

On and in my body

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The first time I saw body map paintings, I was mesmerized. Staring back at me were the bodily insides and outsides of those who had created them: people, all women, who had set out to visually explicate intimate subjects about life, love and loss. The soulfulness of these works moved me immensely, exciting my soul and pulling at my heart. The vibrantly coloured, layered, textured maps were on display at the 2006 international AIDS conference in Toronto.¹ As I walked along the exhibit hall, I worked to calm my nervousness about entering my first global AIDS conference (the only one, it turns out, I have attended). Living with HIV infection is not easy. Diagnosis triggers uncertainty, and it can also be destabilizing and disorienting. We learn how to manage. During the conference, I spoke little, observed a lot and listened even more. Over the next few days, I returned to the maps often because of the comfort and stillness I felt while standing in these sentinels' shadows.

Body mapping as a technique was created in the late 1990s at the University of Cape Town in South Africa. Its guiding idea is to make time, place and space for people with HIV/AIDS to sketch out, paint in and put into their own words what living with HIV looks and feels like. At that time, it allowed individuals with HIV/AIDS in some parts of the world to focus on life with, rather than death by, AIDS illnesses. These life-sized representations are a way for people to document how, as people with illness, they interact and figure out how to contend with all of the opportunities and constraints stemming from their illness. Drawing on arts practice, narrative, art therapy and social theory, the starting point for these works is people's



Body map by Laura Bisailon and Shayo.

first-hand experience and knowledge of living life with HIV/AIDS.² Body mapping has expanded beyond a focus on HIV infection to include other groups of people who, like people with illness, face social and structural vulnerabilities.³

I was one of 12 women invited to attend a body-mapping workshop in rural Ontario, in the fall of 2007. At that four-day session, we were encouraged to be present with each other and to feel, explore and practise expressing connections between our biographies, cultural contexts, and social and political histories by using brushes, crayons, markers, paint and paper. Body mapping seemed to me a helpful vehicle to mitigate the struggle I felt in the workshop to witness others' suffering, not to mention the difficulties I and others had with voicing personal and familial experiences with HIV illness.

The image in this essay is the map that I completed in partnership with Shayo, the woman I had travelled with to the workshop. We worked in response to verbal prompts from session facilitators who carefully guided us, step by step. We see a stylized, grey-faced, crown-headed jester (Shayo) accompanied by a long, lean, faceless, dark-blue figure with electrified hair (me). In contrast and comparison are light and shadow, background and foreground, outer and inner, demons and angels, standing and lying, teacher and student. Metaphorically, her body and mine are intertwined and mutually supporting, thus making our map into a text that evokes solidarity. We remain friends.

For me, the process of creating a body-map painting confirmed two beliefs. Life has shown me that the idea that time heals is not so, despite being so commonly used, especially to comfort those among us in times of distress. This belief has crystallized in the 25 years since my mother's long-term illness and premature death from the slow, creeping, cruel effects of breast cancer, and its chemical and radioactive treatments. If we are fortunate, perhaps time eases the sharpness of our spirit injuries and physical wounds. Tethering our individual bodies to the material conditions of

our lives — as we are asked to do in the body-mapping process — powerfully brings us closer to ourselves and others, intellectually and affectively. From hand, through brush and onto paper, we see, in vivid colour and contour, the ways in which our bodies, and those of others, carry on and in them markings that are expressions of the societies in which we live. Have we the eyes, ears and ability to see, hear and deal with these marks?

A second belief, which was confirmed through the body-mapping process, concerns the purpose and purposefulness of searching for similarities that join us with others. All of us women shared experiences with HIV infection, and, I learned, much more than that. Through talk and silence, I discovered how we, as women, *because we are women*, experienced the social, political and medical implications of our condition in similarly and simultaneously life-affirming and limiting, glorious and gruesome, and temperamental and terrifying ways. Where we focus our gaze on dissonance, we risk eliding, and often neglect, our shared experiences and knowledge. I was initially hesitant to express personal, intimate details in this setting, but when I did so, I only gained: bonds were forged; pearls of hard-earned wisdom shared. Bits of life surfaced: lives being lived with courage, despite illness as a constant companion.

Body maps provide a valuable material basis for those involved in the caring professions, such as doctors, to engage with people who seek to be heard and understood when they present for care. When a person who has created a body map walks a care provider through the creative process and map, remarkable insights into the emic perspectives on life with illness emerge. These are at the heart of what caregivers want to know when caring for others; it is how they can figure out how to assist people.

Although body mapping as a methodological tool has been taken up with enthusiasm by post-positivist health researchers, their positivist counterparts have been less receptive, partly because body mapping is not designed or geared

to testing, measuring or quantifying. Rather, its promise resides blissfully and beautifully in the human connectedness and illumination for health providers and patients who are willing to explore with each other congruencies between inner and outer selves.

Reflecting on this experience a decade later, I remember just how intense, and emotionally and physically trying, it was for me. I recall having felt curious: aware that illness was what brought our group of women together, but wondering what that would mean. I remember feeling jagged: aware of what AIDS did to bodies, meant for bodies, their subjectivities, their families, in the Horn of Africa where I had lived. I also recall feeling heavy: aware that racialized South African bodies, whose social and political suffering had provided the material basis for local researchers and artists to create body mapping in the first place, no longer walked the earth. In these contexts, maps made visible previously unexplored spaces, and so pioneered in important ways.

The experimental process has stimulated creativity, reflexivity and camaraderie; it looms large, and also lovely and luminous, in my life; and its teachings have had an organizing presence on my current artistic practice. For all this, I am grateful and indebted to its creators.

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Editor's note: Shayo has asked that her last name not be used.