



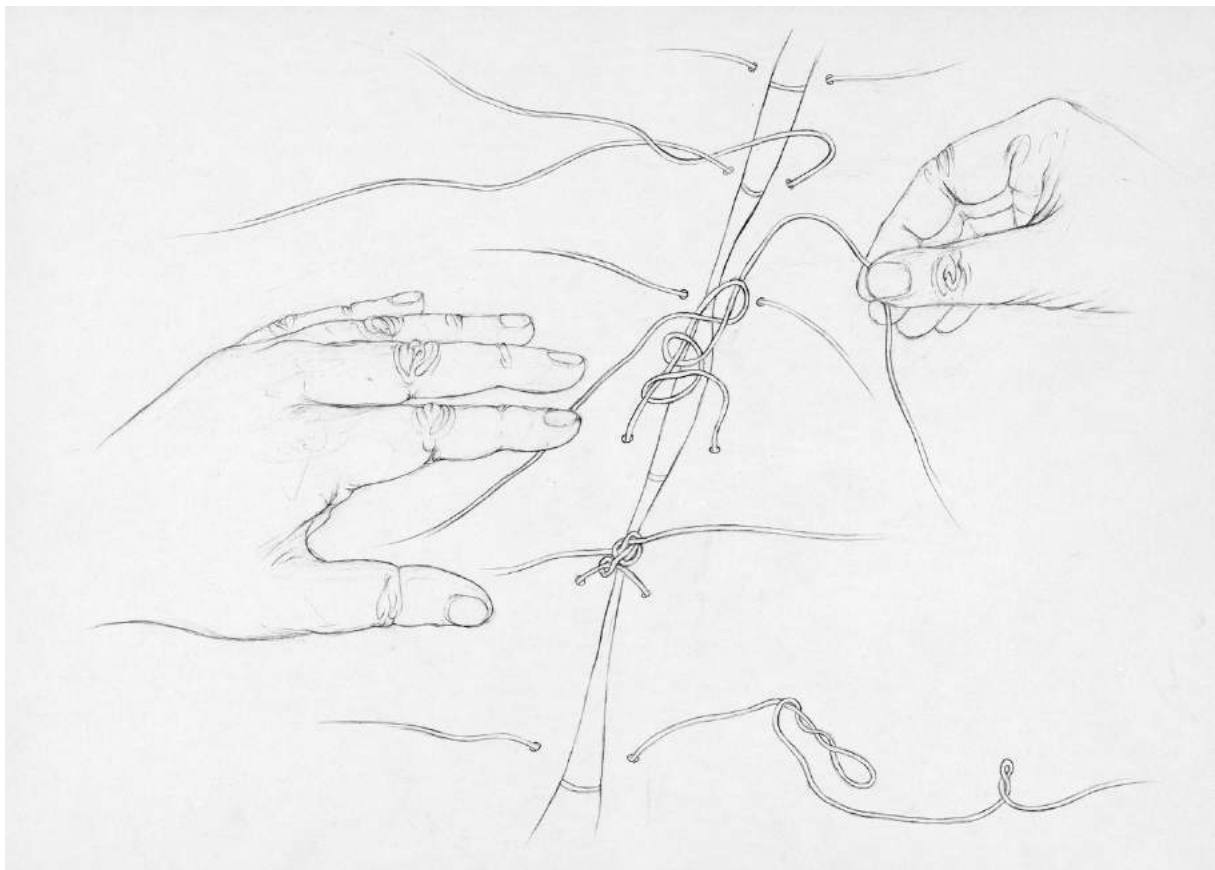
STITCHES
AND
SUTURES

Barbara Graf

STITCHES AND SUTURES

Reflective Documentation

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STITCHES AND SUTURES

Phenomenological Archive of Body Sensations

Reflective Documentation

Part of the thesis project "STITCHES AND SUTURES"

Submitted by Mag.^a art. Barbara Graf

PhD Programme Artistic Research (PhD in Art)

University of Applied Arts Vienna

Supervisor: Univ. Prof.ⁱⁿ i.R. Mag.^a art. Barbara Putz-Plecko

Examination committee members:

Univ.-Prof.ⁱⁿ i.R. Mag.^a art. Barbara Putz-Plecko

Univ.-Prof.ⁱⁿ Mag.^a art. Ruth Anderwald

Dr.ⁱⁿ Monika Ankele

Julian Klein

Univ.-Prof. Dr. Alice Pechriggl

Vienna, December 2023

Name: Barbara Graf

Thesis title: STITCHES AND SUTURES

I hereby declare that I have independently written/produced the reflective documentation of my thesis in accordance with the principles of good scientific practice and have not used any sources or aids other than those indicated, and that this reflective documentation has not previously been submitted in any form for evaluation, neither in Austria nor abroad.

Date

Signature

14 December 2023

A handwritten signature in black ink that reads "Barbara Graf". The signature is written in a cursive style with a large, stylized 'B' and 'G'.

STITCHES AND SUTURES

Phenomenological Archive of Body Sensations

Barbara Graf

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1.1 Abstract (EN)

The artistic research project “Stitches and Sutures” explores possibilities of making lived experiences visual. The point of departure is the repeated occurrence of sensory disturbances caused by a chronic disease. This irritation in one's own body perception brings on a feeling of alienation. For decades, I have been concerned with textile representations of the body and of corporeality. My discovery that bodily phenomena that I currently experience resemble phenomena embodied in my earlier artistic work has raised several questions about body consciousness, body memory, and the bodily unconscious (cf. Graf, 2018). At issue are inner-body phenomena caused by the disease and perceived as if they were tactile sensations. One of the crucial questions that I ask is in fact twofold: What kinds of language and what memories of past experiences are available to me in my efforts to make the invisible visible? And does the artistic research that I have undertaken make it easier for me to cope with the illness? Does it serve as a support to me in the process of reappropriating a body that I have come to perceive as foreign? Also of particular interest is the question of how and if instances of subjective perception can be conveyed visually as ‘embodiments’ and what relevance these embodiments can have with regard to the medical humanities as well as in the clinical context. The title of the project is to be understood literally as referring to work with needle and thread, but also as indicating a conceptual approach. I ask myself the question: Can I use Jacques Lacan’s notion of ‘suture’ as the basis of an artistic method? This notion signifies a process whereby the past is studded retroactively with stitches as a production of meaning. Textile membranes and drawing paper are the ‘canvas’ on which I record physical sensations and a means that enables me to reflect on the transition from sensation to perception and from perception to visual representation, a process that culminates in a *Phenomenological Archive of Body Sensations* (cf. Graf, 2018).



Medical gauze with displaced threads: Barbara Graf, Photograph: *Touching the Sole of the Foot*, 2017.

1.2 Abstract (DE)

Das künstlerische Forschungsprojekt "Stitches and Sutures" erforscht Möglichkeiten, gelebte Erfahrungen sichtbar zu machen. Ausgangspunkt ist das wiederholte Auftreten von Empfindungsstörungen, die durch eine chronische Krankheit verursacht werden. Diese Irritation in der eigenen Körperwahrnehmung bringt ein Gefühl der Entfremdung mit sich. Seit Jahrzehnten beschäftige ich mich mit textilen Darstellungen des Körpers und Körperlichkeit. Die Entdeckung, dass gegenwärtig erlebte Körperphänomene denen ähneln, die sich in meinen früheren Arbeiten verkörperten, wirft Fragen über Körperbewusstsein, Körpergedächtnis und das körperliche Unbewusste auf. Es handelt sich um innerkörperliche Phänomene, die durch die Erkrankung hervorgerufen und so wahrgenommen werden, als wären sie taktile Empfindungen. Eine der entscheidenden Fragen, die ich mir stelle, ist in der Tat eine doppelte: Welche Sprachen und Erinnerungen stehen mir zur Verfügung, um das Unsichtbare sichtbar zu machen? Und erleichtert mir die künstlerische Forschung den Umgang mit der Erkrankung? Dient sie mir als Unterstützung im Prozess der Wiederaneignung eines Körpers, den ich als fremd empfinde? Von besonderem Interesse ist auch die Frage, ob und wie subjektive Wahrnehmungen als 'Verkörperungen' visuell vermittelt werden können und welche Relevanz diese Verkörperungen sowohl für die Medical Humanities als auch im klinischen Kontext haben können. Der Titel des Projekts ist wörtlich als Arbeit mit Nadel und Faden zu verstehen, aber auch als konzeptuelle Herangehensweise. Ich stelle mir die Frage, ob ich Jacques Lacans 'Naht' ('suture') als Grundlage für eine künstlerische Methode verwenden kann. Dieser Begriff steht für einen Prozess, bei dem die Vergangenheit rückwirkend mit Stichen als Bedeutungsproduktion versehen wird. Textilmembranen und Zeichenpapier sind die 'Leinwand' für die Aufzeichnungen körperlicher Empfindungen und ein Mittel, das es mir ermöglicht, über den Übergang von der Empfindung zur Wahrnehmung und von der Wahrnehmung zur visuellen Darstellung zu reflektieren, ein Prozess, der in einem *Phänomenologischen Archiv der Körperempfindungen* mündet.



Medical gauze with displaced threads: Barbara Graf, *Cloth 10 – Foot I* (detail), 2020/2021.

2 Introduction

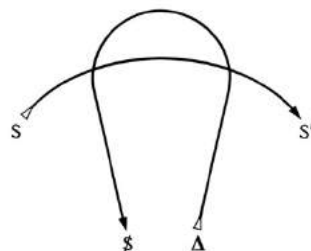
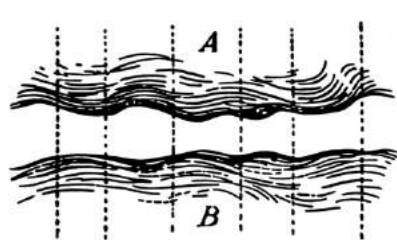
In “Stitches and Sutures,” I explore through artistic work how various conceptions, ideas and fantasies connected with the body relate to bodily sensations that I have actually experienced. What modes of expression emerge from this close approach to the body? How can lived experiences be made visual? My artistic work is an essential resource for this investigation, as are other representations, both visual and verbal. The texts here are largely written in the first person, as they deal with phenomena that I have personally experienced. My artistic research has resulted in a *Phenomenological Archive of Body Sensations* as well as producing texts, lectures and exhibitions in various contexts connected with the medical humanities and the arts.

I have always used my own body in my artistic work; this has manifested itself mainly in the form of textile body coverings and drawings. That my body should itself – and explicitly – become the object of investigation can be explained by the discovery of a serious disturbance in my bodily integrity – and here I use the term ‘integrity’ in the sense of intactness. In February 2017, something decisive occurred in my life: I was diagnosed with multiple sclerosis (MS). The sensory disturbances connected with this disease constitute an irritation that challenges me to look at my work in a new way (cf. Graf 2018 / Graf 2020, p. 26). Giving verbal expression to what the body feels is extremely difficult. One can perhaps best approximate by means of comparisons or metaphors. In order to convey how something feels, we often resort to metaphorical imagery that is based on everyday experiences. Thus, for example, persons afflicted with MS often describe their altered sensory perception as a feeling of wearing gloves or walking on cotton wool. The paresthesia, numbness and hypersensitivity that I have experienced during MS episodes – symptoms that variously persist and to varying degrees – have produced in me a ‘textile’ sensation and have called forth images of my body strangely reminiscent of much of my earlier work. These textile sensations result from sensory disorders and characterize a perception of the body whereby textile material seems to be a part of the body. This might suggest the hasty conclusion that I had artistically anticipated my illness. Of course, as this can be neither proved nor disproved, the question of prescience remains open; nevertheless, it is one that accompanies my investigation throughout. The experience of bodily injury and loss brings on the feeling that the entire self has been violated in its sensitivity (Graf 2020, p. 27). In my earlier work, I oriented myself towards anatomical structures, inner and outer manifestations of the body. In more recent work, I have directly focused on physical experiences as well. What they express is something similar. I am looking at my work from a new perspective, and I am looking for points of contact – like stitch-points in a seam – and linkages. I see textile membranes and sheets of paper as a canvas on which body perception can be recorded. With the pencil I leave traces on the paper, which I record in a fashion that could be referred to as seismographic. And while I touch the fibers, I think about bodily memory and actual sensations, and with needle and thread, I embroider the physical phenomena into the textile fabric.

The title of the project “Stitches and Sutures” is to be understood metaphorically, conceptually, methodologically, psychoanalytically as well as materially and is also a reference to the Lacanian notion of ‘suture’ (Lacan 1964, p. 228ff / Miller 1965, p. 37ff) made up of *points de capiton*, this latter term being variously translated as ‘quilting points’, ‘anchoring points’ or ‘upholstery buttons’) (Lacan, 1956, p. 377ff / Graf, 2018). Lacan connects Sigmund Freud’s principle of ‘afterwardsness’ (*nachträglichkeit*) with the semiotic system conceived by Ferdinand de Saussure. In de Saussure’s famous wave diagram, the relationship of signifier/signified is shown by means of dashed vertical lines (de Saussure 1995 (Orig. 1916), p. 155ff). Lacan describes this as a moving and amorphous mass formed by stitches.

The term *point de capiton* comes from the jargon of mattress making: the filling of mattresses is held in place by such *points*, or vertical stitches. Multiple quilting points can together constitute a suture; it is this notion that is applied to the process whereby a person’s past is studded retroactively with stitches, as it were, as if with needle and thread at larger and smaller intervals (Graf, 2018). The linkage they form is

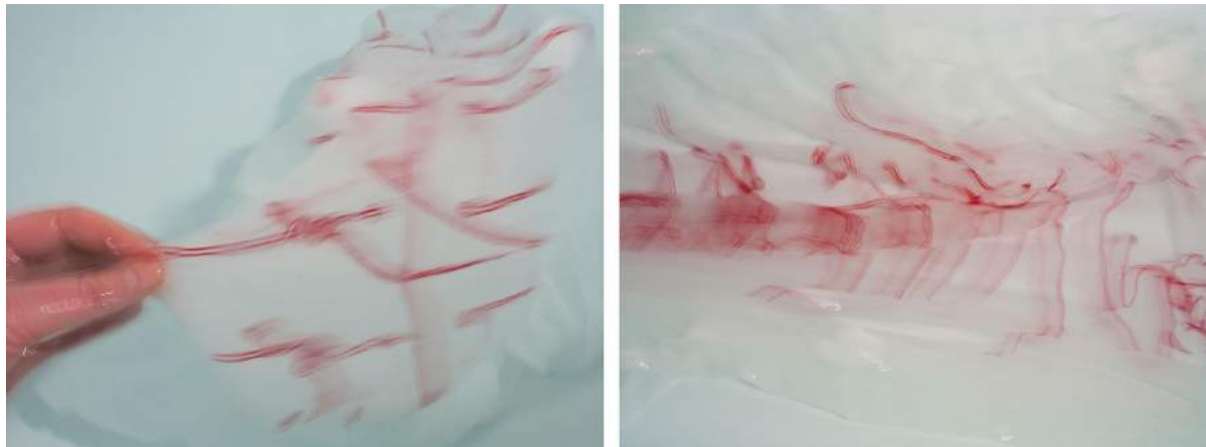
more or less stable and is a continuous process of diachronic production of meaning. Footmarks of the past acquire meaning through events in the present (Graf 2020, p.29). The psychoanalyst André Green describes the afterwardsness as traces of memory, as postponed meaning, “perhaps a potential meaning that lacks only the analytic – or poetic – experience to become true meaning” (Green 2011, p. 265, translated here from the German); retrieval of that meaning would then constitute a kind of finding.



Images from left to right: Saussure's linguistic diagram: A: signifié (idées), B: signifiant (sons) (de Saussure 1995 (Orig. 1916), p. 156); Lacan's 'Graph I' ('Graph du désir'), S-S': Signifying Chain (series of signifiers), $\$$: split subject (Lacan 1991 (Orig. 1966), p. 179) (images slightly edited by Barbara Graf); Barbara Graf, *Textile topology*, 2021.

Drawing on both the Freudian notion of afterwardsness and that of the Lacanian suture, and applying this notion of retrieved meaning as an artistic strategy, I am trying to address the question of why I perceive my somatosensory disorder as having such a 'textile' character. Is it my own work that gives a language to my sensory perception of the various forms of paresthesia? Does what one feels in one's body become bodily perception only when it acquires a connection to some form of language (Graf, 2018)?

(concerning artistic method, see sections 7.2 and 8)



Dissolving suture: Barbara Graf, Photographs: *Cloth 7 – Suture*, 2014.

My altered physical sensitivity has led me to see my work in a new light. The sensory disturbances sometimes manifest themselves as sensations of touch when nothing is actually being touched, as the sensory disorder results from a transmission disturbance in the central nervous system. I feel as if layers of textile material have been added to my body in places where it is not covered. Even without altered bodily perception it is difficult to express how something feels. But it is even more complicated when I perceive a sensation as being totally real without any external event having occurred to provoke it. Other forms of paresthesia produce in me the feeling that I have balls of yarn or bulky textile padding in and under my feet. I feel that other places on my body are covered with bandages. Sometimes they feel rough and tight, sometimes delicate and veil-like. What I perceive as layers of textile induce a state of torpor and numbness. However, what occurs is not a lack of feeling, but rather a feeling that my body has become foreign to me. I am perplexed by these vague feelings that uncovered parts of my body are covered. I want to take off my

socks that I am not wearing. A piece of material brushes against me, as if I were walking into an invisible curtain. The images evoked range from the most delicate fabric to dry or wet pieces of cloth and coarse wire mesh, almost like barbed wire. Textures come into contact with my body; they drape or wrap themselves tightly around it. It feels as if textile fabrics were mutating into human tissue.

Membranes – as permeable layers; as compact, delimiting skins; as porous tissue; as smooth surfaces; as canvases, sheets of paper, notepads; as fabrics; as bio-membranes; as coverings for the body; as projection surfaces – become the carriers and the materialization of the process. I work body structures into the textile fabric or leave corporeal traces on the paper, perceiving the structural alteration of the fibers as bodily expression – a perception based on my perception of my own body. I penetrate layers of textiles with needle and thread; I stitch and backstitch to create seams; I displace threads, disentangle woven fabric, creating blank spaces, stretching new lengths of thread and establishing and dissolving linkages (Graf, 2018).

The present documentation is structured around artistic outcomes, on the one hand, outcomes that have been divided into groups; it is further organized around publications, lectures and other relevant activities. Each of these structural pegs constitutes a focus on a particular aspect of the project. The various publications and activities situate this artistic research project in the contexts of different disciplines, such as medicine, the medical humanities and anthropology. Most of the publications are open access and are an integral part of the PhD project. The following titles might be mentioned here at the outset as exemplifying the forms of interdisciplinary exploration and encounter that characterize the project; these titles will be explained in greater detail further below:

- The two texts “Corporeal Explorations” and “Cutting, Taking Apart, Assembling – Anatomical Garments: A View from an Artistic Perspective” focus on the artistic background that led to the current phenomenological investigation.
(see section 11)
- “Stitches and Sutures: Textile Metaphors and Graphic Topologies as Methodological Artistic Tools” addresses the methodological strategy employed. “The (In)conspicuous Body: Perceiving and Visually Representing Physical Sensations – a Visual Essay” treats the problem of perception and visual representation.
(see sections 7.2, 8 and 9)
- The two publications “Visual Representation of Bodily Sensations: The Taken-for-Granted and the Alienated Body – Bodily Self-Awareness” and “Subjective Processing of Chronic Symptoms and Pain in People with Multiple Sclerosis: Visualization and Externalization as an Expression of Quality of Life” focus on the alienation of the body as a result of illness and on coping with this alienation psychologically.
(see section 10)
- The paper “Arts and Medicine: On the Potentials of Transdisciplinary Encounters” and the exhibition “Threads of Life – Textiles in Medicine and the Arts” highlight the interdisciplinary dialogue between medicine, the arts and artistic research.
(see section 12)

3 Text-Related Specifics

3.1 Footnotes: Attempts Not (Yet) Made

The footnote format is used here as a means of noting down kinds of work and forms of exploration that have not (yet) been undertaken or completed. Among these are open questions and new ideas that arose both during the working process and during the writing of the reflective documentation. These questions and ideas include matters such as unsolvable problems, new contexts that could be opened up, forms of exploration that could be deepened, productive doubts, reflections on how the work could be looked at differently, transfer from one context to another, free associations, ideas that have not yet ripened, thoughts that have been put aside, fabrications, and fragments of associations.

Meant to be read horizontally as a string running through the entire reflective documentation, the footnotes constitute together a collection of unripe ideas, a fragmentary compilation that might further be elaborated for possible future projects.



Barbara Graf, stuffed sculptural object, fabric and fibers, 2020, 10 x 14 x 23 cm.

This sculptural object could serve as the starting point of a series of works (in a spirit similar to that of the footnotes in this documentation), specifically: structures and small sculptures with which the body can come into real contact, for example, by standing on the object in question. They would be understood as evocators that generate sensations similar to those I perceive through sensory disturbances¹.

¹ **Follow-up:** creation of external stimuli of perceived sensations in the form of sculptural evocators.

3.2 Explanation of the Use of Terms

It would be useful at this point for me to make a few remarks about some of the terms that I frequently use here. My intention is not so much to provide unambiguous definitions as to point out the problem of terminology. Indeed, a number of terms can be understood differently depending on the discipline in question. It is not only a matter of making it easier to understand the textual material; the terminological aspect is also an important part of the artistic process and of reflection on that process.

Visualization – Representation

As my work deals with making invisible lived experiences visual, I start with the problem posed by the terms visualization and representation. It is representation in particular that can prove to be a problematic concept. It is a term used in many disciplines and can easily be misleading. In the course of my work and when writing about it, I have frequently found myself stumbling over the term ‘representation.’ The German term (*bildliche*) *darstellung* as well as the English term ‘graphic representation’ express only in a general sense what I, in the context of my project, understand by ‘visualization’; both terms, however, are in fact inaccurate. In my first project-related texts, I used both the German and the English term without commenting on either and without stating the problem. If we understand the concept of representation in the psychoanalytical sense put forth by André Green (cf. Green 1975), the term itself could refer to a preliminary stage of a graphic (externalized) visual rendering as a means of transfer or transcription of a representation, a rendering that emerges from a process of symbolization. In the context of my work, I do not, in the exact sense, adopt the psychoanalytical notions of representation and symbolization (which in turn are made up of various complex concepts). Nevertheless, psychic symbolization, on the one hand, and the artistic process, on the other, both involve a similar transformation, namely, abstraction and distancing.

Understood, however, as an implicitly hyphenated verb, the term ‘represent’ corresponds more closely to my work of giving lived experiences a new presence in a different medium – my work of ‘re-presenting,’ a process that includes the notion of not being the same, it being assumed that meaning is essentially determined by medium. If my own body is the initial medium, and if I work on the premise that it is above all the actual process of drawing – as opposed to the result produced – that is important, the following verbal notions might come closer to expressing the idea of transforming lived experiences into drawings: recording, externalizing, resonating, tracing, notating, mimicking, sensing, embodying². Consequently, a better descriptive term for the results produced by the artistic work (drawings, photographs and textile representations of bodily sensations) would be ‘visual embodiments’.

In the context of this project, wherever I have allowed myself to use the English terms ‘visualize/visualization,’ I have done so in the more specialized sense of ‘rendering optically perceptible,’ in full awareness of the fact that the English terms – unlike German *visualisieren/visualisierung* – primarily express an inner, mental process, one that can almost be considered to be preliminary to a materialized externalization.

Disease – Illness

I understand ‘disease’ as what is physically diagnosed and ‘illness’ as the experience of it. This also means that one can feel well in spite of a disease. Havi Carel describes this explicitly in her *Phenomenology of Illness*, in which she refers to serious and chronic illnesses rather than to transient phenomena; in doing so, she uses the expression “life-changing ill health” (Carel 2016, p. 2): “Illness,” she writes, “is the experience of disease, the ‘what it is like’ qualitative dimension as it is experienced and made meaningful by the ill person.” She further writes, “Disease is to illness what our physical body is to our body as it is lived and experienced by us” (Carel, 2016, p. 17).

² **Follow-up:** drawing the same subject using different verbs as starting points.

The German language provides a single word for the phenomenological body: *leib*; Maurice Merleau-Ponty refers to the body of experience as *le corps propre* or *le corps phénoménal* in distinction to the ‘body-object’ (*le corps objectif*), which, however, is not to be understood separately from the phenomenological body, since the perceiving subject is dependent on the physical body (cf. Merleau-Ponty, 1945).

Sensation – Feeling – Emotion

My exploration begins with physical sensations, which, as such, are practically inseparable from their perception. Nevertheless, I make a working distinction between the two notions in order, later, to be able to refer to the involvement of previous experiences in the overall process and to the precondition of the availability of a language that makes perception and its visual embodiment possible.

Likewise, I distinguish as much as possible between sensations (which I largely understand as physical), feelings and emotions. However, when sensations are perceived, feelings as well as emotions – among other cognitive capacities – come into play; indeed, there is no such thing as a ‘pure’ sensation, because each sensation transforms into its perception at the moment of its occurrence. It would be futile to attempt to relate my drawings exclusively to physical sensations as such, although an effort to do so would not be entirely devoid of sense, as it would point to the preconditions of perception.

The term ‘feeling’ could almost be situated between ‘sensation’ and ‘emotion,’ although I rarely use the term ‘emotion’ in the context of my work; I use ‘feeling’ mostly in the verbal sense – for example, when I discuss what sensory disturbances ‘feel like.’

Sensation – Perception

On the inseparability of sensation and perception and the role of memory, Ernst Mach writes in *The Analysis of Sensations and the Relation of the Physical to the Psychological* how perception and sensations merge and become inscribed in the body as embodied knowledge: “Sensational stimuli can be partly or wholly replaced by memory-images. All memory-traces that remain behind in the nervous system cooperate with the sensations to set free, to assist, to inhibit and to modify the reflexes” (Mach 1914, p. 172). The study of neuroplasticity explores the flexibility both of sensations and of their perception; this kind of flexibility also has relevance in what is currently understood as speculative futures³. In her book *Transformative Experience*, L.A. Paul writes about the influence of the past on the present and its projection into the future as an active choice (Paul 2014, p. 105ff). “When you consider what might happen in your future, your consideration involves an imaginative reflection on what it will be like, from your point of view, to experience the series of future events that are the mostly likely outcomes of whatever it is that you choose to do (Paul, *ibid.* p. 106).”

³ **Follow-up:** imagining and recording future sensations.

4 Overview of the Outcomes of the Artistic Work

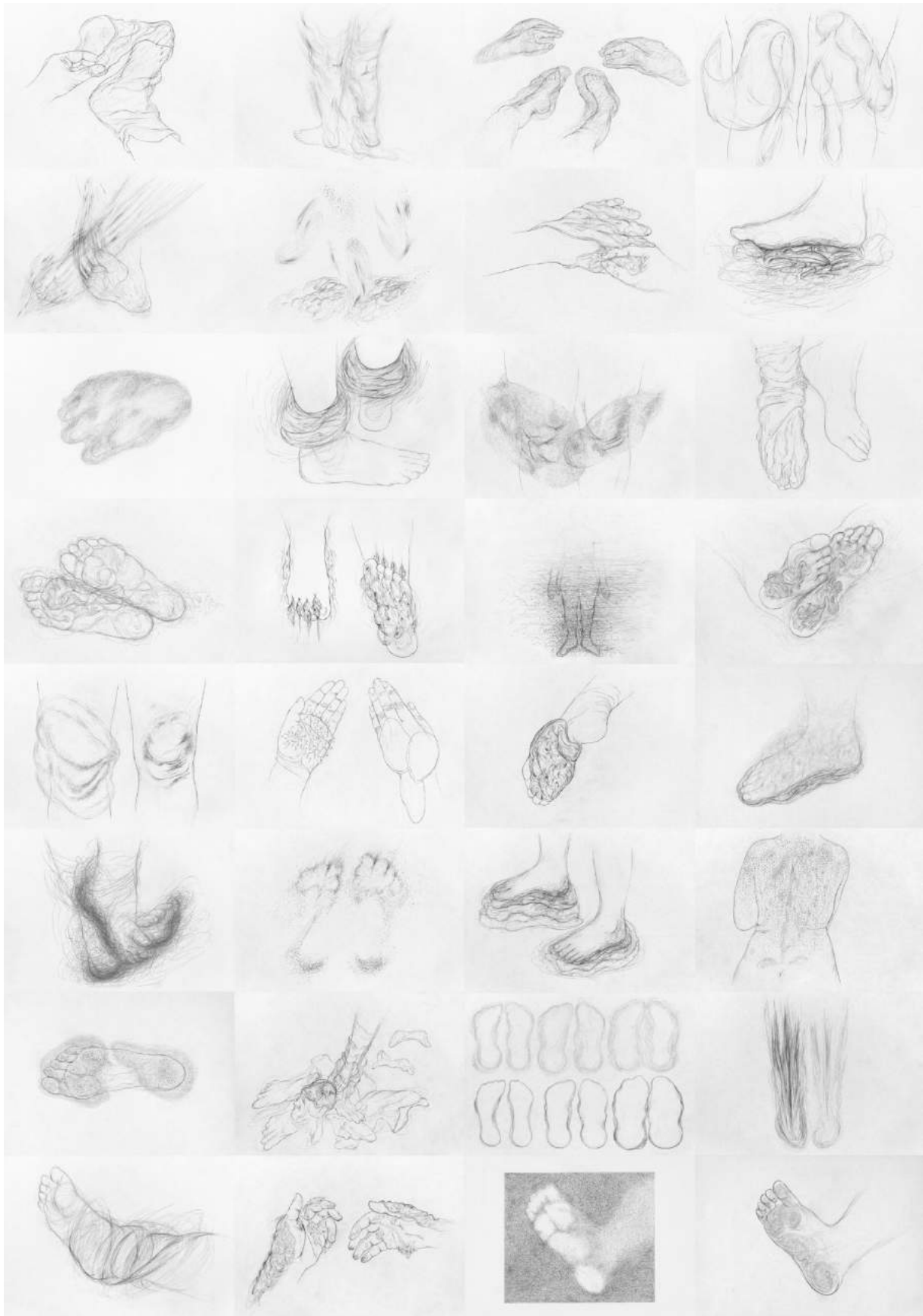
The body of work includes drawings, textile works and photographs, all of which are closely interwoven with the various publications produced in the course of the project. Each of these published text-image contributions relates to a specific aspect of questions posed in the context of the project.

The artistic work is to be understood, on the one hand, in a functional sense, in that it serves as an instrument of reflection on and exploration of the possibilities of visual representation and the expression of bodily sensations; on the other hand, what result are works that visually and artistically embody corporeal perception.

- The drawings are concretizations of the various possibilities of graphically representing physical sensations. The more than fifty drawings consist of quasi-seismographic recordings, narrative graphic representations and intensity scales (*see sections 4.1.1 and 4.1.2*).
- The drawn topologies play a special role: they particularly relate to the methodological approach of the project and are references to the Lacanian notion of ‘suture’ and to the linguistic sign system of Ferdinand de Saussure and his wave diagram (*see sections 4.4 and 7.2*).
- The photographs of the SCOPY (symbiotic culture of bacteria a yeast) bio-membranes document how differently the membranes grow, but are also to be seen as artistic photographs. This exploration overlaps with the artistic research project “Visceral Operations / Assemblage” (project leader: Christina Lammer, FWF/PEEK project 2019-2023, AR515). As a collaborator in that project, I contributed a work entitled *Catalogue of Aliveness*. In the context of the project “Stitches and Sutures,” I have focused more on the relationship between the bio-membranes and my own body and have also used them as body wrappings. Since the bio-membranes grow slowly and unpredictably, this phase lasted from 2020-2023 and ultimately resulted in a great number of photographs (*see section 4.2*).
- The textile embodiments include a work entitled *Sensation Sampler* and two cloths on which oversized feet have been represented (*see sections 4.3, 4.5 and 4.6*). All of these textile works are accompanied by photographs, some of which have more of a documentary character, others having been assembled to form artistic picture panels. The process of photographing these textile materializations was experimental and partly carried out with the use of a stroboscopic disc. Producing such pictures is like painting with a camera – not like painting on a single canvas but, rather, like making countless attempts at creating a picture. This leads to the creation of an enormous resource of photographs⁴.

⁴ **Follow-up:** arranging pictures taken from this photographic resource in ways that focus on content criteria completely differently from that of tactile sensations, e.g. arrangements of gestures inspired by the ‘pathos formula’ of Aby Warburg’s *Mnemosyne* atlas (cf. Gombrich 1970)

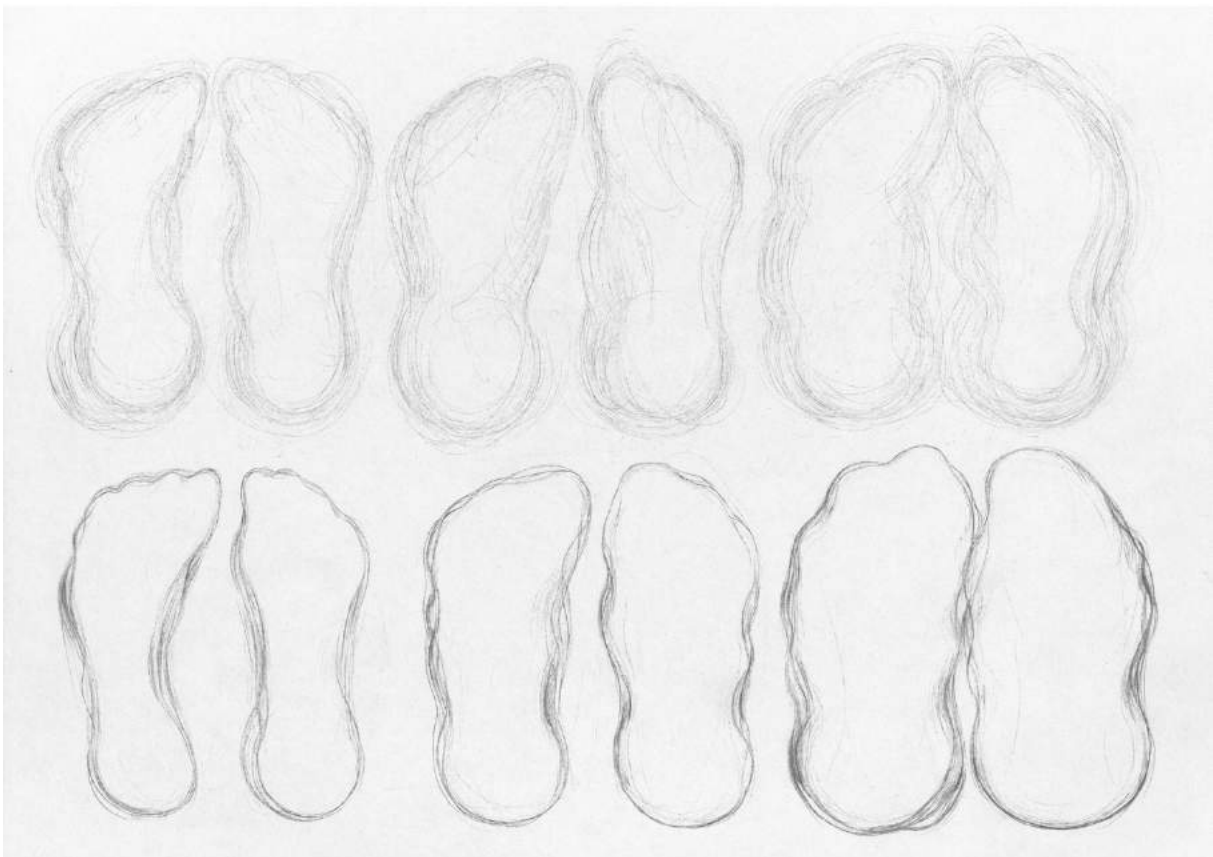
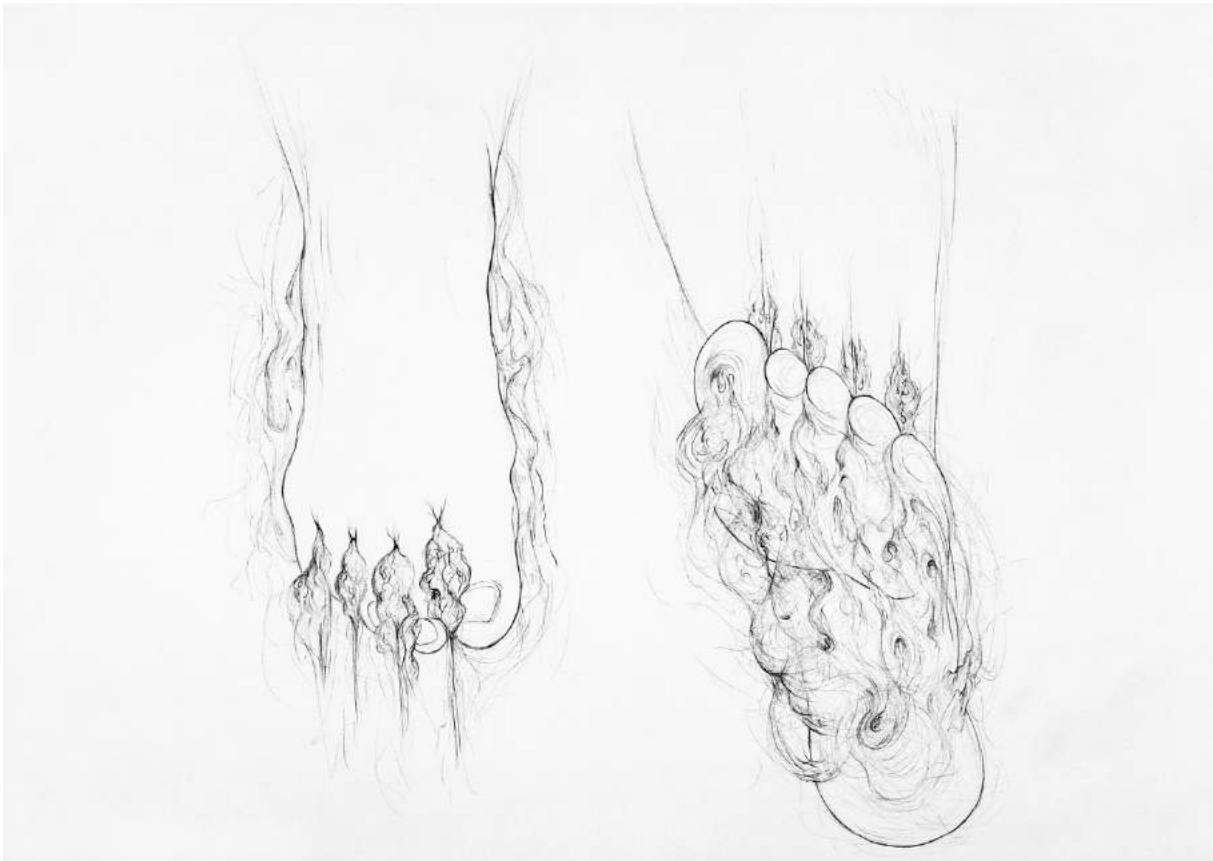
4.1.1 Phenomenological Archive of Body Sensations I: Drawings



Barbara Graf, Drawings 2017-2022, pencil on paper, 29.7 x 42 cm.

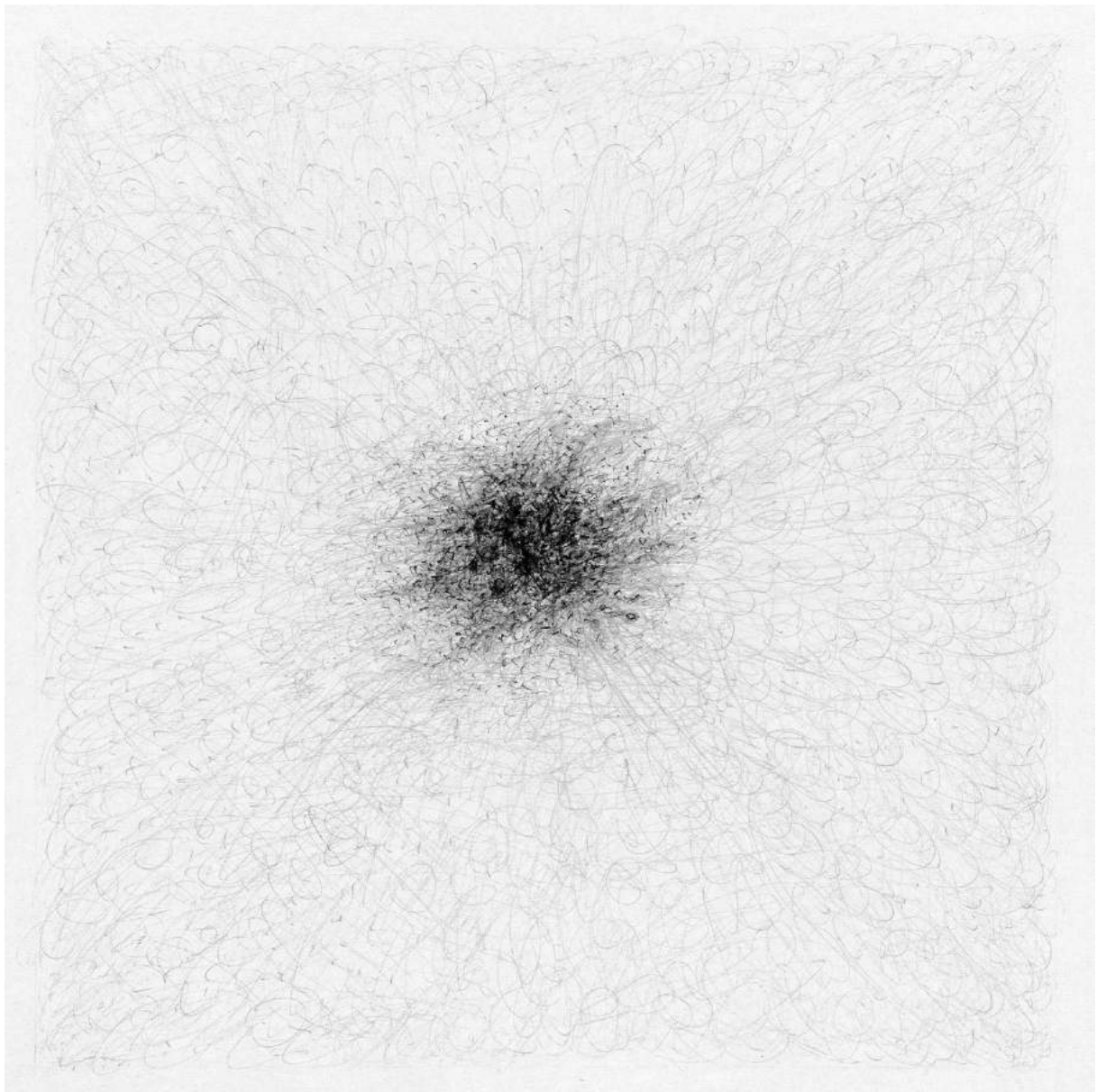


Sensation of fine tissue on the knee: Barbara Graf, *Drawing no. 200*, 2019; fibrous sensations in the feet: Barbara Graf, *Drawing no. 196*, 2018/2019, pencil on paper, each 29.7 x 42 cm.



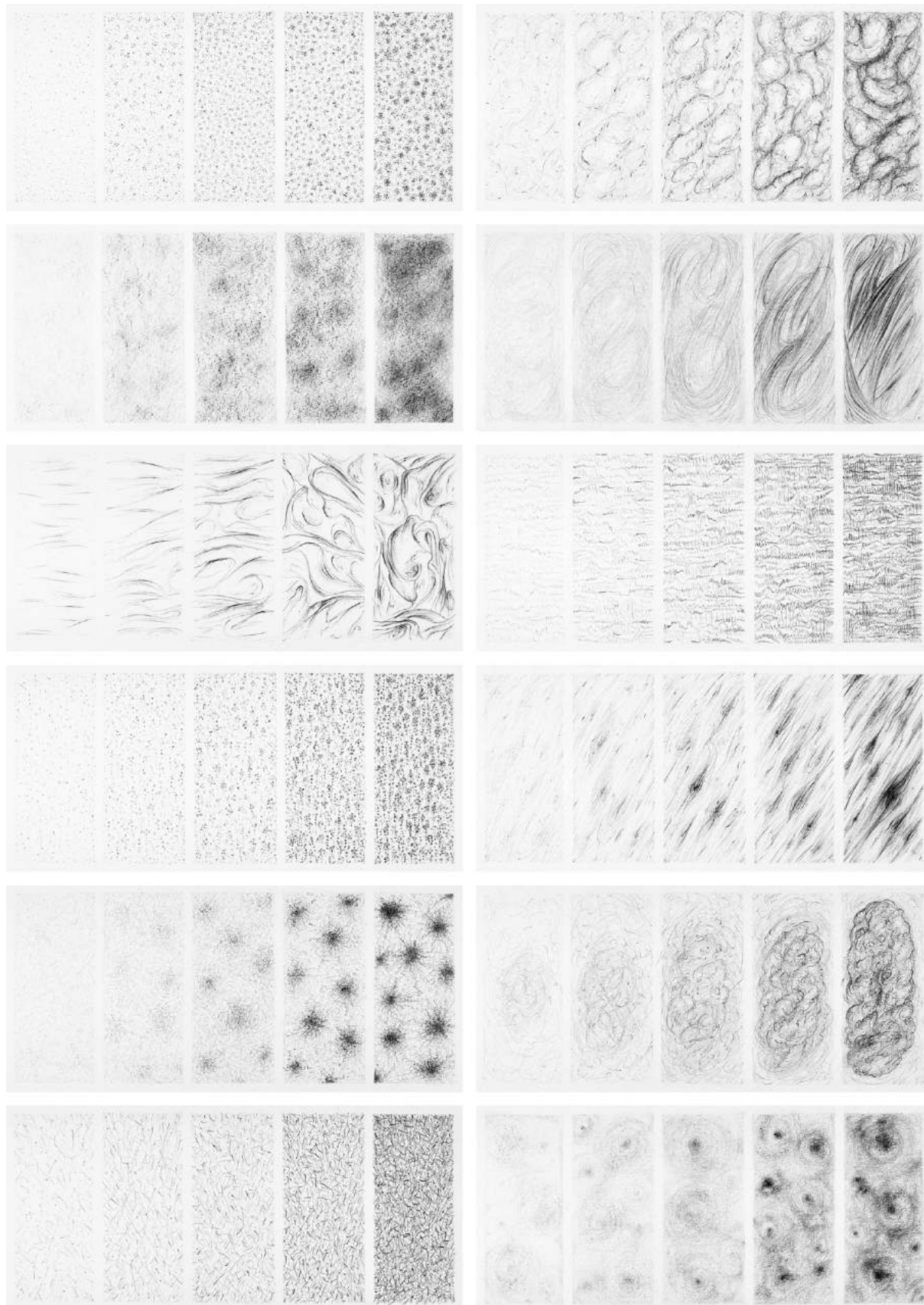
Fibrous sensations on and in the soles of the feet and between the toes: Barbara Graf, *Drawing no. 250*, 2021; Recording what is felt as being the size of the feet in the morning, at midday and in the evening. The first row shows the feet without contact to the floor; the second row shows the feet touching the floor: Barbara Graf, *Drawing no. 209*, 2019, pencil on paper, each 29.7 x 42 cm.

4.1.2 Phenomenological Archive of Body Sensations I: Pre-study for the Intensity Scales



Sensation of stabbing pain (pre-study for the intensity scales). In contrast to the previous drawings, the sensation is not shown on a specific part of the body, as is also the case in the following intensity scales.
Barbara Graf, *Drawing no. 222*, 2019, pencil on paper, 29.7 x 42 cm (detail).

4.1.2 Phenomenological Archive of Body Sensations I: Drawings of Intensity Scales



Twelve different body sensations, each shown as a progression from the initial subtle occurrence of a sensation to the stage at which it turns into pain; at this stage, the quality of the sensation can no longer be precisely determined: Barbara Graf, *Drawings Intensity Scales*, 2020, pencil on paper, five fields: 11.7 x 27.1 cm.

4.2 Phenomenological Archive of Body Sensations II: Bio-Membranes



SCOBY bio-membranes serve here as a medium for the 'visual imitation' of a body sensation. Depending on the duration of cultivation, this bacterial cellulose has a quality that ranges from that of a veil-like membrane to that of a thick, solid layer. The composition of the nutrient solution influences the color. Barbara Graf, photographs, 2020-2023.



The cellulose produced by bacteria and yeasts sometimes grows in astonishing ways and mimics human skin.

4.3 Phenomenological Archive of Body Sensations III, Cloth 11 – Sensation Sampler

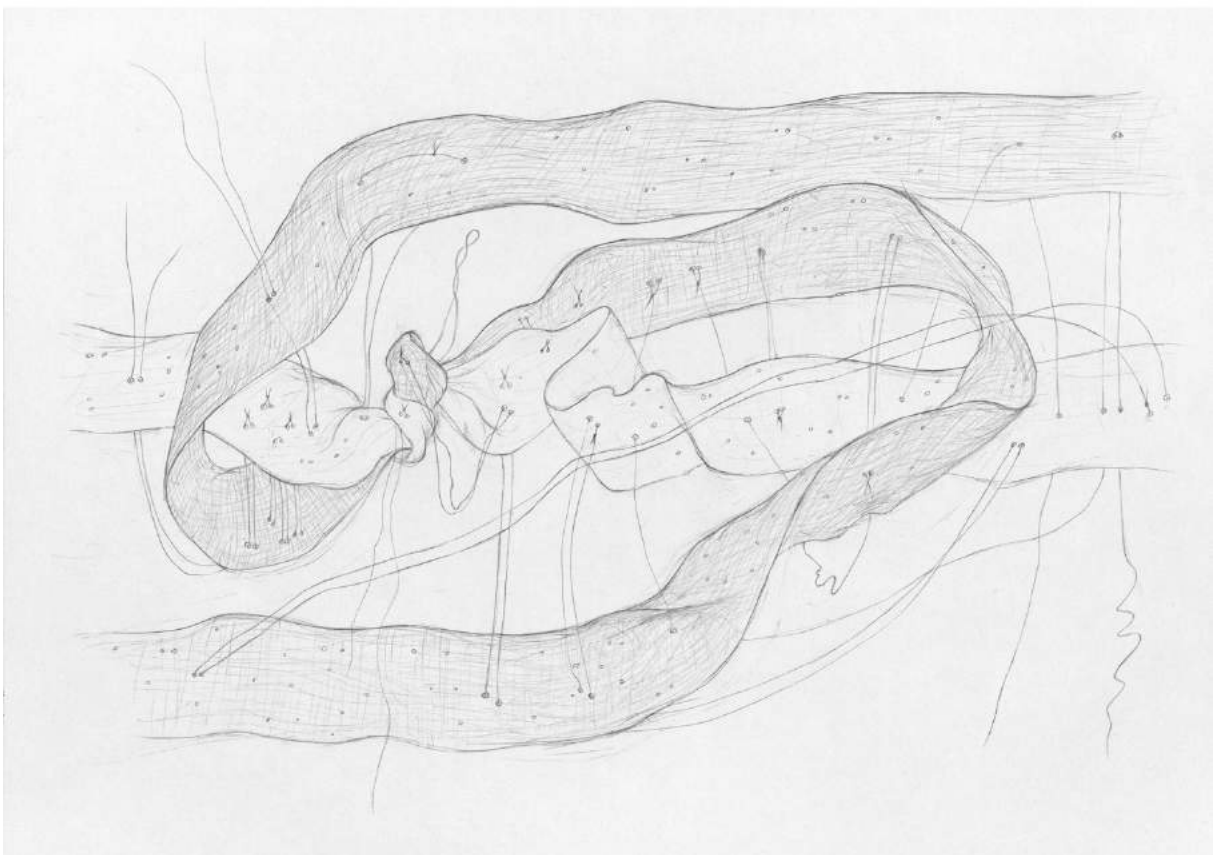
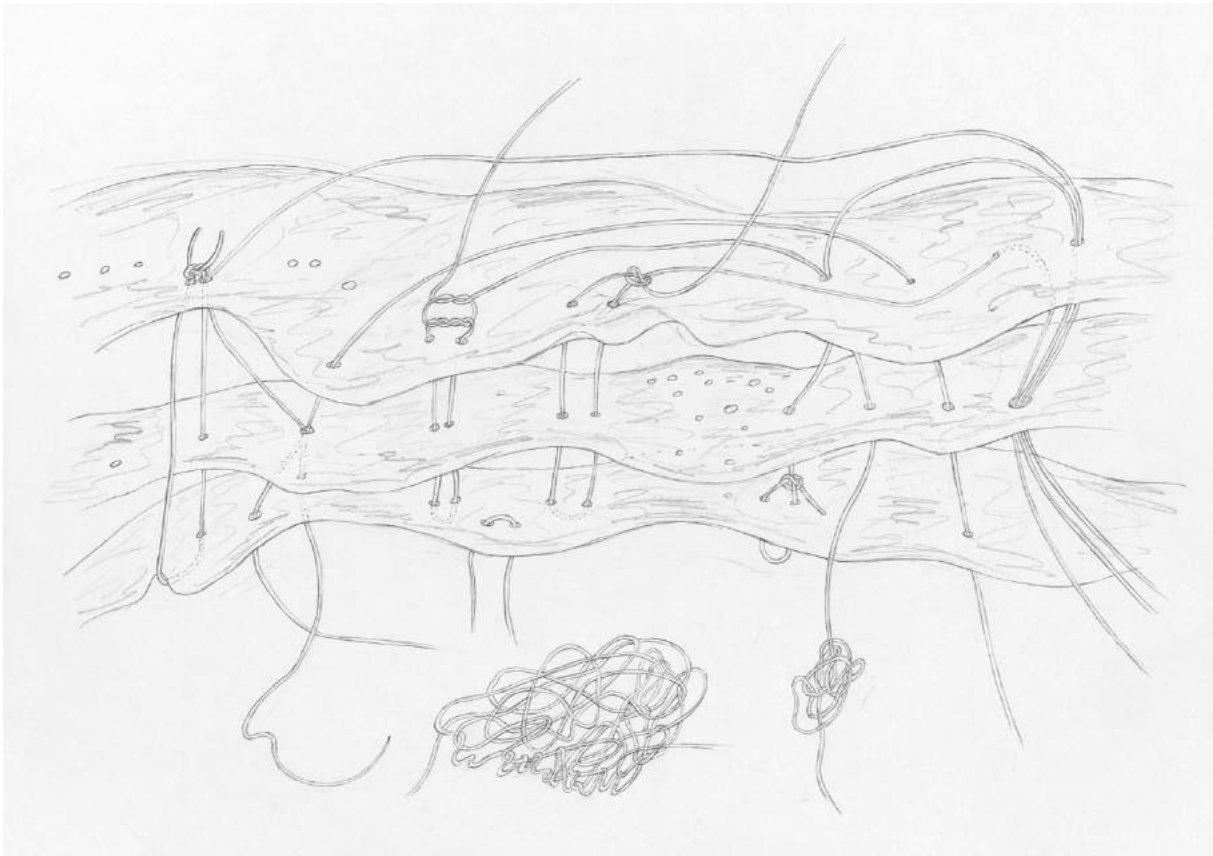


Barbara Graf, *Cloth 11 – Sensation Sampler*, 2021/2022, medical gauze, various fibers and threads, 186 x 93 cm.

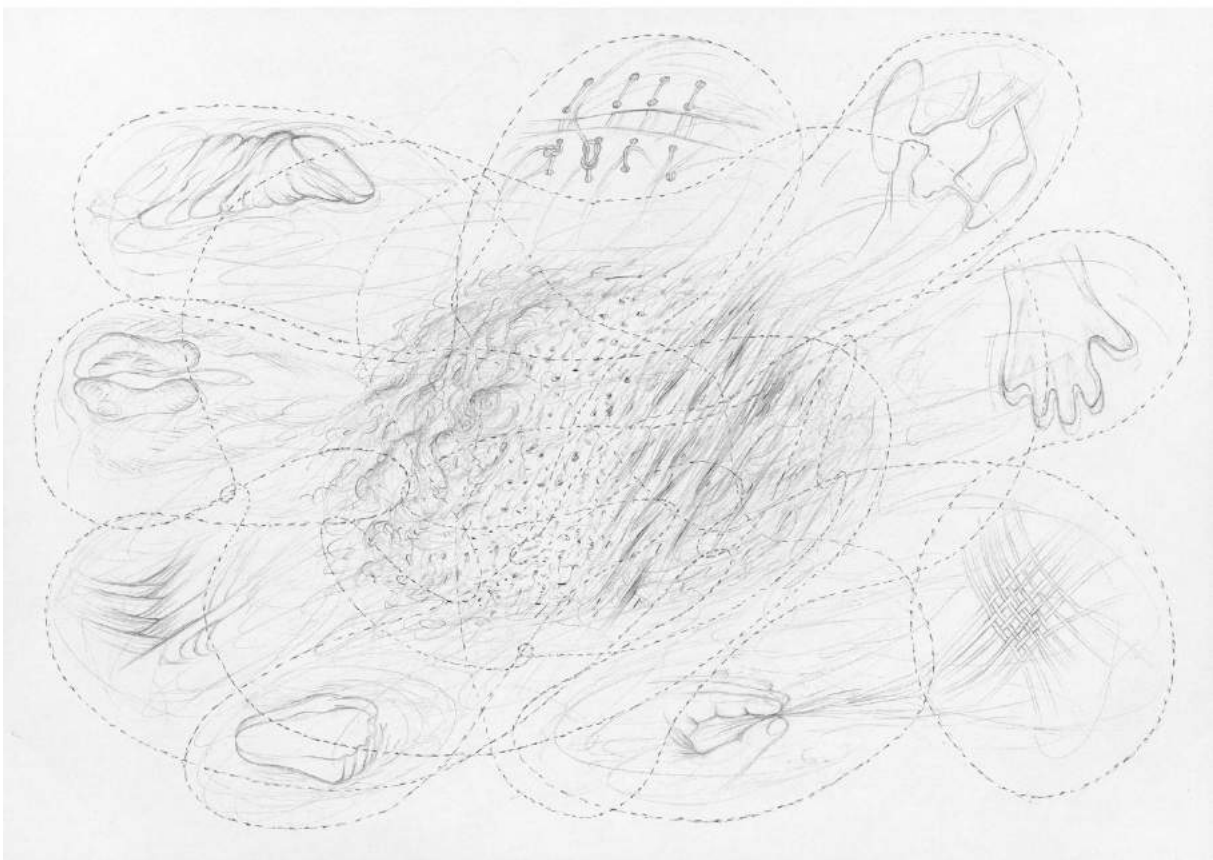
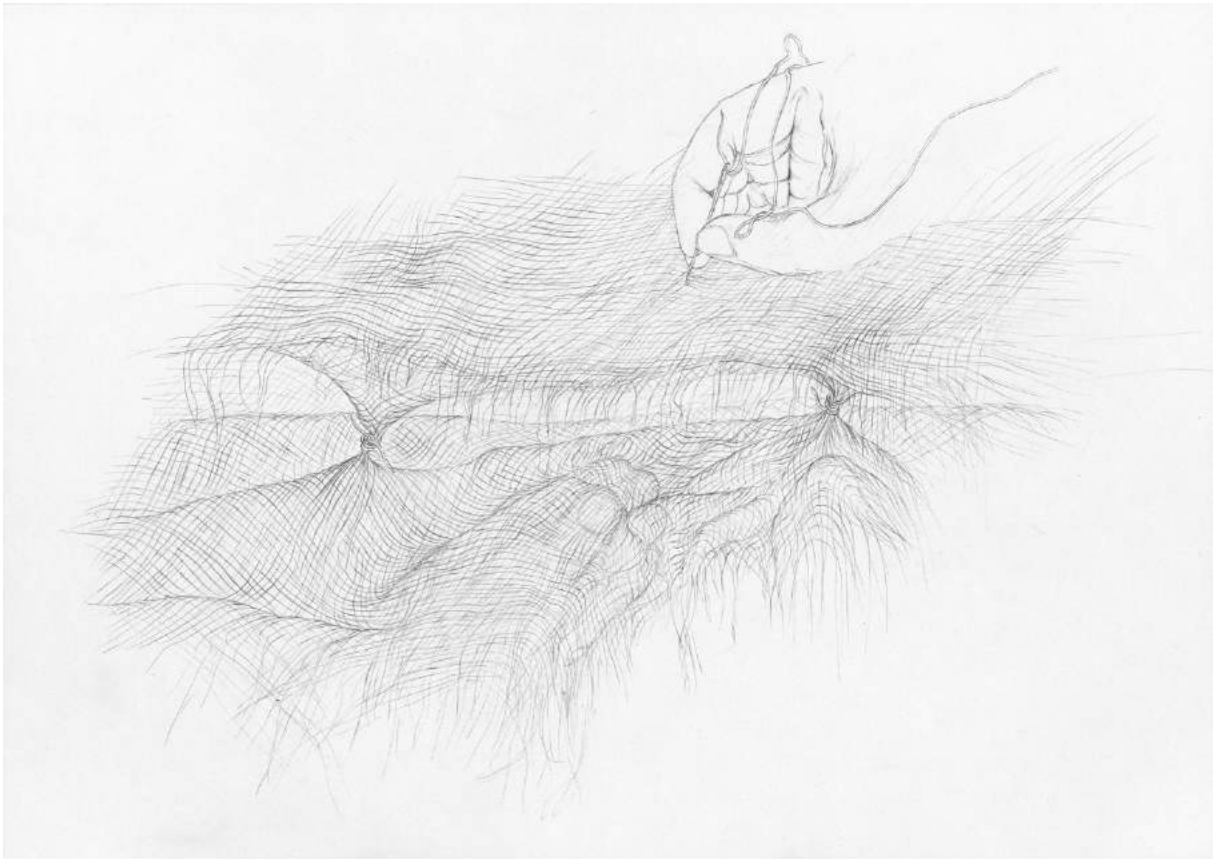


Barbara Graf: Picture panel with photographs of Cloth 11 – Sensation Sampler, 2021/2022.

4.4 Textile Topologies: Drawings



Topologies inspired by the Lacanian suture diagram and the wave diagram of Ferdinand de Saussure. By means of 'incorrect' links or stitches, the drawing becomes a tool for asking questions differently, e. g. questions concerning past and future or the relation between signifier and signified: Barbara Graf, *Drawings no. 199 and no. 217*, 2019, pencil on paper, 29.7 x 42 cm.



Further developed topologies: metaphorical needlework in two layers of fabric with fraying edges: Barbara Graf, *Drawing no. 204, 2019*. Linking of earlier works to the exploration within the framework of the project "Stitches and Sutures": Barbara Graf, *Drawing no. 221, 2019*, pencil on paper, 29.7 x 42 cm.

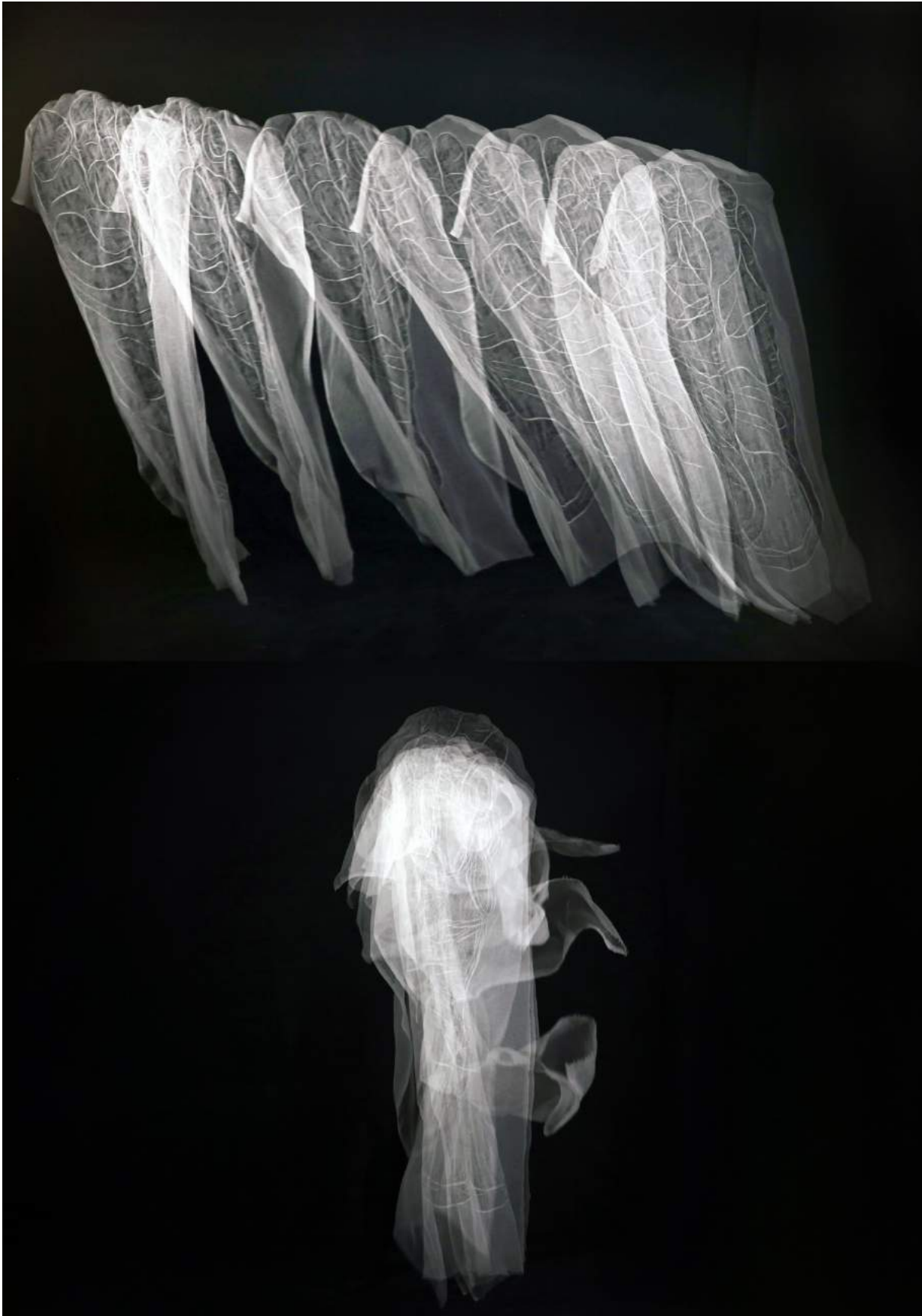
4.5 Cloth 10 – Foot I



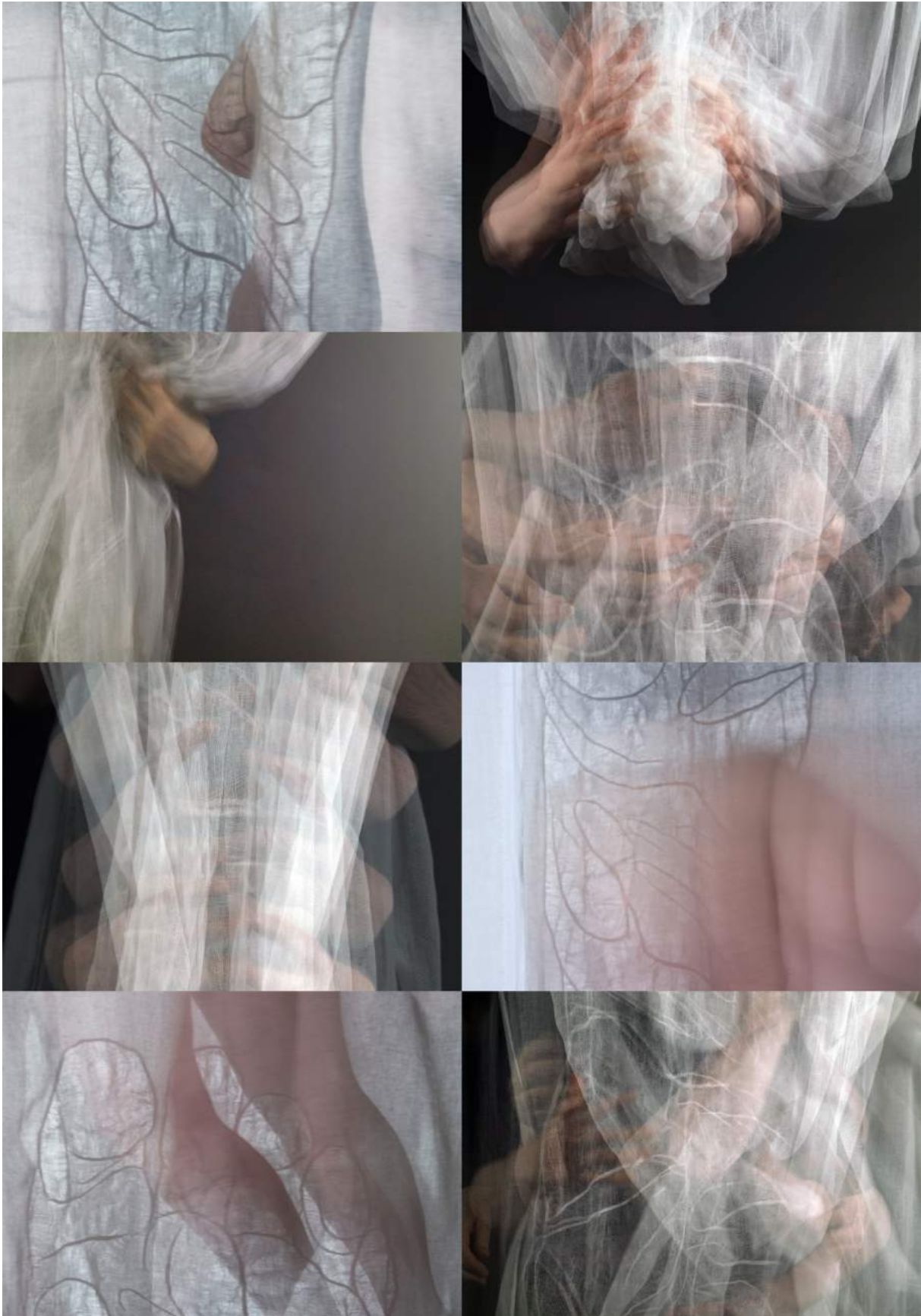
Medical gauze with displaced threads: Barbara Graf, *Cloth 10 – Foot I*, 2020/2021, medical gauze, 186 x 93 cm.



Barbara Graf, *Cloth 10 – Foot I*, stroboscopic photography, 2021.



Barbara Graf, *Cloth 10 – Foot I*, stroboscopic photography, 2021.



Barbara Graf, *Cloth 10 – Foot I*, stroboscopic and long-exposure photography, 2021.

4.6 Cloth 12 – Foot II



Small upholsteries with *points de capiton* (upholstery buttons) in an arrangement of the structure of the sole of a foot:
Barbara Graf: *Cloth 12 – Foot II*, 2023, medical gauze, sheep's wool, 186 x 93 cm.



Small upholsteries with *points de capiton* (upholstery button) in an arrangement of the structure of the sole of a foot:
Barbara Graf: *Cloth 12 – Foot II*, 2023, medical gauze, sheep's wool, 186 x 93 cm.



Barbara Graf: *Cloth 12 – Foot II*, 2023 medical gauze, sheep's wool, 186 x 93 cm (43 small upholsteries).

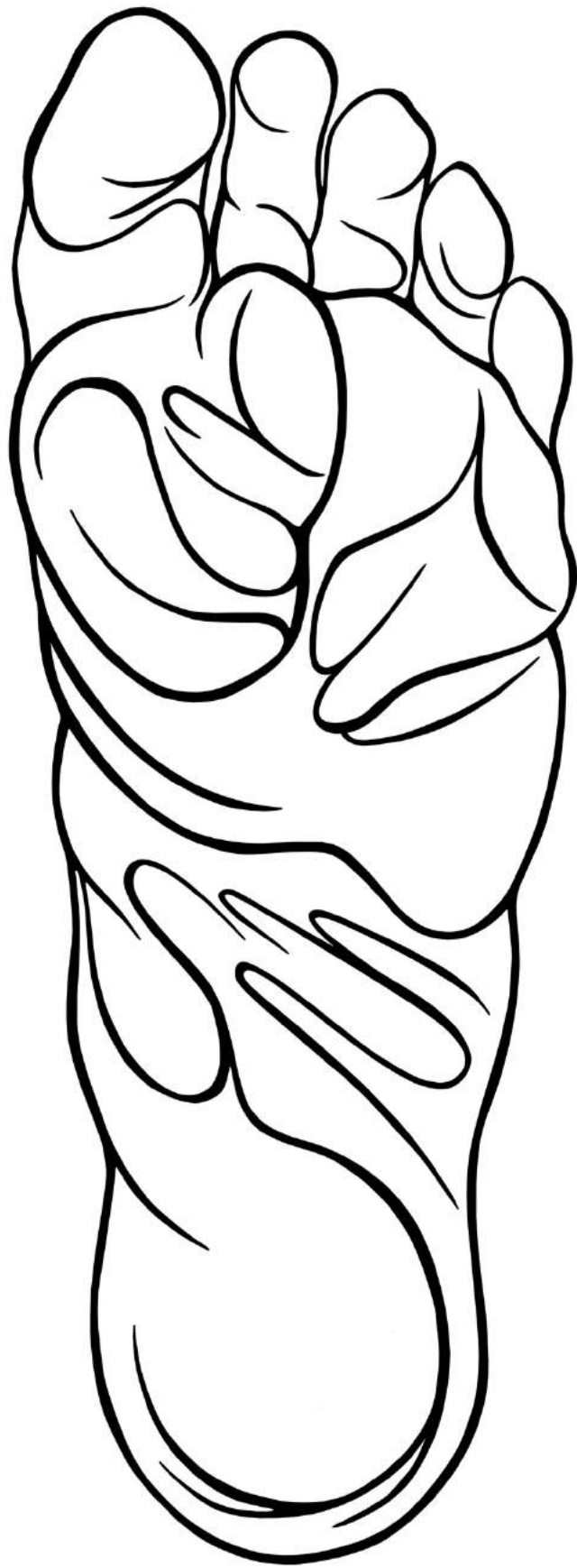


Small upholsteries with *points de capiton* (upholstery button) in an arrangement of the structure of the sole of a foot:
Barbara Graf: *Cloth 12 – Foot II*, 2023, medical gauze, sheep's wool, 186 x 93 cm.

4.7 Foot I and Foot II: Designs



Barbara Graf: Right foot (design for the *Cloth 12*), 2020.

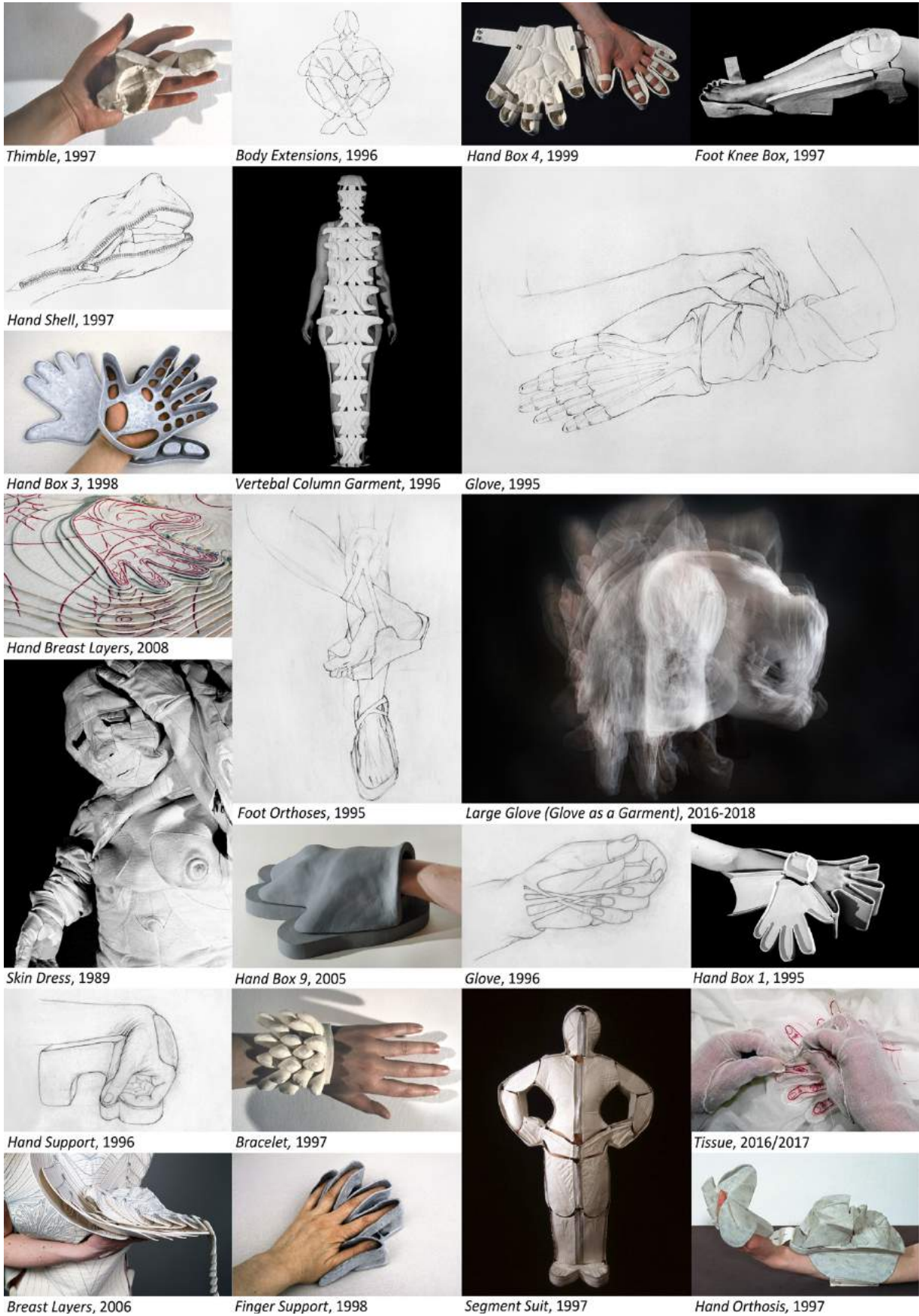


Barbara Graf: Left foot (design for the *Cloth 10*), 2020.



Barbara Graf, *Small Cloth 10*, 2020/2021, medical gauze, hand-guided machine embroidery, 45 x 45 cm.

4. 8 Works 1989-2018: Hands, Feet and Second Skin



Barbara Graf, sculptures, drawings, photographs, 1989-2018.

5 Introspection/Externalization

Drawing Sensory Disorders Caused by Chronic Conditions as an Artistic and Autotherapeutic Means of Coping with the Loss of Bodily Certainty

Physical alterations caused by illness alter the way in which one relates to one's own body. Irritating, burdensome or debilitating symptoms require being dealt with on a daily basis; but in addition, the destabilization of one's feeling of bodily assurance demands active forms of response and creates the need to come to terms with what is actually taking place in the body. Temporary physical phenomena differ from those caused by chronic illnesses, the latter often being of a persistent nature and accompanied by irreversible alterations. The emotional experience of being diagnosed with a serious illness together with the realization that one's body is no longer the body it once was causes considerable frustration, in spite of the fact that the human body constantly undergoes change. The upsetting of the sense one has of one's physical self leads one to feel insecure and gives rise to forms of anxiety. Illness results in the body's becoming conspicuous – the body attracts attention to itself, almost as if it had previously been, in a sense, absent or silent (cf. Leder 1990). Drew Leder, in *The Absent Body*, also speaks of a kind of disappearance or 'presence-absence': "Insofar as the body tends to disappear when functioning unproblematically, it often seizes our attention most strongly at times of dysfunction; we then experience the body as the very absence of a desired or ordinary state, and as a force that stands opposed to the self (ibid., p. 4)."

There are times when one perceives one's own body as being something alien. The present section offers insight into ways in which symptoms that have been personally experienced can be processed psychologically by being made visual through artistic means. In focusing on the act of drawing sensory disturbances caused by multiple sclerosis (MS), my aim is to convey the notion that externalizing disruptive and at times even painful bodily sensations by drawing them on a sheet of paper not only brings about a sense of relief, it also enables me to re-appropriate my alienated body through a process of artistic sublimation.

Physical sensations, in themselves invisible, do not readily lend themselves to representation; nevertheless, there are ways to make them visual. Transforming a physical sensation into a graphic line signifies – before, during and after the act of drawing –, a process of reflection while at the same time posing fundamental questions concerning the possibility/impossibility of visual representation. Both the resultant drawing and the drawing process generate experience and knowledge that influence the way in which one perceives one's own body as well as the sense of certainty that one might have with respect to one's body. Visual representations present a potential and constitute a resource in the sense that they make it possible for a person to experience symptoms in alternative ways. Being externalized images, they are susceptible to change and can serve as a basis for perceiving differently what one experiences physically and emotionally.

The investigation shows that the process of visually representing disruptive bodily sensations by artistic means can bring about a transformation in bodily perception, perception that becomes characterized by uncertainty and irritation. The attribution of symptoms to a diagnosed illness gives rise to ambivalent feelings: being able to name the illness provides a certain sense of certainty and, for that reason, possibly some relief; but at the same time, this knowledge triggers fears. Artistic, phenomenological investigation enables the afflicted person to find forms of expression that contribute to his or her being able to feel healthy in spite of the chronic illness. As a result of this process of sublimation, these experiences, which are at once physical and emotional, become manifest in the literal sense of the word. Literally taken into one's own hands, these transformed experiences counteract the feeling of helplessness.

Illness and Alienation

In more ways than one, the diagnosis of a serious chronic disease requires processing. In the year 2017, I was diagnosed with multiple sclerosis (MS). It is not uncommon for a diagnosis of MS to be preceded by a history of unexplained physical experiences, the causes of which can only be identified retrospectively. This is due to the fact that symptoms that occur during an MS relapse in the early phase of the illness often disappear after a period of time without having been treated, and everything appears to return to 'normal'. In addition, the symptoms and disorders associated with MS are extremely diverse and can resemble many symptoms and disorders caused by other illnesses. For a number of years, I was pursued by the feeling that something was wrong with my body; and I was relieved by the diagnosis in the sense that it enabled me to attribute to a cause the symptoms that I had been experiencing; it also reassured me that I had not just been imagining them. It is frequently the case that persons diagnosed with multiple sclerosis experience a similar sense of relief and reassurance, even though the diagnosis also comes as a destabilizing shock. No longer being able to feel things as I always have in the past exasperates the entire perception I have of my body. A strange kind of otherness that manifests itself in a number of ways, something unwelcome, makes itself felt in my body. I reject it, although I have no real power to do so, and, resorting to a would-be system of defense, I declare it foreign to my body, something alien (Fig. no. 1). What also contributes to this feeling of alienation is the fact that in the case of autoimmune disorders, a person's own cells turn against each other as they would against foreign cells. Although this is acquired knowledge and not something that I feel physically, it influences what I conceive – and perceive – as being my own body.



Fig. no. 1, Sensation of an alien tissue: Barbara Graf, *Drawing no. 205*, 2019, pencil on paper, 29.7 x 42 cm.

The impression the body gives of being alien is also due to the disconcerting nature of the sensory disturbances. These disturbances are linked to lesions in the central nervous system. During an MS relapse, nerve cells become inflamed and the myelin sheaths suffer damage. As a consequence, the affected nerve

cells are no longer able to transmit impulses in an unimpeded manner. The paresthesias that result are the subject of the autopathographic, artistic investigation that is of concern here. However, it is only during the initial phase of the process that the autopathographic aspect constitutes the focal point: the investigation soon extends significantly beyond exploration and the act of recording, that is, drawing, and fully unfolds in the process of restoring what one feels as being one's bodily integrity. One begins by endeavoring to grasp the peculiar nature of the symptoms and 're-presenting' them visually – a task that requires a subjective approach. The 're-presentations' that result from this process show something that the images produced by magnetic resonance imaging cannot show. Magnetic resonance images visualize – in the properly technical sense – the disease, but not the illness. They show the lesions that lead to the symptoms and thus constitute an important method of diagnosis. They make it possible to monitor the progress of the disease; but they reveal little about the quality of what the affected person actually experiences.

The sensory disturbances often have a 'textile' character and occasionally produce a sensation of foreign objects either inside or wrapped around the body, such as, for example, the illusion that coarse bandages have wrapped themselves tightly around one's ankles (Fig. no. 2), or when it is the torso that seems to be concerned, the feeling that one is wearing a constricting corsage. This latter phenomenon is commonly referred to as an 'MS hug'.



Fig. no. 2, Sensation of bandages: Barbara Graf, *Drawing no. 189*, 2019, pencil on paper, 29.7 x 42 cm.

Artistic Phenomenology or Drawing as a Physical/Emotional Act

In the case of chronic diseases, the advice that is frequently given is that the afflicted person should accept the disease. But how is acceptance to be understood here? How am I, for example, supposed to accept something that has already become a part of me? Finding ways to deal with the symptoms of an illness as opportunities to transform what one perceives, rather than simply putting up with them or, indeed,

accepting them, is an approach that very closely concerns itself with the actual experience one has of the illness, without, however, being an attempt to evaluate it.

My purpose in undertaking an artistic, phenomenological investigation is to delve into the symptoms that I experience, to form a conscious awareness of them, and to represent them by artistic means. Moreover, sensory perception of bodily sensations also allows the unconscious to reveal itself. The aim of the process of visual representation is to probe a phenomenon, without making a value judgment, in order to grasp as best one can the nature of one's bodily sensations, this awareness contributing in its turn to the understanding one has of one's body. Of course, this process of transformation does not cause the symptoms to disappear; they do, however, find themselves occupying a new position in the overall perception one has of one's body.

Describing a phenomenon by graphical means can never be an objective process, because the process itself is influenced not only by subjective experience but also by experience of an inter-subjective or cultural nature; for that reason, it cannot serve to reproduce pure physical sensations, all the more so that at the very moment a physical sensation becomes perception, various languages come into play to give structure to this thing being experienced. Here, the term 'languages' refers not only to verbal languages but also, for example, to visual languages; it refers to stored memories and, by the same token, to "the unconscious, which is structured like a language" (Lacan, 1980 (Orig. 1964), p. 213). During the act of drawing, the hand embodies the link between the emotional and the physical. The subject or the composition of a drawing can be described reasonably well in words. However, understanding the way in which the actual lines are drawn requires direct observation on the part of the person drawing them. To a significant extent, what the drawing expresses emerges from the specific textures perceived and from the movements of the drawer's hand across the sheet of paper as it produces the lines, and not from what can possibly be said in words about the drawing.

Sensory Disorders and Visual Embodiments

Depending on their intensity, bodily phenomena can be penetrating, burdensome or, when the sensations are subtle, merely irritating. If they are of a persistent or permanent nature, a relatively low degree of intensity suffices for them to be perceived as burdensome. Depicting something that, in itself, cannot be seen raises a basic question: What references or structures can one resort to in order to make a physical sensation visual and to get closer to it or in order to find a form of expression that relates to it by constituting a response to it? In general, how can something invisible and fundamentally subjective be represented visually? Sensory disorders have often been described in words by people who have experienced them. Visual representations, on the other hand, representations that relate to the specific nature of the sensations experienced, are not so common. The primary focus of the investigation undertaken here is not on emotionally expressing the suffering or the fears associated with the disease in question, but, rather, on exploring the ways in which the physical and the emotional are connected. In the case of illnesses other than MS, it is also conceivable to adopt approaches of an artistic, phenomenological nature as possible ways of giving formal expression to what the affected persons experience. Here, however, it is contextually relevant to stress the fact that it is the symptoms of multiple sclerosis that are my concern, because it is specifically as an artist that I have set out to investigate, reflect upon and represent in graphical form sensations that I experience personally. These sensory disturbances have specific characteristics, and although they are not experienced in the same way by everyone who is affected by the disease, they are nevertheless common symptoms. They have the character of illusions: in each case, the area of the body that seems to correspond to the sensations perceived is not in fact the area of the body where the cell damage has actually occurred. For the purposes of a phenomenological investigation, this circumstance may seem of little importance, as the primary concern is to understand not the causes but the exact nature of what one experiences. Nevertheless, it does play a role. This can clearly

be seen in the case of the so-called 'sock' feeling (Fig no.3), whereby the person has the impression that he or she is wearing a sock. The 'sock' in question is not a material sock; it is a form of paresthesia that immediately connects with the real past experience of wearing a sock. This sensation requires no external stimulus to occur, although it can seem convincingly real – so much so that the hand finds itself touching the affected area of the body as if to check whether or not a sock is really there.



Fig. no. 3, Sock sensation: Barbara Graf, *Drawing no. 193*, 2018, pencil on paper, 29.7 x 42 cm.

The sock is an illusion; the perception of one being there is not – the perception itself is real, or in German, *wahr*. (It is worth pointing out that the most common German word for 'perception' is *wahrnehmung*, which literally translates as 'taking as true.')

The foot that is wearing the illusory sock is perfectly healthy; the disturbance is triggered not by the peripheral nerves but by damaged nerves in the central nervous system. Even though this *wahrnehmung* is subjective, it is something that can be conveyed to others, since most people – at least most of those with whom I have come into contact in my life – know what it feels like to wear a sock. The situation is more problematic in the case of sensations for which no tactile objects are available for comparison as constituting stimuli.

Sensation and Perception

In what follows below, I would like to describe various attempts at visually representing the non-visual. All of them are based on close observation of sensations as they occur and on a process of mentally recreating these physical phenomena during the act of drawing. This introspective process is complex, as the transition from bodily sensation to conscious perception is something of a flowing nature that begins at the moment the sensation first emerges. Consequently, it is impossible to isolate a 'pure' physical sensation, because from the very moment of its emergence, the sensation begins to morph into reflective perception,

which is at the same time the beginning of the process of externalization. A vivid example of this would be my graphical rendering (Fig. no. 4) of the odd feeling that my hand is covered with or wrapped in layers of a membranous material.



Fig. no. 4, Glove sensation: Barbara Graf, *Drawing no. 218*, 2019, pencil on paper, 29.7 x 42 cm.

In my imagination, this physical sensation immediately becomes connected with the familiar feeling of wearing a glove. The act of reflecting on how this phenomenon can be represented visually, while focusing intensely on the nature of the sensory impression, already constitutes a significant part of the work of processing. By converting what has been perceived into something visual, the process itself produces meaning. The meaningful experience manifests itself not only in the resultant drawing but also – and to a considerable extent – during the actual process of drawing. A fundamental problem arises when one sets out to draw physical sensations: the very act of drawing alters perception, which is inseparably connected to sentience. This process is based on targeted observation of an extraordinary phenomenon that occurs within the body and not on a normal physical state. It is by its very nature a deviation, not only because the investigation deals with forms of paresthesia, but also because investigating bodily sensations that one personally experiences requires one to pay closer attention to one's body, a requirement that in itself constitutes a deviation from common, everyday experience.

I begin with a fundamental problem, namely, the fact that we consciously perceive, in effect, only what constitutes a deviation. With this principle operating, I produced a drawing (Fig. no. 5) that shows only disturbing or unusual bodily phenomena that I had perceived, the parts of my body not directly affected remaining implicit in the drawing. Furthermore, I made no attempt visually to respect proper bodily proportions, as this concern has little to do with the problem of sentience itself. Even when one endeavors to blot out the knowledge one has of the visual aspect of one's body, it is still possible to map one's perception of bodily sensations. It is possible to determine whether a sensation is located in the arms or

the feet, on the front side or the back side of the body, on the left or on the right, and so on. The zones in which specific sensations occur are represented as being larger than they are in the strictly anatomical sense. Areas of the body that are unaffected by the sensations are simply not represented. In the drawing, this leads to the emergence of a new body, one that brings the viewer closer to the sensations themselves while at the same time distancing itself from any visual resemblance it might have to the original.⁵

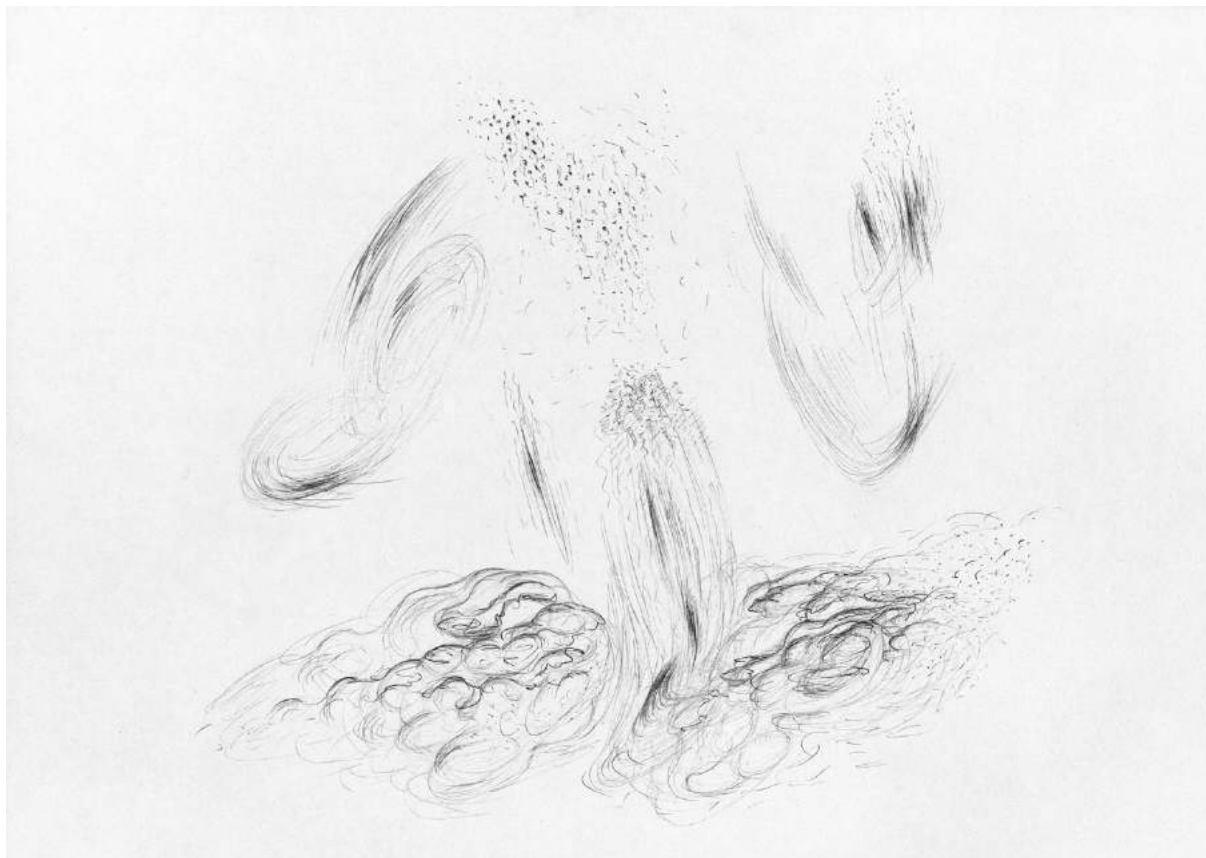


Fig. no. 5, The body as a mapping of sensory disorders: Barbara Graf, *Drawing no. 210*, 2019, pencil on paper, 29.7 x 42 cm.

A similar process of coming closer takes place in a drawing of sensations perceived in the feet (Fig. no. 6). Here, the pencil attempts to transfer to paper, almost in seismographic fashion, physical sensations such as prickling, buzzing, tugging or burning. Unless the surface of the body part in question is touched by the hand while the sensation is being perceived, the area concerned escapes clear delineation, and graphical contours marking the outlines of the feet are no longer needed – the visual structures spread out freely over the surface of the paper, even beyond what one presumes to be the outer limits of the affected body part. This reinforces the impression that the area perceived as corresponding to the physical sensation and the actual anatomical area affected by it do not completely overlap.

As I endeavor to reproduce these sensations as accurately as possible with my pencil, I find myself wondering what foreknowledge or empirical knowledge manages to make its way into what I am drawing, whether it be knowledge of the true visual aspect of my body or the experience of often having drawn feet, or the image I have of my own body, which Paul Schilder would have referred to as the *körperschema* (cf. Schilder 1923).

⁵ **Follow-up:** exercises making it possible to forget the visual appearance of the body.



Fig. no. 6, The feet as a mapping of sensory disorders: Barbara Graf, *Drawing no. 208*, 2019, pencil on paper, 29.7 x 42 cm.

My drawing of the ‘sock’ sensation (Fig. no. 7) is another attempt at visually representing a disconcerting physical sensation. Here, what my body experiences at the moment in question is clearly observed from an external vantage point. Indeed, it is impossible to observe one’s own feet from such a perspective, unless, that is, one resorts to an external medium, such as a mirror. In this respect, this drawing differs significantly from that of the ‘glove’ sensation (Fig. no. 4). In the latter case, my vantage point as person experiencing and drawing the physical sensation is the same as that of the person who will then look at the drawing. My right hand had just been holding the pencil; but in the drawing, it is shown touching this strange layer of material that seems to be wrapped around my hand, testing to see if it is indeed only a perceived sensation.

The drawing of a foot with membranous material wrapped around it (Fig. no. 7) shows my left foot – less affected by the paresthesia than my right foot – attempting to remove this thing draped around the other foot. Both this drawing and that of the ‘sock’ sensation go beyond representing physical sensations alone. Each of these representations also depicts a material object capable of giving rise to the sensation in question. These layers of textile material seem to wrap themselves around a part of my body; at the same time, however, they give the impression of fusing, at least in part, with my body.⁶ The gesture of palpating the body or that of attempting to remove something uncomfortable wrapped around a body part is not in itself a description of a physical sensation; it is, however, the expression of a desire, a need I feel to reassure myself that the perceived sensation is nothing but an illusion.

⁶ **Follow-up:** drawings of isolated body sensations and sensations that give the impression of having been ‘put aside’ – draperies, tissues, fibers that seem to have a life of their own.



Fig. no. 7, Sock sensation: Barbara Graf, *Drawing no. 194*, 2019, pencil on paper, 29.7 x 42 cm.

Another way of graphically representing these physical sensations is to focus specifically on their structures, leaving undefined the area of the body where they are perceived to occur. With the notion of pain scale serving as a reference, each sensation is represented micro-phenomenologically in the form of a five-field matrix (Figs. nos. 8, 9 and 10). The intensity of the sensation increases from left to right, the qualitative change also being a function of the quantitative change.

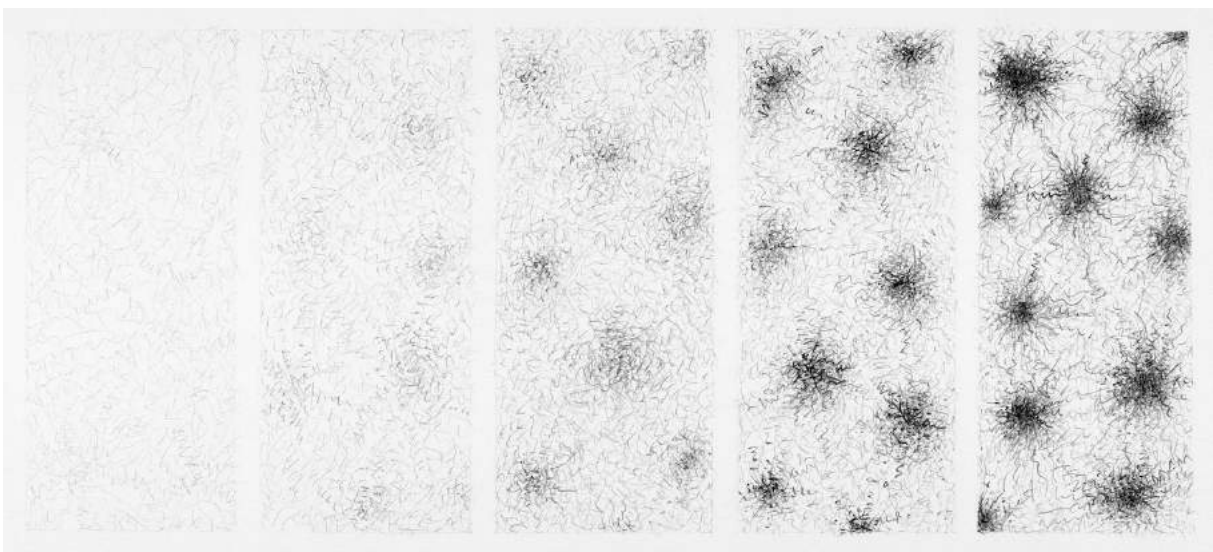


Fig. no. 8, Vibrating, stinging sensation evolving into a multitude of star-shaped loci of intense pain: Barbara Graf, *Drawing no. 231*, 2020, pencil on paper, 11.7 x 27 cm.

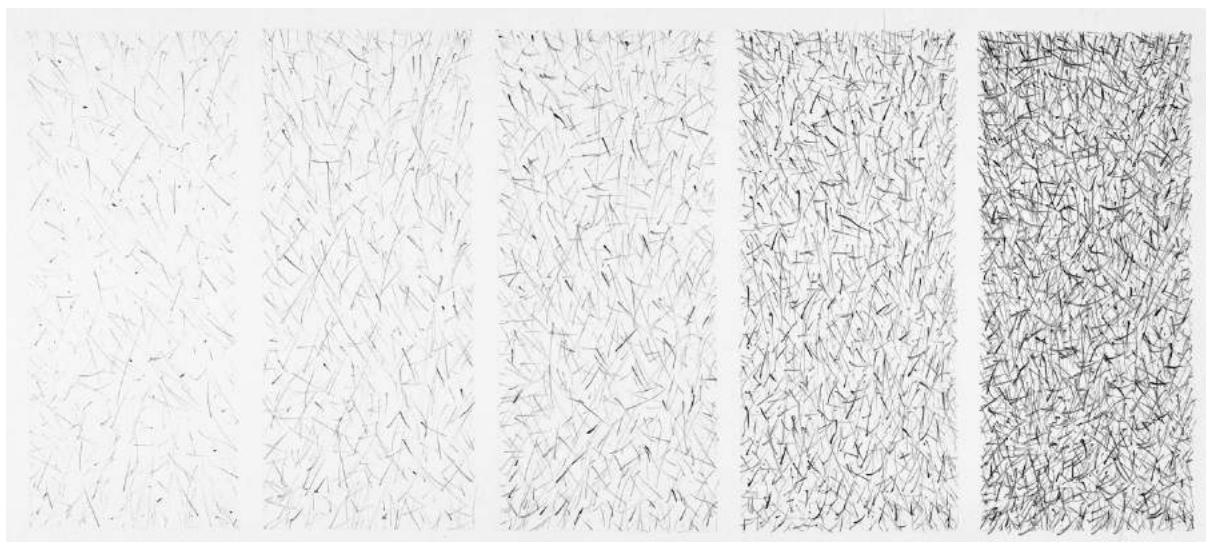


Fig. no. 9, Cutting, stabbing sensation evolving into a stable, regular texture with no particular area of concentration:
Barbara Graf, *Drawing no. 234*, 2020, pencil on paper, 11.7 x 27 cm.

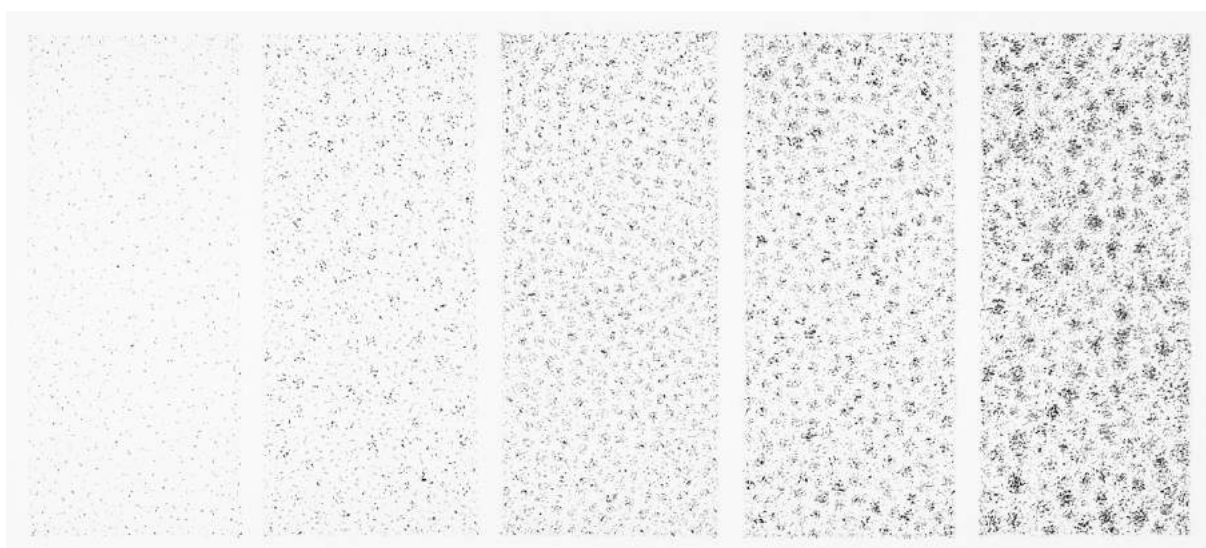


Fig. no. 10, Tiny dots corresponding to a prickling sensation, gradually coalescing into areas of intense pain:
Barbara Graf, *Drawing no. 223*, 2020, pencil on paper, 11.7 x 27 cm.

The first field in the five-field matrix⁷ represents the emergence of a very slight sensation that can just barely be perceived, the character of which cannot yet be clearly defined. The fifth field indicates intense sensation, the peculiar nature of which has not, however, been overshadowed by the pain itself. Should the intensity of the unpleasant sensation exceed the level corresponding to this fifth and last field in the matrix, that would mean that certain specific characteristics, such as the feeling of burning or pricking, have been lost or have become indistinguishable and have become nothing but pain.

⁷ **Follow-up:** expanding the matrix to include a larger number of fields, progressing from the inconspicuous body to intensity that obscures definition of quality.

Alienation and Appropriation

A truly odd phenomenon is the ‘foreign-object’ feeling. This is not simply a feeling that a part of the body has been alienated due to a physical sensation; it is rather a feeling that a foreign material has grafted itself onto the surface of the body or grown into the body.



Fig. no. 11, Sensation of a foreign tissue: Barbara Graf, *Drawing no. 190*, 2017, pencil on paper, 29.7 x 42 cm.

In figure number 11, the impression is one of a shapeless tissue having attached itself to the arch of my foot – a tissue that feels like something that is part of my body and at the same time foreign to it. If it only felt as if it was a foreign tissue, I would perceive it basically as such, that is, as some kind of material in contact with my body. It also feels, however, as if it is actually part of my body, and what is more, a part of my body that seems, when I touch it with my hand, to be only partially endowed with sensory qualities. As a result, I perceive it as something irritating between my hand and the foot that it is touching.

A feeling that is similar to the one I have just described, although slightly different from it, is that of strands of textile fiber having grown into the soles of my feet (Fig. no. 12). The impression in this case being more one of fibers than one of a living tissue, the feeling that I have is that something foreign has actually grown into the skin of my feet; I do not perceive it, as was the case in the previous example, primarily as an extension of my body; I perceive it rather as an ingrowth, something of a deeper and more intense nature. The feeling here is that of something that is at once more alien and more inseparably connected to my body than what I described in the previous example.⁸

⁸ **Follow-up:** isolating and drawing exclusively the places where foreign fibrous material seems to have intermeshed with my bodily tissue.



Fig. no. 12, Sensation of accumulated fibers: Barbara Graf, *Drawing no. 202*, 2019, pencil on paper, 29.7 x 42 cm.

When dealing with illusions, as is the case here, it is important to be able to find forms in which those illusions can be expressed, precisely because of their illusive nature. Artistic forms of expression can make it possible to acquire a sense of bodily certainty whereby the foreign ceases to alienate and illusions are treated as things that belong to reality. Artistic forms of expression do not necessarily require interpretation; they are the fruit of precise investigation and are characterized by their being external to the body.

In addition to the perception of a foreign tissue, a common symptom of sensory disorders is the feeling of expanded body volume. The feeling of having piles or bundles of textile material under one's feet when one walks, along with the feeling that these layers of material are part of one's body, is tantamount to a feeling that one's feet have become larger (Fig. no. 13). Even if these layers correspond to nothing more than a feeling, they nevertheless cause one to feel less sure of oneself when walking, because they disturb the sense one has of contact with the ground. I ask myself: Am I touching the ground beneath me when my real foot sets itself down on it? Or am I touching it when the larger foot of my imagination does so?⁹ Or have the ground beneath me and my foot fused with each other to become one?

⁹ **Follow-up:** exploration of the space in between; recording the distance between real touch and perceived touch.



Fig. no. 13, Sensation of largeness and layers of something underneath and inside the feet:
Barbara Graf, *Drawing no. 215*, 2019, pencil on paper, 29.7 x 42 cm.

Another phenomenon that gives rise to this sort of ambiguity is the feeling of numbness. As a physical sensation and as a form of perception, but also with respect to its visual representation, this phenomenon occupies a special position in the investigation. If a body part is not entirely deprived of the sensory faculty but only partially numb, a feeling arises that can be expressed in words in what seems to be a contradiction in terms: one feels one's numbness. It is the feeling of an absence that is not total, or of a presence that is limited. What does this mean, however, as far as visual representation is concerned? Do I represent the absence as a blank area in the drawing? This would mean using a dark shade of grey to indicate the surrounding space as being a kind of corporeality from which the foot emerges (Fig. no. 14). In that case, a medium shade of gray can be used to indicate areas of normal sensitivity and brighter or white areas to indicate partial numbness. In a reversal of this process, another possibility is to indicate the areas of limited sensitivity by means of structures of fine lines, as I have done in figure number 15. In this drawing, my idea is to represent absence by means of fine pencil marks, as if veiled areas and nebulous structures were reducing my sensitivity.



Fig. no. 14, Numbness as an absence: Barbara Graf, *Drawing no. 238*, 2021, pencil on paper, 29.7 x 42 cm.



Fig. no. 15, Numbness as a presence: Barbara Graf, *Drawing no. 239*, 2021, pencil on paper, 29.7 x 42 cm.

Introspection and Externalization

Delving into a bodily phenomenon in order to analyze it is an experience of a double nature in the sense that it implicates both one's capacity to perceive a physical sensation without consciously being aware of it and one's capacity to feel that same sensation after it has occurred but in full awareness of it. This process is at first one of introspection. Conscious, reflective perception takes place as a transitional phase between the occurrence of the phenomenon and its externalization. The act of recording it by graphical means and the actual trace left on the paper by the pencil transform it into an externalized materialization. Visually representing what one experiences during a chronic illness cannot make the illness disappear; it can, however, make it possible more fully to understand that experience. Being able to restore what one feels as one's bodily integrity, or intactness, depends on the intensity of the symptoms and on how disabling they are, but also on how the illness progresses and, of course, on the prognosis. Having already lived a few years with a stable illness and relatively few disabling effects, I have managed, repeatedly, to re-establish a feeling of bodily certainty by adopting artistic, phenomenological approaches to what I experience; adopting these approaches also contributes to my being able constantly to transform a sense of uncertainty into one of certainty.

Artistic Research and Psychological Processing

Artistic processes are forms of sublimation, as is the work of psychological processing. In both cases, similar processes come into play, because in both cases the objective is to bring about transformation through investigation and reflection, but also to effect change through artistic means. A drawing, which in fact consists of two drawings that I have combined into a single, ten-phase sequence (Fig. 16 and 17), shows an example of my 'looking' into a sensation. The metamorphic evolution of the sensation perceived begins with an almost seismographic recording of the phenomenon in the form of tiny dots. In the stages that follow, my eye gets closer and closer, penetrating deeply into what I perceive as being structures, as if I were observing them through a phenomenological microscope. When these structures have metamorphosed into fiber-like lines, I pinch them together between two fingers, then I release them; and as soon as I do so, they spread out freely over the surface of the paper as transformed structures¹⁰.

Employing artistic means to grapple with questions concerning the possibility/impossibility of visually representing physical sensations makes it possible both to acquire a better understanding of these phenomena and to communicate this increased awareness to others. Externalizing the picture one has of a bodily phenomenon offers the possibility of altering that picture both in the externalized image itself and by means of that externalized image. These processes present an artistic potential for giving concrete and perceptible form to the knowledge one has of one's body, that is, an artistic potential for 'embodying' that knowledge, while at the same time revealing new ways of visually representing bodily phenomena. They make it possible for images that have undergone transformation to have an impact on the way one experiences one's body, and in doing so, they put a variety of modes of perception at one's disposal.

¹⁰ **Follow-up:** drawing a sensation into which I enter vertically in order to emerge on the other side.

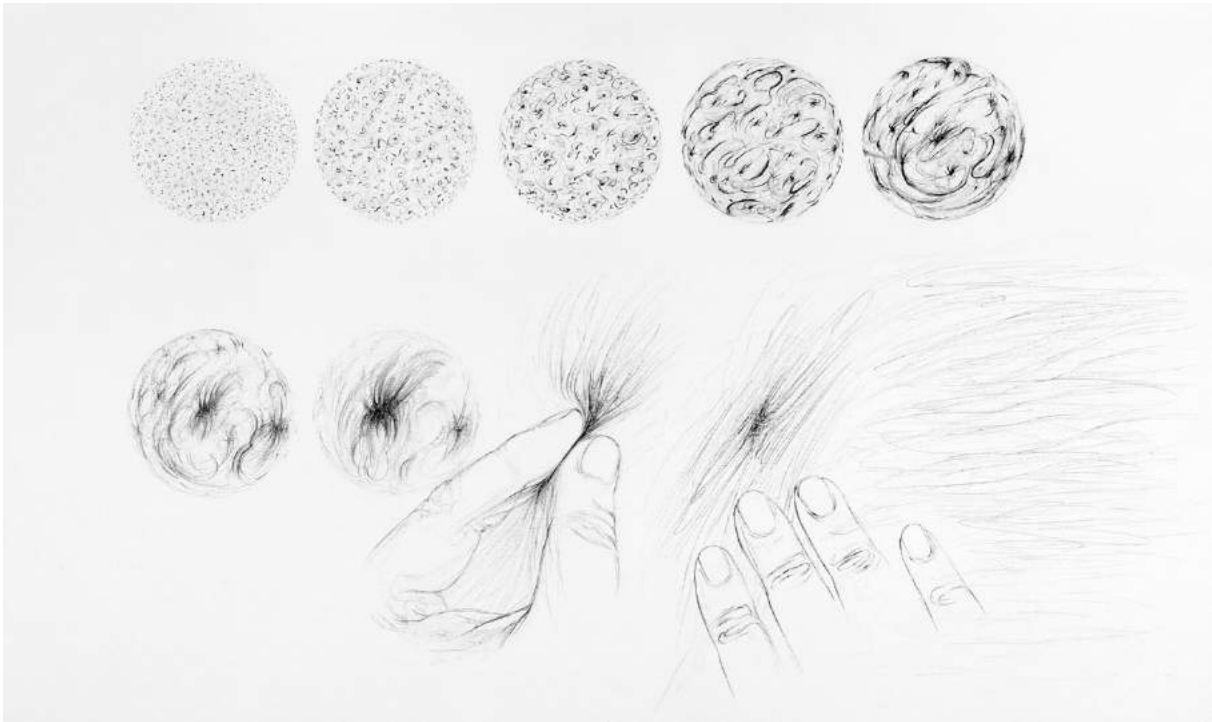


Fig. no. 16, Progressive evolution from a micro-phenomenological view to a feeling of structures of lines being released: Barbara Graf, *Drawings no. 237 and no. 245* (consisting of five images each, here all combined), 2021, pencil on paper, 25 x 42 cm.

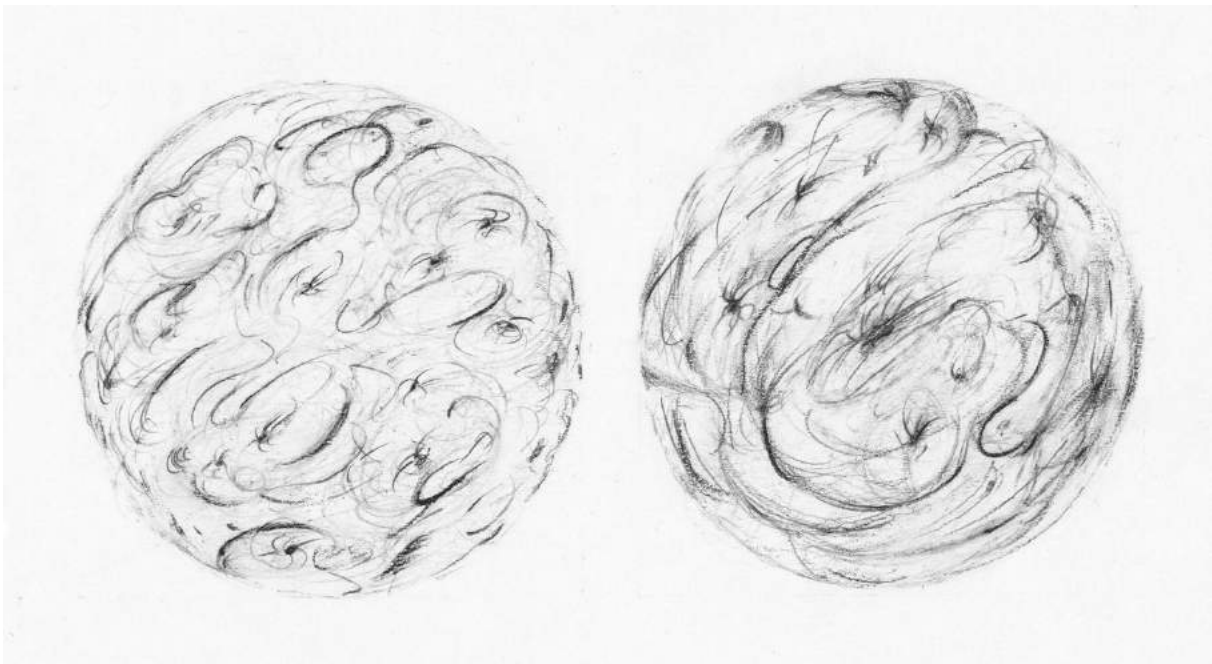
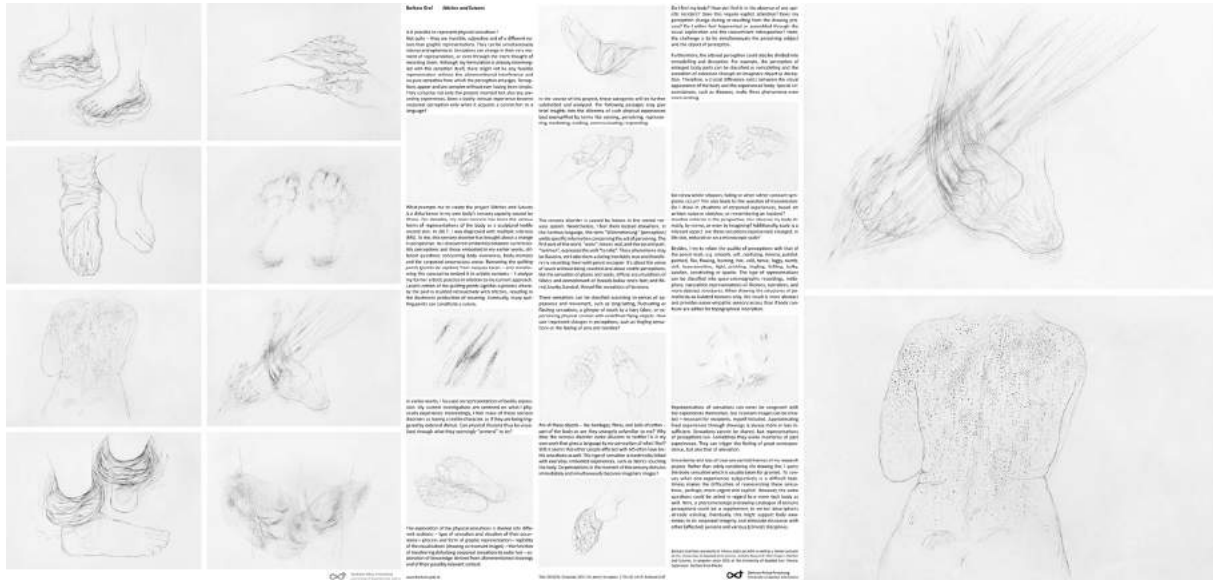


Fig no. 17, Observation of the sensation as if under a phenomenological microscope with gradual magnification scales: Barbara Graf, *Drawings no. 237* (detail, each circle 5 x 5 cm).

6 Envelopes

Envelopes is an open format established by the Zentrum Fokus Forschung for the purpose of accompanying candidates' ongoing PhD projects. In the following three envelopes, I document the development process of my project with very brief summaries and short excerpts.

6.1 Envelope #3: "Stitches and Sutures"

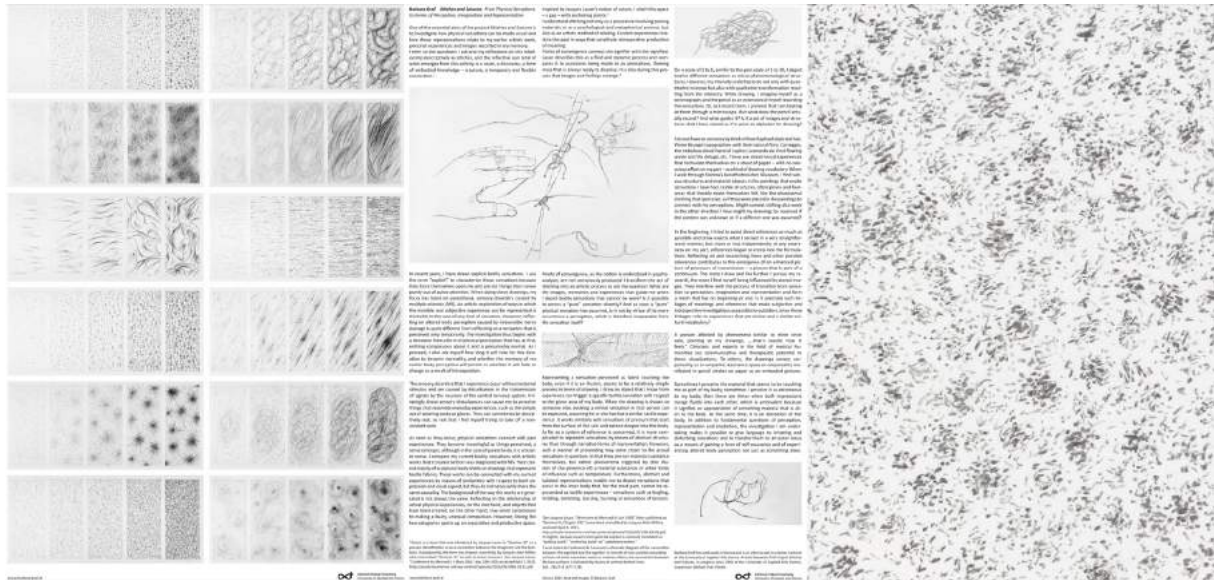


This article, which consists of text and images, deals with the difficulty of graphically representing physical sensations as well as with the question of assigning them to categories. It is subdivided according to type of sensation and the manner in which the sensations are in each case visually recorded. The article also poses fundamental questions about one's perception of one's own body and about how recording sensations changes how they are perceived.

“Do I feel my body? How do I feel it in the absence of any specific incident? Does this require explicit attention? Does my perception change during the drawing process or as a result of it? Do the visual exploration and the concomitant introspection cause me to feel either fragmented or assembled? Here, the challenge is to be simultaneously the perceiving subject and the object of perception” (Graf 2020, n.n.).

(see section 4.1.1)

6.2 *Envelope #4*: “Stitches and Sutures – From Physical Sensations to Forms of Perception, Imagination and Representation”



This format consisting of text and images focuses on drawings that represent physical sensations in forms that indicate scales of intensity, and also on the method of stitching and quilting inspired by Jacques Lacan's notion of stitching and quilting points. I understand stitching not only as a procedure involving sewing materials or as a psychological and metaphorical process, but also as an artistic method of relating.

“Current experiences relate to the past in ways that constitute retrospective production of meaning. Points of convergence connect the signifier with the signified. Lacan describes this as a fluid and dynamic process and compares it to punctures being made in an amorphous, flowing mass that is always ready to dissolve. It is also during this process that images and feelings emerge” (Graf 2021, n.n.). This contribution to *Envelope #4* is a reflection on the preconditions (such as available languages, memory, experiences) that are necessary in order for me to be able to make the invisible visual, and it offers a preview of how visual embodiments serve to mediate.

(see sections 4.1.2, 7.1 and 14)

Barbara Graf, “Stitches and Sutures: From Physical Sensations to Forms of Perception, Imagination and Representation,” in: *Envelope #4*, Alexander Damianisch, Margarete Jahrmann, Wera Hippenroither, Marianna Mondelos (eds.), Zentrum Fokus Forschung, University of Applied Arts Vienna, open access Research Catalogue: 2021, <https://www.researchcatalogue.net/view/1193650/1264769/0/0>, accessed 18 November 2023.

6.3 Envelope #5: “Stitches and Sutures: In Re/Search of Images”



Left and center: two pages of published images by Barbara Graf; on the right, earlier artistic work: Barbara Graf, *Drawing no. 174*, 2009. Photograph: *Cloth 3* and *Glove*, 2012.

“In Re/Search of Images” asks what the possible sources of visual representations of physical sensations can be. However, it also presents a summarized overview of the essential questions and responses posed by the project. Since lived experiences do not easily lend themselves to representation and have a way of evading visual representation, some kind of vehicle is needed here. The panel of images shows examples of earlier visual embodiments that possibly served as elements of a kind of alphabet for depicting later (that is, at the time of drawing, current) sensations; the panel also includes images taken from art history that may also have had their place in such an alphabet. A question that remains open is whether the details of the ‘found’ images were already guiding my graphic formulation without my being aware of it at the time, or whether it was only in my focused selection for the context at hand that they showed ‘similarity’. During the presentation, audience participants had the opportunity to attach additional images, which had been provided for the purpose, onto or on the outside of the panel or could cover ones that already existed in order to create their own embodiment interrelationships¹¹.

Playfully arranging and working with very different visual representations makes it possible to reflect on bodily perception in combination with the experience of tactile contact with various kinds of material. The similarity of the images as well as the differences between them – sometimes to the point of contradiction – open the project up beyond the context of personally experienced sensations and invite other narratives relating to imagined corporeality.

(see section 7.2)

Barbara Graf, “Stitches and Sutures: In Re/Search of Images,” in *Envelope #5*, Zentrum Fokus Forschung, University of Applied Arts Vienna: 2023, open access Research Catalogue, <https://www.researchcatalogue.net/view/2105060/2105041/0/0>, accessed 10 September 2023.

¹¹ **Follow-up:** an archival collection of individual images that can be used to create completely flexible arrangements according to various categories, such as image theme, type of representation, way of expressing the embodiment: something like a deck of image cards that can be shuffled and reshuffled.

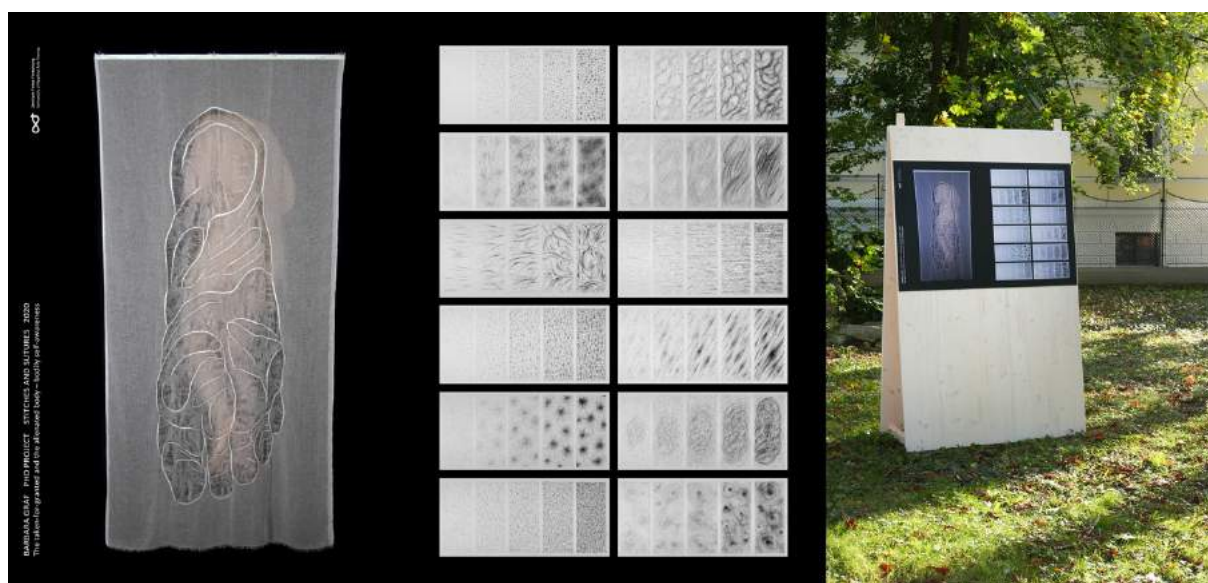
7 Research Weeks

7.1 Research Week

Zentrum Fokus Forschung, October 20–22, 2020; Rustenschacherallee 2-4, 1020 Vienna

For three consecutive years, I participated in the Research Weeks organized by the University of Applied Arts, a forum in which I presented my PhD project and, each year, the status of my research. On these occasions, researchers from the institutional environment of the university present questions and processes with which their research is concerned as well as preliminary outcomes in the form of a poster-format display, which is set up in the garden of the Zentrum Fokus Forschung with the aim of inviting discussion and exchange.

“The Taken-for-Granted and the Alienated Body — Bodily Self-Awareness”



In drawings and by means of a kind of micro-phenomenology (cf. Petitmengin 2019), I try to get as close as I can to physical sensations while at the same time distancing myself by recording them in graphic form. I present body sensations in five stages according to their intensity, taking the familiar pain scale as a reference. The drawings show that changes in intensity also cause changes to occur in the quality of a sensation or in the form that it appears to take on. The first field in each series shows the sensation at the moment it first subtly appears; the fifth shows it at a stage just before it becomes pain so intense that it obscures, as nothing but pain, my actual perception of the specific quality of the sensation in question.

Proceeding in an almost inverse manner, but still as an act of externalization, I begin with an extremely enlarged foot (corresponding approximately to my body height) made of medical gauze: by moving the threads of the fabric, I create the contours and the inner lines of the foot, thread for thread, without adding or removing anything. In what then amounts to a kind of over-identification with my alienated body part, I regain possession of my foot thanks to the fact that I have temporarily distanced myself by thus magnifying its scale, but also thanks to the fact that, as a result, my body can in this way come into close contact with the textile material – indeed, I also photograph myself interacting with the material. In this whole process, I transfer to textile material what I perceive in my bodily tissues. It is a process of transfer. At first taken away from the body, bodily tissue thus returns to the body as a textile membrane.

(see sections 4.1.2, 4.5 and 10)

7.2 Research Week

Zentrum Fokus Forschung, October 19–21, 2021 Rustenschacherallee 2-4, 1020 Vienna

“Stitches and Sutures: Textile Metaphors and Graphic Topologies as Methodological Artistic Tools”



Textile metaphors, tropes and idioms are used in everyday language but also play a role in the discourse of various disciplines of the humanities. Beyond the use of rhetorical figures, how can what in the Lacanian sense can be referred to as topological configurations in the form of diagrams and models for reflection be a support to my artistic project? What happens when, reversing the process of creating a metaphor, I materialize a textile metaphor that already exists? A textile embodiment of a metaphor can literally be taken into one’s hands. When manipulated – in the literal sense of the word – it transforms into a tool of reflection and can eventually lead to new questions or insights as a result of threads having been shifted.

The tableau on display included the following kinds of images: details taken from pictures exhibited in the Kunsthistorisches Museum Vienna (KHM); redrawn diagrams of concepts put forth by Jacques Lacan and Ferdinand de Saussure; textile modifications of these diagrams; my own recent drawings and earlier works; photographs of bio-membranes. These images, which differ considerably as to their origin, enter into a mutual dialogue by reason both of their similarity and of their dissimilarity.

(see sections 4.2, 6.3 and 8)

7.3 Research Week

Zentrum Fokus Forschung, October 18–20, 2022, Rustenschacherallee 2-4, 1020 Vienna

“Stitches and Sutures: Sensation Sampler – Phenomenological Archive of Body Sensations III”



In the first part of the project, my tool for recording body sensations was a pencil. In a later phase, I photographed bio-membranes, which to an extent visually simulate bodily sensations. In *Sensation Sampler*, it is now the material that I perceive as being in contact with my body that becomes the visual representation, literally the embodiment of the sensations in question. The ‘sampler’ format allows me to create a collection of lived experiences that are characterized by the sensation of fibrous material. In the history of embroidery, a sampler is a cloth in which examples of motifs have been embroidered. Some of these are executed in one type of stitch, for example, the cross-stitch; others present a variety of stitches. A common motif is the alphabet; sometimes numbers are featured as well. Samplers differ greatly in the ways in which the motifs are spatially organized. This ranges from a strict arrangement to an almost random placement of patterns. Most commonly, however, the stitch samples are arranged according to the structure of the fabric they produce. It is often the case that the overall composition is surrounded by an embroidered frame, which emphasizes the picture character of the cloth. A sampler is both a learning tool and a collection of motifs that can serve as a template. The *Sensation Sampler* is a textile tableau. It is divided into 18 fields incorporating various types of physical sensations. Embroidering experimentally on medical gauze, I use a variety of threads; I alter the character of the fabric and add wrinkled structures and formations of various textures and shapes. In the photographs, the textile material is in contact with the body. Different structures overlap, or the cloth has been folded – this makes it possible to show how even seemingly contradictory sensations can ‘encounter’ each other and how different sensations can be perceived simultaneously.

(see section 4.3)

8 Stitching as a Method

“Stitches and Sutures: Textile Metaphors and Graphic Topologies as Methodological Artistic Tools”



Cover, pages 32 and 33.

My contribution to the publication *reposition No. 1* addresses the question: How can textile metaphors serve as a methodological tool in the context of the artistic research project “Stitches and Sutures”? “Textile metaphors are often used in daily language, but they also play a role in the discourse of the various disciplines of the humanities. Inspired by Jacques Lacan’s ‘upholstery button’ (*point de capiton*) and by the notion of ‘suture’, I ask the question: How can rhetorical figures and graphic topologies serve as a methodological resource or stimulus for an artistic process?” (Graf 2023, p. 29). In order to visually represent bodily sensations, previous experiences and memories are essential as references. Since the Lacanian notion of suture retroactively connects the past to the present by a process described as sewing, this led me to the artistically challenging supposition that this Lacanian concept could support me in efforts to arrive at a deeper understanding of the visual language of the invisible.

“Diagrams and topologies consist essentially of lines and help us to grasp certain facts or notions or to visualize various parameters and their interrelationships; and they can embody complex thought structures. Even a slight alteration of a component can generate new content” (Graf 2023, *ibid.*). This raises the question whether it is possible to change perspectives on a given reality – which includes changes that can affect the future – precisely by manipulating these graphic abstractions, for example, by making ‘incorrect stitches’ in the graphic topology of a suture. In addition to providing a reflection on the relationship between textile crafts, textile metaphors and topology from a semiotic and psychoanalytic point of view, the text also gives an indication of how the title of the project is to be understood: “The *Suture* serves as a conceptual and methodological structure and the *Stitches* as a kind of tool” (Graf 2023, 36).

Barbara Graf, “Stitches and Sutures: Textile Metaphors and Graphic Topologies as Methodological Artistic Tools,” in: *Reposition No 1, Journal of reflective Positions in Art & Research*, Gerald Bast, Alexander Damianisch, Barbara Putz-Plecko (eds.), Zentrum Fokus Forschung, University of Applied Arts Vienna, p. 27-39 (peer-reviewed), open access and exposition in: Research Catalogue, 2023.

URL: <https://www.researchcatalogue.net/view/1840991/1840992>,

URL: <https://www.researchcatalogue.net/view/1852038/1852067>,

accessed 10 November 2023.

9 Catachresis: On the Problem of Perception and Graphic Representation

“The (In)conspicuous Body: Perceiving and Visually Representing Physical Sensations – a Visual Essay”



Cover image: Barbara Graf, *Cloth 8 (Skin-Wrinkles, Figure)*, 2014. Image page 43: Barbara Graf, *Skin Dress – Anatomical Garment I*, 1989.

The strange phenomena that I experience due to the illness are also known as paresthesia (from Greek *para-* ‘beside, beyond’ + *aisthēsis* ‘perception’). This prompted me to think about what figures of speech might be suitable for describing these phenomena. “Since metaphors, as rhetorical figures, do not seem to me to be appropriate figures of speech for characterizing ‘true illusions,’ I have come to consider, almost conclusively, that the notion of catachresis is more suitable. The term *catachresis* is often used to refer to an improper or overused metaphor, a semantic gap, or a poor imitation. Since a good number of the phenomena I have artistically investigated are not poor imitations of anything but, on the contrary, remarkably good imitations, perhaps the term *upended catachresis* is a more apt description of this dilemma, which consists of something being and at the same time not being” (Graf 2023, p. 18).

The essay also addresses the question of how the body articulates itself once it has become conspicuous. In the publication’s introduction, editors Kristen Ann Ehrenberger and Alys X. George write: “In order to privilege the patient’s voice, we open with Barbara Graf’s first-person art essay about her experience of paraesthesiae, anomalous physical sensations caused by a disruption of the nervous system. [...] Her searching practice brings to the fore a dilemma faced by patients and practitioners alike: how do we communicate, however inadequately, what we feel? The limits of the body in this case lead to a critical interrogation of the limits of representation, whether textual or visual. Yet the attempt to represent perception in the play between externalization and introspection, Graf asserts, has a potentially therapeutic effect, providing a measure of relief while also enabling her to ‘regain possession of the alienated body’ (23). Additional images from Graf’s wider body of work punctuate the subsequent contributions, interspersed throughout the remainder of the issue. They stand not only as invitations to draw connections between the varieties of embodied experience covered in the issue but also as opportunities to reflect on the convergence of medicine, bodies, and representation” (Ehrenberger/George 2023, p. 6f).

Barbara Graf, “The (In)conspicuous Body: Perceiving and Visually Representing Physical Sensations – a Visual Essay,” in: *Medical(ized) Bodies*, A Journal of Germanic Studies, Kristen Ann Ehrenberger, Alys X. George (eds.), University of Toronto Press: 2023, p.12-23 (peer-reviewed),

URL: <https://utpjournals.press/doi/10.3138/seminar.59.1.2>,

URL: <https://utpjournals.press/toc/seminar/59/1>

accessed 11 September 2023.

10 Coping and Well-Being

10.1 "Subjective Processing of Chronic Symptoms and Pain in People with Multiple Sclerosis: Visual Representation and Externalization as an Expression of Quality of Life"

Psychiatrie

Barbara Graf, Patrick Altmann*, Henriette Löffler-Stastka*

Die subjektive Verarbeitung chronischer Symptome und Schmerz bei Menschen mit Multipler Sklerose: Visualisierung und Externalisierung als Ausdruck der Lebensqualität

Einleitung

Lebensqualität ist ein zentraler Bestandteil der Krankheitsbewältigung und des Krankheitsbewältigungsprozesses. Die Krankheitsbewältigung ist ein Prozess, bei dem Betroffene mit ihrer Erkrankung umgehen und sie in ihr Leben integrieren. Dieser Prozess ist ein zentraler Bestandteil der Krankheitsbewältigung und des Krankheitsbewältigungsprozesses. Die Krankheitsbewältigung ist ein Prozess, bei dem Betroffene mit ihrer Erkrankung umgehen und sie in ihr Leben integrieren.

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Abb. 2 A Barbara Graf, Zeichnung Nr. 215, 2019, Bleistift auf Papier, 20,7 x 42 cm. Eingebildete mehrschichtige Schichten eines Gehirns, die eine tiefere Ebene darstellen.

Abb. 3 A Barbara Graf, Zeichnung Nr. 198, 2017, Bleistift auf Papier, 20,7 x 42 cm. Eingebildete mehrschichtige Schichten eines Gehirns, die eine tiefere Ebene darstellen.

Abb. 4 A Barbara Graf, Zeichnung Nr. 163, 2016, Bleistift auf Papier, 20,7 x 42 cm. Eingebildete mehrschichtige Schichten eines Gehirns, die eine tiefere Ebene darstellen.

Abb. 5 A Barbara Graf, Zeichnung Nr. 261, 2016, Bleistift auf Papier, 20,7 x 42 cm. Eingebildete mehrschichtige Schichten eines Gehirns, die eine tiefere Ebene darstellen.

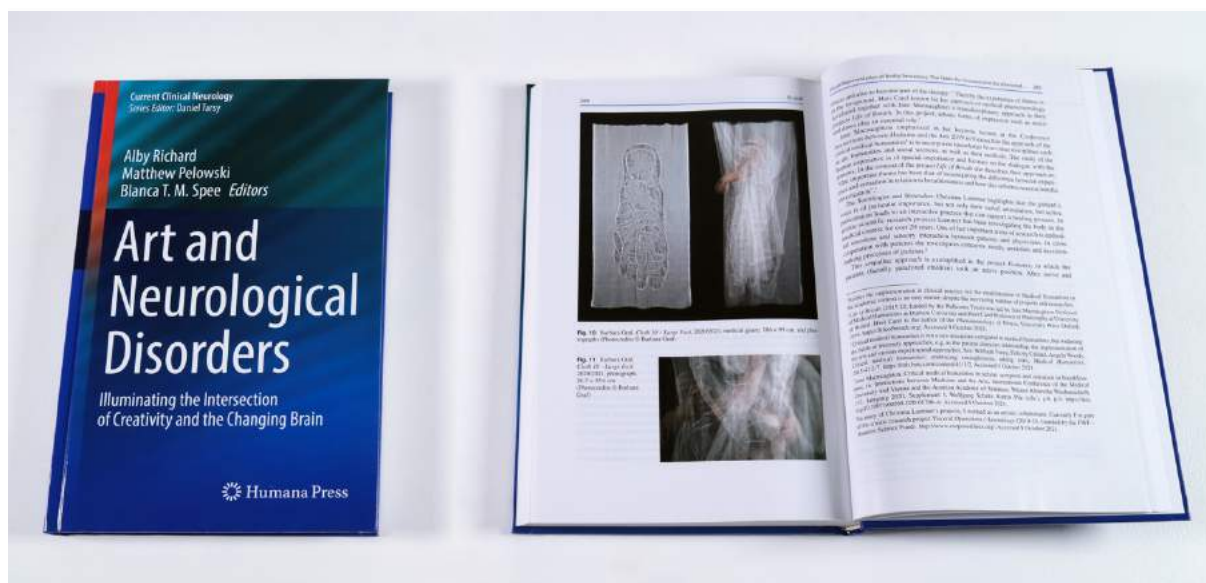
Three pages from the publication with images by Barbara Graf and a schema of outcomes reported by clinicians (CROs) and patients (PROs), adapted from: Cindy J. Nowinski, Deborah M. Miller, David Cella, "Evolution of patient-reported outcomes and their role in multiple sclerosis clinical trials," in *Neurotherapeutics*, 2017.

"Somatosensitive symptoms and pain are among those complaints of chronic diseases that – from a physician’s point of view – often elude objective assessment. Personal externalization processes can be of particular importance here" (Graf/Altmann/Löffler-Stastka 2022, n.n.).

This journal article was written from three different perspectives: neurological, psychotherapeutic and that of a patient’s report. The aim of the article is to show the interdependence of the disease and the experience of the illness. It points out the importance of complementary studies of clinician-reported outcomes (CROs) and patient-reported outcomes (PROs), the latter currently being given increasing importance in the clinical context. Furthermore, the contribution addresses the interplay between medical therapy for chronic diseases and coping strategies for chronic illnesses, all of which are essential for quality of life.

Barbara Graf, Patrick Altmann, Henriette Löffler-Stastka, "Die subjektive Verarbeitung chronischer Symptome und Schmerz bei Menschen mit Multipler Sklerose: Visualisierung und Externalisierung als Ausdruck der Lebensqualität," in: *psychopraxis. Neuropraxis: Zeitschrift für praktische Psychiatrie und Neurologie*, Springer Nature: 2022, p. 107-122, DOI: <https://doi.org/10.1007/s00739-022-00779-8>.

10.2 “Visual Representation of Bodily Sensations: The Taken-for-Granted and the Alienated Body – Bodily Self-Awareness”



Publication cover and pages 284 and 285: Barbara Graf, photographs, *Cloth 10 – Large Foot I*, 2020/2021.

“In this paper I try to give an insight into my artistic investigation of bodily sensations. Externalizing unpleasant physical sensations through artistic practice supports the processing of disturbed body sensations and also means relief. The artistic transfer of symptoms to an outer locus enables a better understanding of one’s own altered corporeality caused by the chronic illness of multiple sclerosis (MS). [...]

Giving a visual language to the phenomena of a chronic illness means a psychological processing and feeling whole again in an afflicted body. In addition, I touch on fundamental questions of possibilities of representation of the invisible and mediation of subjective experiences which can be of interest in the clinical context, but also between affected persons” (Graf 2023, excerpts from the abstract on the publisher’s website).

Barbara Graf, “Visual Representation of Bodily Sensations: The Taken-for-Granted and the Alienated Body: Bodily Self-Awareness,” in: Richard, A., Pelowski, M., Spee, B.T.M. (eds.), *Art and Neurological Disorders*, Current Clinical Neurology, Humana, Cham, Springer Nature Switzerland: 2023, p. 277–286,
DOI:https://doi.org/10.1007/978-3-031-14724-1_12.

11 Earlier Artistic Works in Relation to Current Explorations

11.1 “Corporeal Explorations: From Embodiments of Bodily Expressions to Visual Recordings of Physical Sensations”



The publication's pages 24 and 25 with images by Barbara Graf; cover, image by Barbara Graf: *Wrinkle Lines 4 – Bandage (Body Mapping)*, 2011.



Exhibition view, Dunedin School of Art Gallery: Barbara Graf, *Cloth 9*, 2014/2015; *Video Tissue*, 2016/2017, *Cloth 1*, 2011.

My contribution to the art and design publication *Scope* was based on work done during my residency at the Dunedin School of Art/Otago Polytechnic in New Zealand in the year 2019, activity that included a lecture, a workshop and an exhibition. The residency took place within the framework of a faculty exchange between the University of Applied Arts Vienna and the Otago Polytechnic as partner institutions.

In “Corporeal Explorations” I show how my artistic work has evolved from ‘anatomical’ textile body wrappings to representations of bodily perception. “Whereas earlier approaches mainly referred to the expressing body where the intuitive approach is relevant, in my recent works more specific questions have initiated new processes. These can be formulated briefly as interrogation of possible representations of experienced body sensations” (Graf 2020, p. 19).

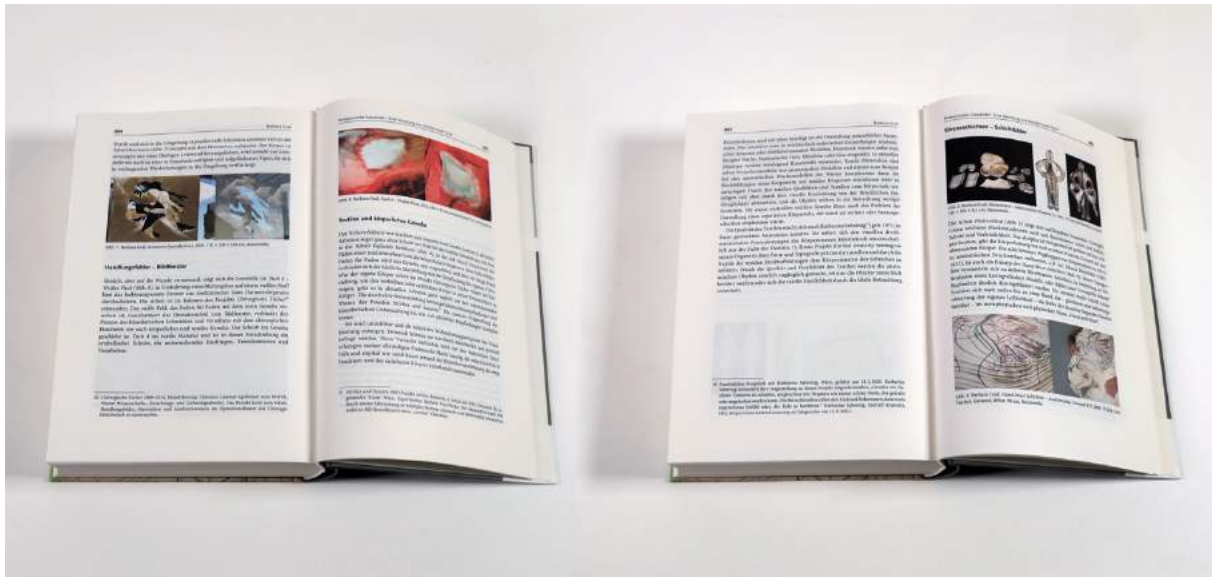
Barbara Graf, “Corporeal Explorations,” in: *Scope, art & design 20*, Contemporary Research Topics, published annually by Otago Polytechnic/Te Kura Matatini ki Otago, Dunedin, New Zealand, 2020, pp. 19–30 (peer-reviewed),

URL: https://www.thescope.org/assets/scopes/3_SCOPE_20_Graf.pdf,

URL: <https://www.thescope.org/journal/art-and-design/art-and-design-20>,

accessed 17 November 2023.

11.2 “Cutting, Taking Apart, Assembling – Anatomical Garments: A View from an Artistic Perspective”



Pages 804/805 and 802/803 of the publication: artwork by Barbara Graf.



Barbara Graf, *Cloth 4 – White Spot*, 2012, medical gauze, 186 x 93 cm.

“Images of the body have an impact on the perception we have of our own body and on the notion we form of its inner structures. Medical imaging methods that have evolved since the development of x-ray technology make it possible to represent the inner body without having to cut into it. In the visual arts, the second half of the 20th century saw the emergence of approaches characterized by an intense physicality. The body is no longer merely a depicted motif; it becomes the canvas itself, an event; the act of experiencing the body becomes the focus. In this paper I attempt to reflect on my own artistic work in the context of representations of the body and methods used in medicine and in art, to identify influences, to point out connections and differences and to investigate the use of drawing and cutting as tools for dissection, analysis and reflection” (Graf 2022, p. 793).

By comparing and analyzing various artistic approaches to body art in Austria – especially that of Maria Lassnig, of whom I was a pupil – I reflect on my own artistic position in this respect and on the body discourse that has shaped me.

Barbara Graf, “Schneiden, Zerlegen, Zusammenfügen – Anatomische Gewänder: Eine Verortung aus künstlerischer Sicht,” in: *Sammelband 6: Medizin in Wien nach 1945 – Strukturen, Aushandlungsprozesse, Reflexionen*, Birgit Nemeč, Hans-Georg Hofer, Felicitas Seebacher, Wolfgang Schütz (eds.), Vienna University Press V & R Unipress, 2022, pp. 793–807 (peer-reviewed),

DOI: <https://www.vr-elibrary.de/doi/pdf/10.14220/9783737013932.793>.

12 Artistic Research, Medicine and the Arts

12.1 “Arts and Medicine: On the Potentials of Transdisciplinary Encounters”

Lecture and published conference paper by Barbara Putz-Plecko and Barbara Graf

“Interactions between Medicine and the Arts,” International Conference of the Medical University of Vienna and the Austrian Academy of Sciences (Commission for History and Philosophy of Sciences), held in Vienna on 11 and 12 October 2019, Medical University of Vienna, Vienna General Hospital.



Publication page 13, artwork: Barbara Graf. Image on the right: Barbara Graf, *Cloth 5*, 2013.

“There are many points of contact and intersection between medicine and art, many points of departure for fruitful cooperation that can be enlightening for both fields of endeavor. Part one (I) of this contribution will briefly outline various aspects of this interrelationship, with particular emphasis on:

- the role played by creative processes, aesthetic practices, and aesthetic objects, in an effort to find a reorientation and ways to cope with suffering and daily life;
- art in its function as a ‘transitory body’;
- forms of cross-disciplinary cooperation, as well as the relevance and potential of this boundary-opening joint exploration of approaches to problems and questions related to research.

Part two (II) will present the research project ‘Stitches and Sutures,’ which deals with representing the perception of the body. The author of the project asks herself how subjective sensations can be made visible and artistically explores her own sensory disturbances caused by multiple sclerosis” (Graf/Putz-Plecko 2020, p. 11).

Barbara Putz-Plecko, Barbara Graf, “Arts and medicine: on the potentials of transdisciplinary encounters,” in: *Interactions between Medicine and the Arts*, Wiener Klinische Wochenschrift 132, Wolfgang Schütz (ed.), Springer, 2020, pp. 11–16
 DOI: <https://link.springer.com/article/10.1007/s00508-020-01706-w>,
 DOI: <https://doi.org/10.1007/s00508-020-01706-w>.

12.2 “Threads of Life – Textiles in Medicine and the Arts”: Exhibition and Symposium, 2023



Left: exhibition documentation booklet, cover image by Barbara Graf. Right: exhibition view – Barbara Graf, *Wrinkle Lines 8 – Foot Bandage 1 (Mapping)*, 2016–2018; historical objects from the Josephinum collection “Ethics, Collections and History of Medicine” of the Medical University of Vienna and from the Pathological-Anatomical Collection in the ‘Narrenturm’ of the Natural History Museum Vienna.

In a working group of the Austrian Academy of Sciences, representatives of various scholarly and artistic fields came together to engage in a discussion process centering on the potentials of Medical/Health Humanities with the purpose of probing this kind of interaction in greater depth and, taking the example of textiles in art and medicine, to interlink a diversity of perspectives in the form of an exhibition and a symposium.

Although textiles have been indispensable to medicine since time immemorial, their role in this context has so far been understudied. Whether it be surgical thread, wound dressings, wipes, pads and protective clothing or hospital beds, the practices of healing are unimaginable without them. The relationship between textiles in the arts, on the one hand, and well-being and health, on the other, is, however, much broader. It includes, but is not restricted to, the use of such techniques as knitting, crocheting, weaving and braiding in the development of cardiovascular grafts or surgical meshes. Practitioners of the visual arts and persons engaged in artistic research reflect on this complicated relationship in a number of ways. Fabrics are used in the arts to evoke the vulnerability of the human body and its progressive decay as well as imminent death, but also to highlight the complexity of interhuman relationships. In their work, artists draw attention to notions of (self-)care, understanding the human anatomy, perception of corporeality (including one’s own) and to ways in which textiles can become embodiments in an existential sense. ‘Threads of Life,’ beyond being a metaphor, is also a reference to suturing, a practice that connects the craft of surgery with that of tailoring. The exhibition spotlighted the multifaceted relationships between textiles, medicine and the arts. It brought historical objects and contemporary artistic approaches and viewpoints into a dialogue that was both provocative and productive (cf. curatorial team 2023, p. 5).

I contributed to the exhibition, symposium and exhibition booklet as a curator and organizer and also as a participating artist. The exhibition was organized thematically into groups and included contemporary visual art as well as historical objects from collections such as the Josephinum collection “Ethics, Collections and History of Medicine” of the Medical University of Vienna, the “Pathological-Anatomical Collection” in the ‘Narrenturm’ of the Natural History Museum Vienna and the “Collection Fashion and Textiles” of the University of Applied Arts Vienna.



Exhibition view: Barbara Graf, “Phenomenological Archive of Body Sensations I”, 2017-2022, *Cloth 10 – Foot*, 2020/2021. *Cloth 7 – Suture*, 2014, image top right (video): “Single Button and Donati Suture” – educational film produced by Sascha Bubner and Christian Schineis, University Medical Center Göttingen, University of Göttingen, 2013.



Left: invitation – AIL exhibition. Right: exhibition view – display case containing surgical instruments and suture materials, such as catgut, sterilized female hair and silk as well as a silk winding machine, on loan from the Josephinum collection “Ethics, Collections and History of Medicine” of the Medical University of Vienna.

Curators: Monika Ankele (Medical University of Vienna), Barbara Graf (University of Applied Arts Vienna), Katrin Pilz (Ludwig Boltzmann Institute for Digital History, Vienna), Monika Pietrzak-Franger (University of Vienna), Barbara Putz-Plecko (University of Applied Arts Vienna), Katharina Sabernig (University of Applied Arts Vienna), Georg Vasold (University of Vienna).

Exhibition architecture: finnworks (Gerhard Fillei, Samuel Fillei, Nandini Fribék, Lukas Krenn, Joachim Krenn).

Symposium: 20 June 2023. Event and organization: ÖAW (Austrian Academy of Sciences), Commission for History and Philosophy of Sciences and Humanities, Working Group History of Medicine and Medical/Health Humanities.

AIL – Angewandte Interdisciplinary Lab, Otto Wagner-Postsparkasse Vienna.

13 Lectures, Conferences and Other Activities

Medicine and Medical/Health Humanities

I am an honorary member of the working group “History of Medicine and Medical/Health Humanities” of the Commission for History and Philosophy of Sciences of the Austrian Academy of Sciences (ÖAW). My contact to this interest group was established as a result of a lecture that Barbara Putz-Plecko and I gave in 2019 at the international conference of the Medical University of Vienna and the Austrian Academy of Sciences entitled *Interactions between Medicine and the Arts*. The conference was the fruit of an initiative taken by Felicitas Seebacher.

URL: <https://www.oeaw.ac.at/kgpw/arbeitsgruppen/geschichte-der-medizin-und-medical-health-humanities>
accessed 29 October 2023.

(see sections 11.2 and 12)

“Medical Humanities” Ring Lecture Series: “Illness – Illness Experience”

In the summer semesters of 2022 and 2023, I contributed to the pilot project “Medical Humanities” in the framework of the Ring Lecture Series as a speaker in the Department of Psychoanalysis and Psychotherapy of the Medical University of Vienna, addressing the topic *Krankheit – Krankheitserleben*, the concept for the talk having been put forth by Henriette Löffler-Stastka and Ulrike Salzer-Muhar.

For each date in the lecture schedule, two speakers and a moderator were invited to present and discuss a topic from the perspective of their respective disciplines. The focus of the lecture series is on the interaction between medicine, art, culture and history, the aim being to encourage students, in an interdisciplinary setting, to understand medicine beyond its purely scientific dimensions.

Lectures: 29 March 2022 and 21 March 2023, under the title: “Multiple Sklerose in Bildern” (Multiple Sclerosis in Images), Patrick Altmann (Department of Neurology, Medical University of Vienna) and Barbara Graf (Department of Textiles, University of Applied Arts Vienna).

Website: *Atlas der guten Lehre*:

URL: https://gutelehre.at/projekt?tx_gutelehre_default%5Baction%5D=show&tx_gutelehre_default%5Bcontroller%5D=Projekt&tx_gutelehre_default%5Bproject%5D=1658&cHash=f521e57ac1d0cbeb098080149174b423
accessed 29 October 2023.

(see section 10.1)

Lecture (online): Barbara Graf, “Body Extensions: On Corporeal Topographies,”

Gerrit Rietveld Academie Amsterdam, Department of Jewellery – Linking Bodies, 26 April 2021. The invitation was extended by Sonja Bäumel (department head). The lecture was followed by a meeting with students for the purpose of reflecting on their individual projects.

URL: <https://www.jewellerydepartment.nl/monday-evening-online-lecture-with-barbara-graf%e2%80%a8/>
accessed 29 October 2023.

Member of IMHAR: Institute for Medical & Health Humanities and Artistic Research.

Lecture delivered on the occasion of the first IMHAR ‘salon’ (online), 10 June 2022: presentation of artistic research projects and the PhD project “Stitches and Sutures.”

URL: <https://www.imhar.net/aktuelles/archiv-der-veranstaltungen/>
accessed 16 September 2023.

Conference of the Association for Anthropology and Medicine, “Visual Expressions of Health, Illness and Healing,” 34th Annual Conference of the Association for Anthropology and Medicine (AGEM) in Cooperation with the Austrian Ethnomedical Society and the Weltmuseum Wien, 2–4 June 2022, Vienna.

Lecture: Barbara Graf, “Visual Representations of Bodily Sensations and Their Individual and Cultural Conditionality – A Visual Phenomenology.”

An essay based on the conference presentation will be published (expected 2024) in *Curare: Journal of Medical Anthropology*,

URL: <https://agem.de/en/veranstaltungen/agem-annual-conference-34/>,
accessed 16 September 2023.

Exhibition: “Art / Action / Attitude: Schmerzen – Pain”



Exhibition view, poster: “Archive of Physical Sensations”: Barbara Graf

Contribution to the exhibition “Art / Action / Attitude: Schmerzen – Pain,” lecture hall, Medical University of Vienna, MedUni Campus, University Hospital Vienna, 8th floor, November 2022 – June 2023,
Project board: Eva K. Masel, Andrea Praschinger, Ruth Kutalek, Ruth Koblizek.

The fourth in the “Medical Comics/Graphic Medicine” exhibition series was devoted to pain. The participants showed different approaches to the experience of pain mediated through ‘Graphic Medicine’. The visual articulations facilitate the understanding of the experience of pain as well as how to cope with it. The exhibition was addressed to patients, students and other persons from the clinical field, but also to the general public.

<https://teachingcenter.meduniwien.ac.at/lehre-und-projekte/medical-comics-ausstellung/die-ausstellungen/workshops-2020-2023/schmerzen/pain-2023/>
accessed 16 September 2023.

14 Resonating Voices

The text below is an attempt to weave into a polyphonic textual fabric the reactions that various individuals have had to the *Phenomenological Archive of Body Sensations* that I have collected over the years. These reactions include feedback in the form of resonance and response, evocations, reflections, future perspectives, expectations, associations, questions, as well as reactions indicating affective or intuitive approaches. The feedback comes from a variety of contexts: resonance from colleagues who are PhD candidates, discussions in the context of lectures or talks, personal conversations and comments from individuals whose responses I received in written form. Some of the more than forty voices appear several times in the textual fabric, according to the thematic structure of the fabric. To the extent possible, passages from texts that I received, some of which were written in English by non-native speakers of English, many others written in German and then translated into English by me, have been reproduced here verbatim, sometimes slightly summarized; selected parts have been reassembled and edited for coherency, care always being taken, however, to retain as much of the meaning and original wording as possible. With the exception of question marks, I do not use end punctuation; to a large extent, I avoid capitalization. Each resonant response has been marked with a red number; all of these numbers – from 1 to 43 – reappear in numerical order at the end of the text in a list that indicates the discipline(s) with which each responder is associated, the asterisks (*) indicating individuals afflicted with multiple sclerosis (MS). In order to express my appreciation for the generous feedback while at the same time maintaining a degree of anonymity, I have listed all the responders together by name in the acknowledgements. Instead of using quotation marks in the running text, I have marked the individual sections by means of long strings of quotation marks, as if they formed special weft threads in the textual fabric.

·· sea anemones on the skin · growths of wadding · entangled, wounded hem · dark air to the point where it suddenly stings · the mycelium forms fruit-like bodies like medusa heads · mould fungus nests · foreign bodies · unfortunately no longer separable¹ · back to the sea, a thought that crosses my mind as my gaze glides over the textile embroidered works · the objects appear to me like sea creatures washed up on the beach, like jellyfish emerging from delicate foam · cells, conglomerates of cells, arise from a regular structure, sometimes forming growths, sometimes floral shapes · blown contours · then the hand comes to the fore, creates order, presents, sorts, creates coherence where a roaming echo translates itself from material to material, carries itself away · it shines through throughout, it separates by joining layers that appear as uncanny doubles²¹ · incorporation, weaving or interlacing · microscopic sections · cell formations · micro-tangles³⁴ densification · swirling · intensification · blurring · clarification²¹ · too much next to too little information · uncertain localization · blurred movement · whirlwind in coordinative orientation¹⁵

·· the artist creates contagious art · her attempt to bring her often dissonant, inner voices to speak through her artistic work creates paradoxical reactions in me · I feel torn back and forth between the delicacy and beauty of the drawings, fabrics and stories, and at the same time her work repels me · exactly this constant oscillation between fascination and disgust, mixed with a strong concern about whether she is too hard on herself, occupies my thoughts when I reflect on her oeuvre · disturbing in a (not always) positive sense²⁷ · you mentioned the changes in bodily sensations through drawing · almost restraining or fencing in unpleasant sensations through drawing · I had the impression that drawing also enables one to regain a kind of autonomy over one's own body³⁸ · I was looking and thinking about your drawings, which externalize the utmost of subjective experience · mysterious to me · as images, your drawings have their own didacticism, their own power to engage, their autonomy too · conspicuous is the trace of your hand, obvious to me is your control and decisiveness, as well as the snaky sensuous delight of your line · and so I get closer for more wonderment · fine observation

with acute feeling · here it is less a matter of trying to comprehend your physical dilemma than of responding to the visual conundrum of the drawing · allowing the sensual to lead me to imagine the plenitude of suggestions, which may be – will always be – more than your intent · this is where inevitably the poetry happens · what I recognize has to do with my own differing experiences in my body · but your experience is never mine, and trying to comprehend is only an exercise in approximation: bleakly, I think there is no understanding but only the inevitability of things · I pull back and observe the objectivity you attain while focused, while thinking · your intense drawing is that record of intense thought processes and feeling and looking · it defies gravity and allows me space to wonder⁴⁰

·· a direct transmission from your foot to mine · when I see (I believe), I feel it too · a shareable body of evidence · re-constitute through drawing² · even if you are looking for adequate forms, processes, images for specific sensations · I can always find and remember or perceive something similar in or with my body and only this is the basis of the perception of a dissimilarity³ · feelings like not feeling · like shivering without cold · the toes touching a bottomless void · some numbness, confusion · the confused hand and the found foot · lost foot that is found · again and again⁴ · even if I don't experience MS, there are some images that remind me of similar feelings I experience on my legs when I'm stressed or something is not right · they are somehow paradoxical · very calm and at the same time intense and hurtful⁵

·· unlike the medical perspective, the drawings add something about the narrative of MS that might best be described as self-efficacy⁶ · the aspects of externalization are very well achieved · what conditions are needed for the recipients to enter into a dialogical process? · which relationship and atmosphere?⁷ · exemplary for a process of externalizing sensory symptoms in people with MS such as tingling sensations, pain or any other sort of altered sensation · it demonstrates how art can transcend physical symptoms to an observer's eye⁸ · the problem of description is, after all, that there are no corresponding words, which is why comparisons and metaphors become the only verbal means of communication · it makes sense to me from the perspective that the elements are (preferentially) chosen precisely from the tactile, textile semantic field · furthermore, the question is whether the textile – real or misperceived – becomes part of the body · according to my sensation, this is not necessarily the case · the tingling and partly numb areas I feel as part of my body · where the sensory system is not functioning properly, it feels as if that part of the body is wrapped in absorbent cotton · this is not a part of me, but the dull and padding sensation is · I've also had sensations where there is virtually a false textile material over the body part · I always try to wipe it away then, but of course that doesn't work · or for a while I felt like I was wearing a backpack, right down there on the back where it normally lies¹¹

·· the invisible defects in your body, consequences of a destructive process that interrupts, unravels, sets wounds that sometimes express themselves as sensory irritation and become tangible · a work (*arbeit*) that is also coping (*er-arbeiten*) · you denote with the methods and media of the artist, these painful, destructive cuts, which tend to diverge, make them visible, illustrate them, form them into visual words · you stitch, you link, you put together · you connect, you create connections, new connections · precisely, surgically, and yet tenderly, compassionately, lovingly · eros at work · and you give the experience of sensory irritation its own emotional pictorial space · the body recognizes itself in the image²⁶ · in surgical terms, the suture is evidence of an artificial joining, stitching together of an injured part of the body that was not originally traumatized · the suture thus represents a fabrication

· as a scar, it remains a visible expression of this past repair process · on the other hand, surgical suturing also means tissue injury, traumatization through the insertion of the needle into the tissue and the passing of the thread through these small tissue openings · suturing and stitching thus stand for traumatization and attempts to repair it through, again, small traumas, whereby the result is by no means always able to restore the original state³⁴

·· I was impressed by the close reading of the textile metaphors · it is saturated with experience in several ways, and theoretically on the mark · your method of procedure would probably have been appreciated by Lacan · on the contrary, the Lacanian interpretation machine of philological accuracy is boring · your artistic method combines drawing, photography, writing, the fruits of reading and the experience of illness, suffering, association and beauty in a way that the reader is free enough – aesthetically comforted – to continue working with it, while at the same time being affected³⁵ · the suture consists of connected punctures, which the artist links in her reading of Lacan to the process of remembering · the previously woven is interwoven with the now placed stitches, a new linkage is created · this contact with the past can take place in one and the same position, and yet will always be a different place, a different space · dissimilarity of the same³⁹ · afterwardsness (*nachträglichkeit*): as if your body was ahead of its time, ahead (*vor-gestellt*) of itself, or vice versa, as if your body put itself behind (*hinter-her-gestellt*)² · to what extent can sensations become experiences at all? · in the sense that something can not only be remembered or traced, but that something, whatever, can be derived from it · in other words: where/how can you cheat or undermine the afterwardsness?³

·· I describe things to the neurologist in great detail, and I don't have the vocabulary, so I use comparisons, like..., as if... · I would have no problem pointing to some of the drawings and saying: that's exactly how it feels! · I could imagine that, for example, a catalog of illustrated sensory perceptions would be helpful in everyday clinical practice, especially if, in a sense, an empathic perception is triggered in the physicians who look at them · this is perhaps also helpful in other illness episodes, where the perception becomes vague or alien¹¹ · yes, that's exactly what it feels like, that's exactly what it should look like!¹² · I would like to show the drawings to my partner so that he can see how it feels¹³ · the drawing where it looks like you are taking off a glove or trying to, makes the difference between 'normal' and 'impaired' so clear, and that powerless, in-cotton-wool and dull feeling is perfectly captured · the drawings with the increasing intensities describe a confusion-day quite well · on such a day, it goes from nothing to thousands with the feeling that something is exploding or broken · that gives me a bit of a feeling of resignation or being powerless, because these are symptoms that come and go as they please¹⁴ · the intensifying shades or stages leave me shuddering, the intricate illustrations of body parts sensing their environment, sensing and probably fearing touch, transport me into an alternative state of being · I shiver from the pain that these images manage to convey · they hurt · they demand attention · they are explicit yet vague · I lingered there, I stayed with the images · let them pervade me, my skin and my thoughts · they are, quite literally, deeply touching¹⁶

·· the drawings enable even a healthy person to understand the sensory disorders vividly · for a moment, I changed perspectives from that of a medical student to that of a patient⁹ · visual representations as an externalization of pain might be an effective means of defining an intercultural language of pain to minimize language barriers¹⁰ · your drawings are absolutely incredible for evoking a sympathetic sensation in me · I showed them to my partner as well, who categorizes himself as definitely in no way an artist, and he said these drawings so clearly communicated bodily sensations ·

more so than if he were to read a description · that just goes to show how important this kind of work is for fostering relational understandings of what it is like to live with illness · a lesson that is urgently necessary for society and medical communities in particular⁴³ · the concept of sensitivity seems to be relevant to the reception of the artist's work, especially when I think of the medical students' engagement with her work · the students were particularly impressed by how directly the drawings conveyed bodily sensations · we discussed in what way visual representations could be used in medical practice, emphasizing in particular the importance of drawing (as opposed to language) as a mediator between physician, patient, and their relatives³⁸ · your work I can see as evoking emotive and visceral responses in those who witness what you describe · this could be very helpful not only in creating a sense of reconnection (with the self) but also in opening up discussions with professional support (psychological and physical)⁴¹

·· the images are suitable for communicating the experiences of individuals living with MS and for conveying an understanding of the illness to those affected, their relatives or the wider public, and for enabling reflection on the illness · the images offer the possibility to improve communication in medical consultations by identifying perceptual qualities or intensities of the paraesthesia, similar to a pain scale¹⁵ · through the advance of personalized medicine the individual body might have (re-)gained attention, although bodies and illnesses are mostly understood in terms of graphs and charts or otherwise visualized biomedical data · patients' life stories and individual histories simply cannot be translated into the same language · in my research experience, attempts to communicate and translate patient experience do matter to professionals and have a bearing on their clinical decision making, but often there is little time and space for these processes to unfold · I hope this work finds its way into the world, not only as a piece of art, but also as a way to enrich debates and understanding for those involved in the medical practice¹⁶ · your drawings reminded me very much of the pain scales that we use in pediatrics to measure pain, which is an absolute prerequisite for effective pain therapy · I can well imagine that these drawings – perhaps simplified for medicine – can be used to capture the dynamics of the disease in individual patients, but also to make the symptoms of different patients comparable · this measuring could perhaps also be understood as an empowerment strategy · as a figurative metaphor for one's own desire for control over the disease¹⁷

·· you contrasted a magnetic resonance image of the spinal cord with the inflammatory lesions typical of MS with one of your drawings · both images should show one and the same disease/illness · while the person affected by MS remains reduced to one part of his body in the MRI, and therefore fragmented · the drawings, which – comparable to MRI – also select individual parts of the body, nevertheless open up a more holistic understanding of the illness and the effects it has on the body sensations and body perceptions of the person affected³⁸ · what struck me most about your work was how it actually gave me a sense of what it might actually feel like to have unusual sensations in my feet and also in other parts of the body that you've represented · there was something about the way in which you drew that evoked sensations and to my mind would be extremely useful in communication with clinicians, if they are able to respond like I did · I certainly think your work has promise in the communication of the often incommunicable⁴² · we were especially fascinated by your success in displaying sensory perceptions in an artistic medium · sensory perception is a subjective process, which is very difficult to define in words · in clinical neurology, an accurate description of sensory disturbances is therefore not easy to achieve · up until now there have been no images available that represent the quality and severity of such changes · your art for the first time provides a new tool for solving this problem and may help patients to illustrate their symptoms · this achievement could eventually become a significant contribution for the diagnosis of neurological diseases^{29,30} · the artist

has found an artistic language for describing the symptoms, where even academic specialists have failed so far · the artist's approach has been discussed as serving as a starting point for a project to define the symptoms of multiple sclerosis more precisely and correctly with the help of the artistic medium^{31,32}

·· the artist herself has the threads in her hands · drawing and embroidering, she creates connections between herself and the paraesthesia she experiences in her body¹⁸ · the fact that you somehow externalize your body sensations caused by a disease that is worrisome and a potentially all-consuming experience, is a plausible and intelligent response · externalizing definitely helps a person not to be eaten up by a feeling, a sensation · it is a sort of sense-making that then sculpts our perception or, let's say, directs our attention¹⁹ · your own processing corresponds to the principles of good psychoanalytic practice, especially where destructive processes are underway · they are the processual forms of progressive symbolization, the counter-movement to the destructive processes, as is also MS · making visible, naming, connecting the separated, giving meaning · indeed, psychification²⁶ · I think that this process of drawing influences the perception of what is felt or sensed, makes it more conscious, perhaps also reinforces it – in analogy to the memory of pain – but ultimately also creates a distance to the illness, thereby taming and controlling it, and finally thus also reduces anxiety¹⁷

·· there is something so poetic but also blue (as in the blues) in a human being trying to share a lived experience based on the means available · the blues I feel is for the beautiful awareness you express that you cannot be sure that what you feel is really what it is, that what you feel is influenced by how you have trained your body to experience sensations and, by extension, how your hands and eyes have been trained to use the pencil²⁰ · extracting, abstracting? subjective translated attempts · the transition into the object, fabrics, folds, layers²² · the research includes scales, emotions, feelings and classifications · a kind of encyclopedia of sensations and feelings²⁸ · some drawings are reminiscent of histological or anatomical illustrations of tissues and structures of the human body · wonderful, finely woven structures, like patterns, repeat themselves endlessly · the lightness and beauty of the drawings and the clarity and elegance of the forms are surprising in the face of the unpleasant experience of such sensations¹⁸ · your drawings, I think, are poised in unapologetic beauty-of-that-nature, and complete a mysterious loop of mystery which is in itself daunting · the splendid control of the depiction and the strange intimacy and banality too of the thing depicted · the torsion which is in accord with your feelings then the slow realization that there is an otherness there, which is only slightly within my experience · it hovers waiting for my accord⁴⁰

·· small pinholes, first few, then more · in which rhythms do they pulsate – is there a time dimension – a dramaturgy of intensity? · can a translation to a timeline or multiple timelines here be a way to track and capture the sensations?²² · could you imagine working with a musician who would work with your drawings and then, in slow processes and in conversations with you, add to them acoustically? · the composition would result in two elements in particular being added to the drawings: the aspect of extension in time and nuanced possibilities in reference to pain · the wide range of dissonances available allows the most subtle variations to be achieved in the musical representation of pain · your drawings create body-places, i.e. figurations in exact relation to the body · a composition would not be capable of this · given, however, that music adds the dimension of time, in combination with the drawings, it allows a variety of experienced tempi – which are a function of the manifold nature of pain – to emerge²³ · in the context of Roman Haubenstock-Ramati, I suddenly thought of you and said to

myself: your work and his have something in common, namely, you're both exploring very subtle (and certainly deep) connections between modes of perception · his main leitmotif in his later life seems to have been the connection(s) between what is or can be heard and what is or can be seen²⁴ · changing intensities and qualities · staying on the surface and at the same time sounding out depths · invited to a tangible re-perception · acoustic associations are awakened³⁶

·· expressing sensations or feelings in another sensory mode as images or figures constitutes a unique approach · I see a certain parallel with synesthesia, where, due to an ability or property of a person's sensory processing, colors, for example, are also experienced as sounds · describing sensations or feelings is a difficult undertaking · these pictures or forms provide a language for doing so · such words in images are particularly useful in the case of the strange sensory experiences connected with an illness such as MS²⁵ (chronic) illness shows us the limits of perception and the hurdles of inter-human communication · sensation sampler is a prosthesis for the experience of illness, of the realities it reshuffles, of sensations it births; it is a bridge for the proximity that pain does not allow · embroidered and perforated, the fabric materializes, visibilizes, categorizes, provides a framework of reference · it's a monument to the beauty of sensing differently³³

·· sensation and its perception are bound up with consciousness, which means that a complex sensory cascade involving the nerves and the brain has to be activated · in this activated cascade, all possible kinds of memories – fragments of memories – also find themselves being mobilized · the feet, hands or other body parts that you draw showing the changes they undergo always indicate something far beyond the drawn body parts as well, they are a reference to the whole person and to her specific reception and processing apparatus, without her actually appearing in the drawing³⁴ · the views of body parts, which are visual representations of bodily sensations, express perception in a way that I describe as tactilization · not only is what is felt shown visually, but what is then seen is immediately accompanied by something felt in body that connects this to things felt and stored in the body memory · the perceptual experience depicted in the drawings as a process in motion evokes connections actually felt in the body that are often difficult to put into words, since an adequately nuanced vocabulary does not (yet) exist or has not been developed³⁶

·· it is impressive that the photos are very similar to the drawings, even though they are photos · the color adds the feeling that the subject gets slowly destroyed, and at the same time it doesn't belong to this environment: something that is paradoxical⁵ · her works are permeated by transitory moments of contact with an outside, a supposed outside · a contact with something other that can at the same time be something of one's own · permeated by contact with something other that can ultimately mean both limitation and expansion of bodily space · in those contact zones where the body encounters something other, its other, an other, lines begin to meander, to sprawl, to mark how that contact takes place · an outside in one's own inside, a contact with a body that is one's own · it is similar to those seams that memory creates between past and present: they constitute a connection, an encounter with an other that is at the same time one's own · in her work I observe a consistent artistic investigation of remembering as a process of becoming alienated from oneself · memory as a mode of exploration of the sensual · suturing as a bodily act of presentification (making present) and, simultaneously, de-presentification of one's awareness of oneself³⁹ · feeling one's own body in this way, penetrating it by listening to it and feeling it is something very peculiar, because in perceiving and becoming aware of one's heartbeat, for example, or of one's breathing, one brings about a breach in the automaticity,

the self-evidence of the body's functioning · and of course almost every illness causes such a breach of self-evidence to occur and puts that self-evidence in question¹⁷

.....

· certainly the first thing that comes to my mind is translation · a very pure translation, the body is sensing and translating at the same time, without any technical interface, except pencil, paper, textiles and needles · the translation results from memory and experience · I'm not quite sure how to name the epistemic virtue that is connected to your process of producing pictures, but I would say that the cancellation of the object/subject status is an essential epistemic moment in your work · you are your own instrument · the produced images are objectifications, as you depict your body from the outside · on the other hand, they are combined with intensity scales in a manner that evokes the notion of mechanical images · a scientific pictorial language as an artistic strategy · or another moment of translation: a subjectification of atlas images through the artistic means of drawing · and finally, maybe it's not so much about inside and outside, but about the point of convergence where both can be at the same time³⁷

.....

· the artist's research goes far beyond the mere visualization of physical sensations · she generates tableaus which are contagious in a very bodily sense · her fabrics evoke a variety of emotional layers in the viewers, which each of us stitches together in his or her own way, incorporating our memories and histories that are part of our flesh · thus, it is by no means solely her own body telling an individual story · we become infected²⁷ · I find the images of the body exceptionally evocative, so much so that I feel like I can reach into the body and feel it · your work enables me to feel a connection · this ability to move closer to the body I see as exceptionally valuable to our wellbeing · this is especially important, I believe, in times of un-wellness or living with on-going health conditions⁴¹ · can these thoughts be extended beyond your own personal experience? · the immanent finiteness of the body, its inevitable decay · your work addresses this and goes beyond the specificity of MS · ultimately, do you ask whether artistic work in its synthesizing form also serves to process this and to counteract decay, dissolution?²⁶ · it is a promise of touch, of warmth, of understanding that cannot be put into words · it's an embrace: as much an embrace for the sufferer as for the viewer: invitation to come closer, to touch, to open, to give yourself to it, to love · it's a love letter stitched for the ill · it's a sense-sensation dictionary for the ordinary (would be) lovers – the ones who (want to) pay attention³³

.....

1 visual arts, artistic research | 2 artistic research, literature | 3 art history | 4 artistic research, literature, psychology | 5 visual arts, media art | 6* dance, choreography, artistic research | 7 psychiatry, psychoanalysis | 8 neurology (MS) | 9 medicine (student) | 10 psychotherapy, medical humanities (student) | 11* english and american studies | 12* not applicable | 13* translation, humanitarian care | 14* office management | 15 medicine, anthropology | 16 visual and medical anthropology | 17 pediatric cardiology | 18 art education, arts therapy | 19 artistic research, biology | 20 dance, choreography, artistic research | 21 media cultural studies, scenic research | 22 media art, performance | 23 philosophy | 24 literature, linguistics | 25 general medicine | 26 psychiatry, psychoanalysis | 27 sociology, art | 28 photography, artistic research | 29 neurology | 30 brain research, neuroimmunology (MS) | 31 plastic and reconstructive surgery | 32 pediatrics, psychotherapy | 33 cultural studies, medical humanities | 34 medicine, medical history | 35 psychoanalysis, philosophy, art education | 36* artistic research, performance | 37 visual arts, artistic research | 38 history, medical humanities | 39 art history | 40 visual arts | 41 visual arts, creative arts therapy | 42 medicine, medical humanities | 43 visual arts, health research |

15 Conclusion

This reflective summary consists not only of findings but also of questions that cannot (yet) be answered. It is precisely because of this (temporary) ‘unanswerability,’ however, that I see these questions as insights as well, insights that can be taken as a basis for further artistic exploration. As my project, pointedly entitled “Stitches and Sutures,” makes a fundamental reference to the Lacanian notion of sewing, and as I presented myself at the very beginning of the project with the almost presumptuous challenge of using this reference as an artistic methodological tool, I begin here by addressing this issue. Several times I have been asked whether Jacques Lacan is really necessary for the purposes of my project; knowing what I now know, my answer to that question is both ‘yes’ and ‘no.’ It would, of course, be possible to undertake an investigation of possible ways of representing bodily sensations without this reference. At the beginning of my project, I was already aware that the thinking of Jacques Lacan was considered among the most complex and difficult to grasp. In order not to lose myself completely in these complexities, I draw on the more basic Lacanian systems of thought (in particular, the *Graph of Desire I*), largely ignoring their more complicated further developments.

The Lacanian ‘suture’ has been very productive as a conceptual setting and has led me to various other theoretical concepts, such as the linguistic sign system of Ferdinand de Saussure and his wave diagram (de Saussure 1995 (Orig. 1916), p. 156) of the relationship between the signifier and the signified, a concept to which Lacan also makes reference. In contrast to de Saussure, for whom both signs are equally dependent on each other, Lacan gives priority to the signifier because it generates the signified. The need for what Lacan refers to as *points de capiton* arises as a result of a movement or a desire on the part of the signifier: the *points de caption* serve to link the signifier to the signified (constituting a signifying chain which is seen as production of meaning). This process is necessary in order temporarily to stop the sliding of the signified underneath the signifier (Lacan 1997, p. 295ff.) and thus to stabilize the subject. This process is related to that of Freudian ‘afterwardsness.’

However, I have also come across critics of Lacan, such as the psychoanalyst André Green, who also refers to *nachträglichkeit* (‘afterwardsness,’ a term shaped by Sigmund Freud and further developed by Lacan, among others). Green describes this as traces of memory, as postponed meaning, “perhaps a potential meaning that lacks only the analytic – or poetic – experience to become true meaning (Green 2011, p. 265, translated here from the German)”.

While thinking about the ways in which tangible objects can be charged with meaning or create relationships, I came across the book *Playing and Reality* by Donald Woods Winnicott (cf. Winnicott 2005), which gave me the idea to ask myself whether his ‘transitional objects’ and ‘transitional phenomena’ could, similarly to the Lacanian ‘suture’ and the concomitant notion of *points de caption*, also serve as a method and a tool for giving greater depth to the artistic process that I had begun and for transforming it by making use of these thought structures.

Drawing on such concepts in establishing one’s orientation always involves the risk of getting trapped in a system while at the same time providing an opportunity to see the limits of that system precisely as a result of this encounter of thought processes; the opportunity is also one that can make it possible to expand or transcend those limits. The artistic process that I set in motion was thus characterized by an interweaving of intuitive approaches, analytical reflections and a conceptual linking to – as well as an opening up of – the format that I had conceived. I took the artistic freedom to understand Lacan’s textile metaphors, topologies and diagrams in my own way and also to modify them. This approach has the potential of making it possible to project current bodily sensations into the future in a speculative fashion and as fabulation, and by doing so to perceive one’s own body differently in the present, a process that L. A. Paul describes in *Transformative Experience* (cf. Paul, 2014).

In an initial phase of the project, I did pencil drawings on paper, understanding this process to be one of directly transferring perceived sensations onto paper by means of my hand, a process that I also described as quasi-seismographic. In some of these graphic representations, I first drew the body parts where I perceived the strange sensations, drawing them as localizations; I then transferred the sensations themselves 'empathically' to the drawing, as if the sheet of paper were my body.

This was followed by analysis of the drawings, extensive research on the topic of bodily sensations, reflections on the conditions under which physical sensations become perception and an interrogation on how these can be processed into externalized graphic representations. This also led to the awareness of how complicated this process is, as it fundamentally involves past experiences as a basis for making the invisible visible. In the beginning, whenever I was in the process of drawing, I was certain that I was simply drawing what I felt physically. The more I drew, however, the more this certainty came into question, and I began to ask myself whether I really felt the way I believed I felt¹². An essential question that arises here is to what extent the act of drawing – by requiring increased attention – changes perception. And what would happen if I drew the more than fifty drawings again now? This question, in its turn, leads to another: Would I be able to recognize in these re-drawings my current physical state as contrasting with what I had recorded in the earlier drawings? Would it even be possible to blot out the experiences of the previous drawings? And if so, having done the blotting out, would it even be possible to re-draw those experiences? What other experiences would I in that case refer to in order to transform the physical sensations into a visual language?¹³

The knowledge that perceptions of bodily sensations are of a flexible nature and essentially depend on what emotions, memories and intentions are involved in the recording process brought me back not only to the Lacanian concept of suture but also to phenomenological positions taken by Maurice Merleau-Ponty, for example, or by Havi Carel or Fredrik Svenaeus. Merleau-Ponty's understanding of how the *leib* (phenomenological body) inhabits a different space than the physical body helps me to reflect on perceived body boundaries when I draw; it allows me, for example, to dissolve the contour lines of the body I am depicting. Carel's book *Phenomenology of Illness* (cf. Carel 2016) was a support to me in my efforts to understand how bodily doubt and loss through illness change one's way of 'being in the world;' the book also led me to S. Kay Tombs' *The Meaning of Illness* (cf. Tombs 1992). Tombs, like Svenaeus in *The Hermeneutics of Medicine and the Phenomenology of Health* (cf. Svenaeus 2000), highlights the importance of phenomenology in the context of the physician-patient relationship.

In a second phase, which ran parallel to the drawing process, I began cultivating bio-membranes (specifically, SCOPY). Rather by chance, I discovered that these membranes showed a similarity to human skin, and I photographed the membranes in physical contact with my own body. The aim was to create images that illustrated the 'second-skin sensation.' The tactile sensation I perceived during the photographing process was usually considerably different from the inner-body sensations I refer to in the context of the project. Nevertheless, the resulting images, as embodiments, were good approximations in terms of conveying the irritating perception of simultaneous strangeness and similarity.

In a third phase, I used the textile material that I perceived as triggering the sensations, that is, the actual physical material, as a medium of visual representation. In doing so, I referred partly to sensations that I was actually perceiving at the time, but also to remembered sensations or to sensations depicted in drawings. The experimentally embroidered cloth that resulted, the *Sensation Sampler*, gave me the

¹² **Follow-up:** drawing the same body perception in countless possible variations.

¹³ **Follow-up:** producing a graphic representation (drawing) of a sensation a second time by first looking at the already existing embodiment of the sensation and then 'forgetting' it in order to draw the sensation anew.

opportunity – as the bio-membranes had done – to bring these embodiments into contact with my own body.¹⁴

During this three-phase development of artistic work, I repeatedly found that the initial intention or the initial question posed in the case of a given work did not quite correspond to the result achieved. On the one hand, such a realization should not have come as a surprise, as executed artistic works always go beyond the initial explicit intentions; on the other hand, the discrepancy can nevertheless seem disappointing at first. It points, however, to a problem that can in fact be productive: it is precisely this gap that opens up new questions. But even if those questions are then pursued meticulously, again only an approximation can be reached – the lack or inadequacy is an integral aspect of the artistic research.

An important moment, a kind of setting of bearings, was the lecture on *Arts and Medicine* given at the Medical University of Vienna in 2019, an occasion that spurred contacts with institutions and individuals from the Medical Humanities (*see section 12.1*). Not only did these contacts result in projects, lectures and publications; I was also confirmed in my belief in the relevance that my work could have in the clinical context. That my project could also lead to a kind of ‘application’ was not, however, the starting point of my investigation. The initial question concerned, rather, possible ways of visually representing subjective experiences and also how I could realign my artistic work now that conditions had changed, that is, now that I was consciously experiencing my own body in its alteration.

The idea of holding a workshop for the purpose of sharing the experience of externalizing bodily sensations with other individuals affected by MS emerged in 2019, and such a workshop was indeed planned for 2020; due to the COVID-19 pandemic, however, the plan could not materialize.¹⁵ Nevertheless, by contacting persons affected by MS, I was able to receive feedback on how they resonate to my externalizations; these responses have been integrated into the textual fabric of the section entitled “Resonating Voices” (*see section 14*).

In summary, the relevance of my project was primarily situated in the following areas:

- gaining insights into the articulation of subjective experience;
- coping with one's own illness as an emancipatory process;
- providing a communication tool to convey symptoms in the clinical context;
- working artistically in various disciplinary contexts and exchanging knowledge;
- conveying bodily sensations that are subjective while at the same time extending beyond the individual.

Last but not least, throughout the project I was accompanied by the question: Just what does it mean that I am undertaking an investigation of which I myself am the ‘object.’ Exploring something that is so close, so to speak, is fraught with ambivalence, because the explorer knows the explored object so well. At the same time, however, in this situation, I find myself in a fluctuating relationship between objectification and subjectivity: I place myself in what is supposed to be the position of an observer in order to explore how I perceive my own body; but I make these observations by means of that very same body.

¹⁴ **Follow-up:** detaching the embroidered examples from this narrow context of self-experienced bodily sensations and transferring them to other contexts.

¹⁵ **Follow-up:** in a workshop, exploring with other persons affected by MS the kinds of drawings they can create or whether other media are more suitable for the purpose of externalization. The workshop could be followed by an interrogation as to the ability of such forms of externalization to serve both as one's own counterparts, as it were, and as a means of communicating what one experiences to other individuals. This would also be an interrogation concerning the extent to which such forms of externalization serve as a support in one's efforts to maintain sovereignty over one's own body.

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Barbara Graf, photography based on: *Wrinkle Lines 8 – Foot Bandage 1 (Mapping)*, 2016-2018, medical gauze and embroidery, 7.5 x 290 cm.

19 Colophon

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Figure page 1: Barbara Graf, *Drawing no. 244*, 2021.

Figure page 96: Barbara Graf, *Cloth 10 – Foot I* (detail), 2020/2021.

Figure page 98: Barbara Graf, *Drawing no. 247*, 2021.

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www.barbara-graf.at



