Mapping the body through pain, loss and trauma: overcoming violence against women through art

Mapeando o corpo através da dor, da perda e do trauma: violência contra as mulheres através da arte

ABSTRACT
The present text deals with the development of images of a mutilated body as a means of expressing, celebrating and overcoming pain, loss and trauma. Based on a true story — a violent crime against a 52-year old woman shot at point-blank by a former boyfriend — her 20-year old daughter, in trying to initiate a form of healing process, depicted in a series of photographs and literary references the unfathomable manner in which her mother’s life was shattered on a February night in 2020. The visual story will be analysed under the notions presented by Maurice Merleau-Ponty, Susan Sontag, and Rita Charon, among others, bearing in mind the concepts of illness, perception, the body as narrative, and the underlying urge to produce an enduring artistic testament to illustrate and crystallize that epistemological break, marking life before and after the tragedy.

KEYWORDS: Literature and Arts; Pain, Loss; Trauma

RESUMO
O presente texto aborda o desdobramento de imagens revelando um corpo mutilado como meio de expressão, celebração e superação da dor, da perda e do trauma. Com base em uma história real — um crime violento contra uma mulher de 52 anos, alvejada à queima-roupa por um antigo namorado —, sua filha de 20 anos, tentando iniciar um processo de cura, retrata em uma série de fotografias e referências literárias, a insondável maneira como a vida de sua mãe foi destruída em uma noite de fevereiro de 2020. A história visual será analisada à luz de noções propostas por Maurice Merleau-Ponty, Susan Sontag e Rita Charon, entre outros, tendo-se em mente os conceitos de doença, percepção, o corpo como narrativa e a necessidade subjacente de se produzir um testamento artístico duradouro para ilustrar e cristalizar essa ruptura epistemológica que marca a vida antes e depois da tragédia.

PALAVRAS-CHAVE: Literatura e Artes; Dor; Perda; Trauma

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At the end of the mind, the body.
But at the end of the body, the mind.¹


The present text is based on a true story – a violent crime against a 52-year-old woman shot at point-blank by a former boyfriend; the victim’s 20-year-old daughter, trying to initiate a form of healing process, depicted in a series of photographs and literary references, the unfathomable manner her mother’s life was shattered on a February night in 2020. This collection of images, entitled “Levantada do Chão” (Risen from the Ground), a literary reference to the Portuguese writer, José Saramago, and his novel *Levantado do Chão*, was presented through social media on an Instagram account, @levantadadochao².

Prior to analysing this example of art created out of pain, it is vital to acknowledge violence against women as an uncomfortable topic that, due to its prevalence, still needs to be addressed and discussed thoroughly. According to global estimates by WHO, one in three women (35%) has experienced some form of sexual violence in their lifetime³; most of these crimes are perpetrated by former or current male partners. All these data can be scrutinised and presented in different contexts, from legal actions, support groups, or any other means to serve different purposes, namely to alert, prevent, help or, ultimately, punish the culprits. However, the naked truth is that these numbers are not diminishing, which stresses the fact that the problem is far from being successfully alleviated.

In the domain of literature and arts it is necessary to go back and revisit the notion of Post-Lacanian feminism and the nature of gender addressed by Julia Kristeva when she proposes rejecting a negative function of women by an alteration of an explosion of the social codes. Kristeva’s phenomenological approach still endures, after so many decades, and although readjusting paradigms has become a structural part of contemporary life, and an example of that is the increasingly common usage of gender-neutral language, there is still an inclination to scuttle the passive role of women, in order to avoid confronting the issue. In the area of literature and arts, the most common target is to focus on the implications of fear, neglect and silence caused by this uncomfortable topic of violence against women.

¹ “Au bout de l’ésprit, le corps. Mais au bout du corps, l’ésprit .”
² Available at:  https://www.instagram.com/levantadadochao/. Data retrieved on 09/02/2021.
³ Available at: www.who.int. Data retrieved on 09/02/2021.
This text aims at dealing with PLT (pain, loss and trauma), considering art and the body in the healing process, the necessity to restore dignity and integrate the tragedy in a new form of expressing life, subtly displaying the anguish, redesigning identity and the perception of the self, which includes the invisible neurological process of handling memories, and the visible part of having to rediscover being alive with an injured body, sometimes using the skin as a canvas to retell a story.

Bearing in mind Merleau-Ponty’s words “The body is our general medium for having a world” (PONTY, 1962, p. 146), it is axiomatic that the body is a stable parade of various sentiments, from the displays of celebrating joy to the marks of eternalising pain; in both states, the skin is used as a permanent exhibition of this frail and sometimes unexpected condition. Merleau-Ponty’s phenomenological approach derives from this first-person experience of perceiving one’s body. As David Hillman and Ulrike Maude point out, as much as one attempts to overlook this connection between the body and literature and art, the topic has been a constant object of investigation and material demonstration:

The fact is that there are no bodies in literature. Not only there is no obvious way for the concrete materiality of the body to be fully present in or on the written page; even more profoundly, there would seem on the face of it to be an apparent mutual exclusivity of the body and language – the one all brute facticity, the other presupposing precisely the absence of matter. And yet, over the last three or four decades, critics and theorists have found a myriad of ways of addressing the representation of the body and embodied experience in literature. (HILLMAN; MAUDE, 2015, p. 3).

An example of this paradoxical nature of the need to “write” the body and narrate the apparent impossibility of aptly doing so can be perceived in many literary examples. On Essays on Illness, Virginia Woolf describes pleasure, pain, illness and health, and their reflections on the body, by exemplifying the various impressions of having the body being written upon, beyond one’s desire and comprehension – “In illness words seem to possess a mystic quality” (WOOLF and BRADSHAW, 2009, p. 108). Lord Byron, contemplating his life surrounded by pain and affliction, had previously expressed a necessity of correlating art and pain, as part of structures of feeling that project life and ascertain credibility to one’s existence: according to Byron, in a letter written to his future wife Anne Isabella Milbanke on 6th September 1813, “The great object of life is sensation – to feel that we exist – even though in pain.”
Tolstoy, in *The Death of Ivan Ilych*, dwells on this awareness of mortality: Ivan, faced with unbearable pain, is driven to try and find meaning in his life, while coping with the two paradoxical notions of desiring to die while being constantly overwhelmed by his own need to fight for life. Ultimately, he manages to join these two different stances by incorporating pain as a source of a newfound wisdom about his identity, and embraces it: “So what? Bring on the pain!” (TOLSTOY, 2008, p. 217). These literary examples point towards the transformative power of pain and suffering: though the disease is not welcome, in the face of it, and after accepting it as part of the self, the sufferer tries to own the pain and create a new perception, a novel form of identity.

It is common to listen to narratives about fighting a disease, conveying images from metaphorical battlefields and, thus, transforming the diseased into warriors, the ailments into trophies. This form of representation will be dealt with as we analyse the pictures from @levantadadochao that display the wounded body as a testament of a new identity, as a map of pain, loss and trauma, but also of victory and love due to the fact that the scars pay tribute to the new person that has risen (levantada) out of the trauma.

The “celebration” of pain, this narration of the disease and the deformity through art, has to be separated from the description every patient tries to convey to their doctor. This distinction is analysed by Elaine Scarry in *The Body in Pain*. The author argues that language is a way of manipulating pain, and presents a key difference to the object we are analysing, between experiencing pain and witnessing it in another person, reminding the reader that those are two completely different things: this is about feeling versus perception, or certainty versus doubt: “When one hears about another person’s pain, the events happening within the interior of that person’s body may seem to have the remote character of some deep subterranean fact … it may seem as distance as interstellar events referred to by scientists.” (SCARRY, 1985, p. 3).

In the field of narrative medicine, Rita Charon has dedicated her research to this articulation, the dialogue between patient and doctor and how to encounter effective strategies to mitigate the gap between what is said and its translation into a symptom. The difference between the two sides is that, unlike the patient, the doctor and the medical staff are not ill. Whereas the doctor gathers and interprets a series of data formed by exams, analysis, hereditary factors and lifestyle, the patient only apprehends the impact of the disease on their life. This distinction has to do with a greater
acknowledgment that there are “two bodies” and narrative medicine attempts to capture the inside, in order to better diagnose the outside:

The body defines the self from the inside, but the body does not define the self to the outside. There are two bodies: the one lived in and the one lived through. One body absorbs the world, and one body emits the self. Poised between world and self, the body simultaneously undergoes the world while emanating to that world itself. (CHARON, 2008, p. 88).

To give voice to an image, to illustrate pain to communicate the unsayable, appears to be an impossible undertaking, since it is extremely arduous to put aches into words, in the realm of the abstract that is dependent on one’s mastery of communication – that is perhaps why the pain scale is numeric, from one to ten, sometimes accompanied by the equivalent in emojis, from no pain to worst pain possible, from smiling faces to sad ones, and still that characterisation fails to convey a precise assessment, since it ultimately depends on the perception of pain the sufferer has, and the ability to describe symptoms and measure the invisible. Hospitals have specific wards dedicated to pain management and those consultations as well as the subsequent medication prescribed, are based on discourse, on the narration of the concealed enemy. You can assess and tend the wounds, and/or the condition, but pain needs to be described in order to be perceived and properly addressed. The pain scale chart is moderately effective when one tries to translate physical pain, but it is very limited if you consider patients with neurological disabilities, who are unable to decipher or to characterise the pain by picking a number or a face.

When defining pain, the patient is pronouncing a new identity, is responding to Hamlet’s quest “to be or not to be”, and the process of recreating the body is accompanied by this redefinition of the self, this acceptance or rejection of a transformed body that cannot be looked under the lenses of the former healthy self. Thus, “the body is the passport, the warrant, the seal of one’s identity.” (CHARON, 2006, p. 87).

David Morris in The Culture of Pain, while writing about the deeply personal nature of aching, incorporating the phenomenological notions of Merleau-Ponty, retells how he was repeatedly asked whether he was discussing physical or mental pain, as if the typification of two pains in one body were mandatory. Morris’ approach dwells on how pain is shaped, considering mind and body as univocal, pondering on the
construction of pain under a historical, cultural and psychosocial framework, incorporating the story of medical approaches, anatomy and physiology, which neurologically define pain, but also recognising that the identity that pain evokes is more than a set of neurotransmitters that influence the mind, since our culture reshapes the body and, ultimately, the perception of a new forged identity: “Pain is as elemental as fire and ice. Like love, it belongs to the most basic human experiences that make us who we are.” (MORRIS, 1992, p. 1).

Susan Sontag had already pointed out the “passport” metaphor Charon uses, when comparing illness versus health, in terms of a new citizenship, in the opening statement of her book, *Illness as Metaphor*, originally published in 1978:

> Illness is the night-side of life, a more onerous citizenship. Everyone who is born holds dual citizenship, in the kingdom of the well and in the kingdom of the sick. Although we all prefer to use only the good passport, sooner or later each of us is obliged, at least for a spell, to identify ourselves as citizens of that other place. (SONTAG, 1990, p. i).

When faced with disease, or a brutal assault that profoundly wounds the body, throughout the recovery process, the person sustaining PLT tends to create a narrative to control events, in an attempt to define and circumscribe the disease as the ultimate resource: when faced with the incapacity to avert the pain, unable to respond to the question “What have I done to deserve this?”, the ill person may try to regain power by managing the pain and the body, through the construction of a narrative, a safe space, where the story can be shaped and has some meaningful restorative purpose. Anatole Broyard describes this experience when he admits: “My initial experience of illness was a series of disconnected shocks, and my first instinct was to try and bring it under control by turning it into a narrative. […] Stories are antibodies against illness and pain.” (BROYARD, 1992, p. 19-20).

In the case we are considering, a violent assault, one is left with different forms of PLT: that of the attacked victim, and that of the impact that the sudden news has on other people, namely family and friends. Confronted with the tragedy, those witnessing the pain are left with medical information, eyewitnesses, and police reports, alongside the narration of how the event was perceived by the target. In the particular case of this 52-year-old woman, at first the victim was unable to talk. The narration of events, the story that these pictures unfold, happens as a result of a coping mechanism, a way to
structure the PLT that the daughter and her two siblings experienced, from the moment they received a phone call from the police, to the painstakingly process of witnessing their mother coming out from the dead, and becoming her caregivers in the excruciatingly slow recovery process.

Ana Rita Fialho’s photographs depict the heavily scarred body of her mother and provide a spatial context on the road walked by the culprit before firing the shotgun, by pinpointing the precise location that, nine months later, still bore traces of blood. Her work is the result of an essay from the seminar in Literature and Arts, where PLT is perceived and analysed through different manifestations, having the written word as a starting point. The contemporary and now pandemic society lives the paradox of wanting to obliterate pain, which is almost considered an aberration, with the help of medicine and pharmaceutical companies, but, at the same time, there is a voyeuristic desire to watch the pain, so that it can be claimed not simply by the owner, but by those who regard it, and in doing so incorporate themselves in the narrative and feed their demand for information.

As a violent event which happened in a small village of Alentejo, the attempted murder reached the national news and was subject to the voracity of social media. At the time, in February 2020, the victim was in hospital, and her sons and daughter rejected being propelled to the stage, being submitted to the spectacle of morning and afternoon shows floundering in their misery. When the mother was discharged from the hospital, 64 days later, 18 of which in a coma, with severe constraints and multiple ailments, the daughter was appointed as her primary caregiver, in an extemporary inversion of roles - a 20-year-old taking care of a 52-year-old. Being a student, while her brothers embarked on the difficult process of coping with a feeling of revenge and anger, Ana Rita was solely dedicated to taking care of her mother’s needs. When she was able to return to classes, in the first semester, eight months after the crime, and enrolled in the seminar, she was finally apt to contemplate the pain, to bear witness to her mother’s body, at the same time as she started addressing her own necessity to overcome anguish. This work, and the literature that sustains it, served as a restorative process, a way to connect mother and daughter beyond trauma, in a common healing process, as survivors of a tragedy, able to crystallise the pain through an art form, in a unique bond: the daughter “celebrating” the mother’s scars, the mother understanding the cathartic need of the daughter, by accepting to expose her injured body. The mother who was shot, the daughter who used the camera to shoot the tragic story.
In the process of analysing PLT, the narrator’s visual statement functions as a testament of love, as an imagery report on the metamorphosis both women have undergone. The photographic memoir that was produced is more important than the context: space, body and trauma eternalised in a collection of images which unravel the preoccupation of transforming tragedy into art.

The collection of thirteen black and white photographs was taken with a Canon 600D-55mm camera. On the Instagram account, a statement in Portuguese reads: “Violence against women. After the fall, the reconstruction. After the loss, the pain and the trauma, the metamorphosis.”[^4] (@levantadadochao 2021).

The mapping of pain opens with three images depicting the space where the attempted murder took place, Locus I, II, III:

![Image 1: Locus III](https://www.instagram.com/levantadadochao/)

© 2021 Instagram account: @levantadadochao

The visual memoir unfolds with three images of the victim, reproducing a personal body map composed of scars and the patterns “drawn” by the shotgun, labelled Corpo Crivado I, II, III (Riddled Body I, II, III):

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The next collection of four images symbolically mirrors the pain and desire of revenge experienced by one of her siblings: Trauma Hamletiano I, II, III, IV (Hamletian Trauma I, II, III, IV):

The final series of three images are self-portraits of the artist in the process of rising from the ground: Levantada do Chão. The 13 photographs serve as a means to reconstruct the memory of the past, to circumscribe the event to a series of flashes that inform about “where, what, how and who” in the aftermath of the crime. Locked in that

© 2021 Instagram account: @levantadadochao
closed circle, apart from the victim, the ones who regarded the pain are also the main characters, and the criminal, who created the space, is purposely left out, to emphasise that even though he created the story, when he committed the crime, he does not own the pain nor the memory of the involved parties.

A lot of these pictures, and the approach to the memory of PLT, were facilitated and mediated through several readings, trying to give meaning and to structure the perception of the episode, to find a channel, a safe space, where the victim’s body could be heard through Ana’s “voice”. In the end, the option for the Instagram account points out towards this notion of a protected space, where the author felt at ease, an app she was already familiar with, was able to control and reach a number of followers. Instead of a “written” voice, the photographs bring to life perceptions and stir different expressions inside the viewers, giving them the power to hit the like button on a singular vision, thus validating the memory, and acknowledging, even without further details, the PLT experienced by the victim and the witnesses. The body is a vehicle, the images propitiate empathy, and “reading” this map one finds multiple layers, from the victim to the caregivers, or those who received the narration of events and became a diminutive part of it, just by listening or watching, since when doing so they gain the ability to become storytellers of the primal event as well. Much like oral literature, social media has this capacity of sharing, for better and for worse.

While the victim was learning to inhabit life with a new self, with a different perception, having survived a near death experience that is permanently “written” on the body, the photographs condense that second-hand experience, of having walked the map of the other’s body, tending and caring for it. “Levantada do Chão” is about the artist, as much as it is about the object, which explains why the final three self-portraits bear the title. Although this is about something that has happened to the artist’s mother, eventually this is about a singular vision because, as Sontag states: “All memory is individual, unreproducible – it dies with each person. What is called collective memory is not a remembering but a stipulating: that this is important, and this is the story about how it happened, with the pictures that lock the story in our minds.” (SONTAG, 2003, p. 76-77).

The notion of being locked inside one’s body also functions as a literary or art motif, often used by authors, as mentioned above. When Virginia Woolf wrote On Being Ill in 1930, she addressed illness as a serious literary topic, as important as the themes of love, jealousy, and battles. She described the process the body undergoes and
the spiritual change that accompanies disease, by rebelling against Cartesianism and its conception of the division between the mind and the body. Woolf also disclosed the feeling that in health one has the impression of belonging, of playing an important part in the scheme of social interaction, but the moment disease enters, the sensation of being an outcast creeps in slowly: firstly, out of curiosity and the need to meet pain in the eye, the ill get immediate and unparallel attention. However, as time passes, especially in the case of a chronic disease, or some other condition that has severely incapacitated the body, the responsiveness is gradually lost; healthy people need to move forward, in order to forget and maintain the chimera of pretending to be fit, sane, healthy, and immortal. In these detachment processes, some need to express their passage in the chamber of pain, living or witnessing the visible and invisible marks, some insist on telling a story, either through writing or visually; others need their story to be narrated by witnesses, so it persists as an eternal testament of the pain, loss and trauma. By creating a medium to share her pictures, Ana Rita Fialho found a way of remembering, reminding, and restoring some permanent visibility to her mother’s pain, and through writing and reading about it we are complying in celebrating pain, but also the life of the body that has survived, at the same time as we remember that violence against women cannot be ignored.

REFERENCES


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