

BODILY MEMORY AND JOINT ACTION IN MUSIC PRACTICE AND THERAPY

Introduction

This paper will analyze the role of intercorporeality and bodily memory in music therapy. Our starting intuition is that the disruption of these experiential bodily features play a key role in the development of mental disorders. Furthermore, we want to consider what kind of interaction occurs between collective intentionality, intercorporeality and bodily memory in such disorders. The paper is organized as follows: the first part explains the theoretical framework of our research project; while the second part describes the methodological aspects of our future empirical research.

1. Collective Intentionality in Music Practice: a Focus on Psychopathologies

As Salice and Heringsen¹ underline, in the contemporary debate concerning joint actions two forms of collective intentionality are considered: the first form is goal oriented, each member is interacting with others in such a way that the goal is shared (joint intentionality); the second form implies that individuals are experiencing themselves as member of the group (we intentionality)².

Keeping the two distinct forms of collective intentionality in mind, Salice and Heringsen consider the form of disruption that we find in schizophrenia. According to them, patients who suffer from schizophrenia have difficulties with establishing we-identities required for the formation of a genuine we-intentionality. The authors cash out this point as follow:

«in contrast to joint intentionality, which, we suggest, remains largely unaffected by the disorder, patients with schizophrenia often seem to be confronted with notable difficulties when it comes to we-intentionality and thus the ability to participate in and be members of we-groups (e.g. romantic relationships or friendships in all the various forms in which they come). From the very outset it must be stressed that we are not suggesting that we-intentionality is somehow lost in schizophrenia, but rather that it often is fragile»³.

The authors suggest that this fragility of we-intentionality is caused by self-disorders- that inhibit the processes required for the constitution of we-groups.

In our project proposal, we would like to analyze the phenomenology of the first-person experience of patients who suffer

from mental disorders in sessions of music therapy, and we want to claim that they are not only lacking a strong sense of we-intentionality but also a sense of intercorporeity in general and bodily memory.

Concerning music theory and collective intentionality the debate is divided into two main perspectives. The first one is based on enactivism⁴ and claims that in joint music experiences sense making is participatory and not only based on mental processes but rather generates from bodily interaction. Claiming for an enactive and embodied approach to musicianship Schiavio and De Jaegher⁵ underline the pre-reflective dimension of such joint experience. The second perspective⁶ considers musicianship in relation to collective intentionality and tries to understand if both plural self-knowledge and non-observational knowledge about collective action are involved. However, the authors underline that both plural self-knowledge and non-observational knowledge are not involved.

Considering music therapy in terms of joint action, we want understand the role of bodily memory and intercorporeity in psychopathologies.

2. Intercorporeality

In what follows, we briefly consider the issue of corporeality and

intercorporeality, focusing specifically on Husserl and Merleau-Ponty. Husserl⁷ draws a clear distinction between *Leib* and *Körper*, intending with the former term the organic living body that we experience in our sensing activities and with the latter the objective body as intended by anatomy for example. In his *Phenomenology of Perception*, Merleau-Ponty starts from this assumption and develops a detailed analysis of *Leib* considering the issue of bodily-schema in its genetic role for the constitution of both subjectivity and spatiality. In creating her own bodily-schema, the subject generates a form of spatiality that Merleau-Ponty defines as “situational spatiality”⁸ differentiating this spatiality proper of the *Leib* from the “positional spatiality”⁹ that pertains to external objects. This peculiar form of spatiality proper of the *Leib* puts subjectivity in direct contact with the external world and consequently with other beings.

This corporeal connection between subject, world and beings links to the issue of intersubjectivity – and to the issue of transcendental intersubjectivity in Husserl’s works¹⁰ – and the constitution of the other in terms of intercorporeity. In order to switch from corporeality to intercorporeity (intended in term of flesh), Merleau-Ponty introduces the concept of reversibility. It is necessary to understand reversibility starting from the consideration of the specific nature of the body, its being

both a living body and an objective body (an object between objects). Different from mere things, the living body has a proper carnal reflectivity. This carnal reflection is central because, for Merleau-Ponty, the body becomes subject insofar as it recognizes itself as a part of the world. This double reversibility leads to the idea of flesh and intercorporeity. The body is in connection with the world because body, bodies and things share what Merleau-Ponty calls “the flesh of the world”¹¹. The intuition behind this runs as follows: we have a body and this body is made by flesh. This carnality is shared by other beings such as animals. Consequently, it is in virtue of this fleshy intertwining that we can understand Merleau-Ponty’s expression: “the flesh of the world”. This concept leads Merleau-Ponty to formulate the idea of *intercorporeality*, an idea that we can intend as a form of carnal intersubjectivity. What we all share is a bodily dimension (living body for humans and animals, surfaces for things) that puts us in an intimate connection. The conception of intercorporeity starts to become explicit in Merleau-Ponty’s lectures at the Collège du France on child psychology¹², where the author connects the issue of body with the concept of structure in relation to child development. In this context, Merleau-Ponty underlines the emergence of a system within the connection between bodies: it is not that I perceive my own body and then I attribute all these functions to others.

Rather, all my senses are communicating in the same way in which our own body is communicating with other bodies in an “intentional encroachment”.

Intercorporeity implies the relevance of the *Leib* and expresses the idea of an intimate interconnection between beings at bodily level. Furthermore, intercorporeality maintains the feature of reversibility, meaning that we are constituting ourselves as subjects in a carnal and intersubjective dimension. If we focus on subject’s experience of intercorporeity, then we should assume its relevance for the development of both normal and pathological experiences.

Recently, different scholars has started developing a different perspective on emotions using the concept of intercorporeality¹³. Fuchs¹⁴, for example, focuses on the relationship between intercorporeality and interaffectivity, considering his analysis as a development of Merleau-Ponty’s concept of intercorporeality¹⁵. In this paper we would like to consider the intercorporeal structure of experience in pathological experiences, focusing on the bodily dimension of intercorporeality and on the concept of intercorporeal memory, we consider how they develop for people with mental disorders in a joint activity such as music therapy.

3. *A phenomenological tool for the study of collective actions*

3.1 *Target population*

In contrast to DSM nosography, that involves primacy attributed to single symptoms and an empirical statistical approach, our test is a qualitative tool whose main aim is to explore subjectivity and its pre-reflective structures, in particular those linked to intersubjective skills. In fact, our interview is directed to people affected by those mental disorders which involve a detachment from sociality. We find it interesting to focus on people who actively attend music therapy labs, since in this case we can also observe potential changes and improvements in self/other awareness, and, in particular, in the link between proprioception and intersubjective understanding. The main important pathology we would like to take into account is schizophrenia, a disorder where the split between the self and the collectivity is really dramatic. Schizophrenia is usually defined as followed: “«a mixture of characteristic (...) positive and negative [symptoms] that have been present for a significant portion of time (...), associated with marked social and occupational dysfunction»¹⁶. This definition seems to us quite problematic, since it does not take into account the qualitative, lived and pre-reflective structures of subjectivi-

ty, such as embodiment and interpersonal attunement, features that in schizophrenia register huge disruptions. On the contrary, schizophrenia seems to be very suitable to our phenomenological and qualitative investigation, since it can indeed involve subjects provided with a normal cognitive, representational activity, while they are severely impaired in domains like self-awareness and intersubjective understanding. The analysis of schizophrenia can thus be helpful in clarifying how these domains work and to what extent pre-reflective structures and reflective abilities are important and intertwined with one another. Concerning our attention towards embodiment and the role of embodied memory, also in this case this pathology can be fruitful for shedding light on the importance of our being a living body. The thesis we would like to show through our test is therefore that a disruption of our pre-reflective, embodied structures are responsible for the impairments of intersubjective skills. In a very schematic manner, our *inclusion criteria* are:

- Diagnosis: patients with psychosis (with a special attention to people affected by schizophrenia);
- Patient or legal tutor’s consent;
- Minimum age: 18; maximum: 70;

- Sex: male/female;
- Patients participating in collective group of music therapy with continuity (users must have attended a minimum of two seats).

The *exclusion criteria* concerns brain injuries, mental retardation and neurodegenerative disorders, which would prevent the cognitive abilities of the subjects: in other words, we exclude patients with severe mental deficits (for parameters see DSM V¹⁷) since they would not be able to elaborate the answers in verbal communication.

3.2 *The test: Items and Scoring*

Our test is a semi-structured interview that, by stimulating the subject through music pieces and appropriate questions about the relationship between individual and group, the temporality experienced by the subjects, their thoughts, feelings or beliefs, tries to explore subjectivity in a relatively direct manner. The interview is conducted by ourselves in the environment in which the subjects perform the music therapy, in order to qualify for an environment where users feel at ease. In order to have a general idea of the life world of the patient, and facilitate a gestaltic analysis of her/his experiences, we start with an interview about her/his social history. Then, we focus on the specific

items we identified, which are at the center of our analysis. After answering the questions, the subject is elicited to motivate her answers, in a direct, semi-structured dialogue. Privileging reciprocity, it may happen that the subject drives our questions, as well as our questions be adapted to her statements. In order to make the test scientifically valid, we also interview “neurotypical subjects”. Starting from piecestaken from songs used within the sessions, we present the user with 4 different options that represent four main domains. The scores are given through a range from 1 to 4 according to the different options, where 1 means a very low presence of the item at the center of the analysis, and 4 means an elevated presence of the same item. The user can choose according to her own impressions and feelings, and then we can discuss her choice through a dialogue that will privilege the reciprocity between the user and the interviewer. The main items we take into account are:

1) *The relationship between individual and collective experiences*

The link between subjectivity and intersubjectivity is widely debated¹⁸. In particular, we would like to shed light on the pre-reflective attunement that allows the subject to feel herself being part of a group. In the case of music practice, we aim to explain how self-awareness and

other-awareness are present in collective actions.

2) *Bodily experience*

We already emphasized the importance that phenomenology gives to our being a living body. In fact, we can affirm that kinesthetic sensations make us aware of our sensations and movements immediately and intuitively, in a sort of a primary self-consciousness. Furthermore, the pre-reflexive and pre-conceptual sensorial synthesis seems to be the ground for the understanding of alterity. In other words, intersubjectivity can be defined in the same way as intercorporeity, as a process based on the immediate transfer of corporeal schema. The consequence is that, if the embodied being of a subject is compromised, her self-consciousness and her capability of attunement with the other and the world will be lost or disrupted. For these reasons, focusing on the bodily experiences of the subject is very important for our study, whose theoretical knot is the link between embodiment (in particular embodied memory) and sociality.

3) *Embodied memory*

Playing an instrument involves an integration of sensorimotor and affective cognition imprinted and sedimented in our body. But what

does happen in collective musical performances? This case seems to be even more interesting because it involves not only individual's skills, but a complex collective awareness. In other words, it seems that procedural memory – which is the Merleau-pontian praktognosia, our pre-reflective embodied understanding – works together with intercorporeal memory. The result is a holistic experience, where individual stances and collective ones are not separable, but form a collective experience that could be studied just from a Gestaltic approach.

4) *Collective intentionality*

Salice and Henriksen pointed out two forms of collective intentionality: joint-intentionality, which is distinctively goal-oriented, and usually relies on explicitly formulated codes of conduct; and we-intentionality, which is at stake when the individual perceives herself as being part of a group and considers her mental states as contributions to that group, without a specific goal. This last kind of intentionality can be also described as “common sense”, and seems to be really problematic in people affected by schizophrenia (and other mental disorders, like depression).

In music performances, both of these forms of intentionality are

required: our aim is to shed lights on collective intentionality and its different nuances, which seem central in the execution of collective music actions and seem to involve different requirements (joint intentionality seems to be more representational and cognitive, while we-intentionality seems to be linked to our pre-reflective embodied structure).

4. Conclusions: Expected Outcomes and Possible Research Directions

Through our research, we expect to test and emphasize the relationship between corporeity and pre-reflectivity in music therapy practice. The philosophical aim is to investigate and show the fundamental role of embodiment in music practice. Specifically, we want detect the role of intercorporeality and embodied memory in collective actions, and to propose an integrated model where observational practices and cognitive processes presupposes pre-reflectivity. Regarding the methodological aim, we want to improve the qualitative research focusing on a new key feature of abnormal joint experiences. As a qualitative tool, our interview is in continuity with EASE¹⁹ and EAWE²⁰ as well. Both the model of qualitative research focus in a different manner on pre-reflectivity: EASE on the pre-reflective self; EAWE on the pre-reflective relationship between self

and external world. Despite the fact of the link with both EASE and EAWE, our semi-structured interview focuses differently on the anomalies of collective experience.

VALERIA BIZZARI & CARLO GUARESCHI*

¹ See A. Salice, M. G. Heringsen, *The Disrupted 'We'. Schizophrenia and Collective Intentionality*, "Journal of Consciousness Studies", XXII, 7–8, 2015, pp. 145-71.

² Concerning the debate broadly intended see also M. Bratman, *Faces of Intention: Selected Essays on Intention and Agency*, Cambridge University Press, Cambridge 1999; P. Pettit, D. P. Schweikard, *Joint Actions and Group Agents*, "Philosophy of the Social Science", XXVI, 1, 2006, pp. 18-39; J. Searle, *The Construction of Social Reality*, The Free Press, New York, USA 1995; R. Tuomela, *Social Ontology. Collective Intentionality and Group Agents*, Oxford University Press, Oxford 2013.

³ A. Salice, M. G. Heringsen, *The Disrupted 'We'. Schizophrenia and Collective Intentionality*, p.161.

⁴ A. Schiavio, S. Høffding, *Playing together without communicating? A pre-reflective and enactive account of joint musical performance*, "Music. Scientiae", XIX, 4, 2015, pp. 1-23.

⁵ A. Schiavio, H. De Jaegher, *Participatory Sense-Making in Joint Musical Practice*, M. Lesaffre, P. J. Maes, M. Leman, eds., *The Routledge Companion to Embodied Music Interaction*, Routledge, London 2017, pp. 31-39.

⁶ A. Salice, S. Høffding, S. Gallagher, *Putting Plural Self-Awareness Into Practice: The Phenomenology of Expert Musicianship*, "Topoi", 2017, pp. 1-13.

⁷ See E. Husserl, *Ideas Pertaining to a Pure Phenomenology and to a Phenomenological Philosophy: Second Book: Studies in the Phenomenology of Constitution*, Kluwer Academic Publishers, Dordrecht 1989.

⁸ M. Merleau-Ponty, *Phenomenology of Perception*, Routledge, London 2012, p. 102.

⁹ *Ibidem*.

¹⁰ Husserl provides an account of transcendental intersubjectivity in his fifth *Cartesian Meditation* and then elaborate on that concept in numerous manuscripts. Zahavi (D. Zahavi, *Husserl and Transcendental Intersubjectivity. A Response to the Linguistic-Pragmatic Critique*, Ohio University Press, Athens 2001) provides an exhaustive account of

Husserl's transcendental intersubjectivity.

¹¹ See M. Merleau-Ponty, *The Visible and the Invisible*, Northwestern University Press, Evanston 1968.

¹² See Merleau-Ponty, *Child Psychology and Pedagogy. The Sorbonne Lectures 1949-1952*, Northwestern University Press, Evanston 2010.

¹³ See J. Krueger, *Merleau-Ponty on shared Emotions and the Joint Ownership Thesis*, "Continental Philosophy Review", XLVI, 2013, pp. 509-531.

¹⁴ T. Fuchs, *Intercorporeality and Interaffectivity*, C. Meyer, J. Streek, Jürgen, J. Scott Jordan, eds., *Intercorporeality. Emerging Socialities in Interaction*, Cambridge University Press, Cambridge 2016.

¹⁵ Fuchs cashes out the idea of interaffectivity as follows: «The shared affect during a joyful playing situation between mother and infant may not be divided and distributed among them. It arises from the 'between', or from the situation in which both are immersed. Thus, affects are not enclosed in an inner mental sphere to be deciphered from outside, but emerge, change and circulate between self and other in the intercorporeal dialogue» (T. Fuchs, *Intercorporeality and Interaffectivity*, p. 12)

¹⁶ Cfr. American Psychiatric Association (APA), *Diagnostic and Statistical Manual of Mental Disorders: DSM 5*, 5th ed. Arlington (VA), American Psychiatric Association 2013.

¹⁷ *Ibidem*.

¹⁸ Cfr. D. Zahavi, *Self and Other: Exploring Subjectivity, Empathy, and Shame*. Oxford University Press, Oxford, England 2014; T. Fuchs, *The phenomenology and development of social perspectives*, "Phenomenology and Cognitive Sciences", 12, 4, 2012, pp. 655-683; A. Gurwitsch, *Human Encounters in the Social World*, Duquesne University Press, Pittsburg (PA) 1979.

¹⁹ J. Parnas, P. Møller, T. Kircher, J. Thalbizer, L. Jansson, P. Handest, D. Zahavi, *EASE: Examination of Anomalous Self Experience*, "Psychopathology", 38, 2005, pp. 236-258.

²⁰ L. Sass, E. Pienkos, B. Kodlar, G. Stanghellini, T. Fuchs, J. Parnas, N. Jones, *EAWTE: Examination of Anomalous World Experience*, "Psychopathology", 50, 1, 2017, pp. 10-54.

* Both authors have contributed to this paper to an equal extent.