complex object in the space of human experience, capable of transmitting and receiving information, much of which is concerned with affect (1962, 214-15). Deleuze and Guattari have also examined the concept of faciality, and believe the face is a predicator of behaviour, a tool of communication and emotional expression, a component of relationship development and socialisation, and a character map. It is a sympathetic interface. The authors write:

The form of the signifier in language, even its units, would remain indeterminate if the potential listener did not use the face of the speaker to guide his choices ("Hey, he seems angry …"); "He couldn’t say it …", "You see my face when I’m talking to you…"; “look at me carefully…”).

(167)

Deleuze and Guattari realise the face as an essential ‘guide’ in communication, shaping the form of a message as it leaves the body of the sender and is taken in by the recipient. The art historian James Elkins describes faces as ‘centres of power, things that punctuate our world with little circles of meaning when everything else is less important’ (169). Elkins tells us that ‘the absence of a face is intolerable’ and uses the example of an associate who works with burn victims. Elkin’s associate found that without a face to visualise, when confronted with the monstrosity of injured skin, it is almost impossible to talk to the person (166). Elkins, and these other theorists, describe the face as the most prominent marker of identity in a visual
world. Visual beings need the surface of the face to display their selves and in turn to know each other. The proof of such theories is realised in the use of faces to mark identities on licenses, security passes, passports, and mugshots.

The neurophysiologist Jonathan Cole, whose work shall be explored in Chapter Five, theorises the origins of faciality through the analysis of the mother-infant dynamic (1998). Cole believes the importance of the face is apparent from the first days of life (110). Before an infant begins playing with his/her first objects, he/she discovers the human face is the primary source of identification. A child looks up at his/her mother’s face and the face becomes a lifelong magnet for the gaze of the individual. The infant imitates the mother’s expressions and responds with simple facial movements. According to Cole, these interactions are the beginnings of relationship development and socialisation (110). The mother’s face deciphers the world for the infant. The expressions the infant shares with his/her mother may be limited in range and exaggerated in nature (111), but it is enough for him/her to learn what is ‘good’ and what is ‘bad’. The baby comes to understand that squinted eyes and lifted corners of the mouth are the signs of joy. Conversely, when the corners turn down and the eyebrows harden, either raised high or dipped low, the meaning is negative. It is a primary supposition of Frazerian magic that one creates a desired or dreaded outcome simply by imitating it. Likewise, in the case of Cole’s mother-infant dynamic, when the mother smiles at the baby she is imitating or creating the image of joy for her child. The child then re-produces this image and in doing so experiences (at least to some degree) the joy the mother wishes to create. The infant
learns about self and world via the dynamic incorporation of the mother’s movement. At these initial stages of life the face is already instituted as the centre of identity and a sympathetic surface.

The sympathetic path between self and other provided by the face is instrumental to our survival, particularly as social beings. In Maria Angel’s study of embodiment, affect and aesthetics she writes, ‘the faces of others, give us back to ourselves in different forms’ (2005). She continues, ‘according to evolutionary theory, the human face evolved to be looked at, in a context where the human organism is irrevocably social and where communication is paramount to survival and communal life’ (325). According to Angel, we are ‘hard-wired’, we have evolved, to focus on the face as a centre of meaning and subjectivity. It is our instinct to use the other’s face to determine the self of the other as well as to understand one’s own self as a social and sympathetic subject mirrored in the face of the other.

Considering the emphasis placed on the face, it is unsurprising that one would look to Jackson’s face first in order to decipher this highly visual entity. His face is used to create a link between Jackson and his viewers, a link that exists despite the distances and obstacles between the subjects. Michael Jackson’s face has become one of the most widely recognised and discussed surfaces of the late twentieth and early twenty-first centuries. It is also his face that exemplifies his status as a grotesque work of art. David D. Yuan writes, ‘[f]or a perplexed public, it is above all what Jackson has done to himself (the cosmetic surgery, white makeup, hairdos, and costumes) […] that make him freakish’ (369). On the anomalies-unlimited.com
website there is a page dedicated to Jackson’s transformations. For the period c.1997, the authors write the following:

The Art of Cosmetology seems to be an unknown science in his part of the world and he’s getting his face done at the local morgue […]. Each photo that shows up in the coming years never fails to make people’s jaws drop. Mike gets worked up saying he doesn’t see why everyone but him can have a little nip and tuck on the nose […]. He doesn’t think he looks that different and wishes people would leave him alone. We wish he’d leave his face alone.

(http://www.anomalies-unlimited.com)

And on the website www.awfulplasticsurgery.com one of the featured faces, Miss Korea 2008, is described as having ‘a Michael Jackson nose’. ‘What’s a Michael Jackson nose? It is a post rhinoplasty nose that does not look like it could have ever grown from your face’ (http://www.awfulplasticsurgery.com/category/bad-nose-jobs/).

**The Mask**

Jackson’s indeterminate and fluid facial progressions could be viewed as acts of masking - veiling of the ‘natural’ and ‘original’ with non-transcendental and non-genetic human artworks. Matthew Gilbert, in his review of the *Michael Jackson 30th Anniversary* show, refers to Jackson’s mask-like features. Gilbert writes:

Every few years we update our Michael mask, under the supervision of the famous Dr. Stretch N. Denude of Hollywood.

As Michael’s features relocate (note: Don’t forget to check out
our Big Dig models), we want to provide you with the most accurate mask available. First our designers start with a bust of Minnie Mouse. Then, carefully, they sculpt it, scraping and sewing and dyeing until they get it just right. Indeed, tonight you’ll see the mask in full detail – it’s the one on the fellow throwing delicate air kisses from his perch.

(2001, F1)

Gilbert’s review of Jackson’s face refers to the extreme and dynamic malleability it has displayed. His faciality is closer to that of the moulded plastic toy or cartoon character than that of the fleshy human. His face as sympathetic sign or shadow of the Platonic Form is always in flux. It is an unstable signifier of an unstable subject.

Jackson’s indeterminate and confusing faciality supports the traditional notion of the mask as an object of camouflage or subterfuge. A mask hides what lies beneath. A mask hides the face and, as previously mentioned, the face is the visual and communicative nexus of selfhood. Therefore, the mask conceals the exterior displays of the self, preventing full view of any kind of authentic self. In Awakenings, Sacks repeatedly refers to the facial masking of his patients as a way of describing the distance between him and the patients, as well as the discontinuities within the patients. For example, one of the patients, Frances D., told Sacks her face would assume ‘a fixed angry or scared expression’, ‘although she experienced neither rage nor fear while they lasted’ (41). Elkins has also investigated pathological masking as a veiling of the subject. After examining a lithograph of a man suffering from
syphilis and mercury poisoning, he ponders over whether the face in the image still expresses the self clearly or whether:

- illness has gotten a grip on his mind: he may have become somewhat distracted, unresponsive, or violent—and in that case,
- what we see is not an expressive face or a face that expresses an entire intact mind but a face that communicates a mind and also an illness. The illness begins to speak through the face [...]. Part of this face is a man suffering and part is a bacterium and a chemical element interfering with the mind and taking over the face.

(1997, 189)

According to these theorists, with the masking of one’s face one enters a limbo of identity, between a perceived truth which lies behind the mask and the desire (at times the desire of an other, such as a pathogen) displayed upon the mask. Jackson’s face as a mask (or faces as masks) disrupts the view of his subjecthood. His mask/s display an otherness that distracts his viewers’ attention.

**The Performance of the Mask**

The mask is also part of an act. Marshall McLuhan states the mask ‘like the sideshow freak is not so much pictorial as participatory in its sensory appearance’ (cited in Fiedler, 18). Furthermore, this participatory act can produce ‘the sense of watching, unwilling but enthralled, the exposed obscenity of the self or the other’ (Fiedler, 18). Such is the case with Jackson. His donning of masks was part of his performances, a playful game with his audience. Jackson’s controversial masking is unique to the contemporary world of mass media production. Subjects like Jackson create
contrasting and startling images (or masks) that take advantage of the fluidity of the subject offered by this culture and break through the numbing stream of images we are confronted with daily, grabbing our attention and desire. His viewers were and are enthralled and disgusted by his acts of masking. As Yuan notes, he has been famous for his ‘freakishness’ since the mid-1980s and at the same time he has been recognised as a prodigious and unequivocally popular musical talent (368). The grotesque spectacle must both delight and appall the viewer. Tomkins’ study of affect reveals the intimate relationship between interest-excitement and negative affects such as disgust. Tomkins writes:

The quest for the novel loses its appeal when the individual is satisfied with and enjoys the world as it is. An enduring discontent or at least the absence of complete seduction by the familiar is a necessary condition for the pursuit of the novel.

(1962, 354)

Tomkins notes, interest is ‘activated by the degree of novelty of stimulation’ (338). In the case of disgust-contempt the interest is directed towards the object, a distancing between the self and the other, where ‘there is least self-consciousness, with the most intense consciousness of the object’ (128). He also notes that disgust can arise out of excitement and ‘an underlying wish to incorporate the object or come closer to it’. He continues, ‘disgust may be aroused by a very attractive sex object, if there is both a strong wish for and fear of sexual contact’ (1991, 130). Tomkins is describing a sympathetic-antipathetic tug-of-war.
In identifying the mask as part of a performance, I do not mean to suggest that it is simply a tool for subterfuge. It does not simply act as a wall between the self beneath the mask and the self of the viewer faced with the mask. It remains a sympathetic tool. Part of the performance of masking involves the mask-wearer’s need to become other, to appropriate the other, as his audience shall appropriate him. In the *Literary Impact of the Golden Bough*, John Vickery contends that Frazer’s study of myth and magic infers intriguing possibilities for the mask as ‘more than a device for promulgating social hypocrisy and disguising personal insecurity’ (1973, 194). According to Vickery, Frazer’s work revealed that masks have more complex uses. He writes:

> masks were worn by kings, people personating gods, women, actors, and members of secrets societies, and they were employed in religious performances, fertility rituals, and scapegoat ceremonies. They also were designed to represent demons, gods, or spirits.

(194)

What Vickery sees in Frazer’s study of masks are ‘efforts to acquire a new unity of self through becoming what one sets out by imitating’ (194). Thus, by viewing Jackson’s face and bodily performances as kinds of sympathetic masks, one is able to identify his masking as an act of incorporating the other through imitation. Each of his becomings described in this dissertation are representative of a continual shift in sympathetic presence and subjecthood.
However, as previously stated, Jackson’s appropriation of the other is extreme and multiple. He absorbs, he imitates, contradictory others such as the binaries of masculine and feminine. Jefferson writes of Jackson’s face, ‘[l]ook at the face and you might see a transsexual […]. Is it black or white, male or female? There is no realism here, only mythology. The face is a ceremonial mask, gorgonlike. It is affixed; it was achieved through surgery’ (79). Jackson represents the danger of sympathy and the mask. In *Mimesis and Alterity*, Michael Taussig notes that mimicry can give rise to the ‘power to falsify, mask, and pose’ (1993, 43). There is a danger of ‘death or epistemic panic’ (43) when one becomes many or the self becomes all-other. Taussig uses Flaubert’s, *The Temptation of Saint Anthony*, to illustrate his point. In Flaubert’s tale, the hermit succumbs to ‘the general spectacle of mimicry’ saying:

> plants are no longer distinguished from animals […]. Insects identical with rose petals adorn a bush […]. And then plants are confused with stones. Rocks look like brains, stalactites like breasts, veins of iron like tapestries adorned with figures.

(43)

Flaubert’s extract describes fluid and unstable identities where there is no differentiation between objects. The quantity of and variations between Jackson’s masks have also become a disorienting and blurred transitioning of subjecthood. In addition, some of the most recent images strongly resemble a literal white mask. As I sat watching *Living With Michael Jackson*, some shots of his face became singular and featureless white blurs. It may have been the lighting or the quality of the video, but I couldn’t help but think of the colour of white as a non-colour, incorporating all
other colours (or light waves) in the spectrum. Michael Jackson’s face, devoid of pigment and the idiosyncratic marks of the individual (moles, scars, acne marks, wrinkles), is everything and nothing. It is as though all of the multiple others he has absorbed, some of which have been mentioned here, have fused into a subjecthood that is beyond the in-between of the becoming and become the all expansive nothingness of a beyond-becoming. This is the danger of sympathetic possibility and expansion.

**Becoming Minoritarian?**

It is clear from Jackson’s transformations that sympathy can be used to appropriate unexpected futures and selves. The sympathetic development of his multiplicities and unpredictabilities involves a becoming-other. But does this becoming coincide with the concept of ‘becoming’ as realised by Deleuze and Guattari which, as I previously stated, refers to a rhizomatic growth, a deterritorialization of subject and medium, which always involves a becoming-minoritarian (292)? Does Jackson sleek away from a dominating or majoritarian pathway of subjecthood through his tangential processions? In Brian Massumi’s study of becoming he asserts, ‘becoming begins as a desire to escape bodily limitations’ (94). Furthermore, he writes:

> [It] is an equilibrium-seeking system at a crisis point where it suddenly perceives a deterministic constraint, becomes ‘sensitive’ to it, and is catapulted into a highly unstable supermolecular state enveloping a bifurcating future.

(95)
Such a description of becoming seems unproblematic when looking at Jackson’s process of subjecthood. Whatever his reasons, whatever his actions, it is clear that he was attempting to escape the constraining limits enforced by the ‘traditional’ or ‘natural’ biological and social laws of bodily possibilities.

In Jones’ study of Jackson, she uses the intriguing concept of ‘prosthesis’ to explore his ‘unnatural’ act of becoming. Jones describes his bodily alterations as artistic productions, and Jackson an artist who performs ‘a prosthetic identity that is monstrous in the sense of ushering in that which is not yet known, welcoming many futures, opening to alterity and being in constant change’ (2008, 178). For Jones, the prosthesis is not simply ‘a way to fix lack, a way to create wholeness and autonomy and therefore bounded subjects’ (151). It can be viewed as a tool to create ‘[u]bounded, networked and changeable subjects’. Jones affirms Joanna Zylinska’s positioning of prosthesis as ‘an articulation of connections and slippages between the self and its others’ (2002, 216). In this light, prosthesis is an instrument for sympathy and becoming used to stretch the boundaries of the self and blur the distinction between self and other. Jackson’s performance of ‘a prosthetic identity’ embraces the unstable future and subjecthood of becoming.

However, what is possibly more problematic when discussing Jackson and becoming is the contention that becoming always involves ‘becoming-minoritarian’ (Deleuze and Guattari, 291). According to Massumi, becoming involves a reaction to a molar-moral that tries to ‘fashion society into sameness’ of varying degrees (119). Furthermore, Massumi argues the movement of becoming-minoritarian is a political movement away from a white heterosexual male subject. However, as Figures 1 and
Jackson’s becomings have involved a move from the minority position of black child to the majority position of white man, a powerful white man, after all he is the ‘King of Pop’. Jackson’s efforts to become a white heteronormative ideal can be seen in his donning of military style outfits and two heterosexual marriages. He presents a powerful image of patriarchal power in the initial sequences of the HIStory on Film – Volume II (1997) DVD. Jackson begins by leading a military force of thousands into a city. Then, an enormous ‘stalinesque’ statue of Jackson is unveiled as the entire city erupts in devotional screams. There have also been long persisting allegations that Jackson tried to escape his African heritage. Journalist David Gates contends Jackson’s erased ‘blackness’ reveals a disgust of his racial heritage. He writes:

He neutered himself racially […] his hair went from kinky to straight, his lips from full to thin, his nose from broad to pinched, his skin from dark to a ghastly pallor […]. The hopeless task of sculpting and bleaching yourself into a simulacrum of a white man suggests a profound loathing of blackness.

(2009, n.p.)

And African-American literature professor, Michael Awkward, notes that even back in the early 1980s and the release of Thriller it could be seen that ‘he had already begun to undergo cosmetic work whose ultimate effect was to erase his own natural blackmaleness’ (1995, 178). Awkward continues:

Despite [Jackson’s] claims to racial pride, however, despite the sympathy engendered by his assertion that he suffers from what is often a psychically crippling disease [vitiligo], Jackson’s
‘scopic’ assumption of nonblackness must be seen as neither inevitable nor as ideologically innocent. In fact, we might say that his disease has liberated him from being bound to a black physicality and has provided him with the opportunity to choose whether to cover (or, as it were, uncover) whiteness or blackness16.

(179)

Awkward claims that even if we were to believe Jackson’s diagnosis we could not believe his resulting ‘whiteness’ was the only inevitable outcome. Jackson, like all of us, was faced with a stern border surrounding the limits of racial identification. According to Awkward, vitiligo offered a breach in that border, of which Jackson took full advantage.

Michael Jackson endeavoured to take on the image of white male power (consciously or otherwise), this much is clear. Thus, it cannot be said that his becoming is entirely a becoming-minoritarian. Of course, his performances of a white heteronormative masculine identity are problematic, because alongside the distribution of images of Jackson as this patriarchal ideal, are performances of minoritarian positions or contradictory subjecthoods. Jackson altered the patriarchal image of the military leader through the use of sequined and bejewelled uniforms which might lend themselves to a ‘camp’ interpretation. His marriages were marred by allegations of the sexual abuse of boys, and claims that the marriages were publicity stunts (Schoemer 1996, *Jackson-Presley split to be quick, painless* 1996, Spetalnick 1996).

16 Awkward notes that sufferers of vitiligo generally darken the light patches of skin caused by the disease, in order to give an even skin tone.
In Diane Sawyer’s *Primetime Live* interview with Jackson and his first wife Lisa-Marie Presley, Sawyer tells the couple, ‘as you know the reaction to this marriage has been across the spectrum - everything from astonishment, to delight, to suspicion that it was somehow too convenient’. The ‘convenience’ Sawyer is referring to is Jackson and Presley marrying in 1994, one year following the first child-molestation allegations directed at Jackson. Also, as previously noted, his face became a blend of feminine and masculine stylings. Jones describes him as intergender rather than transgender and writes that his ‘feline body and remodelled face is a careful arrangement of “masculine” and “feminine” features: the jutting cleft chin is at gender-odds with the wide tattooed eyes and minuscule nose’ (2008, 164). Some could argue that his becomings, in one sense, involved a continuous transitioning from a black boy, to a gay man, to a white boy, to a patriarchal leader, to a white woman and so on. However, despite the glaring presence of the minoritarian positions in his progressing identities, one cannot avoid the lurch towards the molar identity, a becoming-majoritarian. He seems to defy the argument that all becomings are a move away from the standard; however it could be argued that a becoming-majoritarian cannot be successful. It is obvious that Jackson never became one of the idealised subjects of the existing order. There is a long standing history of the power-laden majority protecting its borders. Jackson as white male authority would not be accepted by those already in this position or cultural identity. Naomi Pabst, in her analysis of cultural tensions and responses to interracial individuals, cites the enduring ‘one-drop rule’ or ‘the law of hypodescent, which denies black/white interracial persons a legitimate claim to whiteness and assigns them to a purportedly lower rung on the heritage hierarchy’ (2003, 179). Such rules and laws have denied ‘whiteness’ to anyone who can be found to have any ‘non-white’ ancestors. Jackson
was not interracial in genetic terms, but he was an African-American with white skin. He was a visually white man, but there is ample photographic proof that he has black origins. As Awkward writes:

However Jackson looks now, however far his appearance changes from what might have been, in the absence of skin disease and cosmetic intervention, his natural visage and ‘flesh,’ he remains, because of the widely distributed pictorial history of his dark past, indelibly black.

(179)

Jackson is a traitor and impure. What we are left with is a subject who stands ‘between’ antipathetic identities, a minority he apparently sought to evade and a majority he wished to invade. Perhaps, in this respect, he remains a subject who becomes-minoritarian, being a figure of antipathy instead of sympathy. Jackson ultimately succumbed to the dangerous possibility of becoming, sliding ‘into a cascade of differentiations’ (Massumi, 102) and ‘ceasing to be seen to be what [he truly was] in order to become what [he could not] be: supermolecular forever’ (106). I believe, Jackson as a glitch of becoming, rests on this point, not a move to totally negate the standard, but a becoming-hybrid. He reveals not just the fluidity and multiplicities open to the sympathetic mapping of the contemporary subject, but the ever present constraints that bind and warp the paths of sympathy.

**Becoming-Hybrid**

The sympathetic subject can never truly disconnect himself/herself from past ‘selves’ – pasts, presents and possible futures are always linked in some manner for the sympathetic subject. However, the hybrid makes unexpected connections and leaps.
Therefore, I think it is most effective to view the magical subject who embraces tangential virtualities as becoming-hybrid. The hybrid is also a glitch. It involves antipathy towards a singular and self-contained subjecthood, instead embracing a borderless sympathy between bodies and identities. In the previous chapter, I discussed the sci-fi hybrid the Borg, part-human, part-machine, which challenged the discrete boundaries and individuality of the human subject. Another popular form of the hybrid, which seems apt when discussing Jackson, is the becoming-animal.

At the outset of their exploration of becoming, Deleuze and Guattari refer to the film *Willard* (1971). The title character is a lonely and troubled man who befriends two rats, Ben and his female companion. His two rat friends and their offspring destroy his enemies and become his family until Willard betrays them by letting human co-workers kill Ben’s female companion. In this instance, Willard is afraid to step in and declare his allegiance to the rats. As punishment, Willard is torn apart by the rats. Deleuze and Guattari believe this story reveals the tensions of becoming, where the subject merges two identities (human and rat) with the result of becoming neither. Willard can never truly become a rat despite his love for and affinity with the animal. This is shown when he permits the murder of the female rat. According to Deleuze and Guattari, Willard pauses in his attempts in becoming-rat in this moment and tries ‘to remain among humans’ (233). However, he cannot remain in this world either, having become other. ‘Becoming is an in-between’ (Deleuze and Guattari, 293). One of Jackson’s most popular hits, ‘Ben’, is the title song for the soundtrack for the sequel to *Willard*. In the sequel, *Ben* (1972), a young dying boy, Danny, befriends the killer rat from *Willard* and protects him from the police who hunt his murderous pack. While the rest of the human characters reel in terror at the sight of
the rats, Danny finds companionship. As the humans hunt down and kill the rest of the pack, Danny seems to grow stronger, as noted by his sister, with his efforts to save the rats. The film ends with Danny finding the injured Ben and tending to his wounds, telling the rat, ‘you’ll get well, Ben, and I’ll get well, we’ll get well’.

Jackson loved the movie and said he did not find the boy’s love for the rat odd (Jackson 1988, 99-100). He performs his own becoming-rat through the title song as he sings:

> Ben, the two of us need look no more  
> We both found what we were looking for  
> […]  
> I used to say ‘I’ and ‘me’  
> Now it's ‘us’, now it's ‘we’

Jackson sings of a union between himself and the rat, where he moves from a singular self-identification, ‘I’, to the multiple, ‘we’. He becomes part of the pack. Deleuze and Guattari herald the ‘pack’ animal as epitomising becoming. They use the term pack to denote ‘[p]ropagation by epidemic, by contagion, [it] has nothing to do with filiation by heredity’ (241). This describes Jackson’s process of becoming, where he has absorbed and appropriated multiple others, creating combinations that are ‘neither genetic nor structural’ (242).

In addition to becoming-animal through his performance of a love song to a rat (as well as his previously mentioned musical performances of the Wild Man), Jackson also chose hybridity through living with a menagerie of animals at Neverland; his publicised affection for his chimpanzee Bubbles (Elliott 1993, D22); performances such as putting on a rabbit mask and then turning into a stop-motion clay rabbit
character in *Moonwalker*; and heralding animals as his brethren, or as creatures sympathetic to his plight. In *Michael Jackson Talks to Oprah*, he says, ‘I find in animals the same thing I find so wonderful in children. That purity, that honesty, where they don’t judge you, they just want to be your friend. I think that is so sweet’. He created a sympathetic link between himself and ‘animality’. He became part of the pack.

Jackson also admitted his own perceived sympathetic union with Joseph Merrick, aka the Elephant Man (Yuan, 369). I previously mentioned his use of the figure of the Elephant Man as a fellow freakish sideshow prisoner in the video clip ‘Leave Me Alone’. According to Jackson biographer, J. Randy Taraborelli, Jackson likened himself to the Elephant Man as ‘an outsider in a seemingly endless search for love and acceptance’ (1991, 361). Merrick was one of the most famous ‘freaks’ of the latter nineteenth-century world of carnivals and sideshows. His still debated disease (Tibbles and Cohen 1986, Ablon 1995) resulted in immense tumorous growths on his head and down the right side of his body. His deformity was bodily in nature. He was a visual spectacle that captivated the minds of many and has inspired multiple retellings of a mythical subject with a grotesque body and unsullied mind (Graham and Oeschlaeger 1992). He was considered so freakish that his origins are often described in mythical hybrid terms. His own purported autobiography (which

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functioned as a marketing pamphlet when he was displayed in a London sideshow), reads:

I first saw the light on the 5th of August, 1860. I was born in Lee Street, Wharf Street, Leicester. The deformity which I am now exhibiting was caused by my mother being frightened by an Elephant; my mother was going along the street when a procession of Animals were passing by, there was a terrible crush of people to see them, and unfortunately she was pushed under the Elephant's feet, which frightened her very much; this occurring during a time of pregnancy was the cause of my deformity.

(cited in Howell & Ford 1980, 182)

This fabled origin of Joseph Merrick’s mysterious illness partakes of the sympathetic fear expressed by Dr Phil. The subject, Merrick, was perverted by representations of the other. In this case, the sympathetic might of the elephant forced itself into Merrick’s mother and detracted from his humanity. The animal is an ‘uncivilised’ danger that threatens the distinction of humanity. The performance of becoming-animal is a glitch in the maintenance of a fortified human identity. As Georges Bataille argues, modern man fears being likened to the animal. We are appalled and horrified by ‘anything that recalls the animality subsisting in us’ (1955, 116). Jackson aligned himself with the Elephant Man and this fear.
The Shapeshifter

However, it is not just Jackson’s convergence with the animal that positions him as hybrid. He has performed various becomings such as the previously described facial becomings of an intergender, fantastic, techno-body. Jackson’s hybridity is multi-layered. He is a shapeshifter. According to David Yuan:

[The] effect of Jackson’s alterations is to make him look androgynous rather than feminine, multiracial rather than ‘black’ or ‘white’. […] Jackson in his public makeup and costume looks like nothing so much as a meticulously indeterminate cartoon character in a Disney movie: the hybrid, not-quite-Indian Pocahontas or the not-quite-Semitic Aladdin.

(379-80)

Furthermore, Yuan believes it is this chameleonic quality that has ‘allow[ed] him to appear utterly unique, and in appearing unique he becomes accessible to everyone’ (379).

Jackson may have started as a black male child, he may have desired to become ‘something else’; but ultimately he is still in a process of the in-between. According to Jefferson:

Michael’s face is in another zone altogether. It has nothing in common with him anymore. We look. We shiver. We want to turn away. He was not supposed to expose this kind of need.
What is it: Self-hatred? Fear and loathing of human beings? A passion to escape the conditions of life and human exchange so fierce that he is willing to be reborn through science?

Jefferson’s review identifies Jackson’s face as chameleonic. He does not signify or embody a clear molar-identity in Deleuze and Guattari’s terms. He has become the undead as zombie in the ‘Thriller’ music video, as mummy in the tabloid photos of his bandaged face (“The End of an Icon” 2009, 7), and as vampire pictured sleeping in an oxygen chamber (coffin) (cover of The National Enquirer 16 September 1986). He has become outlaw in the ‘Smooth Criminal’ music video, and as a result of the paedophilia charges, and drug allegations. He has become eternal child through his creation of a home entitled ‘Neverland’, inspired by a fairytale land where lost boys never have to grow up; and an admitted love for the companionship of children over adults. In the Living With Michael Jackson documentary his young friend and later accuser, Gavin18, said:

He’s really a child at heart. He, he acts just like a child. He, he knows how a child is. He knows how, what a child thinks. See, coz I think that, um, you don’t necessarily have to be a child just because society says, uh, 18 and up you’re an adult. It doesn’t really matter. You’re an adult when you want to be one.

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18 Gavin is the second boy to accuse Jackson of child molestation.
Whilst sitting with Gavin, Bashir asked Jackson to defend his affection for children. Jackson replied:

My greatest inspiration comes from kids, every song I write, every dance I do, all the poetry I write, is all inspired from that level of innocence, that consciousness of purity and children have that. I see God in the face of children. [...] I just love being around that all the time.

Jackson’s statement reveals his appropriation of an other’s identity. He desired to embody and perform his idealised image of childhood, of a perfect innocence.

Jackson has also become virile heterosexual male lover through his marriages to Lisa Marie Presley and Debbie Rowe, his purported romances with Brooke Shields and Tatum O’Neil (Jackson 1988, 165-166); and his performances in the music videos for ‘In the Closet’ and ‘Do You Remember the Time’ where he seduces the supermodels Naomi Campbell and Iman. He has become homosexual through such displays as sitting hand-in-hand with a fourteen-year-old boy, whose head rests on Jackson’s shoulder as they discuss sharing a bedroom in Living with Michael Jackson. He has also performed a kind of narcissistic/auto-erotic homosexuality as he sat 14-year-old Jordan Chandler on his knee at the 1993 World Music Awards, with Jordan dressed as a miniature replica of Jackson. These are but a few examples of his becomings. Jefferson writes, ‘[g]ood or evil, human or monster, victim or criminal; on-screen Michael will swap selves forever’ (17).

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19 Jordan is the child from the 1993 child abuse allegations.
Ultimately, Jackson is unstable. He is the borderless possibility offered by image production and a makeover culture. In Chapter Two, I argued Dr Phil’s concept of the glitch arises when the individual allows the forces of external minds to dictate the development of the subject. Conversely, sympathy is achieved through focusing on the self, where the subject is required to uncover the ‘authentic self’ and conquer ‘fictional impostors’ by ignoring external influences and identifying authenticity through introspective mental analysis. In Chapter Three, I have proposed sympathy and the glitch have been appropriated by a media production culture. Michael Jackson became the ‘King of Pop’, because he could produce visual and audio images that incited and satisfied his audience’s desires. However, his continual re-production and distribution took on a disturbing unpredictability, a rhizomatic becoming that moved beyond the borders of the human. Jackson became a countless series of irreconcilable images that defied the constraints of a singular identity.

What Dr Phil’s and Jackson’s sympathetic structures share is a reliance on the immense power of the image; the ability to become other through the act of representation. A study of these two cases has revealed popular contemporary magical practices that involve largely disembodied images in the realisation of the mind-self and a media subject. Dr Phil and Jackson have offered important insights into popular processes of modern magical representations. Image production is a powerful act where the creation, the representation, is both self and other. As Taussig notes, with the creation of an image ‘mimesis fuses brilliantly with Alterity to achieve the connection necessary for magical effect’ (1993, 191). Copies bind
entities together and entities re-act to this binding, sometimes creating discrete and controlled networks of connection, at other times stretching out and becoming bound to more malleable and chaotic systems.

In the following chapter, I move to an embodied understanding of sympathy and the glitch, shaped by corporeal and medical theories of the human subject. It is a move to a clearer understanding of the benefits of sympathetic manipulation. It is also a move towards a more complex and comprehensive understanding of the physicality of magic.
Chapter Four

*Awakenings: Body Glitches and a Pathological Wonderland*

Dear, dear! How queer everything is to-day! And yesterday things went on just as usual. I wonder if I’ve been changed in the night? Let me think: *was* I the same when I got up this morning? I almost think I can remember feeling a little different. But if I’m not the same, the next question is ‘Who in the world am I?’ Ah, *that’s* the great puzzle!

(Alice – *Alice’s Adventures in Wonderland* 1998, 17-18)

**Introduction**

In this chapter, I explore how neuropsychologist, Dr Oliver Sacks, uses the experiences of the post-encephalitic patients, in his medical biography *Awakenings*, to construct a sympathetic understanding of the human subject. As was the case with Michael Jackson, I argue each post-encephalitic patient’s subjection is constructed in terms of contentious multiplicities. However, unlike Jackson, their

20 All Oliver Sacks citations refer to *Awakenings* (1999) unless otherwise indicated.
multiplicities are not a consequence of the re-duplication of each subject as a technobody in an enormous process of external sympathetic relations created by celebrity image production and makeover practices. In Sacks’ narrative, the subject’s unique history, body, thoughts and feelings merge with the internal force and character of his/her illness and volatile drug treatment and they forge a combative relationship.

In this and the following chapter, I draw the subject down from the transcendental disembodied mind and distributed exuviae of the media image to a medicalised corporeality and culture. A study of Sacks’ work will reveal a cultural push for a medical construction of sympathy where the interconnected and mimetic elements of magic become the dissectible components of bio-social organisms, re-producing themselves in microcosmic and macrocosmic corporeal representations.

As was discussed in Chapter Two, contemporary western society often understands the human in terms of bio-physical measurements, or states of health. The aberrant other, in such a culture, becomes the medical specimen, dissected and examined in order that its divergence from optimum health can be further understood and ideally, cured. Doctors, accredited experts of medical discourses have become keepers of knowledge in our society, and I believe popular re-constructions of the figure of the magician. Therefore, their analyses and transcriptions of the self and the glitch are of great significance in understanding contemporary sympathetic systems. A study of Sacks’ work is particularly significant because his poetic and dramatic medical transcription of his post-encephalitic patients’ lives exposes a greater depth to the modern medical culture. While Sacks certainly maintains the authoritative and paternal figure of the modern medical expert, he does offer a less sterile
understanding of the bio-social subject. A study of *Awakenings* makes apparent that medical narratives also function as important forms of contemporary mythology, platforms for producing present-day myths regarding dominating cultural identities.

**Romantic Medical Sympathies**

Sacks’ tender investigation of the modern medical world involves an examination of subjects and glitches that are biological, medical, social and always personal. For Sacks, understanding his patients’ subjecthoods involves an exploration of individual bodies; individual subjects who shape the character of their illness, and who are shaped by the other bodies of their environments. He writes:

Diseases have a character of their own, but they also partake of our character; we have a character of our own, but we also partake of the world’s character: character is monadic and microcosmic, worlds within worlds, worlds which express worlds.

(266)

What Sacks describes here is a rhizomatic and sympathetic understanding of the subject and pathology. While a disease may have its own character, a distinct set of symptoms and effects on the body, the path of the disease is shaped by the unique make-up of the patient. In *Awakenings*, Sacks tells of a heterogeneous bunch of patients all presenting with different post-encephalitic problems and reactions to their illness. For example, Magda B. was wheelchair bound, barely able to speak and described by Sacks as sweet, grateful and docile (68). Robert O. suffered from tremors on the left-side of his body and was very narcissistic (90). Miriam H. experienced left-side rigidity, oculogyric crises and Sacks writes that she suffered
from depression, had a strong temper, and eventually became very apathetic (130).

While Miron V. suffered from psychosis, with paranoia, and hallucinatory images of castration, degradation and abandonment (161).

In addition to the changes wrought by the illness, Sacks contends that each patient’s own character is also changed by the context, the world, he/she lives in. As shall be discussed, one way in which Sacks seeks to confirm this theory is through showing that the patients who were placed in human environments that offered affection and nurturance, showed greater resilience against the terrible affects of their disease.

For Sacks, the substance of the subject is a result of microcosmic and macrocosmic connections between multiple bodies. Sacks is what Martin Halliwell describes as a ‘Romantic Scientist’. According to Halliwell, ‘[r]omantic science consists of more than an addition of facts. It detects the dynamical connections of a single event in a whole understandable network that lead to its essence’ (2000, 279). It is a sympathetic understanding of science where subjects are understood in terms of a multi-directional flow of forces between interconnected subjects and objects; between patient, illness, treatments, loved ones, medical staff, other patients, and healthy others outside the hospital walls. Sacks creates a more complex medical model of sympathy than Dr Phil by embracing multi-directionality, not simply as a source for possession, but individuality.

Sacks’ romantic science, or romantic neuroanthropology as he describes it (Sacks 1995, xx; Poynter 2001, 1), is in keeping with Maurice Bessy’s understanding of magic as an example of humankind’s eternal quest to uncover the secrets of nature.
Bessy comes to the conclusion that ‘[f]or all those who search for the answer within themselves, the principle is always the same: study the microcosm, man, in order to understand the secrets of the macrocosm, the universe’ (1963, 5). Viewing the medicalised subject in such a light turns the study of the individual patient, and the illness, into a much broader study of the human subject. In Sacks’ case, this broader focus and search for meaning revolves around identity. He writes, ‘my central study and concern became identity - their [the patients] struggle to maintain identity – to observe this, to assist this, and, finally, to describe this’ (xxix). Sacks studies the glitching body of the subject, and its place in a larger sympathetic context, in order to understand the processes and limits of the human ability to sustain the self. He partakes of the essential reasoning behind the implementation of magic – the need to find and instil knowledge in the world, to stabilise it with a confirmed meaning and purpose.

**The Cure as Chaos**

In *Awakenings*, Sacks’ study of the various forces shaping the post-encephalitic subjects is further complicated by the introduction of the drug L-DOPA (laevodihydroxyphosphylalanine). The drug also functions as a unique sympathetic element in the construction of the subjective experience of the post-encephalitic subjects. It was 1969 when Sacks first began administering L-DOPA. At the time, it was still a new drug. According to Sacks, many in the medical profession hoped it would be a ‘miracle drug’ (28). Parkinsonian patients lacked dopamine, L-DOPA could raise these levels, and with that doctors anticipated a sympathetic unity would be returned to the subjects. It was hoped that the patients would experience a loss in Parkinsonian symptoms. Once more they might be able to will movements and
complete them with ease, without being overcome by ever-increasing oppositional forces from within that counteracted the will-to-act and sent the patients into ticcing, festinating or blocking fits. And Sacks does describe moments of grace brought about by the introduction of the drug. Cecil M., who suffered from ‘an impairment of balance, a tendency to backwards-falling, festinating, freezing, and predominantly left-sided rigidity and tremor’, initially showed a great response to L-DOPA (202).

Cecil M. said:

it seemed to have given me a new lease of life. I felt exhilarated and rejuvenated. The stiffness went out of my left arm and leg. I could use my left arm to shave and also to type. I could bend down with ease to do my shoe up. And of course I could walk with complete freedom and enjoy moving about.

(202-03)

However, in the becoming of the post-encephalitic patients, L-DOPA was but another ‘entryway’ with unpredictable results. One of the patients, Frances D., experienced severe respiratory problems and her body would freeze and jam as a result of the L-DOPA. She would explode with ever-ascending waves of excitement, terror and anguish, screaming out such things as ‘Oh, oh, oh, oh! […] please don’t […] I’m not myself, not myself, […] It’s not me, not me, not me at all.’ (52). In Chapter One, I noted that Alexander uses the glitch to discuss moments of de-stabilisation when one looks at oneself and feels ‘a little shock or surprise’ (44). These are the moments when the subject cannot maintain the ‘[you] in the world of tables and chairs, of men and women’ (44). One loses a firm grasp on the destiny and performance of the stable and agentic self. These are the moments experienced by the patients such as Frances D. In Awakenings, a multitude of internal forces, merge
and collide, providing the possibility for a rhizomatic becoming of a psycho-physiological glitch. I believe Sacks more evolved system of magic allows him to embrace and examine the becoming of his patients’ glitches as unpredictable pathways of subjecthood, instead of recoiling in terror at the thought that their disruption is caused by some external, unidentifiable and ultimately destructive force.

The Land of the Glitch

A primary way in which Sacks has approached his patients’ unpredictable becomings is through a kind of sympathetic mapping. He describes their glitches in terms of deterritorialization or displacement. In recounting the onset of the initial sleeping-sickness in Rose R., Sacks writes:

[The] acute phase announced itself […] by nightmares of a grotesque and terrifying and premonitory nature. Miss R. had a series of dreams about one central theme: she dreamed she was imprisoned in an inaccessible castle, but the castle had the form and shape of herself.

(74-75)

Rose R’s. family had difficulty waking her the next day and were shocked by the changes in her as she seemed ‘so still and so strange’ (75). ‘Miss R. could not answer, but turned her eyes to the wardrobe-mirror, and there she saw that her dreams had come true’ (75). Sacks depicts the onset of her illness, not simply as the development of disturbing and immobilising symptoms, but as a structural and spatial transformation. He verifies the contents of her dream. Miss R. was turned into a castle.
Susan Sontag, in her study of the metaphors associated with illness, acknowledges
the penchant for understanding sickness as a bodily deportation. Sontag writes:

Illness is the night-side of life, a more onerous citizenship.

Everyone who is born holds dual citizenship, in the kingdom of
the well and in the kingdom of the sick. Although we all prefer
to use only the good passport, sooner or later each of us is
obliged, at least for a spell, to identify ourselves as citizens of
that other place.

(2002, 3)

Sickness is another world, a surreal world, segregated from the healthy, ‘normal’,
experience of life. Sacks understands the glitching of his patients in terms of a topsy-
turvy biosociality or a displacement to a kind of Wonderland. He describes the
Parkinsonian patients as ‘people just like ourselves, people, indeed who might _be_
ourselves’, but populate ‘inconceivably strange’ worlds (xxxviii). Sacks himself has
made the Alice in Wonderland connection. Frances D. had particularly turbulent and
unpredictable responses to her treatments. At one point, she declared:

That’s it! […] You’ve thrown the whole pharmacy at me. I’ve
been up, down, sideways, inside-out, and everything else. I’ve
been pushed, pulled, squeezed, and twisted. I’ve gone faster, and
slower, as well as _so_ fast I actually stayed in one place. And I
keep opening up and closing down, like a human concertina.

(61)

In response to this, Sacks writes, ‘[h]er words irresistibly depicted a Parkinsonian
“Alice” in a post-encephalitic Wonderland’ (61). His choice to compare Frances D.
with Alice positions Frances D.’s experiences as ‘otherworldly’, a Wonderland of experiences where the body is subjected to a new set of laws and logic. Like Alice, Frances D. is no-longer offered the subject position of a stable and agentic self, such as the one idealised by Dr Phil. Instead, like Alice, Frances D. is transported to territories of the other where the subject, and logic, are malleable; where the subject is ‘pushed, pulled, squeezed, and twisted’ according to seemingly unfathomable laws, or the laws of chaos.

**Implementing Alice**

Comparing Sacks’ work and subjects with Lewis Carroll’s Wonderland and Alice provides a clearer understanding of the link between modern medical narratives and cultural mythologies, including prevailing myths surrounding the aberrant subject. It also offers a platform for discussing the popular and long-standing tendency of identifying sickness as a tangential sympathetic territory and the sick its travellers.

In *Alice’s Adventures in Wonderland*, Alice is forced to deal with a maddening nonsense that threatens her established sense of rationality, truth and self. A conversation between Alice and the enigmatic Cheshire Cat sums up the confused alterity of the world:

Alice: ‘What sort of people live about here?’

Cat: ‘In *that* direction […] lives a Hatter: and in *that* direction […] lives a March Hare. Visit either you like: they’re both mad.’

Alice: ‘But I don’t want to go among mad people.’
Cat: ‘Oh, you can’t help that […] we’re all mad here. I’m mad. You’re mad.’

Alice: ‘How do you know I’m mad?’

Cat: ‘You must be […] or you wouldn’t have come here.’

Alice: ‘And how do you know that you’re mad.’

Cat: ‘To begin with […] a dog’s not mad. You grant that?’

Alice: ‘I suppose so.’

Cat: ‘Well, then, […] you see a dog growls when it’s angry, and wags its tail when it’s pleased. Now I growl when I’m pleased, and wag my tail when I’m angry. Therefore I’m mad’.

(57)

While Cat’s words may seem to be frustrating nonsense, they also challenge Alice’s assumptions and sense of reason. She is forced to ponder over the concept of ‘madness’ – to wonder how one defines madness. How does one know if one is mad? The Cat’s theory of madness identifies a fundamental element of a territorial understanding of sympathy. According to the Cat, ‘madness’ can be understood and diagnosed in terms of a series of sympathetic connections. If a dog is not ‘mad’ and exhibits the behaviour of growling when angry and wagging its tail when pleased, then according to the Cat’s understanding of interconnectedness, any creature who exhibits the opposite behaviour will also exhibit the opposite mental state and thus be ‘mad’. The Cat also concludes that Alice is mad because she is surrounded by mad creatures, including the Cat, the Hatter and the Mouse. Thus, according to the Cat,
the content and behaviour of each body defines and shapes the contents and
behaviours of the bodies around it. If the subject is shaped by the elements/bodies of
his/her environment in a sympathetic system of interconnectedness, then placing the
subject (i.e. the body of the subject) in a territory of illness confirms the subject as
pathological.

Sacks embraces the sympathetic premise that the subject must be understood in terms
of his/her positions and actions in time and space. As a consequence, he finds that it
is his duty as magician, as healer, to chart these otherworldly territories in order to
understand his patients and ideally find a path back to ‘our’ world.

**Bodily Glitches and Bodily Grace**

In the worlds of post-encephalitic Parkinsonism, Sacks discovers the anomalous –
the shadow-selves of healthy subjects. According to Deleuze and Guattari the
anomalous is the ‘exceptional individual’. The authors write, ‘every animal swept up
in its pack or multiplicity has its anomalous’ (243). Thus, the anomalous subverts
faith in the impenetrable borders surrounding a species. The anomalous is ‘a
phenomenon of bordering’ (245). They encircle and challenge our established myths
of the cultural self and ideal subject.

Sacks shows a sympathetic response to the anomalous. He has sought to identify
similarities with and pathways between the anomalous and the pack in order to create
filiations and re-integration. He has done this through a realisation of beneficial body
sympathies. Sacks’ theories surrounding the realisation of a healthy and normal
subjecthood are a move away from Dr Phil’s Cartesian approach. The integrated
subject, as it appears in *Awakenings*, is not achieved via a bodily transcendence and the will to overcome the physical and the social. It is through the flesh that Sacks has sought sympathetic connection; through bodily actions and affective performances he has endeavoured to stabilise and unify his subjects and, as a consequence, enliven their selves. Sacks’ understanding of healing the subject does not involve an expulsion of a rhizomatic narrative of the self, with its multiple possibilities, divisions and dangers; but embraces the multiple virtualities that may be pursued in the search for sympathetic breakthroughs. Therefore, I find his sympathetic structure to be more intricate than the previous cases addressed in this dissertation. When L-DOPA ultimately failed as a source for sympathy, as in the case of Frances D., Sacks has pursued external bodies and sympathies as sources of restoration. When the patients’ internalities were in chaos, Sacks sought external sympathies as sources of stability. He brought all of the post-encephalitic patients together in the hospital to show them that they were physically and experientially not alone. In addition, Sacks and his patients discovered the graceful movements of healthy others (loved ones or hospital staff) and music functioned as sources for a kind of symbiosis, where the patients could partake of the other’s grace. This appropriation of ‘grace’ takes the form of regained kinaesthetic melodies. Sacks also encouraged the affective connection between patients and people from their lives before the illness or institutionalisation, to remind them of their lives outside of sickness. Some of these external sympathies will be discussed in this chapter.
Counter Wills: The Struggle of Becoming

*Awakenings* details the body glitches that disrupt the ‘uniform flow’ (Alexander, 44) of subjects. In order to understand this disruption, Sacks focuses on the actions of his patients and how their altered movements affect their subjecthood. What he discovers in their loss of uniform movements is the presence of counter-logic and counter-wills. I endeavour to explore the counter-wills in terms of an acknowledgement of the multi-directional flow of sympathy.

In *Through the Looking-Glass* (1998), Alice attempts to travel across the chessboard (the entire world being a chessboard) by running as fast as she can with the White Queen. However, Alice and the Queen do not seem to advance. Alice is frustrated and confused by the futility of her actions. She has the desire and knowledge of how to run. She can complete the movement and yet she cannot reach the desired destination. No matter how fast she runs the scenery stands still, or perhaps moves with her (142). When she asks the White Queen if they are almost at their destination, the Queen replies that they passed it ten minutes ago (142). Alice and the Queen arrive in the same location as they left and Alice is informed that one has to move very fast to stay in the same spot and even faster to get anywhere (143). Alice is repeatedly frustrated by the askew laws of action and reason of the Looking-Glass world, unable to unite action, intent and goal. She has been thrust into a world like Frances D.’s where she has ‘gone faster, and slower, as well as so fast I actually stayed in one place’ (Sacks, 61).
Like Alice, all of the post-encephalitic patients were denied the basic power of sympathy, which Malinowski describes as an affirmation of humankind’s ‘power to cause certain definite effects by a definite […] rite’ (88). As I have previously stated in this dissertation, sympathetic magic arises out of a ‘universal psycho-physiological mechanism’ to act with intent and efficiency (Malinowski, 88). The Mount Carmel patients lost this dynamic and autonomic embodiment\(^{21}\). They were isolated prisoners trapped by bodies, by selves, that no-longer adhered to ‘normal’ rules of sympathetic being. These rules of being include: accepted laws of motivation, propulsion, motor function, time and relativity. The patients were constrained by the forces, bodies, ‘characters’ of their illness, experiencing such crises as blocking, akathisia and akinesia, and perseveration\(^{22}\).

The patients were overwhelmed by chaotic states. Their being was monopolised by multiple and unpredictable restraints and compulsions arising from their serious chronic illness. Obviously, subjects who are defined in terms of unpredictable multiplicities leads us back to the discussion of becoming that was addressed in the previous chapter. However, becoming as described by Deleuze and Guattari relates to a process of becoming the ‘in-between’ (239). A subject of becoming, like Michael Jackson, is an unstable blend of molar identities. Such a description does not

\(^{21}\) Mount Carmel is the pseudonym used by Sacks in *Awakenings* to designate the hospital in which he worked and treated the post-encephalitic patients. The actual name of the hospital is Beth Abraham.

\(^{22}\) In his glossary, Sacks describes these states as follows: ‘blocking’ is ‘[r]esistance (at any level) to thought or movement’, often seen in patients who are catatonic (389); akathisia is an ‘inability to keep still’, while akinesia is a ‘[t]otal lack of movement, or inability to make voluntary movements’ (387); and perseveration refers to ‘[a] tendency to indefinite continuation, or repetition, of nervous processes […] the antithesis of ‘block’ (392).
seem entirely appropriate when discussing the post-encephalitic patients. They most
certainly have become-other, deviating from the dominating majoritarian position of
the healthy body and stable self. In addition, the effects of the post-encephalitic
illnesses are described by Sacks as mergers between the once healthy subjects, the
clinical model of disease progression and the drug treatments; bringing about unique
and unpredictable eventuations. Sacks writes of the results of the drug trial, ‘I had
not only cast doubt on what had appeared at first to be the extremely simple matter of
giving a drug and being in control of its effects; I had cast doubt on predictability
itself’ (xxxiii). However, the patients’ becomings did not seem to always involve
clear ‘in-between’ states or subjects, but subjects that had no internal sympathy.
Instead, the patients inhabited singularities for finite and unpredictable periods; each
singularity representing a momentary victory of one of the competing wills between
the disease, the self and so on. The post-encephalitic patients are represented as
subjects of excess and deficiency. They were too slow or too fast. There was too
much or too little. They were too much or too little.

*Everything and Nothing*

The patients at Mount Carmel lost the middle-ground in various aspects of their lives
and experiences; this included their behaviour and motor-skills. Frances D. described
the most disconcerting element of her pre-DOPA state as, ‘I cannot start and I cannot
stop. Either I am held still or I am forced to accelerate. I no longer seem to have any
in-between states’ (40). In an attempt to illustrate his paradoxical existence, Leonard
L., Sacks most eloquent and learned patient, said (or more accurately typed out on his message board because he could not speak):

There’s an awful presence […] and an awful absence. The presence is a mixture of nagging and pushing and pressure, with being held back and constrained and stopped […]. The absence is a terrible isolation and coldness and shrinking […] a bottomless darkness and unreality.

(205)

According to Sacks, one of the common outcomes arising from the struggles between the overwhelming singularities was a kind of ‘positive’ pathological movement consisting of impulsions, resistance and perseveration (9). These positive compulsions would sometimes produce combative or counteractive actions; any will to move was met with an equally powerful counter-will, resulting in the patients being frozen in a kind of tug-of-war. Patients so affected found ‘that as soon as they “willed” or attempted a movement, a “counter-will” or “resistance” rose up to meet them’ (7). Rose R., on L-DOPA, would be compelled to rush forward and then suffer a jamming of her movements (84). Helen K. described her experiences of being overcome with the force of a counter-will to her movements as ‘[l]ike being stuck on an enormous planet […]. I seemed to weigh tons, I was crushed, I couldn’t move’ (8). What Sacks and his patients describe in these instances is not a merger of identities but a collision resulting in stillness, explosions and cyclic behaviour. It would seem the patients became human expressions of the classic paradox, ‘what happens when an irresistible force meets and immovable object’? 23

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23 The origins of the ‘Irresistible force paradox’ are difficult to trace. The earliest known reference to this manner of paradox is in Han Feizi (c. 300 BC) and the story of the spear and the shield.
The battle of internal wills, described in *Awakenings*, bares a strong resemblance to the struggle between the act and counter-act in sympathetic magic, which has been previously discussed in Chapter Two. Malinowski contends that every magical act is believed to have a counter-act (82). This is one reason why a rite of sympathy may not be effective. It may be countered by an opposing will. In the case of ‘primitive’ magic, a spell to increase or return someone’s health could be countered by a spell to bring about sickness or death, or vice versa. In Chapter Two, I mentioned one of Frazer’s examples of negative magic where a Melanesian warrior would place the tip of an arrow in a fire after it had pierced an enemy, so that it would ‘inflame and irritate the wound’ (54). Conversely, Frazer notes that if the friends of the wounded warrior gained possession of the arrow they could ‘keep it in a damp place or in cool leaves, for then the inflammation will be trifling and will soon subside’ (54). The post-encephalitic patients were presumably not at the mercy of warring magicians, but they were at the mercy of competing impulses of force that arose in the battle between the subjects and their disease. Their pathological experience of counter-wills makes apparent the unavoidable multi-directionality of the truly sympathetic subject and, in this case, the devastating effects caused by a pathogen arising in the sympathetic structure.

*Modes of Possession*

The sympathetic duel present in these compulsions also draws comparisons to possession, where one’s own body (and sometimes soul) succumbs to the will of a powerful other. To possess is ‘to own, to have or gain ownership of […] a person or body of people: to hold or occupy (a place or territory); to reside or be stationed in;
to inhabit’ or ‘to affect; to infect’ (OED). One experiences a sympathetic union with an overwhelming other and an antipathy towards the self-mastering agentic self. This issue has also been present in the previous chapters. In Chapter Two, I discussed opposing wills in relation to Dr Phil’s employment of Individualist self-mastery techniques to overcome the Collective. Dr Phil believes that reason and objective self-analysis of distorting past events allows one the freedom to overcome the will of the traumatic social other and implement one’s own authentic self. Conversely, giving into the will of the dangerous social other results in a kind of possession, a loss of Cartesian individuality. Michael Jackson, in part, represents the realisation of Dr Phil’s fear. He is void of a centre or an original ‘I’. He is an assemblage, constructed through the proliferation of images and an audience who consume his photographic and audio exuviae. In Chapter Three, I noted that Jackson himself realised this ‘possession’ and raged futilely against it. One example I used was his 1993 interview with Oprah where he repeatedly attempts to re-sculpt his representation. Such attempts at claiming sole authority over his image were abysmal failures. Jackson as celebrity and distributed image is necessarily possessed by the multiplicity. One cannot be famous unless he/she can become the desired image/s of the audience and be consumed in the sympathetic act of appropriation, even if the act of appropriation involves disgust and an antipathetic expulsion of a revolting other which the self is compared to and fortified against.

The supplication of the will of the self to the will of the other reaches its closest association with possession in Awakenings. This is because the primary possessive other that shapes and commands the self is within the body/self in the shape of the pathology. And possession is generally considered an otherness that overtakes from
within. This concept has been played out in numerous popular contemporary narratives. In the spoof-flick horror-comedy film, *Idle Hands* (1999), the protagonist, Anton, unwittingly becomes a serial killer. The spirit of a serial killer possesses the hands of lazy individuals, playing off the popular adage, ‘idleness is the devil’s pillow, and idle hands the devil’s work’ (Kingwell 2008, 571). While Anton retains his normal state of mind and command over the rest of his body, the one hand is able to overpower Anton and kill his family and friends (among others), with the result that Anton must chop his hand off. This may seem a light-hearted example of possession, and perhaps inappropriate when discussing the very real tragedy of the post-encephalitic patients; but part of the humour surely comes from the conviction that it is not real. It is difficult to believe that one can be in conflict with one’s own drives and movements and yet this is where Sacks’ patients found themselves. The post-encephalitic patients’ actions, bodies, minds did not function as unified, coherent and sympathetic systems. Sacks’ patients were complex sympathetic beings who had a chaotic energy introduced to their systems. *Awakenings* is an exploration of the results of this chaos.

However, despite the overwhelming force of the pathology, the patients never became solely ‘post-encephalitic’, each of them retaining their individuality as evidenced through their unique responses to the illness. As such, their being does realise the possessive fears identified by Dr Phil, to a degree, but optimism is maintained towards the subjects’ ability to preserve at least some part of their selves even under extreme assault.

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24 This act does not end the killings however; the possessed and now severed hand continues on its murderous rampage until it is destroyed by Anton.
Becoming the Void

While Sacks’ patients did not always present as ‘in-between’ subjects of becoming, they did bare a convincing resemblance to Deleuze and Guattari’s warning or prediction of the inevitable outcome of becoming. In Chapter Three, I commented on Deleuze and Guattari’s assertion that the subject of becoming stretches ever outwards to the point of tumbling into the void. According to the authors, a subject in a state of becoming has to fall back into one state or the other, instead of being ‘in-between’ identities, or go forward towards ‘the great dissipitative outside’ (95). Moments of rhizomatic progression that result in an unpredictable dissolution into nothingness also appears in Alice’s Adventures in Wonderland. In Alice’s first meeting with the Cat it disappears and reappears several times before Alice says, ‘I wish you wouldn’t keep appearing and vanishing so suddenly: you make one quite giddy!’ (59). The Cat responds with, ‘All right’, and ‘this time it vanished quite slowly, beginning with the end of the tail, and ending with the grin’. To which Alice thought, ‘Well! I’ve often seen a cat without a grin […] but a grin without a cat! It’s the most curious thing I ever saw in all my life!’ (59). Sacks’ patients also experienced an unpredictable dissolution reaching out to the territory of meaninglessness. Sacks broaches the void in his description of negative compulsions that comprised of nothingness, where form, thought and self disappeared in random and seemingly nonsensical manners. Rose R. was prone to the losses and absences of negative compulsions. She would experience a kind of stillness that resulted from the lack of any impulse or will to move. However, she could move sometimes if the stimulus to do so ‘came from another person’ (9) (drawing on the action of the other will be discussed later in the chapter). At other times thoughts would suddenly disappear from her mind, as
though completely deleted (76). They were unable to be retrieved. In their place there would be a void. In these states of nothingness, Rose R. would find herself engrossed or trapped with no interest or participation in the world. Even Rose R.’s positive compulsions would involve infinite repetitions that would stretch out to nothingness. She would experience compulsions, which instead of meeting with too much resistance, found too little. Sometimes she would think things such as ‘2=2=2…’ infinitum. Or, she would look at a picture and notice a dot, focusing on the dot it would get closer and closer, larger and larger, until the dot turned into the same picture and she would notice the dot inside it. These ‘nothings’ were the product of infinite images, without meaning or end, totally engrossing her every thought and moment.

**Unintentional Consciousness**

In Sacks’ descriptions of possession and dissolution he often refers to experiences of consciousness; such as the aforementioned case with Rose R. In Csikszentmihalyi’s study of consciousness, he writes, ‘what, then, does it mean to be conscious? It simply means that certain specific conscious events (sensations, feeling, thoughts, intentions) are occurring, and that we are able to direct their course’ (26). He describes the elements of consciousness as ‘intentionally ordered information’. Furthermore, he places immense importance on the content of consciousness stating that it ‘determines the content and the quality of life’ (30). As an antithesis of the process of consciousnesses, he refers to the dream, and notes ‘[i]n dreams we are locked into a single scenario we cannot change at will’ (26). Sacks describes some of
his patients’ experiences as glitches in consciousness, resulting in unintentional consciousness. Thus, the content of his patients’ lives is constructed as a kind of frustrating futility, a dream-like passivity.

Csikszentmihalyi’s theories included above also seem to imply if consciousness is a fundamental ability, process and presence in the experiences of the human, then its loss is a loss of human experience. To lose consciousness is to lose an essential component of what makes us human. Sacks and Csikszentmihalyi, like Dr Phil, affirm the power of consciousness in sympathetic subjecthood and magical effect. However, as will be made apparent in this chapter, unlike Dr Phil, they affirm an embodied, a social, an affective consciousness.

**It’s All Relative**

Further to understanding the distorted actions of the post-encephalitic patients in terms of counter-wills, Sacks explores their bodily glitches in terms of altered perceptions of time and space. These altered perceptions are the result of both neurological and social sympathies and highlight important internal and external components in the construction of one’s reality and the confirmation of one’s self. The role of the other in confirming one’s reality and stabilizing one’s position as a social being is of particular significance to this study of sympathy. According to Mauss, a primary element in the efficacy of sympathetic magic is that all participants in a magical culture need to agree on the laws of experience to which magic relates (92). In *Awakenings*, Sacks’ Wonderland or Wonderlands were places where there was no unity of law, no agreement regarding perceptions of experience. There is no static and agreed scale for measuring self and world.
In *Alice’s Adventures in Wonderland*, Alice is told by the caterpillar that if she eats from one side of the mushroom she will grow, from the other and she will shrink. Alice wonders how one can identify the ‘sides’ of a mushroom top which is circular in shape. She stretches out her arms and grabs a chunk of mushroom with each hand and begins to eat, upon which she begins shrinking and growing at extreme rates. At first, she shrinks rapidly and to such a degree that her chin hits her feet. Then she becomes a giant who cannot see her own shoulders that sit somewhere beneath the forest canopy, with a neck so long a bird mistakes her for a serpent (46-47). These swings are so common to Alice’s experiences when she finally returns to ‘normal’ it feels strange (48). In her adventures, she never quite seems to be the right size for the right situation and environment. Alice’s experiences represent what Fiedler contends is the penchant of children’s stories to confuse the boundaries of the normal and the other. According to Fiedler, ‘[f]or children the primary source of such confusion is scale’ (28).

Fiedler also explores discrepancy of scale as a common element in the social construction of the freak in the carnivals of the nineteenth and early twentieth-centuries. He writes, ‘Dwarfs and Giants, for instance, challenge primarily our sense of scale, Hermaphrodites our conviction that the world neatly divides into two sexes, and so on’ (24). Fiedler’s studies conclude that scale and synchrony are important elements in social sympathies; they play an important role in deciding the individual’s place within the communal complex of identities.
The Parkinsonian patients lost or had altered their internal scales and clocks which keep their perceptions of the world in accordance with those around them. Miron V., who was often found in a seemingly frozen state for hours at a time, told Sacks that he was indeed moving and had not realised that he seemed frozen (162). On one occasion, Sacks grouped together time-lapse photographs of Miron V. and played them in a projector. To his astonishment, Miron V. had indeed been moving, albeit at an extremely subdued rate. It had taken him 15 hours to raise his hand to his face. His body moved according to his experience of time. Miron V. may have experienced his durée as ‘normal’ and been undisturbed by its incongruence with the external ‘clock time’ however, his altered durée prevented him from engaging with those around him, of being a part of the movement around him. Miron V. was a subject out of time. He could not position himself as a social subject, a subject who moves with other people through shared space and time and who is capable of creating a shared life experience.

Miron V.’s situation makes apparent that one’s reality may be dependent on individual sympathies (neurological, biological, psychological processes), but one’s experience of being a social being, a physical entity surrounded by other physical entities, is based on interconnected points of reality between sympathetic subjects. In Henri Bergson’s study of temporality he writes, ‘[t]here is at least one reality which we all seize from within, by intuition and not by simple analysis. It is our own person in its flowing through time, the self which endures’ (1992, 162). Bergson’s subjective internal temporality refers to a personal sympathy that is different to the temporal sympathies each person shares with other human subjects. According Elizabeth Grosz, Bergsonian theory posits there is a definite ‘distinction between
lived temporality and “objective” time’ (1999, 168). She writes ‘that temporality or ‘internal time’ is irreducible to “outer” or “clock” time’ (168). Grosz continues:

   Bergson argues that this experience of continual becoming or
durée cannot be captured in discrete moments of time; our durée
is itself a continuous flux or flow that is accessible to intuition
but eludes analysis and its conceptual symbolizations.

(168)

Internal temporality is unique and subjective, but according to Bergsonian theory it can be transcended and one can participate in others’ durations (169). Existential psychotherapist Irvin Yalom offers a similar sentiment noting that the therapist must realise personal temporality and ‘approach the patient phenomenologically; that is, he or she must enter the patient’s experiential world and listen to the phenomenon of that world without the presuppositions that distort understanding’. I would argue that Sack’s study of the post-encephalitic patients shows that the movement beyond one’s own durée to experience another’s, in a process of communal temporality, is not just a process for understanding other subjects (as is the case for Yalom), but essential to maintaining one’s self. The temporality of the normal subject is not a totally isolated and unique Wonderland. As Gail Weiss notes, our own durée is interconnected with ‘the durée of all that we encounter’ (1999, 171). Sacks’ study makes apparent that unless the durée of the subject can be confirmed or supported by others’ durée, one becomes isolated in an antipathetic temporality. Sacks implies that to be a part of life one must share in others’ temporal experiences. A relationship is built upon a shared history, shared experiences, shared durations.
**Out of Time**

For some patients who appeared to experience enduring isolated and stunted temporal experiences, re-connection with the world seemed impossible even after the introduction of ‘apparently’ effective treatments such as L-DOPA which brought them out of catatonic states. Rose R. was one of the post-encephalitic patients locked away for decades. When she was awakened on L-DOPA, she found herself out of place. She had no home, no life, and no experience of time since the 1920s; although she was technically aware 40 years had passed. Sacks notes that her speech was filled with outdated terms and mannerisms. She referred to famous figures from the 1920s as current figures and sang popular songs from the period. Sacks describes her as engrossed in the past in a ‘forced reminiscence’, trying to shut out the present (82-83). She was a young vibrant woman without a time, environment or appropriate body to confirm her. She subsequently suffered terrible crises on her drug treatment and later little reaction (for better or worse) at all. Several years later, when Sacks tried to broach the subject of her ‘strange nostalgia’, she would become ‘distressed and blocked’ (87). She did manage to communicate to Sacks that for most of the time, before taking L-DOPA, there was ‘nothing, absolutely nothing, no thoughts at all’ (87). She had been blocked off from experiencing life, existing only as a spectator (83). Thus, when she was awakened and her blocks released in 1969, it was difficult for her, because she only knew how to be twenty-one in 1926, she had not experienced anything else (87). Sacks believes, ultimately Rose R. needed to ‘re-block’ in order to end this incomprehensible time-gap (87).
Damasio has also explored the suspension of self in a suspended body. He refers to a woman who suffered brain damage resulting from a stroke. For a time, she was motionless and expressionless. As she recovered, she detailed her experience not as being trapped within a cage, but being suspended on all levels of experience (73). In Damasio’s study, he wonders if it were truly possible to look back at your life without emotion, would you be able to cease the pain of trauma or would the trauma no-longer be yours and thus you no-longer yourself (xvi)? In *Self Matters*, Dr Phil argues for the former, describing an idealised agentic self who realises fulfilment through a logical (non-emotional) re-assessment of past traumas. However, Sacks presents the opposite case, selves who dissolve not as a consequence of a loss of memory, but a loss of affective attachment to memories. For Rose R., 40 years were ‘logically’ remembered and catalogued, but not lived, not used as material for the sustenance of a self. For this patient, the non-emotional storage of life turned her into a recording device.

**Out of Space**

In addition to altered time the post-encephalitic patients experienced transforming spaces. In reference to bouts of freezing, Frances D. told Sacks:

> It’s not as simple as it looks. I don’t just come to a halt, I am still going, but I have run out of space to move in […]. You see, my space, our space, is nothing like your space: our space gets bigger and smaller, it bounces back on itself, and it loops itself round till it runs into itself.

(339)
For another patient, Seymour L., it was necessary to hurry down the hallway, in a festinating movement, because part of the floor had begun to slope down, falling away into a sink-hole. He had to hurry or otherwise he would fall away with the floor (343). For these patients it was not just a matter of immobility or positive and negative compulsions. Their altered movements were also a result of changing perceptions and changing worlds. It would be ridiculous to continue walking when you see a wall right before your face, just as it would be to casually stroll along as the earth fell away beneath your feet. In such cases, Dr Phil’s supposition that perception shapes reality takes on a decidedly literal and frightening tone. Of course, the patients’ perceptions were altered as a result of an incurable neuropsychological infirmity, whereas the deadly self-perceptions Dr Phil referred to were essentially defined as negative internal dialogue of basically ‘normal’ people. However, both constructions of altered perceptions as forces which alter reality are disconcerting. They are moments of the glitch. They take away the certainty of the future and the self. One cannot safely or confidently determine his/her destination (in both figurative and literal terms) if the floor can fall way at any moment. These are the moments that Alexander describes as ‘an eddy, that momentary still-centre. A minute ago we were settled in our world, moving naturally and easily among things. Suddenly the world becomes alien, the earth drops, we’re up in the air like Wily E. Coyote, suspended over a precipice’ (44).

Space is also a key element in Lewis Carroll’s tales. Deleuze has produced intensely critical reviews of Carroll’s work, where he addresses the concept of space and condemns the lack of depth in Alice’s Adventures in Wonderland and Through the Looking-Glass. According to Deleuze, while Alice’s adventures begin with a
promise of depth as Alice falls down the rabbit hole travelling towards the centre of the earth, her adventures ultimately become a tale about surfaces (1979, 280). She is surrounded by characters made of cards, travels across a world in the flat form of a chessboard and so on. According to Deleuze, Carroll’s tales do not delve beneath the surface of the body exploring the anguish of the schizophrenic experience to which they allude (291-92). Deleuze also argues that Carroll is not focused on the body but incorporeal events such as shrinking and growing (281). For Deleuze, these events are incorporeal because they change the attribute of the subject without actually changing the nature of the subject. In The Logic of Sense, he cites Émile Bréhier’s definition of the incorporeal event which reads, ‘when the scalpel cuts through the flesh, the first body produces upon the second not a new property but a new attribute, that of being cut’ (1990, 5). However, I have found that Alice’s Adventures in Wonderland and Through the Looking-Glass do result in moments of alterity, where the subject can no-longer attest to a maintained subjecthood over time. When Alice meets the caterpillar he asks, ‘Who are you?’ She replies, ‘I—I hardly know, Sir, just at present—at least I know who I was when I got up this morning, but I think I must have been changed several times since then’ (40-41). Furthermore, while Alice’s adventures may indeed deal with surfaces; it is these surfaces that define the depths. The surfaces in Carroll’s works are not clear, singular and maintained. I have previously noted the length and the distances of the chessboard in the Looking-Glass world are immeasurable. In addition, Alice is repeatedly confronted with unexpected spaces and surfaces. In Through the Looking-Glass, a mirror becomes a fluid ‘bright silvery mist’ (127), a penetrable surface, a doorway. She travels along pathways that always lead back to their origins (135). The flowers inform her that she must ‘walk the other way’ to get where she intends to go (139). The spaces are dynamic and
unpredictable and they shape the body of Alice as she moves through them or across them. In Alice’s adventures these surfaces, or territories, give shape to the corporeal body and challenge whatever self may be seen to reside beneath, within or above.

In Deleuze’s critique, he also argues that Carroll’s works are tales of surfaces because Carroll is a transcriber of the depth of suffering, but he does not experience it. He is, according to Deleuze, ultimately a ‘story teller’. Deleuze uses the work of writer Antonin Artaud, who suffered from severe mental illness and spent many years in sanatoriums, as a counterpoint to Carroll’s superficiality. In comparing the two writers, Deleuze writes of Carroll:

[There are] different functions and depths of non-sense […] Let us add that the logicians’ error when speaking of non-sense, is to give disembodied examples which they construct laboriously for the needs of their demonstration, as if they had never heard […] a schizophrenic speak.

(1979, 277-78)

Artaud was equally critical of Carroll, in particular, criticising ‘Jabberwocky’ in letters to Henri Parisot in 1945 (1988). Artaud declared that the piece ‘lacked a soul’ (446). After attempting to translate a portion of the poem, he writes that he became bored:

I’ve never liked this poem, which has always seemed to me affectedly childish […]. When I write or read I want to feel my soul stretch […]. I don’t like surface poems or surface languages, works which speak of happy leisure hours and felicities of the intellect […]. It is permissible to invent one’s
language and to make the language speak with an extra-
grammatical meaning, but this meaning must be valid in itself,
that is, it must come out of anguish—anguish that old servant of
pain […]. ‘Jabberwocky’ is the work of an opportunist who
wanted to feed intellectually on someone else’s pain, although
he himself was satiated from a well-served meal. When one digs
out the caca of existence and of language, the poem must smell
bad, and ‘Jabberwocky’ is a poem which its author has been
careful to protect from the uterine existence of suffering in
which ever great poet has been immersed from which when his
is delivered smells bad. There are in ‘Jabberwocky’ passages of
fecality, but it is the fecality of an English snob who forces the
obscene in himself into curls and corkscrews as if with hot
tongs, a kind of dilettante of the obscene who is very careful not
to be obscene himself […]. ‘Jabberwocky’ is the work of a
coward who was not willing to suffer his work before writing it
[…]. It is the work of a man who ate well, and this comes
through in his writing. I like the poems of the starving, the sick,
the outcast, the poisoned.

(449).

Artaud is describing Carroll’s exploration of linguistic non-sense as the childish play
of a logician or academic who has never truly experienced the bodily feeling of being
an individual whose sense of being a cohesive subject, a logical subject, dissolves.
For Artaud, and Deleuze, Carroll has never physically known, or felt, the depths of madness. He has never swam or drowned in its smelly, messy and transgressive expulsions. He has never lived in its shit.

Sacks can also be understood as a Carollonian figure who writes but does not ‘feel’ - a subject who describes surfaces because he doesn’t know the qualities of the depths. He writes of others’ experiences of post-encephalitic Parkinsonism. He may aim to be a ‘co-explorer’ in their post-encephalitic realms, but he always maintains his position as doctor, as the storyteller. He makes the decision to implement the trial drug, but he himself never experiences its explosive effects. He has not lived in the shit of Mount Carmel hospital for four decades. He watched, analysed, raised and lowered drug levels to observe the results and he writes. And perhaps this is why Sacks’ biography never tumbles irrevocably into ‘unmeaning’, because he doesn’t truly know what it is to be without meaning. He gives meaning and hope to his patients because he doesn’t know how to describe a subject void of these qualities. Sacks is resolute in mapping the spaces of his subjects. And this is a primary reason why he is a sympathetic magician. For the magician there are always possibilities for mastering the chaos and escaping the void. The magician by definition is a carrier of hope, a contagious vessel, who spreads meaning and purpose.

**Abandoning Futility through Kinaesthetic Melodies**

Despite Sacks’ enduring optimism his patients remained glitches. They were displaced bodies, residing in pathological territories where they faced altered logic, possession, and isolated and anomalous perceptions of space and time. They did not resolve these glitches. Sacks notes with a definite sense of sadness and
disappointment that only one of his patients, Aaron E., ever left the hospital (at least as of the 1973 publication date) and ultimately he had to return (196). Sacks also refers to the sometimes catastrophic consequences of his drug treatment. After Margaret A. was placed on L-DOPA she was thrown into an unceasing shifting between extremes with no middle-ground (159). According to Sacks:

Miss A. [...] split into a dozen Miss A.’s [...] all struggling with each other to ‘possess’ her behaviour. Her real interests and activities have practically vanished [...]. The original Miss A. – so engaging and bright – has been dispossessed by a host of crude, degenerative sub-selves – a ‘schizophrenic’ fission of her once-unified self.

(160)

Margaret A. was lost or possessed by a perverted fractal subjecthood. In these moments of futility, at the brink of ‘un meaning’, the post-encephalitic patients, such as Margaret A., reveal an experience of Wonderland that is similar to Michael Jackson’s experiences described in the previous chapter. Jackson was identified as a master magician early in life. He could command an audience of millions. His songs, his presence, evoked devotional fits and his image was a marker of style. But this sympathetic god lost his power, or perhaps it decayed or dissipated as a result of his ever-increasing self-distribution. He became a subject-object shaped and devoured by the sympathetic power of his audience and his own compulsion to become-other. His life ended, and his images continue, as a subject who shifts and changes, grows and shrinks, goes round and round, unsure of his own subjecthood, always in the process of becoming. Michael Jackson became a series of images involved in an unpredictable evolution, and it is this chaotic development that is also present in the
worlds of *Awakenings*. Sacks describes patients who continued to astound him in their becomings. They have lived an irresolvable chaos with no sense of predictability ever achieved.

Alice also moves towards futility but never tumbles in. I have already noted, in Deleuze’s critique of Carroll’s work that he insists Alice’s adventures do not broach the realm of hopelessness. According to Deleuze, Alice’s adventures do not convey the depth of ‘un meaning’ of the schizophrenic experience (291-92). I would agree with Deleuze that Carroll’s work does not delve deeply into ‘un meaning’. However, Alice does approach the void at times, forgetting herself, her path, and her intentions. She experiences the danger of the glitch in her becoming. Her subjective continuity as an individual, discrete and unified ‘self’ is challenged in such instances as ‘the wood […] where things have no names’ (152). However, she ultimately overcomes any danger of meaningless and thus functions as a kind of ideal subject, in Sacks terms. Like Sacks’ patients, she endures the absurd swings of the bodily glitch, testing her knowledge of self and world. However, unlike Sacks’ patients, at the end of Alice’s tales she is resolute in her knowledge of herself and masters the absurdity. As Fiedler observes, while children’s stories may introduce and play with the other, they ‘move on to a Happy Ending represented by waking up or growing up, or both’ (30). In *Alice*, she learns, as Fiedler notes:

> to be just the right size for every occasion. Only then can a girl be ‘queened’, and thus entering into full womanhood,
distinguish the real from the make-believe, the human from pseudo-human. What children’s books tell us, finally, is that
maturity involves the ability to believe the self normal, only the other a monster or Freak. Failing to attain such security, we are likely to end by not growing up at all.

The post-encephalitic patients have not had the happily ever after of Alice where the story always ends with the return from the otherworld. The subjects of Awakenings are ‘failures’ in corporeal sympathy. They are glitches. They could not grow up or mature as they were denied the time and space to do so. They were out of time and space. They could not become personal magicians able to stabilise themselves as agentic subjects. They remained in their Wonderlands, most of them having long since died when Sacks published the 1999 edition of Awakenings. I wonder how one might review Alice’s Adventures in Wonderland if she had never found her way home. Would her sense of self ultimately have dissolved under the pressure of the Wonderland chaos? Would she become like Jackson, a figure of uncontained and unpredictable expansion? Would Carroll’s tale have become a tiring and futile horror story?

Despite the setbacks and failures, Sacks, like Carroll, has not ultimately conceded to Deleuze’s ‘un meaning’ or Jackson’s dissipation through an unceasing becoming. Sacks may be an ignorant ‘storyteller’ or a naïve optimist, but he has refused to admit that his patients’ glitches are completely inexplicable, without hope or solution. Nor has he closed his eyes and denied their de-stabilising presence. He searched for moments when the glitch subsided and they were granted access to the world of the normal, if just for a brief visit. In such instances, Sacks creates an inversion of Wonderland.
Partaking of the Other

Sacks attempted to pull the patients and his readers back from the void through moments of sympathetic clarity, where some of the patients managed to re-connect (even in small ways) with the flow of life around them. Whether it was by conscious thought or some unconscious impetus to regulate one’s body and self, Sacks and his patients found ways to negotiate unstable constructs of body, movement and space. Sacks, as sympathetic magician, has sought to make sense of these connections – to find the materials and processes for bridging the realm of lost souls and the ordinary plane.

A primary way Sacks has addressed regained control and force is via the theme of ‘flow’. Csikszentmihalyi describes flow as focused and synchronised mental and bodily activity which results in an optimised experience and the production of successful activity – whether that means the attainment of a particular emotional or spiritual state, climbing a mountain or excelling at one’s profession25 (23-24, 39). Sacks’ patients are described as having experienced a kind of mutated or blocked flow in the form of ‘kinetic stutter’, a loss of ‘automatic’ and ‘self-organising’ rhythmic flow (Sacks 2007, 248).

25 The concept of flow will be discussed in further detail in Chapter Five, as Ian Waterman suffered a severing of flow as a result of a loss of proprioception and touch sensation.
For those patients who experienced types of freezing, it sometimes took external stimuli to shatter their immobility and enable them to once more engage in their activities. While these patients could not initiate movement, they could respond to other kinds of movement, such as someone throwing a ball, music, or others dancing (Sacks 2007, 249). The normal flow of others was instrumental. The presence, voice or touch of another active person could disengage the patients from the stillness of the Parkinsonian world and transport them back to dynamic reality. Edith T. was one such patient. She experienced intense blocking as one of the repercussions of taking L-DOPA. Various methods could be used to stimulate her movement, such as touch. A light touch and someone walking with her could re-awaken her natural activity and grace. Her response to this was, ‘[y]ou “normals”, you are full of “go” and when you are with me I can partake of all this. The moment you go away I am nothing again’ (61). Edith T. strongly believed in the power of sympathetic connection to aid in her restoration and agency.

Sacks’ patients imitated their desired embodiment, partaking in the fundamental sympathetic act of mimesis. In Frazer’s study of homeopathic/imitative magic he offers many examples of people and cultures mimicking desired outcomes. One such example was a report that in Madagascar, when the men went to war, the women would dance night and day ‘and neither lie down nor take food in their own houses’ (34). By refusing to rest or feed, they aimed to ‘impart strength, courage, and good fortune to their husbands’ (34). For these people, the movement of dance became an emotional force that could travel distances and enter others, fortifying their spirit and bodies in the face of impending peril. In sympathetic magic, rhythm, beat and fluid activity of the body are used as tools for affective and physical ignition. For Sacks,
'rhythm as life’ has also been literalised. Sacks believed it was crucial to ignite action in the patients saying, ‘when the Parkinsonian is not active he does not exist – when we recall him to activity we call him to life’ (346).

A Powerful Beat

Sacks has identified music as a primary source of sympathetic quickening. He believes ‘music [can] modulate the stream of movement or speech’ (2007, 250). Frances D. felt as though competence and ‘naturalness’ returned to her movements with the aid of music or the natural rhythm of others. She told Sacks:

I partake of other people, as I partake of the music. Whether it is others, in their own natural movement, or the movement of music itself, the feeling of movement, of living movement, is communicated to me.

(282)

And Ed M., who was ‘akinetic on one side, and frenetic on the other’, would lose the paradoxical and debilitating symptoms of these two problems when he played the piano (282). Also, Rolando P., as a severely post-encephalitic child, would sit:

proped before the speaker of a large Victrola gramophone, for music (as his father observed) seemed to be the only thing he enjoyed, and the only thing which ‘brought him to life.’

Animated music would give the boy its animations, and allow him to nod, sing, or gesture in time with it; but as soon as the music came to a stop, he too would come to a stop, and return at once to his stony immobility.

(117)
Sacks believes music can act as an ignition for kinetic melody, the natural rhythm of bodily movement. Music became a counter-force to Parkinsonism. Just as the introduction of the pathogen created a monstrous sympathetic growth, the introduction of music created a steady movement and familiar progression.

Music therapy has also been increasingly realised as a form of complimentary therapy by the wider medical community (Rao 2004). Amnon Shiloah writes that there has been a long history of musical therapy in non-western cultures. For example, ninth and tenth century practitioners of Muslim medicine believed music was able to unite the mind and body and help establish harmony between the two as well as the individual with his/her environment (1971, 77). Music has been used for various therapeutic purposes including to regulate the heartbeat of pre-mature and sick infants (using music that has 60 beats per minute), to reduce agitation and enhance orientation in those who have suffered traumatic brain injury, and to create peace and self-awareness in dementia patients (Grocke 2005). Proponents of musical therapy believe its effectiveness is due in part to its plasticity, the ability to cater to the individual and his/her emotional needs (Grocke, 25). According to Peregrine Horden, in his analysis of musical therapy, music presents a sympathy when sickness has created disorientation (1971, 17).

**The Musical Initiation of Oliver Sacks**

In *A Leg to Stand On*, Sacks describes his own experience of being fragmented and recreating a sympathetic union of the self; and the integral role of music (1991). Whilst tracking up a Norway mountainside alone in 1974, he rounded a boulder and discovered a white bull in his path. In fear for his life, Sacks began to run back down
the mountain. He lost his step, falling and horribly injuring his left-leg. Realising that he would likely die when night fell, due to the plummeting temperatures, he began to make his way down the mountain. He crafted a splint using his umbrella and jacket and made a rowing motion with his arms whilst moving along on his bottom (10). As he tried to make his way down the mountain, he heard Volga Boatmen’s Song and began to chant his own creation, ‘without haste, without rest’. As the music rose, he found himself ‘musicked’ along, no-longer worrying about his pace and co-ordination (13). As the struggle lessened, so did his fear and he felt as though his muscles responded to the music generated within him (13).

As Sacks recuperated in hospital, he found himself in unfamiliar territory within his own body. He had suffered from torn quadriceps and the cutting of the skin branches of the femoral nerve in the operation. However, major concern arose when he was completely unable to flex his left quadriceps, or even feel his left-leg, except for his foot. He also suffered from a loss of proprioception, which he described as the disappearance of the flow of often unconscious information which confirms the body and the self anchored within it (47). He looked down at his leg encased in a cast and it no-longer belonged to him. His leg felt strange, unknown. It was as though the cast surrounded a void. In Sacks’ words, he experienced ‘a sort of paralysis and alienation of the leg, reducing it to an “object” which seemed unrelated to me; an abyss of bizarre, and even terrifying effects’ (vii). Sacks believed himself to have experienced a kind of breakdown which had resulted in the ‘subjective’ loss of his leg, while it ‘objectively’ remained present (49). In neurological terms, he felt as though he was an internal amputee, because the part of the body-image in his brain dedicated to his upper left-leg had been destroyed (50). In ego psychological terms, he felt as though
he had lost the leg as a symbolic affective ‘image’ (50). He suffered from a neural
image-based and psychological affective-based disturbance, as the damage had been
repaired in surgery. He was no-longer able to confirm himself as someone who
possessed the bodily feeling and internal image of a left-leg. Like his post-
encephalitic patients, his reality and self had been disrupted, and were now out of
sync with his world’s relative view of the subject ‘Oliver Sacks’.

For a period of 15 days Sacks journeyed through a strange and often frightening
experience of feeling fragmented within himself because his leg, while physically
present, had become alien. As Sacks notes, this peripheral injury had a central effect
on his identity (44). He became increasingly distressed and progressively fractured in
his sense of self, because he was unable to comprehend the contradiction before him
- he could see he had a left-leg and yet he was unable to lay claim to it. He realised
his injuries should not have this effect and yet they did.

In his account, Sacks includes a quote from philosopher Thomas Hobbes who wrote,
‘that which is not Body is no part of the Universe […] and since the Universe is all,
that which is not Body is Nothing and No Where’ (2008, 465). Sacks adheres to the
magical philosophy espoused in this dissertation that posits the body as the source for
power and meaning. He was unable to confirm himself as a force in the world and
experienced overwhelming feelings of passivity and futility. He asked – ‘What was
happening with me? I couldn’t try, I couldn’t will, I couldn’t think, I couldn’t recall’
(43). With his body disconnected he was unable to feel a sense of authority and
autonomous action.
In his biography, Sacks discusses the re-discovery of his leg and a united self. In his despair and frustration he searched for new sources of hope and revival and found it in musical therapy, drawing on the magical premise that the self may become the other (Taussig 1993, xiii). In particular, Sacks embraced the sympathetic act described by Taussig as ‘(active) yielding’ (46), where the movement of the agentic subject involves a willing submission to an other. He drew power from the image, in this case an auditory image, yielding to its flow. Music increasingly became a symbol of power and movement, supplanting his feelings of futility with possibility. Sacks, like the magician described by Malinowski, sought to close the gap in knowledge. When he was learning to walk on his crutches he found it almost impossible. He had difficulty recognising his own left-leg and could only move by looking down at the cast. When he first attempted to move his left-leg he experienced extreme perceptual changes, with the leg altering in size, length, width, angle, shape and position (104). When he did move it was awkward and robotic, until he started playing Mendelssohn’s fortissimo over in his head, which brought life and self back into his leg. Sacks describes the music as a ‘stream, an organic whole without any separations or seams, but articulate, articulated with life [and through the music] the quintessential living “I” returned’ (112). The power of the music had a sympathetic connection with his action, continuity and unity. His movements became automatic and natural. He states, ‘in the very moment that my “motor” music, my kinetic melody, my walking, came back – in this self-same moment the leg came back’ (108). His leg and in consequence his self was enlivened and re-affirmed through the sympathetic connection between image and action. He believes a centre, an ‘I’, is embodied in the music and activity (112). For Sacks ‘action’ was a primary source of healing, beyond procedures or sequences (167). It was not enough to logically know
how to walk, or even to consciously will his actions, he needed to move with an automatic freedom and only in completing the act with flow and grace could he really ‘know’ what it was to walk as ‘Oliver Sacks’.

In Sacks’ study of post-encephalitic patients and his own experiences, he alludes to the significance of mimesis. Elsewhere, he has written of the role of mimesis, as ‘a way of representing reality with one’s body and senses, a uniquely human capacity no less important than symbol or language’ (1995, 240). And in his writing he depicts exemplary magical moments, where knowledge is a bodily and affective knowing, created through the movement of the representative act. In Awakenings, the patients returned from the otherworld of Parkinsonism when they were able to see versions of themselves mirrored by music (as well as other types of movement and connections with the world). They were offered desirable images of the self from which they could draw power. They were able to pass through the Looking-Glass and become the mirrored other.

In the proceeding years Sacks has retained his interest in musical therapy and has come to the conclusion that specific kinds of concentration, associated with positive affective responses, aid in the application and mobilisation of one’s mind (1990). In Musicophilia, he writes that music can ‘kick-start a damaged or inhibited motor system into action again’ (2007, 236). In Music and Neurological Disorder, Sacks and Concetta Tomaino contend that some neurological patients such as sufferers of Parkinsonism:

- may not be offered any decisive cure by the medical profession,
- their physical and mental states, and their functioning may often
be immensely improved by remedial and therapeutic measures
of a nonmedical sort’ such as musical therapy.

(1991, 10)

In Sacks’ studies he identifies music as a sympathetic image, where each person
searches for an auditory representation which invokes the desired power, whether it
be movement, peace or a stable rhythm.

Sacks’ own experience with a neurological loss of sympathy also serves to
strengthen his position as sympathetic magician and to offer depth to his analysis of
others’ suffering. It is common for magicians, in anthropological literature, to prove
themselves through initiation rituals (and it seems from Deleuze’s and Artaud’s
comments noted above, the modern magician is also required to have first-hand
knowledge of the ‘otherworlds’). According to Merchant, in Siberian and Inner
Asian tribes shamans would go through a ‘pre-initiatory illness’ of a delusional and
often serious nature (10). Part of their initiation may involve the reconciliation or
self-curing of this state. Yalom has also identified the bond between the shaman and
therapist who has experienced the problems of his/her patients. He writes:

> If a therapist is to help patients confront and incorporate death
> into life, he or she must have personally worked through these
> issues. An interesting parallel is to be found in the initiation rites
> of healers in primitive cultures.

(205)
Sacks has travelled to the ‘other world’, he knows something of the post-encephalitic glitch and discovered a path back\textsuperscript{26}. Perhaps, in this sense, his autobiographical analysis is his attempt to affirm his understanding of the bodily sensation of a subject in suffering.

**Sympathetic Yielding and the Communal Body**

Sacks’ realisation of the importance of the other in maintaining or regaining one’s internal natural rhythm presents a convincing case for the inter-bodily determination of sympathetic subjects. In *Awakenings*, Sacks depicts music and the healthy other as magical contagions. As such, he partakes of the sympathetic theory that the magical act and magical subject are contagions. According to Mauss magic involves a social/communal affect contagion, where:

> The whole social body comes alive with the same movement.

> They all become, in a manner of speaking, parts of a machine or, better, spokes of a wheel […]. The rhythmic movement, uniform

\textsuperscript{26} Sacks has also aroused a feeling of ‘magical initiation’ in another autobiographical text, *Uncle Tungsten: Memories of a Chemical Childhood* (2002). In his second autobiographical text, he talks about his isolation at a formidable boarding school during World War II. Regarding the beatings from his headmaster he writes: ‘[t]he violence exuded by the headmaster at times seemed to contaminate the whole of living nature, so that I saw violence as the very principle of life’ (45). He also refers to the initiatory processes instigated by his parents. His physician mother had him dissect stillborn fetuses or babies she had drowned at birth which horrified and revolted him. She also introduced him to his first cadaver at 14. It was actions like these that threatened his love of medicine and made him question if he could ever love the living (407). Through his stories of tribulation, initiation and hereditary passing down of knowledge arises the birth of a sympathetic magician.
and continuous, is the immediate expression of a mental state, in which the consciousness of each individual is overwhelmed by a single sentiment [...]. Each body shares the same passion, each face wears the same mask, each voice utters the same cry.

(133)

Here, Mauss is describing the extraordinary sympathetic force of the communal body, as each individual organism absorbs and builds upon the excitation of the other organisms in its system, and then explodes with its own affective force which in turn is absorbed and built upon by the other organisms. This communal, contagious and affective view of the magical act seems fundamental to Sacks’ pursuit of the re-ignited subject, as it is to my conception of complex sympathetic systems. It is clearly present in previously discussed experiences of kinaesthetic melodies. Sacks describes bodies (both human and musical) that are able to unite in a ‘single sentiment’ and ‘utter the same cry’ of bodily grace.

Mauss’ statement identifies a primary role of the contagious other; fashioning an individual subject who is also part of a community. Sacks has tried to re-create communities for his patients. He writes that the hospital staff attempted to track down loved-ones, to re-create bonds between patients and their lives outside the hospital walls. For example, Hester Y.’s brother believed Parkinsonism had sucked out her life like the tide (96). When she was reunited with her family, with whom she had once been very close, the tide rolled back in. And Margaret A. was not able to gain any stability on L-DOPA. She remained a severely debilitated Parkinsonian patient, with various tics, tremors, insomnia, huge appetite, festination and severe mood swings. Sacks found that she could not establish a middle-ground between
'comma and hypervigilance, Parkinsonism and frenzy, depression and mania’ (159).

However, when her beloved younger sister visited each month and took her out for
the day, she was re-connected with the life and identity she had loved pre-
Parkinsonism. It seems she was so alive, alert and herself that her sister found the
hospital’s assessment of her to be almost unbelievable declaring, ‘[s]he goes mad in
your madhouse because she is shut off from life’ (160).

Mauss’ statement also describes an affective driven movement and knowledge of the
self. Likewise, Malinowski believes magic is ‘based on the specific experience of
emotional states in which man observes not nature but himself, in which the truth is
revealed not by reason but by the play of emotions upon the human organism’ (87).
Malinowski is likely disparaging the magical emphasis on emotion as an ignorant
element of the ‘primitive’ tribes he studied. He would probably define reason in
similar terms to Dr Phil, as an antithesis to affective knowledge, instead being a
mind-based knowledge and process which is ‘objective’ and ‘unemotional’.

However, I find his definition of magical theory is not a theory of ‘unreason’, rather
it resembles the intricate construction of rationality as observed by Antonio Damasio,
especially considering that Malinowski also notes that magic is directed towards
practical ends (19). Damasio views efficient rationality as an inseparable blend of
logical analysis and affective input. This emotional rationality certainly seems to be
what Sacks and his patients craved in their efforts to break out of the post-
encephalitic silence. They used affective based strategies (in conjunction with
chemical ones) focused on the individual body in order to achieve practical ends –
such as increased motor skill and communicative abilities.
Sacks is not alone in his affirmation of communal and affect contagion as sources of ‘health’. Lisa Blackman investigates a sympathetic understanding of hallucinations in psychiatry and the points of intersection and complication between biology, psychology and the social (2001). According to Blackman, a key issue in determining whether a person is insane involves the patient’s ability to establish sympathetic relations with the external world. Blackman writes:

To become only suggestible to one’s own will, to lose sympathetic relations with the external world, will accord one a subject position within psychiatry where one is viewed as losing these capacities of citizenship: the ability to self-regulate.

(176)

She identifies the social other as an essential component in the integrated subjecthood of the individual. And like Carroll, and Sacks, she contends that the context exerts an indisputable force upon the subject.

The post-encephalitic patients were open to transformation by the external bodies (animate and inanimate) they came in contact with. As previously mentioned, this is also true of the surreal worlds in Alice’s adventures. In Alice’s sojourn into the flower garden in *Through the Looking-Glass*, she is puzzled by the talking flowers and comments that she has never heard flowers talk before. The flowers note that this is likely so because the other flower beds she has visited have been too soft and the flowers fell asleep, whereas their bed is hard so they stay awake. According to Wonderland logic, to awaken your flowers make the bed hard, to send them to sleep make it soft. Sacks also seeks to show that his patients are bodies subjected to the
sympathetic forces of their individual environments. He attempted to help them progress by populating their environments with beneficial sympathetic bodies. And as has been discussed, he did have some success.

**Representations of Bodily Sympathy**

Of course, the post-encephalitic patients were never cured or re-embodied as healthy subjects. Their moments of sympathetic unity and grace are described as fleeting. Perhaps under such circumstances, the mimetic acts of sympathy described in this chapter position the patients as images or copies of the melody as opposed to being agents or prototypes. Sacks’ describes music, or the healthy bodies of others, as the sources for the kinaesthetic awakenings. The patients’ embodied and embraced these movements in acts of image production, becoming melodic movement, drawing power from the sources, never to be fully realised as sustained agents of sympathetic movement. They are glitches in terms of the faith in the human as a sustainable kinaesthetic agent and an individual original as opposed to a sympathetic re-production.

It may be useful to revisit Deleuze’s assertion that Carroll’s work deals with surfaces when addressing the patients as images. However, my interest in discussing surfaces is not an implication that the patients as images are shallow constructs, which Deleuze certainly argues in his critiques of Carroll. Rather, I am interested in the surface as the point-of-contact between bodies and the sympathetic realisation that the subject is also an object. Alice is a surface for the performance of the Wonderland subject. As she comes in contact with the Wonderland bodies and forces, whether they are cakes, bottles, mushrooms, chess boards or trees, she takes
on elements of these bodies and enacts the alterity of this strange world. The contact of surfaces between bodies, between images, becomes the ignition for sympathetic transformation. The same is true for the post-encephalitic patients. As the patients came into contact with music and grace, as they moved across the surfaces of the healthy, moving with the healthy other, they were shaped in the others’ idealised forms.

The post-encephalitic patients were compelled by a mimetic drive to partake of the communal body. In Taussig’s study of mimesis he describes mimesis ‘as [a] sensuous connection with things’, and quotes Gertrude Koch who describes it as that ‘smooth symbiotic sense of blending together, of dissolution into images and their movement’ (36). Taussig believes mimesis is ‘a pulsational force of bodily drives invested in but developing before the acquisition of language per se, before syntax and the sign proper, but essential to their functioning’ (which he notes Kristeva calls the ‘chora’) (36). This ‘force of bodily drives’ seeks out other bodies, or images, to absorb and learn from. The image is a sympathetic source and representation of knowledge. In Awakenings, the patients used the bodies of others, the bodies of music and movement, to acquire the bodily knowledge of kinaesthetic melody and affective integrity. Conversely, they also functioned as images of ‘becoming-other’, pathological subjects who are known and understood as persisting subjects (struggling to maintain recognisable identities) in those moments of synchrony when they were able to blend with healthy bodies in representations of embodied flow. From whichever position, subjects or representations, when the post-encephalitic patients lost their borders and took-in or were taken-in by the other they were offered
the pleasure of knowledge, grace, health and the human. As such, they offer a contrast to Dr Phil’s identification of the dangers of sympathy and the fear that the lax border of the subject can be a cause of sympathetic ruin.

Overall, Sacks’ work identifies contagion as a key element of an evolved magic, both in terms of the development of the illness and the patients’ struggles for unity. Magical effect is realised in these acts of contagion when bodies, surfaces and internalities are changed at the points of contact with others – enlivened by the affective and motor movements of self and other as they collide. Sacks’ work is a study of the remarkable character of mimesis.

In the following chapter, I examine a subject who is permanently denied a primary pathway between self and other. In Chapter Five, I discuss Jonathan Cole’s, *Pride and a Daily Marathon*, which explores how a man without touch sensation and proprioceptive function from the neck down can stabilise and confirm his self in the absence of a fully affectively sensed embodiment. Waterman is not a subject who can open himself up to the kinetic melodies of others, nor has he any hope for igniting his own. Thus, his sympathetic acts are those of a dynamic and compromising embodiment that seeks to ‘know’ in a physical sense his world and his place within it in a new way.
Chapter Five

Touch, Embodied Grace and the Sensation of Sensuality

Grace is the absence of everything that indicates pain or difficulty, hesitation or incongruity.

(Hazlitt 1944, 72)

When I think about you
I touch myself.

(The Divinyls, ‘I Touch Myself’ [song])

Introduction

In this chapter, I continue the discussion of embodied sympathy begun in Chapter Four. I shall examine a second medicalised corporeality as described by the neurophysiologist, Dr Jonathan Cole, in the biography Pride and a Daily Marathon. Cole’s medical text explores the life of his subject, Ian Waterman, who lives with an irreversible neuropathy. Waterman suffers from ‘a severe loss of

27 All Jonathan Cole citations refer to Pride and a Daily Marathon (1995) unless otherwise indicated.
functioning of the peripheral sensory nerves’ (13). I am interested in using Cole’s theorisations of Waterman’s pathology and accommodating responses to explore the flow of the sensate body. This shall include addressing the knowledgeable body as a source for subjecthood through a discussion of ‘tacit knowledge’ and an exploration of the Cartesian self as antipathy. I am also interested in using Cole’s biography to address the ‘feeling’ body as a necessarily passionate body, or perhaps even a necessarily violent and obscene body in Georges Bataille’s terms (1984). This shall aid in my formation of a more comprehensive understanding of magic as an affective body and an evolutionary system.

Cole’s case study is important for several reasons. As has previously been stated, the contemporary western world has been medicalised, and the accredited medical expert holds great sway in the sympathetic construction of the modern subject. Cole, in particular, is of significance because he is a proponent of a complex manifestation of medical magic. In *Pride and a Daily Marathon*, the patient, the specimen, the object subjected to magical force also functions as active agent. Cole and Waterman reveal a sympathetic relationship of co-dependence. In *Pride and a Daily Marathon*, the creation of magical effect is understood in terms of a broader culture of agents and magical knowledge is dispersed amongst the society. Cole’s work is a movement away from the modern exclusionary medical models of sympathetic knowledge, where the wisdom is maintained and contained by the select master magicians.

Cole, like all of the magicians addressed in this thesis, embraces contemporary individualist trends and the search for personal subjective wisdom. His work, in *Pride and a Daily Marathon*, is significant because the medicalised self-determining
mind described by Dr Phil is involved in a much more complex process of self-creation, embracing an advanced bio-social sympathetic process. Cole permits a broader conception of the bio-physical human and allows us to address the subject as a violent and passionate subject. He addresses the contemporary medicalised subject as a necessarily complex emotional corporeal subject. He uses the pre-dominating medical and individualist discourses of contemporary society to create a comprehensive study of sympathy.

The Back Story

Cole begins his biographical case-study with an analysis of the onset of Waterman’s neuropathy. In May 1971, at the age of 19, Waterman was admitted to hospital suffering from exhaustion and weakness. When he awoke the next morning he had lost all feeling of his body. Cole writes:

> he could feel nothing from the neck. Nor could he feel his mouth and tongue\(^{28}\). Not only couldn’t he feel anything to touch, he had no idea of where the various bits of his body were without looking at them. He could not feel anything with his arms, his legs or his body. That was frightening enough, but he had no awareness of their position either.

(12)

Waterman’s symptoms pointed to a problem with his peripheral nervous system. Cole notes that there are sensory receptors throughout the human body that inform the central nervous system, the brain, of what is going on in the body (24). The role

\(^{28}\) Waterman’s lost facial sensations slowly returned.
of the motor nerve cells is to control movement, posture, sweating and bladder function; with information travelling from the spinal cord to the limbs. The sensory nerve cells send information from the ‘periphery to the central nervous system’ (24). Their role is to inform the brain of bodily movements, position, touch sensation, pain and temperature. Cole states that, ‘Ian’s neuropathy had abolished function in all his large myelinated sensory fibres below the neck without affecting the motor fibres of the smaller sensory fibres’ (28). This meant he had lost all touch sensation and proprioceptive function, with only thermal and pain sensations remaining intact. His ability to move his muscles remained. However, he could no-longer feel the positions and actions of his body from the neck down. This left him unable to control his movements. With an overwhelming abruptness, Waterman was catapulted from his normal life and subjechthood to an experience of being without familiarity and stability. When Waterman was first admitted to hospital, he was ‘up in the air’, unable to be anchored by touch and proprioception.

A Theory of Flow

As was the case with the post-encephalitic patients, I shall argue that Waterman experiences the glitch as a bodily dysfunction that has a central effect on the cohesiveness of his subjecthood. However, unlike the post-encephalitic patients, Waterman’s experience of the glitch is not the result of a Wonderland of multiplicities, a rhizomatic becoming arising from the contentious struggle between the qualities of the patient, illness, treatment and so on. Instead, Cole describes Waterman’s glitch as a fundamental absence in his neurophysiological functioning as
evidenced by the above description. I believe Cole understands Waterman’s experiences in terms of a cessation of flow. He writes:

The damage to Ian’s nerves had destroyed all feeling of touch below the neck – this much is relatively simple to understand. But it had also removed from him the sixth sense, the subconscious awareness of body and joint position, the sense of movement, kinaesthesia. The barrage of activity from muscles, joints and skin alerting him to changes in posture and movement stopped suddenly at the time he went into hospital.

(32)

Cole describes the loss of proprioception as a loss of the perpetual and dynamic flow of information that updates the brain on the body’s movements, states and world. Waterman’s loss is a breakdown in sensory sympathy. This breakdown has instrumental effects on the subjecthood of Waterman. As Cole writes, ‘if one moves to clinical medicine and the experience of patients then the effects of sensory and motor deficits show how intention, action, sensation and one’s perception of self are intimately related’ (2007, 324).

I referred to Csikszentmihalyi’s concept of flow in Chapter Four. Csikszentmihalyi describes flow as the effortless streaming of psychic energy which occurs ‘[w]hen the information that keeps coming into awareness is congruent with goals’ (39). As previously stated, this stream of energy finds its source in the body. Csikszentmihalyi writes, ‘[w]hat gives [the body] a preciousness beyond reckoning is the fact that without it there would be no experiences, and therefore no record of life as we know it’ (95). Flow is a bodily sympathy. It refers to the activation of an optimised bodily
state as the source for subjective and affective power. Sympathetic magic shares this same basic premise. As has already been stated in this dissertation, magic constructs the individual body as ‘the receptacle of magic and the channel of its flow’ (Malinowski, 76). For example, Frazer reported that ‘among the Bataks of Sumatra a barren woman, who would become a mother, will make a wooden image of a child and hold it in her lap, believing that this will lead to the fulfilment of her wish’ (18).

The barren woman physically enacts motherhood, in partnership with the child in artefact form, in order to bring her closer to her goal. The child in artefact form is also a magical body ‘acting out’ the woman’s motherhood. As has previously been stated, magical artefacts are sculpted bodies used to instigate affective goals. According to Gell, they function as social agents, or as physical manifestations of desire and intent. At first glance, this anthropological case may seem far removed from the psychological theories of Csikszentmihalyi, both focus on body, movement, affect and the ideal (whether it be a physiological or emotional goal). In sympathetic practice, one moves one’s body in order to arouse, perform and embody a particular aspiration. In the above Frazerian example, a woman ‘enacted’ the nurturing love of the maternal figure; in doing so she imitated a desired outcome with the intent of bringing herself closer to the goal of becoming a mother. Gell theorises such acts in terms of the creation of bodies (whether they be made of wood or flesh) as representations, which embody and perform desire. Csikszentmihalyi’s theories embrace such a philosophy through flow as embodied mimetic acts.

In the previous chapter, flow was used to understand the obstructions to the patients’ kinaesthetic melodies. In Waterman’s case, the flow provided by touch and proprioceptive function is not obstructed, but severed. Waterman cannot move along
the surfaces of flow in a sympathetic unity with graceful bodies (either human or musical). There is no possibility of a kinaesthetic awakening as there was with Sacks’ patients, achieved via their acts of mimesis and appropriation. He is starved of what I have previously declared to be a fundamental component of complex sympathy. However, I shall argue that the search for flow is not abandoned by Cole and Waterman. When denied the possibility of kinaesthetic movement, Waterman searches for sympathetic substitutes, primarily using sight, sound and focused conscious attention, in order to build a new sympathy. In particular, vision offers him a new pathway to experience and perception. Thus, he partakes of the optimism of magic, the possibility for difference, expansion and sustenance through the innovative pursuit of tangential pathways.

**Body-Brain Flow**

I plan to use the sympathetic theories of flow to argue that Cole and Waterman are proponents of sympathetic embodiment. When the relationship between the head/brain and the rest of the body is literally severed for Waterman, he does not identify himself as a Cartesian being. He does not or cannot view himself as an intact mind distinct from his bodily breakdown, despite the fact that he has been forced into a kind of bifurcated Cartesian experience through his sensory deprivation. Cole and Waterman adhere to an understanding of subjecthood that posits the body as the source of the sense of self. As such, they model Damasio’s theories of the brain-body complex. Damasio describes this composition as follows:

> The organism constituted by the brain-body partnership interacts with the environment as an ensemble, the interaction being of neither the body nor the brain alone. But complex organisms
such as ours do more than just interact, more than merely
generate the spontaneous or reactive external responses known
collectively as behaviour. They also generate internal responses,
some of which constitute images (visual, auditory,
Somatosensory, and so on), which I postulate as the basis for
mind.

(88-89)

Damasio describes the brain-body partnership as indivisible and indispensible in the
creation of the subject. He has identified bodily function and perception as sources
or foundations for the production of the mind and self. He writes:

Surprising as it may sound, the mind exists in and for an
integrated organism, our minds would not be the way they are if
it were not for the interplay of body and brain during evolution,
during individual development, and at the current moment. The
mind had to be first about the body, or it could not have been.
On the basis of the ground reference that the body continuously
provides, the mind can then be about many other things, real and
imaginary.

(xvi)

Damasio contends the abstract self is dependent on physiological function. He
provides an interdependent, a sympathetic, understanding of biological corporeality.
He understands the subject as not only rooted in, but a result of, biological function –
sensorial input being a primary element of this process. He offers a biological, a
neurological, system of flow arguing, ‘[l]iving organisms are changing continuously, assuming a succession of “states,” each defined by varied patterns of ongoing activity in all of its components’ (87).

A philosophy of embodied subjectivity, such as Damasio’s, would necessarily determine that Waterman’s self is not immune from his bodily disorder. This is the conclusion reached by Cole, as evidenced by his previously cited statement regarding the relationship between the peripheral nervous system and the substance of the self. Waterman’s self is not a severed and sustained Cartesian mind. Cole and Waterman have remained focused on embodiment and the corporeal and sensorial re-working needed in order for Waterman to feel ‘self-sustained’. I shall argue that Waterman’s experience of a forced pathological Cartesian experience reveals a dualistic state of selfhood as exhausting and isolating, not a utopia of transcendent experience.

Cartesianism, as it is addressed in this chapter, is a ‘flowless’ antipathy, an obstacle in the pathways of magical growth. Conversely, I shall contend that Cole and Waterman’s endeavour for re-embodiment presents the most complex manifestation of sympathy in this dissertation.

**A Magical Duet**

In my examination of Cole and Waterman’s efforts in pursuing Waterman’s embodied sympathy, I aim to address Cole and Waterman as particular kinds of magicians. Cole is a magical theoretician. He does not provide any type of cure or treatment in the space of the biography. What he does is offer some hypotheses on the sympathetic possibilities of the human subject in terms of corporeal adaptability.
In the face of the unknown, Cole seeks to understand how the subject persists. Cole is what Frazer would term a public magician, who practices magic ‘for the benefit of the whole community’ (59).

Waterman is a private magician. Frazer describes private magic as ‘magical rites and incantations practised for the benefit or the injury of individuals’ (59). Waterman is an individual facing overwhelming odds and he must make new connections in order to ensure his own personal preservation. Cole describes Waterman as an innovative master of his own corporeality. Cole writes, ‘[a]ll those chronically disabled who can should become experts in their own condition’ (163), and he believes Waterman has done just that. Waterman has had to create his own rehabilitation activities and goals because the professionals didn’t understand what to do. Waterman’s efforts have revealed to Cole ‘that it was no use trying to regain mobility by conventional methods’ (165). He has had to find his own path in order to maintain his subjecthood in the face of the unknown.

In the biography, Cole recognises Waterman, not himself, as the primary sympathetic healer. He seems to truly encourage the individual agency of his patient. If the subject is truly a universally unique creature, which may indeed be claimed in

29 Waterman has experienced a loss that is unexplainable and untreatable by contemporary western medicine. His medical carers are described as confused, mystified and impotent (13, 164). Cole’s only real hypothesis on the cause of the nerve destruction comes from an early lumbar puncture which tested positive for glandular fever (13). Cole theorises that Waterman’s ‘body’s defence mechanism had produced cells which had not only reacted against the foreign glandular fever virus, but had attacked the specific nerves involved in coetaneous muscular sensation’ (14).
reference to Waterman, then one cannot prescribe a blanket formula for the realisation of a cohesive and agentic self. Waterman’s story is powerful because it is a personal and individual realisation of sympathetic possibility. In many ways, Waterman is the most potent magician addressed in this dissertation, as he has used embodied and evolved methods of sympathy to re-construct his subjecthood. He has adapted in order to survive. Furthermore, in acknowledging and heralding Waterman as a sympathetic master, Cole’s work embraces the multi-directional flow of sympathy. In the Acknowledgements, Cole thanks a fellow magician, Oliver Sacks, for teaching him to listen to patients and to embrace the possibility of forging deep bonds with patients, as opposed to maintaining the professional distance advocated in modern medical discourses. He writes of the physician’s role, ‘[i]f no cure was possible at least one could explain to [the patients] what was going on and offer to accompany them through the darkness’ (xvii). This is the path of the magician. As I discussed in relation to Sacks, the magician is a traveller who knows the path of his followers/patients and traverses the spaces between ‘our’ world and the ‘other’ world – at least in theory. As such, Cole and Waterman present as more evolved modern medical-magicians, encouraging the agency of the patient (Waterman).

**Touch and Handlability**

While Cole gives Waterman credit for the sympathetic innovations Waterman employs, Cole does examine Waterman’s processes in order to proffer a medicalised understanding of Waterman’s sympathy and offer the reader a greater knowledge of the neurophysiological subject. In *Pride and a Daily Marathon*, Cole identifies the senses as indispensible sources in the attainment of knowledge. He writes, our senses ‘alert us to changing conditions in ourselves and in our environment’ (138). They
prepare us for and help guide our movements and tell us about our world and ourselves (138). For Cole, touch is a most intimate sensation in its ability to bring the self to the other and vice versa. Cole explains this sense using the example of an insect on skin (28). An insect lands on skin. The coetaneous nerve receptors send a signal to the central nervous system, which in turn determines that the sensation is an insect (in combination with sensory information from the eyes and ears). Then an appropriate behavioural response is employed, such as swiping away the insect.

Touch is obviously a very complex sense, distributed across the entire body. Medical literature has identified various kinds of tactile sensations. According to Marion Richardson there are ‘at least six types of tactile receptors found in the skin’ - free nerve endings, root hair plexus, Merkel’s disc, Meissner’s corpuscle, Pacinican corpuscles, and Ruffini corpuscle (2008, 28-29). Each type of receptor has a different tactile function from detecting initial contact with an external body, to sensing movement, pressure, vibrations and so on. I do not attempt to take a neurophysiological approach to the systems of touch, further investigating the clinical model of tactility; rather I endeavour to discuss the global influence of touch in the construction of the sympathetic embodied subject.

Touch is crucial in helping people to define experiences in a material reality, providing necessary information that enables them to interact with their environments – whether it be finding the coffee table in the dark after running into it with your shins; finding an itch and scratching it; determining whether a bed is too soft, too hard or just right; or detecting a lump in one’s breast. Touch ‘allows us to
interact with the world’ (Richardson, 28). It is a very adept and sensitive sense. In
Natalie Angier’s article on touch she writes:

Imagine you're in a dark room, running your fingers over a
smooth surface in search of a single dot the size of this period.
How high do you think the dot must be for your finger pads to
feel it? A hundredth of an inch above background? A
thousandth? […] Scientists have determined that the human
finger is so sensitive it can detect a surface bump just one
micron high. All our punctuation point need do, then, is poke
above its glassy backdrop by 1/400,000th of an inch -- the
diameter of a bacterial cell -- and our fastidious fingers can find
it. The human eye, by contrast, can’t resolve anything much
smaller than 100 microns.

(2008, D2)

For Waterman, it would not matter if the dot was the size of a basketball, he would
not feel it in the dark. Waterman is out of sympathy with his world. He cannot feel
any creatures crawling across his skin. He is unaware of and unprepared for the touch
and force of other bodies.

Cole’s study of touch is important because his work embraces the idea that touch is a
tool that enables one’s body and one’s self to physically manipulate and ‘know’ other
bodies. Therefore, an investigation of touch, as described by Cole and Waterman,
provides a good opportunity to discuss the sympathetic systems of the embodied
subject, in greater detail. In particular, Cole’s work allows for an exploration of the senses as important tools that unite the subject as a cohesive physical entity situated in a physical world.

**The Magical Touch**

As I have previously stated, a primary supposition of modern magic is that we live in a dynamic environment made up of interconnected bodies (both organic and inorganic). In order to effect change one must act and this action will cause ripple-like-effects from body to world and vice versa. Frazer provides the example of an ancient Hindu practice which involved using the hair of a red bull to combat jaundice. People were known to drink water with bull hair in it or have bull hair glued to their faces (20-21). The red of the bull was perceived to be a counteractive force against the yellow of jaundice (jaundice sufferers generally exhibiting a yellow tinge to their skin). In magic, intent, affect and action combine in force and move outwards across distances to effect change in the world and upon other bodies. In the above example, the vibrant force of the red bull would travel to and be absorbed by the jaundice sufferer.

An important element of the sympathetic process described above, which is relevant to understanding the sympathy of touch, is the act of representation and embodied appropriation. Just as some ancient Hindus purportedly posited great significance in creating a representation of the hardy red bull, and embodying the desired elements of the animal; neurological and affective theorists have identified the significance of other kinds of duplication in the functioning sympathetic being. As noted, Damasio contends, the ‘brain and the body are indissociably integrated by mutually targeted
biochemical and neural circuits’. (87). He notes that ‘there are two principal routes of interconnection. The route usually thought of first is made of sensory and motor peripheral nerves which carry signals from every part of the body to the brain, and from the brain to every part of the body’ (87). The other is the transportation of chemical signals through the bloodstream. I am interested in the former. Tomkins contends this route of interconnection, involving the sensory receptors and nerves, revolves around a process of neurological duplication. He writes, ‘[a]t the terminal of the brain there are multiple receiving stations whose function it is to duplicate those aspects of the world duplicated first at the sensory receptors and then duplicated again all along the sensory nerves’ (1992, 114). He argues:

the receptors are so constructed that they duplicate certain aspects of the world surrounding the receptors. They may indeed fail to duplicate some aspects of the surround, but if they failed to duplicate any aspect of the world, an organism so equipped could not for long duplicate itself in time nor reproduce itself in space.

(114)

Tomkins describes the peripheral nervous system as an ‘information-processing mechanism’ which informs the body about its world. The body senses and perceives, duplicating elements of external bodies. According to Tomkins, the subject would not endure in his/her world without sensorial input. The subject needs to know the shapes, textures, quantities, movements, and uses (etc) of the bodies in its environment in order to survive. The subject uses the bodily understanding of the external world to produce and re-produce itself as a stable and active body and subject in his/her physical environment. And the subject gains this knowledge
through a neurological sympathy, a sensorial process of representation and
appropriation. This is a much more complex process of representation and subject
formation than those described by Dr Phil and used in the construction of Jackson’s
imagistic subjecthood.

The Knowing Body

The sensation, the movement, of touch provides information and knowledge about
one’s body and world. It is a sympathetic knowledge gained through corporeal
engagement. The sympathetic knowledge provided by touch (and proprioceptive
function, which is an important part of touching), and denied to Waterman, is not
solely cognitive in nature. As Tomkins notes there are different kinds of ‘knowing’:

one of these forms is a bodily knowing, a ‘knowing’ in a sensory
way that is relatively immediate, which gives a knowing that
something is the case [...]. Some of these sensations give us
knowledge of what we are doing with our muscles rather than
what is out there.

(1992, 14)

Here, Tomkins makes two important realisations. Firstly, that there is an immediate
knowing of the world and self that is physically felt and realised, but not necessarily
realised in a fully-conscious manner. Secondly, part of this awareness comes from a
sensorial realisation of the internal movements of the body. Tomkins describes a
more intricate form of self-knowledge than Dr Phil’s. It is a knowing present in the
kinaesthetic awakenings of the post-encephalitic patients – a knowing dependent on a
corporeal understanding of the subject. As Angel argues, ‘all knowing involves a kind of doing, since it is through doing that the structure of the organism is activated and expressed’ (328).

This bodily, and action oriented, knowing can be understood in terms of Heidegger’s theories on handlability. Heidegger writes, ‘[t]he kind of dealing which is closest to us is […] not a bare perceptual cognition, but rather that kind of concern which manipulates things and puts them to use; and this has its own kind of “knowledge”’ (1962, 95). In the act of physically engaging with objects, using one’s body to engage with others, one gains an understanding of the processes of experience. In Barbara Bolt’s study of Heideggerian theory, she concludes that there is a fundamental source and type of knowledge gained via a kind of corporeality in practice, or praxical knowledge (2004, n.p.) This is an intriguing theory, that handlability, which is dependent in part on touch sensation and proprioceptive function, offers a praxical knowledge that cannot be understood in terms of perceptual cognition. What Heidegger and Bolt are describing here is a sympathetic knowledge, a knowledge gained through the physical contact between bodies. It is movement that teaches the body how to engage with other bodies with an automatic freedom.

Bolt also refers to the term ‘tacit knowledge’, which I find useful when discussing embodied flow or grace. Tacit knowledge can also be understood in terms of a knowledge that offers an efficient and automatic freedom of movement gained through the practicing and mastering of acts (Fuchs 2001). Thus, the grace of tacit knowledge is the result of ‘handlability’.
While Bolt uses Heidegger’s theories to propose a new way of understanding the processes and responsibilities involved in art production, i.e. in a concentrated process of crafting, I believe Cole implies that praxical knowledge is a constant part of the human experience. The self is always in touch with an other and in touch with itself. Cole writes, ‘we can neither divorce ourselves from the sense of touch and proprioception, nor even imagine such a deprivation’ (142). If you close your eyes and put headphones on whilst lying on a bed, you are still aware of where you lie, of what material lies across you, of whether someone is lying next to you, whether the room is still and the mattress is soft. Our bodies are always aware and learning, accommodating other bodies and sustaining ourselves.

For Waterman, there is no flow to be attained through the handling of objects. He cannot gain an automatic and praxical knowledge of forms. In the biography, he describes the difficulties he experiences in determining how to hold objects. He worked in an office for many years, before his early retirement, and his daily routine would involve the seemingly simple act of carrying papers. However, Waterman could no-longer feel the paper in his hands. He would look down at his hands and make a pinching action, but he did not know how much pressure to apply. If he applied too little, the papers fell. He generally had to apply too much pressure, making the papers crumpled and soaked with sweat, because he would be offered some sensory feedback from muscle fatigue as his hands tired from the over exertion (112). This practice never became automatic; he never learnt how to ‘feel’ the process of carrying paper.
The Isolation of the Senseless Sensation

An important element of the bodily knowledge described above is the knowledge gained from internal senses or sensors. The corporeal self knows its actions and limits through constant internal communications between its parts. Waterman is not in synchrony with regards to the interactions between the parts of his own body. This is the primary source of his glitch, being unable to feel his self, confirm his self. Cole notes, at times, he has awoken at night in a momentary state of terror feeling ‘a hand on his face and not knowing to whom it belonged’ (85), until he opens his eyes and realises it is his own. Cole continues, ‘[s]ince he has normal perception of warmth and touch in the face, but only of warmth in the hand, it is interesting that he cannot, or does not, use warmth of the hand alone to identify self from non-self’ (85).

However, it is clear from this experience that the loss of touch and proprioception from the neck down is enough to deny a fundamental praxical knowledge, which includes an awareness of his complete bodily self.

This sympathetic loss evokes a definite sense of loneliness or isolation. Bolt’s study implies that handlability is a tool for breaching the isolated subject. She does this through describing Heideggerian handlability as a process without the subject/object hierarchy. Instead, she believes it is a process with co-responsibility or multiple agencies. She writes:

When Heidegger talks of understanding, he is not referring to understanding as a cognitive faculty that is imposed on existence. Understanding is the care that comes from handling, of being thrown into the world and dealing with things. […]

This relation of care is not the relation of a knowing subject and
an object known. Rather what is critical to Heidegger’s notion of understanding is that understanding emerges through the care of handling. In this way, handling as care comes to supplant the instrumentalist in-order-to that defines the contemporary engagement of humans with the world.

(n.p.)

Bolt is describing handlability as a sympathetic merger between bodies both inanimate and animate. It is a realisation of the magical proposition put forward in this dissertation, that the subject is also necessarily an object. It is the kinaesthetic ignition craved by Sacks and his patients. This is the physical intimacy and knowing denied the fan of Jackson resulting in a sometimes desperate devouring of his imagistic exuviae in order to ‘know’ him. It is the knowing denied to Waterman. For Waterman, the antipathetic subject/object barrier described by Bolt and Heidegger is generally maintained, through his need to constantly engage objects (such as paper or his own limbs) as objects which must be consciously mastered and ‘used’. There is no freedom or unity offered by touch.

Cole refers to the isolation of body/self in another of his books, Still Lives (2004b). David, a man with spinal chord injuries, had suffered through a depression and gave Cole a book that had helped him. It was a book on depression, written by Dorothy Rowe. One of the underlined passages read:

It is not simply loneliness […]. It is an isolation which changes your perception of your environment. Intellectually you know you are sharing a space with other people […] but even though
you can reach out and touch another […] nothing is transmitted.

Even objects around you seem further away.

(1997, 1-2)

Cole’s patient, David, describes the experience of touch without knowledge. No new understanding of one’s body and world is offered through touch. The subject is not brought ‘closer’ to other bodies and knowing how to interact with them. For David and Waterman, the self remains unmoved by the act of touch.

This isolation is something most of us cannot truly conceive. However, we do play with our questions and fears surrounding this sense isolation in our popular death narratives, such as in the fictional representations of ghosts. In the television show, *Dead Like Me* (2004), a group of 5 reapers collect souls at the point of death and help the spirits move on to the next world. On some occasions, the spirits are not keen to immediately leave and try to interact with their former environments. In the episode, ‘The Shallow End’ (aired 15 August 2004), an angry ghost tries to pick up a hymn book and throw it at an altar, raging at God for making him live as a man when he believed he should have been a woman. The ghost can reach out and grasp at the book but his hand goes straight through it. He can see the object but he cannot make contact. The two objects, person and book, cannot bond. Waterman can exert force upon an object, but he cannot judge how much force he is exerting. But more important to this discussion, the object cannot exert sympathetic force upon him. It cannot ignite a sensorial response, because he is out of synchrony and sympathy with the plane of the living. Like the ghost, Waterman cannot release his rage by grabbing
and releasing a book. The book would have no texture, no density or weight. There would be no feeling of pressure as his arm reached back and then thrust forward in the pitch, no feeling of release as the book detached from his palm and fingers.

An antithetical experience to those of the popularly constructed ghost is provided in the real experiences of Helen Keller. Keller’s life and writings reveal the connection and intimacy offered by tactile sensations. Keller was both deaf and blind. She could not care for herself or effectively communicate with those around her. That was until she was taught a kind of tactile sign language, where she would be given an object/substance to feel, such as water, and then would hold another person’s hands in her own as the signer made the sign for the object/substance. Keller writes of the first moment that she made the full connection between object and sign, and the consequences it had on her life. She writes:

Some one was drawing water and my teacher placed my hand under the spout. As the cool stream gushed over one hand she spelled into the other the word *water*, first slowly, then rapidly. I stood still, my whole attention fixed upon the motions of her fingers. Suddenly I felt a misty consciousness as of something forgotten—a thrill of returning thought; and somehow the mystery of language was revealed to me. I knew that ‘w-a-t-e-r’ meant the wonderful cool something that was flowing over my hand. That living word awakened my soul, gave it light, hope, joy, set it free!

(1905, 23)
As Keller’s story indicates, touch is a union of multiple material bodies that ignites a physiological, an emotional, a neurological response. She writes, ‘[i]t is the hand that binds me to the world of men and women […] With the dropping of a little word from another’s hand into mine […] began the intelligence, the joy, the fullness of my life’ (2009, 2).

Touch and proprioception offer a realisation that one’s self is but one element in a larger system of bodies and a multi-directional flow of forces. It is a realisation that we are a part of life, that we are alive ourselves. Touch provides people with information on how they exist in an environment consisting of multifarious forms and it provides the tactile proof that we are not alone, when we holds hands, hug, punch, or kiss.

**Cross-modal Sensory Perception as Sympathetic Substitute**

Waterman is denied the praxical knowledge of touch and proprioception. He is no-longer able to embody a subjecthood with an intricate sympathetic structure, having had the entryways to perception provided by touch and proprioception severed. For Waterman perception has become a more discrete experience. For example, eating an ice-cream cone would be a cold and sweet experience, but it would no-longer be a sticky and soggy experience as the ice-cream melted through the cone and onto his hands. He has lost the full cross-modal sensory experience.

To combat his sensorial deprivations, Waterman seems to have to force a kind of ‘revised’ synaesthetic experience, where one sensation is understood in terms of another. In the Foreword to Richard Cytowic’s, *The Man Who Tasted Shapes* (1998),
Cole describes the synaesthete experience as occurring when ‘an individual experiencing a sensation in one sensory modality also experiences, involuntarily, a sensation in another sensory modality. The most common experience seems to be seeing colour when hearing sounds’ (2001, x). Cytowic’s study of synaesthesia starts with a roast dinner at a new acquaintance’s home. While preparing the dinner, the host declares ‘there aren’t enough points on the chicken’ (3). He proceeds to tell Cytowic that flavours have shape, which he feels mostly against his face or in his hands. He reports, ‘[w]hen I taste something with an intense flavour […] I feel it—its weight, its texture, whether it’s warm or cold, everything. I feel it like I’m actually grasping something’ (4). Synaesthesia is a pathological state where senses are mixed-up in a Wonderland experience of perception. While most people are not synaesthetes, a cross-modal sensory experience is not alien to the average person. Cole notes that there are:

are many well known illusions that depend on cross-modal sensory experience; for instance, a large object appears to weigh more than a small one of a similar weight; our expectations and perceptions of one sensation, heaviness or effort, can be unconsciously influenced by expectations via another sensation, vision […]. We often form impressions in one sense that are based on a combination of senses.

(cited in Cytowic 2001, xiv)\(^{30}\)

\(^{30}\) Cole does note there is uncertainty and dispute regarding the source of synaesthesia and whether the average person has an unconscious level of synaesthesia versus synaesthesia as a result of gene mutation (xiv – xv).
Waterman’s other senses cannot work in unison with touch. In this respect, his pathology presents as a kind of antithesis to that of the synaesthete, with the average person’s sensory relationships hovering somewhere between the two. Interestingly however, Waterman forces a kind of compensatory synaesthetic experience, where one sense compensates for the absence of another.

Waterman has attempted to institute substitutive sensory experiences, in order to maintain an embodied knowledge. He has endeavoured to compensate for his loss by using his remaining senses, and intact sensory receptors and nerves cells, to construct new ways of interacting with objects. His efforts reveal the tremendous malleability of the sympathetic systems of the body. He has substituted sight for touch, employing vision to confirm his positions and movements. For example, Cole writes of Waterman’s unique experiences when he first qualified to drive (73). Initially, he was given a ‘hand-controlled invalid carriage’. He needed the hand controls because in a car with foot-pedals he would not be able to see his feet and therefore could not control the pressure they applied to the pedals. He must see the parts of the body being moved in order to gauge the specifics of the activity. For Waterman, his speed, his force when driving has become a visual experience. When the vehicle speeds up, he would be unable to feel his body pushing back against the seat cushion. When he applies the breaks, he cannot feel the jerk forward as his chest lurches towards the steering wheel. Cole writes, Waterman has ‘no information about posture and locomotion from the sensitive receptors of joint angles and skin pressure’ (74). In addition, in his hand-controlled carriage he often could not look at the speedometer as it was not in his immediate range of vision and changing his visual focus would make other important movements such as steering and speed control impossible.
Cole reports that Waterman knows he is speeding up by the increased rate at which he passes objects. He knows he is speeding if he is passing the other cars. As Cole notes, many people use the speed of surrounding cars and passing scenery to guide their acceleration, but it is used in conjunction with other sensations. For Waterman, this visual method, used in isolation, sometimes presents problems because he has had trouble discerning ‘whether it was he who was moving or the next line of cars’ (74).

Waterman has also used other ingenious methods such as sound to create new sensory perceptions. Cole has studied and performed various clinical tests with Waterman in an effort to understand the changes and consequences of Waterman’s sensory perception. In one test, Waterman’s tactile deficit was tested by asking him to close his eyes, at which point he was given different shapes to feel. He could not discern the shape of the objects through touch, but instead used sound. By tapping and rattling the objects, the different materials made different sounds and he soon memorised them (54). Thus, one could say the textures of objects are now described as hollow, rattling and so on. Textures have become sounds. Waterman has produced a resourceful kind of sympathetic magic, where he constructs a new kind of praxical knowledge. What Cole describes, and Waterman enacts, is an altered embodiment but a retained embodiment. In Waterman’s efforts to remain a dynamic and interconnected subject in a complex network of sympathetic processes and bodies, he has introduced sound as an alternative for engaging with objects, with bodies, to stabilise his corporeality. He has pursued a sensorial knowing of objects. However, it is not a graceful and automatic knowledge. It takes great conscious effort to make these new associations.
Embodied Flow and the Affective Subject

While Waterman makes some innovative sensorial compensations for his absent touch and proprioceptive function, there still remains a definite sense of ‘loss’ in Cole’s description of his subjecthood. It seems to me that this loss is primarily understood (albeit implicitly) in terms of the expression and arousal of affect. And it is this glitch which allows for a greater understanding of the necessity of affect to the embodied sympathetic subject.

In Cole’s study of Waterman, he describes a man who has lost the full bodily expression of the affective self. One cannot know through Waterman’s body-language how he feels and thinks. For example, when he first arrived home from the hospital his frustration and anger increased because, ‘[h]e couldn’t adopt either the hunched-up posture of the depressed or the strutting stance of the aggressive’ (35). It would seem, his body is unable to relax in the presence of someone he likes and feels comfortable with. Waterman does not tense and clench in the presence of someone he dislikes or is angered by. He does not naturally lean into and move closer to someone he is interested in, or shrink away from someone who makes him uncomfortable. His body does not sag to show that he is tired, his only automatic response to exhaustion being total collapse. He does not bounce around to indicate
his excitement or energy. His body is no-longer an adept visual signifier of his self.\textsuperscript{31} The people in Waterman’s life can no-longer ‘read’ him and the bodily/affective bond between self and other has been severely hampered.

Various theorists have commented on the importance of the bodily expression of emotion. In Charles Darwin’s study of emotion he contends that someone who is suffering from ‘extreme fear or horror’ does not just display and communicate that emotion through his/her facial expressions but also his/her bodily stance and movements (1998). His/her body enacts and ‘feels’ the affective experience, some common expressions being ‘the writhing of the whole body’ or trembling’ (146). Or someone in a fit of rage will hold his/her body erect, or ‘bent forward towards the offending person’, ready for action. This may be accompanied by ‘[s]uch gestures as the raising of the arms, with the fists clenched, as if to strike the offender’ (241). Mark Knapp and Judith Hall have studied nonverbal communication and argue that ‘while we are in the presence of another person, we are constantly giving signals about our attitudes, feelings, and personality’ (4). Furthermore, others may become particularly adept at sensing and interpreting these signals. (1992). Knapp and Hall use the fascinating story of Clever Hans to demonstrate their argument. Hans was a horse that amazed audiences at the beginning of the twentieth-century thanks to his apparent problem-solving skills. What began with his owner, Herr von Osten, trying to teach Hans to ‘count by tapping his front hoof” resulted in a horse who seemed to

\textsuperscript{31} The only possible exception Cole offers is in relation to simple hand gestures. In the documentary \textit{The Man Who Lost His Body} (1997), Cole and Waterman investigate automatic gestures but come to different conclusions. Cole believes Waterman still retains a level of automaticity to his gestures, while Waterman believes he needs conscious control of them.
develop the ability to solve all manner of mathematical problems, among other ‘fantastic feats’ (3). However, eventually it was discovered that ‘Hans could only answer a question if someone in his visual field knew the answer and was attentive to the situation’ (4). Knapp and Hall write:

When Hans was given the question, onlookers who knew the answer assumed an expectant posture, increased their body tension, and bent their heads slightly forward. When Hans reached the correct number of taps, the onlookers would relax and make a slight upward movement of their heads—which was Hans’s signal to stop tapping.

(4)

Knapp and Hall use this story to highlight the often unacknowledged but forceful role of gestures and non-verbal communication.

Our inclination to read others’ bodies is also apparent in pop culture texts. In the romantic-comedy movie, Clueless (1995), young matchmakers, Cher and Dionne, spy on their teachers (Miss Geist and Mr Hall), who have nervously begun the courting ritual. Cher and Dionne cannot hear the conversation between their teachers who are sitting on a bench, but they come to the conclusion all is going well. They make this assessment, in part, based on their teachers’ movements and postures. Cher declares, ‘would you look at that body language, legs crossed towards each other, that’s an unequivocal sex invite’. We perform our desires, our fears, our selves through our gestures and postures. We also read the selves of others through the positions and movements of their bodies.
Waterman’s breakdown in tacit knowledge, to which I previously referred, also plays a role in his affective deficiencies. According to Thomas Fuchs, in his study of the tacit dimension, ‘[t]acit knowledge implies all the taken-for-granted that we have forgotten once it has become our second nature and part of our bodily habits’ (2001, 324). He notes that ‘[i]t is based on processes of Gestalt formation that enable us to grasp unified wholes through their constituting elements without still being aware of the latter’ (323). ‘Thus, we understand the facial expression of others immediately but cannot tell from which details’ (323). Fuchs believes, in accordance with Lyons-Ruth (1998) and Stern’s (1998) theories, ‘[i]t is a preverbal, not symbolically encoded, knowledge of how to get along with others—how to have fun with them, how to express joy, elicit attention, avoid rejection, restore interrupted contact, etc’ (324). It is a skill that is primarily gained via imitation where ‘[v]isual, proprioceptive, and motoric modalities are integrated into one intermodal space’ (324). This is a knowledge that can be learnt and forgotten. Fuchs argues when the knowledge is no-longer implicit it can become pathological (324), a disturbance of the flow. He offers the example of someone repeatedly sounding out a word. He writes that should someone ‘repeat a familiar word several times aloud and think of the syllables, it will sound strange to us: The implicit coupling of syllables and meaning is dissolved’ (324). Fuchs description of tacit knowledge refers to a sympathetic system that allows one the freedom of complex affective interaction with other subjects. Waterman is deprived of this freedom.
**Kinaesthetic Joy and Silence**

The entire body is not only instrumental in the expression and communication of emotion, but the arousal of affect. Cole has identified touch as an instrumental source in affective experience writing, ‘the various types of sensation have profound effects on our feelings and thoughts – on our so-called affective natures’ (138). Other theorists have also explored the relationship between body, affect and self. In Tomkins’ study of affect, he states the complex affective system is ‘the primary innate biological motivating mechanism’ in human functionality (1991, 5). He identifies nine innate affects, which make up the biological affective system. These consist of interest-excitement, enjoyment-joy, surprise-startle, distress-anguish, fear-terror, shame-humiliation, contempt-disgust, anger-rage, and dismell (18-19). Each hyphenated pair indicates degrees of intensity of a particular affect. For example, rage is a more intense version of anger. While Tomkins focuses on the face as the central surface for the transmission and reception of affect, he also realises that the expression and experience of affect involves the entire body. Furthermore, he contends that the sensate body, the affective body, is instrumental in the formation of the cognitive self. In Anna Gibbs’ study of Tomkins theory of affect, she supports Tomkins’ contention that sensory knowledge is compacted and compressed along with affective and ‘so-called cognitive forms of knowledge’, all of these forms being integral to the cognitive system (2002, 339). Gibbs describes this sympathetic interdependence promoted by Tomkins as a ‘distributed authority’ (339). She concludes that Tomkins ‘makes clear that there can be no “pure cognition” no cognition uncontaminated by the richness of the sensate experience, including affective experience’ (340).
One important role of the sensory-affective dynamic is the creation of kinaesthetic pleasure. In his study of spinal chord injuries, Cole writes:

Movement falls into three types: locomotor, to navigate through the world; instrumental, the use of tools; and gesture. In addition to the feeling of the movement, all these have an aspect related to the affective or emotionally charged involvement of the subject in that movement. It is pleasurable to jog, to dance, to be connected with and to be at one with one’s body. We are rarely nonaffectively involved with our bodies.

(2004b, 57)

Cole is describing the experience of kinaesthetic pleasure, which I referred to in the previous chapter. In Oliver Sacks’ study of the post-encephalitic patients, and his own experience with the loss of proprioceptive function, he identifies re-awakened kinaesthetic melodies and joy as a re-awakening of embodied subjects.

An attained kinaesthetic melody offers a physically felt (but perhaps not cognitively realised) sense of joy from the performance of a rhythmic embodiment. And, where would the magician be without controlled, automatic, kinaesthetic, and affective movement? I have previously argued that a primary function of sympathetic practice is to evoke and utilise particular affective states. According to Collingwood, ‘[m]agical activity is a kind of dynamic supplying the mechanism of practical life with the emotional current that drives it’ (68). Collingwood is describing the relationship between movement and affect; specifically how the two are used in conjunction to effect change. The magician arouses emotion, hope, and expectation
and confirms his/her position in the world through mastered and ‘flow-like’ mobility.

For example, Frazer purported:

   in a village near Dorpat, in Russia, where rain was much
   wanted, three men used to climb up the fir-trees of an old sacred
   grove. One of them drummed with a hammer on a kettle or
   small cask to imitate thunder; the second knocked two fire-
   brands together and made the sparks fly, to imitate lighting; and
   the third, who was called ‘the rain-maker,’ had a bunch of twigs
   with which he sprinkled water from a vessel on all sides.

(82)

Frazer describes the magicians as people who physically enact their desire, who
perform the sounds, movements, the frenzy of the rain. Likewise, in Cole’s magic the
body and movement are instrumental to creating ‘greater emotional and intellectual
satisfaction’ (145).

According to Cole, Waterman ‘hasn’t jumped up or down since the illness […]. Nor
has he hung from a branch by his hands’ since his neuropathy. Cole writes:

   He has wondered whether he could […]. He thinks he could
   learn to hang from a branch, but has never tried. They are, after
   all, useless movements which would only consume mental
   energy to no purpose.

(131)

There is no joy, no release, and no glorious affirmation that the body is the seat of
affect, making such seemingly purposeless acts purposeful. Waterman cannot
embrace this flow of life. He has lost the affective satisfaction of bodily action,
‘kinaesthetic-related pleasure’, a joy in movement beyond the release of endorphins or the pleasure of getting fit (Cole, 144). ‘He can’t enjoy a walk for its own sake, nor can he relax feeling pleasurably tired after exertion’ (144). When Sacks’ kinaesthetic bliss is re-awakened after his leg injury he writes:

What was so wonderful was the heavenly ease and sureness – I knew what to do, I knew what came next, I was carried ahead by the ongoing musical stream, without any conscious thought or calculation, carried ahead by the feeling of it all.

(1991, 112)

Sacks describes this sensation of flow and ‘automatic’ movement as a feeling of ‘Grace’. Waterman is without grace. His loss makes apparent the ‘joy’ of being a fully sensorial sympathetic subject.

Csikszentmihalyi makes the passionate claim that ‘[e]verything the body can do is potentially enjoyable’ (95). However, he believes people do not take advantage of the bodily capacity for flow. He contends:

When left undeveloped, the senses give us chaotic information: an untrained body moves in random and clumsy ways, an insensitive eye presents ugly or uninteresting sights, the unmusical ear mainly hears jarring noises, the coarse palate knows only insipid tastes.

(95)

One must embrace the self as embodied, as an active, enjoyable form to experience flow. Throughout Flow, Csikszentmihalyi talks about this optimised experience as being achieved when the self merges with activity and one loses self-consciousness.
Waterman cannot merge with activity and the forces which surround his body in an optimised state of flow. He cannot create flow in even the most practical day-to-day activities. During his first weeks in hospital his limbs would fly about spontaneously and he felt that he no-longer had the ability to co-ordinate his body (Cole, 16). He also found his first motor vehicle trip alarmingly hazardous. When he was being transferred by ambulance to the Wessex Rehabilitation Centre he flopped about everywhere, while strapped into his chair. He says of the experience, ‘I had no balance, I didn’t move in time and sympathy with the vehicle’ (18). Waterman is out of sympathy with his environment. He would not have been able to lean left as the vehicle swerved right, lean right when it turned left or stop his lurching forward when it braked. He could not counterbalance the movement of the ambulance with his own.

Waterman’s gracelessness or cessation of flow also hampers the fulfilment of affectively interacting with others in states of flow. He cannot ignite what has been lost through sensory sympathy with the other, as was achieved with Sacks’ patients. When others greet him ‘hello’ with kisses on the cheek, he becomes unsteady because he loses sight of his body and he is pushed off balance (114). He has had to learn how to consciously compensate and counterbalance his body in accordance with the movements of others. There is no joyful internal rhythm, nor or is there a physical or affective dance between bodies, only collisions between unsympathetic objects.
Cartesian Antipathy

Despite being offered no joy through movement or the intimacy of inter-bodily affective communication, Waterman has still craved re-embodiment and connection with others. For Waterman, movement is life, an assertion Cole supports as evidenced by his overwhelming focus on movement in the text. Cole and Waterman identify movement, and a sense of controlled and competent action as a key element of wellness, even if it cannot lead back to kinaesthetic pleasure. It seems clear that while Waterman cannot re-gain certain elements of the full affective body, there is still a deep craving to re-build himself as a moving and experiencing, human subject. His self relies on his corporeal movements, both in motoric and emotive terms.

Cole believes Waterman’s loss of controlled mobility and kinaesthetic pleasure initially resulted in a detachment between the ‘I’ of Waterman and his body. In his research on people with spinal injuries, Cole has also noted the common occurrence of disembodied feelings (2007, 2004b), due to the loss of movement and the loss of sensation. One of his subjects described it as a sensation of nothing (2007, 314). Cole depicts patients who are emotionally detached from their bodies. Because these patients’ bodies cannot feel and cannot be moved by the force of the subjects’ concentrated will, the patients view their bodies as ‘others’, as defunct fleshy vessels which trap the ‘non-bodily’ subjects inside. For Waterman, loss of movement and controlled activity became a kind of death. One of his poems read:

    Turned every two hours
    Like a joint of meat.
    Basted with lotions.
    Unmoving like a statue,
Mind filled with emotion.
Limbs dead to the touch,
Movement impossible.
Lying on a bed eyes fixed
On a flaking ceiling.
Wishing those flakes
Would turn to cracks,
And the ceiling fall, to
Take me from this misery.
What use an active brain
Without Mobility.

(cited in Cole 1995, 57)

Waterman lost his sense of being an agentic subject, or even a human subject, having become a dead and drawn apart ‘joint of meat’, like the pieces he once carved in his job as a skilled butcher. He became the object upon which other subjects acted. As I have already argued, the sympathetic subject is also an object, but not as a consequence of the total annihilation of the subject position. Waterman could not bear to live like a trapped subject within a dead and partial form. He could not stand to be ‘objectified’. It is apparent from reading *Pride and a Daily Marathon* that he needed to become a sympathetic embodied subject. Thus, Cole concludes, ‘[a]t one level all Ian’s striving to recover and to rejoin society have been a return to the land of the moving and hence of the living’ (150). A similar sentiment was seen in the kinaesthetic awakenings of Sacks’ patients. The post-encephalitic patients’ ability to move with the bodies of the healthy other, to be a part of them, involved a regained sense of unity and naturalised movement, free movement. Consequently, a large
proportion of *Pride and a Daily Marathon* is devoted to Waterman’s physical progression. His experiences, in terms of rehabilitative milestones, are marked by his progress in his movement repertoire; by 6 weeks at Odtsock Rehabilitative Centre he could stand for 5-10 minutes, by 3 months he could stand for 40 minutes on crutches and walk the length of parallel bars, at 6 months he could walk with 2 sticks etc.

**Re-inventing Movement**

Waterman has had to create new modalities of movement in order to return to life. Cole writes:

> [His] re-embodiment seemed to require both a sense of making the movement and seeing that movement made successfully. In other words, a sense of agency or will, as well as feedback of movement, seem necessary to feel at one with one’s body.  

(Cole 2007, 6)

However, there are many challenges and some insurmountable obstacles that Waterman has faced. For example, Cole writes of how Waterman taught himself to sit-up. Waterman would press his chin down on his chest and put his arms in front of him and lift his head, willing his torso to follow suit. According to Cole, Waterman can’t fully explain how he achieved it but, he realised ‘that if his abdominal muscles contracted he should be able to sit, his problem was in converting an intellectual idea into a cognitive motor plan’ (2004, 243). It took tremendous concentration both to sit-up and retain this seemingly passive position. His motor control has been re-structured, with movement being controlled by conscious visual recognition, aided by his remaining sensory receptors which provide information on heat, pain and muscle fatigue. His movement and materiality is predominantly confirmed by sight...
and without sight his position and movements are lost. Cole writes that Waterman’s brothers used to play a joke on him by throwing a towel over his feet, when he was standing. Waterman would remain stuck in the same position until the towel was moved, because he is unable to move his feet without seeing them (1995, 69).

Waterman has to dissect the impossibly large systems of movement involved in actions such as walking, and make them discrete and observable techniques. He partakes of the sympathetic act of making the seemingly impossible into the knowable through ritualised microcosmic and finite action. Frazer provides an example of a magical practice which uses the magician’s movements as a manageable way of stabilising the world. He writes that in the fishing society of the Esquimaux, ‘boys are forbidden to play cat’s cradle, because if they do so their fingers might in later life become entangled in the harpoon line’ (26). Undoubtedly, Frazer would consider such a rule to be fallacious superstition. But what could also be drawn from such practices and taboos are efforts to ritualise the unknown or infinite. If a community survives on fishing, then their survival is also subject to forces they cannot control such as the fish population and weather. Therefore, in part, they break down the elements of fishing into manageable units pertaining to the skill of the fishermen. They consciously recognise and encourage the actions of the individual that can ensure sustenance. The children, and future providers, are taught to focus their attention on how they apply particular actions of the hand. Of course, I

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32 In general, he has avoided situations where sight is hampered. For example, he dreaded public toilets with ‘subdued lighting’. Without sufficient light to see ‘he had difficulty locating the zip of his flies’ and his penis (114).
do not imply that the quantifiable or qualifiable effects of the Esquimaux or Waterman are the same. I bring the two together because they are both ways that individuals use movement and concentration to establish sympathy.

**The Marvel Pinocchio**

Waterman has been able to return to life through his astounding and unique mobility; however it seems he has not been able to regain true flow. He has not experienced a full sensory sympathy. At no point is Waterman described as experiencing the kinetic re-awakening that Sacks had with his leg upon hearing Mendelssohn’s *fortissimo*, or the *Awakenings*’ patients when they connected with the movements of music and others. Waterman’s body cannot feel the music around him and cannot re-produce it sympathetically. Cole reiterates to the reader that Waterman’s motor skills have never returned to their original state or ability. He has learnt a limited repertoire of movements ‘rather than the almost infinitely adaptable range we use normally’ (131). Cole testifies that Waterman’s way of walking ‘couldn’t be mistaken for the old’ (61). He writes, that Waterman needs to have his feet widely spread to help with balance and stability, and for many years he was unable to bend his knees otherwise his legs would collapse. His body needs to remain stiff and braced, and with each step he lifts his leg out to the side so as to avoid dragging his foot and he drops his foot down on the heel. Cole describes the sight as something similar to a ‘wooden puppet activated by a novice, in a way that’s exactly what he was’ (62). Each step, each new time Waterman gets up and walks, the process becomes no easier or more automatic. With every single step his conscious mind must actively will his movements, guided by his vision. Waterman is a being who has to move through the world in a new way. He has had to create a new sympathetic system of action.
Waterman’s new form of movement monopolises his conscious thought. While the average able-body functions like an automaton, every action and position of Waterman’s body never leaves his conscious mind. All of the effort and conscious energy devoted to functionality has resulted in a narrowing of Waterman’s conscious experience, with seemingly little availability for abstract thought and contemplation in his active life. Cole makes various references to Waterman’s ‘consciousness’ limitations. He can no-longer daydream while walking and can never be totally engrossed by his surroundings (Cole, 129). In his recovery stages at Odstock, it required so much conscious attention to remain standing (focusing on all the movements and positions of his body parts) that should he sneeze he would fall in a heap (69). Even some years later at his wife Mavis’ funeral, he could not cry because his vision would have blurred and he would have fallen over (108). One must wonder, who does one become with restricted space for random and spontaneous mental thought? This question does not seem to be answered or truly broached in the biography. Perhaps it is too far beyond the finite communicative abilities of both biographer and subject. But it certainly does not seem that one is elevated to a higher state of being, without the impure influence of particular sensations.

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33 Mavis was Waterman’s first wife who died from cancer.
Waterman’s Cartesian experience is a glitch in terms of the complete and functional self. He would likely be described by Robert Bogdan as an ‘aggrandized freak’. In Bogdan’s study of carnival freaks, he notes that the aggrandized freak would be shown:

- doing tasks that one might assume could not be done by a person with that particular disability. A man without legs, for example, might walk and perform acrobatic feats using his arms.
- The emphasis was on how the person exhibited compensated for the disability.

(1990, 109)

Bogdan says freaks ‘tended to be presented as physically normal, or even superior, in all ways except the one anomaly that was their alleged reason for fame’ (109). Cole creates an aggrandized image of the dysfunctional medical subject, who generates wonder through his novel attempts at innovative sympathetic creations. And Waterman’s efforts are truly extraordinary. In the documentary, *The Man Who Lost His Body* (1997), it is reported that Waterman is one of ten people who are known to suffer from this neuropathy and the only one who can walk unaided. A fellow sufferer of lost proprioceptive function and touch sensation is featured in the documentary. This man sits in a wheelchair and when he moves out of it and onto grass, he descends in incredible slow motion. It is clear he cannot sense where his body is in relation to other objects. He cannot feel the grass when he reaches it with his hands. He cannot feel his knees as they come down to the ground. He is an unsteady body. Beside him, Waterman is an unfathomable sympathetic master. One’s
awe at such aggrandized oddities must be in part due to an often un-acknowledged
realisation of the importance of being a physically cohesive subject – a subject who
sensorially, affectively and cognitively acts with grace.

The Erotic Touch as Sympathy and Violence

In Cole’s analysis of Waterman’s efforts to re-gain mobility and compensate for the
loss of kinaesthetic pleasure and affective expression, I find myself wondering about
the important relationship between the touch of the other and affect arousal. Others’
body excite us in varying and delightful ways. We are made aware of the sensitivity
of our senses as our bodies come in contact with new and/or affectively significant
bodies.

In Marion Simpson’s study of why we can’t tickle ourselves, she examines the
ability of the other to ignite a physiological and affective response – a response that
cannot be achieved through touching oneself. Simpson uses the example of tickling
writing, ‘[o]ne way that is guaranteed to cheer up a tired, cross child or to reduce an
adult to a simpering fit of giggles is a few light strokes on the sole of the foot or the
armpit’ (2001, 425). Simpson goes on to describe the tickling experience as novel,
unpredictable, and sometimes sexual. As she notes, if you try and tickle yourself
‘[t]he sensation produced will never rival that of an external stimulus’ (425). Being
tickled is a stimulating and exciting brush with other bodies, a common experience to
‘almost’ everyone. Waterman cannot experience this spontaneous excitement. But
does this mean he is also devoid of other intimate affective experiences associated
with the touch between self and other, such as those ignited in erotic acts? Further, I
am curious as to whether you still require and desire the touch of another human
being, if you can no-longer experience it the same way. If you cannot feel the texture, movements and pressure of the hand of your partner moving across your back, do you still crave his/her touch? If your partner’s body could only be registered in terms of temperature and pain, when it is pressed against yours, would his/her body still excite you? Cole only briefly broaches these questions.

While Cole and Waterman chose not to explicitly delve into the issues surrounding the ‘excited’ body and subject, I find that these issues are of great importance when discussing embodied sympathies. I have already commented on the importance of physical excitation in anthropological studies of magic. Frazer’s magical examples are replete with implicit references to the arousal of affect through dynamic movement, such as the previously mentioned case of the Russian magicians who sought to produce rain through passionate rituals. Affect arousal is also of great consequence in Damasio’s neurological studies of sympathy. He comes to the conclusion, after studying subjects who suffer neurological damage and disorders that restrict affective experience, that ‘reduced emotion and feeling […] play a role in […] decision-making failures’ (45). For Damasio, the arousal of affect, the effective bodily affective drive, is instrumental in leading the subject towards advantageous choices.

**The Sensation of the Erotic Gaze**

It would seem self-evident that sensuality does not solely rely on the literal embrace of two tactile bodies. Obviously, visual and auditory images provide stimuli for erotic excitement, the case in point being pornography. In Bataille’s studies of sensuality, he devotes a considerable amount of his analysis to the emotional and
mental aspects of eroticism, as opposed to offering a totally ‘physical’ perspective. However, in his descriptions of the erotic experience, the result of this arousal, whether it comes from touch, sight, or emotional contemplation, is a bodily experience, a physically felt excitation. One may simply ‘watch’ pornography, but the aim of such visual erotica is to arouse the body. In the opening pages of Bataille’s pornographic tale, *The Story of the Eye*, the narrator watches as his lover Simone performs for his excitement by sitting her bare bottom in a saucer of milk and then standing over her beloved. Bataille writes:

> The day was extremely hot. Simone put the saucer on a small bench, planted herself before me, and, with her eyes fixed on me, she sat down without my being able to see her burning buttocks under the skirt, dipping into the cool milk. The blood shot to my head, and I stood before her awhile, immobile and trembling, as she eyed my stiff cock bulging in my trousers. Then I lay down at her feet […]. Suddenly, she got up, and I saw the milk dripping down her thighs to the stockings. She wiped herself evenly with a handkerchief […]. I vigorously rubbed my cock through the trousers while writhing amorously on the floor. We reached orgasm at almost the same instant without even touching one another.

(1982, 10)

In the above fragment from Bataille’s story, he describes the scene in terms of sitting, standing, wiping, dripping, writhing, trembling, rubbing and the rush of
engorged genitalia. While the characters never touch each other in their fetishistic display, the narrator describes the arousal and the ‘feeling’ of their orgasmic experience in terms of bodily sensations.

All of the bodies, human and other, identified in Bataille’s excerpt impact upon each, even though they do not all touch each other. The specific physical character of each body works to ignite an affective experience in the characters. The hot and cold of Simone’s bottom and the saucer of milk are specific temperature sensations relevant to this transgressive act; they are not the textureless and abstract temperature sensations that Waterman feels. For Waterman, the coolness of milk would be no different to the coolness of steel or ice, without the sensations of ‘wetness’ and ‘liquidness’. Perhaps, such a loss does not instantly seem so consequential to powerful affect arousal. However, Helen Keller, whose primary relationship with the world was via touch, was able to shed light on its significance. She wrote:

> Remember that you, dependent on your sight, do not realize how many things are tangible. All palpable things are mobile or rigid, solid or liquid, big or small, warm or cold, and these qualities are variously modified. The coolness of a water-lily rounding into bloom is different from the coolness of an evening wind in summer, and different again from the coolness of the rain that soaks into the hearts of growing things and gives them life and body.

(2009, 2)

The realisation of the important roles of touch and proprioception as primary ignitions for emotional excitation, such as the arousal of lust are also revealed in
contemporary popular narratives such as romance serials like the ‘Harlequin Mills and Boon’ series. In Jessica Matthews’, *Babies on Her Mind* (1999), we read ‘[h]is touch made the skin of her exposed shoulders and back tingle with feminine appreciation and anticipation’ (24). And, in Cathy Williams’, *A Reluctant Wife* (1998), the protagonist, Sophie, a woman afraid of intimacy, tries to retain her resolve in remaining distant from her suitor Gregory; however when he helps her up the stairs when she is inebriated, ‘[u]nderneath her breast his supporting hand burnt through to her skin. Just a fraction higher and he would be able to feel the swell of her soft skin, the tautness of her nipples’ (86). When Sophie eventually gives in to ‘temptation’, she and Gregory are walking up the stairs to his bedroom:

> They held hands as they mounted the stairs. Very adolescent, she thought, but she liked her fingers linked through his. It felt natural. As they reached the top of the staircase he rubbed his thumb against her skin and a shiver of pleasure ran through her.

(142)

Gregory then strips naked and approaches Sophie, ‘as Gregory’s hands smoothed down her back, she was finding it difficult to hold back. Her body felt as though it had been starved’ (143). Romance novels, such as the two listed here, fill more than a desire for emotional intimacy. The lines quoted above are included so that they might fill a physical desire, an emotional excitation that finds its source in the touch of the other and the feeling/sensation of one’s own bodily excitation.

Pain, thermal and all other sensations involved in tactility are context-specific and object-specific sources for intimate experiences. They are associated with the arousal of emotion. They are sources of sympathy, including sexual sympathy, such as in the
case of Bataille’s narrative. And they work together to create these sympathetic moments.

From the descriptions in *Pride and a Daily Marathon*, it would seem that objects and bodies that touch and are touched by Waterman can only ever be featureless experiences of heat and pain (26). Cole describes an incident which first alerted Waterman to his transformed way of sensing. When a nurse tried to move him from his bed to the chair so that he might go to the toilet, he collapsed on the floor. He could not feel the hardness of the floor, or the quality of its surface. All he could feel was the cold. There was no texture or density, no ‘character’ to the feeling of the floor.

*The Sexual Feeling*

The specific references to Waterman’s sexual life are devoid of physical excitation. Waterman informs Cole that, ‘[t]he whole thing took on a different meaning. Perhaps love itself took on a different meaning. Love was the whole being together’ (97). Waterman relies predominantly on emotional stimulation in physical intimacy, saying ‘[t]here was no response or pleasure for me in touching’ (97). He says that it didn’t matter that he could not be physically stimulated because ‘it’s not the tactile aspect that really matters. It’s having someone there to hold and hug that counts. It may have meant that our [his and Mavis’] relationship was less sensual, but it was no

34 Cole writes, ‘[t]here are other sorts of receptor in the skin which respond, not to touch, but to pain or temperature and connect via a different class of axons to the spinal cord, but neither of these types of peripheral sensory nerve was affected’ as a result of Waterman’s neuropathy (26).
less loving’ (97). At a different point, Waterman does make the claim that his lovemaking has remained similar to his previous experiences saying, it ‘had much to do with a mutual heightening of emotion’ (186), involving a stimulation not from peripheral sources but from within. However, his previously mentioned statements seem to contradict this. Perhaps the emotion he now craves and experiences in lovemaking is part of his greater affective need to ‘move’ in order to live. He needs to make the emotional and physical connection of lovemaking to sustain his self, even if it is no-longer experienced in the same ‘arousing’ manner. Cole’s description of Waterman’s non-sexual experience with a nurse during his initial stay in hospital supports such an assertion. Cole notes that Waterman remembers a young nurse, more vividly and with greater fondness than all others who cared for him, and it was due to a simple act of kindness. Many nights she would sit by his bed and talk with him while holding his hand. All he could feel when she held his hand was warmth (15). An ‘unexciting’ touch still reminds him that he is part of a sympathetic chain of bodies. Waterman’s experience with the nurse is reminiscent of his account of lovemaking as both are missing any detailed reference to the significance of excitation or arousal of the intimate touch and movement.

It is clear from Cole’s work that Waterman does indeed continue to crave touch, but one must ask how much of his craving for other bodies is dependant on sensory ‘memory’? Waterman was once a tactile being. His continuing need for touch may well be at least partially attributed to a body that was trained (whether in biological and/or cultural terms) to embrace other bodies for support. Perhaps, his body remembers this need even if it no-longer feels it.
Ultimately, one is left to ponder such questions after reading *Pride and a Daily Marathon*, as they are largely unaddressed in the text. Perhaps it was too difficult for these two long-time friends to do more than briefly approach such intimacies and represents the difficulties associated with a sympathetic structure that lets go of a strict hierarchy in favour of co-dependent intimacy.

**Dissolution, Death and the Paradox of the Glitch**

Bataille’s study of eroticism presents a powerful argument for the affective ‘need’ for the body of the other. According to Bataille, humans are ‘discontinuous beings’, we are distinct entities with a huge gulf between us. For Bataille, humans are ‘born alone’ and they ‘die alone’ (12). However, he continues, ‘we yearn for our lost continuity. We find the state of affairs that binds us to our random and ephemeral individuality hard to bear’ (15). In this statement, he describes a kind of existentialist reasoning for the foundation of social sympathy. People embrace sympathy to overcome the chaos, to connect with other life in an effort to draw from it a source of united sustenance. Bataille contends that erotic desire is one manifestation of the need to embrace the other. He writes, ‘the transition from the normal state to that of erotic desire pre-supposes a partial dissolution of the person as he exists in the realm of discontinuity’ (17). The beloved, in erotic desire, provides a continuity of being (21). The beloved is a sympathetic entity that gives meaning to the subject, in the act of physical eroticism.

Bataille describes the continuity of eroticism as the death of the discontinuous being. Waterman seems to be denied this death. However, he does experience an alternate death which has been previously described by Cole and Waterman in terms of a loss
of sensation and subsequent isolation. The image of death, as a sensorial silence, is a popular one in contemporary popular culture. It is not uncommon for a tragic filmic death scene (a death that has usually resulted from some kind of violent assault) to use the silence of the loss of feeling to signify the impending death of the victim. In an episode of the early 1990’s BBC teen drama, Press Gang (aired 22 March 1990), one of the primary characters, Spike, is trapped in the rubble of a collapsed building. The episode revolves around his discussions with a girl, Mary, who is buried below Spike, and is never seen in the episode. When Spike first enquires about her state, she replies, ‘I hurt, I can hardly breathe and my head is spinning’. As the episode progresses she becomes quieter and when Spike asks how she is she replies, ‘I don’t hurt so much’. This is the point that Spike becomes more worried about her condition. As Mary’s pain disappears, it signals her eventual death.

The two differing images of death described above may initially seem incompatible. Bataille presents the erotic death as the bleeding out of the discrete individual, while Cole, Waterman and the filmic ‘senseless’ death scene depict death as the enforced encasement of the discrete individual (unable to sense one’s body or world). However, in both constructions of death, it is described as the dissolution of the sustained individual. In the Press Gang example, Mary loses her bodily sense of being a discrete human being. According to Damasio, people are always ‘feeling’, always sensing themselves and the world via their bodies. Even when these feelings of individuality are not at the forefront, such as when one is in severe pain, the individual experiences the continuous stream of information provided by ‘background states’, informing, constructing and maintaining the individual subject (153). In this television narrative, death is heralded by the cessation of this personal
flow that maintains the individual. It is a sensorial death Waterman knows well. Likewise, in Bataille's analysis of eroticism and the taboo, the borders of the distinct being are violated and dissolved in the erotic act, not in an act of silence but violence. He writes, ‘eroticism is the domain of violence, of violation’ (16). The discrete and self-contained individual experiences a momentary death of isolation.

Bataille’s eroticism would likely be defined as an antipathetic violence, should you prescribe to a theory of idealised agentic subjectivity, like Dr Phil; it would be viewed as an invasion of the sanctified discrete individual and a dissolution of the individualised idealisation. And it may seem that discussing flow and grace in conjunction with the violence of eroticism seems incommensurable. However, Bataille’s conception of violence and death act as sympathetic entities in terms of an existentialist perception of being. If one views flow in Bataille’s terms, it could be thought of as the ongoing sympathetic rhythm of the discontinuous being. This discrete or individualised form of subjective rhythm can then be juxtaposed against the violation of the erotic, where the connection between bodies is both a sympathetic ideal and a necessary glitch in discontinuity. The sympathy of the discontinuous subject is a microcosmic system; the leap into continuity is a pursuit of macrocosmic sympathies. But one must first be alive (a sensing subject) in order to die (by breaching the borders of the discontinuous subject).

The violence of the erotic death is a constitutive element of the human entity. The colliding, dissolving and re-forming of the discontinuous being is absent in Waterman’s life. He is separated from the mess of bodies that repel and attract in the ebb and flow of life. He is a discontinuous and ‘senseless’ subject and he is denied
the glitch of the erotic subject seeking continuity and the dissolution of singularity.

Or put another way, he is denied the flow of a discontinuous life as well its glitch, the
death heralded by continuity. Waterman is a subject of becoming when he finds
himself in these moments between the sensations of life and death, but embodying
neither.

**Stillness and Hope**

Despite *Pride and a Daily Marathon* being a medical biography about a subject’s
extraordinary efforts to regain a sense of embodiment through controlled movement,
I cannot help but be left with a sense of quiet stillness at the close of the narrative.
There is no sense of a violently-explosive affective embodiment or a graceful
kinaesthetic joy. However, Cole’s narrative illustrates Waterman’s unceasing striving
to bridge Bataille’s gulf between bodies. Waterman seeks to no-longer ‘feel’ alone
and wants to experience the death of discontinuity. Perhaps, his struggle is not
entirely successful, but he has made greater effort to achieve this than most of us will
ever have to. His struggle reveals the power and integral importance of the senses in
the production of an affective corporeal self.

Cole and Waterman have produced a phenomenological approach to a study of a
unique, irreversible and mystifying neuropathy. Cole has developed a theory of
sympathy that posits the sensate, the affective, the ‘body minded brain’ (Damasio,
223) as the centre and source for subjectivity, cohesion, connectivity, perseverance
and prosperity. Cole and Waterman offer the most complex and intimate
manifestation of magic in this dissertation. This case-study highlights the
unequivocal importance of sympathy in a medicalised understanding of the subject
and realises the relationship between sensation, affect and cognition as fundamental to the fully sensed ‘joy’ of being a cohesive corporeal subject. Cole offers an intimate and individualist anatomy of Waterman. His study of Waterman’s breakdown in tactility and proprioceptive function has allowed for the possibility to address the basis of the passionate subject, a subject whose literal existence is dependent upon the ability to ‘feel’ the other and the self in a necessary violation as bodies converge. This case-study has also permitted the opportunity to embrace the glitch, not only as a source of sympathetic isolation, but as a force in the passionate subject. The glitch is evolutionary, forcing the subject to connect with other bodies and breach the borders of discontinuity and a self-contained system of sympathy. Cole and Waterman have provided a narrative of ingenious sympathetic constructs, detailing a subject who embraces the necessity of praxical knowledge, strives for a knowing body and seeks to find compensatory sensory sympathies to bring knowledge of self and world back to the subject. Ultimately, Waterman offers a lived process of sympathy as a dynamic corporeality.
Chapter Six

Conclusion

I have presented four case-studies which I hope will function as beneficial introductions to a re-thinking of sympathetic magic. While anthropological literature is replete with studies of sympathetic magic, with seminal works produced by Frazer, Taussig, Mauss, Malinowski, Gell and others, there is a distinct absence of studies of the sympathetic magic of the popularised contemporary western world. Therefore, in this dissertation I selected cases with the aim of identifying sympathetic magic as a present and valuable tool for understanding attempts to map the contemporary western subject. In particular, my task has been to use these case-studies to highlight the role of sympathetic magicians. Through examining the teachers, the creators, the keepers of contemporary sympathetic law, I hoped to reveal that magic still resides in contemporary teachings on the self.

I have come to the conclusion that sympathetic magic, as derived from anthropological studies and built-upon in this dissertation, is a fundamental presence in dominating applied theories and processes of ‘self-creation’ of the contemporary westernised subject. The paradigms of self-creation I have focused on are produced in media, medical and makeover discourses. The magical structures I have sought to uncover and define using Dr Phil, Jackson, Sacks and the post-encephalitic patients, and Cole and Waterman are not some quirky or ‘alternative’ conceptual structures;
they are primary sympathies embedded in our knowledges of our selves and our actions of being. Magic, as it has been identified in this thesis, refers to a mimetic, a dynamic and an affective understanding of the subject. Magic can be used as a useful conceptual framework for understanding a ubiquitous presence in searches to understand the modern subject. However, the theory of magic developed here is not intended to act as a nucleus around which varying disciplinary knowledges spring, rather it is intended to reveal a commonality in their mappings – points and pathways of similarity and interconnection that become evident when these maps of knowledge are overlayed.

While my focus has been the magic of modern and western magicians, each of the magicians I have addressed have maintained connections with the magical peoples detailed in anthropological literature by relying on sympathy as a process of representation and action, and adhering to the magical foundation that identifies subjects and bodies (both organic and inorganic, physical and abstract) as fundamentally interconnected. The contemporary magicians discussed in this dissertation have taken these unifying principles of sympathy and identified their own sympathetic systems, creating and highlighting individual corporeal, cognitive, and affective mimetic practices (or applied theories). The magicians’ primary aim, like that of their historical counterparts and cultural others detailed in anthropological literature, has been to use sympathy to overcome the unknown, whether it be the existential fear of inevitable loneliness and a meaningless death, or the anxiety aroused by the gaps in current dominating medicalised knowledge of the human. The magicians have revealed the diversity of the western evolution or appropriation of magic through their differing employment of representational acts, their use of the
body, their use of affect, their understanding of cause and intent, and their structures and hierarchies of agents involved in the production of magical images.

Dr Phil offers a popular contemporary magical construct that relies heavily on the basic magical premise outlined in Frazer’s work, where desire takes form in the image and gives life to a new reality. Dr Phil uses the power of the representational act to offer a solution to the epidemical cultural need for ‘health’ beyond biostatistical functioning. He uses a mental model of image production in the creation of a health-self. Ultimately, Dr Phil dictates a subjecthood that is shaped by will – what you believe becomes reality. My aim in analysing his work was not to disparage the force of the mind or conscious intent in the production of magical affect, I have argued elsewhere with respect to the fans’ construction of Jackson and Waterman’s re-construction of an embodied self, that intent and focused mental activity are undeniable components of the flow of sympathetic subject creation. What I have found more problematic in Dr Phil’s work is his neglect of the affective body and the realisation of the mind’s place within it. The most forceful forms of sympathy, as realised in instances such as when Sacks’ post-encephalitic patients experienced kinaesthetic awakenings, are moments when bodies affectively, actively, physically, tactually ‘live’ in sympathy. To focus predominantly on the dangers of a sympathetically open body and its place in a corporeal network discounts the full scope of sympathetic strength and fulfilment. In Self Matters, Dr Phil does not fairly incorporate the other into his construction of the self. The other is predominantly figured as pollutant, which the individual’s mind must fortress against. He does make the important sympathetic acknowledgement of the power of the other, but in a negative context, and does not include the other as part of a solution for ‘psychic
disfigurement’. The other plays no significant role in the attainment of the fulfilling ‘authentic self’. This is in stark contrast to the post-encephalitic patients and Waterman who need the other to be self. In these negative instances, Dr Phil seems to neglect an integral element of sympathy. The sympathetic being cannot be fully realised or understood without the presence and actions of the other. The actions of others are not inherently negative or positive. Their purpose is to provoke change and to act as comparative bodies in the determination of the self.

However, Dr Phil’s work does reveal an important contemporary form of sympathy based on Individualist desires. It is understandable that the sympathetic structures created around strong Individualist trends would necessarily protect the conviction that the individual is universally unique. In Dr Phil’s case, this protective structure takes the form of an exclusionary system where a Collectivist paradigm is ostracised as pollutant.

With Michael Jackson, I delved further into the analysis of the powerful collective force of the other that is feared and disparaged by Dr Phil. Jackson is a sympathetic subjecthood created through the overwhelming representational acts made possible by a culture that survives on the technologies of mass production and identifies itself in terms of a global media community. Of all the case-studies in this dissertation, the creation or production of Michael Jackson bears the greatest literal resemblance to the magical practices described by Frazer. Jackson’s fractal subjecthood, to a significant extent, has been created out of the desires and intents of his enormous audience and their ability to literally re-produce Jackson in image form, in artefact form, in order to fulfil their desires. I found that in part this overwhelming power of
the other affirmed Dr Phil’s fear – the sympathetic self, opened up to the other, can be bombarded and overrun by the will of the other. However, I also found that Jackson himself partook of the same sympathetic acts as his fans, creating and re-creating himself as new Jackson artworks. Jackson as artisan, as creator of divergent self-portraits, heralds an important aspect of becoming in sympathy, the dynamic movement of subjecthood/objecthood (creative possibilities realised through a subject’s position as both agent and artefact). His being and agency also heralds an important cultural tendency to embrace the malleability of the self in a makeover culture. There are various forces/bodies/subjects that can drive the sympathetic act, changing the subject and the world. However, there is no one author, no final state of subject and world. There is always the possibility for further change – for better or worse. There are always more possibilities or virtualities to be explored depending on the sympathetic powers and relationships involved. Jackson’s sympathetic becoming was alarming because he followed down unpredictable virtualities, making them actualities, and he made apparent the enormous and potentially limitless possibilities for magical progression. He represented the threat that too many multiplicities, too many connections, too many unpredictabilities in a sympathetic system can give way to ‘unmeaning’. He was or is a god of sympathy who makes apparent the inherent glitch in the sympathetic process; limitless possibility, limitless pathways to creation and mastery of the self and world also embraces the terrifying void of infinity – a knowledge and subjecthood beyond comprehension, beyond ‘our’ attainment.
To contrast the Cartesian and mediatised sympathetic images presented by Dr Phil and Jackson, I decided to move my focus to an embodied magic explicated by Oliver Sacks. It was a transition to a more fully realised manifestation of medicalised sympathetic magic. Sacks uses the dominating discourse of a medical culture to create a complex understanding of the constitution and sustenance of the contemporary ‘healthy’ subject. Sacks’ realisation that the lived body, progressing through space and time, is the source for both physiological and psychological status and meaning shines a forceful light on the guttural structure of magic I have endeavoured to affirm in this dissertation. Understanding Sacks’ work as a sympathetic study, in particular an evolved sympathetic study, makes apparent that the contemporary western world embraces more complex and physically oriented ‘connections’ than those offered in Dr Phil’s advice and the construction/s of Jackson. Sacks utilises the benefits of a magic that is microcosmic and macrocosmic, physiological and abstract, affective and motoric, musical and chemical, spatial and temporal, personal and collective. He strives for a more comprehensive understanding of sympathetic connections in order to bring ‘health’ back to his patients. To have simply focused on his patients’ abilities to consciously will themselves out of their Parkinsonian states would have denied the significant and dangerous sympathetic force of the illness (and sometimes the catastrophic forces of treatments and human relationships). Also, declaring the patients to be failures because of their inability to consciously ‘will’ health would have cut them off from further sympathetic possibilities, such as the ‘not-necessarily’ conscious awakening of kinaesthetic melodies through appropriating the rhythm of the healthy other. Likewise, to relegate them as ‘non-selves’, images, caricatures, dispersed pathological exuviae representing subjects without any cohesion - available only for
dissection, analysis and re-distribution, a voiceless community of pathologies without any hope for cure - would have left them ungrounded as ultimately ‘bodiless’ constructs. Sacks as sympathetic magician realises the enormous scope of sympathy. He does not focus on the potential destructive scale of magic that can become frightening and threaten one with the void of infinite reproduction as in the case of Jackson. Rather, he presents the evolutionary aspect of sympathy, the optimism that there remains an ever-present possibility of change for the better. He offers a sympathy that strives for and takes advantage of the new virtualities in a rhizomatic and dynamic structure that allows the individual to adapt and persevere. A study of Sacks has made visible that a complex sympathetic subject is a fully embodied subject of evolution.

Sacks work is also significant because he identifies the sometimes veiled role of contemporary medical narratives as modern mythologies of the self. He uses medical discourse to embrace the romantic mythologies of the self created and maintained by magical law and reveal a greater intimacy and poetry to the anatomised and pathologised subject.

Cole’s theorisations and Waterman’s life enhance this evolutionary structure of an intimate and medical sympathy and give it its strongest platform. Cole uses the Individualist medical and representational trends identified in the previous cases to create a phenomenological narrative of the contemporary sympathetic subject in crisis. Waterman, as a sympathetic being, is denied two very fundamental sources for the sustenance of a physical subject. Without touch sensation and proprioceptive function from the neck down he is denied sensorial information that not only directs
his movements and identifies his positions (telling his brain what the rest of his body
is doing), but also provides the access to the world and vice versa. Waterman can no-
longer ‘feel’ his world or his own body within it. Obviously, Cole seeks to convey
the enormity of this situation through his medically-oriented analysis, but his study
implies a sympathetic understanding of Waterman. Waterman is constructed as a
dynamic subject whose constitution of self is dependent upon the interplay of
moving bodies. Waterman’s life is conveyed as a mapping of interconnections
(internal and external). If Waterman were pictured as a root system, a rhizome, two
of the biggest and strongest branches, with innumerable offshoots, were brutally
severed. There is no possibility of picturing his root structure in the same manner
anymore. These branches will not grow back. But the medicalised sympathetic being
has hope through the growth of other branches and shoots. Waterman has sought out
these pathways, discerning the most effective, in a concerted evolutionary leap.
Cole’s study reveals both his and Waterman’s realisation that it is the strongest, the
most adaptable, who survive (in all senses of the word). The sympathetic being must
find a way, in Waterman’s case walking must be visual and cognitive, and textures
must be sounds and so on. One must continue to pursue interconnection between the
elements of oneself and between oneself and world to survive. One must pursue a
‘felt’ physicality and a ‘sensed’ knowledge.

Cole’s biography is also a consequential text because it embraces a dispersed
sympathetic knowledge, where power is shared between doctor and patient. In this
case, sympathy is not coveted as a secret. Cole and Waterman travel together
creating a co-dependent study of a sympathetic life.
Waterman’s unique situation and Cole’s insightful analysis also provide the possibility for a more intimate discussion of sympathy than was allowed in the previous case-studies. Realising the body that was missing in Dr Phil’s work, the cohesiveness lost to Jackson, and resilient sympathetic drive irrevocably hampered in the post-encephalitic patients, Cole’s analysis of Waterman depicts a fuller sympathetic being. What becomes evident in discussing Waterman is that his position as sympathetic subject is dependent on an affective embodiment. Exploring Waterman’s affective embodiment has also permitted a more complex study of the glitch.

Cole’s biography makes apparent the necessity of the glitch. While the glitch has obviously been highlighted as a detrimental and devastating force in each of the case-studies its power also offers the possibility for affective and tactile connection between bodies. The glitch, as I have approached it, is a breakdown or disruption in the flow of sympathetic systems. It appears in various manifestations and incites varying responses. It is a surge, a gap, fear, chaos, the unknown and secret-self. In this dissertation, it has been viewed as a toxin which infiltrates the sympathetic system in the work of Dr Phil. It has been identified as fundamental to the construction of Michael Jackson as a distributed person, a celebrity god who is created when the borders between bodies dissolve into multiplicities losing any sense of singularity and the subject. It has been accepted by Sacks as inevitable when subjects are displaced or deterritorialised, when bodies become discrete fortresses. In the final case-study, it has been explored as a paradoxical presence in the singular subjecthood of Ian Waterman. In this case, the glitch becomes both the absent sensate self and embraced as a violent ignition for affective and corporeal continuity,
which is missing in Waterman’s discontinuous being. Cole’s biography has permitted an exploration of the glitch as the surge that allows one to move past the mighty fortress of one’s self and merge with another, breaching discontinuity. This was most readily realised through a discussion of eroticism as a sympathetic glitch and connection that is dependent on a physical and affective, an embodied, arousal. The glitch can be evolutionary, forcing the subject to make leaps, to create new sympathies.

In exploring these manifestations of magic, the magicians, and the glitches, my aim has been to offer insight into how modern sympathetic magic operates and how sympathetic structures and people respond to disruptions in sympathy. The responses to the glitch identify how people react to limits in personal and cultural knowledge and boundaries. These responses also reveal how ‘we’ define and use the ‘other’ to determine the self in the sympathetic processes of ‘mimesis and alterity’ (Taussig). The glitch of the other is beyond, beneath and within us. The glitch reminds us of our overwhelming compulsion to allocate and segregate our identities, pinning ourselves and each other to opposing walls. And as we look across the vast space to the other side we see the ‘not-selves’ by which we construct ourselves.

The magicians bridge the realms of self and other, making the landscapes of the self ‘masterable’ and the landscapes of the other ‘approachable’. Sometimes they bridge the void to embrace the mirrored and secret-self as is the case for Sacks, Cole and Jackson (at some moments); and sometimes they approach it only to try and eliminate it as is the case with Dr Phil and Jackson (at other moments). The most
complex sympathetic systems realise the inevitability of the other and do not attempt
the futile and ignorant task of trying to destroy this necessity.

Identifying these sympathetic bridges as magic is not without tension. It is likely that
some, or all, of the magicians referred to in this dissertation would resent any lines
drawn between their work and the sphere of sympathetic magic. Even the majority of
the anthropological work referred to here, disparages sympathetic practice as
primitive, Gell and Taussig being primary exceptions. However, the mantle of
‘magician’ has not been used as an insult but a designation of power. The ubiquitous,
contentious and sometimes contradictory presence of sympathy in each of these case-
studies is intended to provoke thought and perhaps recognition of a much broader
sympathetic presence in dominating discourses of the contemporary self.

Overall, the figure of the ‘master’ of sympathy deserves to be explored further. The
five primary magicians addressed in this dissertation are western males and while it
was not the focus of this particular study, the patriarchal image of the ‘magician’
merits more attention. Perhaps a deeper investigation of the individual fields,
discourses and contexts referred to in this dissertation, and the systems of sympathy
which run through them, will bring greater awareness of the sympathetic forces
shaping contemporary subjects, and acceptance of the significance of sympathy.
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