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Becoming one of the *Others*: Embodying and eliminating fabricated natures

Melinda Niehus-Kettler

In my (lived) experience, taking care of someone does not necessarily equal caring about someone. While spending time with and around people diagnosed with (forms of) dementia, I have heard about and seen them being in-/deliberately neglected or completely ignored by (under-)paid carers, unpaid caregivers, as well as unrelated relatives. I have heard and seen them being mocked behind their backs, i.e., insulted and degraded by the use of words, laughter, and even the cuckoo gesture. Most of them have been confined in one way or another; many have dissociated themselves. Most of them are rarely listened to – even when they can and feel the need to narrate and relate. Some of them have lost the use of words. In the last years, I have witnessed self-proclaimed authorities describing people with dementia as acting shamelessly, and people diagnosed with dementia feeling deeply ashamed for their (allegedly) shameful behaviour.¹

Since living with dementia increasingly limits personal narratives of storytelling and autobiography, it feels crucial to find ways of relating – and ways of imagining someone's identity being affected by embodied and dis-embodimentalizing processes. I regard this essay as a thought experiment inspired by my kith and kin. Its objective is to describe two distinct and, at the same time, indistinct forces affecting and eliminating our *natures*: our societal power structures and dementia.

Appreciating the affective dimension and ramifications of our experiences, I will touch upon a number of theories on the workings of our power structures

¹ Throughout this chapter, the expression *dementia* is used as a collective term that describes symptoms such as the impairment of memory and verbal communication irrespective of whether or not this affliction has been diagnosed as caused by Alzheimer's or Parkinson's disease, etc.

from the field of cultural, particularly gender and postcolonial studies. They include theses by Michel Foucault and Sara Ahmed. Due to the limited scope of this chapter, I will outline a selection of *Othering processes* that may be conceived of as a body of theories. In essence, however, they depict forms of violence and experiences that affect and effect the fabricated natures of the *others*, e.g. *women's*, *the invalid's* and *non-westerners'* perceived identities. I conceive of these processes as constituted by the most effective elements of our power structures: phenomena such as categories and binary systems, everyday and institutional discourses that dehumanize and discredit, confining practices, as well as bodily experience/s, for example shame.

From my limited perspective, I can only imagine the cognitive dimension of the experiences that alter a person living with dementia. Thus, my briefly introducing a notion that I have termed *Percept Cycles* visualizes embodying processes and, thereby, the implications and implicatures of the very personal and universal percepts that make up our bodies of percepts and knowledge. As this may help our conceptualizing how our perceptual make-up and (tacit) knowledge in terms of someone and something grow in the course of our lifetime, it may help our imagining how dementia unravels and tears holes in this very tissue of intertwined percepts. Providing food for thought, I will conclude by setting my concept of Percept Cycles briefly into dialogue with Pia C. Kontos's observations and rationales described in 'Ethnographic Reflections on Selfhood, Embodiment and Alzheimer's Disease.' This approach offers, I believe, a way of grasping how all of our diverse percepts, e.g. sensation, emotions, objects of perception, as well as (metaphorical) concepts, constitute and contribute to our embodied individuality, agency, and modes of communication. *Au fond*, my conceptualizing embodiment relies on the 'concept of a body (...) that [includes] both the corporeal and psychological, but also the political, social and cultural dimensions' (Hartung 2018, 13).²

² Due to my non-medical education, my personal and cultural background, I will delineate *western* constructions of Otherness. Told through the metaphorically and literally limited perspective of one of the *healthy* and *female others*, my delineations will focus on the *others'* perspectives. It is a given that I can only speak for myself, though. And whereas my loved ones' stories may be conceived of as part of my story, I feel they are *not my stories to tell*. Moreover, it is imperative to appreciate the powerful differences among and within the groups of the perceived *others* and *norms* – and the disparities among their experiences and perspectives. I do not suggest that anything such as a homogenous group of *others*, e.g. *female*, *invalid*, or *non-western* people exists. Still, the Othering processes they live through appear to be remarkably similar. As I am still deliberating the advantages and disadvantages of universalism and identity politics, the terms that are capitalized and/or given in italics should be regarded as social constructs – they are marked accordingly. By using these expressions I am mostly complying with the style of the authors whose works I have studied, among other things, to simplify the reading process.

1. Fabricating and eliminating natures

Othering is not just occupying a point of view but *choosing* a perspective and criteria that 'allow humanity to be divided into two groups: one that embodies the norm and whose identity is valued and another that is defined by its faults, devalued and susceptible to discrimination' (Staszak 2009, 43). To make these hierarchies appear more *natural*, they are commonly reasoned from (allegedly harmful) bodily particularities defined by questionable categories such as *sex*, *race*, and/or *state of health*. This way, dichotomies, e.g. *female/male*, *black/white*, *sick/healthy* are made to make sense. On the whole, our dominant human norms, e.g. *male*, *sane*, and/or *western* individuals, are in a position to impose their categories as they commonly constitute the authorities and the standard against which all the *others* are measured.

Drawing on Foucault's theories on disciplining discourses, we can presume that human beings are categorized for the benefit of our authorities. Perceived Otherness and identity are based on our classification and binary systems that represent forms of institutional as well as social control (Foucault 1995, 191). Our 'body', more precisely, our bodily experience/s and knowledge may be conceived of as 'carefully fabricated' by 'manifold relations of power' (Foucault 1980, 93; 1995, 217). These are 'established, consolidated' and 'implemented' through the 'production, accumulation, circulation and functioning of' *discourses and practices* (Foucault 1980, 93; 1995, 140, 170/171, 217). The invisible workings of power, or rather, our 'disciplinary [machineries]' re-/form the individual as well as the species body (Foucault 1995, 143, 155; 163, 174). Among other things, medical, anthropologic, economic, and legal discourses 'discipline the body, optimize its capabilities, extort its forces, increase its usefulness and docility' (Foucault 1995, 155). It is also through and via discourses (and practices) that we transform simple manifestations of bodily differences into phenomena such as categories and dichotomies, e.g. *men/women*, *the healthy/the invalids*, *westerners/non-westerners*. All of which can be reduced to the binary systems *the norm/the other*, *normal/deviant*, and/or *human/less-than-human*. In other words, we degrade and impose a *marked change* on the natures of human bodies.

A crucial part of these discourses constitutes infra- and dehumanization. In the same vein as infantilization, infra-humanization is highly instrumental as

the humiliation takes on a sanitized form. Seldom do we question diminutives. Seldom do we question belittlement. Infra-humanization co-constructs the *others* as *less-than-human* and less intelligent beings. In doing so, the in-groups deny the out-groups reason, sanity, certain (secondary) human emotions, and intellectual, e.g. language skills. The *others* are, hereby, depicted as incapable of moral conduct and controlled demeanour (Viki and Calitri 2008, 1055, 1057). By contrast, dehumanization is an arguably less subtle way of eliminating others from participation and consideration. Individuals' and peoples' identities have been fabricated and implicitly conceptualized as peril and/or devoid of (legitimate) power, as *non-human* or *sub-human* particularly for two reasonings: Either they have been constructed and re-/presented as exhibiting animalistic features, uncontrollable and irrational behaviour – or they have been regarded and treated as 'having the properties of an object', i.e., as passive entities lacking subjectivity (Rudmann and Mescher 2012, 735). Thus, the allegedly deviant *others* are understood in terms of another concept, *animals* or *objects*, while they are dehumanized and degraded either way.

With their 'essence' being 'understanding and experiencing one kind of thing in terms of another', 'metaphorical concepts', i.e., 'metaphors' are central to dehumanization and these discursive manoeuvres (Lakoff and Johnson 2003, 5, 6, 7). Metaphorical concepts can be understood as begotten and nurtured by, as well as manifestations of *natural experiences* (Lakoff and Johnson 2003, 117). These are, e.g., 'products of our bodies'; they are the result of our 'perceptual and motor apparatus, mental capacities, and emotional makeup' (Lakoff and Johnson 2003, 117). Further 'natural kinds of experiences' are products of our 'interactions with our physical environment, e.g. moving, manipulating objects' and our 'interactions with other people within our culture' – among other things, 'in terms of social, political, economic, and religious institutions' (Lakoff and Johnson 2003, 117). Against the backdrop of Othering and embodying processes, it seems imperative to acknowledge that metaphorical concepts do not merely manifest in and define 'the words we use', they are also part and parcel of our tacit knowledge (Lakoff and Johnson 2003, 5, 116). And while they are grounded in (and, in turn, also affect) our experience/s, they structure our conscious thought and actions (Lakoff and Johnson 2003, 3).

Metaphorical concepts 'create realities for us, especially social realities. A metaphor may thus be a guide for future actions. Such actions will, of course,

fit the metaphor. This will, in turn, reinforce the power of the metaphor to make experience coherent' (Lakoff and Johnson 2003, 156). All of the aforementioned implicit (metaphorical) concepts of the *others* as infantile, immoral, passive, as non- or less-than human beings have in common that they implicitly foster and vivify our perceptions and conceptions of the, for example, *female*, *sick*, and/or *non-western others* lacking control, integrity, and cognitive, e.g. language skills. The perceived contradictory concepts of the *others* as powerless, frail, and inanimate *or* as powerful entities endangering society both entail and justify (hegemonic) hierarchies and *custody*. They re-/generate our alleged need of protection from the *others'* dispositions. Contemplating the experiences of people living with dementia, we can ascertain how monitored changes in mood, regressing to childhood memories, and progressive difficulty communicating with words are easily instrumentalized as reasons to protect them – and as evidence of their lacking humanness and control. In turn, they are un-/consciously conceptualized and treated as entities undeserving of bodily autonomy, visibility, and authority. They derive parts of their perceived identity as the *others* from dehumanization and isolation.

In sum, epistemic, psychological, and emotional violence, e.g. in the form of dehumanization structured by metaphors, are positively correlated with our proclivity to use physical violence (Rudmann and Mescher 2012, 741). They are part and parcel of everyday and institutional discourses. They manifest in covert and overt discrediting and incapacitating measures that include laughing at someone, allegedly *harmless* mockery – social put-downs of any description. Political, medical, legal, and religious discourses as well as phenomena such as the concept of *deviance* re-/generate and perpetuate our conceptualizing the *others* as less valuable, non- or less-than-human entities. These frequently precede, turn into, and re-/generate re-/enforced isolation and (the threat of) physical assaults. It is safe to say that, within cycles of abuse, de- and infra-humanization also succeed and normalize confining and eliminating processes, e.g. the deprivation of liberty and/or physical abuse. Ultimately, 'houses of confinement' (Foucault 1995, 51), e.g. penal institutions, (psychiatric) clinics, hospitals, nursing homes, but also other 'sets of spatial constructs and practices' such as gender, *racial* and residential segregation are 'based on the discursive construction of [O]therness' (Staszak 2009, 46).

An element of (embodied) Othering processes that seems to have been largely neglected is what I regard as the most pivotal one: *bodily experience/s*, for example bodily experience/s of *shame*. Generally, I will understand the term *bodily experience/s* as encompassing and acknowledging diverse conceptions and definitions. Among other things, I appreciate the German distinction between two different notions of *experience*: In the 1930s, Walter Benjamin characterized 'lived experience' [*Erlebnis*] as 'being separated from *Erfahrung*' (Henning 2006, 96, 98). For one thing, the term *experience* translates into '*Erlebnis*' (plural: '*Erlebnisse*' = experiences) and denotes the immediate, the lived moment; for another thing, *experience* refers to '*Erfahrung*', which is 'accumulative, reflected upon' and, as it develops over time, 'counts as knowledge' (Henning 2006, 96). In effect, my concept of *bodily experience/s* is based on a combination of these *experience/s*. Thus, it includes what Lakoff and Johnson call 'natural experiences', e.g. experiences that come into being during our 'interactions with our physical environment', with other human beings and 'institutions' (2003, 117). However, *bodily experience/s* also comprise 'natural experiences' such as 'products of our bodies', e.g. sensations and emotions that we experience via our 'perceptual and motor apparatus, mental capacities', and 'emotional makeup' (Lakoff and Johnson 2003, 117). In any case, all of these forms and concepts of *experience/s* beget, nurture, and manifest in our identities, our perceptual make-up and knowledge. They play a vital role in our personal and trans-generational (hi)stories. In essence, they are as much sources as symptoms of what I interpret as the other *most effective elements of our power structures*. These are *discourses, practices, and manifestations*, e.g., manifestation of bodily particularities that are transformed into *phenomena* – within the blink of an eye, the course of a lifetime, and/or several generations.

In 'Shame Before Others', Sara Ahmed describes shame and 'the gift of the ideal' as experiences and constructs that have a largely positive impact on human beings and their relationships (2014, 106). Feeling shame is principally considered as a way to 'reconciliation' and a way of 're-integrating' those who have failed others (back) into 'social bonds' (Ahmed 2014, 106–9). By contrast, drawing on her thoughts on *failure*, I would like to highlight the ways in which *bodily experience/s* of shame represent crucial elements that are essential to our fabricating natures, trans-generational stigmatization, and convictions.

Thereby, they constitute and contribute to physical and psychological confinements.

Ahmed considers shame as a 'sign of' our own or someone else's 'failure' (2014, 103). By the same token, I conceive of shame as having a d-/evaluating, correcting, and self-/sanctioning dimension. Hence, these bodily experience/s have a practical, aesthetic, and symbolic function. More often than not, the perceived state of failing is based on our conceiving of ourselves as *deviating* from the established (human and abstract) *norms* and accepted epistemological and ontological standards, especially in terms of physical and psychological bodily particularities, social, sexual, and/or ethical conduct. This phenomenon and concept of *deviance* does not only define the perceived identities of the *others*, but also reinforces perceptions and conceptions of shame and Otherness. Generally, shame can be regarded as affecting our identities from an early age and the 'negation that is perceived' is commonly 'painful' and 'experienced before another' (Ahmed 2014, 103, 104). Referring to Foucault's metaphor of the 'Panopticon' and his notion of the 'imagined gaze', we may feel shame even if no-one else is physically present, though. We (desire to) regulate our(-)selves as soon as we catch our(-)selves deviating from ideals and *norms* – for *normalizing* bodily experience/s, discourses, and practices have 'trained' us to do so (Foucault 1995, 143, 163, 170, 174). Being surveilled and disciplined by our *normal* (self-proclaimed) authorities and/or surveilling and disciplining our(-)selves, i.e., seeing ourselves from their perspective and through their eyes, we experience shame as a self-/judgement as well as a self-/sanctioning measure. In this regard, (inducing) bodily experience/s of shame can be conceived of as a means to exercise control and power – to make us docile, comply and conform again. Through shame, we punish ourselves or others for failing and evoking uncomfortable feelings, e.g. making visible what is supposed to be hidden (Ahmed 2014, 104).

In our patriarchal and capitalistic societies, e.g. neoliberal, sexist, and sanist discourses and practices re-/create and perpetuate social and gender ideals. They re-/generate an error-culture that makes us feel shame for what we have constructed as less valuable and illicit attributes and conduct – as weaknesses and failings. Alleged failures include embodying one or more forms of *female*, *invalid*, *racial*, *juvenile*, and/or *differently-desiring* Otherness. Rather generally, our breaking the mould, not contributing to cycles of profit (any longer),

reconsidering our own perspective/s, being vulnerable, showing emotions, and/or asking for help are regarded as shameful and worthy of punishments. The intrinsic belief, value and evaluative systems also leave a (distinctive) mark on ageing and/or invalid *men*, whose natures have been fabricated as, ideally, physically strong and emotionally controlled, independent, and authoritative.

Either passively acquiescent to authority, or actively willing and feeling entitled to shame the *others* to re-/establish their own purported superiority, some individuals evoke shame by the means of degrading discourses and practices or disregard. They effect a person's 'movement back into [themselves] [which] is simultaneously a turning away from [themselves]'; this sensory movement entails the individual having 'nowhere to turn' (Ahmed 2014, 104). Albeit to varying degrees, they experience impuissance, alienation, and a loss of legitimized mobility. Conceiving of ourselves as *deviant from the norms*, as not fulfilling *ideals* – which are, for all intents and purposes, constructed by our authorities to re-/integrate us into cycles of profit – we may literally and metaphorically dissociate ourselves. Living through shame 'involves the de-forming and re-forming of bodily and social spaces' (Ahmed 2014, 102–3).

Taking the perspective of the *others*, e.g. people living with dementia, conceptually (and perceptually), we can assume that their feeling shame and a lack of self-worth is often a consequence of their identity, cognitive state, and/or conduct being discredited through discourses and practices – and/or a lack thereof, namely neglect. Denying them bodily autonomy and their agency reinforces cycles of abuse. Our societies' sanitizing and normalizing abuse – e.g. declaring that the *others'* (actually fabricated) deficiencies and failures are *natural* parts of their identity – regenerate shame and anger (Krizan and Johar 2015). Above all else, invalidating their emotional responses and reactions to the abuse absolves our societies from questioning our ways of *taking care* of them. On balance, it may be a person's simple need for being seen, heard and, thereby, valued (again) that re-/creates 'social bonds' (*nota bene*, trauma bonds and/or shame-rage cycles as well) (Ahmed 2014, 107; Krizan and Johar 2015). We desire to be known and recognized as the person *we* feel we are – or sense we used to be before we were altered. In the end, our perceived worth and sense of self depend on how and *if* we are perceived, tended, and represented by others.

The Othering processes that I have described are constituted by interrelated and highly effective elements of our power structures – and they may be

construed as forming a cyclic system. They depict what those of us who are categorized as the *others* from the very beginning of our lives might be experiencing every day, e.g. as we embody one or more forms of perceived *female*, *differently-abled*, and/or *non-western* Otherness. Furthermore, the very same processes transform the fabricated natures of the *norms* who only become the *others* when/if they alter and are altered. They might become the *others* as their bodies, their statuses, and/or their (self-) conceptions alter – either within the course of a lifetime, or after life-altering events such as being categorized as an *invalid*. For instance, *men* having been categorized and diagnosed with dementia are forced to change their perspective as they are un-/intentionally no longer perceived and treated as *normal* and/or authorities. At the risk of sounding cynical, as they are *becoming one of the others*, they might actually gain perspective while losing perspective.

Othering processes could be regarded as means to re-/integrate the *others* into cycles of profit, to render them docile and unconfident. Albeit not generally maliciously chosen forms of control and protection, binary systems, dehumanizing, segregating, and isolating measures are part of divide-and-conquer tactics. They constitute forms of epistemological, psychological, physical, and emotional violence with acute and chronic effects on all of us. Above all else, they eliminate the *others'* subjectivity and self-definition, they eliminate allegedly in-alienable rights, perceived humanness, and self-worth. Still, conveniently enough, the lines between manipulation and care, between control and protection often become blurred – especially when thinly-veiled unenlightened self-interest masquerades as affection and/or altruism.

2. To cut a long (hi)story short: Embodied audio-visual hierarchies

Shame is an element of our (embodied) power structures that, just as dehumanizing discourses, neglect, separating and confining practices, eliminates the perceived *others* from (further) participation and consideration. Thereby, they become in- or less visible, but also in- or less audible. And while shame affects the *others'* already limited or illegitimized using of (social) space/s, it also co-determines how much space, which scope and position they

occupy, e.g. a rather central or peripheral one, in the front or in the back. It may be regarded as implicitly co-effecting and affecting what I conceive of as *embodied audio-visual hierarchies*. These reflect and, in turn, also limit our rights to see, know, and control, as well as our rights to speak and be listened to. They illustrate and reproduce our im-/mobility within hierarchical structures, our rights to choose remaining in/visible and in-/audible and/or becoming in/visible and in-/audible. Hence, I understand these self-replicating and multidimensional organizational structures as a result and manifestation of the interrelations among our (implicit) perceptions – *and* as appealing to multiple senses. In my mind, embodied audio-visual hierarchies are part and parcel of authorship and visibility; they also rely on the effect of the disciplining, medical, and/or colonial gaze. While being manifestations of implicit power dynamics and *authority*, for example the phenomena of the *medical* and the *disciplining* gaze interrelate with the right to speak, examine, judge, and to limit bodily, social, and global mobility. They are also interrelated with the right to command, to make others wait and (passively) receive and accept the knowledge that is being presented (Foucault 2003, 29, 48, 54; Foucault 1995, 143, 154, 170). Overall, an individual's and/or a group's subjectivity and agency are re-/defined by the authorities' gazes and discourses; they are also manifested in our very position within hierarchically structured spaces, e.g. in a church, a classroom, and/or a clinic.

On another level, our visibility, the impact of our voice and, hereby, our perceived normalcy and value are also contingent on *how much* space we occupy in public. This is, in turn, dependent on diverse forms of confinements and segregation reasoned from categories such as gender, state of health, and/or ethnic background. More precisely, we experience embodied audio-visual hierarchies within public hierarchical structures as they are manifested in the number and percentage, but also the perceived status of people who are categorized as, e.g., *male/female*, *healthy/sick*, and/or *the colonizer/the colonized*. We implicitly perceive and are affected by them in a conference room, at university, in parliament, in the food service industry and health care sector, among authors of and protagonists in historical, political, religious, and/or medical discourses. Evidently, they also effect and are affected by (self-) representations in media reports, the literary canon, and film. Above all else, embodied audio-visual hierarchies are the symptoms and sources of a

(hi)story of allegedly valueless Otherness. It is a story fabricated and told, rather exclusively, by the purportedly *normal* and *valuable*, in other words, by *healthy*, *male*, and/or *western* authorities.

3. Embodying our power structures

Within the theoretical framework of a larger research project, I have conceptualized the aforementioned elements of our power structures, i.e., manifestations/phenomena, bodily experience/s, discourses, and practices as diverse *percepts*. Inspired by Foucault's theories on discourses disciplining our individual and the species body, as well as Lakoff and Johnson's notion of 'Embodied/Experiential Realism', my concept of Percept Cycles originated as a visualization of embodiment and Othering processes. The interdisciplinary and non-medical approach offers, I believe, a simple and, at the same time, highly complex way of imagining and visualizing our embodying processes, but also ways of challenging trans-generational cycles of abuse that illegitimize the perceived *others'* identities and power. The point here is that, at bottom, manifestations/phenomena, bodily experience/s, discourses and practices all constitute *different forms of percepts*.

Throughout my delineations, the signifier *percept* is used for its equivocal nature and mostly as an umbrella term. If not specified, it represents several forms of percepts at once. 'Percept' can have different definitions depending on the discipline defining the term e.g. philosophy, psychology, or linguistics.³ In the end, to allow for intrapersonal and interpersonal differences among our percepts, I need to acknowledge all the understandings and definitions of 'percept': i.e., a 'recognisable sensation or impression received by the mind through the senses' (*HarperCollins Dictionary* online, "percept" in American English' definition 1);⁴ percepts as recognition of emotions (as described in Li's *Encoding and Decoding Emotional Speech...* page 92); as an 'object or

³ Some of the discrepancies among our conceptualization are explained in the *Stanford Encyclopedia of Philosophy*, e.g. in 'Epistemological Problems of Perception' (<https://plato.stanford.edu/entries/perception-episprob/>); and 'The Problem of Perception' (<https://plato.stanford.edu/entries/perception-problem/>).

⁴ This definition, found at <https://www.collinsdictionary.com/dictionary/english/percept>, according to the website is taken from *Webster's New World College Dictionary*, 4th Edition. Copyright © 2010 by Houghton Mifflin Harcourt.

phenomenon that is perceived' (*HarperCollins Dictionary* online, British English, definition 2) as in a Rorschach test; and 'a concept that depends on recognition by the senses, such as sight, of some external object or phenomenon' (*HarperCollins Dictionary* online, British English, definition 1) – i.e., an interpretation of a perceived representation. These conceptualizations show that in different disciplines and contexts, 'percept' is actually not used to refer to an object that we perceive or a concept, but to the sensations/impressions that we experience.

This is why I would want to describe our diverse percepts as i) our 'sensations' and 'percepts of emotion'/'emotions we perceive in others'; ii) 'objects and phenomena that we perceive'; and iii) 'concepts in our minds'.

From my perspective, metaphorical concepts are both vital and fatal implicit percepts for they re-/generate, e.g., our un-/consciously conceptualizing the *others* as non- or less-than-human entities.⁵

Ultimately, all of these 'percepts' constitute crucial elements of our affective makeup and (implicit) knowledge. The ways in which they appear to interrelate and the fact that all of them have been described as 'percepts' induced me to conceive of them as forming Percept Cycles.

Indeed our diverse percepts appear to be cycling. They move in and follow a regularly repeated sequence of events. Sensations and emotions of shame or fear in terms of someone or something that we perceive may beget, nurture, and manifest in percepts in the form and in terms of everyday discourses, e.g. conversations among peers and family members. Sooner or later, most of these percepts beget, nurture, and manifest in percepts in the form and in terms of institutional discourses, everyday and institutional practices and phenomena. These might be social sanctioning measures, medical, legal, and political discourses, and/or segregating practices. All of these elements can be regarded as constituted and defined by established (metaphorical) concepts. They might beget, nurture, and manifest in new, slightly altered, and/or established

⁵ Lakoff and Johnson explain that our 'conceptual system' is, in essence, 'metaphorical in nature' (Lakoff and Johnson 2003, 3, 115). The authors' theory of 'embodied realism' is based on 'the notion of the embodied mind for which the dimensions of tacit (or implicit) and non-propositional knowledge of the body are crucial' (2015, 16, 77; Ernst 2015, 247). They illustrate how our 'cognitive unconscious', which operates too fast to be focused on, includes all our 'automatic cognitive operations' as well as 'our implicit knowledge' (2015, 10, 13). Being a 'perceptual inference', metaphorical concepts appear to be part and parcel of, but also 'rely on [our] embodied tacit knowledge' (Ernst 2015, 247–8).

percepts – e.g. in bodily experience/s of impuissance, inferiority, and/or anger. Within a cyclic system, they form growing Percept Cycles. This way, percepts do not only accumulate, they become part of one another as well. In the end, they form and make up a multilayered tissue of compound percepts. They can be conceptualized as comprehensive *bodies of percepts and knowledge* – in more than one sense.

All in all, the elements of our power structures can be conceived of as diverse percepts that form part of and develop into numerous cycles of percepts. This way, they constitute and contribute to our *perceptual make-up* and *knowledge* in terms of someone or something. In my mind, we sense, perceive, conceptualize, and *embody* other human beings, objects, natural entities, but also abstract concepts in the form of Percept Cycles. In other words, *we embody* the elements of power structures – e.g. *manifestations/ phenomena, discourses, and practices* re-/generated by *bodily experience/s* in terms of (and as represented by) someone or something – via and in the form of percepts. By virtue of our embodying Othering processes and cycles of violence our personal and universal (hi)stories have also the power to repeat themselves. Effectively, our (trans-generational) embodied power structures implicitly form, deform, but also il-/legitimize our perceptual make-up, knowledge, and, thereby, our individuality and agency. All of which may be regarded as truly personal and, in the same way, as remarkably universal in nature. Whereas they depend on our partly shared cultural and historical frameworks, they rely on the bodily experience/s, discourses, practices and phenomena that we live through – but also on our willingness to care, listen, and question our own perspective/s.

4. Elimination from the inside?!

As time moves in cycles and life moves in cycles, our percepts move in cycles. We continuously re-/generate and experience them. As they accumulate and evolve, they take on an increasingly complex life of their own. Percepts develop into a multilayered tissue of compound percepts that are organic and, at the same time, constructed. Including percepts of resistance, this is a hybrid *materiality* of acquired and grown knowledge – which we conceptualize as a

form of power. Moreover, depending on the time we have known them and the strength of the (emotional) connection to them, we embody, e.g., a person or piece of music in the form of percepts that constitute and contribute to a strongly intertwined, multilayered tissue of percepts *or* a rather holey fabric of a couple of loosely connected percepts. We conceive the identity and (hi)story of every(-)body and every(-)thing through and in the form of these growing Percept Cycles – be it our favourite person, a song, a museum object, or the abstract concept of power.

It is my conceptualizing identities as well as perceptual make-up and knowledge as an organization of percepts that enables me to grasp the concept of a person's individuality and agency. It also enables me to imagine the cognitive dimension of the experiences that a person living with dementia embodies, among other things, how dementia *dis-embodies* their wealth of knowledge and emotional relations. Contemplating these bodies of percepts and knowledge, i.e., the tissue of intertwined cycles of percepts embodied within and by a person, we can imagine these percepts starting to grow apart at some point in time. We can imagine Percept Cycles falling apart. Dementia can be conceived of as gradually eliminating our implicit compound percepts. As a consequence of dementia taking apart our percepts, we let go of others, perceivably, one at a time. As it forces us to loosen our hold on Percept Cycles that constitute, e.g., a person's identity, we might recognize emotions that we feel in this person's presence, but not their face; we might recognize their face, but not their name (e.g. Gleeson 2019).

Taking these aspects into consideration, it is crucial to acknowledge that, even though dementia alters our bodies of percepts and knowledge, it does neither eliminate our individuality, nor our agency. As delineated before, it is our societies' Othering processes that eliminate and/or illegitimize the *others'* identities, bodily autonomy, and power. For example, all of the aforementioned implicit (metaphorical) concepts of the *others* as non- or less-than human entities have in common that they implicitly foster our conceptualizing the *others* as lacking reason, credibility, and cognitive, e.g. language skills. Particularly concepts of the (in)ability to master language are closely intertwined with concepts of (a lack of) control, the civilized *norms*, and the uncivilized *others*. Remarkably enough, it seems to be our societies' fear, actual failure (and/or unwillingness) to value and comprehend the *others'* bodily

particularities, knowledge, and modes of communication that re-/generate and justify cycles of elimination. Consequently, the *others'* perspectives, forms of expression, and bodily experience/s are perceived and treated as *deviant* and *worthless*.

Nonetheless, as mentioned before, I conceive of bodily experience/s as *powerful* sources and symptoms of the other elements of our power structures, i.e., everyday language, institutional discourses, practices, and phenomena. I argue that our perceived individuality and agency are defined by and are a product of the reciprocal relations among these percepts, among the identities of the perceived *norms* and the *others*, and among their perceptual make-up and knowledge. Contemplating this, my concept of Percept Cycles and embodiment, I suggest that the other percepts that make up our humanness and power, i.e., our bodily experience/s expressed and communicated without words, but via spontaneous actions and habits still impact on the people and things around us. Even if we have lost the use of words, we still affect those around us – just as they continue to affect us. Since human communication is governed by the same conceptual system that controls thoughts and actions, language is certainly 'an important source of evidence for what that system is like' (Lakoff and Johnson 2003, 3). Still, our perceptual make-up and knowledge, including our metaphorical concepts, do not only manifest in language. They are also expressed via other modes of communication such as pictures, sounds, and gestures (Forceville and Urios-Aparisi 2009). Thus, akin to spoken words, these can be conceived of as manifestations of our personality and power.

Drawing on other, but rather similar concepts of embodiment, agency, and selfhood, I would like to incorporate Kontos's rationales described in 'Ethnographic Reflections on Selfhood, Embodiment and Alzheimer's Disease'. She uses a 'theoretical framework of embodiment, which integrates Merleau-Ponty's radical reconceptualisation of perception and Bourdieu's theory of the logic of practice' to analyse 'findings of an ethnographic study of selfhood in Alzheimer's disease' in a long-term care facility (2004, 830/831). Kontos argues that selfhood has a primordial origin as it 'emanates from the body's power of natural expression, and manifests in the body's inherent ability to apprehend and convey meaning' (2004, 837). Our bodies are regarded as 'providing the corporeal foundation of selfhood' (Kontos 2004, 837). Furthermore, she asserts the 'sociocultural dimension of the pre-reflective

body' to be the 'second origin of selfhood' (837). In other words, our habitus, 'mastery of social practices' – and the way these 'mark class distinction' – are another essential part and manifestation of our 'embodiment of social structures' and selfhood (2004, 837).

Among other things, Kontos's study focuses on what I regard as the everyday and institutional practices and phenomena constituting and contributing to our Percept Cycles. This materiality of bodies of percepts and knowledge encompasses, for example, percepts constituting 'tacit' 'sociological knowledge consisting of learned and archived faculties that have become implicit through embodiment and automatised by practice' (Ernst 2015, 247). Whereas people experiencing dementia might be expected to lose this (implicit) knowledge defining their individuality, Kontos describes how some *patients* adhere to internalized beauty regimes, and how many continue to conform to social norms and rules when interacting with others (2004, 832, 833). Some people diagnosed with dementia appear to *unlearn* these embodied elements of our power structures. Others seem to hold on to discourses and phenomena such as society-imposed inhibitions, rules of etiquette, and beauty ideals re-/generated by their bodily experience/s. This way, these percepts remain part of their embodied individuality and agency.

Language is undeniably the most privileged form of communication (and the most underestimated form of violence). Kontos underlines, however, that it constitutes merely one way of expressing individuality and power. She delineates how people living with dementia '[interact] meaningfully with the world through their embodied way of "being-in-the-world"' (2004, 829). The study participants express their selfhood and agency through, among other things, 'spontaneous' actions and non-verbal communication re-/generated by bodily experience/s, e.g. through 'dancing', 'singing', 'listening', and, thereby, also paying attention to and 'caring' for other individuals (2004, 832, 834). They do not only communicate with words, but with 'gestures', 'body' and 'limb' 'movements', 'facial expressions', and 'eye behaviour'; their 'posture', 'postural shifts', 'intonation changes, the rise or fall of pitch level [...] and pauses' '[carry] implication and meaning' as well (2004, 835, 836). These descriptions can be read as depicting how our 'tacit knowledge', e.g. percepts belonging to 'the realm of cognitive-automatized faculties consisting of the basic operations of our nervous system and perceptions' (Ernst 2015, 247), is a distinctive part of

our perceived identity. For example, our sensations and emotions of affection, disgust, shame, and anger are sources (and symptoms) of discourses, practices and, thereby, meaningful spontaneous wordless interactions as well (Kontos 2004, 829, 832, 833). Rarely do we appreciate the validity of these bodily experience/s, emotional responses, and modes of communication. Yet, they re-/present manifestations of individuality and agency, as well as powerful narratives in their own right – *be it narratives without words, or non-linear ones*.

Concluding, the notions of embodied Percept Cycles, identities, perceptual makeup and knowledge can, by no means, encompass the entirety of elements that constitute and contribute to our individuality and agency. Still, my concept of *bodies of percepts and knowledge* as a visualization of embodying and Othering processes might offer a perspective on embodiment and dementia that adds to Kontos's contesting that living with Alzheimer's disease entails a loss of selfhood (2004, 829, 846). My admittedly unconventional approach may allow us to discern cyclic systems that re-/generate the *others'* perceived lack of humanness, value, and power by transforming, illegitimizing and/or eliminating their *natures*, cognitive states, visibility, and forms of expression. And although dementia alters an individual's perceived identity and accumulated (tacit) knowledge, we can start from the premise that the person we know and their individuality remain with us during the progression of the disease. In accord with Kontos's reasonings, I argue that the person with dementia is neither devoid of selfhood, nor devoid of power.

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