an attempt to bind anxiety. Kurtz works to encourage a client to gradually release their management of experience, and live new options and choices of expression. Hakomi focuses attention upon the forces of somatic arousal and dissociation. This contemplation links somatic and psychological affects through an appreciation of the significance of associating changes in both (on a micro and macro level) to the movement of desire as a catalyst for communication and acts of creation.

Performance Art

Although art therapy is associated with pictorial arts, in the context of this thesis the significance of the BwO and movement are highlighted within the visual art of performance, which uses the body as an artistic medium. Performance art was a pervasive artistic practice during the 1960's and 1970's, a period of intense collaboration between Deleuze and Guattari. Performance art included within its practice social criticism and political protest. It interrogated the nature of repression, through impulsive and unrefined improvisation that worked to often offend social sensibilities. Its artistic practice did not silence the body, but rather amplified the spontaneous body as a disruptive influence to social norms of behaviour. The controversial methods of performance art, can be understood as an example of Deleuze and Guattari's micropolitics, an interrogation of the spontaneous uprising of repressed affects, that work to infuse experimentation and risk taking within social behaviour. Performance artist Allan Kaprow first used the term 'happenings' to describe unscripted improvised performances often staged within everyday settings. These performances incorporated installation art, music, theatre, text and dance as three-dimensional artistic compositions. Happenings incorporated chance events, assemblages and the physical environment in which they occurred, they gathered together many influences, in order to stimulate the decentralisation of narrative, and prompt experimental awareness.

Performance art pertaining to 'happenings' also elaborates the DGATA approach, a means of enacting therapeutic material to further its significance and range of affects. As an artistic practice performance art involves a dynamic interplay of both subjectivity and social critique. It highlights unconventional somatic representations, stimulating the BwO, as an entity that transgresses physical functionality. The desire of the body, rather than the functionality of the body is catered for, as it escapes structures of signification and generates a productive capacity that is more improvisational than conditioned. Performance art, body art and live art, are all classifications of a living visual arts practice. They are significant to the topic of desire and schizoanalysis in their essential relationship to the moving body as an artistic expression. This is the body as both organic matter and social form, the body that creates, through instinct and through its way of being in the world. Performance art is a medium of interdisciplinary communication, which mirrors a living exchange of people and culture. It can also act as a medium of social therapy, investigating issues of loss, suffering and trauma through enacting them for the viewer seeking outlets for their own pain. Performance art also represents the unfettered body, 'free' from the implications of social taboo or behaviour codes that implicate the 'polite' body (the nature of the human species meeting civilisation).

Performance artists can use their bodies to dismantle the parameters of social norms and disrupt accepted signifiers of identity¹. Live art performs not just the

¹ For example the performance artist Orlan utilises her body as artistic raw material, a design project 'situated somewhere between aesthetics and engineering' (Goodall, 2000, p. 149). The public are invited to view her performance of plastic surgery on stage. The operating room (as theatre) showcases a 'medical' and theatrical drama, the reconstitution of the live body as an artistic treatment of flesh for the purposes of generating a lived in art form. Doctors are 'players' in her drama, dressed in costumes acting out a script that is both medicine and entertainment. Opening up her body for public scrutiny, she flaunts the operating theatre as a site of performance. She organises the conditions of surgery as a

performer but the audience as well, offering something outside the tired routines of regularity and predictability. By subjecting the body and mind to a process of improvisation, performer and audience become experimental players in the larger scale performance of social living. By interrupting staged presentations of both body and mind, performance works to open up new ideas, and lived experience.² It goes a long way in bringing people together on the level of feeling and the desire to express this feeling on a larger social scale. Performance art, like art therapy challenges familiar ways of perceiving our bodies - both work to investigate the underside or interiority of the body. This is not the 'normal' everyday body, nor is it a precise image, but the interior region of the body on a sensational and even molecular level. This capacity to interrogate the fluid nature of the anatomical body as a momentum of mobility rather than a fixed structural representation is also a heterogeneous orientation. The body is an expression of many physiological and perceptive territories working together. Performance within art therapy is an activity that questions hierarchies of intensity, creating thresholds of movements and images that implicate a sense of passage within Deleuze and Guattari's plane of immanence. The plane of immanence explores 'being' as manifesting from both mind and body, where relations are never fixed, but rather infuse subjectivity as a happening.

kind of stage director. The operating theatre as medical procedure and performance art becomes a metaphor for violation, trauma and rape. Through Orlan's project our own hidden fears regarding disfigurement, disease and abnormality are played out (Clarke, 2000). She reveals the 'grotesque' body hidden behind a veneer of skin. These abject body parts remind us of our own inevitable decomposition.

² Dadgdha Dance Company developed a performance space without borders in their production of 'Iris', which promoted chance encounters within the social landscape. Their aim was to facilitate a social dynamic or performance landscape, created by human patterns of being and moving. Anyone could participate by simply wearing a designated Dadgdha ring on their finger, when this ring was worn it signified the wearer as a performer, who then identified and engaged with other ring wearers through a variety of improvised responses. These interactions were the performance. The aim was to promote communication amongst strangers, to bring about both verbal and non-verbal chance relations, whether through a nod, a gaze, a movement, a conversation, etc. The performance was an impromptu engagement with no specific stage, just random meetings,

Existing somewhere between life and theatre, performance art seeks to dissolve predictable representation, as if to slip the spectator into the performance itself. It facilitates interaction, which takes the viewer off their own 'staging' of themselves, into the 'as if' world of the live art before them. Identity is acted out through the body as canvas, the body as an expressive medium. The field of psychoanalysis has contributed to this artistic project, by destabilising the subject and the boundaries of social conditioning. The artist's body moves as a resistance to repression, the social screening of identity that accords classification and distinction. Performance art can be considered 'uncanny' in the way that it shocks, repulses, excites and attracts identification. Freud (1955) sought to describe the nature of the uncanny, as a mirroring of unconscious stimulation, anxiety and identification. George (1996) associates performance with a doubling up of experience, the linking of each person's unconscious material. Live art transports both performers and spectators into 'a whole world of ever changing experiences, ever new patterns...unstable, dispersed and empty' (George, 1996, p. 22). It is something both familiar and strange. It's the opening up of defenses to primary processes of instinct, fantasy and sensation. Primary material can be triggered through impressions of similarity. For example the fact that everyone is, to some degree repressed establishes a commonality. Repression may be looked upon as a universal mental process, a social unconscious (Laplanche and Pontalis, 1988).

Live performance is less about role and character and more about the relatedness between people. The performance acts as an abreaction, an acting out of a social catharsis, through a free association of ideas and sensations, which suggest that we are all influenced by what lies beyond the compulsion to control impulse. According to Lea Vergine (2000), body art and performance

consequently 'you can only know what directly relates or happens to you, and gather the rest as traces left behind in a landscape of stories' (Dadgdha, 2005).

seek to re-enact unconditional primary love in its association to having unlimited rights of expression. In this way the body performs an unsatisfied need to be loved 'for what one is and for what one wants to be' (Vergine, 2000, p. 7). Performing the self as an organism, diverging from the conventions of society, is a experiment with the passing away of everything normal and unsatisfying (Vergine, 2000). Live art loosens defence mechanisms, through its play with meaning, identity and socialisation. 'The (performance) Happening is not content merely with interpreting life; it takes part in its development...' (Lebel, 1995, p. 271). Live art is an assemblage of changing factors, a collage and moving composition, in which art and life are kept fluid (Kaprow, 1995). Pavis (1988) refers to this context as a 'haphazard' assemblage, a *mise en* scène, the bringing together of different kinds of relationships, which both associate and contradict each other. As a philosophical paradigm, performance art situates both the performer and spectator in an ambiguous space that explores difference, concepts of reality, illusion, emptiness and form (George, 1996). Live art places everything on a threshold of knowledge, without resorting to translation, plot, reason, causality or order.

Shaun McNiff (1998, 2001) has written extensively about the way in which art therapy can be enacted through performance mediums, so as to amplify and pursue the significance of creative endeavours. The art therapy assemblage carries through its many dimensions as a charge of activity that maps coordinates of subjectivity. Art therapy can act as a ritual to explore new territory, that which is stored unconsciously in both body and mind. The art therapy performance is a demonstration of fluidity in identity and embodiment. Physically enacting the art depicts a loss of fixed representation, 'live art presents two kinds of experiences simultaneously, the way in which individuals are encoded and conditioned by cultural institutions and ideologies and the opportunity for being self directive as a more active agent' (Heathfield, 2004). The BwO has the potential to transgress narratives and discourses aimed at

establishing representational forms. Jones (1998) conceives live art as an interrogation of identity's representational staging, the means by which impulse is repressed in the execution of roles and routines, which define boundaries of interaction. The body's surfaces, energies and forces are an uneven ensemble of influences, not a single explanatory paradigm, but different expression of the body's nature.

The assemblage of ingredients that compose the art therapy studio space challenge the idea that transference and countertransference are purely interpersonal events, but rather factors that emerge out of the staging of experience. The art therapy studio stages the production of both art works and enactments that further signify meaning as a serial event. The art therapy image is an open-ended process that can be engaged with through improvisational forays that reflect both its overall structure and qualitative affects. The art therapist observes the many elements operative within the art therapy scene of performance ritual. The art therapy setting records many traces of expression throughout its ecology. The opportunity for engaging with art therapy as a live art form is a means of overcoming inhibitive defenses within both mind and body. The art therapist can chart the course of creative pursuits not only through the use of art materials but also through the course of their environmental engagement. The experience of inhabiting the art therapy artwork, amplifies routes of passage into a lived expression of significance, a means of extending the artwork through bodily and environmental zones.

Adrian Heathfield (2004) believes visual art is increasingly seeking out immediacy, embodiment and interactivity as contributors to generative reflective spaces in which to understand the dynamic pace of culture and the kinaesthetic subject who tests the boundaries of their existence. Performance art tests out the idea that we are collectively networked across a shared social space. Subjectivity immersed within a collective geography of sensuous

impression, with experiential stimuli reaching into different sense crgans (Rodaway, 1994). DGATA assembles sense impressions generated from interactions with art making activities and the performance of art therapy upon its stage. The multi-sensuous accumulation of activities within art therapy broadens psychological and physiological orientation. The mind and body are continually processing new perspectives on the world; the art therapy image helps to landmark these perspectives, and the body executes references to its primary nature. The 'acting out' of art therapy is an opportunity for the art therapist to attend to moving cycles of flow and congested pathways of movement potential that seem fixed or numbed. Performance is the manner in which behaviour is played out. As such it offers a useful resource to elaborating upon the significance of the art therapy image, or series of images, as an expanse of rhizomatic terrain that portrays the artwork's physical and psychological dimensions.

The significance of performance is the involvement of ritual within art therapy practice. The art is performed so as to landmark characteristics of significant growth. This attention to transformation signifies a means by which to engage both body and mind in an enactment of becoming. Marion Woodman underlines the importance of initiation rites as vehicles for releasing what is no longer relevant while inviting in new possibilities for expression (Woodman, 1985). Woodman thinks the body always attempts to preserve its totality, through an engagement with both instinct and conditioning. The instinct for growth (escape) is juxtaposed with the need for familiarity (connection). Initiation rites essentially try to combine these opposites through the structure of ceremony, where the individual formally passes from one position to another in the course of a ceremonial event. Daria Halprin's (2003) therapeutic work with ritual tracks scenes of heightened awareness as opportunities for a more relational engagement with smooth space and improvisation.

Within art therapy's enactment, the process of relating to an image is kinetic (McNiff 1992, 1998). Live art stages the unarticulated body, which exists more like an energetic force or intensity that reflects the workings of desire as a transient element of subjectivity. The structures of nomadic identity are apparent within performance. The performance piece is a means of activating art therapy images, engaging and furthering their potential. It also enacts the spaces between images as further landmarks within the art therapy series. The performance piece mobilises significant themes within art therapy images, and is itself an example of how images can be explored using the body as a medium for live art. The body's cycles of movement - its force, rest and qualities of contraction and release offer avenues for exploring additional information pertaining to the art therapy assemblage. Experiencing art therapy through performance ritual 'has a direct impact on our sense of integrity and our feeling of excitement for life' (Halrpin, 2003, p. 110). This animates the client's passage into Deleuze and Guattari's schizoanalytic method; it does not offer a uniform space, but a space of biodiversity. An opportunity to approach the somatic collection of biological and psychological processes that survey signification as a map open to continual modification.

The location of an image has a relationship to a system of activities. Space is a polyvalent unity (Kaye, 2000), it is mobile and always in production. The art therapy assemblage does not lend itself to a single reading; it proposes a set of relationships that can be traced through imprints made in the course of its entirety. It is mobile and always in production, a field of activities (Kaye, 2000). The art therapy studio is a scene in which to produce compositional deposits that are art pieces and accumulative routes into tactile materials that stimulate psychological and physiological therapeutic outcomes. The studio environment is a space in which to perform art, to extend the characteristics of art therapy images into movement opportunities. The significance of moving the art therapy image on through improvisation is the 'cathexis of desire' (Howell,

1999); desire finding its release through a fluid set of circumstances that allow psychological and physiological energies a route of passage. 'In the reign of the imagination, an expression is hardly *proposed*, before being needs another expression, before it must be the being of another expression' (Bachelard, 1994, p. 214). The art therapy performance 'moves the image on' by further amplifying the content and feeling of images, this feature of the DGATA model is the opportunity to enact the artwork's agency.

Art therapy can animate the idea of schizoanalysis, through its documentation of transition. The art therapy map is criss-crossed with diverging lines of immanence. The art therapist maps subjectivity as an open system. The ecology of the DGATA studio facilitates de-stratification; it positions images side by side, denoting a cartography that is both site-specific and connective to other chains of references. The energetic qualities of the art therapy performance are charged with particular kinds of forces that engage desire as a non-linear process of becoming. Enactment destabilises the therapeutic art object, along a continuum of ritualised significance that in essence re-makes the art object into an interaction of multiple elements, forces, affects and relations (Parr, 2005a).

Authentic Movement

The aim of authentic movement is the development of contemplative awareness whereby physical sensation and impulse are worked through improvisation. Authentic movement's method encourages non-judgmental receptivity to organically arising and unconsciously derived movement. It is not a replication of choreographed movement, but rather an unprogrammed and immediate attendance to the diverse capacities of the body. As a form of movement improvisation, it extends beyond ordinary social interaction, and occupies different kinds of body boundaries and the sharing of personal space (Blom and

Chaplin, 1988, p. 22). Authentic movement attempts to release the body from repetitive movement routines. Participants embrace the complexity of the somatic landscape, the BwO that never completely belongs to a self, but incrementally de-stratifies the body into charges of ontology.

Mary Starks Whitehouse, a dance teacher and pioneering dance therapist, developed authentic movement in order to bring attention to the unfolding of physical processes that could ultimately herald a more predominantly expressive life. She used the term authentic to evoke qualities of movement that happened through instinct. Her method contrasts with the idea of movement having a rational and purposeful end. Whitehouse believed that letting go of conditioned responses released holding patterns that restricted the scope of experience. Her use of the term authentic corresponds to 'the Greek word authentikos referring to someone or something possessing unquestioned or unquestionable authority' (Koltai, 2002, p. 48). Whitehouse considered movement to be an essential foundation of life, having the authority to direct experience through improvisation. Whitehouse proposed that the core of the movement experience was to be moved, to achieve moments of total awareness that could not be anticipated or repeated. Movements derived from sensation leading outward into space, the body happening as an unfolding of unsolicited intention and expression. It is an example of nomadic subjectivity generating a course of travel without fixed co-ordinates. Authentic movement brings awareness to almost imperceptible qualities of living it beckons participation with reality as a dynamic process, a way of perceiving below the threshold of everyday consciousness.

Authentic movement endorses a quest for somatic and psychological freedom, through a suspension of purposeful action. Whitehouse considered the majority of our gestures, within everyday life to be 'stereotypes of feeling, limited and unoriginal' (Whitehouse, 1999a, p.34). Whitehouse saw a direct correspondence

between body and behaviour, so that if the body was stiff and unyielding, so was the person's conduct (Whitehouse, 1999a). She believed that in each person there was a longing to return to the spontaneous movements of their infancy.

Movement is one of the most direct ways to reach back to our earliest experiences. Movers frequently lie on or move close to the ground. By attending to the world of bodily felt sensations, the mover recreates a situation that is in many ways similar to that of an infant who swims in a sensory-motor world (Chodorow, 1986, p. 97).

Authentic movement is a method of engaging in formless flows of sensory perception (Koltai, 2002). Whitehouse believed that the (body's) distortions, tensions and restrictions were the distortions, tensions and restrictions within the personality. They are, at any given moment the condition of the psyche (Haze and Stromsted, 2002). Authentic movement facilitates the release of unconscious material buried in the body (in its tissues, muscles and joints), in its attempt to encourage a relationship with a more enlivened body. In other words the unconscious is given a medium in which to move, it continually transforms into the next reconfiguration of sensations, feelings, thoughts, impulses, etc. Its relationship to art is not unlike bringing into expression something new. 'One of the reasons why artists create works of art is in order to take themselves by surprise, to discover in the painting, something other than a reflection of their own intention' (Maclagan, 2001, p. 138). The same is true for authentic movement; it moves something different or taken for granted. The mover depicts what is normally unnoticed or invisible, in order to see the shape of things taken from the background into the foreground. As a consequence life experience feels expanded, hopeful and inspired with the appreciation of how micro-perceptions unveil unconventional spatial dimensions that encounter the world differently.

In the practice of authentic movement there are no direct instructions regarding the goal or type of movement to be explored. Participants work with their eyes closed, moving their awareness inside out. Movement arises from a genuine sense of impulse, physically responding to feeling and impetus within subtle planes of body monitoring. People move non-directively from their own sense of genuine impulse. Movement can be still, minute or vigourous. In this method of body awareness, there are no movement warm-ups, or verbal dialogues that might 'disturb the intention for movers and witnesses to open towards what arises, towards no agenda, towards an absence of a preconceived theme or stated problem' (Adler, 2002, p. 125). Each participant takes a turn both moving and witnessing. The time period for moving and sharing is pre-agreed, usually between twenty minutes to one hour. It is the witness's responsibility to keep track of time, and also to be aware of safety issues within the room (as in the case of a mover bumping into a wall or object in the room while their eyes are closed). Once the mover's time has elapsed writing, art and discussion periods take place, opportunities for the mover and witness to discuss imaginal relationships between movement and meaning. The authentic movement period develops particular insights related to each person. Amplifying metaphor is the underlining goal for both mover and witness. Rather than translating the movement sequence into specific categories of interpretation and meaning, the authentic movement period is associated with a series of constructs that reflect the different spatialities of the work. Both mover and witness record the details of their own experience. Witness and movers...employ a linguistic framework, or protocol, to assist in differentiating clear perceptions from projection' (Haze and Stromsted, 2002, p. 57). 'I' statements locate perceptions in the speaker. There is a mutual understanding and commitment to utilising non-interpretative language, which does not pin down a specific intention or explanation. This opens up a trajectory of references that do not so much tell a story as supply an activation of desire within both the mover and witness. This awareness of kinaesthetic potential is perhaps the greatest resource gained from the authentic movement encounter. The multiple pathways of movement are also dimensions in which to explore the elaboration of desire. Authentic movement liberates desire potential. Within the context of art therapy authentic movement techniques can be used to elaborate upon the physicality of the creative endeavour. The unleashing of generative routes of physical and psychological expression does not bestow a sense of purpose, but rather experimentation with a series of subjective encounters that also investigates personal capacity. This is the value of improvisation; it instils a sense of trust within the creative process to produce something different. The process is not directed towards a particular outcome, it is a fresh approach that is not foretold but awakened within spontaneous engagement with oneself and a creative environment.

Authentic movement challenges conditioned responses to not only somatic routines, but also how we situate ourselves within a larger cultural framework. Giving expression to additional physical possibilities can also unfix the mind to perceive differently. Letting movement happen organically ushers in social prohibitions and structures of conditioning which limit the body into certain postures and patterns. 'For most people, the tempo and pattern of all physical movement is habit formed, automatic, unconscious and above all organized toward a utilitarian end, toward an objective or goal' (Whitehouse, 1999b, p. 52). The conditioned or socialised body 'often says 'Yes' when it wants to say 'No' or 'No' when we are afraid of saying 'Yes', with the result that we stiffen' (Whitehouse, 1999a, p. 38).

Rather than *doing* movement, authentic movement lets movement happen. 'Authentic movement differentiates between movement that is directed by the ego ("I am moving") and movement from the unconscious ("I am being moved")' (Haze and Stromsted, 2002, p. 57). Whitehouse felt that by learning how to be spontaneous physically, a greater sense of life energy was also released cognitively and emotionally. The ability to adapt to changing

circumstances was unleashed in the somatic arena that mediated transitions between smooth and striated spaces.

As we move, one awareness leads to another...An image does not have to be about one thing; it can jump through time and space...A movement can cause a vivid sensation that in turn feeds a detailed image that in turn fuels further movement and new sensations (Blom & Chaplin, 1988, p. 12).

The art therapy assemblage stimulates a somatic range of inquiry by triggering different kinds of kinaesthetic experiences. Authentic movement is a means of working with the body non-directively, this can also inform spontaneous art making and performances of art therapy material. The silences within art therapy are precursors to the movement experience, the foundations for 'being moved' (Reid, 2004). The importance of silence enters into the art therapy session in the way that the art materials meet the unconscious. The silence is an absorption into the newness of the art's emergence. The Deleuze and Guattari inspired art therapist welcomes silence, the absence of language as a fixture of representation and communication. The art therapist is not an authority on meaning, but rather a mediator of what the art might suggest. The sharing of silence allows the client and therapist to make contact with their own thoughts and feelings. Paul Crowther (1993) sees the body taking up new possibilities and projects as a result of its perceptual contact with artworks that make contact with silence. And yet the absence of language does not limit the somatic vocabulary that operates through a trajectory of sensations that can be registered within art media and throughout the DGATA studio. Artworks record features of the art therapy session, and contribute to the accumulative nature of subjectivity as a series of locations resonating with unthought actualisations. The absence of language is not an absence of significance, but an inclusion of somatic affects within the making of art therapy.

The additional somatic resources motivated through an awareness of the unstructured body can also work to showcase the dynamics of schizoanalysis.

Many areas of the body's sensory plane are worked through the art therapy assemblage. The art therapist's appreciation of non-directive movement can provide an additional canvas upon which to observe the processing of behaviour in relation to psychological issues. The active nature of art therapy is physical, executed through a somatic materiality that accumulates routes through a mind/body continuum. Every tracing of the body within an artwork and the art therapy studio brings with it a history and a potential. The art therapist's awareness of non-verbal behaviour can further the course of art therapy as a link to both somatic and psychological processing. The somatic and kinaesthetic elements of art therapy, offer additional avenues of exploration, in which to record the unfolding of development. For the art therapy client, the practice of spontaneous movement and creativity unleash opportunities for tracking boundaries of inhibition that foreclose the benefits of desire as a fuel for flexibility and experimentation.

Summary

Deleuze and Guattari situate desire as implicating both personal and social spheres of reference. The BwO is a means by which the body moves its links to both of these realms; it resonates a smooth flow of interconnection. As an unstratified entity it can deterritorialise beyond a specific form or meaning to embrace undercurrents of impulse. Somatic psychology, performance art and authentic movement are practical methods of awakening the capacity of the body to flow in many directions. They interrogate prohibition and repression, awakening a transitional sense of becoming that is hard to put into words, because it exists within a nomadic open-ended state. These three methods of improvisation also unleash the schizophrenic body that moves in many different directions according to the tendencies inherent within various body zones.

From an art therapy perspective these methods of improvisation facilitate sensorimotor experiences, moving between the image and the body, in order to observe and feel what happens when both are in relation to one another. Having experienced spontaneous movement the body can use this memory as a resource in daily life. The physical experience of non-directive creativity continues to live on, providing a resource for entering into new situations that radiate desire. Somatic psychology, performance art and authentic movement investigate prohibition, they liberate the flow of desire into new connotations, new potentials of becoming. Routines of habit contract people into more limited spaces, versus the potential for greater flexibility. 'To look at our lives differently...requires first that we loosen the reflex of habitual responses - the shapes, postures and judgments which order our lives' (Tufnell, 2000, p.12). The movement of postures, positions and attitudes into transitional spaces or plateaus opens up a person's possible routings. As an open somatic matrix, experience is not bounded by habits and stereotypes that exhibit a claustrophobic ontology – i.e. being rigid, unyielding, clinging, obsessive, and compulsive, etc. Art is a portal a summoning that affects one's passage of intensity. The BwO is an experimental milieu that actively creates a territory of distribution. Desire does not abandon structure it multiplies exploratory aptitude. DGATA denotes passages and nodes of growth that circulate throughout artworks and the studio space. The art therapist assembles the means by which improvisation can occur within the making and enacting of art. The therapeutic relationship's foundation is witnessing paths of spontaneous interaction; the art therapist observes the client's strategies to overcome stasis:

Movement improvisation is founded upon elemental investigations of the body, felt through involuntary reflexes and fluctuating sensations that alter both physical positioning and perspective. It can be understood as an analysis of 'instability', in terms of subjectivity, language, representation and physical form. Improvisation is receptivity and questioning, it brings to light new information

that challenges familiarity, 'its not a symbol making body, it is the work of an existential resonant body' (Sheets-Johnstone, 1999).

The idea of subjectivity existing as a process, or 'representational contingency' (Elliot, 1996, p. 34), revises the imaginary space of art therapy to include more links to a 'moving self' involved in 'moment-by-moment processes, constantly renewing and self-transforming' (FitzGerald, 2001, p.18), growth radiating out a chain of references. The self as a verb activates relationships to images and divergent lines of flight. 'Every response shapes and reshapes an event's becoming' (Houle, 2005, p. 96). The capacity for movement variation moves life at different speeds and intensities through an ecosystem of living that bestows different kinds of influences and interactions.

Chapter Five

Trauma and the Movement of Desire

The goal of this chapter is to implicate Deleuze and Guattari's thinking in the development of an art therapy practice linking ideas regarding the investigation of desire within somatic psychology, performance art and authentic movement and the treatment of trauma. Specifically the DGATA model will operate as a site in which to investigate trauma as a site of both affliction and a trajectory of recovery into new co-ordinates of psychological and physiological growth. The body focussed methods of investigation and exploration discussed in the previous chapter share commonalities related to sensation based awareness, the tracking of desire and the opening up of the unfettered body through improvisation. Collectively they contribute to the understanding and treatment of trauma as a network of psychological and biological experiences that operate as signifying systems working within and outside the body. Art therapy can offer a therapeutic context in which to explore the revelation and processing of trauma as a complex interactivity of mind, body and environment. Trauma's implication of both mind and body infiltrates a person's kinaesthetic range, the biochemical flows activated as an outcome of trauma can inhibit expression and the opening up of sensation to experimentation. Trauma turns desire in on itself; libidinal energy becomes entwined within internal circuits of sensation and memory. As a result a person's energetic cycles and subjectivity are driven by the nature of a psychological and biological unconscious, or the way in which experience triggers spontaneous flows of behaviour and perception. The unpredictable nature of trauma dislocates bodily movement into a safety net, whereby the flow of desire is curtailed by the potential uncertainty of external events that disarm psychological and somatic improvisation.

Art therapy is an invaluable aid in the treatment of trauma in its capacity to go beyond words into images that carry with them a sense of energy and sensation that illuminate the original trauma scenario. The way the body moves into art brings with it a particular kind of creativity energy, which also affects language-based description. The art therapy image attempts to fulfill something beyond language, because it is an embodied experience. It's a gestured record of thoughts, feelings and sensations calling forth both conscious and unconscious experience. It is here that meaning becomes individual, words and expressions becoming associated to a newly created focus, which is the expression of psychological and somatic material. Physical and cognitive movement passes through a series of artworks as a span of references and affect. The routing of trauma through triggers and chains of association, encourage the potential for expression to be a production of variable relations. Peggy Phelan is particularly interested in trauma as an expression of mourning, in other words how loss 'is one of the central repetitions of subjectivity' (Phelan, 1997, 5). The embodiment of loss, expresses wounds that are both psychological and physical. In this context loss is 'the unworded sentenced' a 'symptomatic utterance' (Phelan, 1997, p. 17). Traumatic memories are encoded in symptomatic imagery and sensations that speak without words. Deleuze and Guattari believed that language was a field of vibration and energetic zone, arising from the fluid body (Deleuze and Guattari, 2004b). Bodies and language are not closed systems, but open lines of becoming that carry an energetic libido that acts out ideas and instincts. The body carries meaning along with its actions; it mediates representations of past and present experiences by impressing itself upon environmental and relational elements of exchange.

Trauma treatment involves methods of working with highly charged somatic and kinaesthetic states of activation and dissociation. Art therapy contributes to trauma treatment; its trajectory of images has the capacity to reflect conditioned physical and cognitive representations, while contributing to new productions of subjectivity. Images, feelings and sensation come together within the activity or movement of the creative experience; the art therapy client is always adding new variables to their perception. Art therapy images do not unfold a specific point of view but actively produce sensations that extend beyond what has already been lived. The movement of desire is reflected within acts of creation, in actually moving perceptions through to another series of imaginative proposals. Artworks illustrate a network of perceptive influences that may otherwise float without context. An art therapy practice influenced by Deleuze and Guattari seeks to provide a compensatory outlet for somatic repression and prohibition. The DGATA practice of art therapy pays attention to the implications of conditioned or habitual subjectivity that appears within the improvisational spectrum of non-directive art therapy. Art therapy invites spontaneous impulse and sensation-based intensities working through the materiality of art media, the studio environment and the therapeutic relationship. This is the instigation of Deleuze and Guattari's idea of schizophrenic desire unleashing itself within art compositions that in turn charge subjectivity with the capacity to surpass conditioned reflexes. Art therapy images open up new territories of relationship, generating additional sensations and affects that diversify the trauma scenario.

Somatic psychology, performance art and authentic movement invite the perception of new relational co-ordinates, the awareness of a fuller capacity to live life as an open site of expression — with passages into additional somatic and psychological territories that investigate trauma as a debilitating and reactive re-enactment of crisis. Art therapy simultaneously maps traumatic reactivation and re-assembles new responses within the art therapy studio landscape. Left to its own devices, trauma can exist as a conditioned reaction, or habitual response that has long outlived its function. Stimulating desire

through the imaginative potential of art therapy challenges psychological and somatic structures that are outdated. Art therapy illustrates the complexity of body/mind interactions, bringing to light the map-like structures of cause and effect. The trauma rhizome's structure is re-constituted by bringing it's conditioning to the surfaces of the DGATA studio, whereby new responses are generated in the process of producing artworks. The art therapy assemblage can be said to stimulate more dimensions of experience through its instigation of multiplicity in art materials, methods of working and the tracking of the many activities that compose an artwork and overall session. The Deleuze and Guattari art therapy landscape encourages experimentation on a broad scale, and an sensitive witnessing of the body that moves within the scene of art therapy as a set of relationships or performances of meaning. The art therapy space is not a passive backdrop, but actively encourages the engagement of different qualities of affect and their signification.

This chapter will explore the ramifications of the DGATA method in regards to the treatment of trauma. The first part of the chapter will describe the fundamental dynamics inherent within the trauma trajectory constituted as a psychological/biological network of circuits and passageways that not only implicate an internal lived experience, but potentially the entire frame of a person's lived reality. Trauma configures the body and mind into a territory of sensory reactivity. The involvement of an artistic presence upon the trauma-induced frame of somatic and psychological referencing instigates a kinaesthetically alive body. Traumatic activation can be traced and transformed through a somatically and kinaesthetically aware art therapy practice that witnesses the workings of mind and body through its imprint upon art and environmental materials. The unleashing of a schizoanalytic approach within non-directive art therapy can work to incite activation of both conditioned trauma responses and the unleashing of desire as an antidote to trauma regulated expression. This portion of the chapter will also include a discussion

about language and its role within both the trauma configuration of mind and body affects and the nature of movements operating outside the trauma scenario into new domains of opportunistic expression. The chapter will end with a discussion of trauma treatment within DGATA highlighting some practical applications of Deleuze and Guattari's thinking in regards to therapeutic methods.

Trauma and Artistic Presence

Trauma lives through a complex system of physiological and psychological affects. It is neither a contained definition, nor a physical symptom but rather an experience that dissociates, existing beyond representation. It is an experience of overwhelming personal violation that also pertains to events that are unfortunately not uncommon in the course of human experience, i.e. accidents, illness, rape, domestic violence, war, crime, sexual abuse, etc. (Herman, 1997). The role of somatic psychology, performance art and authentic movement is to document relations between power and powerlessness, violations that can be difficult to fully express through words, due to their neurological representation within the brain's circuitry. As a result traumatic events do not occupy proper positioning in a person's history; they slip beyond language, as a kind of fragmented experience, lacking a grounding orientation in both the mind and body (Herman, 1997). Trauma trespasses into the cellular makeup of the body, as a living cluster of associated memories, sensations and biochemical activations that dis-order mind and body integrity. There is no sense of a person having survived and moved on from the event (Rothschild, 2000). Trauma events are not coherent stories but intense emotional or somatic sensory impressions, which re-occur when a person is reminded (consciously or unconsciously) of the initial trauma (van der Kolk and McFarlane, 1996). Experiences that 'knocked people off course' that made them feel somehow lost to themselves and their intended purpose in life, are often related to trauma and loss (Homer, 1997c). 'Psychoanalysis is not concerned with locating the actual causal event or trauma in our past but rather how certain events or traumas have become meaningful in the present' (Homer, 1997c, p. 56). The trauma story is a legacy that is never finalised, but dialectically interwoven within the very essence of a person's mind and body (Herman, 1997). The dialectical movement between then and now is a lived expression of both symptoms and the possibility of moving into new constellations of relationships that offer different ecologies of experience.

Traumatic memory is not integrated as a historic event, but rather exists independently through the dynamics of re-activation. There is a cluster of traumatic associations, stored in the body that become stimulated through conditioned reflexes that re-live the experience of trauma activation (O'Brien, 2004). It is this enactment of trauma within the body that lends itself to the strategies proposed by somatic psychology, performance studies and authentic movement. Art therapy documents these kinaesthetic passageways, producing a series of images that attempts to document re-arrangements or flows of expression. The art therapist's attention to the client's movements within the studio environment can detect alterations outside the trauma configuration, new routes of potential subjectivity that prompt active relationships to images as new actualisations of experience.

Freud believed that the body ego was primary, in other words psychological phenomenon developed as an outcome of bodily experience. This belief was implicated in Freud's work with Breuer, in regards to their early treatment of hysteria, in which psychological trauma was enacted through physical symptoms or somatic compliance. They discovered that the memory of trauma operated unconsciously, like a foreign body, working to resolve itself through its transgression into conscious experience. The body acted out repressed

material, which gave expression to psychological conflict. Freud and Breuer attempted to trigger these conflicts through touch and suggestion. In so doing they initiated psychoanalysis with the workings of the body and memory. They believed patterns of behaviour operated unconsciously inhabiting and influencing present day circumstances. Conditioned reactions are repetitive, a simultaneous moving forwards and backwards, a dual referencing, bringing together different lived events and time frames (Homer 1997c). Trauma lives on in the present, it repeats behaviours that are in essence dis-located from current experience, rooted instead in both conscious and unconscious memory.

Freud described the dynamics of traumatic neurosis in the writing of 'Beyond the Pleasure Principle' (Freud, 1995). It is here that Freud explained the long-term effects of fright and anxiety that breach defenses in a marked way (anxiety being related to an expectation of possible danger, in contrast to fright, which pertains to an actual experience of having *been* in danger). Of the two fright has the greatest impact, because it indicates a wound, a disruption of what Freud termed 'the pleasure principle', or the relative harmony of mind and body. The trauma image is an indelible imprint a feeling close to death or near death with a strong association to survival (Herman, 1997).

Trauma engulfs and infiltrates beyond a person's ability to cope—an 'influx of excitation excessive in relation to the tolerance of the psychical apparatus' (Laplanche and Pontalis, 1988, p.466). Subsequently the traumatic incident continues to operate as a surplus energy, subject to the effects of repression. The ego attempts to resist this excess, to contain it for the benefit of maintaining a sense of overall balance. The compulsion to repeat is derived from the body's instinct to shake off excess stimulations. Practically it gives people a sense of control, the means by which to escape their pain, a way of coping. 'Repetition resonates with all coping mechanisms — dissociation, splitting, super-alertness, self-mutilation, and compartmentalisation' (Curtis,

2005, p. 209) these are means of consciously working with overwhelming states of feeling. Repetition occurs to the extent that excess stressors have been placed upon the body's functioning, further re-activating anxiety and the fear of traumatic re-occurrence. Anxiety and fright are feeling states that can affect the total organisation of the mind and body through the numbing of spontaneous responses (Juhan, 1998).

Curtis implicates traumatic repetition with the workings of chaos theory3, the way that energetic patterns can reveal themselves in seemingly randomised events. Chaos theory defines change as non-linear, brought about by certain key events that cause significant repercussions. In this model change is only predicted to the extent that equilibrium has been interrupted. In therapeutic terms chaos theory suggests that there is something meaningful within chaotic behaviour, a metaphor, image or symptom that 'tells all'. Applied to art therapy, the intensity and purposefulness of art practice, attempts to situate patterns of information in the context of seemingly spontaneous creative events. Chaos is not random and disorganised; it rather complicates clarity by dispersing content across varied elements rather than a conclusion (Goldstein, 1995). It is rhizomatic in the sense that there are many ways into chaos, and yet through these many entry points there is a core network that reflects the re-enactment of experience and its story line. Added to this there is also a schizophrenic element of being 'in bits' within the trauma scenario, with different parts of the mind and body dissociating into their own autonomous being, as an outcome of involuntary stimulation. Guattari's (1995) own understanding of chaos is an ensemble of conditions that works against coping routines. He argues in favour

³ Chaos theory is a scientific theory, which suggests that complex motion can be mathematically determined, as an order or patterning within chaos. Used initially in regards to the analysis of natural occurrences, such as weather prediction, it has now been related to the study of political unrest, the family, disease and community life. Chaos theory underlines the link between initial conditions and subsequent effects, thus its application in psychology investigates patterns of behaviour dependent on the arrangement of particular foundational ingredients which bring about a predictable range of results.

of a heterogeneous embodiment that broadens personal perspective through an enlarged span of reference. He believed subjectivity was a variable consistency, something that could be set adrift upon a discursive range of potential sites. As an 'schizoanalytic cartography', subjectivity can map random fields of consciousness, which at first seem chaotic but actually navigate personal meaning across many different kinds of terrain. This accumulation of subjective territory counteracts trauma conditioning, by generating different kinds of meaningful representations that propel desire beyond the trauma frame of reference.

It's both the instinctual and bio-energetic levels of trauma that brought Freud to the conclusion that words alone could not adequately communicate the body's discharge of tension (Freud, 1995). In order to work through traumatic experience, it needs to be re-enacted, which instigates a process of abreaction or the release of emotion related to a traumatic event. Freud believed that abreaction was the only way for a subject to get rid of a traumatic memory, through discharging its influences that bound desire. In his essay 'Beyond the Pleasure Principle' Freud uses the example of a child at play, repeating the dynamics of lost and found, as a way of gaining control over the disappearance of a loved one. In order to move beyond a particular sense of passivity and powerlessness, action is a means of 'doing something'. It's this transference of energy that remakes loss into something purposeful, a moving activity that both expresses loss and re-designs the scene of one's life, the creative production of desire into another plane of reference.

Traumatic re-enactment is stimulated by particular life events and circumstances that trigger involuntary and intrusive memories and activation. Traumatic memories are reoccurring networks of flashbacks, intense emotions, panic attacks, somatic sensations, nightmares, interpersonal re-enactments, character styles and pervasive life themes that are derived from seemingly day-

to-day life events, which have become charged with anxiety (van der Kolk and McFarlane, 1996). As a consequence people tend to organise their lives around routines and habits that 'keep them safe', in an attempt to ward off the chaotic elements of unforeseen stimulation. And yet keeping the world at bay is an impossible task, attempting to ward off excess stimulation and arousal requires supreme effort and hyper-vigilance. By repeatedly striving to shut down, defend and foreclose the ramifications of experience people can over time become less involved in the present. A habitual lack of responsiveness can lead, according to van der Kolk and McFarlane (1996) to changes in the central nervous system that correspond to the effects of prolonged sensory deprivation. The psychological and somatic replaying of traumatic experiences creates a tolerance for these memories, albeit in an unsatisfying way. Tolerance is a learned response, an adaptation to states of activation and hyper-arousal that results in behaviours, feelings, body states and interpersonal relationships executing a particular kind of structure and control.

Van der Kolk's (1996c) reference to trauma as an 'inescapably stressful event that overwhelms people's existing coping mechanisms' (van der Kolk, 1996c, p. 279), denotes trauma's penetrating influence. Trauma is a complex assemblage that relates to the processing of acute feeling and sensation that overwhelms ordinary mechanisms for recording incoming sensory-based information from the environment into the body's organism. The interaction of mind and body are regulated by nerve impulses and through chemicals in the bloodstream (van der Kolk, 1996b). At the onset of trauma the brain's survival instincts are triggered in the limbic system (located in the centre of the brain between the cortex and the brainstem). The limbic system maintains a balance between the internal and external realities of the mind and body. When this balance is overridden, a release of hormones transmits a state of 'alert' to the autonomic nervous system, which then triggers the sympathetic nervous system for a fight or flight response. Sudden, abrupt and dramatic changes in our lives (the startle

effect) activate neurological stress responses connected to the sympathetic nervous system. In the case of prolonged periods of stress, the sympathetic nervous system continues to exert a hyper vigilance that can be characterised by increased temperature, respiration and blood flows preparing the muscles for quick movement (Totton, 2003). If a fight or flight response is not possible, the parasympathetic nervous system is activated and the heart rate is lowered into a depressed state of non-activity. As a result people freeze with the hope that whatever harms them will pass. In this case the body memory of the actual event may also remain largely in the unconscious. This is because the limbic system corresponds to two areas of memory, called the amygdala and hippocampus that co-exist near each other.

The amygdala is known to aid in the processing of highly charged emotional memories, such as terror and horror, becoming highly active both during and while remembering a traumatic incident. The hippocampus...gives a time and space context to an event, putting memories into their proper perspective and place in our life's time line. Hippocampal processing gives events a beginning, middle, and an end. This is very important with regard to PTSD (Post Traumatic Stress Disorder), as one of its features is a sense that the trauma has not yet ended (Rothschild, 2000, p.12).

Traumatic memory is unanchored and floating because it is not stored in a consistent way. Dissociation occurs as a result of the hippocampus becoming engulfed by stress hormones. The hippocampus is essential for the storage of memory information; it manages a person's time line, their sense of history, through the ordering and sequencing of events. The hippocampus also has a link with the left cortex of the brain, associated with speech. Broca's area, a part of the left hemisphere that is involved in translating experiences into language and speech, malfunctions during a traumatic event depleting its usefulness in communicating trauma after the fact (van der Kolk, 1996b). Consequently the traumatic event is prevented from becoming a communicable memory that is clearly situated as a past experience; it instead travels forward into the here and now as a living reality (Rothschild, 2002, p. 106). Traumatic

memories reappear as feelings without context, floating freely without a proper sequencing of personal history. They exist in what is referred to as 'state memories', patterns of stress and arousal linked to the overall security of the individual and pertaining to specific events. (Totton, 2003). State memories are related to the startle reflex that can manifest through shaking, trembling, sighing, collapsing and crying, all ways to shake off the holding of tension within the individual.

The experience of PTSD undulates between numbness to hyper-intensity, because physical sensations and emotional reactions cut across the fright-flight-freeze continuum. State dependent recall occurs without notice, often referred to as a flashback, because the experience is so real and intense that it becomes a reality in the here and now, 'the suffering individual is unable to distinguish the current reality from the past. It *feels* like it is happening now' (Rothschild, 2000, p. 45). Flashbacks can be seen, heard, tasted, smelled or reflected within the body's musculature. Rothschild considers flashbacks to be somatic markers, encoded imprints of response to particular kinds of stimuli (objects, sounds, colours, movements, environments, people), which evoke physical and emotional reactions that influence thinking. Preferences are unconsciously informed by somatic markers, which allow us to feel the consequences of a previously hurtful experience through physical and mental symptoms (i.e. exhaustion, muscle stiffness, concentration difficulties, sleep disturbances, etc.) (Rothschild, 2000).

PTSD is a cue evoked state memory that emerges as an outcome to the brain's neuronal imprinted response to fear, which operates as an interpretation to patterns of hyper-arousal in the brain (Perry, 1999). Trauma alters biology; it imprints a conditioning pattern that binds together a group of ideas and set of reactions. Traumatic incidents alter the composition and processing of the brain's functioning from the cortex (cognition) to the brain stem (physiological

regulation); they shock the brain's equilibrium, creating an acute activation of all the brain's functioning, in an attempt to secure survival (Perry, 1999).

Because paired associations have been created in the regulatory, more primitive parts of the brain, a pattern of incoming sensory information may be interpreted as danger and acted upon in the brain stem, midbrain and thalamus milliseconds before it goes to the cortex to be interpreted as harmless. For a combat solider from Vietnam, the sound of a firecracker will still elicit a fear response (e.g. increased heart rate, startle response), even though he knows it is a firecracker. The man's brain stem has interpreted and acted on the information before it has had a chance to get to the cortex to be interpreted in a more complex fashion (Perry, 1999, p. 18).

Trauma, stemming from the Greek word for wound, infiltrates the whole organism in an invasive and predatory manner. Laplanche and Pontalis (1988) consider trauma as the violation of our flesh boundary; our skin is both a barrier containing the inner contents of the body and an opening through which impressions of the world around us can enter into conscious experience. It is comprised of surfaces that mediate intimate subjectivity and experience. The body's surfaces are sites of subjective encounter, an interactive space of experiencing. According to Benthien our tactile perceptions are our most primary, because 'in the embryo the skin and the brain are formed from the same membrane...both are in essence surfaces' (Benthien, 1999, p. 7). Our skin perceives the world and our place within it. Skin is often referred to as a container, an envelope for the self, but in reality it is always changing, as a medium of communication, it represents the fluctuating states of mind and body to the outside world. 'It is a conduit, and it is also a writing surface on which the body's thoughts are inscribed' (Elkins, 1999, p. 46). Skin can also be implicated as a canvas for self-harm that takes on the affects of attack and woundedness. Working with art materials to scrape, pierce, slash, cut, beat and injure is a dramatic means of transforming the energy of self-harm. The wounded canvas, paper, or clay representions of skin can reflect the pain of violation. Art materials facilitate the enactment of an experimental body that investigates traumatic injury while also producing a creative means of moving through trauma conditions into new territories of experience (Foster, 1997).

In his book, When the Body Says No: The Cost of Hidden Stress (2004), physician and psychotherapist Gabor Maté, directly relates the workings of our physical biology and illness with the affects of stress and trauma activation. He reached his conclusions after a considerable length of time working in a palliative care ward, where he began to investigate the correlation between the psychological histories of his patients and physical illness. In most cases, he discovered that almost none of his patients had ever learned how to say 'no', with the consequence that their bodies began to say 'no' for them. Their bodies became ill when state memories and traumatic reactions eroded their defences. Maté outlines his theory under the heading psychoneuroimmunology, the science of mind/body interaction. He believes that there 'is no body that is not mind (and) no mind that is not body' (Maté, 2004, p. 9). He uses the term 'mindbody' to convey the integration between the two systems, a term that references the way in which the psyche interacts with the body's nervous and immune systems, to bring about certain kinds of illnesses, or biochemical responses that weaken the overall homeostasis of the body's functioning. Repression operates as an outcome of the body's defenses being negatively implicated by chronic stress conditions that flood chemical and hormonal discharges into the body. 'Excessive stress occurs when the demands made on an organism exceed that organism's reasonable capacities to fulfill them' (Maté, 2004, p. 29). Repression disorganises and confuses our physiological defenses. Chronic stress can implicate states of helplessness, feelings of entrapment, and dissatisfaction. A 'false self' develops as a result of overpowering relational wounding, whereby people learn to dis-identify with their own experience. Maté believes that conflict and violation react with practically every tissue in the body eventually grinding down their optimum functioning.

The psychological and somatic circuitry of trauma can develop a reservoir of conditioned reflexes. These psychological and somatic states are implicated in the work of somatic psychology, performance art and authentic movement, because they address improvisational expressions of traumatically linked material. Art therapy has the added advantage of also bringing the trauma scene out in the open, through a collective assemblage of words, images and movement performances. Trauma is best understood as being primarily sensory based, because traumatic experience is often re-enacted non-verbally through state memories unanchored in cognitive meaning and language (Rothschild, 2000). Traumatic memories stored unconsciously as psychobiological or neurophysiological responses are primarily concerned with the operation of the brain's basic instincts pertaining to survival. A person's own body can become a source of fear, because it has become linked to the survival instinct. Rather than a medium of living that is productive and flourishing it is constricted into avoidance, a fear related to its survival. Adam Phillips (2001) suggests that we utilise the psychological capacity to 'escape' in order to avoid situations that overwhelm and disarm us. 'Knowingly or otherwise we map our lives - our gestures, our ambitions, our loves, the minutest movements of our bodies according to our aversions, our personal repertoire of situations, encounters or states of mind and body, that we would literally do anything not to have to confront' (Phillips, 2001, p. 50).

The mapping of travel through DGATA develops a different kind of subjective cartography generating routes within two and three dimensional art materials and a spatial complexity that encourages greater somatic and psychological resourcefulness. DGATA offers the means by which to chart the resuscitation of spontaneous forms of engaging activity, while marking the somatic references of the trauma scene. The ability of the body to diversify its internal and external nature is an ecological practice, the study of interactions between a living organism and its environment. The body's desires are exerted throughout the

DGATA stage as unstructured entities, non-totalising heterogeneous productions that work their way through an artistic scene and a collection of artworks. An awareness of the body's stimulation and its heterogeneous desires, is enriched through contact with art materials that facilitate many different kinds of sensory engagement, as well as a studio environment that encourages experimentation beyond coping mechanisms. These heterogeneous fields of engagement travel through a client's movements, through the dimensions of the art studio, and art materials that record passages of action. Correspondingly, psychological heterogeneity is encouraged through the accumulative production of sensation and affect, that add on signification through the course of making art. Sensation and affect are engaged simultaneously within the ecology of the DGATA scene. The mutuality of desire in both mind and body are lived out within the multivalent elements of the Deleuze and Guattari inspired art therapy studio

The articulation of trauma can also be illustrated through Deleuze's analysis of Francis Bacon's art, portraying the shifting logic of sensation as a force that dismantles spatial organisation, so that the body is portrayed not as a structure, (or figure) but as a plane of intensities. 'For Deleuze, the vocation of all non-representational art is to make visible forces that would otherwise remain invisible' (Marks, 2005, p. 19). Trauma represses desire within a biological system that shapes subsequent experience. The expression of desire that leaks outside the repetitive patterns of trauma can be witnessed within the activities that correspond to the making of art, which are at the same time the escape routes into propagating new assemblages of experience. Sensations are 'a plurality of constituting domains' (Deleuze, 2005, p. 27) that point to kinaesthetic affects and future thresholds of amplitude; they are not so much representations as variations in intensity. Deleuze (2005) suggests that both Bacon and Artaud dive beneath beneath representation, interrogating trauma through their pure presence within its midst. As a consequence, 'abjection

becomes splendour, the horror of life becomes a very pure and very intense life' (Deleuze, 2005, p. 37). Rather than tracing the same complexes, a schizoanalytic cartography explores new intensities of subjectivity.

Physiological and psychological awareness highlighted through the practices of somatic psychology, performance art and authentic movement, attempt to constellate awareness in regards to structures of inhibition and conditioned responses. They attempt to put schizoanalysis into practice, a method that works its way through a collection of art works and relational elements that compose an assemblage of physical and psychological enunciation. The BwO exudes many expressions of desire that attempt to open up subjectivity through a variety of sensory encounters within different settings. The BwO moves through different kinds of life scenarios, which engage its capacities and resources in different ways. Predominantly the BwO is characterised by its flexibility, its inclusiveness of multiple desires, which can be mobilised to animate a variety of identity pursuits. Deleuze and Guattari are predominantly interested in capacity, in what the body and mind can do to open up new territories of experience. Art therapy encourages this exploration of new territory through art making. The affective outcome of art making can also be understood in relation to Deleuze and Guattari's use of the term immanence, in reference to the quality of presence attained through the artistic process. The art therapy assemblage encourages exploratory investigation, because it challenges structures of pre-conceived representation. The DGATA art therapy studio is an unusual space, a creative ecology that incorporates found objects, nature, building materials, performance props and backdrops within the fold of the art therapy experience. The improvisational potential brought forth by this assemblage of ingredients encourages experimentation, subjectivity installing itself into the realms of an environmental content that triggers the making of new sites of creative involvement.

Trauma is entwined within a maze of biological and psychological constraints. It is a territory of experience that folds in on itself, that recreates a chain of reactions. Perhaps one of the keys to trauma treatment is working with new terrain, in the form of sensation based improvisation that moves enclosed libido onwards out of confinement within a trauma scenario. The BwO invites activation on a molecular level, an animated body that is both perceived and imagined. The arousal of kinaesthetic flow at this level engages each part of the body as an entity that is vibrational to its core. The unstructured body contrasts with the idea of a whole body mass existing as a larger apparatus (Deleuze and Guattari, 2004b). Deleuze and Guattari implicate molecular intensities with the organic cellular interior of the body. It is a smooth space that stimulates changes in direction, 'due to the variability of the goal or point to be attained' (Deleuze and Guattari, 2004b, p. 528), this is the smooth non-directive space of improvisational awareness sought within somatic psychology, performance art and authentic movement. It is a potential or spontaneous space that unbinds habitual structures of movements that implicate the taken for granted body into something that no longer reacts to state memories, but becomes a vehicle in which to transform traumatic conditioning. It is a space full of tactile events and happenings that do not form full impressions, but a passing of intensities, the tactile intuitive processing of inner and outer psychological and physiological surfaces (Deleuze and Guattari, 2004b), 'A smooth amorphous space of this kind is constituted by an accumulation of proximities, and each accumulation defines a zone of indiscernibility proper to "becoming" ' (Deleuze and Guattari, 2004b p. 537).

The boundaries of the body are deterritorialsed as they become infused with the BwO's instinct to surpass limitation in regards to inhibition. Desire is a working through of libido, the instinct not only to survive, but also to energise experiential potentials. Schizophrenic flows of desire attempt to resist trauma coding and work to develop prolific kinds of subjectivity. Art therapy documents this process of release; lines of flight are recorded within artworks that create new areas of subjectivity. DGATA composes a geography of references that do not integrate a self, but unfold relations between different artworks, that act as planes of interaction. Within DGATA the art liberates identity singularity, primarily through the potential volume of artworks that are produced and the way in which the studio is re-assembled as an additional composition. Each artwork re-composes subjectivity, by offering another site in which to interact with not only one's self but the collectivity of the world that continually mediates subjectivity.

Artistic practice can be taken into the body through developing a presence that spans a continuum of sensation. Art impacts body sensation, a fact that has been supported by recent neurobiological research into the nature of artistic vision. Art is taken into the body as a result of a functional specialisation of the brain that moves thinking in relation to movement (Zeki, 2004). Semir Zeki's research into the brain's reception of art has produced evidence to indicate that art is amassed through an accumulation of animated seeing. Understanding can be ambiguous, because seeing is kinetic, comprised from a variety of brain areas working alongside each other, which give dimension and continuity to what is seen. The accumulative nature of vision is a gathering of meaning a composite of views that are always modifying in relation to one's movements through an environment that stimulates sensations, ideas and affects. Images are in fact complex movement patterns that are not directly translatable; they are processed through a range of perceptual descriptions. An image exists as a kind of potential, a passage into cognitive and physiological processing. Art must be taken in from all angles it is an intersection of points of view facilitating lateral and creative thinking. It disrupts premeditated knowing by activating new relations within oneself and the world, by 'breaking up the familiar, disordering the expected, and acquainting us with the unusual (art) ...provides a sense of new possibilities and encourages potential adaptive behaviour when old solutions are found to be no longer to effective' (Dissanayake, 1988, p.70). Deleuze believed that painting does 'not treat the eye as a fixed organ' (Deleuze, 2005, 37), instead it disperses vision throughout the body field as an indeterminate and transitory medium of recording presence. The presence of the entire body is brought to bear upon the making of art as a means of seeing into the act of making, not just the images but the way the body enters into art on both macro and molecular levels.

Art compensates for a feeling of defenceless. The active nature of choosing art materials stimulates not only creative expression but biochemical functioning. The somatic, sensual qualities of art materials enliven the body that stores the psychobiologically attuned mind (O'Brien, 2004). It's not just the visual image that's important, but the body actions incorporated into an image.

Images can bridge the gap between overwhelming physicalemotional sensations and conscious recognition. They offer symbolic meaning and thus containment to an otherwise overwhelming experience...(I)t is through imagery or metaphor that we can consciously recognise or describe physical process (Landale, 2002, p. 119).

Perception has physiological features, the body in action teaches us what we know about the world and our place in it (O'Brien, 2004). Human biology has developed as an outcome of movement necessities; it acts as a record of movement, an inherited repository of body usage. The emotional and mental responses and the "events" of life associated with these imprints are stored within different dimensions of the body. This storing, at a physical level, most often occurs without our conscious awareness. The psyche lives within body tissue, and works along with the body in both an expanded and contracted way - cells and thoughts work together (Dychtwald, 1977). Our brains have evolved from movement, because movement is linked to survival on an evolutionary scale, 'the brain circuits used to order sequence, and time a mental act, are the same ones used to order sequence and time a physical act' (Ratey, 2001, p.

149). The brain is stimulated to move us as a developmental process towards greater capabilities (Zeki, 2004).

The decription of the brain's functioning during trauma is significant to the Deleuze and Guattari method of art therpy. DGATA encourages unconscious memories of sensation and affect to be activated within the art studio. Damasio (1999) uses the term somatosensing, to describe how the whole body is involved in simultaneously receiving information from internal and external regions of perception. What we see and feel is derived from a complex system of receptors - chemical, neural, muscular, visual, auditory, olfactory and gustatory working in a simultaneous and coordinated manner. 'No biological system has a more sophisticated capacity to make and store internal representations of the external world - and the internal world - than the human central nervous system, the human brain' (Perry, 1999, p. 9). The brain stores associations of sensory information and relates this information to specific experience. All nerve cells store information that reflects patterns of activity. 'Vividly experienced imagery, imagery that is both seen and felt, can substantially affect brain waves, blood flow, heart rate, skin temperature, gastric secretion, and immune response – in fact the total physiology' (Landale, 2002, p. 119). The brain is a living history of interaction. A composite of experience primarily derived from the senses meeting the world. 'There are no perceptions without actions' (Schilder, 1935, p. 15), perceptions are formed on the basis of being mobile, and contribute overall to cognition. People learn through moving. 'We can increase our intellectual possibilities by first recognising how we turn and move in space, how we organise the movements of our body' (Bertherat & Bernstein, 1977, p. 39). Physical movement stimulates knowledge - seeing something in one way, or from all directions, situates not only the mind but also the body. 'Every new posture or movement is recorded in this plastic schema (the brain), and the activity of the cortex brings every fresh group of sensations evoked by altered postures into relation with it' (Schilder, 1935, p. 12).

Kinaesthetic Representation and the Mapping of Expression

The art encounter in the DGATA context is one that ruptures habitual structures of conditioning, while offering ways of mapping representation across a creative plane of experience. The act of making art and installing a scene of creative engagement instigates a distribution of affects that chart regions of intensity and signification. Expression is kinaesthetic a moving process of change reflected in material and relational dynamics - art materials, environmental features and the therapeutic relationship work to amplify not only trauma circuitry but also passages into the presentation of a individual's journey into diversity. The studio space charts sites of intensity, pace, contemplation and influence. The DGATA conduciveness to a range of activity, offers the art therapist the opportunity to witness multiple activities and creative expressions that work to amplify heterogeneous locations of experience. Within the DGATA context the art therapist does not work towards a specific goal of treatment, but instead tracks the client's art therapy experiences. The way in which art therapy goes beyond language is implicated in the workings of somatic psychology, performance art and authentic movement. The essential theme being that improvisation, inherent in these methods of physical expression, is also the foundation of non-directive art making that carries the body beyond its conditioned responses, into dispersal within art materials and the studio setting. The DGATA creative experience stimulates the client into many areas of becoming. Rather than being a victim of trauma, the trauma scene and its physiological and psychological activations are intertwined within the art encounter. Trauma is not a fixture of identity, but rather a conditioning that exists alongside other images of potential. The idea is to juxtapose trauma with a collection of other art therapy representations that denote subjectivity as a transversal expression operating within many locations. Amy Curtis believes that art provides an opportunity to find significance and relevance in disparity. Collage is one explicit example of how meaning is composed from fragmentation, the juxtaposition of dispersed elements into a signifying relationship. Another example lies in the very act of making art as both an aesthetic and cathartic mechanism, derived from the body making primary contact with art materials. The serial nature of artworks created in art therapy moves the eye along in time, to growth beyond injury (Curtis, 2005).

The performative aspect of the DGATA method enacts both new sites of subjectivity as well as the affects of traumatic re-activation in the course of experimental risk taking. This is why performance art has been included as a visual arts practice that moves the pictorial representations of art therapy into the body. The non-directive scope of the DGATA approach invites experimentation; it is not a restrictive environment, but one that encourages a stirring of movement throughout an improvistional space. Authentic movement collaborates with performance and somatic psychology to denote Deleuze and Guattari's exploration of immanence, the capacity to 'be with' conditioned responses of trauma. The connections between these relations maintains a commitment to focussed attention on the revelation of movement through channels and surfaces of both floating memory and the production of new experiences that work beyond traumatic activation. Immance is a term that encompasses the totality of both trauma and the kinaesthetic awakening of movement into non-addictive behaviour patterns. The DGATA influenced art therapist does not interpret therapeutic material, but witness's productions of subjectivity (artworks) and their performance as a moving matrix. The plane of immanence is rhizomatic, always entering new territories, and new thresholds of becoming, each moment an intersection of events that implicate experience with many textures of possibility.

As a live art DGATA encourages the enactment of artworks, effectively working with conscious and unconscious processes of sensation and affect as they assist in the further development of the artwork's signification. Performance moves art therapy on into behaviour, into the practice of engaging with an artwork's possibilities through improvising with its characteristics. The artwork as a performance piece carries the creative journey further into a multiplication of affects. The art therapist witness's expansion beyond a specific location of creative enterprise (the initial making of the artwork) into a span of association that works to free up the artwork as a singularity. Rather than an isolated piece or episode, an artwork is a contribution towards diversity, another plateau or feature in a greater landscape, executed by lines and co-ordinates of flight within a studio terrain. The therapeutic intent of the DGATA method is to liberate experimentation into different routes of identity representation. To facilitate resourcefulness and resiliency, the confidence to make one's own map, to challenge limitations and addictive behaviours in favour of a moving cycle that questions totalising identity constructs. Deleuze and Guattari situate well being as a creative exercise linked with the continual making and remaking of one's self. The assurance that there is always another creative encounter ahead another perspective and opportunity to extend beyond constraint.

Shaun McNiff's (2001) use of performance art within his art therapy practice, amplifies a chain of dramatic affects. The art therapy client enacts the scene of their creative agency, improvising with the qualities, affects, and dimensions of the art therapy stage, the different relations and configuration of opportunity within the art therapy studio. Rather than using performance to develop an interpretation of the artwork, the performance practice enacts unplanned encounters that stir a freer association of affects. The DGATA use of performance attempts to stimulate the presence of the artwork within a BwO as

an execution of physical and psychological desire that does not intentionally treat trauma, but deterritorialises trauma amidst the production of a series of differences. There is a disjunctive synthesis of trauma as it changes in influence through a series of differently charged performance scences. One of the reasons improvised movement is so difficult to interpret or pin-down is due to the essence of its changing nature. The capacity to experience improvisation and non-directivity is a practice that extends somatic and psychological boundaries. McNiff works with performance so that artworks have an opportunity to be embodied and incorporated within experience. In addition to the experience of making artworks the client also inhabits their artworks through enacting them as a live visual art. The art offers developmental potential, a challenge to habituated behaviour foreclosing experience into familiar routings of experience. DGATA is mediated by the art therapist who can chart movements that are spontaneous, that move beyond limitation into diversity.

Neuroscientific research bears testimony to the fact that art is essential for the expression of developmental potential in both mind and body. Art impacts upon cognition, the brain responds to perceptions rooted in art making, setting off a chain of ideas and behaviours that incorporate the mind and body. 'Without the arts the experience of volumes, masses, figures, distances, and directions of qualitative change would have remained rudimentary' (Dissanayake, 1988, p. 67). Since both art and language operate from the left hemisphere of the brain they seek to communicate values and information important for human and collective survival (Kalplan, 2000). Art is the means by which the senses may be amplified into thought, as in 'getting the picture' of something. Art's role in evolution has been to facilitate perceptual understanding and survival through cognitive mapping (images or symbols substituting action). An image is a convenient way of documenting experience because it is easily stored as a condensed memory cue, associated to action and meaning (Denis, 1991). Art

represents the mapping of a moving subject, one that is not fixed to one location, but instead re-configured through an adaptive or flexible improvisation of identity that navigates more than one area of expression.

When Freud suggests that 'biology is truly a land of unlimited possibilities' (Freud, 1995, p. 624) he is imagining the body as a site where anything can happen. Biology is not static. Events enter through sensory systems into flesh and cognition. The body and mind act as a feedback loop, and also engage within the dynamics of language. Psychoanalysis as the 'talking cure' places a special emphasis upon words, and yet words are implicated with sensation, with the unconscious signification of kinesthetic meaning. Physicality implicates language and also enters into the practice of art therapy its desire is an energetic process that participates with sensory systems that are also engaged with the making of images. Movement is a contributing theme within the language of art therapy, operating across a continuum from an almost indiscernible level, to body gestures and larger scale movements (Caldwell, 1997b).

Andrew Strathern (1996) believes that the body generates perception and thought processes from which to comprehend the world. Neurologists are discovering that the 'cerebellum, which coordinates physical movement, also coordinates the movement of thoughts' (Ratey, 2001, p. 148). The relationship between cognition and action is based on a brain that moves; behaviour is the thinking out of action sequences that link ideas to physical acts. 'The ability to link information from motor, sensory and memory association areas is crucial for thought processing and the ability to contemplate and plan future actions (Ratey, 2001, p. 176). Freud believed that our instincts lie on the border between mental and physical awareness (Laplanche and Pontalis, 1988). Concepts are in essence neural categories derived from physical actions. This is

why art is so important, it's action oriented, the body moving new parameters of experience, bringing to bear new ideas and metaphors of understanding.

Even when the specific capacities of the body are, so to speak, played out, when a perceptual movement apparently comes to an end in the presence of the object sought, there still remains the sense of something eluding one's grasp. Perception reaches forever beyond itself (Pietersma, 2000, p. 140).

Maclagan (2001) has underlined the significance of the interplay between articulate and inarticulate forms, as an open relationship between symbolic and imaginative states of consciousness, with each reference operating metaphorically within the space of its opposite. In fact, if we consider that we are unaware of how the symbolic order of language is structured (or how it came about), it then resembles the unconscious. This is why describing art is so difficult, because of the many kinds of affects and perceptions it evokes, which can only be approximately spoken about. Lakoff and Johnson (1999) believe that the ability to comprehend multiple aspects of meaning is based on the recognition of metaphors, which coordinate a relationship between physical experience and cognition. Sensorimotor inferences derived from movement, perception and spatial orientation infer not only a physical orientation but a psychological one as well. These trajectories are involved with our own internal situation and its projection into the world around us (Lakoff and Johnson, 1999). 'The same neural and cognitive mechanisms that allow us to perceive and move around also create our conceptual systems and modes of reason' (Lakoff and Johnson, 1999, p. 4). The body exhibits both intentional and unintentional spontaneous responses. Thought, feeling, and movement are in this case metaphorically integrated to offer a meaningful description, or 'internal systematicity' (Lakoff and Johnson, 1980, p. 17). Therapeutic language, to be inclusive of different perspectives, needs to embrace sensorimotor characteristics derived from movement, perception and spatial orientations that infer physical and psychological relationships. These trajectories of meaning

incorporate psychological and somatic planes of reference within metaphors that do not interpret behaviour, but instead offer inroads into the interactions between physical and psychological experience. The witnessing capacity of the art therapist mediates the indefiniteness of language to describe the significance of the client's therapeutic enactment. The client's phrase 'I'm not going anywhere' may signal a static state, and yet this comment can be contrasted with the art therapist's observations regarding the travels of the client making artworks throughout the art studio's dimensions. Artworks and the studio scene are imprinted with the client's varying locations, how they have moved and created their own investigations and experiences within the delineated space of art therapy. 'Rather than being rigidly defined, concepts arising from our experience are open-ended' (Lakoff and Johnson, 1980, p. 125). Since 'words have more than one meaning, expressions we use can often be taken in a number of different ways' (Fink, 2000, p. 23). Ambiguous representation enters into the DGATA scene as the fostering of connections between desire and the capacity to improvise within subjectivity. Rather than being stigmatised by trauma, the capacity to extend experience beyond the implications of trauma does not privilege trauma as a totalising discourse, but works to disperse the energetic charge and activation of trauma across creative encounters that experiment with its implications.

Lacan believed that 'the very foundation of inter-human discourse is misunderstanding' (Fink, 2000, p.22), words operating as markers for a variety of possible ideas, that engage subjectivity as a conglomeration of labels and meanings. Since 'words have more than one meaning, expressions we use can often be taken in a number of different ways' (Fink, 2000, p.23). Words are ambiguous they do not absolutely declare a definite relationship between representation and meaning. As a system, language is the juxtaposition of word components, an accumulation of intent, which attempts to approximate the meaning behind a communication theme. Language is an inherited symbolic

system it illuminates conceptions about the world according to associations structured through a collectively derived code. Words are never equipped to adequately present personal material, that which moves and changes in excess of words (Sheets-Johnstone, 1999). 'Language breaks up rich, complicated global experiences into relatively impoverished categories' (Sheets-Johnstone, 1999, p. 504). The symbolic order resides in an ordering of language that supports and instills structures. What lies beyond articulation representation in the symbolic order, falls between the borders of grammatical rules and arrangements. It engulfs the subject as a threatening but also fascinating other, rupturing authority by challenging hierarchies discrimination. By re-making the use of given meanings in language, people change their involvement with the world and with each other (Loewenthal and Brunner, 2003). The primary function of society is to 'codify the flows of desire, to inscribe them, to record them, to see to it that no flow exists that is not properly damned up, channeled, regulated' (Deleuze and Guattari, 2004a, p. 35). Libido as both a psychological and somatic desiring infuses the social field with unconscious flows. As a desiring phenomenon the BwO works to transgress blockages, by bypassing the limits of words that impede movement. It exists outside of metaphor as matter itself (Deleuze and Guattari, 2004b). Desire operates beyond prescriptive measures that instigate a stratified ontological sequencing of mind and body territory. The BwO does not operate according to a central organising principle it rather expresses physiology as a kinaesthetic exchange with the outside world. Language propels us to move into the world as coherent and consistent individuals. According to Gergen (1992) when we enter into language, we enter into social convention. Language depends upon socialisation; it relies on particular kinds of values, rules and procedures, of how things fit together, if people don't say things the 'right' way, they quickly fall outside social convention. The fluidity of the BwO does not integrate well into moulds of language that attempt to make reality appear more solid and agreed upon as a linear trajectory. In reality becoming is a series of movements that circulate around representation - language does not determine a body it elaborates upon its provisional representation open to reassembly.

The ability for the art therapist to witness non-judgmentally arouses the client's recall. The capacity to hold together past and present increases the capacity of the individual to both discriminate and mediate between the two. 'Developing or reconnecting with the facility for dual awareness enables the client to address a trauma while secure in the knowledge that the actual present environment is trauma-free' (Rothschild, 2000, p. 131). Generating body awareness in the here and now (indwelling), helps in the goal to separate trauma experience from present reality. The goal of ensuring psychosomatic health is reliant on facilitating a means by which the client can experience their physicality as non-threatening. Totton (2003) refers to this reclamation as 'affect attunement', the development of a somatic empathy or resonance that flourishes the generation of spontaneous feeling. This free circulation of energy is compensatory for clients who have reduced their existence to survival strategies or who are utilising dissociation as a coping mechanism (Turp, 2001).

Dissociation can be an effective way to continue functioning while the trauma is going on, but if it continues to be untilised after the acute trauma has passed, it comes to interfere with everyday functioning. While providing protective detachment from overwhelming affects, it also results in a subjective sense of "deadness" and a sense of disconnection from others (van der Kolk, 1996a, p. 192).

Trauma gives rise to dissociated experiences invading consciousness in a piecemeal and disjointed fashion. These experiences may hold a particular emotional tone, or set of sensations, but there is no way to relate them to an overall meaning sequence. When the cognitive aspects of the experience are missing there is little or no narrative to correspond with anxiety, panic, numbness, etc. within a memory sequence. Consequently, trauma treatment

relies on the body to assist in the integration of symptom and context. Through working with body awareness and movement, therapists are able to access information by working with presenting sensations. Body awareness acts as a gauge to monitor the effects of therapy or degrees of activation and dissociation. Initially breath may activate awareness to bring attention to those areas of one's self that feel unresponsive, or injured. This is especially useful in the case of trauma, as breath is usually suspended and contributes to an immobilisation of feeling (Conrad, 2005). Accessing sensory numbness through tracking somatic experience also brings forth images. 'Considering pain as an image that comes through the body allows us to consider different solutions' (Allen, 1995, p. 125). One of the aims of trauma treatment is to help a person move beyond a trauma narrative, into different kinds of descriptive themes that diversify the scope of personal encounters into a poetic analysis of words, movement, image and process. The avoidance of 'at risk' encounters, the fear of reactivating arousal or depression by entering into unknown situations, psychologically transpires into a limitation of choice - 'better safe than sorry'. Disruptions to a person's equilibrium, or sense of routine can be chaotic because it requires a readjustment of learned behaviours. A kinaesthetically attuned art therapy tracks shifts in this readjustment, by providing a context in which to experiment with the body 'at risk'. This is the spontaneous, freely associating body that moves its semiotic or impulse ridden body beyond the structures of language. The transgressive nature of trauma is not unlike being reduced to 'zero', as a result of being disenfranchised within the structures of language. The unspoken quality of the semiotic resonates with the affects of trauma (Kristeva, 1982, 1986). The semiotic is the unconscious body as a continuum of sensation, it disrupts physical armature by working to defeat the territorialisation of trauma.

Since art materials are sensation based, they revive sensation based body experiences. Fabre-Lewin (1997) points to the development of body

consciousness, as the means by which to heal the pain of both psyche and soma. 'In rediscovering physical sensations, intuitive impulses and the physical process, we can reclaim the capacity to heal naturally from suffering via the emotions' (Fabre-Lewin, 1997, p. 119). Art transports desire, it can move along with the fluidity and tactile nature of art, and in so doing engage and integrate with its malleability. Art materials can capture micro-movements i.e. slight tremors and vibrations that herald the slow release of the body or the letting go of defenses. The unfettered nature of the body as an organic flow inhabits a plane of nomadic intensity, a pitch of heightened energies that leaves an imprint of activity. This image is a new plateau or state of desire as it disentangles from anxiety; it is a re-configuration of stasis into a charged state of *schizo-genesis* or the awakening of multiplicity. Improvisation is unconditioned movement that creates something new, it is a mode of production that generates new experiences of what a body and mind can do.

DGATA and Trauma Treatment

The boundaries of trauma treatment within the DGATA model establish therapeutic practices that respect the unique agency of each client to use art materials and a mediating space to record narratives pertaining to both traumatic injury and recovery. The DGATA studio is bestowed with both two and three dimensional mediums of artistic expression that facilitate a client's representation of psychological and somatic influences. For example, a client can choose to work on the floor, create an enclosure, perform in costume, sing, or draw on the wall, as methods of creating a variety of creative territories. The change from one activity to another is determined by the client, and witnessed by an art therapist who charts the client's path within an environment aimed at stimulating new responses. The DGATA model is imbued with choice; there is consistency in its ability to offer different kinds of art materials (introduced

throughout the course of different art therapy sessions), so that the client is regularly responding to incremental change. Particularly found objects, natural materials and moveable props such as pillows, chairs and tables can work to inspire clients to challenge fixed structures. DGATA offers an opportunity for clients to work non-directively, the art therapist does not direct how the environment is executed by their client, rather they work to generate opportunities for the client to improvise with materials that stimulate the recovery of spontaneity through experimenting with different spatial assemblages. Traditional art therapy materials (paint, paper, clay, pastels and markers) if not supplemented by additional creative resources can become predictable components of the art therapy space. The ambition within DGATA is to arouse desire as a means of animating psychological and somatic capacity, to mediate injury and loss through different routes of signification. Deleuze and Guattari underscore the fact that above all life is unpredictable and subject to change. The generosity of the Deleuze and Guattari method is to affirm discovery and encounter, to awaken unconditioned responses, and challenge repession. By supplying many surfaces upon which to signify impressions, the client is offered an opportunity to override their conditioned bearings, in order to entertain diversity. The DGATA art therapist is not seeking out pathology or a wounded history, but tracing the ways in which the client is generating their own choices. Open-ended explorations of the client's creative work do not presuppose the influence of traumatic injury, as the *only* trajectory of therapeutic work. The DGATA is not pessimistic, but believes in the innate creativity of each person to seek out new opportunities in their lives beyond a particular therapeutic issue or diagnosis.

It is this emphasis upon productivity that designates the distinctiveness of the DGATA approach. Art therapy production influenced by Deleuze and Guattari ensures that the client is not alienated in their relation to materials and the art therapy environment. The art materials are an extension of the therapeutic

relationship; they are the means by which to communicate with the art therapist who includes additional mediums of expression as opportunities for therapeutic communication. The DGATA studio multiplies possibility but maintains the structures of therapeutic responsibility. There is thoughtful preparation before each client encounter and a consideration of the creative resources required by the client. The DGATA space continually includes new expressive ingredients that encourage further experimentation by the client. This is not to say that the space is completely different in appearance, each time the client enters. Rather additional objects, props and art materials (i.e. oil sticks, sketch books, sealing wax, mud) refresh the space and offer the potential for different kinds of engagement. They stimulate new responses and affects for the client, who gradually diversifies their creative experience throughout the entire studio, overcoming any anxiety or inhibition imprinted by traumatic injury that limits the potential of physical and psychological capacity. Non-verbal communication is as significant as the client's language, in fact the movement of the client is carefully witnessed in order to chart both their organisation of defenses and new approaches to working through the DGATA studio. The Deleuze and Guattari influenced art therapist is not urging the client to breakdown their defenses or to partiipcate in a kind of personal anarchy or Marxist revolution. I am a 'cautionary figure for the peaceful circumambulations of all', writes Guattari (2006, p.310). The DGATA method establishes therapeutic relations geared towards safeguarding the potential for the client's life to unfold differently. The Deleuze and Guattari method does not impose activity upon the client, but rather waits for activity to unfold at its own pace. In this sense DGATA is patient, attending to the complex details of the client's behaviour throughout the session. This attention aids in the exploration of nonverbal nuances that communicate both the territory of trauma and its processing through mediums of creativity that work to dislodge trauma as a despotic signifier.

Rather than agitate for the overthrow of the client's boundaries of safety, DGATA supports a client's resilience and capacity to produce new affirmative experiences. Guattari redefined Lacan's use of the term jouissance in reference to the release of both excess stimulation and bodily tension that operated within extreme states of traumatic activation. Guattari (2006) believed that *jouissance* sought refuge in small differences of representation; the incremental release of holding patterns, transacting the flow of repressed desire. DGATA regularly reviews previously produced artworks in order to investigate how these artworks navigate flows of spontaneous response. Each art therapy artwork and their expressive enactment are significant within the client's collective enunciation of subjectivity. The goal of the DGATA review session is for the client to develop an installation of artwork productions. This installation generates a map of physical and psychological territories travelled. Artworks are arranged in the client's own formation upon studio furniture, the floor space and walls. The client may also embellish the review session with personal objects brought from home, (i.e. photographs, journals, artworks and memorabilia) that can be interspersed between or around the artworks presented. The art therapist explores the additional associations that emerge as a result of the artworks being assembled in this way. The client may then choose to animate this assembly through performative enactment, which may include sound, movement and text to further amplify associative themes that also include an improvisational engagement with the materials and their stimulation of the BwO.

The significance of including information in this chapter regarding the bioenergetic patterns of trauma, in regards to flashbacks, state memories, and periods of either hyper-arousal or numbness is to demonstrate why a client's sense impressions are significant within art therapy. Tracking how the client accesses different dimensions of the studio space, uses particular art materials (and avoids others), as well as observing periods of either dissociation or intensity collects information pertaining to the trauma trajectory. These qualities of engagement within the DGATA space can be explored verbally upon the completion of art making with both the client and art therapist discussing potential links to how trauma has been stored or signified within both the mind and body of the client. To the extent that trauma unconsciously 'floats' or reenters current experience for the client, DGATA can attempt to anchor the client's affects in the materiality of the room. To this extent it is fruitful to review the session's course of events, through not only words, but to actually re-visit sites of art making within the studio, with both the art therapist and client walking to these areas of creative encounter. At these sites of art making, photographs may be taken in order to document sites of activity. These photographs can be subsequently incorporated within the course of review sessions, so as to record the importance of attending to the relations of artistic production in regards to materials, space and their associations to the art therapist who keeps track of the client's activities and associations.

The DGATA space is expressive, and imbued with ethical practice. Guattari tirelessly strove to challenge discrimination against mental health patients. He believed that mental illness should not be an imposition of psychoanalytic narratives, but rather a situation in which to investigate the activities of symptoms in process. The DGATA method does not control the means of creative production, but allows the client to create at their own pace. Guattari's work at the La Borde clinic challenged the idea of a 'despotic signifier' influencing the direction a therapeutic narrative should take. The DGATA approach does not impose a template of interpretation; it rather facilitates a means of creative production that does not alienate the client's sense of personal agency. Deleuze and Guattari were most likely influenced by the Marxist usage of the term 'praxis' to denote the importance of sensory-based experience as a remedy for estrangement. Art therapy's inherent involvement

with 'making' is a praxis that encourages the client to challenge physical and psychological relations that constrain expression (Guattari, 2006).

The visceral affects of the DGATA practice of art therapy opens up biological and psychological processes of desire implicating traumatic experience with changes in the direction of their conditioned responses. DGATA's spontaneous compositions work to treat trauma by evoking the potential of creativity to craft additional channels of expression. Rather than re-tracing the map of trauma, DGATA encourages the making of new identity territories, new horizons of experience that change the shape of imagining in one's life. Rather than feeling 'stuck' in one place, the activity of making and performing art enlarges capacity for the client, encouraging their pursuit of new opportunities, as a result of a greater aptitude for experimentation.

Summary

The significance of the DGATA stage is its incorporation of not only art materials, but also environmental props that stimulate engagement. The mediating presence of the art therapist witnesses the client's passage through collective enunciation, the diversification of subjectivity generating artworks and activities throughout the studio area. The art therapist's attention to the details of the art therapy experience enhances the client's somatic and psychological consciousness in regards to the spontaneous activation of affects, which offer information regarding feelings, memories and cognition.

Subjectivity is a system of exchange and encounter that utilises the body as a medium of processing both injury and recovery. An art therapy image is an immediate and active enunciation of physical and psychological response. The art therapist's therapeutic empathy can bring attention to bear upon the client's

physicality, propagating a move beyond habitual patterns of regulated feeling. There is a vital link 'between memory and the moving body, it is as if certain memories are stored kinaesthetically and can best be retrieved through the movement of the body' (Chodorow, 1991, 115). If attention and spontaneous movement can be brought to bear upon the nature of traumatic symptoms 'without trying to change (them), the process of denial and repression may be reversed – (and) a meaningful symbolic gesture may emerge' (Chodorow, 1991, p. 122).

While making images in art therapy people resonate with what lies outside of language. Language is deficient when it comes to describing simultaneous evocations of sensing. 'Language is not transparent (it) communicates less than one desires" (Bochner and Ellis, 2003, p. 508). Art captures what cannot be put into words, the essences of thought, feeling and sensation that pulsate through a piece of artwork. 'Art can express not only ambiguity and ambivalence but also tension and contradiction — inevitable characteristics of our world and of the psyche — that tend to be obscured in our quest for comfort and certainty' (Sclater, 2003, p. 623).

Chapter Six

Conclusion:

Deleuze and Guattari Art Therapy and Assemblages of Desire

Deleuze and Guattari offer diverse possibilities for re-composing existential corporeality, adding something new to impasses that stifle expression. Their aesthetic paradigm, 'Creates new modalities of subjectivity in the same way that an artist creates new forms from the palette' (Guattari, 1995, p. 7). DGATA encourages a collective enunciation of subjectivity each heterogeneous element of its assemblage is a potential trigger for the release of psychological and somatic desires that enters into materiality. Both the artworks produced within the DGATA studio and the environmental surroundings of art therapy encourage the enactment of affective change, expression over-spilling individual experience into kinaesthetic currents (Massumi, 2002). The art therapist offers many opportunities for creative practice that ignite the client as the artisan of his or her subjectivity. DGATA beckons the client to experiment with the art generating opportunities included within its interior. The haecceity of the DGATA space has simultaneous components that encourage the generation of new experiential planes, its landscape is charged with forays into sensory stimulation that facilitate fresh encounters with identity.

Deleuze and Guattari affirm the opening up of new fields of behaviour each art therapy image is catalytic capable of producing new areas of potential growth. DGATA re-routes self-definition, each expression is not autonomous within itself, but a transversing of a landscape. DGATA includes many material and environmental features upon which to enact subjectivity as a performative travel that maps as it proceeds. The ecology of the DGATA studio generates cartographies of identity implicated within the interactions of creativity. It is a space of dispersal and conductivity, one where desire can be worked through the surfaces of one's being, and through relations with material objects, environmental surrounds and the art therapist. The ingredients of the DGATA approach are all energetically charged they stimulate activity and are also impressed upon by the effects of creative productivity. The experimental and unconventional nature of the DGATA setting facilitates the crossing of thresholds, it is an ecology of influences that moves perceptions about one's self and world. The fundamental theme within Deleuze and Guattari's work is ontogenesis (Alliez, 2004), engaging within thresholds of being that occur within the course of new life experiences. Each new artwork within the practice of art therapy is an engagement with ontogenesis, another opportunity to consider previously unknown affects and unconscious energetics. DGATA encourages an artistic heterogenesis of consciousness that includes more dimensions to an essentially rhizomatic narrative (Alliez, 2004). Art produces new paradigms of subjectivity, it prompts us to think differently, to sense life anew, a practice that dismantles conventional ways of thinking (Parr, 2005b).

DGATA's lines of flight are pathways of creative endeavour that criss-cross the studio space interacting with art materials, props, and the therapeutic relationship along the way. Lines of flight are movements between primary points of subjectivity and signification.

Art makes possible, it enables us to broaden our horizons and understanding, sensitising us to our own affective dimensions in relation to the world as a whole (Parr, 2005b).

DGATA attempts to break the circuitry of traumatic activation and add on more conduits to subjectivity, so that sensory activation has many channels of expression. The aim of somatic psychology, performance art and authentic

movement are to locate the body as a 'live art' on the edge of nature and culture; the body executing psychophysical attunement within a therapeutic practice that resonates with sensation and affect (Bloom, 2006). These mediums of kinaesthetic investigation bring awareness of the body as it imprints upon materials and environment, enhancing an art therapist's capacity to take more of the client in, to see within the art of art therapy the entire workings of an assemblage of ingredients responsive to internal and external stimuli. The BwO is an entry into the potential of what a body and mind can do. The work of somatic psychology, performance art and authentic movement endeavour to extend awareness into more physical terrains of sensation, engaging many partial enunciations of the body as zones of desire seeking recognition. The art therapy image brings together accumulative expressions of movement, ideas and affects, as a provisional summary of contingency.

DGATA facilitates expressions of growth into new territories. It interrogates networks of personal and social relations bringing together a composite of differences. The essence of schizoanalysis is not lack but the rhizomatic idea of regenerative being, an ontological immanence that is alive with expressions of subjectivity as possibilities rather than identifications within selective strata of social and intra-personal experience. The concept of schizoanalysis incorporates breadth, flow, change, experimentation and risk. It is a non-stratifying identity that seeks to encapsulate more, it does not exclude experience, it characterizes a subjectivity open to learning. The term schizoanalysis challenges structures of limitation, opening into nomadic terrains of identity association. Schizoanalysis is not confined to verbal expression alone, it is not solely a talking cure, but a kinaesthetic expression to activate life's fluxes and desires to break away from routines that feel inhibiting and stale.

Deleuze and Guattari's aim is to challenge the idea of selfhood as a tangible enduring entity, along with the institutionalisation of the self template within

developmental stages (most notably the Oedipal complex), that over emphasises the implications of early childhood conflicts within a 'mommydaddy-'me' triangulation or the compulsive return to the 'family romance' (Lichtenberg Ettinger, 2002b). Deleuze and Guattari issue forth a bigger picture of influential relating, that does not discount the fundamental significance of 'mommy and daddy', but adds on other networks of meaning, to extend the potential boundaries of human development into a world network of people, ideas, communities and contexts that enlarge a range of subjective referencing. Deleuze and Guattari refuse to seek a single explanatory paradigm, a single regime of cause and effect, as in the case of reducing adult experience to infantile precedents. They do not recount adult experiences soley within retrospective narratives, but incorporate an adult's early life in terms of its affects, or making in the present day. It is psychoanalytically infused routines of parental reminiscence that Deleuze and Guattari believe reinforce lack rather than creation. This is one of the many links their work has with art therapy, as art therapy facilitates the issuing forth of new images of subjectivity each a different production of both creativity and meaning that do not symbolise the past, but map forms of motion and territories of trans-formation (Grosz, 1994).

A rhizomatic art therapy approach interrupts routine, reactive patterns, and psycho-somatic habits that residually live on past traumatic occurrences. It observes the details of behaviour patterns and the manifestations of lines of flight that improvise with flows of new postures, positions, impulses, and experiments in spontaneity. Art therapy helps to release the tensions of stifled creativity that also limit choice and opportunity. Somatic psychology, performance art and authentic movement facilitate the letting go of controlled responses that manage risk and anxiety. They gradually re-organise defensive reactions, by allowing for a release of impulse and unpredictability. Art materials can capture subtle micro-movements of physical and psychological contents. The imagescape is a scene for the art therapy event, an engagement

with art materials, a studio space, the therapeutic relationship, and a range of social influences. The assemblage scene can be diagramatically followed by mapping desire upon art materials and studio objects. The body performs an entire accumulation of ingredients that informs an assemblage or rhizomatic node of growth. The whole scene, rather than the artwork alone is a cartography one to be witnessed in its entirety, and returned to in the context of art therapy review sessions, that reflect upon a series of previously produced artworks.

Thus, an image cannot be read but travelled within a mapping out of ideas and sensations that are accumulative rather than reductive. The art therapy assemblage is a map of desire that holds both surface and depth together within a smooth interactive space that Deleuze and Guattari (1994) have referred to as a plane of immanence. The plane of immanence invites openings into ideas and relationships that are not definitive but creative movements traversing concepts that expand rather than restrict compositions. It is an example of a 'heterogenetic ontological consistency' (Guattari, 1995), inclusive of many different features or configurations of subjectivity, which travel along a plane of references or a neighbourhood of associations (Deleuze and Guattari, 1994).

Deleuze and Guattari's theoretical concepts have irregular contours that resonate and proceed into other junctions of ideas and expression. Their idea of a concept is a resonating chamber for multiplicity; it is made up of a series of events or assemblages that are experienced as movements within environments, objects and relationships. Images are culminating points or plateaus along a plane of immanence that represent both verbal and non-verbal phenomena. Deleuze and Guattari dismiss the dichotomy between consciousness and unconsciousness and instead situate these terms within a plane of experiences that are felt, moved and spoken about. The image

represents an engagement of both verbal and non-verbal expressions operating as an outcome of the interplay between mind and body within a therapeutic environment that interrupts, but does not dismiss day-to-day living within a larger social context. Deleuze and Guattari's therapeutic philosophy underlines the significance of activity and production. By continually making new sites of expression, a collective enunciation of subjectivity breaks repetitive inhibitions and recomposes psychology and corporeality (Guattari, 1995). Guattari saw his work with Deleuze facilitating different ways of seeing and making in the world, a way of being in and out of different kinds of territories that make ontology kinaesthetic. Re-routing how a person sees their world and moves within it, generates the development of additional living spaces or coordinates of relating. Rhizomes increase their volume by way of detours into new dimensions, adding on new territories of life force. Art therapy assists in the production of these new territories and extensions, each artwork a partial vector of subjective expression. Guattari considers the ongoing creation of subjectivity as an aesthetic paradigm that is not solely personal, but acts as an expression of living within variations of collective representations that are parts of the subjective scene. Subjectivity is not attached to one identity or position, but rather accumulates relative perspectives, carrying a momentum of creating in the world (Massumi, 2002). Subjectivity can be expressed within a variety of contexts that extend different partialities of subjectivity's collection of ingredients, so that the idea of a relational matrix space is a collaboration of internal and external parts (Lichtenberg Ettinger, 2002b).

Sensation exists at the threshold of nature and culture, as a discursive body that occupies both real space and potentiality. The corporeal schema of the body denotes different kinds of identities that perceive differently within different kinds of environments (Richardson and Harper, 2002). Identity can make contact with different locations, it exists as a kind of destabilised tactile expression, dispersed amongst a series of images (Becker, 2003).

Schizoanalysis extends *outside* the art therapy studio in its interaction with contexts that implicate polyphonic relations, for example technological, familial, civic, natural, artistic, work and lifestyle practices that enlarge the scope of identity imagery. The contemporary cultural surround of art therapy has re-cast the image into an imagescape, a complex set of interactions that constitute everyday life within networks of images that mediate people and environments (Burnett, 2005). Globalisation has proliferated and complicated perception across a greater cultural landscape, human activities are enhanced through mediums of communication that proliferate images upon a wider scene of potential engagement. The pervasive presence of narratives of every sort told through the multiplicity of shapes and forms of modern media far exceeds the conventional boundaries of human conversation and interaction' (Burnett, 2005, p. 4).

Within a multiplicity of narratives subjectivity is a transitional medium of exchange within enlarged social relationships that also include virtual space. Image spaces invite personal encounters, they are ecological phenomena, forming environments in which people live (Burnett, 2005). The journey through image environments engenders an accumulation of relative perspectives situated as a series of plateaus, assemblages or sites. This accumulative capacity is also apparent within art therapy images working as a series of associations. Within a Deleuze and Guattari context, these images are not reducible to loss or wounding, they are productive and energetic collaborations between mind, body and desire issuing forth additional perspectives. Expression is not a self-defining container, its 'impulse travels through a chain, creatively changing forms along the way, passing between content and expression as is crosses gaps' (Massumi, 2002, p. xxvi).

The body travels through art materials and movement sequences within a designated art therapy environment/studio and in relation to an art therapist

who maps their responsiveness and participation within the enactment of the art therapy event. Deleuze and Guattari conceive the BwO as moving through different kinds of surfaces and affects, it is a medium of improvisation working with sensations and desire and an intelligence that operates in relation to intuition. It is the capacity to explore ways of moving unstructured by planned or conditioned styles of behaviour. This is the random, nomadic, molecular body seeking the expression of its many surfaces, the body as a blank page uninscribed with intentionality and classification. The body as a meeting of nature and culture, does not occupy a singularly discursive position but one that circulates through different kinds of biological, familial and societal circuits. Translated into therapeutic practice, the bodily expression of emotion, feeling and efficacy is in continual production throughout one's life span surpassing references to one's family of origin (Grand, 1998). The significance of extrafamilial factors (the influence of diverse inter-personal relationships, environments and the role of media and culture) implicates one's relationship to the body. Psychoanalytic emphasis upon early childhood is in itself a social construction ingrained with various ideas about good parenting and proper development (Grand, 1998). Childhood itself does not occur exclusively within the nuclear family, it is rather a relationship to a social surround that continues throughout life, 'bodily experiencing puts us in a different relation to ourselves and other people and to both the social and natural surround' (Grand, 1998, p. 190). The plane of immanence carries virtuals, 'not something that lacks reality but something that is engaged in a process of actualisation...' (Deleuze, 2001, p.31). The plane of immanence is a road travelled through different geographical positions. It freely associates not in accordance to psychoanalytic iconography, but engages in thresholds of experiences that are varied, activities where subjectivity is expressed and engaged.

The BwO is not infused with linguistic signification enclosing and marking its essence. Schizoanalysis is not a talking cure but a composition of identity

references that challenge repetitive or habitual worldviews. The BwO is a capacity approached through Deleuze and Guattari's influence upon non-directive art therapy practices that open up the art therapy space as a performance installation. Within this space are enacted psychological and physiological surfaces that express a responsiveness actively making connections to its environment (Grosz, 1994). Deleuze and Guattari do not believe the body is a totality or structure but a medium that moves subjectivity into relationships that are simultaneously within and without but not inherently part of a signifying chain that reads meaning into bodies and their behaviour (Grosz, 1994). Within DGATA, subjectivity operates as thresholds of emergence. Subjectivity is not singular but a flow and a capacity to become, a feeling of connection and influence that includes the distortions, illusions and wonders of living (Grand, 1998). The mind and body operate as a conduit of collective ideas that carry subjectivity across an imagescape where new compositions are always being developed.

Each DGATA session is an event, a performance towards a different plateau that acknowledges many different ingredients upon which the session performs its travel – images, sensations, movements, sounds, enactments, words, the studio environment and the cultural surround of art therapy - are all significant routes into meaning references that are not conclusive but exploratory. Deleuze and Guattari encourage exploration and continued learning, they do not look for life's meaning nor do they attempt to resolve issues or heal wounds. Their emphasis is not upon psychologising the individual, but exposing people to more life experiences. Subjectivity is understood in terms of its production, what it can do/perform and its capacity to change. Expression is always on the move encountering new edges/depths, speeds and intensities of experience, different thresholds of relations that counteract repression (Massumi, 2002). Each image or artwork is not solely an entity unto itself, its influence can be situated within enactments of performance that animate artworks' collective

energy (as in the case of art therapy review sessions). Art therapy artworks do not decline in their significance or terminate, they keep on living. Rather than being disposed of, they are re-territorialised (re-situated amidst other artworks and enactments) in the course of ongoing reviews and reflections with the art therapy client, the client's art therapy assemblage is always in the making. Within a DGATA approach, art materials and artworks are re-negotiating, mobile and in process, they do not conclude or resolve issues but exchange and re-charge discovery. Narratives are dispersed across an enlarged storyline that does not 'find an ending', but instead becomes recharged in newly created circumstances. This is a plane of immanence stressing the significance of entering into life as a series of ongoing events/compositions.

DGATA bestows confidence, the capacity to be non-directive to challenge habitual responses, and engage more actively in perception working to create something new. Each art therapy image is a 'wake up call' to a variety of bodily, psychological and social intensities that de-regulate routines of repressed affect and feeling. Deleuze and Guattari are not concerned with what assemblages mean, but how they work (Jordan 1995). This is why desire is implicated with the nature of production, the making of something new. This also extends to art therapy as an enactment or performance where the client and art therapist 'explore and constitute...the questions and answers, the discourses, of identity' (Pilgrim, 2001). The anti-reductionist quest of Deleuze and Guattari's ideas regarding subjectivity re-constitute one's field of inquiry within the dynamics of image making. Deleuze and Guattari's use of the term machine is implicated with the idea of production, which evokes the complexity of variables that connect identity as a network. Their idea of a machine is a device with moving parts, a complex system structured so as to execute the subjective apparatus.

Machinic production is invoked to access the extreme complexity of contributing factors and the enormous variety and variability of connectivity. Factors contributing to the production of subjectivity will not be limited to biological arrangements, familial circumstances and

social milieu, although all these will be included. Technology, media, art, institutions, machinic encounters of all kinds must be seen to have an active role in the production of subjectivity. Machines of extreme diversity, not simply scientific or technological machines, but desiring-machines, aesthetic or literary machines, organic and inorganic, corporeal and incorporeal, all contributing, all making their effects felt in varying degrees of intensity — on the basis of this machinic background subjectivities are produced. (Arnott, 2001, p. 2).

Deleuze and Guattari implicate production with connectivity and multifarious influences. DGATA temporarily suspends a person's identity constructs, so as to incorporate the moving through of different kinds of images that enact potentialities, compositions with effects yet unforeseen (Arnott, 2001). The BwO involves the movement of matter, not in a functional way (i.e. movement that achieves some intended purpose), but a series of affects that demonstrate a qualitative level of intensities and flows (Schroeder, 2005). The qualitative level of intensities and flows is a co-relational experience between art therapist and client. The art therapist's witnessing is not distant nor objective, but an immediate and engaged viewing that employs a shared processing of bodily material. The art therapist's body is compelled to look, not from the perspective of a whole entity, but as a flow of intensities derived from its constituent elements. Art therapy images are in essence co-created works, the art therapist participating in the art making endeavour by way of their embodied and psychological presence as a contributing context for the client's art making. The client's movement through art materials is an embodied intensity of amorphous affect, a conduit of desire that transforms these materials into a shifting interface between subjectivity and the world. The client's body within art therapy is both subject and object, a depository of familial, societal and desiring influences. The art therapist is exposed to sensations that go beyond their own everyday perceptions and opinions. Deleuze (2005) believed that sensation was at the core of art making practices, not as an essentially emotional material, but as a felt physiological intensity that heralded the production of ontological significance (Bonshek, 2003). The art therapy scene is infused with the body's materiality, its spontaneous and unconditioned encounters with signification that go beyond the linguistic signifier. Schizoanalysis does not limit itself to the individual client it includes the production of the therapist. The catalytic nature of art therapy is trans-subjective a relation between artist (client) and viewer (art therapist). Art is concerned with new modes of existence that are pluralistic (Massumi, 2002).

Desire performs a body on the threshold between nature and culture, the actions of a spontaneous creating body proliferate capacity (Grosz, 1994). The surface affects of art therapy (the way the body handles art materials and environmental props and moves within various zones of activity), also engages the art therapist as a point of reference around which the client circulates. Rather than being interpreted or written over through reductive templates, the BwO is approached through the workings of somatic psychology, performance art and authentic movement. In each case the body 'speaks' through its activities, the traces it leaves behind within the art therapy studio. The body is not a model, metaphor or fantasy of unconscious individuality, but a series of experiential surfaces, energies and forces that link with other bodies and things (Grosz, 1994). The body is a network not only unto itself as an organic or experiential whole, but a conglomeration of meanings that link by way of the body's surfaces engaging with a variety to signifying chains. In this regard art therapy discovers extra discursive relations, it surveys interactivity amongst a range of relational surfaces within the art therapy studio. This is why the architectural space of therapy interested Guattari (1995), so as to incorporate a range of choices that liberate movement across non-stereotypical territories the potential for the art therapy space to enact something other than the psychoanalyst's office, to offer a studio environment of objects, natural materials and props that extend the activity of two dimensional art materials. The entire survey or cartography of desire is what interests Deleuze and Guattari, as an opening to 'the non-verbal level of communication that is always present, and underlies verbal communication' (Bloom, 2006, p. 67).

Deleuze and Guattari understand psychology and physiology in terms of what it can do, the linkages it can establish, the transformations it can perform, its capacity to reassemble (Grosz, 1994). Psychoanalyis has traditionally relied upon words as a pathway to understanding, but has taken for granted the significance of the body 'speaking' its mind. DGATA can offer variation, both in the multiplicity of artworks produced, and in the way that representation off shoots desire. The physical and psychological manifestations of art therapy imprint materials, environments and relationships with the quest of subjectivity to move into new territories of creation.

Postscript:

The Future of DGATA

Even though the DGATA method was theoretically outlined within the course of this thesis, it's future potential relies on the development of a clinical handbook that will outline its procedures in order to train art therapists in this method. The DGATA clinical handbook would incorporate case studies, photographs of artworks and studio environments, examples of unconventional art materials (i.e. found objects, props, costumes, natural materials) and also include examples of diagrams used in clinical notes mapping the routes clients have travelled within the DGATA studio. It would also explore the significance of enactment within the art therapy space and futher this link to performance art as a contribution to the visual arts practice of art therapy. The supervision of this method of clinical practice would also require an art therapist trained in the DGATA method, in order to monitor the application of Deleuze and Guattari's ideas within art therapy.

Along with the development of a DGATA handbook, the model's application within different clinical settings and to diverse client populations would be developed as an outcome of training art therapists in this approach. Art therapists eligible for training in the DGATA method would have already completed an extended period of professional practice and be bound by a professional code of ethics. This training would ideally be situated within an accredited art therapy training institution, and be delivered as a professional development course for art therapists. A network of art therapists qualified to practice this method could form as an outcome of the handbook's publication, professional training in DGATA and the supervision of DGATA therapists. The DGATA network of art therapists would in turn research the application of the

method within a variety of clinical settings in order to develop standards of practice relevant to diverse clinical populations and issues.

Of particular interest would be the applicability of the method for those art therapists working in office settings, where space is organised more administratively and perhaps shared with other colleagues from different professions. The challenge here would be the incremental adaptability of the office space in regards to furniture re-arrangement, and a large easily accessible storage space for art materials. The DGATA method is inherently related to the importance of physical exploration within the creative environment. If a studio space is not available the method is limited in its potential to offer greater latitude in regards to creative activities.

Another limitation in the application of the DGATA method is the client's capacity for mobility. If a physical impairment or illness impacts the potential for the client to move independently, this will also restrict their ability to utilise the DGATA studio. If provisions were not made to address physical access, the DGATA model would limit its practice to only able-bodied participants. The challenge for the DGATA method would be to support clients with physical impairments. This would also include a modification to the art therapist's expectations regarding a client's capacity to express their physicality, when 'what their body can do' is constricted. In other words the BwO may not be approached as an opening to inhibition and desire in the way Deleuze and Guattari imagined, but in fact be signified through more subtle degrees of awareness and expression.

Overall it is worth pursuing the Deleuze and Guattari approach to art therapy, as it contributes many engaging ideas pertaining to subjectivity and the moving body. The significance of the assemblage and studio environment resonates with artistic practices that enhance the therapeutic application of art. The

Deleuze and Guattari art therapist observes the 'bigger picture' of the therapeutic environment, as an added dimension to the art therapy experience, as well as the complexity of mind/body interactions that are processed in the making of art. As a result the art therapist is equipped to attend to their clients in greater detail including a greater volume of information pertaining to the client's condition and processing of subjectivity.

Glossary

Deleuze and Guattari terms are nomadic, openings to new territories. Their concepts travel through a network of culminating points, 'they let their concepts reverberate, expressing some of the variations in their sense through the shifting contexts in which they are put to use' (Lorraine, 2005, p. 207). Deleuze and Guattari do not define their concepts, they are circuits not singularities, they flow into one another and into their understanding of life as more of a becoming, rather than a fixed form. Their ideas are in the act of making, nodes that reflect upon experience as an open form. A concept can always go somewhere else, to new places, it does not have a specific and historical positioning that is fixed, it can be re-created within new contexts, interacted with from multiple directions.

The following list of terms are derived both from the writings of Deleuze and Guattari and also reference terms affiliated to an art therapy practice influenced by their ideas.

Artworks/Images

The term artwork is used interchangeably with the word image to correspond to art therapy works that are both images made with art materials and also processes of making that produce three dimensional art images or environments. An image or an artwork relates to the entire span of the art therapy studio, it may be seen as an object and also a scene of creative enactment. By including the entire creative context of making, the happenings within an art therapy studio space are also mapped. The art therapy studio itself can be seen as not only contributing to therapeutic art, but also acting as

an image surround (an additional artwork), imprinted with a range of art materials and client led interventions. The art therapist helps to track the client's travels through art materials and studio environment as well as meanings associated to the entire art making process both during the course of each art making session and collectively gathered together during the course of periodic review sessions.

Assemblage

An assemblage is a relationship of differing elements that are personal, social and environmental related objects, ideas and events. An assemblage is a provisional form that can be re-made. It is a collection of heterogeneous elements, a composition subject to change, to being reassembled into another state of affairs. An art therapy assemblage is a combination of creative, therapeutic and societal ingredients.

BwO, The Body Without Organs

The abbreviation BwO stands for Deleuze and Guattari's conception of the Body Without Organs, a body that is not stratified according to one particular form or representation. The BwO is not a moving entity, it is a multiplicity of desires and expressions that are not inhibited, but rather move life in all directions. Deleuze and Guattari situate the BwO within desire, the possibility of living the body as an open processing of experience. The BwO is not a sum of anatomy but the movement of body and mind as total desiring enterprises that work to produce different states of becoming. The BwO seeks the movement of all its dimensions, the body's release of its capacities not according to function, but in relationship to the field of immanence, where subjectivity undergoes a series of transformations, moving and reassembling as a networked relationship to

people, environments, objects, nature and ideas. The BwO attempts to unfix its branding as a language or code. The body is simultaneously in contact with different kinds of experiences, its many surfaces of perception are actively processing stimuli. The body resonates with internal and external dimension of perception that moves it across as span of affects. 'Rather than being a specific form, the body is more correctly described as uncontained matter or a collection of heterogeneous parts' (Message, K., 2005, p. 34).

Collective Enunciation

This term refers to Deleuze and Guattari's style of communication, which circulates through a system of ingredients. 'Collective cannot be understood here only in the sense of social grouping; it also implies the inclusion of a variety of collections of technical objects, material or energetic flows, incorporeal entities, mathematical or energetic flows' (Guattari, p. 2006 417). It has close parallels to the functioning of postmodernism, with subjectivity becoming less individual and more a network of routings through complex systems, where subjectivity is not considered a thing, but an 'immutable essence' (Guattari, 2006).

DGATA

This abbreviation refers to the Deleuze and Guattari Art Therapy Assemblage, a reference to the application of Deleuze and Guattari ideas regarding the interaction of psychological, physiological and societal influences within art therapy. DGATA highlights the prominence of an art therapy studio space and the movement of body, psyche and identity as a series of images that are never singularly defined but work to continually reassemble subjectivity as a collection of personal, familial and societal influences. DGATA also facilitates the

enactment of images (particularly during the course of review sessions) where a collection of previously produced images can be performed in order to further their meaning and interactivity. DGATA recognises the significance of the somatic transferential relationship between client and therapist, as an additional resourcing of material within the therapeutic relationship. The body's movements are mapped by the Deleuze and Guattari influenced art therapist, along with an awareness of how sensation can also impress upon art materials. The art materials themselves also include, e.g. larger scale items (i.e. big pieces of cardboard and wood), natural materials, fabrics, found objects and photographs. These materials complement paint, paper, pastels, markers and clay and also offer the opportunity to create environments and backdrops for art making and performance.

Desire

Deleuze and Guattari link desire with creative and productive potential, it is not compensatory for a condition of lack or deprivation. Desire has a social aspiration; Deleuze and Guattari's conception of schizoanalysis is infused with the idea that people can influence their worlds. It is a micro-political expression, referencing desire as a flow of creative activity within the larger canvas of social issues and world affairs. Desire is not situated within a psychoanalytic frame of loss, but instead used to explore opportunities for 'independent ontological creativity' (Toscano, 2005, p.214).

Desiring Machines

A network of connections implicating desire with the idea of production, a relating of heterogeneous elements, e.g. people, objects, technology, sensations, ideas, work, community, lifestyle, media, etc. Desire is operative in

the making of assemblages, a system of heterogeneous elements working together to communicate an aggregate scene of meaning.

Deterritorialisation

This term is frequently used within Deleuze and Guattari's writings, and refers to how lived space can be opened up and engaged with differently, through the course of experiences moving in more than one direction. Movement and change are inherent within the writings of Deleuze and Guattari; subjectivity and society are particularly highlighted as being subject to changing conditions. In relation to art therapy, deterritorialisation can refer to how each newly created image can generate another territory or plateau of experience.

Haecceity

This term relates to the non-subjective elements of experience, to a set of circumstances that inform experience. Within an art therapy assemblage these elements are related to the materials, objects and environment of art therapy.

Immanence

The term references life in its totality, the way that it extends into a continually moving expression amidst many dimensions of encounter. The plane of immanence is 'always there, always to be made, never still' (Seigworth, 2005, pp. 18-169), life as a threshold of becoming, each moment an intersection of events that implicate experience with many textures of possibility.

Enactment

The use of the term enactment within the Deleuze and Guattari Art Therapy Assemblage denotes the performance of an art therapy image or collection of images, with the aim of moving the art on in terms of meaning and action. An enactment may correspond to a rite of passage or ceremony, however rites and ceremonies can reflect a more development approach to art therapy, marking stages of growth or reflecting levels of achievement. An enactment can be either planned or improvised, but its scene and span of activity is chosen by the art therapy client. It can accentuate the completion of a newly created piece of artwork and highlight the review of a collection of artworks. An enactment is witnessed by the art therapist, who tracks the course of the performance through its many permutations. Sound, words, props, studio furniture, found objects, objects from the client's home, natural elements, photographs, etc. can be incorporated within the enactment in order to expand its associative dimensions. Enactment amplifies the movement and embodied aspects of art therapy, bringing art therapy to life, moving it out into world of the client's associations.

Lines of Flight

Deleuze and Guattari embrace the idea of multiplicity, the changing nature of representation that is influenced by lines of flight, a rhizomatic travelling of representation through different areas of significance. In the context of art, creativity generates new precepts, an affective system of change that dismantles conventional ways of thinking (Parr, 2005b). Art as a line of flight ushers forth a series of affects that prompt new ways of thinking and encourages new pathways into the world at large. Lines of flight are the movements between primary points of subjectivity, in the context of art

therapy, they can be understood as the spaces and passages in between artworks that build the momentum for the next creative instalment.

Plateau

The term plateau is directly related to the functioning of rhizomes, and refers to the way that meaning can be read in either direction, as a landscape of inferences and intensities. A plateau is a referential region, but not a hierarchical reference it exists amongst a plane of other plateaus that are of equal representative weight. Rhizomatic subjectivity maps plateaus as intersections of travel. An artwork can also be a plateau a culmination of creative intensities that landmark an art therapy event. Review sessions within art therapy bring together a collection of plateau images, so that the entire regionality of an art therapy series can be explored through reflection, dialogue and enactment. A plateau is an interactive expression, it is a landmark that helps map the routings of subjectivity across different culminating experiences.

Rhizome

A rhizome combines cycles of growth. It is an underground stem that traverses, a network of relational growth, a 'moving matrix' that links together different scenes or territories (Colman, 2005). The rhizome inhabits many places at one time; it is not rooted in one specific locality, but grows as an aggregate without hierarchical order. A rhizome is an assemblage. 'To think in terms of a rhizome is to reveal the multiple ways that you might approach any thought, activity, or a concept – what you always bring with you are the many and various ways of entering any body, of assembling thought and action through the world' (Colman, 2005).

Sensation

Sensation is referenced in Deleuze's investigation of Francis Bacon's art making. It denotes the influence of sensation upon both the making and viewing of artworks. Sensation is a happening, the art event in both creation and reception. It is a bodily influenced becoming, it underlines the significance of the body and its movement within the creation of art. It is also a receptive event, art viewed by way of sensations that develop a physicality of responsiveness related to the BwO. The BwO is a surface of sensations, its entire dimensions issuing forth nuances of continuous and autonomous movement, 'sensation passes over and through the body in waves and rhythms that meld its perceptible sites or organisation of parts into vibrations and spasms' (Conley, 2005, pp. 244-5). The body in art therapy issues forth a continuous flow of sensation which enters directly into expression via art materials or through movements within the art therapy studio. The mapping of sensation is the art therapist's following of gesture, timing, movement patterns, energetic qualities and fluctuations, etc. These processes are in essence traced across the art therapy image, and within the whole span of the art therapy session.

Schizoanalysis

A Deleuze and Guattari term characterising a collection of experiences that are relational; an unbounded subjective opening to experience that is not enclosed within an individualised identity. Schizoanalysis experiments with simultaneous influences that extend subjectivity into more than one territory. The term was developed as an alternative perspective to psychoanalysis, which Deleuze and Guattari consider to be ridden with interpretative lines of inquiry, centred on infantile experiences of lack, wounding and deprivation. Schizoanalysis is linked

to psychosis and schizophrenia and the proliferation of unbounded identity associations. The term intends to shake off the prevalence of family relationships within psychoanalysis, it highlights the significance of extending subjectivity into multiple sites of association - being in more than one place at the same time. Schizoanalysis operates at the level of desire, it recognises the productive capacity of desire as it generates many outlets of experience. Schizoanalysis is experimental and spontaneous, opposed to the retrospective nature of psychoanalytic thinking seeking the hole in which to repair. Rather than lack, schizoanalysis propagates subjectivity across a broad range of possibility, creativity transversing connections without closure. The family drama is set within the context of 'the bigger picture' of life lived to its fullest, a composition that challenges the idea of standardisation. Schizoanalysis is not a developmental model or treatment pan, it reflects a Deleuze and Guattari approach to life, a happening composed of many images 'an open and creative whole of proliferating connections' (Colebrook, 2002, p. 5).

Smooth Space

Smooth space is a succession of links, a shifting experience of space that is full of possible directions and opportunities. An unstructured and unbounded sense of space that is alive with emerging qualities or features of reference. Space that is changing course and relating different sets of circumstances as they occur.

Subjectivity

A term used to characterise identity within the practice of art therapy and in relation to the ideas of Deleuze and Guattari. Subjectivity is relational and spans across different kinds of images and experiences, a process that is

accumulative, borderless and on the move. It also relates to the opening up of identity references de-territorialising identity across places, activities and relationships.

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