

**THE USE OF MEDICAL IMAGERY IN HAND DRAWN ANIMATION  
ARTWORKS: WILLIAM KENTRIDGE'S HISTORY OF THE MAIN  
COMPLAINT AND OTHER WORKS**

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I declare that this dissertation is my own unaided work. It is submitted for the degree of Masters of Fine Arts in the University of the Witwatersrand, Johannesburg. It has not been submitted before for any other degree or examination in any other university.

The advice and direction given by Walter Oltmann, my supervisor has been invaluable. I also thank my parents for their sustained support and understanding in this project.

## Abstract:

In this research I examine two of William Kentridge's hand-drawn animation artworks, *History of the Main Complaint* (1996) and *Weighing and Wanting* (1998), in which medical imagery is utilized to investigate forms of self narration. In these animation artworks Kentridge's choice of medical imagery focuses particularly on technologies used to reflect the interior of the body, such as X-rays, sonar scans and Magnetic Resonance imaging (MRI) scans. He correlates such forms of looking into the human body with ideas of excavating history and revealing personal introspection. Medical imagery is thus used as a form of metaphoric expression of autobiography as the scrutinizing of the interior of the body comes to represent a probing into repressed memories. Kentridge has developed a particular method of animation in which he shapes single charcoal drawings into sequences on film. His technique of drawing images over previously erased ones is strongly associative of memory function and the imagery he uses exhibits highly personal reflections on history and memory related to post-apartheid South Africa.

Drawing on ideas about the self from various disciplines, I formulate a workable definition that will better enable me to illustrate how the self is narrated in Kentridge's work. I go on to show how medical scans provide him with a means to visualize the interior of the human form where the physical interior can come to stand for psychological states of which memory is a key component. I thus consider how Kentridge can be seen to view the interior of the body as a site for memory and briefly touch on current medical findings that suggest that memories are not only stored in the brain but also in the cells of other body parts. I further examine how Kentridge uses the analogy between landscape and memory to create a form of autobiographical and personal documentary and consider how his drawing process can be regarded as a form of self narration by way of its capturing of the passing of time and its speaking of how an image is made autobiographical. I finally discuss my own practical work which similarly explores how the self might be narrated through medical imagery and in my chosen media: stop frame animation, painting and printmaking.

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# Introduction

The primary aim of this research is to examine how William Kentridge uses medical imagery in his hand-drawn animations as a means to narrate the self. His adoption of medical imagery focuses on technologies used by the medical profession to reflect on the interior of the body, such as X-rays, sonar and MRI scans. In this sense he correlates such forms of looking into the body with ideas of excavating history and revealing personal introspection, in other words, he makes the interior of the body stand for a psychological state. This viewpoint of the interior spaces of the body then comes to represent a probing into repressed memories.

CAT scans, X-rays and sonar scans suggest the ‘otherness’ of our insides, separate from our skin. There are parts of us which are under our control and other parts that we are not in control of, such as the unconscious mind. Medical imagery can only reveal the structure of internal organs, not thoughts or feelings of the patient. Kentridge exploits this idea of control and uncontrolled bodily processes to suggest our lack of control over repressed memories. To draw a medical image refigures its original meaning as a diagnostic aid to a personal image rendered by the hand of the artist. His use of the hand drawn scan or other medical imagery becomes a unique way of translating his self narrative into his hand drawn animation artworks. Self narrative refers to a process of communicating your autobiography by how you image aspects of yourself. It is the artist’s concept of him/herself. As Polkinghorne puts it “*self narrative creates meaning by using our mental abilities to piece together human actions and events to create a personal story and then configures these parts into an art piece.*”<sup>1</sup>

William Kentridge is a renowned South African artist who has gained international acclaim for his hand drawn animations. His work in the late 1980s and 1990’s came

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<sup>1</sup> Polkinghorne, D. *Narrative Knowing and the Human Sciences*. New York: State of New York Press, 1988, p6

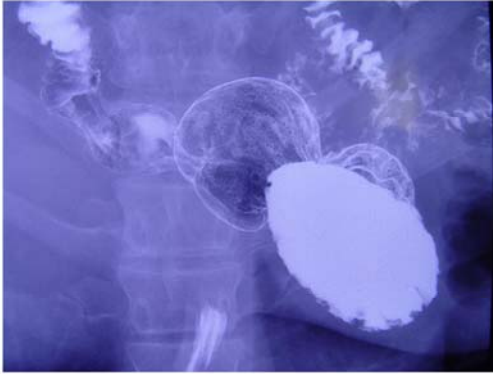


Fig. 1.1 MRI of the colon

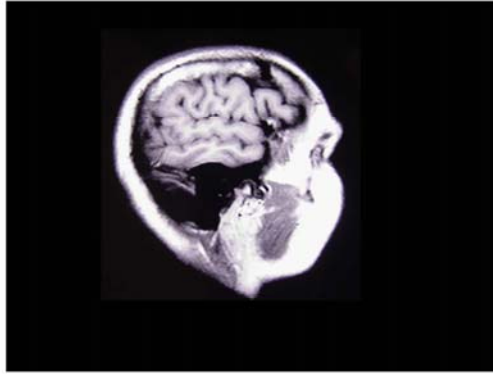


Fig. 1.2 MRI of the Author's brain

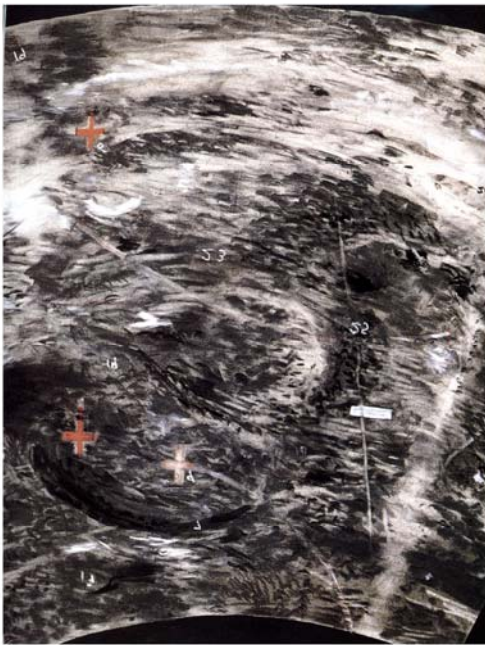


Fig. 1.3 Kentridge's drawn Sonar scan

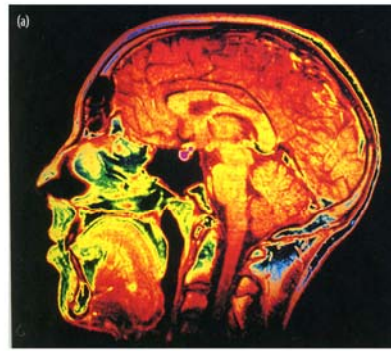


Fig. 1.4 MRI



Fig. 1.5 fMRI

to be seen as a critique of apartheid. However, these works were also in part autobiographical, being highly personal reflections on history and memory. Kentridge has developed a particular method of animation in which single charcoal drawings are shaped into sequences. His drawing technique is strongly associative of memory function in that the images he draws are erased in the process and new images are superimposed on the erased images. Kentridge sketches several characters or alter egos in these drawings. For example, there is Felix, who is a dreamer, Soho Eckstein, a capitalist building contractor and his wife Mrs. Eckstein. The main character in Kentridge's animations is Soho. It is Soho's memories that appear embedded within his body and are 'excavated' by Kentridge through his use of imagery produced by medical diagnostic equipment.

My own work explores how the self might be narrated through medical imagery particularly through media such as stop frame animation, painting and printmaking. Whilst my work has a very different approach and content, there are correspondences of ideas and forms to Kentridge's animation artworks. This has motivated my interest in his work and my decision to focus on his animations which are particularly rich in their use of medical imagery as a means to narrate the self. The works of Kentridge on which I will focus are *History of the Main Complaint* (1996) and *Weighing and Wanting* (1998).

### *History of the Main Complaint* (1996)

The opening scene of this animation shows a scrunched up piece of paper blowing through the air in a city. This is followed by a sequence of curtains opening to reveal Soho in his pinstripe suit, lying in a hospital bed with an oxygen mask over his face. There is an intravenous bag with blue liquid in it and a sonar scan next to his bed. On the sonar screen the words 'History of the Main Complaint' are superimposed by images of Soho's internal body that are marked with red x marks.



Fig. 1.6 History of the Main Complaint (1996)



Fig. 1.7 History of the Main Complaint (1996)



Fig. 1.8 History of the Main Complaint (1996)



Fig. 1.9 History of the Main Complaint (1996)



Fig. 1.10 History of the Main Complaint (1996)



Fig. 1.11 History of the Main Complaint (1996)



Fig. 1.12 History of the Main Complaint (1996)

In the ensuing sequence it appears that some time has elapsed and Soho is seen without an oxygen mask. A doctor stands next to his bed wearing an identical pinstripe suit. The rest of the medical team arrives, dressed in the same way. A stethoscope descends down the X-ray image of Soho's spinal column that mutates into a punch, then into a telephone and finally into a typewriter all within the X-ray image. The scene cuts to a frame where Soho is driving his car. Eyes are reflected in the rear view mirror of the car. The windscreen of the car is murky. The dirt on the windscreen is wiped clean by the car's windscreen wipers and the scene changes to an open road. From this point onwards the screens of the sonar scan and car's windscreen merge back and forth.

The scene reverts back to the previous moment where two stethoscopes meet, inducing sparks. A dinner scene is wiped away by the car's wipers. Images of Soho's industrialist equipment follow and are wiped away. Two red crosses appear and are wiped away. In the car, Soho passes a body lying on the roadside. He passes a fight where two men are brutally attacking a third man. The blows are marked by red crosses. The victim's skull is superimposed onto Soho's skull. Sequences of images follow, a windscreen is shattered, a watch is smashed, a foot, a Sunday roast, electrodes that wrap around a foot and mutate into a penis. The car journey continues and a person runs across the street and collides into Soho's car. The body is flung upwards onto the windscreen. Soho's eyes open. The following scene shows the curtains open and Soho is back at work.<sup>2</sup>

In the *History of the Main Complaint* (1996), Kentridge uses X-rays and CAT scans as a form of soul searching and autobiographical narration. Used as a form of self introspection, these hand drawn internal body images become metaphors, messages from the 'interior' of a person that suggest the revealing of long forgotten repressed memories.

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<sup>2</sup>Cameron, Dan, Christov-Bakargiev and Coetzee, J., M. *William Kentridge*. New York: Phaidon Press, 2003, p.93



Fig. 1.13 Weighing and Wanting (1998)

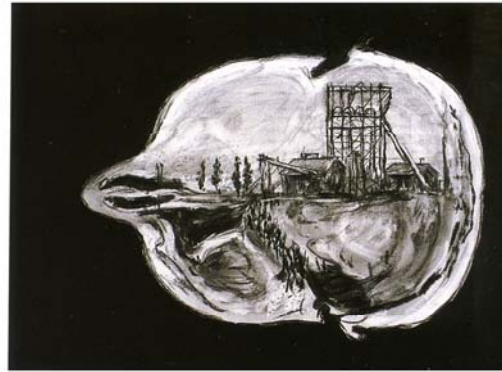


Fig. 1.14 Weighing and Wanting (1998)



Fig. 1.15 Weighing and Wanting (1998)



Fig. 1.16 Weighing and Wanting (1998)

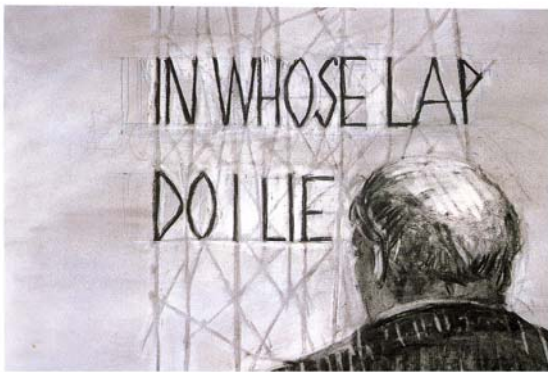


Fig. 1.17 Weighing and Wanting (1998)



Fig. 1.18 Weighing and Wanting (1998)

Weighing and Wanting (1998)

This animation piece picks up where *History of the Main Complaint* (1996) left off. The opening scene has a teacup with steam rising from it, a living room and tipping scales, and then unexpectedly jumps to a scene of an MRI chamber. A large rock appears within the landscape. Red lines are scratched into the rock. Soho is shown in a room clad in his pinstripe suit going into the MRI chamber that reveals to us images of his brain. Slices of his brain are shown that merge into memories of landscapes which then amalgamate into a landscape where Soho is taking his evening stroll. He picks up a rock and examines it. The scene cuts back to the first image of the big rock. Images of Soho and Mrs. Eckstein being intimate with each other within the layers of the rock are shown. The scene then cuts back to the image of the brain scan where curved lines move up and down, reminiscent of a moving scale. A teacup is placed on the one end of the scale.

The scene reverts back to Soho listening to the sea through a teacup. A scan of Soho's brain with the teacup over his ear is shown. The MRI continues to produce images of slices of Soho's brain. Red lines appear on the brain scans that merge into electricity pylons. Pylons are built up within the landscape and the images of Soho and Mrs. Eckstein are replaced by images of pylons. An image is placed within the rock with Soho's head against a telephone that changes into a black cat. The camera pans out of the scene and Mrs. Eckstein's back merges into a pylon. Soho is back in his living room where pylons continue to form and then are erased and the words 'In whose lap do I lie?' appear.

A bird flies through the landscape and the scene returns to the MRI image of Soho's brain. Pylons crash down. The images of Soho and Mrs. Eckstein within the rock are smashed into small pieces. The cup on the scale is broken. The pylons in the landscape continue falling. Mrs. Eckstein's naked body is revealed. This merges into a landscape. Soho has returned to his living room. He listens to the sea again through a teacup. Separate images of Soho and Mrs. Eckstein are shown in the rock. The scene reverts back to Soho and Mrs. Eckstein and they turn to face each other. Two red dots in the MRI scan

join like the fertilization of the ovum in a woman's womb. The fractured pieces of the scenes within the rock rejoin. The scale is shown with the rock on the one end and the cup on the other end. Soho appears with his head on the rock.

In an examination of the above works I will explore how the self is narrated, focusing on the medically examined human body in both my own work and Kentridge's, as well as demonstrating how this kind of work can be regarded as a form of autobiographical self narrative. In the process of examining the narration of the self through medical imagery in animation I shall demonstrate the appropriateness of the autographic quality of hand-drawn animation artworks as a means of narrating the self, together with the manifestation of personal memory that is key to self-narration.

Chapter one will define what is meant by a 'sense of self' and how it is relevant to my work under discussion and explores how Kentridge uses medical imagery as a metaphoric expression of autobiography. A workable definition of the self will be formulated that will enable me to illustrate how the self is narrated in Kentridge's work. This chapter will also give a brief introduction on the role of medical imagery in defining a self and how medical imagery influences the way in which the self is perceived.

Chapter two reveals how X-rays, sonar scans etc. provide a means to interact with and visualize the interior of the human body within Kentridge's animation artworks. In the context of this it is important to note that it is not just the interior of the body that is significant, but how the physical interior body stands for psychological states of which memory is a key component. Memory is key, as it is an integral part of the creation of Kentridge's self narrative. It is also what makes his self narrative unique as memory is what separates one person from another. No persons have exactly the same memories.

Chapter three probes into the manner in which Kentridge uses medical imagery for the specific purpose of 'body memories.' The brain may not be the only place where memories are stored. There is evidence to suggest that memories may also be stored within the cells of the various body organs. I will investigate how the internal body can be seen as a site for memory in Kentridge's hand drawn animation artworks *History of the Main Complaint*, (1996) and *Weighing and Wanting* (1998).

Chapter four focuses on how Kentridge uses the interior body as a documentary space by placing familiar landscapes of Johannesburg's East Rand within the scans of the body and how he uses Soho's body literally as a site for personal reflection and memory storage. It shows how the scans reveal his use of the analogy between the landscape and memory.

Chapter five examines the manner in which Kentridge's drawing process can be regarded as a form of self narration. Kentridge's animation artwork registers a history and marks the passing of thoughts on a single sheet of paper. His animation process makes use of his mark making process and how an image can be made autobiographical through this process combined with body movement. I will evaluate how Kentridge's gestural marks and body movements used in the drawing process are appropriate to what he is doing as they inscribe a sense of 'authorship' where the animator not only creates unique gestural marks, but also draws on his knowledge of drama and theatre to feel, act and time out movement with his body movements while creating an animation artwork.

Chapter six considers how Kentridge's art creation process has influenced my own creative work. The similarity between Kentridge's and my own work lies in the use of self narration through the use of medical imagery. While Kentridge's accent is on documenting the drawing process and his personal memories, my focus is on recording personal journeys and experiences using the mediums of stop frame animation, painting and printmaking. My animation process is similar to that of Kentridge, but differs in that I utilize computer programs such as *Macromedia Flash™* version eight, *Macromedia Freehand™* version ten and *Adobe Photoshop CS™* version eight to enhance or create certain aspects of my drawings. In this final chapter I deal with the various stages of my art creation process as well as discuss individual artworks produced in the context of this research topic.

# Chapter One

## Concepts of the Self

The idea of a ‘sense of self’ is central to my research project. The process in which the self may be constructed as well as the diverse roles the self may assume will be explored as well. I intend drawing on concepts of the self from various disciplines<sup>3</sup> with the express purpose of illustrating how the self is narrated through medical imagery in Kentridge’s *History of the Main Complaint* (1996) and *Weighing and Wanting* (1998). In my search for a workable definition of the self for the purpose of this dissertation, I found numerous definitions, most of which were irrelevant to the topic at hand. I have worked with eleven definitions which I consider helpful in arriving at definition of a sense of self which would relate to Kentridge’s work. My selection of appropriate definitions from different disciplines is has been beneficial to my research as it provides a summary of my viewpoint of what ‘self’ is and how it can be appropriately applied to my research.

The focal point of my research for this dissertation will be on the body as a site for memory and the construction of the self through medical imagery and self-narrative. The explicit use of the word ‘site’ is to demonstrate the significance of Kentridge’s practice of using the interior spaces of the body as a metaphor for landscape and for the revelation of repressed memories. To quote Lisa Cartwright in *Screening the Body* (1995): “*the observed body comes to be viewed as a vehicle, a site of living processes and memory.*”<sup>4</sup> The self is relevant to Kentridge’s artworks as his work is regarded as autobiographical in that it focuses on the re-construction of his self whilst growing up in South Africa. A significant amount of his work is nostalgic, reflecting on his childhood experiences. The major theme in the artworks under review is his South African background, his family background and the process of memory.<sup>5</sup>

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<sup>3</sup> These disciplines include approaches from sociology, psychology and philosophy.

<sup>4</sup> Cartwright, Lisa *Screening the Body: Tracing Medicine’s Visual Culture*. London: University of Minnesota Press, 1995, p 82

<sup>5</sup> In addition to what one can infer from the concept of the self I will consider how the notion of personal identity relates to it and how the process of self-construction features in narrative creation, particularly as visualized through medical imagery.

Kentridge uses the layering of images of the interior of the body as a technique of montage in his artworks which can be deemed to be a construction of a self incorporating an autobiographical element of his memories of the apartheid era. This method of representing the self acts as a form of embodiment of the self. At the same time it provides a means to portray concepts such as emotions and memories. Kentridge makes use of images of the interior spaces of the body as a depiction of his critical self examination: the re-composition and 'decomposition' of the self (implied in his drawing erasures and refiguring of the body) where the self is critically looked at and revised according to past experience. Evidence of this is in his adoption of the technique of medical imagery to scan the interior body, searching for repressed memories. Through his constant drawing, erasure and redrawing, a metamorphosis takes place, revealing images of internal organs such as the brain which mutates into interior landscapes of the city of Johannesburg. These morphings represent his memories of living in South Africa during the apartheid era, e.g. in scenes representing Soho's memories, such as in *History of the Main Complaint* (1996) featuring images such as a dinner scene, a roast, a telephone and a foot which mutates into a penis, all appearing within a sonar scan. These images or sequences appear to represent his placement of memories within the interior body.

Kentridge's use of personal background and memory is pertinent to his concept of self as it influences his animation creation. He uses images of modern houses and memorabilia from the past such as an old Bakelite phone, an item which was in popular usage in the 1960's in Johannesburg's suburbs where he lived as a child. The self is a complex and subjective term. Numerous attempts have been made to arrive at a working definition or understanding of the concept and a few of these definitions will be briefly looked at. The perspective of the self from the viewpoint of sociologists will be examined firstly.

## SOCIOLOGICAL VIEWPOINT

Sociologists view the individual in terms of the impact that other people, the wider society as well as cultural and moral norms have made on the individual. As social theorist Anthony Elliott points out, the self is constructed from within the society in which a person grows up in conjunction with the relationships formed with other selves. Culture influences and conditions our perceptions of reality whilst programming the structure of our thoughts, feelings and actions.<sup>6</sup> Culture is manifested in Kentridge's portrayal of Soho as 'putting on a show' by the manner in which he presents himself to society. Soho wears a pin stripe suit at all times thereby presenting himself at his best to society.<sup>7</sup>

In their book titled *Autobiography* (2004), Steiner and Yang state that "*the process of creating an autobiography, be it in writing or creating an artwork, also allows one to see oneself as someone else.*"<sup>8</sup> This can be regarded as a 'witness' perspective which is a point of view in which we are watching ourselves from the inside, but creating an external interpretation of ourselves. Writing or creating artworks in this manner becomes another way of constructing an identity. Elliot writes that people portray themselves according to their perceptions of their actions and how other people define these actions. We adjust and revise our self concepts according to how other people perceive us.<sup>9</sup> Writing an autobiography is also a method in which we construct and perceive ourselves, but these perceptions are directly influenced by the perceptions of other people and the culture in which we grew up, as suggested earlier.

While *History of the Main Complaint* (1996) and *Weighing and Wanting* (1998) present a form of introspection and inner soul searching by the use of medical imagery, there is also a political undertone to Kentridge's work. He states: "*I have never tried to make*

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<sup>6</sup> Elliott, Anthony *Concepts of the Self*. USA:Polity Press, 2001 p34

<sup>7</sup> In *Concepts of the Self* (2001) Elliot suggests that "*people routinely engage in interactional rituals geared towards moral order, in which respect for others, social tact and interpersonal trust are expressed.*"<sup>7</sup> Morality here "*is not just a set of external rules or prohibitions, it is rather a binding feature of the complex ways in which individuals achieve a consistent definition of their worlds in daily interaction.*"

<sup>8</sup> Steiner, Barbara and Yang, Jun *Autobiography*. London: Thames and Hudson , 2004 p15

<sup>9</sup> Elliott, Anthony *Concepts of the Self* USA:Polity Press, 2001, p26

*illustrations of apartheid, but the drawings and films are certainly influenced by, and feed off, the brutalized society left in its wake.*"<sup>10</sup> Within the landscapes created by Kentridge, medical imagery appears to be a way of coming to terms with the reality and the brutality of the struggle against the atrocities committed during the apartheid era. Medical scans can also be considered as an intentional (certainly not unintentional) part of Kentridge's implicit metaphor of repressed memories.

Giddens's theory of "*self-reflexiveness*" provides a sociological perspective of the self. It refers to a self-conscious awareness of being the origin of your thoughts, feelings and perceptions.<sup>11</sup> Humans have the capacity to consciously reflect on themselves in an attempt to understand, evaluate or change who and what we perceive ourselves to be at any given point in time. According to Giddens's theory, reflexiveness can be defined as a "*self-defining process that depends on monitoring of and reflection upon psychological and social information about possible trajectories of life.*"<sup>12</sup> This definition is appropriate to my research of Kentridge's usage of medical imagery in his animation artworks by the manner in which Kentridge utilizes medical imagery that goes beyond the customary practice of utilizing medical imagery. It also links to his way of consciously reflecting on internal unconscious processes such as feelings, thoughts, actions and repressed memories as evident in both *History of the Main Complaint* (1996) and *Weighing and Wanting* (1998).

## PSYCHOLOGICAL PERSPECTIVE

Swiss psychiatrist Carl Gustav Jung asserts that the self develops gradually through a process of individualization which is not fully developed until late maturity [if development of the self is ever fully attained].<sup>13</sup> This concept of the self is also appropriate to my research as Kentridge's animation artworks can be likened to a gradual process of individualization seen via his process of drawing, erasure and redrawing of images on a single sheet of paper and tracking these changes with the assistance of the

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<sup>10</sup> Davie, Lucille *One City. Three Artists* [http://www.joburgnews.co.za/2005/sep/sept26\\_artists.stm](http://www.joburgnews.co.za/2005/sep/sept26_artists.stm) accessed 03/28/2008

<sup>11</sup> Op. cit.: p5

<sup>12</sup> Elliott, Anthony *Concepts of the Self*. USA: Polity Press, 2001, p37

<sup>13</sup> Goldenson, Robert, M. *Longman Dictionary of Psychology and Psychiatry*. New York and London: Longman, p366

filming process. Working in this manner suggests that there is a gradual developmental process that is akin to the process of individualization where the self is constantly constructed and reconstructed during a person's lifetime.

The psychologist William James advocates that in our everyday life we constantly engage in the process of 'self-shaping' and 'self-cultivation' by acting on the circumstances of the world as well as how we relate to others. We assimilate or disregard new ideas in relation to our constructed identities.<sup>14</sup> Kentridge has fabricated an identity for his protagonist, Soho, as a South African property developer, mine owner, civic benefactor and lover. This fabrication of identity can be seen in his depiction of Soho in his pin stripe suit, his cigar smoking and his demeanor that can be said to reflect such a process of 'self-shaping' and 'self-cultivation.' A further illustration of this procedure can be seen in Kentridge's animated film making process, i.e. his drawing and subsequent redrawing can be viewed as a means of 'self-shaping' and 'self-cultivation.'

The self, according to many psychoanalytic theorists, in particular, Sigmund Freud is structured by 'unconscious' promptings which are expressed by desires, wishes, fantasies, dreams and repressed memories.<sup>15</sup> The concept of repressed memories is an important component of this research. Repression, according to the *Longman Dictionary of Psychology and Psychiatry* (1990), "is the basic defense mechanism in psychoanalysis which excludes painful experiences and unacceptable impulses from consciousness."<sup>16</sup> As will be demonstrated in later chapters, repressed memories are a strong feature in Kentridge's work, especially in *History of the Main Complaint* (1996) and *Weighing and Wanting* (1998). In these works, Kentridge seems to imply that there is a mental life within the interior parts of the body which we are not in control of, examples being the heart, kidneys and intestines. In chapter two I intend to explain how body memories may be repressed within the interior organs of the body. The term 'body memories' refers to the body's capability of storing memories in any organ and not just in the brain. These memories are often characterized with phantom pain memories of a part or limb of the body - the body appears to remember the

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<sup>14</sup> Taylor, Charles *Sources of the Self*, Cambridge, Mass.: Harvard UP, 1990, p2

<sup>15</sup> Goldenson, Robert, M. *Longman Dictionary of Psychology and Psychiatry*. New York and London: Longman, p366

<sup>16</sup> Ibid: p633

trauma a person has suffered as in the case of the continued sensation of the presence of a limb which has been amputated, i.e. a phantom limb. Phantom pregnancy is another example of this phenomenon.

## PHILOSOPHICAL VIEWPOINT

In *Concepts of the Self* (2001) Anthony Elliott states that: “*The self is not a fixed entity, but flexible, fractured and fragmented.*”<sup>17</sup> Kentridge appears to reinforce the notion that the self is not a fixed entity by creating artworks that are open to the viewer’s interpretation by way of ambiguity. A prime example, Kentridge’s interpretation of *History of the Main Complaint* (1996) is not immediately obvious, and as in most of his artwork, there is no fixed narrative and the viewer is invited to come up with his/her own interpretations.

Steiner and Yang note that “*whilst advocating that the self is not a fixed entity, it needs to be stressed that it is an ideological construct.*”<sup>18</sup> Ideology in this context is a system of ideas and representations which dominate the mind of a man, woman or social group. This is often an unconscious construction which creates a distortion between the ‘imaginary’ self and the ‘real’ self.<sup>19</sup> The important point about ideology is that it is formed unconsciously. We regard our convictions and interpretations as natural and true because we are situated within ideological constructs [our own minds, social groups and family environment] that filters things in a particular way and it rewards us for conformance. Peer pressure is another example according to which, for example, young people may conform to the ideologies of their social group in order to obtain the ‘reward’ of being accepted into a social group. The perception of self is also influenced by the culture in which a person has grown up. In this sense other people influence and condition our perceptions of reality whilst programming the structure of our thoughts, feelings and actions.<sup>20</sup>

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<sup>17</sup> Elliott, Anthony *Concepts of the Self*. USA:Polity Press, 2001, p24

<sup>18</sup> Steiner, Barbara and Yang, Jun *Autobiography*. London: Thames and Hudson, 2004, p13

<sup>19</sup> Althusser, Louis *Lenin and Philosophy* London: The Gresham Press 1971, p153

<sup>20</sup> Elliott, Anthony *Concepts of the Self*. USA:Polity Press, 2001, p34

We are constantly explaining ourselves to others and when doing so, we are trying to convince ourselves of our identity as well.<sup>21</sup>

This perspective of self as a form of ideology applies to Kentridge's animation artworks as well as presenting aspects of his ideologies. Soho may be regarded as a construction of both his 'real' and an 'imaginary' self as both aspects are portrayed as memories of Kentridge. His artworks also contain an unconscious component, i.e. the part of the mind which is inaccessible to the conscious mind, but affects behaviour, emotions, etc. According to Louis Althusser, the 'perspective of self' may be regarded as a form of ideology as it is formed unconsciously: "*In ideology men represent their real conditions of existence in an imaginary form.*"<sup>22</sup> Similarly, Kentridge in his drawing, erasure and redrawing technique pieces together his interpretation of reality in his animation artworks.

Self-presentation is another facet of Kentridge's work in his perception of the self. Modes of self-presentation involve screening off aspects of the identity which are regarded as inappropriate to the social setting, such as it not being considered appropriate dress to go to the office in your swimsuit.<sup>23</sup> Kentridge displays this form of self-presentation in his portrayal of Soho in a pinstripe suit, even when it may be inappropriate to do so, such as when lying in the hospital bed or when undergoing an MRI scan.

Identity formation may be regarded as a fundamental aspect of one's sense of self. The gist of identity is that essentially we remain the same person, but in many and diverse ways we are constantly constructing and reconstructing aspects of our identities. Three main aspects of identity formation will be looked at, namely process, behaviour and the affect of words:

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<sup>21</sup> Polkinghorne, D. *Narrative Knowing and the Human Sciences*. New York: State of New York Press, 1988, p 150

<sup>22</sup> Althusser, Louis *Lenin and Philosophy* London: The Gresham Press 1971, p153

<sup>23</sup> Self-presentation <http://reference.com/search?q=self-presentation>

1. Identity formation may be viewed as an ongoing process in that our identities are constructed and reconstructed many times during our lifetime as a consequence of our actions, the thoughts we think and the words we say. For example, it is possible to alter a pessimistic outlook of the world by acting and thinking in a more optimistic way. In this manner you continue to be the same person, but have reconstructed your identity to being a more optimistic person.
2. Behaviour forms part of our identity. If you are a gentle person, gentle behaviour will be a feature of your identity. At the other end of the scale, a person with an aggressive disposition will display an aggressive identity.
3. Words have the capacity to construct subjective meaning as well as influence the manner in which our experiences are interpreted including how these experiences are constructed into memories. Emotionally charged words are able to conjure up different memories. Some words or phrases have the ability to be emotionally charged, especially if they are accompanied with strong emotions such as fear or hate.

Kentridge's animation artwork creation process can be likened to the concept of identity formation. In his drawing, erasure and redrawing process, a form of construction and reconstruction of identity takes place. His drawn mark is a distinguishing aspect of his animation artworks as well as his customary practice of employing body movements that enable him to create marks on the paper. Kentridge's asserts that "*drawing is done with the entire body, standing up so that you draw with yourself sometimes in a dance, sometimes stand-off on your canvas on oversized torn off paper*"<sup>24</sup> confirms this aspect. Behaviour plays a role in Kentridge's depiction of caricature of Soho, in particular, his representation of Soho's gluttony as a part of his identity. Soho is rendered into a caricature of an obese person. Emotion and behaviour are linked in that emotion can affect behaviour and vice versa. There are emotions of either tenderness or anger, either gentle or strong, either painful or pleasurable, each evoking its own appropriate response

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<sup>24</sup>The Space in between <http://www.culturebase.net/artist.php?34> accessed 03/23/2007, p5

to the emotion. In *Weighing and Wanting* (1998) an element of emotion is created in the scene where the words ‘on whose lap shall I lie appear? The viewer is able to interpret Soho’s emotional pain on separation from his wife, Mrs. Eckstein.

Arriving at a few working definitions of self narration I will conclude my investigation into the concept of self in this chapter. Self narrative is a process of autobiography, i.e. the manner in which you image aspects of yourself. It is the individual’s concept of him/herself. “*Self narrative creates meaning using the mental realm to piece together human actions and events to create a particular outcome and then configures these parts into a whole episode.*”<sup>25</sup> Polkinghorne refers to the philosopher Roland Barthes who expressed the view that narratives perform significant functions: “*At the individual level, people have a narrative of their own lives which enables them to construe what they are and where they are headed. At the cultural level, narratives serve to give cohesion to shared beliefs and to transmit values.*”<sup>26</sup>

Kentridge’s animation artworks are constructed in a manner wherein he employs a procedure that entails drawings depicting his thoughts and piecing these thoughts together to create a narrative. A new sheet of paper is used for each new scene. To quote Polkinghorne: “*narrative thoughts or sentences give significance to prior events by linking them to important following events.*”<sup>27</sup> Kentridge commences a drawing by piecing a narrative together according to the thoughts he has rather than working with the end in mind. ‘Narrative’ thus becomes a kind of organizational scheme expressed in story form. Self narration, when used in this context, “*demonstrates one of the basic ways in which we as people represent our internal worlds.*”<sup>28</sup> The resulting ambiguity contained in *History of the Main Complaint* (1996) allows for the viewer’s own contemplation and interpretations.

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<sup>25</sup> Polkinghorne, D. *Narrative Knowing and the Human Sciences*. New York: State of New York Press, 1988, p6

<sup>26</sup> Barthes in Polkinghorne, D. *Narrative Knowing and the Human Sciences*. New York: State of New York Press, 1988 p14

<sup>27</sup> Ibid: p50

<sup>28</sup> Ibid

The above definitions are by no means exhaustive. In examining some of the more appropriate definitions of self to my project I have tried to arrive at a working formulation which I summarize as follows:

*“The self is not a fixed entity, but flexible, fractured and fragmented.”*<sup>29</sup>

Sociologists view the individual in terms of the impact that other people, the wider society as well as cultural and moral norms have on the individual. The self is constructed from within the society in which a person grows up in conjunction with the relationships formed with other selves.<sup>30</sup> The psychologist William James suggests that in our everyday life we constantly engage in the process of ‘self-shaping’ and ‘self-cultivation’ by acting on the circumstances of the world as well as how we relate to others. The notion of identity formation is important to the idea of the construction of a self, and can be said to feature three main components: process, behaviour and affect of words. The self develops gradually through a process of individualization which is not fully attained until late maturity [if it is ever attained].

Self – reflexiveness is an important component in the creation of a self. We as humans have the capacity to consciously reflect on ourselves in an attempt to make sense of, understand, evaluate or change who and what we perceive ourselves to be at any given point in time. It is also important to note that the self is an ideological construct. People represent their ‘real’ conditions of existence in an imaginary form. The self, according to many psychoanalytic theorists, is structured by ‘unconscious’ promptings which are expressed by desires wishes, fantasies, dreams and repressed memories.<sup>31</sup> In this context of self expression, writing or creating artworks can involve ways of creating a self or an identity, as can be demonstrated in the animation works of Kentridge. Frequently, modes of self-presentation involve screening off of aspects of the identity which are regarded as appropriate to the social setting

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<sup>29</sup> Elliott, Anthony *Concepts of the Self*. USA:Polity Press, 2001, p24

<sup>30</sup> Ibid

<sup>31</sup> Goldenson, Robert, M. *Longman Dictionary of Psychology and Psychiatry*. New York and London: Longman, p366

Finally, “*Self narrative creates meaning using the mental realm to piece together human actions and events to create a particular outcome and then configures these parts into a whole episode.*”<sup>32</sup>

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<sup>32</sup> Polkinghorne, D. *Narrative Knowing and the human sciences*. New York: State of New York Press, 1988, p6

# Chapter Two

## Visualizing the Body through Medical Imagery

The medical imaging techniques used by Kentridge in his animation artworks imply an “*all-seeing presence*”, to quote from Lisa Cartwright in her book *Screening the body*,<sup>33</sup> and relates to the notion of the *Medical Gaze*, a term coined by French philosopher and critic Michel Foucault in his book *The Birth of the Clinic* (1963). It is used to denote the often “*de-humanizing method by which medical professionals separate the body from the person. Foucault uses the term as an attempt to describe the creation of a knowledge field concerning the body. [...] According to him, the material and intellectual structures which give rise to the possibility of carrying an analysis of the body was mixed with power issues: entering the field of knowledge, the human body also entered the field of power, becoming a target for manipulation.*”<sup>34</sup>

In the Hollywood film *Requiem for a Dream* (2000), Ellen Burstyn’s character is humiliated and ultimately ignored by her general practitioner as she slowly succumbs to an amphetamine addiction. In another film *Fight Club* (1999), Edward Norton’s character, suffering from insomnia and begging for help from his doctor, is prescribed a number of ineffective placebo remedies. Both films may be read as texts in which the ‘expert’ doctor fails to note the human dimensions of illness and instead prescribes remedies based on an objectifying gaze.<sup>35</sup> In a similar manner, Kentridge makes use of the concept of this objectifying gaze by subjecting Soho’s body to scrutiny by way of medical imaging devices. This ‘surveillance’ acts as a form of control. Soho, in *History of the Main Complaint* (1996), has no say in his medical treatment as he is unconscious and the doctors are free to dictate whatever medical treatment they deem necessary.

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<sup>33</sup> Cartwright, Lisa *Screening the Body: Tracing Medicine’s Visual Culture*. London: University of Minnesota Press, 1995, p45

<sup>34</sup> *Medical Gaze* [http://en.wikipedia.org/wiki/Medical\\_gaze](http://en.wikipedia.org/wiki/Medical_gaze) accessed 08/05/08, p1

<sup>35</sup> Ibid

Using the medium of medical diagnostic imagery to represent Soho's interior landscapes, the interior of Soho's body is opened to examine the inner workings of his memory. Medical imagery such as X-rays, sonar scans and so forth as utilized by Kentridge may be seen to provide a means to interact with and visualize the interior the workings of the human body. Over the past three decades medical science has afforded us with technology to track the body's inner geography, providing us with a visual image so that we may view the body's 'inner' landscape. Kentridge expresses the opinion that medical imagery can indeed see everything in the body to the extent that it: "*suggests that medical imagery can even reveal emotive aspects of a person as well as their memories.*"<sup>36</sup> He applies this concept literally by inserting images of past events and memories within scenes depicting medical imagery. I will be exploring in both Kentridge's as well as my own work the question of the relationship between the interior human body and space, mediated by the sense of technological sight. The term 'technological sight' refers to the ability of medical diagnostic machinery to create images of the interior body. These medical imaging devices enable us to 'see' more than the naked eye can.

Medical imagery can therefore be regarded as a space wherein the physical body enters into the realm of scientific knowledge. Medical imaging technology wherein the body is 'sliced', 'dissected' and placed under careful examination provides us with the ability to visualize important body components in detail. This is a valuable resource for the diagnosis and surgical procedures for the treatment of much pathology. In a similar way, Kentridge's animations can be seen to involve close scrutiny by Kentridge and visualization through his constant procedure of erasure and redrawing. It can be understood to be a form of 'working through' of ideas and images not unlike trauma therapy technique which allows repressed memories to surface.

Repression and memory recall are notions linked to Post Traumatic Stress Disorder (PTSD). PTSD is a psychological disorder affecting individuals who have experienced or witnessed a profoundly traumatic event. Examples of the disorders include

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<sup>36</sup> Kentridge quoted in Mirzoeff, Nicholas. *The Visual Culture Reader*. London and New York: Routledge, 1998, p183

symptoms such as amnesia, exaggerated fright response or flashbacks of the experience.<sup>37</sup> People who have experienced traumatic experiences need to talk through these experiences to come to terms with them. Only after the person has spoken about the trauma can he/she begin to understand what has happened and the healing process can commence.<sup>38</sup> Vanessa Thompson suggests that the horrific events committed during the apartheid era caused a form of PTSD which she calls “*Complex PTSD.*” Causes that bring about the onset of PTSD include “*a history of subjection to totalitarian control for prolonged periods of time (months to years) as is the case of hostage survivors, prisoners of war, concentration camp survivors and survivors of some religious cults.*”<sup>39</sup>

In the *History of the Main Complaint* (1996), Kentridge’s drawing/erasure/redrawing process resembles the healing process of a person suffering from the effects of PTSD. This healing process is shown in the constant erasure of images (repressed memories are being erased), new images are drawn over the erased images, which seems to indicate that a process of healing is taking place. There thus appears to be an analogy between Kentridge’s use of medical imagery and a psychologist’s therapy session wherein the therapist is attempting to retrieve repressed memories believed to be at the root of a person’s mental illness. This can also be recognized in Kentridge’s usage of sketches of medical equipment to represent the scanning of the interior body (i.e. searching for repressed memories) together with his ceaseless erasure/redrawing that metamorphosizes into images of interior landscapes of the city of Johannesburg, which symbolize memories of living in South Africa during the apartheid era. In a like manner, the portrayal of Soho’s memories, as in the instance of driving past a figure lying on the ground, where one man is kicking another person and colliding into another person with his car, points to the complicit involvement of Soho in the acts of atrocity during the apartheid period. In *History of the Main Complaint* (1996) Kentridge seems to suggest a way of coming to terms with the trauma of the apartheid era.

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<sup>37</sup> Goldenson, Robert, M. *Longman Dictionary of Psychology and Psychiatry.* New York and London: Longman, 1984 p572

<sup>38</sup> Berstein, Albert, J. *How to Deal with Emotionally Explosive People.* New York: McGraw-Hill, 2003, p73

<sup>39</sup> Thompson, Vanessa, *Healing violence in South Africa: A textual Reading of Kentridge’s Drawings for Projection.* Master’s Dissertation, 2005, p111

Dubow and Rosengarten point out that “*Kentridge’s film [History of the Main Complaint (1996)] was made in 1996 in direct response to the establishment in April of the Truth and Reconciliation Commission, set up under auspices of the National Unity and Reconciliation act of 1995.*”<sup>40</sup> The TRC’s aim was “*to provide as complete a picture of the nature, causes and extent of gross human rights violations committed between March 1 1960 and December 5 1993. Over a five year period the commission provided a public forum for the victims of human rights violations with the opportunity to confront their perpetrators and to expose the brutality of apartheid.*”<sup>41</sup> In a similar manner Kentridge uses *History of the Main Complaint* (1996) to expose the horror of the brutalities committed during the apartheid years.

Kentridge adapts the practice of medical imagery by inserting scenes of landscapes and memories into medical images in *History of the Main Complaint* (1996) and *Weighing and Wanting* (1998) to portray the horror of massacre victims, oppression of the African population and his attempts at trying to come to terms with this situation as a white South African male. He examines a phase of South African history dominated by the white apartheid government as well as during the period of transition during which Nelson Mandela became the first president in the first internationally recognized democratic, ‘free and fair’ election in South Africa in 1994: “*The landscape is both a witness and a victim of South Africa’s troubled history.*”<sup>42</sup> Kentridge seeks to record the memories of what occurred on these landscapes. He states that he does not go out to make images representing apartheid, but his drawing process of erasure and redrawing “*constitutes a process of erosion and renewal within the landscape of the society in which he lives, that society being South Africa during the apartheid era.*”<sup>43</sup> Landscape is an important part of Kentridge’s artistic interpretation as everything in the landscape that has been made by both man and beast also has the potential to be unmade or reconstructed. This is also true of memories. Memories can be repressed, forgotten, reconstructed and recalled

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<sup>40</sup> Dubow, Jessica and Rosengarten, Ruth “*History as the Main Complaint: William Kentridge and The Making of Post-Apartheid South Africa*”. In ‘Art History’ vol. 27 No. 4, September 2004, p678

<sup>41</sup> Ibid p 679.

<sup>42</sup> Benezra *et al.* ; interview, Dan Cameron William Kentridge/ essays Chicago : Museum of Contemporary Art ; New York : New Museum of Contemporary Art in association with H.N. Abrams, 2001, p34

<sup>43</sup> Tone, Lillian. *William Kentridge: Stereoscope*. <http://home.att.net/~artarchives/tonkentridge.html>

according to the circumstances a person is in at a particular time. This aspect will be discussed more fully in chapter four.

Kentridge employs the metaphor of the internal body landscape in *History of the Main Complaint* (1996) and *Weighing and Wanting* (1998) by placing actual landscapes within the drawings of medical scans. In *History of the Main Complaint* (1996) Kentridge's alter ego, Soho, has his body subjected to a process of medical inspections so as to gain psychological insight into the South African malady; the policy of apartheid. The interior body in Kentridge's animation artworks is used to reconstruct the history of Soho's illness which serves as a metaphor for a nation's illness. The landscapes within the body that Kentridge uses in both *History of the Main Complaint* (1996) and *Weighing and Wanting* (1998) are internal [in the form of memory] as well as external [images of the landscape that Kentridge grew up in]. Kentridge also explores issues relating to guilt, responsibility and collective memory as a direct consequence of living under the apartheid rule. His artworks have become both a reflection of the political situation in South Africa and a recollection of his own memories. These animations serve as a unique way of 'seeing' and coming to terms with the atrocities committed during the apartheid era.

The 'all-seeing presence' of medical imagery mentioned in the introduction to this chapter suggests that the medical diagnostic equipment 'sees' more than a medical specialist can ever see with the naked eye. Nicolas Mirzoeff, in the *Visual Culture Reader* (1998), explains that medical imagery has the 'eye' to see what is invisible or hidden from human eyes:

*"The 'eyes' made available in modern technological sciences shatter any idea of passive vision; these prosthetic devices show us that all eyes, including our own organic ones, are active perceptual systems, building in translations and specific ways of seeing, that is, ways of life. There is no unmediated photograph or passive camera obscura in scientific accounts of bodies and machines; there are only highly specific visual*

*possibilities, each with a wonderfully detailed, active, partial way of organizing worlds.*"<sup>44</sup>

When considering these technological imaging procedures, Donna Haraway also notes:

*"The visualizing technologies are without apparent limit; the eye of any ordinary primate like us can be endlessly enhanced by sonography systems, magnetic resonance imaging, artificial intelligence-linked graphic manipulation systems, scanning electron microscopes, computer-aided tomography scanners, colour-enhancement techniques, satellite surveillance systems, home and office VDTs, cameras for every purpose from filming the mucous membrane lining the gut cavity of a marine worm living in the vent gases on a fault between continental plates to mapping a planetary hemisphere elsewhere in the solar system. Vision in the technological feast becomes unregulated gluttony; all perspective gives way to infinitely mobile vision, which no longer seems just mythically about the god-trick of seeing everything from nowhere, but to have put the myth into ordinary practice. And like the god-trick, this eye fucks the world to make techno-monsters."*<sup>45</sup>

As these two passages suggest, the vision of medical practitioners has been considerably enhanced by medical diagnostic equipment. Nothing is hidden from us any more as it gives us new and intensified translations of what we are seeing. In much the same way, the eyes that appear in the car's rear view mirror in *History of the Main Complaint* (1996) take the viewer on a mental journey through Soho's body. By using hand drawn charcoal images of medical imaging technology, Kentridge provides a novel way of looking into the interior spaces of Soho's body. In the manner in which these rear view mirror eyes are portrayed, Kentridge seems to be inferring the ability to perceive beyond the surface, as with the aid of medical imaging devices. These 'eyes' [medical imaging devices] show us Soho's memories as well as his injuries. The doctors dressed in pin stripe suits who listen to Soho's body organs with stethoscopes reinforce this aspect of obtaining a glimpse of what lies beyond and the control that can be gained over the body. An X-ray of Soho's spine is shown where stethoscopes meet and induce sparks, then mutate into a telephone and a paper punch. Such developments and mutations of objects are associated with analyzing, surveying and investigating the body, suggesting a

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<sup>44</sup> Mirzoeff, in the *Visual Culture Reader*, London and New York: Routledge, 1998, p193n the *History of the Main Complaint* (1996) memory and amnesia are represented by drawing/erasure/redrawing and this maps the effects of guilt in the body by the shadows of previously erased images that remain because of imperfect erasure in the animation sequence.

<sup>45</sup> Ibid: p191

form of control over the body. The image of Soho lying in his hospital bed in *History of the Main Complaint* (1996) presents us with a scene that can be interpreted in terms of a territorialism of the body through the visual gaze.

In *History of the Main Complaint* (1996) sketches of the sonar scan are used to typify scenes connected with repressed memories. In the occurrence of the collision with a man crossing the street which appears to have resulted in Soho's comatose condition, his memories appear to be embedded within the body and are revealed through medical diagnostic imagery. One memory builds upon another as X-rays, sonar scans and so forth provide a visualization of the interior human body.

Under such close medical scrutiny, the body is no longer personal and private. To quote Cartwright, "*The body here becomes reconfigured as a system, a network of functions taking place across organs and sites.*" and accordingly, it is placed within categories of normal and abnormal.<sup>46</sup> Kentridge appears to adapt medical diagnostic imagery such as X-rays, MRI scans and so forth as a means to diagnosing the underlying cause of a the South African condition following the transformation from the apartheid regime to a to a democratically 'free and fair' elected government. Just as meaning becomes evident out of medical imagery as a consequence of the interpretation of the medical image through a process of negotiation between the physicians, medical specialists and pathologists, meaning also similarly emerges from *History of the Main Complaint* (1996) by way of a negotiation between the viewer and the creator of the artwork. Cartwright comments that: "*The spectator [doctor or medical technician] can be said to be incorporated within the medical apparatus and implicated in the resolution in the interior scene. The spectator is involved in a kind of interpretative analysis[...]*"<sup>47</sup> The images of Soho's repressed memories as they appear within the sketches of the sonar scans give the viewer some clues as to what may be wrong with Soho and allow the onlooker to come up with their own creative analysis of his illness.

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<sup>46</sup> Cartwright, Lisa *Screening the Body: Tracing Medicine's Visual Culture*. London: University of Minnesota Press, 1995, p 8

<sup>47</sup> Ibid

It may be useful to consider the works of the Mexican painter Frida Kahlo in this context who similarly dealt with the linking of the realms of the private and public experience of the self through the usage of medical illustrations. Like Kentridge, but more so, Kahlo's search for a visual language to represent her artistic self was based on medical textbooks. In her paintings she personalizes the experience of having a miscarriage as well as being involved in an accident which left her seriously debilitated. She underwent numerous surgical and reconstructive procedures involving long and painful periods of recovery in body braces. In her adaptation of medical illustration to personal experience she was able to express herself in artworks such as *Henry Ford Hospital* (1932) (Fig.2.2).<sup>48</sup> She represented herself constantly, using her work as an act of self-presentation and re-presentation, thereby questioning social conventions about what ought to remain private. This is particularly true of her images of the miscarriage where she painted the spontaneous expulsion of the foetus from the womb. Not only did she display her naked body, but also the soiled linen on the bed in *My Birth* (1932) (Fig.2.1). The culture in which she was brought up regarded miscarriage as a source of shame.<sup>49</sup> Kentridge's animation artworks similarly contain an element of making what should be private public through the use of diagnostic medical imagery.

'The map is not the territory'<sup>50</sup> is an idea I have used in relation to Kentridge's animation artworks. "A key feature of all maps is that to some degree, they must delete, distort or generalize aspects of the territory they were created to represent. It is important to note that territories change. Even a very detailed and precise map of a particular territory can become obsolete if the territory it represents changes."<sup>51</sup> This idea is a Neuro Linguistic Programming term where Dr Harry Alder essentially suggests 'we interpret everything that is going around us through our five senses.'<sup>52</sup> 'What you believe is what you see, hear and feel and this is based on a lifetime of experience which filters any information coming to you through your senses.'<sup>53</sup> 'Our unique interpretation of everything around us builds our own personal map. None of

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<sup>48</sup> Adler, Kathleen and Pointon, Marcia *The body imaged: The human form and visual culture since the Renaissance* New York: Cambridge University Press, 1993, p1

<sup>49</sup> *Ibid*

<sup>50</sup> Adler, Harry NLP: the New Science of Getting What You Want. Judy Piatkus Publishers, 1995 pp13-14

<sup>51</sup> 690 *Map of the World*. <http://nuniversity.press.com/html2/MaMco6.html>

<sup>52</sup> *Ibid* pp13-14

<sup>53</sup> *Ibid* pp13-14

*our maps are objective reality.*<sup>54</sup> I am implying a similarity to this idea may be found in the appearance of the body organs versus how they appear on medical images. Body organs as mapped out on medical imagery do not have the same appearance as they would in reality. Kentridge's charcoal reproductions of X-rays and other medical scans are clearly renditions that differ greatly from the actual medical imagery, reinforcing the notion that his drawings are a step removed from the 'real.' Cameron *et al* state that "*our greatest knowledge of the body is not through the body itself, but through images of the body.*"<sup>55</sup> A physician, surgeon or specialist can interpret a lot more from medical scans where images of the internal body from the MRI<sup>56</sup> scan than the image of the brain itself.<sup>57</sup> PET<sup>58</sup> and MRI scans reveal which areas light up in the brain when a patient is performing certain mental activities. (See fig 2.3 and 2.4.) The employment of medical imagery has assisted in medical procedures as well as in medical and scientific research.

The usage of sophisticated medical imaging technology by the medical fraternity also implies a mechanical understanding of the body, subordinating the subjective emotional aspects of the individual. The medical profession, in general, also tends to ignore the psychological impact on the individual in their evaluation and treatment of the illness, focusing rather on functional aspects, i.e. the effects of the disease on the functioning of the organs. "*The body becomes reconfigured as a system, a network of functions taking place across organs and sites*"<sup>59</sup> rather than as a site for memory, personality and the creation of other components that contribute to the creation of a self. This notion of

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<sup>54</sup> Ibid pp13-14

<sup>55</sup> Cameron, Dan, Christov-Bakargiev and Coetzee, J., M. *William Kentridge*. New York: Phaidon Press, 2003, p100

<sup>56</sup> MRI is performed using a specialized scanner, a patient table, systems that generate radio waves and magnetic fields and a computer workstation. The scanner, which is usually shaped like a large rectangle with a hole in the middle, contains the systems that generate the magnetic field. A motorized and computer-controlled patient table moves into the scanner's center hole during the scan. A technologist operates the MRI scanner from an adjacent control room communicating with the patient during the scan. <http://www.radiologyinfo.org/en/info.cfm?pg=PET&bhcp=1>

<sup>57</sup> Cameron, Dan, Christov-Bakargiev and Coetzee, J., M. *William Kentridge*. New York: Phaidon Press, 2003, p23

<sup>58</sup> Position emission tomography (PET) is a nuclear imaging technique which produces a three-dimensional images or map of functional processes in the body. To conduct a scan, a short-lived radioactive tracer isotope is injected into the blood circulation of a living subject. This stracer collects in the area of the body that is being scanned, where it gives off energy in the form of gamma rays. This energy is detected by a device called a gamma camera, PET scanner and/or probe. These devices work together with a computer to measure the amount of radiotracer absorbed by your body and to produce special pictures offering details on both the structure and function of organs

<sup>58</sup> Position emission tomography (PET) is a nuclear imaging technique which produces a three-dimensional images or map of functional processes in the body. To conduct a scan, a short-lived radioactive tracer isotope is injected into the blood circulation of a living subject.. This stracer collects in the area of the body that is being scanned, where it gives off energy in the form of gamma rays. This energy is detected by a device called a gamma camera, PET scanner and/or probe. These devices work together with a computer to measure the amount of radiotracer absorbed by your body and to produce special pictures offering details on both the structure and function of organs and other internal body parts. *Positron Emission Tomography (PET) Scanning* .<http://www.radiologyinfo.org/en/info.cfm?pg=PET&bhcp=1>

<sup>59</sup> Cartwright, Lisa *Screening the Body: Tracing Medicine's Visual Culture*. London: University of Minnesota Press, 1995, p 47



Fig. 2.1 My Birth (1932)



Fig. 2.2 Henry Ford Hospital (1932)

functionality features in Kentridge's *History of the Main Complaint* (1996) and *Weighing and Wanting* (1998) where the functionings of the psyche are displayed rather than bodily functions. Kentridge adapts this aspect of functionality as a metaphor for the 'all seeing' feature of medical imagery. He does not attempt to repair the physical functionality of the body, instead explores an aspect of what can be termed the 'psychological functioning' of the body. This fact can be found in the scene from *History of the Main Complaint* (1996) where the ten doctors, all resembling Soho, are standing around his bed examining his body with stethoscopes. Corporately these look-alike doctors can be perceived as a form of introspection into the psyche of Soho.

The examination of the body in *History of the Main Complaint* (1996) could also be described in terms of a 'corpus' of knowledge embedded within the body that the medical imagery is trying to reveal. This 'corpus' of knowledge contains not only medical knowledge, but also psychological knowledge. The body has within itself the intelligence of how to heal itself psychologically, as in the case of repression to protect it from painful past experiences.

In chapter three I introduce and explore the notion that every cell in the body has the ability to store memories of the self as well as body experiences. It will be my intention to show how Kentridge utilizes this idea in his work where the body is deemed to be a kind of repository for repressed memories which can be excavated by medical imaging techniques to facilitate healing. Sometimes medical equipment becomes a way of dominating or controlling body functions so that healing can occur, such as, when a patient is put on a ventilator to enable him/her to breathe whilst recovering from surgery or injury. This more invasive form of medical procedure is revealed in *History of the Main Complaint* (1996), where the medical equipment next to his bed appears to exert some form of control over Soho's body. Lying in the hospital bed, Soho's bodily functions are regulated and controlled by the medical equipment to keep him alive until he regains consciousness from being in a coma. To quote Cartwright: "*Medicine is interested in isolating life, in regulating and extending it and in gaining control over*

*death in the process.*"<sup>60</sup> Kentridge's artworks have cryptic undertones in the case of the scene from *History of the Main Complaint* (1996) where Soho witnesses the beating of a man in the street whilst driving past. One struggles to interpret this scene. It seems to imply a private or hidden memory. It seems as if Kentridge is deliberately putting together a kind of mystification or puzzlement, something not unlike the puzzlement that medical disorders may present to physicians who are faced with having to make a diagnosis. Or similarly, the 'figuring out' that surgeons have to do between how the interior of the body appears when viewed on medical scans and what the body organs actually look like during surgery.

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<sup>60</sup> Cartwright, Lisa *Screening the Body: Tracing Medicine's Visual Culture*. London: University of Minnesota Press, 1995, p 82

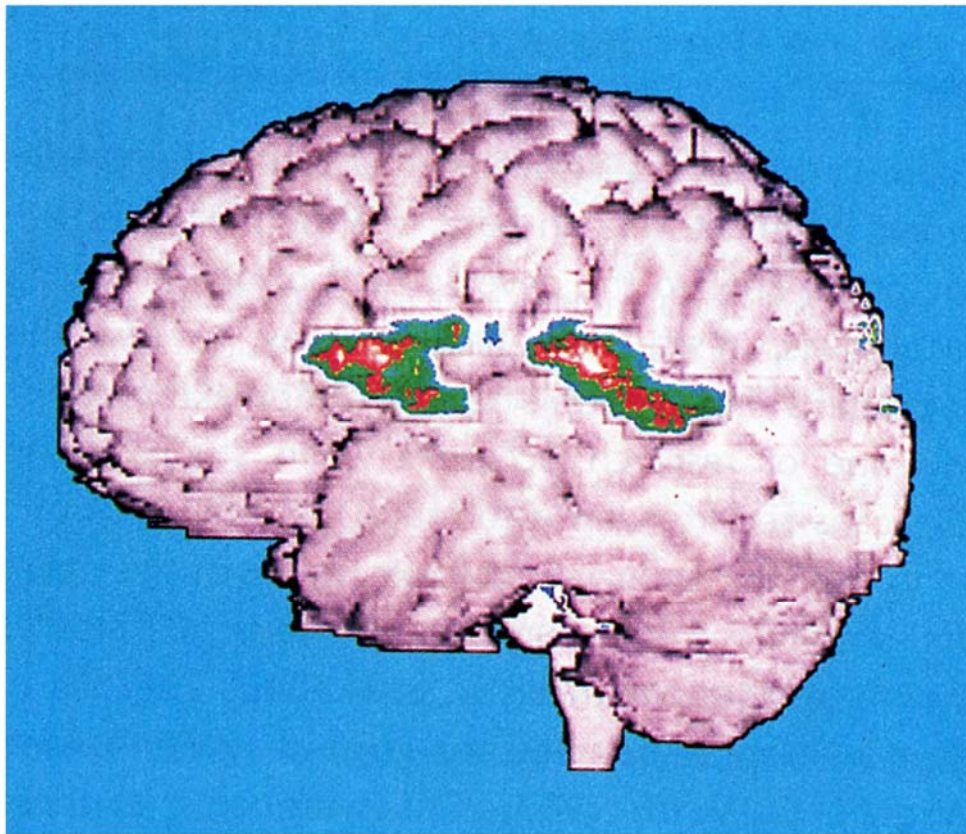


Fig. 2.3 PET scan of the brain

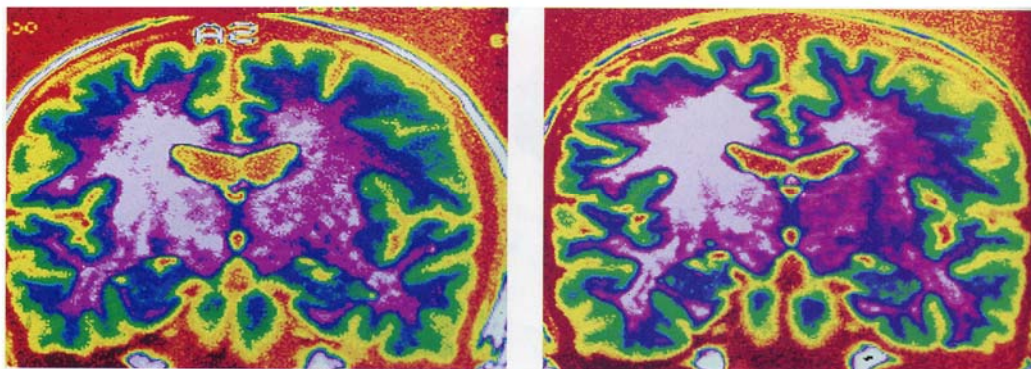


Fig. 2.4 Colour Coded MRI scans

Medical imaging technology also provides various contexts in which to define how the body may be viewed and understood. Different people understand the body in different ways. To quote Cartwright again: “*The microscopist sees the body in a manner that distances the observer from the subjective experience of the body. He/she sees the body in terms of microscopic particles and irregularities of cellular structures caused by disease rather than memory or emotional underpinnings. The microscopic observer is also subject to the correct techniques of using the instrument.*”<sup>61</sup> A speck of dust might be confused with a minute part of the body that is being observed. This idea of the ambiguity within the observed medical scan is present in Kentridge’s work where the viewer is not always certain which organ is being shown, as in the instance of the images shown in the sonar scan in *History of the Main Complaint* (1996). The lay person more often than not has some idea of what the internal organs of the body look like, usually obtained through basic biology lessons at school. To illustrate, if the lay person sees an advert on television featuring a heart, the person recognizes which organ it is immediately.

Medicine also does away with the distinctions of interior/exterior or object/ground, race and nationality and colour of skin.<sup>62</sup> It focuses on that which is beneath the surface of the skin rather than what is above the skin. Medical diagrams suggest the similarity of all people regardless of race, religion or colour. Internally we all look similar. All people are regarded as equal in this way.

To summarize the important points in this chapter, the depictions of the inner workings of Soho’s body are used by Kentridge as a figurative expression of the inner workings of Soho’s memory. Soho’s memories appear to be embedded within the body which are revealed by medical diagnostic imagery.

The body is no longer personal in the context of medical scrutiny. The term ‘technological sight’ refers to the ability of medical diagnostic machinery to create

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<sup>61</sup> Cartwright, Lisa *Screening the Body: Tracing Medicine’s Visual Culture*. London: University of Minnesota Press, 1995, pp 86-7

<sup>62</sup> *Ibid*:p xiv

images of the interior body and is explained by Donna Haraway as a form of 'gluttony' where medical imaging equipment may be regarded as the "*all seeing eye*."<sup>63</sup> Kentridge seems to be giving prominence to the notion of the 'all seeing eyes,' particularly in the scene where Felix's eyes are staring back at the viewer through the rear view mirror in *History of the Main Complaint* (1996). In this manner Kentridge uses eyes to refer to the 'technological sight' of the medical equipment that was used to diagnose Soho's injuries.

Kentridge, makes use of the metaphor of the internal body landscape in *History of the Main Complaint* (1996) and *Weighing and Wanting* (1998) by placing internal body landscapes within the drawings of medical scans. He advances the notion that medical imagery can indeed see everything in the body in the extreme, even to the extent to suggest that medical imagery can reveal emotive aspects of a person as well as their memories.<sup>64</sup> Kentridge accomplishes this by inserting images of past events and memories into scenes portraying medical imagery.

Kentridge's alter ego, Soho's body, is subjected to a rigorous medical examination procedure to gain psychological insight into the South African malady: the policy of apartheid. The interior body in Kentridge's animation artworks are used as a pictorial representation of Soho's injuries which is used as a representation of the nation's illness.

The 'eyes' of medical imaging equipment become the eyes of the viewer of the artwork and enable us to explore the injuries or memories that are embedded within the body of Soho. The concept of memories embedded within the body will be examined in more detail in the next chapter.

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<sup>63</sup> Mirzoeff, Nicholas. *The Visual Culture Reader*. London and New York: Routledge, 1998, p193

<sup>64</sup> *Ibid* :p183

# Chapter Three

## Body Memory and Kentridge's Construction of Self.

In this chapter I examine how the internal body can be seen as a site for memory in two of Kentridge's hand drawn animation artworks; *History of the Main Complaint* (1996) and *Weighing and Wanting* (1998). Kentridge's animation artworks are concerned with medical imaging of body organs which are used as metaphors for psychological conditions rather than focusing on the diseased body. He can therefore be seen to be delving into the archives of the unconscious mind to establish the cause of injury/psychological dis-ease. Even though Kentridge does not exclusively examine the self through illnesses, he uses aspects of modern thought processes about illness to inform his work, such as sonar scans and the like. Soho would not have gone through his soul searching journey through the body if he was not indisposed. It is his illness and the transition between the story of his present illness and his past personal history that are analyzed in this process. For example, in *History of the Main Complaint* (1996) Soho is shown to be subconsciously analyzing his illness and past traumatic memories through the use of medical diagnostic equipment.

Medical images of the inner organs of the body are used in both of these artworks as a means of representing memory as a kind of introspection and soul searching and coming to terms with the traumatic memories of the past. Traumatic memories, according to psychologists and other researchers, are thought to be stored differently than other memories. It is believed that they are sealed away, compartmentalized or encapsulated and preserved, waiting for a safe time to be 'accessed' or 'triggered,' either spontaneously (supposedly when the person is ready), or through therapy, with guidance from a qualified counselor. This may occur in the unconscious mind or within other parts of a person's body.<sup>65</sup>

The brain may not be the only place where memories are stored. In this chapter I will explore the notion that Kentridge uses medical imagery to expose these 'body

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<sup>65</sup> Goldenson, Robert, *Longman Dictionary of Psychology and Psychiatry* New York: London, 1984, p 600

memories.’<sup>66</sup> ‘Body memory’<sup>67</sup> in this context refers to the viewpoint that the body cells are capable of storing memories, in contrast to the old theory that the brain is the only medium where memories are stored.<sup>68</sup> This viewpoint provides an explanation for the surfacing of memories in situations where the brain was not in a position to store memories. It is sometimes a catalyst for repressed memory recovery. In the case of traumatic memories, the premise is that these memories are stored in a different way to everyday memories as they are emotionally charged. These memories are often distinguished with phantom pain in a limb, or several limbs of the body - the body appearing to remember a past trauma and contend that these are specific mental abilities in humans that facilitate the narration of the self. In using the word ‘mental’ I assume a physical/bodily dimension to mental abilities that help us to assess and construct stories of our daily life that allow us to make sense of our daily experiences. The body’s ability to store memories in its various cells suggests a deep seated ‘imbuing’ that instills or inspires repressed memories within the body. In *Weighing and Wanting* (1998), Kentridge makes use of these processes of body memory storage. He creates a self narrative by employing images of the body and MRI scans which reflect electromagnetic forces within the body evoking certain processes associated with memory in organs like the heart and the brain.

Medical specialists are able to explore the pathology of bodily and brain disorders with medical imaging equipment. The exploration of memories, emotions and personality prove to be more difficult as they cannot be observed on medical scans. They have to be explored via the physical behaviour of the person. Temporal Lobe Epilepsy (TLE) is a good case in point where seizures are caused by a tiny brain scar. A TLE episode is not purely physiological in the sense that a seizure has occurred; it contains a psychological component involving panic attacks, depression, rage, memory recollection. This body/mind connection is important to providing an understanding of my creative work as it deals with coming to terms with mental illness and temporal lobe epilepsy, both of which are considered to be mental as well as physiological disorders. Medical specialists,

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<sup>2</sup> Fuchs, *The Memory of the Body* <http://www.klinikum.uni-heidelberg.de/fileadmin/zpm/psychatrie/ppp2004/manuskript/fuchs.pdf> accessed 19/01/2006 pp 4-5

<sup>3</sup> Ibid pp4-5

in an attempt to reduce the episodes of TLE, especially rage, have performed a procedure called an amygdalotomy. In this procedure parts of both amygdalae within the temporal lobes are removed. In an attempt to find the right organs to remove, doctors place electrodes on the surface of a patient's brain. These are then stimulated to elicit abrupt attacks of rage, sexual feeling, fear and uncovering of memories in the patient's brain.<sup>69</sup>

In a similar manner, Kentrige uses sketches of the MRI scans in *Weighing and Wanting* (1998) to uncover Soho's repressed memories. The brain is sliced open in the sketches of the MRI scan to access Soho's memories. The word 'sliced' is used intentionally to explain how a MRI scan works. The construction of an MRI scan involves the taking of multiple images of cross sections of the brain tissue in the MRI chamber which creates a 3D image of the brain. Instead of producing sketches representing multiple images of the brain, Kentrige produces sketches depicting multiple images of landscapes. These neurological landscapes merge into naturalistic landscapes within Soho's brain, serving to create a temporal sequence of his memories of life in South Africa during the apartheid era. For example, in *Weighing and Wanting* (1998), where Soho enters the MRI chamber, multiple images of his brain are shown. These merge into a landscape where he is taking his evening stroll and picks up a rock that can be interpreted as a symbol of the brain, i.e. referring to his retrieval of memories.

In a like fashion to Kentrige's constant drawing, erasure and redrawing process that creates a metamorphosis of images, Suzuki suggests that the brain is an evolving self-contained structure.<sup>70</sup> It is adaptable in the sense that the brain can create new neural connections within its structure, and connections not used slowly disappear. This constantly evolving organ is more pronounced in cases of young children who have had a hemisphere of their brain removed in the treatment of seizures. In such instances, the brain hemisphere which has been left behind takes over the functions of the hemisphere that has been removed. The versatility of the brain continues in adulthood, but on a

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<sup>69</sup> LaPlante, Eve, *Seized*, New York: HarperCollins, 2000, pp171-209

<sup>70</sup> Suzuki, David *The Sacred Balance: Rediscovering Our Place in Nature* Mountaineers Books; 2nd Rev edition October 2002, p10

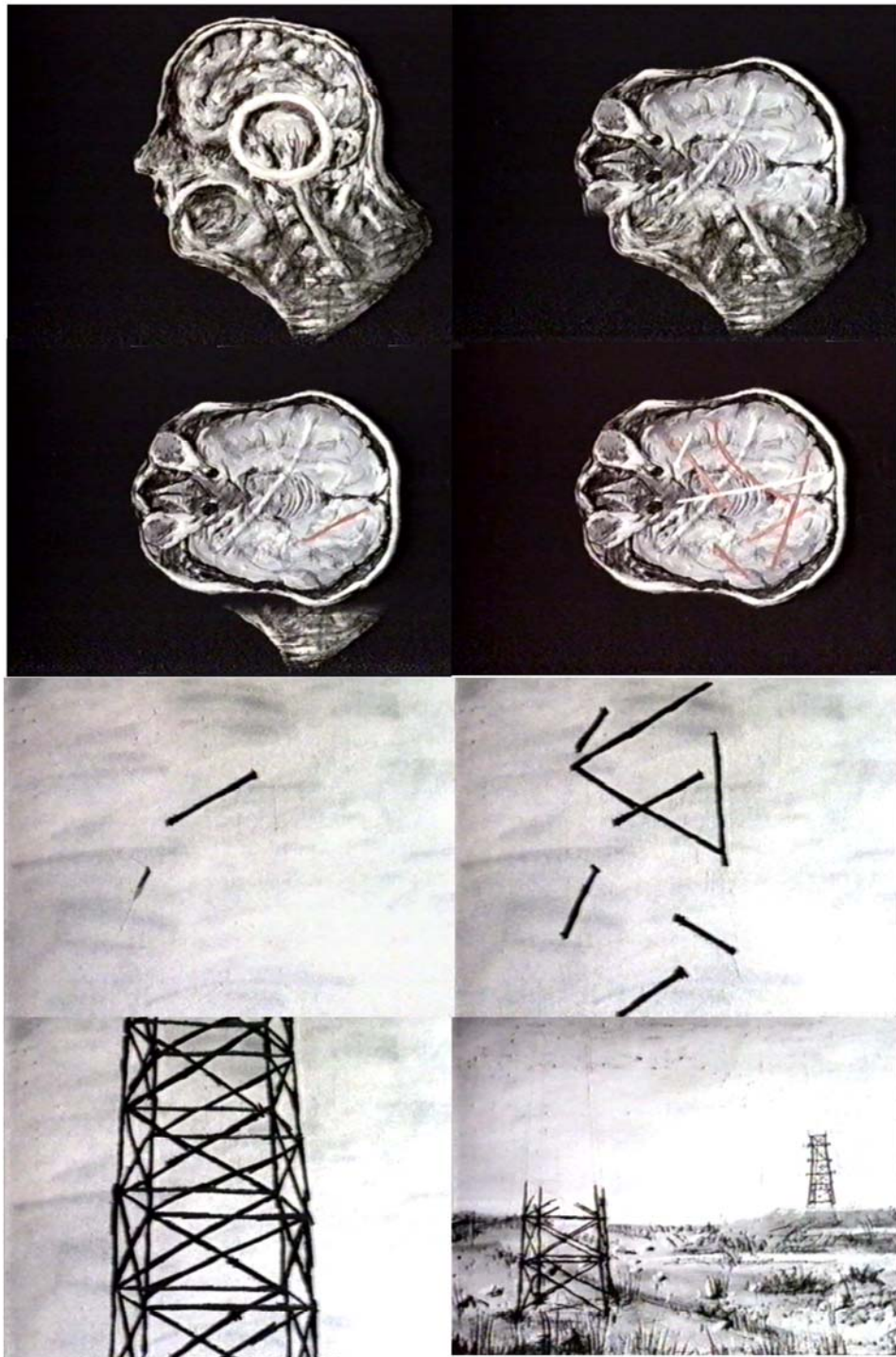


Fig. 3.1

reduced scale where change occurs mainly within the memory and learning regions of the brains. It appears as if Kentridge is making reference to the ever changing structure of the brain in *Weighing and Wanting* (1998) wherein his sketches of scans of Soho's brain are depicted in the form of landscape images and not as typical of MRI scans. Kentridge's insertion of a landscape rather than medical imagery of an organ in his renditions of MRI scans of the brain alludes to the limitations of medical science to retrieve memory from the brain. Obviously, the medical practitioner is unable to physically see the actual memories of a patient; all the practitioner can work with is what the patient recalls or remembers when a particular part of the patient's brain is stimulated by an electrode. The blue dots and red lines which sometimes appear in Kentridge's animation sequences can in this context be interpreted as a kind of simulation of the brain's functioning processes. In *Weighing and Wanting* (1998), the red and white lines shown in the image of the brain scan below serve to construct brain connections and suggest linkages to Soho's memory of electricity conduction pylons. They may also be reminiscent of electrical currents used by neurons residing within the brain which create and retrieve memories.

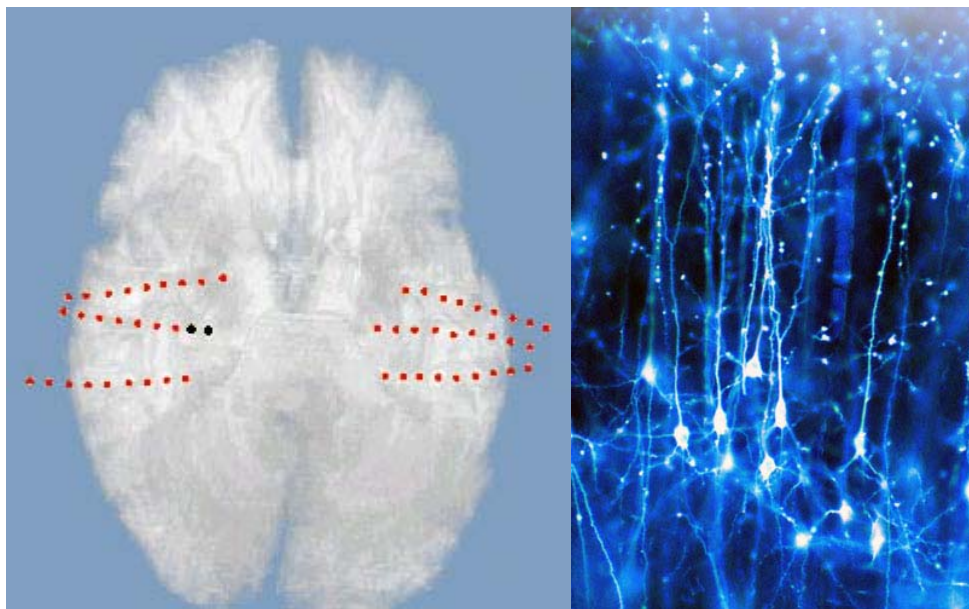


Fig. 3.2

Kentridge also uses red and white lines in his renditions of MRI scanned images to construct brain connections and linkages and to create sequences of events within the narrative that each work follows, not unlike synapses linking one neuron to the next. Kentridge's depiction of connections are somewhat different in purpose to the microscopic visualizations of the neural connections made within the brain as typically illustrated in medical photographs or drawings made of the neural connections between synapses of brain cells.

Kentridge's drawings of medical scans are metaphorical in the sense that he uses them to reveal memories within the interior body. Medical images are by nature ambiguous. To quote Cameron: "*Look as hard as you can and you will not find a mimetic reference.*"<sup>71</sup> In other words, the image rendered in the drawing is not an exact replica of the internal organ it is supposed to represent. Medical images appear in a particular code that is interpreted by physicians and specialists in the course of diagnosis. Kentridge creates an additional metaphor by placing emotional interpretations of body memories within the medical scans of Soho's body. He conveys memories by the insertion of images into his drawings of medical scans in conjunction with red and blue lines drawn over these scans. In *Weighing and Wanting* (1998), the drawings of landscapes merge with the red and white lines that represent electromagnetic currents which transform into pylons, (fig. 3.1) suggesting an interconnectedness between the body, memory and the environment in which a person resides.

Kentridge gives the impression that the memories portrayed in his sketches of landscapes (as well as of his depictions of memories in general) are mapped out within the structure of our neurological connections. On this aspect Kentridge states "*that our greatest knowledge of the body is not through the body itself, but through images of the body.*"<sup>72</sup> His usage of medical scans transforms the inner body into a visual medium. According to Cameron, a medical practitioner is able to understand more from an MRI scan than from examining the brain itself.<sup>73</sup> Kentridge suggests that scans or X-rays give the body a

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<sup>71</sup> Cameron, Dan, Christov-Bakargiev and Coetzee, J., M. *William Kentridge*, New York: Phaidon Press, 2003, p140

<sup>72</sup> *Ibid*

<sup>73</sup> *Ibid* :p23

kind of transparency. He uses this concept of transparency to compare the inner body to photographs sent back to earth from Mars. He states that they are similar to the rocky landscapes on earth.<sup>74</sup> Unlike the photographic images of Mars, however, the interior of our body is more remote in the sense that we cannot use familiar photographic translation, but have to work through the debatably unfamiliar code of medical imagery. Medical imagery does not provide us with identical replicas of body organs. Most medical images are two dimensional whilst the body is three dimensional. These technological imaging devices distance us from our internal organs and this has a way of detaching ourselves from the parts of our body that we are not in control of, such as the heart and kidneys. Another way in which medical science distances us from our bodies is by inserting prosthetic devices into the body in order to remedy a deficiency, such as pacemakers, defibrillators and electrodes inserted into the brain to locate brain functioning during medical procedures or to control epileptic seizures.

Huge medical imaging devices, such as MRI, probe through the barrier of the skin and bone to enable us to view body organs. These devices encourage us to view our bodies as specimens to be probed and dissected rather than as a whole person. In a like manner Soho's body can also be viewed as a specimen to be examined. The viewer is provided with the opportunity to look at Soho's body whilst it is being probed by the look-alike doctors who are not viewing Soho from the viewpoint of a whole person. The interconnected lines, dots and crosses seem to imply a type of dissection of a laboratory specimen or diseased body part being marked prior to surgery. These body parts are being marked for further examination, medical intervention or to reveal where injury has occurred.

Kentridge's sketches containing interconnected lines and dots form part of his unique drawing style. The brain's neurological structure also has its own unique arrangement of neurological interconnections. Neuroscientific research into brain structure has revealed a strong correlation between personal consciousness, identity and the material structure of neural pathways and interconnections within the brain. The brain may therefore be

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<sup>7</sup>Op. cit. p140

viewed as “an ever-changing structure that undergoes constant transformation based on experiences.”<sup>75</sup> David Suzuki, the Author of *The Sacred Balance: Rediscovering our Place in Nature* (2002), expressed this well:

*“...the brain creates a narrative with a beginning, middle and an end – a temporal sequence that makes sense of events. The brain selects and discards information to be used in a narrative, constructing connections and linkages that create a web of meaning. In this way, a narrative reveals more than just what happened; it explains why. When the mind selects and orders information into meaning, it is telling itself a story.”*<sup>76</sup>

I am of the view that the portrayal of Soho’s choices and memories in *History of the Main Complaint* (1996) and *Weighing and Wanting* (1998) are ‘embossed’ in physical form in the manner that neural structures of his brain have been drawn; his conscious and unconscious experiences are mapped through Kentridge’s autographic line.

A study by Miles Herkenham suggests that less than two percent of neuronal communication actually occurs at the synapse and that there are several different forms of body memory.<sup>77</sup> I will describe the various types of body memories and how I am of the opinion that Kentridge utilizes these in his animation art works:

### **Intercorporeal Memory**

*“Among the most important situations are of course our encounters with others; as soon as we get in contact with another person, our bodies interact and cause subtle sensations in each other. Our bodies understand each other, even though we cannot say exactly how this is brought about. These non-verbal interactions are to such a large extent determined by earlier experiences that we may speak of an intercorporeal memory which is implicitly and unconsciously present in every encounter. With the progress of developmental research, we may now better comprehend the history of intercorporeal memory. This research has shown that the motor, emotional and social development in early childhood does not run on separate tracks, but is tightly connected through integrated affect-motor schemata. These early social interactions are stored in the body as behavioral schemata, as body micropractices and dispositions in the memory. It forms an*

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<sup>75</sup> Suzuki, David *The Sacred Balance: Rediscovering Our Place in Nature* Mountaineers Books; 2nd Rev edition October 2002, p10

<sup>76</sup> Ibid

<sup>77</sup> Fuchs, *The Memory of the Body* <http://www.klinikum.uni-heidelberg.de/fileadmin/zpm/psychatrie/ppp2004/manuskript/fuchs.pdf> accessed 19/01/2006 pp 4-5

*extract of repeated, prototype experiences with significant others, processing them to dyadic patterns of interaction, to schemes of being-with “order” acting-with” (Stern 1998): Myself-with-mamma-feeding-me, myself-with-daddy-playing-ball etc. This results in what Daniel Stern calls implicit relational knowing – a bodily knowing of how to deal with others, how to have fun with them, how to show pleasure, to elicit attention, to avoid rejection etc. It is a temporally organized, musical memory for the rhythm, dynamics and undertones inaudibly present in the interaction with others.”<sup>78</sup>*

In a nutshell, “intercorporeal memory suggests that our encounters with other people are important. Our bodies interact and cause subtle sensations with each other. Our bodies appear to understand each other even though we cannot exactly say how this is brought about.”<sup>79</sup>

Intercorporeal memory appears to be manifest in Soho’s encounters with other people who play a very important role in his memory reconstructions. Kentridge’s animation artworks create subtle connections between these other people through the metamorphic quality of his hand drawn animation artworks.<sup>80</sup> This seems to be validated in the scene from *History of the Main Complaint* (1996) where all the doctors attending to Soho whilst lying in a coma in a hospital bed are depicted as Soho look-alikes dressed in the familiar garb of Soho i.e. pin stripe suits. The scene portraying people running across the street also appears to form a part of his identity: the rendering of the X-ray of the head of the man being beaten on the side of the road witnessed by Soho whilst driving past which merges into Soho’s head.

### **Situative Memory**

*“Situative memory extends into the spaces and situations in which we find ourselves. It helps us to get our bearings in the space of our dwelling, in the neighbourhood, in our hometown. Bodily experience is particularly connected to interiors which over time are filled with latent references to the past and with an atmosphere of familiarity.”<sup>81</sup>*

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<sup>78</sup> Op. cit. :pp 4-5

<sup>79</sup> Ibid pp 4-5

<sup>16</sup> Ibid pp4-5

<sup>81</sup> Fuchs *The Memory of the Body*. <http://www.klinikum.uni-heidelberg.de/fileadmin/zpm/psychatrie/ppp2004/manuskript/fuchs.pdf> accessed 19/01/2006, pp3- 4

Situative memory can be identified in the manner in which the body remembers spaces in which we find ourselves, such as the directions to get to places within our neighbourhood.<sup>82</sup> Kentridge utilizes a form of situative memory in his artworks depicting scenes from the old Witwatersrand's East Rand, the area in which he grew up. It has specific relevance to aspects of his personal memory reconstructions.

### **Traumatic memory**

*“The most indelible impression in body memory is caused by trauma, i.e. the experience of a serious accident, of rape, torture or threat of death. The traumatic event is an experience that may not be appropriated and integrated into a meaningful context. As in pain memory, mechanisms of avoidance or denial are installed in order to isolate, forget or repress the painful content of memory. The trauma withdraws from conscious recollection, but remains all the more virulent in the memory of the body, as a foreign body, as it were. At every step the traumatized person may come across something that revokes the trauma.”<sup>83</sup>*

Traumatic memory incorporates the memory of the body for traumatic incidents that have occurred and had an affect on the person concerned. The trauma may not be consciously recalled, but whenever the person encounters something that evokes the memory it is recalled. This is not a conscious recall, rather a bodily recall. All of these aspects of memory appear to be portrayed in Kentridge's animations.

The red and blue dots and lines in Kentridge's animations suggest a way of interpreting the neural pathways linking events and different memories within the brain to heal the body and mind from repressed traumatic experiences. In the case of Soho, these experiences are related to incidents that occurred during the apartheid era. The notion of repression and memory recall has connections with Post Traumatic Stress Disorder (PTSD), i.e. it refers to emotional or other disturbances whose symptoms appear after a person has suffered a traumatic experience. Symptoms include amnesia, exaggerated fright response or flashbacks of the experience.<sup>84</sup>

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<sup>82</sup> Op. cit pp 6-7

<sup>83</sup> Ibid :pp 7-8

<sup>84</sup> Goldenson, Robert, M. *Longman Dictionary of Psychology and Psychiatry*, New York and London: Longman, 1984, p572

As pointed out in chapter two, Vanessa Thompson suggests that the atrocities committed during the apartheid era brought about a particularly ‘complex’ form of PTSD, the onset of which is brought about by factors such as a history of subjection to prolonged periods such as in instances of hostages, prisoners of war, concentration camp survivors and survivors of suicidal religious cults. Other examples of this form of ‘complex’ PTSD may also include sexual violence, survivors of domestic violence, sexual abuse and sexual slavery.<sup>85</sup> The notion of chronic illness and its diagnosis and healing appears to have a reflective therapeutic quality in Kentridge’s drawing process which involves putting images down and rubbing them out, redrawing on traces of the rubbed out image. There is a relationship to Sigmund Freud’s notion of ‘working through’ which is associated with his psychoanalytic process of the talking cure. In his *Beyond the Pleasure Principle* (first published in 1920)<sup>86</sup> Freud suggests that a person can only be cured of PTSD if the traumatic event is associated into a meaningful sequence. This view, in relation to Kentridge’s work, will be discussed in more detail in the next chapter.

Researchers have found various other methods of ascertaining how body organs have the ability to store memories. The electroencephalograph provides a reading through electromagnetic forces within the body, indicating the life forces that make up the body. While Kentridge does not make direct reference to the electroencephalograph, he does use lines to suggest electrical pathways and interconnected telephone lines, such as the blue lines used to link events happening in different places [as in the case *Stereoscope*, (1998)]. These red and blue dots and lines in Kentridge’s animation artworks may also function like electromagnetic stimulation of tiny spots on the surface of a patient’s brain during certain medical procedures such as the amygdalotomy mentioned earlier in this chapter. When these spots are electrically stimulated, the patient’s consciousness is commonly flooded with long forgotten memories. Similarly, Soho’s consciousness is flooded with long forgotten memories when parts of his brain or body are stimulated during medical procedures.

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<sup>85</sup> Thompson, Vanessa *Healing violence in South Africa: A textual Reading of Kentridge’s Drawings for Projection*. Master’s Dissertation, 2005, p111

<sup>86</sup> Freud, Sigmund *Beyond the Pleasure Principle* London: Hogarth Press, 1950 (first published in 1920 in the Standard Edition of the Complete Psychological Works of Sigmund Freud) p120

I will now consider some of Kentridge's ideas on the role of medical imagery of the body organs as it relates to his works. The idea of the heart and body being one site of emotional subjective memory may explain Kentridge's suggestion of memory repression and retrieval within the body organs and his ongoing use of this subject matter in his animation artworks. The unconscious universe of memory within each of us is what medical scans can't reveal.

The image of the heart is an important feature of Kentridge artworks. This is manifested in artworks such as *Heart*, (1995), co - produced with Doris Bloom as part of the *Memory and Geography* multimedia project in Walkerville, Johannesburg, and in drawings used in the animation film which forms part of the theatrical staging of Monteverdi's opera *IL Ritorno d'Ulisse* (1998). In this animation film Ulysses appears to be having a heart bypass operation. The heart which has been considered for centuries as the 'seat of emotion' is being mended and reformed much like the process of reform that was intended with the establishment of the Truth and Reconciliation Commission. This theatrical production of Kentridge's appears to draw on numerous aspects from *History of the Main Complaint* (1996), one aspect being the notion of the body being a site of introspection and soul searching.

On assessing the electrical forces within the body, studies on how learning occurs and how emotion is generated suggest a coherence of the heart's electromagnetic rhythms and the effectiveness of thinking. In different words, accompanied with every heartbeat the heart's electromagnetic forces cause an instant, whole brain communication. An electromagnetic wave travels through the arteries many times faster than the flow of blood. The heart's electromagnetic field is far stronger than the electromagnetic field of the brain. This process of changing electromagnetic rhythms creates another language of internal communication as electromagnetic wave patterns vary with each intricate, rhythmic pattern of the heartbeat. Each and every one of your trillions of cells feels and interprets these rhythmic wave patterns and is dependent on them in a number of different ways.<sup>87</sup>

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<sup>87</sup> Cooper, Robert, K. *The Other 90%*. New York: Crown Publishers, 2001, pp17-18

The idea of monitoring the electromagnetic forces of every heartbeat through the use of medical equipment appears to be wide spread in *History of the Main Complaint* (1996). The electromagnetic rhythm of Soho's heart is explored by way of sketches on the medical equipment display monitor. The incessant beeping of the medical equipment next to Soho's bed used to monitor his heartbeat can be heard throughout the animation. The rhythmic sound of the pulsating heart forms the backdrop to the changing scenes depicted in *History of the Main Complaint* (1996) such as when the stethoscope enters into Soho's body via the rib cage. The sound of the heartbeat signifies a constant monitoring of the electromagnetic rhythms of the body and can be deemed to be an ongoing exploration of the memories embedded in the heart/body. The sound of electric currents can be heard in the background as the scans metamorphosize into different objects that symbolize Soho's former work and private life. This also suggests electromagnetic forces at work in his body.

Some portion of memory storage occurs within the heart muscle and other parts of the body. There is a nexus between the electromagnetic currents and images of organs of the body and memory processes in *History of the Main Complaint* (1996), as in view of the fact that all these images are displayed on the same monitor. This creates a juxtaposition between the heart and the memory processes of the organs of the body. The heart responds to messages sent to it from the emotional brain (limbic structure), which has been busy monitoring the internal environment of dynamic states of the various emotions, the auto-immune system, guiding behaviour and contributing to our sense of personal identity through our memories. The emotional brain makes qualitative evaluations of our experiences of the world and forwards that information instant-by-instant to the heart. In return, the heart exhorts the brain to make the appropriate responses.



Fig. 3.3

Otherwise stated, the responses that the heart makes affect the entire human system.<sup>88</sup> In *History of the Main Complaint* (1996) the images are constantly metamorphosing into images of different body organs and repressed memories, demonstrating the manner in which these memories influences the entire body system.

Medical research asserts that the heart's ganglia are linked to every major organ in the body as well as to the entire muscle system that uniquely enables humans to express their emotions. Almost half of the heart's neural cells are involved in interpreting information received from all the regions of the body so that it can keep the body functioning as one harmonious whole. The remaining neural cells form a dialogue with the heart, body and brain unconsciously.<sup>89</sup> Therefore Soho's heart/body/mind is evaluating his body memories that he may not even be consciously aware of. These memories influence the individual's personal traits as well as his/her behaviour.

Linked to this idea of memories stored within the body/heart, medical researchers also suggest the idea of another 'brain' being situated inside the intestines that is independent, but also interconnected with the brain. Neurochemicals found in the intestinal tract tell us that there may be neurons there.<sup>90</sup> Kentridge's medical scans in the beginning of *History of the Main Complaint* (1996) allude to images of the intestines. The swirling marks are reminiscent of the winding circular form of the intestines shown within the sonar scans. These images merge into landscapes surfacing from Kentridge's reminiscing.

This idea of multiple sites of memory in the body may explain Kentridge's interest in the internal body as a site for memory.<sup>91</sup> Experiences involve feeling and memory. Feelings and memories can be regarded as a momentary 'view' of part of a body landscape. These concepts have specific embodied content - the state of the body in a particular time and

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<sup>24</sup> Looking at the idea of memory storage within the heart/body, neurocardiologists have also found that 60 to 65% of the cells of the heart are actually neural cells, not muscle cells, as was previously believed. They are identical to the neural cells in the brain, operating through the same connecting links called ganglia, with the same axonal and dendritic connections that take place in the brain, as well as through the very same kinds of neurotransmitters found in the brain (Mercogliano and Debus 1999). D' Alberto, *Atilio Cellular Memory and ZangFu Theory*, <http://www.attiliodalberto.com/contact.htm> p1

<sup>89</sup> D' Alberto, *Atilio Cellular Memory and ZangFu Theory*, <http://www.attiliodalberto.com/contact.htm> p1

<sup>26</sup> The theory of neuro-transmitted-emotions within the body is further supported by Pert. She states that peptides and other informational substances found in the heart are the biochemical's of emotion (1999, p141). This theory is also supported by Pearsall, Schwartz and Russek (2002, p191-192).

<sup>27</sup> Cooper, Robert, K. *The Other 90%*, New York: Crown Publishers, 2001, pp17-18

Kentridge's wife practices in the medical field and therefore he would have had opportunities to access medical scans and research.

the specific neural systems that support this state. A person interacts with the environment as an ensemble. This interaction consists of neither the body alone nor the brain alone. Medical imagery as used in Kentridge's animations alludes to the idea of the body memory processes functioning as an embodied memory of the landscape in the context in which a person grew up.

The employment of X-rays, MRI scans etc. in *History of the Main Complaint* (1996) and *Weighing and Wanting* (1997) and other artworks by Kentridge suggests a comparative link via the medical gaze between the interior landscape of neuronal networks in the brain and other sites of memory in the body to the exterior landscape which hides the appalling acts committed in the past. These artworks serve as a metaphor for delving into the South African history of secret, repressed memories of the dreadful deeds that were committed during the apartheid era. The examination of Soho's medical complaints is a metaphor for the examination of Kentridge's main complaints and the main complaints of a nation in general. Medical imagery clearly serves as a form of soul searching, introspection and a site of body memory in Kentridge's work. As Fuchs puts it: "*The body is not only a structure of limbs, organs, sensations and movements; it is a structure of hidden memories.*"<sup>92</sup> Kentridge's ingenious method of using medical diagnostic technology to alluding to a serious state of affairs requiring immediate treatment is utilized to express South Africa's depraved condition.

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<sup>92</sup> Fuchs *The Memory of the Body* <http://www.klinikum.uni-heidelberg.de/fileadmin/zpm/psychatrie/ppp2004/manuskript/fuchs.pdf> accessed 19/01/2006 .p 1

# Chapter Four

## The Body as an Autobiographical Site

In this chapter I will expand on Kentridge's usage of the interior body as a metaphor for repressed memory and explain why I regard this process of self narration as a form of autobiographical and personal documentary. " 'Documentary' is a loose and often highly contested label which reflects and reports on 'the real' through the use of the recorded images and sounds of actuality."<sup>93</sup> As this quotation suggests, documentary is a broad category of visual expression that is based on the attempt, in one fashion or another, to 'document' reality. Just what 'reality' is, is in itself a highly contentious subject. These documentaries may include film, radio, digital productions and more recently, the visual arts. I will commence this discussion by defining the documentary and some of the controversies surrounding the concept of 'truth' in documentary work. I intend examining Kentridge's work in terms of this controversy. Secondly, I shall investigate the manner in which Kentridge utilizes landscape in his imagery to convey a sense of personal documentary and his usage of the landscape of the inner body to function as a site for documentary.

Kentridge's hand drawn animations may not carry the sharp, highly defined verisimilitude associated with documentary recordings available on film, video or other electronic media. His films do employ a uniquely personal sense of documentary through the recording of his process of thinking by means of his animation filming technique. His work can be regarded as self narrated by the manner in which he uses a procedure similar to a person's usage of words when speaking. To reiterate, verbally, one does not test a sentence before speaking, and similarly, Kentridge sketches what comes to his mind without advance planning of the animation. He developed his renowned technique of sketch making which consists of making a rough charcoal drawing, erasure of the drawn

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<sup>93</sup> Corner, John *The Art of Record: A Critical Introduction to Documentary*. Manchester and New York: Manchester University Press, 1996, p2

image, further sketching, erasure and so on and so forth. I will be exploring this procedure more fully in chapter five.

Documentaries are fictions with plots, characters, situations and events like any other film, only they achieve this with direct reference to 'reality'.<sup>94</sup> One of the controversies surrounding the so-called 'truth' of documentary film is that scenes are reconstructed in terms of the event depicted, and that these scenes may thus bear limited resemblance to what actually happened in a scene in the first place. In other words, these scenes are 'imaginary' as opposed to 'real'. Bill Nichols has written about documentary's recent tendencies towards the questioning of documentary 'truth': "*Documentary has come to suggest incompleteness and uncertainty, recollection and impression, images of personal worlds and their subjective construction.*"<sup>95</sup> The 'truth', according to John Comer, is a highly contested concept in documentary work.<sup>96</sup> It has been suggested that documentaries employ a kind of 'truth' and that this may be understood as the 'truth' which is found in the way that we mentally organize our perceptions.<sup>97</sup> In this sense, documentary 'truth' lies in an understanding of the film, or the animation artwork as in the case of Kentridge, as developing much the same way that humans process and organize their world through perception.<sup>98</sup> Linda Williams suggests that in our daily lives we choose to extract from our experience of the world an understanding of it based on the constant comprehension and organization of our experience.<sup>99</sup> We make sense of documentary imagery based on our understanding of the world that provided the information necessary for the existence of those images.<sup>100</sup> This process is similar to the mind's process of constructing and reconstructing the material we see in film, focusing on the differences between representation and our constructed realities.<sup>101</sup> In much the

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<sup>94</sup> Nicholas, B *Representing Reality: issues and concepts in Documentary*. Bloomington and Indianapolis: Indiana University Press, 1991, p107

<sup>95</sup> Nichols, B. "Getting to Know You....Knowledge, Power, and the Body." 'Theorizing Documentary'. M. Renov, ed. New York: Routledge, 1993, p174.

<sup>96</sup> Comer, John *The Art of Record: A Critical Introduction to Documentary*. Manchester and New York: Manchester University Press, 1996, p10

<sup>97</sup> Jordan, Randolph *The Gap: Documentary Truth between Reality and Perception*, [http://www.horschamp.qc.ca/new\\_offscreen/documentary\\_truth.html](http://www.horschamp.qc.ca/new_offscreen/documentary_truth.html) 2003, p1

<sup>98</sup> Williams, Linda. "Mirrors Without Memories: Truth, History and the New Documentary." 'Film Quarterly.' Vol. 46, No. 3, Spring 1993, p 14.

<sup>99</sup> Ibid

<sup>100</sup> Prince, Stephen. "True Lies". 'Film Quarterly' Brian Henderson + Ann Martin, eds. Berkeley and Los Angeles: University of California Press, 1999, p394.

<sup>101</sup> Nichols, Bill. *Representing Reality: Issues and Concepts in Documentary*. Bloomington: Indiana UP, 1991, p235.

same way Kentridge's animation artworks are constructed from his subjective experiences.

Is what you think and reveal to others the truth or is it a case of the truth modified to suit you? In their book entitled: *The Myth of Repressed Memory* (1994), Dr Elizabeth Loftus and Katherine Ketchman write about what they call “*Happening truth*” and “*Story truth*” where the former refers to the indisputable black and white reality of what happened, and the latter is the truth about a person's interpretation of the truth.<sup>102</sup> Most of the time truth is a person's perception of it rather than incontrovertible reality, if this form of reality can ever be attained. The very act of putting an act into words is a subjective experience. People augment details that may not be true, that spark emotion and add life to the story. On account of this, the ‘truth’ is most often a person's perception of it rather than indisputable fact. The ‘truth’ is most often a “*creative interpretation of actuality*”<sup>103</sup> rather than a clear reflection of actuality itself. The dividing line between fact and fiction may also be regarded as fluid in the visual arts as it generally involves an artist's creative interpretation of an event. Kentridge's drawing process can be described as a creative interpretation of the ‘truth’ from autobiographic documentation as he includes aspects of his memories of his childhood such as his recalling of the events of the Sharville massacre and his memories of Johannesburg's East Rand landscape.<sup>104</sup>

The term ‘documentary’ is constructed in much the same manner as the world that we know and share.<sup>105</sup> Documentary engages with the world by representing it by using dramatized footage to create a believable story. In this sense documentaries can be said to offer a likeness of the world that bears a recognizable familiarity. For instance, where a film is made in the same location in which a murder scene had previously been investigated using actors to dramatize scenes of actual murders, the investigation of the crimes, trials and the conviction of the criminals. But, as suggested earlier, the

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<sup>102</sup> Loftus, Elizabeth and Ketcham, Katherine *The Myth of Repressed Memory*. New York: St. Martin's Press, 1994, pp38-39

<sup>103</sup> Corner, John *The Art of Record: A Critical Introduction to Documentary*. Manchester and New York: Manchester University Press, 1996, p13

<sup>104</sup> Cameron, Dan, Christov-Bakargiev and Coetzee, J., M. *William Kentridge*. New York: Phaidon Press, 2003, p33

<sup>105</sup> Nicholas, B *Representing Reality: Issues and Concepts in Documentary*. Bloomington and Indianapolis: Indiana University Press, 1991, p12

constructedness of all this complicates the authentication of 'truth' in the documentary. The 'reality' of documentary construction in video and animation is based on the fact that images may be altered both during and after the creation of the piece by means of conventional analog video editing as well as digital editing.<sup>106</sup> Kentridge's animations involve analog editing and are in this sense very evidently 'constructed'.

The concept of the medical gaze, introduced in chapter two, implies a range of associations around the camera being an instrument of control, scrutiny, recording and memory.<sup>107</sup> In the film *Ubu Tells the Truth* (1996-7), Kentridge uses actual home video footage of murder scenes filmed by police officers. His use of clips from police footage certainly provides a historical referent to the issues addressed by the TRC by giving the benefit of both 'historical' documentation and fictional narrative. The video clips captured by the police are 'historical' in the sense that they are recorded footage of murder scenes and fictional in the sense that they are taken from the police's point of view which is inherently a constructed subjective viewpoint;<sup>108</sup> the police officers select what to include and leave out of their video footage.

Another feature of the constructedness of Kentridge's animations can be detected by means of incorporating traces left behind from the erasure of previous images as a method of documenting the passing of time between successive animation frames. Kentridge states that his films reveal "*the idea of movement through time - of continuity of past and present like the continuity of the past and present in post apartheid South Africa.*"<sup>109</sup> Monitoring the shift between one moment (and condition of the drawing) and later moments, the continual process of drawing/erasure/redrawing gives rise to a documentary of visible erasure marks in the editing process and constructs a kind of temporal montage in which the actual process of the drawing is documented.

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<sup>106</sup> Nichols, Bill *Introduction to Documentary* Bloomington and Indianapolis : Indiana University Press, 2001, pP 2-3

<sup>107</sup> Cameron, Dan, Christov-Bakargiev and Coetzee, J., M. *William Kentridge*, New York: Phaidon Press, 2003, p33

<sup>108</sup> Nicholas, B *Representing Reality: issues and concepts in Documentary*. Bloomington and Indianapolis: Indiana University Press, 1991, p75

<sup>109</sup> Godby, Michael. *William Kentridge: Retrospective*. Art Journal, vol 58, No. 3, Autumn 1999, p 74-85

The element of factual ‘truth’ associated with the documentary applies equally to medical diagnostic technology where what is read off medical scans and related medical imagery plays a vital role in diagnosing illness.<sup>110</sup> What is seen on medical scans is regarded as the ‘truth’ of a person’s illness even though false positive or false negative diagnoses<sup>111</sup> may well occur. While medical diagnostic images carry an element of ‘truthfulness’ based on the medical specialist’s knowledge and authority in the field, this ‘truth’ may be equally questionable with the possibility of false positive results. There may also be different interpretations of medical scans by different medical professionals. Kentridge avails upon this variability of medical ‘truth’ by making use of medical imagery within his animation artworks even though the assumption of ‘truthfulness’ may be open to dispute. In fact, this openness to debate may be what makes his work that much more appealing to the viewer.

Kentridge uses the notion of medical imagery as an allegory for opening up his archive of memories of experiences stored in the internal body. In *History of the Main Complaint* (1996) Kentridge uses Soho’s body literally as a site for personal reflection and memory storage. His animation functions as a form of personal documentary as well as a means of working through and documenting the process of healing from the trauma inflicted during the years of apartheid rule. Kentridge’s animations, whilst the storyline can be considered fictional, do portray a true representation of aspects of life during the apartheid era. By using both fictional and factual information, Kentridge deliberately throws open the question of the creation of an authentic autobiography. Kentridge’s drawings may communicate a ‘truth’ on a level of shared awareness or intuition that cannot be accounted for by verbal communication alone.<sup>112</sup> Putting it differently, we can question the so-called ‘truthfulness’ of his autobiographical artworks. Steiner and Jung pose an important question about the premise of autobiography in this respect:

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<sup>110</sup>Nichols, Bill *Introduction to Documentary* Bloomington and Indianapolis: Indiana University Press, 2001, p. xiii

<sup>111</sup> A false positive test is a test result or finding which suggests the presence of a disease which turns out to apparently not be there. But, another disorder may be found that explains the result.

A false negative test is a result or finding which suggests that the dreaded disease is not there, but which, on further investigation the disease is/was found to be present. <http://poptop.hypermart.net/falseposneg.html> accessed 9/23/2008

<sup>112</sup> Thompson, Vanessa *Healing violence in South Africa: A textual Reading of Kentridge’s Drawings for Projection*. Master’s Dissertation, 2005, p.31

*“Autobiography is the product of various factors - real experiences, together with things heard, seen, read, narrated and invented. Fact and fiction are inextricably woven together.”*<sup>113</sup>

Kentridge reports on his own state of mind and the unending reformulation of his identity through his use of drawing/erasure/ redrawing in his animation artworks and through intermingling ‘reality’ and fiction. His stories are fictional, but the context in which they are placed is a critique of the apartheid system of government and exposes aspects of truth. Kentridge’s work may in this sense be considered as the ‘discovery’ of an autobiography. On this point Steiner and Jung pose the following questions:

*“If autobiography is made-up, rather than given, does that make it closer to fiction than to fact? These artists invent characters and enact their stories or weave those character’s stories in and out of their own. Where do the real finish and the invented begin?”*<sup>114</sup>

These questions cannot be easily answered. It may be concluded that ‘truth’, in this sense, is not an empirical given, but rather a continuous mental construction. Autobiography in this context is therefore an imaginative identification with the person who the autobiography is about.<sup>115</sup> Kentridge’s use of medical imagery falls within this category of imaginative interpretation as he makes use of the concept of the ‘medical gaze’ to suggest that medical imagery like MRI and Sonar Scans are able to uncover repressed memories.

With the aid of autobiographical documentary Kentridge exploits contemporary postmodern thought that suggests that there is no such thing as an objective history and that one can only attain some kind of understanding by being exposed to different or numerous truths.<sup>116</sup> Documentary film practice as site of contestation and change<sup>117</sup> is an idea examined in *History of the Main Complaint* (1996) where Kentridge uses internal

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<sup>113</sup> Steiner, Barbara and Jung, Jun *Autobiography* United Kingdom: Thames and Hudson, 2004, p27

<sup>114</sup> *Ibid*, p30

<sup>115</sup> Goodman, N, *Languages of Art* Indianapolis: Hackett, 1976, p68

<sup>116</sup> *Two major Case Studies*. [http://www.wits.ac.za/library/ETD\\_FC/CHAPTER%204.htm](http://www.wits.ac.za/library/ETD_FC/CHAPTER%204.htm), p8

<sup>117</sup> Nicholas, B, *Representing Reality: Issues and Concepts in Documentary*. Bloomington and Indianapolis: Indiana University Press, 1991, p12

images of Soho's body, both as an evaluation of himself and of the atrocities committed during the apartheid years. *History of the Main Complaint* (1996) is not about understanding of the 'totality' of the history of apartheid, but deals with a particular individual's [his] interpretation of that history.<sup>118</sup> In this and his other animation artworks, Kentridge creates into himself two personae, Soho and Felix. He judges and represents each character from the other 'I' point of view. Felix is the spectator, an impartial spectator. Soho can also be regarded as a witness to the atrocities committed during the apartheid regime. He is like a spokesperson in a documentary film. Soho represents the feelings, emotions and memories of Kentridge. As suggested by Bill Nicholas, "*the construction of the documentary delivers the thoughts, impressions, feelings and memories of the individual witness directly to the viewer.*"<sup>119</sup> Kentridge is using Soho's body as a witness to his unconscious memories of the atrocities that were perpetrated during the apartheid era.

*History of the Main Complaint* (1996) was created in response to the establishment in April of that year of the Truth and Reconciliation Commission (TRC). As already outlined in the second chapter, this commission was a court-like body assembled in South Africa after the end of apartheid. Anybody who felt he or she had been a victim of violence was invited to come forward and be heard at the TRC and would be given the opportunity to confess to their crimes. Perpetrators of violence could also give testimony and request amnesty from prosecution.<sup>120</sup> The TRC was tasked with discovering and revealing past wrongdoing by the South African government, in the hope of resolving conflict over the past. "*The commission was empowered to grant amnesty to those who committed abuses during the apartheid era, as long as the crimes were politically motivated, proportionate and there was full disclosure by the person seeking amnesty.*"<sup>121</sup> It facilitated the "*rehabilitation and the restoration of human and civil*

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<sup>118</sup> Two major case studies. [http://www.wits.ac.za/library/ETD\\_FC/CHAPTER%204.htm](http://www.wits.ac.za/library/ETD_FC/CHAPTER%204.htm), p8

<sup>119</sup> Nicholas, B *Representing Reality: issues and concepts in Documentary*. Bloomington and Indianapolis: Indiana University Press, 1991, p54

<sup>120</sup> Dubow, Jessica and Rosengarten, Ruth "*History as the Main Complaint: William Kentridge and The Making of Post-Apartheid South Africa.*", 'Art History' vol. 27 No. 4, September 2004, p679. Truth and Reconciliation (South Africa) [http://wikipedia.org/wiki/Truth\\_and\\_Reconciliation\\_Commission](http://wikipedia.org/wiki/Truth_and_Reconciliation_Commission)

<sup>121</sup> Truth and Reconciliation [http://en.wikipedia.org/wiki/Truth\\_and\\_Reconciliation\\_Commission\\_\(South\\_Africa\)](http://en.wikipedia.org/wiki/Truth_and_Reconciliation_Commission_(South_Africa)) accessed 03/10/2008

*dignity of victims of violations of human rights.”<sup>122</sup> “It aimed to restore voice and dignity to those previously marginalized and in the process confer public acknowledgement, widely regarded as a key contributor to the healing process.”<sup>123</sup>*

Nahla Valji suggests that the “TRC is in itself a concept that is challenged as there are various levels at which reconciliation must take place: individual, community, national and political. Each of these levels needs to be addressed for true reconciliation to occur, but not all are possible to address solely through the work of a truth commission.”<sup>124</sup> There is the question of “what reconciliation should look like in a South African context or whether reconciliation has been reached.”<sup>125</sup> The opening scene to *History of the Main Complaint* (1996) appears to address some of these concerns where a tripod with a bowl containing water is shown, signifying something like an offering which could quench one’s thirst, wash away or relieve pain, i.e. symbolizing healing.<sup>126</sup> At the conclusion of the film the bowl is still full of water. The full bowl of liquid, i.e. the water not having been used to quench, wash away or relieve pain, seems to suggest that emotional healing and reconciliation has not taken place. Pointing to the fact that the TRC did not fully achieve the reconciliation it set out to achieve. In fact, “studies conducted by CSVR<sup>127</sup> in the post TRC period have shown that many of those interviewed believed that the amnesty process had aggravated their suffering as it was unable to meet their expectations- that of revealing substantial new truth and holding all perpetrators to account.”<sup>128</sup>

Healing in *History of the Main Complaint* (1996) also deals with an aspect that can be termed the “talking cure” or the “drawing cure” in Kentridge’s animation artworks (which the TRC can be considered as a synonym as it allows the crime perpetrators to tell their stories in the hope that it will provide some healing from the atrocities). Freud

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<sup>122</sup> Traces of Truth. <http://truth.wvl.wits.ac.za/about.php> accessed 03/10/2008

<sup>123</sup> Op. cit.

<sup>124</sup> Valji, Nahla Truth and Reconciliation- Lessons from the South African Context [http://www.csvr.org.za/index.php?option=com\\_content&task=view&id=134&Itemid=39](http://www.csvr.org.za/index.php?option=com_content&task=view&id=134&Itemid=39) accessed 9/30/2008, p1

<sup>125</sup> Ibid

<sup>126</sup> Cameron, Dan, Christov-Bakargiev and Coetzee, J., M. *William Kentridge*, New York: Phaidon Press, 2003, pp84-93

<sup>127</sup> Centre for the Study of Violence and Reconciliation

<sup>128</sup> Valji, Nahla Truth and Reconciliation- Lessons from the South African Context [http://www.csvr.org.za/index.php?option=com\\_content&task=view&id=134&Itemid=39](http://www.csvr.org.za/index.php?option=com_content&task=view&id=134&Itemid=39) accessed 9/30/2008, p1

introduced this term in *Beyond the Pleasure Principle*, wherein the view is expressed that a person can only be cured of PTSD, by talking through the traumatic event and by making sense of the traumatic episode. Kentridge can be perceived to be using the interior organs of Soho's body to piece together the traumatic events i.e. atrocities perpetrated during the apartheid era. Like the TRC, *History of the Main Complaint* (1996) involves disclosure and the process of healing through the telling of a personal story. *History of the Main Complaint* (1996) involves Kentridge's recollection of the trauma and putting it into a personal narrative in the context of the 'New South Africa' to commence the healing process. "When Soho's memory allows him to recall the accident that catapulted him into hospital, he begins to recover. Metaphorically, according to Kentridge, this process is that with which every South African needs to engage in if the country is to heal. Everyone needs to take responsibility for the violence and violations in the history of South Africa. By creating Soho as a self-portrait, Kentridge makes sure that he himself becomes part of this process that he sees as inevitable for all South African of good will."<sup>129</sup> Vanessa Thompson points out that erasure in Kentridge's animations may also be interpreted as serving dual a function: to erase the 'otherness' of the African people and secondly, the erasure of the violence of the apartheid regime.<sup>130</sup>

Kentridge employs another metaphor; control of the body by means of sketches of Soho's body being kept alive by the use of medical equipment in *History of the Main Complaint* (1996), which alludes to the issue of enforced regulation and the manipulation of black South African citizens. This lack of control on the part of Soho symbolizes the lack of control the black South African inhabitants experienced during the apartheid years. A typical example being the Pass Laws<sup>131</sup>, which controlled access and movement of non-whites in "White" areas. The carrying of a passbook was considered to be demoralizing to say the least on this subject. The Apartheid regime also used methods of indoctrinating

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<sup>129</sup> Two Major Case Studies [http://www.wits.ac.za/library/ETD\\_FC/CHAPTER%204.htm](http://www.wits.ac.za/library/ETD_FC/CHAPTER%204.htm) p9, accessed 2006/06/26

<sup>130</sup> Thompson, Vanessa *Healing violence in South Africa: A textual Reading of Kentridge's Drawings for Projection*. Master's Dissertation, 2005, p83

<sup>131</sup> Pass laws in South Africa were designed to segregate the population and limit severely the movements of the non-white populace. This legislation was one of the dominant features of the country's apartheid system. Introduced in South Africa in 1923, they were designed to regulate movement of black Africans in urban areas. Outside designated "homelands", black South Africans had to carry passbooks ("dom pas", meaning dumb pass) at all times, documentation proving they were authorized to live or move in "White" South Africa

white school children in the whole concept of apartheid, whilst black school children were provided with separate and inferior education. Soho is being nourished by a blue intravenous liquid that Thompson suggests is a type of therapy/anxiety.<sup>132</sup> This can also be interpreted as a symbol of Soho being manipulated by the system of the state.

*“The 1970s and 1980s of South African history are generally understood to constitute to the most bloody, murderous and horrific years of the apartheid regime. Several states of emergency were proclaimed, granting wide ranging powers to the authorities and thousands of people were detained without trial, tortured and killed”.*<sup>133</sup>

In direct response to acts of atrocities perpetrated during the apartheid era, a form of “*Resistance Art*”<sup>134</sup> came into being. The term “*Resistance Art*” was first coined by Sue Williamson in her book of the same title (1989), where reference is made to artworks such as Jane Alexander’s *Butcher Boys* (1985), Sam Nlengthgwa’s *The Death of Steve Biko* (1990) and Paul Stopforth’s *The Interrogator* (1979). These artworks address the the issue of the horrific crimes that were committed during this period. Kentridge’s animations similarly address the matters relating to the numerous atrocities that were committed together with a form of healing process for the trauma resulting from these acts. Kentridge goes a step further by grappling with the inadequacies of the TRC which was set up to provide the necessary healing and reconciliation for the victims of apartheid.

Cameron writes that “*Kentridge does not want a repetition of violent crimes such as the work of Andy Worhol, rather to be re-remembered in a restorative fashion by allowing the viewer and the creator to actively engage in rearticulating political events so that a form of healing can take place within the people of South Africa.*”<sup>135</sup> In *Weighing and Wanting* (1998) Soho’s memories can be read as being embedded in the rock –a symbol that stands for the notion that memories are embedded within the psyche of Soho, alais [Kentridge]. The memories as represented can be understood as fossilized species of

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<sup>132</sup> Thompson, Vanessa *Healing violence in South Africa: A Textual Reading of Kentridge’s Drawings for Projection*, Master’s Dissertation, 2005, p135

<sup>133</sup> Thompson, Vanessa *Healing Violence in South Africa: A Textual Reading of Kentridge’s Drawings for Projection*, PhD Thesis, p41.

<sup>134</sup> Ibid

<sup>135</sup> Cameron, Dan, Christov-Bakargiev and Coetzee, J., M. *William Kentridge*, New York: Phaidon Press, 2003, p33

animals. These ‘excavated’ representations; images of Mrs. Eckstein, are like isolated sockets of minerals embedded within the rock and representing glimpses of Soho’s intimate life. These memories become shattered; recollections of both Soho’s personal and collective past lie shattered beneath layers of rock. Soho is still haunted by the ghosts of memories that are constantly being replayed. His memories are stuck on the edge of consciousness and are too terrifying to deal with. These memories must be retrieved and brought together into a meaningful sequence to bring about the healing experience he is going through.<sup>136</sup> Soho is only able to regain consciousness from his coma after his memory allows him to recall the accident in which he killed a man whilst attempting to run across the street. Soho had repressed this memory and was only able to start the healing process once the incident has been recalled so he can come to terms with the trauma. In *Weighing and Wanting* (1998) Soho starts the healing process of a traumatic experience when shattered fragments of the cup and scenes within the rock are made whole again. He has reviewed his life and has made a reassessment of his life.

Kentridge’s drawings of Johannesburg are recognizable to most South Africans and although Kentridge’s characters are fictional, the circumstances in which they lived may be compared to a documentary of life in South Africa during the apartheid era. In Kentridge’s animation artworks there is a relationship with everything involved with living in South Africa. His drawings are a “*self centered reflection of whatever is going on around him that interests him rather than great issues that have to be answered objectively.*”<sup>137</sup> An instance of this is where the sonar screen doubles as a car windscreen wherein Soho’s internal organs metamorphosize into a landscape.<sup>138</sup> In this fashion an internal temporal space turns into a metaphor for a geographical space.<sup>139</sup>

In both *History of the Main Complaint* (1996) and *Weighing and Wanting* (1998) medical imagery reveals a process of healing even though Soho may not be aware of what is taking place. Soho is fully conversant with the atrocities that occurred during the

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<sup>136</sup> Op. cit. p.74

<sup>137</sup> Cameron, Dan, Christov-Bakargiev and Coetzee, J., M. *William Kentridge*, New York: Phaidon Press, 2003, p8

<sup>138</sup> Dubow, Jessica and Rosengarten, Ruth “*History as the Main Complaint: William Kentridge and the making of Post-Apartheid South Africa.*” ‘Art History’ vol. 27 No. 4 September 2004, p673

<sup>139</sup> Cameron, Dan, Christov-Bakargiev and Coetzee, J., M. *William Kentridge*. New York: Phaidon Press, 2003, p9

apartheid regime, yet in *History of the Main Complaint* (1996) he drives past the scenes of death on the streets of Johannesburg. He drives over a body lying in the middle of the road. He drives past two people where the one is kicking the other. His conscience is only roused when he collides with a figure. The majority of the white population chose to ignore the TRC hearings and sweep this process of reconciliation under the carpet and carried on with daily life as if nothing was taking place. This view is confirmed by the fact that Soho returns to his desk in the final sequence of *History of the Main Complaint* (1996) together with his usual office paraphernalia, his typewriter and ticker tape machine, suggesting that no change has occurred. In a similar manner Kentridge may be suggesting that the whole process of the TRC's activities did not achieve what it set out to achieve.

Kentridge uses the narratives of the self in *History of the Main Complaint* (1996) and *Weighing and Wanting* (1998) as a site for memory by placing familiar landscapes and Soho's repressed memories within the medical scans of his body. The body's interior and exterior landscape in *History of the Main Complaint* (1996) seems to operate in a reciprocal mode, the complexities of power relations in the physical landscape finds effect too in the anatomy of the protagonist [Soho]. The landscapes here are thus both internal [in the form of memory] and external [images of the physical landscape], suggesting "a positing of the body as a fragile entity in relation to its surroundings," to quote Foucault from *The Care of the Self* (1986).<sup>140</sup> The environment has both positive and negative effects on a person's health. A life is lived within the boundaries of the body. It has a selectively permeable wall of skin, where elements from the environment can have either positive or negative effects on health. Nature and the body are each dependent on each other.

Kentridge makes use of the analogy between the landscape and memory to suggest Soho's [his] mental health. Landscape, like the skin which hides the internal organs from the eyes, hides the historical past of a place from the eye. Similarly, the mind protects the psyche by motivated forgetting or by repressing those memories that it does not wish to

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<sup>140</sup> Foucault, Michel *The Care of the Self*, Vol 3, England: Penguin Books, 1986, p 101

recall. The following quote by Kentridge's explains his analogy between landscape and memory well:

*"I am really interested in the terrain's hiding of its own history and the correspondence this has[...]with the way memory works. The difficulty we have in holding onto passions, impressions, ways of seeing something, the way that things seem so indelibly imprinted on our memories still become mirrored in the way in which the terrain itself cannot hold onto the events played out upon it."*<sup>141</sup>

Kentridge makes use of a kind of 'temporalization of space.' In one particular sequence in *Felix in Exile* (1994) a figure walks into a landscape whilst the camera records its progression. Charcoal lines metamorphosize into civil engineering, structures of a derelict drainage dam, a pipeline and abandoned road works. A body is shot down by a bullet and then becomes covered with newspaper, which then flutter and dissolves into invisible subsoil.<sup>142</sup> Kentridge's assimilation of walking bodies and massacre victims in his earlier animations as landscape features portrays space as a product of both history and nature. At the same time, landscape is able to absorb the blood of so many fallen bodies and buries the markings of crime scenes. The landscape contains the "*trace of some activity passed.*"<sup>143</sup> In this manner he composes drawings of features such as electricity pylons, culverts, pipelines, tire tracks, and so on, which represent a sense of history that Kentridge believes to be more real than any idealized view.<sup>144</sup> Expressed differently, landscapes allow the historical context to decay or deteriorate thus revealing the earth's capacity for repression and renewal.

It can therefore be assumed that everything in the landscape that has been made by both man and beast also has the potential to be unmade or reconstructed. This is also true of memories. Memories can be repressed, forgotten, reconstructed and recalled according to the state a person is in at a particular time. Jung refers to this as the shadow, the part of our mind containing those things that we would rather not own up to, that we are continually trying to hide from ourselves and others and sweep under the rug of our

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<sup>141</sup> Boris 2001, cited in Thompson, Vanessa *Healing Violence in South Africa: A Textual Reading of Kentridge's Drawings for Projection*, Masters Dissertation, Duquesne University, Pennsylvania, 2005 , p31

<sup>142</sup> Dubow, Jessica and Rosengarten, Ruth "*History as the Main Complaint: William Kentridge and the making of Post-Apartheid South Africa*" 'Art History' vol. 27 No. 4 September 2004, p684

<sup>143</sup> Godby, Michael *William Kentridge: Retrospective* <http://www.encyclopedia.com/doc/1G1-57876361.html> , 1999

<sup>144</sup> Ibid

consciousness.<sup>145</sup> Like the process of memory where memories are forgotten or repressed in the unconscious mind, there is a natural process of erosion, growth and dilapidation of built structures on the surface of the landscape. The human act of deconstructing and analyzing components from the past, both the intermediate and past history, provides a way to recall and make sense of the events of the past, like healing process of PTSD as discussed above.<sup>146</sup>

In conclusion, Kentridge's use of the internal body can be regarded as a metaphor for repressed memories. It can also be deemed to be a form of personal documentary. In Kentridge's animation artworks the use of a traditional medium such as charcoal to portray medical scans becomes a successful method of conveying metaphorical meaning. We are thus able to tune into human agency, perception and awareness and inventiveness of the body as a site for repressed body memories. We cannot directly see through the eyes of medical diagnostic equipment, but we can enter the artist's imagination of the processes within the body's memory and see through his/her eyes.<sup>147</sup> Kentridge incorporates images of South African historical events within medical scans, these images become a form of documentary as they offer a likeness to the physical world in which he has lived. Soho's body, as suggested earlier in this chapter, may be regarded as a witness to the events that occurred during the apartheid years even though he may not be consciously aware of it.

Kentridge's animation artworks appear to suggest a form of evaluation and change within Soho's body in the films *History of the Main Complaint* (1996) and *Weighing and Wanting* (1998) wherein the notion of images of landscapes embedded within the brain or other parts of the body are documented in the traces of the erased mark that are left behind in the film making process. This film making process mimics the natural process of erosion of both memory within Soho's body and the drawn landscape. In these two films, a layering of personal, aesthetic and political 'memory' have been employed in the drawn internal landscapes. Kentridge can be said to use the documentary film as an active

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<sup>145</sup> Peck, M., Scott *The Road less Traveled and Beyond*. Great Britain: Rider Books, 1997, p76.

<sup>146</sup> Williamson, Sue and Jamal, Ashraf *Art in South Africa: The Future Present*. South Africa: David Phillip Publishers, 1996, p50

<sup>147</sup> Ede, Sian, *Art and Science*, London and New York: I.B.Tauris, 2005, p138

re-assemblage of Soho's body as a reservoir of personal meanings and unconscious values. Documentary for me in this sense, is like the process of memory, that of deconstructing and analyzing the components of the past.

# Chapter Five

## Kentridge's Drawing Technique as Self Narration

As has been shown throughout this text thus far, Kentridge's drawing process and content in his animation artworks may be regarded as a form of self narration. This can be immediately recognized by his own 'recording' process of drawing, by means of his filming of the imperfect traces of erasure as well as capturing of his own thoughts with the aid of charcoal hand-drawn animations. There is a self-reflexiveness built into the process of drawing and filming sequences of narrative in which he sketches different temporalities of experience. Having defined self narration in the first chapter as a means of expressing personal thoughts, feelings and perceptions, Kentridge's thought process and development of ideas as well as his use of medical imagery can be shown to provide a method of narrating a drawing and creating a personal self narrative. His usage of the drawn MRI, sonar scan or other medical imagery becomes a unique way of translating his self narrative into his hand drawn animation artworks. "*To draw a medical image can create a new meaning as a diagnostic aid to the personal image rendered by the hand of the artist.*"<sup>148</sup> That is, if an image is drawn it changes the meaning of the drawn medical scan to a more personal introspective drawing than simply a medical image. I will examine here how the gestural expressionism of Kentridge's drawings are appropriate to his animation creation and how his process of putting marks to paper can be seen to be intimately connected to the way in which he constructs his narratives in his animations.

Kentridge suggests that "*the smoky transitions in X-rays, the discrete marks of a sonar scan, the diagrammatic marks of an MRI all translate, if not effortlessly, into charcoal and paper equivalents. The blunt stubby marks of a stick of charcoal make of themselves the codes, dots and dashes of sonar; a brush of charcoal dust is an immediate translation of an X-ray.*"<sup>149</sup> This process of creating equivalents in charcoal and paper conveys the individuality of Kentridge's mark making and the expressive nature of his hand drawn

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<sup>148</sup> Cameron, Dan, Christov-Bakargiev and Coetzee, J. M. *William Kentridge*. New York: Phaidon Press, 2003, p140

<sup>149</sup> *Ibid* p140

artwork. Other artists would employ different mark making procedures to represent medical imagery. Kentridge's mark making technique can therefore be said to "*bear the trace of the artist's presence through his charcoal and pastel marks.*"<sup>150</sup>

Kentridge created his animation films for projection using a distinctive animation technique, in which he draws each animated sequence, erases and redraws successive sequences on the same sheet of paper, photographing each sequence using a Bolex camera. He works with archive photographs of Johannesburg from the 1950's to portray memorabilia and architecture dating back to that period as a means of recollection of his childhood. He also frequently uses images obtained from his wife's medical textbooks (she is a qualified Medical physician).<sup>151</sup> An essential component of Kentridge's construction of self narrative is his unique combination of experiences and actions from his own life, used in conjunction with the lives and actions of others. Such experiences are also novel in that he incorporates these elements of memory into a South African society fraught with the legacy of apartheid.

Kentridge created his animation films for projection using a distinctive animation technique he terms as 'Stone Age', in which he draws each animated sequence, erases and redraws successive sequences on the same sheet of paper, photographing each sequence using a Bolex camera. Kentridge takes months to finish a single film, working directly from his drawing board at all times. Typically he produces several large drawings, each containing a particular scene. No computer generated special effects or tricks are used in his animation editing.<sup>152</sup>

As previously noted, Kentridge's animations are created by using, "*sequential shots of charcoal drawings that are erased and redrawn before the camera.*"<sup>153</sup> He suggests that his "*drawing is done with the entire body, standing up so that you draw with yourself sometimes in a dance, sometimes stand-off on your canvas on oversized torn off*

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<sup>151</sup> Polkinghorne, D. *Narrative Knowing and the Human Sciences*, New York: State University of New York Press, 1988, p159

<sup>152</sup> Cameron, Dan, Christov-Bakargiev and Coetzee, J., M. *William Kentridge*. New York: Phaidon Press, 2003, p38

<sup>153</sup> Baker, Kenneth. *Simple Images. Potent Impact. William Kentridge's Short Films Speak to a Violent History*, Chronicle Art Critic. Saturday, February 25, 2006.

*paper.*”<sup>154</sup> When creating an animation artwork he draws a few marks on the paper, walks to the camera and takes two shots/frames with his Bolex camera, walks back to the drawing, draws a few more marks and back again to the camera to take two more shots/frames. He calls this a “*dumb physical activity of ‘stalking the drawing.’*”<sup>155</sup> As maintained by Kentridge, this physical activity of walking to and fro from the drawing brings a form of physicality to the creation of the animation as his entire body becomes engaged in the act of drawing, rather than only his hand.

The self expressive quality of Kentridge’s animations occurs via the roughness and looseness of mark in his drawings and the imposition of mark in the midst of movement. As Rosalind Krauss points out: “*It leaves traces of unconscious bodily production on the drawing itself.*”<sup>156</sup> This physical form of drawing thus allows “*unconscious, unexamined thoughts that influence one’s body movement, beliefs and awareness to be manifested through gestural mark.*”<sup>157</sup> “*In this way our minds, thoughts, body movements and emotions can often conspire with a power beyond our control to produce inspired works.*”<sup>158</sup> Our behaviour, thoughts and emotions conspire with the power of the unconscious mind to produce artworks that are ‘intuitive’ rather than mechanical. This produces a form of unconscious bodily production on the drawing itself through the artist’s body movements as he/she creates a drawing that can be interpreted as a form of self narrative. I am of the view that this aspect of physicality precipitates uniqueness in Kentridge’s focus on self narration through his drawing. His utilization of sweeping strokes, rubbing, stippling, and so forth, in diverse ways, mark the experiences in his autographic narrative.

The years spent working in theatre has had an important influence on Kentridge’s drawing process. He asserts that he learnt a great deal about drawing from the different bodily and vocal states of acting in theatre. He describes drawing as being ““four

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<sup>154</sup>*The Space in between* <http://www.culturebase.net/artist.php?34> accessed 03/23/2007, p5

<sup>155</sup> Krauss, Rosalind “*The Rock: Drawings for Projection.*” ‘October’, Spring, Massachusetts Institute of Technology:,2000 pp5-6

<sup>156</sup>*Ibid* p35

<sup>157</sup> Arntz, William, Chasse, Betsy and Vicente, Mark *What the Bleep* Florida: Health Communications Inc.,2005, pp26-27

<sup>158</sup> *Chapter 4: Two Major Case Studies.* [www.wits.ac.za/library/ETD\\_FC/CHAPTER%204.htm](http://www.wits.ac.za/library/ETD_FC/CHAPTER%204.htm) accessed 2006/06/26, p4

*dimensional*, as existing in space and time”<sup>159</sup> and discusses the different degrees of tension, from totally relaxed drawing to totally hard drawing with a stick of charcoal, thereby linking the act of sketching to a kind of energy tension within the body. He likens this kind of drawing as being similar to the experience of acting out a particular scene on stage, where the actor would adopt the appropriate tone of voice for that scene. Kentridge’s application of drawing light marks or dark marks to inform in his drawing process, can be regarded as similar to a performance on stage where the range of acting fluctuates from whispers to shouting. Drawing in this manner, he suggests, is about making a highly informed mark based on a physical or emotional perception.<sup>160</sup> He states that: “*In theatre you would understand this as you can shift the entire body, not just your face or voice, but your entire body.*” In this manner Kentridge’s animation artwork “*lodges itself in the form of self expression. It involves an imposition of status in the midst of movement that leaves traces of unconscious bodily production.*”<sup>161</sup>

The drawing process above is part of Kentridge’s “*determinist vocabulary: reforming, erasure and ceaseless metamorphosis of objects.*”<sup>162</sup> As alluded to earlier in this dissertation, Kentridge’s work is also self narrated in the way in that he uses a procedure similar to the manner in which one uses words when speaking. In a like manner in which one does not always test a sentence before speaking, Kentridge creates his animation artworks through a sequence of drawing/partial erasure/drawing/partial erasure/redrawing in a spontaneous manner. By utilizing this unique animation technique Kentridge can be seen to be using the ordinary processes of human thought to develop an autobiographical narrative.<sup>163</sup> Such a drawing procedure can be regarded as a kind of *free association* frequently used in psychoanalysis originated by Sigmund Freud. Using the technique of free association in psychoanalysis, patients are repeatedly asked to recall anything which comes to minds, regardless of how unimportant or embarrassing the memory may seem to be. This technique assumes that all memories are arranged in a single associative network

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<sup>159</sup> Kaplan, Cheryl, *The Time Image*, Performing Arts Journal Inc., 2005, p34

<sup>160</sup> Op. cit.

<sup>161</sup> Ibid

<sup>162</sup> Muller, Katrin, *Bettina Inconsistent Memory* <http://www.gregkucera.com/kentridge.htm> accessed 03/23/2007, p2

<sup>163</sup> William Kentridge’s Drawings for projection, with a particular focus on History of the Main Complaint. [http://www.wits.ac/library/ETD\\_FC/CHAPTER%204.htm](http://www.wits.ac/library/ETD_FC/CHAPTER%204.htm)

and that sooner or later the patient will stumble across the crucial memory.<sup>164</sup> Kentridge states that it is only when he is physically engaged on a drawing that ideas start to emerge.<sup>165</sup> It is only through the drawing process, as with free association [free drawing in his case], that his memories, fantasies and life experiences start to emerge as he draws on paper.

The thoughts that direct Kentridge's drawings appear to evolve and change according to a narrative that was not thought out beforehand and leads to a kind of dismembering of the drawing and an assemblage of personal narratives in many times and spaces within his life. Kentridge states that his films are a way of "*examining his drawings*"<sup>166</sup> and the following quote by him lends some insight into his narrative construction process:

*"I have been aware when making drawings that there was often a middle stage when I was drawing most fluidly, with the greatest certainty. And that often at the beginning, and at the end, tightness would creep in. Initially, I was photographing the stages of making the drawing, filming it coming into being. I was trying to chart the imagery that went through it, a narrative that would develop through the drawing. And once I saw what the drawings did, and how it could not change, the idea came of actually structuring the narrative using several drawings."*<sup>167</sup>

The demands of creating a film and its narrative bring into being a whole new set of images that the artist may not have considered prior to the creation of the film. In other words, Kentridge does not fully predetermine the form of his films in advance of executing them. "*The creation of the film becomes a way of arriving at a set of drawings and the record of an experience.*"<sup>168</sup> As previously mentioned above, self-narration (and autobiography) denotes an account of personal experience through which personal stories are told from the position of an 'I', which forms an ongoing construction of personal identity in its social, cultural and historical contexts. Kentridge's animation artworks are concerned with tracking the changes taking place within himself. The political events depicted in his films, in a sense have been seen through his subjective mind by means of his personal life as events from an 'internal mindscape'.

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<sup>164</sup> Free Association [http://en.wikipedia.org/wiki/Free\\_association\\_\(psychology\)](http://en.wikipedia.org/wiki/Free_association_(psychology))

<sup>165</sup> Krauss, Rosalind "*The Rock: Drawings for Projection*." 'October', Spring, Massachusetts Institute of Technology., 2000 p9

<sup>166</sup> Tone, Lillian. William Kentridge: *Stereoscope*, <http://home.att.net/~artarchives/tonkentridge.html>

<sup>167</sup> Ibid: p 2

<sup>22</sup> Ibid: p3

There is a school of thought that suggests that every memory, from the cradle to the grave, is stored, but the mind cannot deal with all this information, so it represses some memories, incorporates others, and builds upon old information with new information. This colours our perception of the world. We are all looking at the world through our own rose [experience] coloured glasses.<sup>169</sup> The structure of the brain is wired according to what memories are important and what memories are not important and therefore forgotten. Kentridge's animations are also structured in a like manner wherein his memories of an event are reflected on in a scene and built upon, incorporated into or erased from the drawing. Krauss refers to Kentridge's artworks as a palimpsest, a manuscript on which two or more successive texts have been written and each one erased to make room for the next.<sup>170</sup> In a similar way to Kentridge's drawing process, the self is constructed, erased, to make space for the new and reconstructed. It may be said that the self is a kind of palimpsest of personal experiences. The sense of altering and adjusting the drawn image relates to the process of self construction mentioned in the first chapter. This process of 'self-shaping' and 'self-cultivation' is associated with the process of assimilating or disregarding new ideas of the self in relation to our constructed identities. This concept of drawing, erasure and redrawing may be linked to the postmodern idea, as alluded to in the first chapter, in the context of the process of identity formation, that the self is composed and decomposed continuously according to social forces. In this set of circumstances the self can be thought of as a central "*mechanism through which the individual and the social world intersect*".<sup>171</sup> Quoting Goldenson: "*In cognitive development, the term identity [another important aspect in the construction of the self] refers to the awareness that an object [self] remains same even though it may undergo many transformations.*"<sup>172</sup> In much the same way as the process of identity construction, Kentridge's creation of a self undergoes many processes of construction and deconstruction due to his drawing process of erasure and redrawing. Kentridge's identity remains constant during the creation process; we are however, able to gain some insight

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<sup>169</sup> Arntz, William, Chasse, Betsy and Vicente, Mark *What the Bleep* Florida: Health Communications Inc., 2005, pp26-27

<sup>170</sup> Krauss, Rosalind, "*The Rock: Drawings for Projection*" 'October', Spring, Massachusetts Institute of Technology., 2000 p27

<sup>171</sup> Elliott, Anthony, *Concepts of the Self*, USA: Polity Press, 2001, p24

<sup>172</sup> Goldenson, Robert, M. *Longman Dictionary of Psychology and Psychiatry*, New York and London: Longman, 1984, p366

into the construction and reconstruction of his thought process whilst creating an animation artwork.

Kentridge's animation artworks are used to come to "a *highly formed movie based on a physical or emotional perception*,"<sup>173</sup> as Cheryl Kaplan aptly describes. According to my own viewpoint, drawing using medical imagery serves to fix objects to the interior body as triggers or hooks. In this way they are not unlike our memory of props that remind us of our own history of family and society as, for example, old telephones, typewriters and other objects do in Kentridge's animation artworks. In this way the movie becomes a record of Kentridge's subjective experience of his childhood.<sup>174</sup> Kentridge's animation artworks are also an emblematic form of the temporal process of his memory creation. Kentridge states that his films show "*the idea of movement through time - of continuity of past and present*."<sup>175</sup> The conception of the movement of time is conveyed by means of the traces of erasure left in Kentridge's animation making technique which tracks the shift between one moment (as well as the condition of the drawing) and the next moment. This constant process of drawing/erasure/redrawing creates a montage of visible erasure marks in the editing process. It produces a kind of temporal montage of Kentridge's thought processes.

Kentridge's technique of creating his animations 'in real time' suggests a fracturing of time and occurs in *History of the Main Complaint* (1996) where he uses distinct expressions of time in the cuts from scene to scene. As Dubow and Rosengarten point out: When "*Soho drives in the landscape, he does not merely cover space; he is immersed in the densities of time*."<sup>176</sup> Cuts inbetween scenes show different time constructions, for example, the slow paced time displayed when Soho is in the hospital bed compared to the fast paced time when Soho is driving through the landscape and suddenly collides with a person. In *History of the Main Complaint* (1996) the sequence of the narrative is reversed so that it commences with a later point in the account and works

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<sup>173</sup> Kaplan, Cheryl, *The Time Image*, Performing Arts Journal Inc., 2005, p34

<sup>174</sup> Dubow, Jessica and Rosengarten, Ruth, "*History as the Main Complaint: William Kentridge and the Making of Post Apartheid South Africa*", 'Art History' vol 27, No. 4 Published by Blackwell Publishing. September 2004 p684

<sup>175</sup> Godby, Michael, *William Kentridge: Retrospective*, 'Art Journal', vol 58, No. 3, Autumn 1999, pp 74-85

<sup>176</sup> Dubow, Jessica and Rosengarten, Ruth. "*History as the Main Complaint: William Kentridge and the Making of Post Apartheid South Africa*," 'Art History' vol 27, No. 4 Published by Blackwell Publishing. September 2004, p682

its way back to the starting point of the narrative. This construction of narrative sets up a reversal in our understanding of time. The past becomes ordered in the light of the present when the timeframe of events that begins with Soho lying in his hospital bed jumps between the present reality and Soho's recollection of events that occurred in his past.<sup>177</sup>

Kentridge uses the principle of metamorphosis to create a narrative in his pastel and charcoal drawings that constantly changes in forms before the camera by the process of continuous erasure and redrawing.<sup>178</sup> The continual mutation and metamorphosis of objects provides space for the viewer's imagination and encourages contemplation by the viewer. This allows for the observer to 'participate' in, or engage more directly with the film so that "*a conversion can take place from a simple narrative into a more complex, introspective narrative of South African history.*"<sup>179</sup> The process of metamorphosis can be seen in *Felix in Exile* (1990) where a man shaving, looks at himself in the mirror and sees his face being shaved away. In *Stereoscope* (1998) a cat transforms into a telephone, to a bomb and into gas mask. In *Weighing and Wanting* (1998) an MRI scan metamorphoses into a rock and into a cave. In *History of the Main Complaint* (1996) X-rays reveal vague structures in the body out of which a road emerges on which the accident occurs.<sup>180</sup>

The soundtrack of the animation is another important component in the creation of a narrative. The emotive effect of music and sounds impact on how one interprets these drawings. Sound especially creates the mood and atmosphere of the piece, it also allows for pace and emphasis of specific parts in time.<sup>181</sup> Kentridge suggests that the music acts as a form of 'grammar.' How the music starts, where it stops and where it changes assists the viewer to construct a narrative. As Kenneth Baker points out, an "*animation is quite crude and jerky if you have the wrong music, it is unwatchable.*"<sup>182</sup> The right music smoothes out the jerkiness of the animation and causes the eye to see it in a different

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<sup>177</sup> Chapter Four, [www.wits.ac.za/lidrary/ETD\\_FC/CHAPTER%204.HTM](http://www.wits.ac.za/lidrary/ETD_FC/CHAPTER%204.HTM) 2004,p8

<sup>178</sup> Baker, Kenneth., *Simple images. Potent Impact. William Kentridge's Short Films Speak to a Violent History*, Chronicle Art Critic. Saturday, February 25, 2006, p3

<sup>179</sup> Godby, Michael, *William Kentridge: Retrospective*, 'Art Journal,' vol 58, No. 3, Autumn 1999, p108

<sup>180</sup> Muller, Katrin, Bettina *Inconsistent Memory* <http://www.gregkucera.com/kentridge.htm> accessed 03/23/2007, p1

<sup>181</sup> Wells, Paul, *Understanding Animation*. London and New York: Routledge, 1998, p27

<sup>182</sup> Baker, Kenneth, *Simple Images. Potent Impact. William Kentridge's Short Films Speak of a Violent Past*, <http://www.sfgate.com/cgi-bin/article.cgi?file=/c/a/2006/o2/25/DDGPJHDPEA1.DTL> , accessed 2006/06/26, p4

way.<sup>183</sup> By way of illustration, the acceleration of the sound of a heartbeat may be used to signal a heightened sense of drama. In *History of the Main Complaint* (1996), “*from the doleful strains of a Monteverdi Madrigal erupts another soundtrack: the insistent beep of medical technology. These are combined with the dull syncopations of a typewriter, the shrill ring of a telephone, the ticking of a ticker timer machine and the sizzle of electrical contact when the two stethoscopes meet in an x-ray of Soho’s broken pelvis.*”<sup>184</sup>

To conclude, Kenridge’s drawing process and the content of his animation artworks can be regarded as a form of self narration by means of the physical activity involved in his drawing process. His full engagement in the process of drawing can be considered as a form of ‘thinking through’ of his ideas. Kenridge’s drawing process openly displays his autographic mark making process which carries his own distinct signature by way of his bodily engagement. His use of the hand drawn MRI, sonar scan and other medical imagery becomes a unique way of translating memories that are not obvious as to their interpretation as well as a means of revealing repressed memories in his animation artworks. The sound track also forms an integral part as to how the animation artwork is interpreted.

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<sup>183</sup> Ibid: p3

<sup>184</sup> Dubow, Jessica and Rosengarten, Ruth, *History as the Main Complaint: William Kentridge and the Making of Post Apartheid South Africa*, ‘Art History’ vol 27, No. 4 Published by Blackwell Publishing. September 2004, p673

# Chapter Six

## Sympathetic Nervous System

This chapter addresses my practical component submitted toward the Fine Arts MA degree. I am interested in the notion of perception and cognition and understanding how the self transforms, organizes, stores and uses information arising from the world in which we live. My work deals with coming to terms with mental illness and temporal lobe epilepsy diagnosed during the course of my studies. I will discuss my artwork in relation to Kentridge's and will look at the similarities between my work and his and how his work has influenced my own. I will explain how my art making process has developed since my undergraduate years of study and will then discuss some examples of my own artworks submitted towards the fulfillment of the degree.

The similarity of Kentridge's and my own work lies in the use of self narration through the use of medical imagery. Both my work and his focus on the creation of an authentic autobiography. As suggested earlier in this dissertation, Kentridge creates a unique sense of self through his mark making and his body movement while creating a drawing. I have noted his drawing process as being similar to the process of speaking where one does not rehearse one's sentences before uttering them and have suggested that this allows for a unique form of self narrative to emerge. While Kentridge's emphasis is on documenting the drawing process and his personal memories, my emphasis is on recording personal journeys and experiences using the mediums of stop frame animation, painting and printmaking. My animation process is similar to that of Kentridge, but it also differs in that I use computer programs such as *Macromedia Flash™ version eight*, *Macromedia Freehand™ version ten* and *Photoshop CS™ version eight* to enhance or create certain aspects of my drawings. I make A4 size drawings of my subject matter; scan them onto the computer, erase, redraw and collage elements of hand drawn animation with computer drawn animation. The final editing process occurs on *Apple Final Cut Pro™ version four* where images are put together to create a sequence and the soundtrack is added. The soundtrack is created with sound effects downloaded off the internet and

modified tracks from CDs. Both my drawing process and that of Kentridge involve alterations made to an image. His being a single image that is erased, redrawn and erased again and mine being a lot of different images put together to create an animation artwork.

My work is also about capturing personal experiences and memories and using the process of animation, painting and printmaking to come to terms with painful memories related to my experiences as a result of living with undiagnosed temporal lobe epilepsy. In order to come to terms with my disease and create artworks, I have often placed myself in a 'witness' position where I view myself from the outside rather than feeling how things are from the inside. Kentridge's animation artworks depict his experiences as a white South African male living in the apartheid era. In many ways, as discussed earlier in this dissertation, they show the personal shock he felt as a result of the atrocities of the apartheid era. His work for me is about capturing personal experiences and memories and using his drawing process to rethink these events using a fictional story line in order to come to terms with them.

Like Kentridge's use of Soho and Felix as his persona, my animation work uses a crude line drawn figure with long hair to represent myself. This figure goes through turnstiles, runs into walls and falls onto cactuses as a means of expressing my frustration at my temporal lobe epilepsy which causes me to cry for hours to days with little provocation as well as peoples' lack of understanding about the disease. There are a lot of difficulties associated with the way in which symptoms are manifested in temporal lobe epilepsy. The problem is that many of these symptoms are similar to those associated with mental illness. Here is an extract that explains the difficulties associated with temporal lobe epilepsy well:

*Temporal lobe epilepsy (TLE), now more commonly called complex partial seizure disorder so as to include seizures that originate in the frontal foci, straddles the borderland between psychiatry and neurology. Since the condition may involve gross disorders of thought and emotion, patients with temporal lobe epilepsy frequently come to the attention of psychiatrists. But since symptoms may occur in the absence of generalized grand mal seizures, physicians may often fail to recognize*

*the epileptic origin of the disorder. Indeed, misdiagnosis and failures of diagnosis are common in TLE.*<sup>185</sup>

Seizures originating in the medial temporal lobe often result in a 'dreamy state' involving vivid memory-like hallucinations sometimes accompanied by *déjà vu* or *jamais vu* (interpreting frequently encountered people, places or events as unfamiliar). Highly elaborated mental states also occur, sometimes called "*intellectual aura*," involving "*dreams mixing up with present thoughts*," a "*double consciousness*" and a "*feeling of being somewhere else*."<sup>186</sup> For example, a person may feel compelled to stare for brief moments at a coffee table in her living room since, as she put it: 'It just doesn't look exactly like my coffee table.' After a few seconds, the feeling disappears. At no time does she think that the table has actually changed; the only thing that varies is her perception and "interpretation" of it.<sup>187</sup> The emotion experienced as part of the seizure is a disturbing one, described as dread or a feeling of impending doom or intolerable depression; in others, the emotion may be experienced as pleasant or euphoric.<sup>188</sup>

I will now explain how my experience of this illness has informed my art creation process. Belief processes of the pre-modernist era of illness, especially mental illness, still inform the ideas of some people today. Overly emotional behaviour is perceived to be caused by a deficiency in character, perhaps a lack of willpower. Nobody says this out loud, of course, but many people believe it, or act as though they do. At the gut level, mental disorders still carry a lot of negative baggage. Would you be willing to admit to depression as you would to diabetes? And even if you admit to depression, would you recognize it as a disorder of perception that causes you to see everything, even your own distress in the worst possible light, or would you think it was a lack of willpower? This is what I had to face from age eleven. I was more sensitive and emotional than the other

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<sup>185</sup> Restak, Richard M.D. 'Complex Partial Seizures Present Diagnostic Challenge' in *Psychiatric Times* September 1995, Vol. XII, Issue 9, p3

<sup>186</sup> Ibid

<sup>187</sup> Ibid

<sup>188</sup> Ibid

children. Teachers, parents thought I was weak and it was a case of ‘pulling myself together.’ A few self help books would ‘ruk my reg’<sup>189</sup> so to speak. It never was like that. It only got worse. I won’t go into detail here because Arlene’s personal history is not the point of this dissertation, but I will say finding out that I have a medical condition, right temporal lobe epilepsy, provided the biggest relief ever. I was not weak and pathetic all those years, I was just ill and now I can do something about it.

Medical diagnostic procedures such as EEG have also played an important part in the diagnosis of my illness. The squiggly lines that show electromagnetic currents within the working brain fascinate me and inform my work, as can be seen, for example, in *Thresholds* (2007) (Fig. 6.1). In this artwork I show that there are different levels of awareness in the brain through the opening and closing of levels of consciousness. Activities like transcendental meditation can be used to push the brain to function at higher and higher levels of awareness because old systems of thought cannot handle further input from the environment where it cannot dissipate the necessary entropy and as a result becomes more chaotic and begins to break down. Only once the threshold is exceeded can the system reorganize itself. This reorganization represents the healing process taking place in my life.

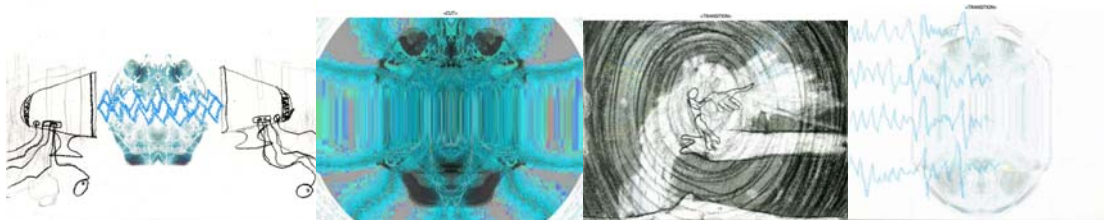


Fig. 6.1

My animations, like Kentridge’s, show the process of coming to terms with my past history. I am using medical imagery as a form of self narration to reveal my personal history. Another work that uses my experiences as subject matter is *MRI* (2008) (Fig. 6.2), where I scanned the images from my MRI scan and put them together using THE computer software *QuickTime Pro™* and created a soundtrack to resemble the sounds that

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<sup>189</sup> Afrikaans expression for: ‘pull yourself together’ or ‘put yourself right’

an MRI machine makes while showing scans of my brain appearing one after another. Scrutinized by medical diagnostic equipment, my brain here is no longer private. It is placed within categories of normal and abnormal. The EEG performed on my brain also placed my electromagnetic forces within my right temporal lobe in the category of abnormal. As suggested before, medical imagery affects one's experiences and conceptions outside clinical settings as well.<sup>190</sup> When it comes to behaviour which is very much a part of personal identity, society also places the behaviour of people into categories of normal and abnormal.

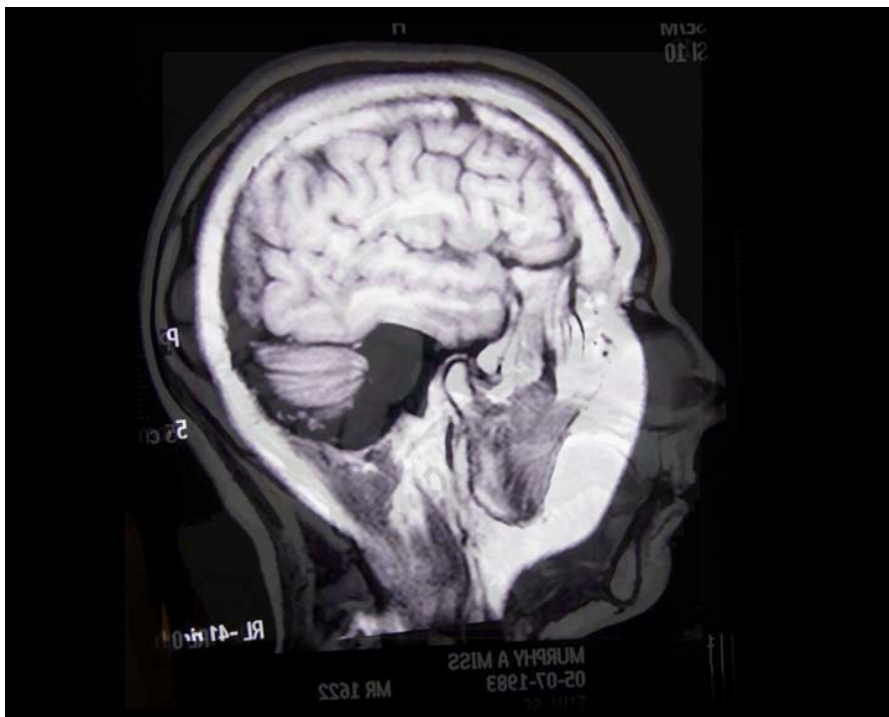


Fig. 6.2

This links back to the idea mentioned before that disease, especially mental illness, is related to a person's character rather than biological causes. The idea that if you think depressing thoughts and perceive the world negatively causes depression has never been proven. Neither has it been proven that lack of Serotonin, Norepinephrine or Dopamine causes depression.<sup>191</sup> In my case, depression was caused through an electrical

<sup>190</sup> *Project: Mirroring the internal body contemporary art, medical imaging and Philosophical concepts of subjective embodiment*  
<http://www.onderzoekinformatie.nl/en/oi/nod/onderzoek/OND1299915/> 2006, p3

<sup>191</sup> Burns, D., M.D. *Feeling Good* New York: HarperCollins Publishers, 2000 pxxi

malfunction in the temporal lobes rather than faulty thinking. In this difficult time which started when I was about eleven, I taught myself to draw. It was one of the few things that kept me sane. I will share some of the learning stages I went through to get to where I am today.

Stage 1. I can draw and capture a likeness in a portrait:

From the time I could hold a crayon I had developed a fondness for drawing. I had never thought that I was especially good until I learned to capture a person's likeness in a drawing. At the young age of eleven, I thought that if you could draw a person, you had to be good. I created my first portrait with a likeness of the person drawn at this age. Simply getting a likeness one time did not mean that it was easy the second time. In fact it was very difficult. I spent many hours drawing and erasing my portrait of Mrs. Ulrich, my Maths teacher (fig. 18), until I had got a likeness. I got better and eventually learnt to draw a pencil portrait in ten minutes. From grade five to grade nine I continued with this process, drawing hundreds of A4 size sketches of people I encountered in my day to day living. The images below show some of my experiences in junior school as well as the time I spent at the National School of the Arts, Johannesburg (Fig. 6.3).



Fig. 6.3

Drawing became a way of defining myself [and still is]. It became a way of expressing my identity rather than talking. I was a very shy and sensitive person at that stage and it was difficult to talk to people because I was ashamed of my crying episodes that made people think that I had a weak character, but this wasn't so. I am a strong and capable person.

I was inexperienced as an artist at this stage. I was under the impression even until my first year at university that if I could copy images or people well then I was a good artist. University challenged my concept of what a 'good artist' was, not that I can explain what a 'good' artist is today. Art for me is about the concept and the thought processes involved in creating the artwork. It is about pushing established boundaries and creativity rather than just drawing pretty pictures.

Stage 2. Art is about experience and is personal:

I first began using the theme of memory and experience and looking at medical imagery in my Matric year. In looking at my personal history I created collages from family photos and drawing to depict a brain with drawers showing memories from my childhood as a metaphor of memory storage (Fig. 6.4). The workings of the brain have always fascinated me. At an early age I used to read the medical encyclopedia and was able to state what part of the brain performed what function. I have since learned that it is not as simple as that Fig. 6.4.

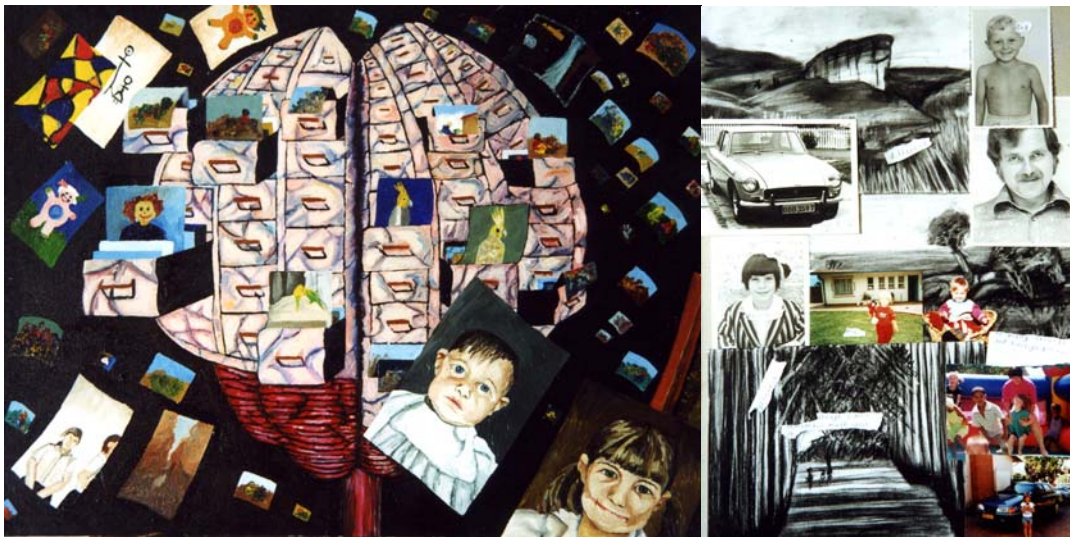


Fig. 6.4

I continued with this theme in my undergraduate studies. My fourth year video work entitled *fwd/rwd* (2005) (Fig. 6.5) uses the forwardwinding and rewinding of a video tape to show of different memories from my childhood in forward and backward tracking, much like memories are fluidly accessed.



Fig. 6.5

Because memories do not flow in a sequential order when remembered, the tape would fast forward and rewind in a non sequential way. This process also suggests that memory is fragmented. It is this fragmented, transitory nature of memory and experience that I was trying to capture in this piece. These early experiences have shaped me into the person I am today. I am also interested in keeping records of experiences that are easily forgotten: the fleeting, transitory, a moment in time. Time causes memory to fade. We remember earlier events more clearly than things that happened many years ago. The self is an exploration of the flux of experience, the nature of memory retrieval, the remembered, repressed and forgotten memories. Like Kentridge, I used images as a trace of memory, something to help me experience and recall those long forgotten memories. Images get superimposed and merge into one another. The crude line drawings of my alter ego get erased as the crude line drawn figures, computers and other objects move on the page, being repetitively scanned, leaving traces of the previous drawing behind.

In my third and fourth years of study I used my work to record small, unnoticed things like shadows on a floor, close up photos of a light, tree roots and so forth (Fig. 6.6). My work was about the ordinary, but seeing the ordinary in a new and different way. This idea of focusing on the ordinary connects to the concept of the individuality of the self. The brain structure is relatively the same in every person, but small differences in the

synaptic arrangement of neurons make us who we are. The way we see things in the world is also largely a product of the experiences that we have had in life. These experiences get embedded in the synaptic arrangement of the brain, causing different perceptions and conditioning. A lot of people are conditioned to see the world in a particular way and they never consider looking at ordinary objects in any other way, but the ordinary. This is similar to how people view mental illness. Many people are conditioned to view mental illness in a negative way. They have no understanding that mental illness is not a weakness, but an illness.

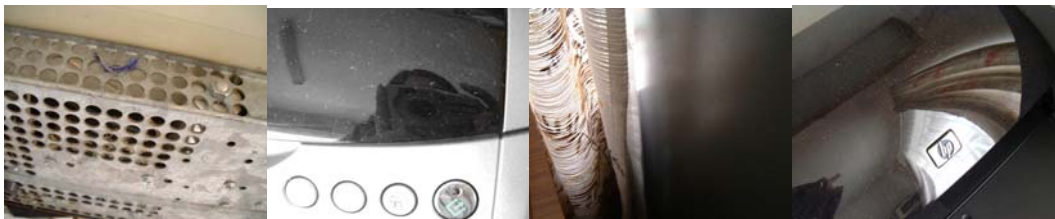


Fig. 6.6

Another work that looks at such ordinary events in my life was completed during my second year of study and is titled: *From Johannesburg to Helderkrain* ( 2003) (Fig. 6.7) . It depicts my experience of a bus trip, the stop/start motion of a bus picking up passengers and how it moves at different speeds through the traffic.



Fig. 6.7

Stage 3. Art is a healing process:

My Master's degree provided me with a time to heal with medicinal help from the negative impact of a so-called 'mental illness'. In a body of animations, paintings and interactive computer generated artworks, I reference medical imaging techniques such as x-rays, ultrasound, MRI scans and EEG readings to explore the artistic articulation of experience of embodiment of myself. My aim in my practical work has been to create a body of work consisting of hand drawn digital animation artworks, mixed media paintings and objects/collages relating to my topic of 'the use of medical imagery in artworks involving self narration'. Animation artworks may in some instances have an interactive element to them as I wish to involve the viewer through some audience participation. *Flash* animation is also introduced as it lends itself to manipulation by the viewer and thus introduces an interactive component to these works. One example is the sound driven *Untitled* (2007) (Fig. 6.8). This piece involves the use of a laptop computer and a microphone to interpret sounds, repeat them and thereby cause an animation piece to play. In response to incoming sounds, a schematically depicted neuron can be seen to

grow larger according to how loud the sound is. These neuron appear against a background of a brain scan that changes colour. An image of my eyes is also inserted in the center of the scans, opening and closing and looking back and forth, alluding to the all-seeing eyes of the 'medical gaze.' They represent an introspective gaze not just for me, but the viewer as well. Eyes open and close while received sounds are repeated by the computer.

I also chose the image of the eyes because they are perhaps the most important visually communicative parts of a person. We tend to look directly at the eyes of a person when talking to them. They express emotion and can tell you how a person feels. Of course, my depicted eyes also refer to the 'eyes' of technology scrutinizing the interior of the body; 'eyes' that record things like brain function. MRI scans, PET scans and so on, can allow us to see how parts of the brain are used in reading, seeing, listening to music etc. So too, Kentridge subjects his body [Soho's body] in *History of the Main Complaint* (1996) through a process of medical inspection in order to gain psychological insight into a national South African complaint, apartheid. Kentridge explores issues that relate to guilt, responsibility and collective memory in the South African landscape. The eye in the car's rear view mirror takes the viewer on a mental journey through Soho's body. The eyes in my work take the viewer into a subjective journey of the self. We are viewing Felix/Soho's inner journey of what caused his complaint through his own eyes as well as our own. As suggested in chapter one, we view everything we see and hear through our own filters of subjective experience.



Fig. 6.8

*Transitional* (2004) (Fig. 6.9), an earlier video piece that is perhaps appropriate to mention here, depicts my eyes over a period of an hour as they express various emotions ranging from happy to sad, smiling to crying. Eyes also express individuality by way of different eye colour and we associate the act of looking into someone's eyes with looking into another person's soul or inner being/persona. Looking into my own eyes thus represents a looking into my own soul or inner being/persona. One image that particularly strikes me in this sequence is that of me frowning in exasperation. This image vividly reminds me of the exasperation I felt as a result of my unexplained sensitivity to events in my life that caused prolonged crying episodes.



Fig. 6.9

A second computer generated work involves the use of a computer mouse to open and close neurons (Fig.6.10), i.e. a viewer can manoeuvre the mouse across various images of neurons to visually activate them. This work alludes to how neurons relay messages back and forth between the body and brain. X-rays, sonar scans, etc., as suggested before, offer a way to interact with and visualize the interior of the human body to such an extent that these techniques transform the interior body into a visual medium. I use the interior body as a visual medium to explore the concept of self.

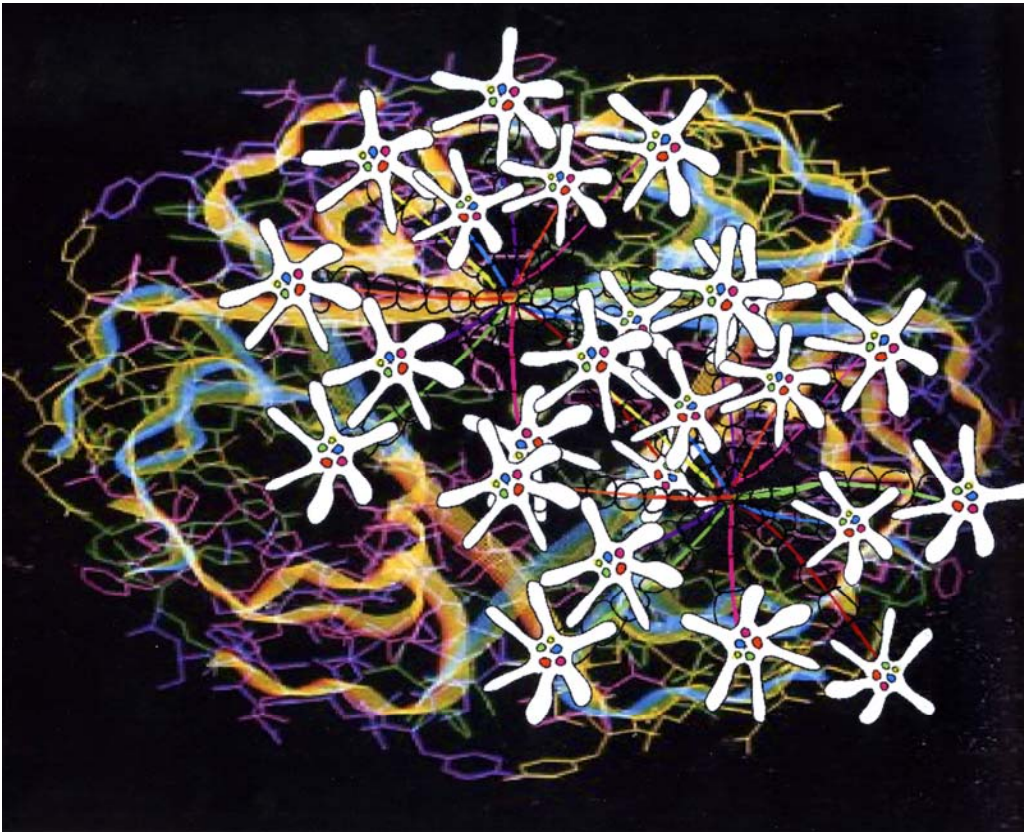


Fig. 6.10

Having a so called ‘emotional dysfunction’ encouraged me to examine some of the workings of the brain as well as exploring the concept of neuroplasticity. The brain can be rewired [synapses], not just in childhood, but throughout life. At the root of the question I am exploring here is that of the relationship between the human body and subjective internal spaces. The question I ask myself is how it is that the conscious and unconscious minds have a sense of self. The observed body comes to be viewed as a vehicle, a site of living processes.<sup>192</sup> Medical imagery lays bare the internal organs for us to see. The body therefore becomes a site of introspection of the self. By inserting myself into medical scans I explore this idea of the body as a site of living processes and memories. I suggest that these processes not only include normal body functions but also functions of memory as suggested in chapter two.

Psychological research has, for the most part, tended to view the mind separately from the body rather than seeing them as functioning in unison.<sup>193</sup> In my animations, paintings, interactive works and etchings I have shown incidental memories of a ‘little Arlene’ [the crude line drawn figure] climbing out of emotional turmoil, stepping out of the heart, falling from the sky onto cactuses, entwined amongst many neurons, hanging from internal landscapes and going through a dark tunnel.



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<sup>192</sup> Cartwright, Lisa „*Screening the Body: Tracing Medicine’s Visual Cultur.*, London: University of Minnesota Press, 1995, p 82

<sup>193</sup> Zaidel, Dahlia, W, *Neuropsychology*, New York: Academic Press,1994, p xv



Fig. 6.11

*Climbing figure curtain*, *curled figure curtain* and *Brain scan curtain* (2007) (Fig. 6.11) are suspended works in the sense of being made up of numerous tiny photos of myself and of images of cross-sections of my brain stapled together to form semitransparent net-like structures. In the methodically additive process of construction these works can be seen to suggest the many accumulated memories stored within the cells of the body, and in their repetitive and open-ended character they also represent self construction as an ongoing process.



Fig. 6.12 Curled figure curtain (2007)

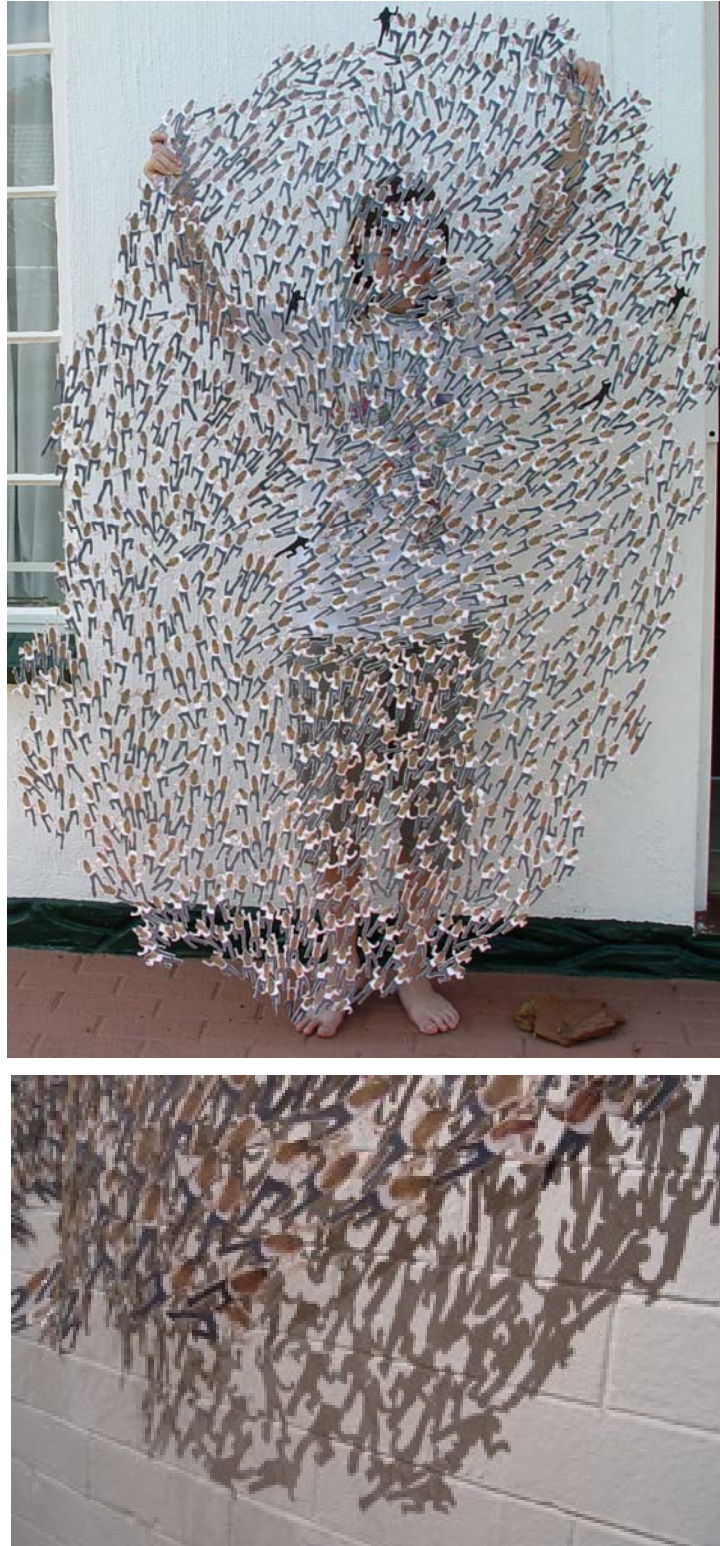


Fig. 6.13 Climbing figure curtain (2007)



Fig. 6.14 Brain scan curtain (2008)

In my prints I explore a similar theme of the self by placing a small animated figure of myself and other people within imaginary worlds representing the neural structures of the brain or within the anatomy of the body. They thus represent fragments of my personal experiences. *What the Bleep* (2008) places images of myself and various people who have influenced me within images of the microscopic neural networks of the brain. I chose to include the medium of etching because it relates closely to early medical illustrations which are known for their precision and detail of depiction of body organs. While referencing these sources, however, I also include my own imagery or disrupt the medical sources to my own needs. In relation to my larger paintings and animation works, these smaller prints also provide another, more intimate approach to my topic.



Fig. 6.15 What the Bleep (2008)



Fig. 6.16 Descartes error (2008) and Fig.6.17 Jumping to Conclusions (2008)



Fig. 6.18 Anatomy (2008) and Fig. 6.19 Seeing is Believing (2008)

*Descartes Error* (2008) is an Albumen print depicting a view of the top of a head which has the skin peeled back and the cranium removed to reveal the exposed brain. Little people can be seen standing, sitting and climbing in various positions within the neural networks of the brain. The title of this work refers to Descartes' belief that the mind and body are separate entities, a theory that has been proven wrong as the body and mind have been shown to work together. I chose the albumen print medium specifically because it closely resembles an x-ray image in its solarized reversal of dark and light. The little figures suggest many selves and, as in other similar images of mine, signify the many fragments that make up the self. *Anatomy* (2008) continues along a similar theme with a tiny image of me hidden amongst the detail of an anatomical dissection of the body. In this image the fine detail of the original study is translated via the etching medium to achieve a highly detailed 'inner world' which I inhabit. *Jumping to Conclusions* (2008) shows people falling from the sky onto a field of cactuses to suggest an even worse situation awaiting the falling people than what they already find themselves in. Similar to his animations that show a crude line drawn figure running into walls, negotiating turnstyles and falling onto cactuses, these works are direct expressions of my frustrations of living with undiagnosed temporal lobe epilepsy.



Fig.6.20 Untitled (2007)

*Untitled* (2007) shows two Apple Emac computer monitors communicating with each other via blue zig-zag lines. I have been working on my Apple Emac computer extensively in creating my animations and it has thus become my tool of expression in the making of my animation artworks. A crude line drawn figure of myself is shown passing another seated figure of myself positioned behind the blue lines. The blue lines can be read as a barrier separating me from what is passing by, like being stuck behind a fence. The blue lines also suggest the faulty electrical wavelengths shown on my EEG that indicate that I have TLE. Birds flying in the background suggest that there is some freedom from this condition through medication and counseling.



Fig. 6.21 *Melanocetus Johnsonie* (2007)

A *Melanocetus Johnsonie* is an ugly looking deep water fish. I chose this image for its monstrous features as well as its visceral associations. This creature represents the enormity and alienation of my condition as it literally fills the canvas with its tendrils and nodes which also allude to the neurons and electrical currents within the brain- but these are electric currents with a difference, they have eyes.



Fig. 6.22 Tower of Babel (2008) and Fig. 6.23 Untitled (2007)

*Tower of Babel* (2008) shows the layers that make up a vein. A vein is always in a state of construction where old cells are constantly being replaced by new ones and in this way the image alludes to my discussion in chapter three where I explain how repressed memories may be understood to be stored within the cells of the body. *Untitled* (2007) is a portrait of me that expresses a sense of being engulfed by the corridor of the social sciences mezzanine corridor on the Wits University Campus which I frequently walked along on my way to and from lectures. The highly polished floor of this passage has, for me, strong associations with dark undercurrents of water in which slimy, fleshy worms lie in waiting. I have depicted myself sitting at the end of the passage with my back to the viewer and diminished in size as if immersed in this surface.



Fig. 6.24 untitled (2007) and Fig. 6.25 Hanging in there (2007)

I found an old container of enamel paint which had separated from the medium to become thick and coagulated and was attracted to its fleshy quality. I decided to use this old paint in *Untitled* (2007) and *Hanging in there* (2007) by emptying the paint directly onto the supports to allow the paint to adhere unevenly. In this way I was able to achieve a very fleshy and tactile effect. A school of fish and a figure hanging by its fingers are depicted below this mass respectively to suggest an imaginary, murky land/seascape. Again, these images allude to my sense of loss and alienation.



Fig. 6.26 Installation views of the exhibition

The installation views above give a sense of how my various artworks were grouped to create a total experience of sound, video animation, painting, collage, etchings and interactive digital media in the Substation building on the university campus. My aim was to set up an environment in which my various artworks, i.e. paintings, prints, interactive and animation works would reflect off each other. The central arrangement of tv monitors

on bases facing out towards the paintings created a tight unit of flickering screens from which emotive sounds emerged and impacted strongly on the viewing of the works. The concurrent playing of several animations next to each other created a cacophony of sounds that spoke somewhat of a condition of unsettledness and nervousness which I tried to express as my state of being as a result of suffering from temporal lobe epilepsy.

My exhibition served to show a sympathetic, healing approach to my struggle with depression and temporal lobe epilepsy, a condition that for me contains a lot of emotional baggage. My title to this exhibition “Sympathetic Nervous System” is a common medical term which refers to a part of the nervous system which operates through a series of interconnected neurons, but I also chose it for the reference of the word ‘sympathetic’ to being comforting and consoling to myself because of my medical condition rather than being frustrated and angry due to what can be referred to as a ‘weakness.’ The word ‘nervous’ also carries connotations of anxiety and worry and therefore points to my state of being in this condition. This research has allowed me much needed personal growth and provided restoration in my life journey.

## Conclusion:

My research has focused on two of William Kentridge's hand-drawn animation artworks, *History of the Main Complaint* (1996) and *Weighing and Wanting* (1998), in which medical imagery is utilized to investigate forms of self narration. In doing so I have attempted to demonstrate how Kentridge has correlated forms of looking into the human body via medical imagery with ideas of excavating history and revealing personal ways of introspection. This is shown through his autobiographic telling and piecing together of human actions and events, largely via the alter ego figure of Soho Eckstein. Kentridge's hand drawn film sequences are played out by such characters as a critique of apartheid through a highly personal reflection on history and memory through his drawing process and self narrative. By focusing on these two works and technologies used to reflect the interior of the body, such as X-rays, sonar scans and MRI scans I have argued that Kentridge has used such medical imagery as a form of metaphoric expression of autobiography where the investigating of the interior of the body comes to represent an investigation into repressed memories. I have referred to 'technological sight' as the ability of medical diagnostic machinery to create images of the interior body and have shown how Kentridge exploits this form of the 'medical gaze' by subjecting Soho's body to scrutiny.

In attempting to illustrate how the self is narrated in Kentridge's works, I needed to first set myself the task of arriving at a workable definition of the self which would be appropriate to my study. Drawing on ideas from various disciplines I arrived at a formulation which outlines the self as essentially constructed from within society and in conjunction with the relationships formed with other selves. In this sense we see ourselves as constantly engaging in the process of 'self-shaping' and 'self-cultivation' as we gradually develop through a process of individualization and via a process of self-reflexiveness. In our acts of self expression we can be said to represent our 'real' conditions of existence in an imaginary form, structured by 'unconscious' promptings which are expressed by desires, wishes, fantasies, dreams and repressed memories. With

these points in mind, I have approached Kentridge's creating of a self narrative by examining it as his very personal piecing together of human actions and events and a configuring of these parts into narrative episodes through his drawing process of drawing/erasure/re-drawing and the construction of a narrative through the use of medical imagery. Kentridge uses medical imagery as a means to open up his archive of memories of past experiences stored in the internal body of Soho. Soho's body is thus literally used as a site of personal reflection and memory storage and in so doing Kentridge is seen to construct a form of personal documentary. I go on to discuss this aspect of documentary narrative construction which involves a certain creative interpretation of the 'truth' of his autobiography. The element of factual 'truth' associated with the documentary applies equally to medical diagnostic science where what is read off medical scans and related medical equipment plays a vital role in diagnosing illness. But at the same time I show how this documentary 'truth' is questionable as the "*documentary has come to suggest incompleteness and uncertainty, recollection and impression, images of personal worlds and their subjective construction,*"<sup>194</sup> to quote Nichols. I examine how Kentridge makes up stories in his animations that can be considered as being both 'true' and untrue. His animations have fictional characters, but they express truths about the social and political situations in South Africa.

Kentridge's animation artworks are constructed by means of his drawing process of drawing/erasure/re-drawing where one layer of drawing builds upon the next in his recording process of the animation. The analogue editing of the animation where parts are incorporated, left out and the timing of the scenes altered, is another part of the process of Kentridge's animation artworks that I examine in terms of the very evident constructedness of his artworks. He thereby provides a montage of self through autographic marks and introspection that points to a personal form of healing as well as healing towards a nation's PTSD caused through the atrocities committed during the apartheid era. Kentridge's hand drawn renderings of medical imaging technology provide a way of looking into the interior spaces of Soho's body and seeing these as sites for memory. This idea of memory storage extends to various parts of the body (i.e. not

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<sup>194</sup> Nichols, B, 'Theorizing Documentary. M. Renov, ed. New York: Routledge, 1993, p174.

only the brain) and seems to correlate with recent medical findings which I briefly touch on. The body's ability to store memories in its various cells suggests a deep seated 'imbuing' of repressed memories and Kentridge can be seen to underscore this in the soul searching aspect of both *History of the Main Complaint* (1996) and *Weighing and Wanting* (1998). Through his drawing of medical imagery and the insertion of human actions and events related to the apartheid past, a form of excavation is shown to take place which points to a process of healing.

I have examined Kentridge's technique of drawing charcoal images over previously erased ones as a way of capturing his reflections on history and memory related to post-apartheid South Africa. His drawing process can in itself be regarded as a form of self narration by way of the very evident capturing of the passing of time as well as the fact that it features the strong presence of a personal signature by way of the autographic quality of his hand drawn animation. His hand-drawn animation artworks are suitable to the task of self narration as in every stroke an aspect of the self is embedded in the drawing, i.e his mark making process is unique to him, as with the signature of handwriting. In this sense, Kentridge's imagery carries an added personal investment in the subject matter and I have shown how this hand drawn aspect of his work is appropriate for the task of narrating the self. The unique texture that embedded and erased marks, re-drawn marks and parts of the drawing emphasized in colour, as well as his use of body movement provide, enables him to successfully narrate himself through his drawn mark and thereby to manifest a form of personal memory.

I finally discuss my own practical work which similarly explores how the self is narrated through medical imagery in my chosen media: stop frame animation, painting and printmaking. I discuss how my work explores the capturing of personal experiences and memories as a way of coming to terms with painful memories related to my experiences of living with undiagnosed temporal lobe epilepsy.

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