Review


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REVIEW

The Point of Connection: Accessing Affective Memories through Sonic and Embodied Technologies in Shannon Yee’s *Reassembled, Slightly Askew*

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Performance review

I am the first to arrive (see Figure 1). It’s quiet in the lobby of The Cultch, where in one corner eight chairs are set up in front of a TV monitor (see Figure 2). An invitation to sit and watch: the pre-performance primer for our imminent experience. A documentary about brain injury and rehabilitation plays on loop. I watch the repeated recording as others begin to arrive. I learn information about brain injury support networks available in the area: How can TBI (traumatic brain injury) affect your life? How does it impact your loved ones? What are important resources to help those living with an ABI (acquired brain injury)? The eight chairs are now full. A ‘nurse’ enters.

*Reassembled, Slightly Askew* (2015–) is a 48-minute immersive audio experience written by playwright Shannon Yee. It promises a journey into the subjective, lived experiences of another, experimenting with immersive sound technologies to communicate the embodied trauma of brain injury, paralysis, coma, and rehabilitation. It asks audience members – participants, attendants, immersants, patients – to be still, to listen, to absorb, and to find a point of connection.

The nurse hands out forms to be completed by each audience member. Patient questionnaires. Have you experienced, or do you know anyone who has suffered from brain injury? Concussion. Stroke. Coma. Infection. Trauma. What brought you here? We are given hospital wristbands. Patient intake bracelets. Together we are guided to the door of the performance space. Before entering, the nurse explains the protocol: If at
any time during the experience we should need assistance, please raise your hand. We enter the space and select our beds. I take off my shoes, as instructed, and try to find a comfortable position under the covers of the basic cot I am now lying on. I stare at the dark ceiling of the black box theatre then put on my blindfold and wait (see Figure 3).

The performance centres on Yee’s lived experience of sustaining a rare, critical brain infection, surviving a medically-induced coma, and living with an acquired brain injury. Through intense sound experience, it invites audience members to navigate through her memories of waking up ‘in hospital paralysed down one side and with part of her skull removed’ (McNay 2015). Staged for eight individual audience members at a time, each of whom lie tucked under the covers of a hospital bed wearing blindfolds and noise-cancelling headphones, the performance uses binaurally-recorded soundscapes and narrative to generate an intensely intimate sensory journey from the first-person perspective of Yee.
Impact of this performance extends beyond the artistic context. Aside from its success touring festival circuits internationally, *Reassembled* is used in medical contexts as an educational tool for doctors, nurses, and medical students. Through immersive practices and binaural audio, it aims to share embodied knowledge that medical professionals cannot otherwise access, claiming that by offering a way to ‘[live] in someone else’s head’ the work has the capacity ‘to increase empathy and understanding’ (Yee 2016a, 2016b).

‘Are you comfortable?’ ‘Yes, thanks.’ I’m glad when the nurse comes over to my bed to assist me with the headphones. Was I the last? I close my eyes under the blindfold and move my hands out from under the covers to a more comfortable position. I’m trying to find a comfortable position. Trying to find more ease, to relax. Trying to manage in this position. I begin to hear noises and then a voice starts murmuring. Going over lists, organising thoughts, car noises, chatter, sharp ringing, the voice – is it in my head? It’s
not comfortable, wait – I open my eyes under the blindfold and move my hands to clasp across the front of my stomach.

What becomes palpably clear in the first few seconds of my experience is that *Reassembled* is not interested in making audience members feel comfortable, or at ease, or even at a relative distance. While the performance environment we enter into feels safe and hospitable, the efficiency with which the binaural audio recording induces a different sense of space is startling. A multifaceted soundscape quickly stimulates internal tribulation – the sense that something unknown is happening, that something is wrong. In those opening moments, through a carefully choreographed auditory journey, audience members revisit the day Yee found herself in hospital in critical condition. *Reassembled* then weaves together various sensory memories and recollections to transform Yee’s lived experience of neurological trauma into a deeply affective experience for others to explore. Strategies of restricting movement, withdrawing visual information using a blindfold, and focusing attention on listening through headphones cultivate an intimate, dramaturgical framework that contributes to a powerful generation of

![Figure 3: Hospital beds set up in studio space. Photo: Stephen Beggs. Reproduced with permission of the photographer.](image-url)
affect – the ‘immediate, uncontrollable, skin-level registration of a change to our environment’ (Hurley 2010: 13).

This transformation – from one perceived environment to another, and eventually from one’s own headspace into Yee’s – relies on subtly manipulating audience members’ psychophysical experience. Without movement and visual cues, attention is directed to the way binaural sound creates three-dimensional space – a space in which audience members can mentally emplace themselves. The effects of this sensory-focused dramaturgical framework take time, and it is through durational listening while lying in the same motionless position for nearly an hour that we experience affective impact, where the body becomes ‘as much outside itself as in itself – webbed in its relations – until ultimately such firm distinctions cease to matter’ (Gregg & Seigworth 2010: 3). Indeed, *Reassembled* relies on a performative dissolution of the perceived boundaries between people, their lived experiences and their recollections. It invites audience members to step into Yee’s first-person perspective and in so doing, attempts to foster embodied interpersonal communication: an empathic resonance. The dramaturgy of the performance sets up a permeable boundary between each audience member’s own thoughts and memories and those of Yee – the voice narrating our/her experiences during the performance. By overlaying Yee’s thoughts onto hushed conversations between doctors, nurses, and her partner and spatialising sounds that evoke a mental picture of the hospital room from her vantage point, the performance places the audience member in a liminal perspectival position. This position at once displaces us and brings us into our bodies, inducing an almost trance-like ‘state of liminality’ where one is ‘unable to distinguish if a vaguely recalled dream actually occurred’ (Vanhoutte & Wynants 2010: 73). This overlaid positionality further suggests a parallel between self and Other; it enacts the ‘open-ended in-between-ness’ characteristic of affect as ‘integral to a body’s perceptual becoming, and as audience members, we are thus invited to become ‘otherwise’: to understand deeper (Gregg & Seigworth 2010: 3, emphasis in original).

Irritating, scratching, sharp, ringing. There’s a sound in my head, on my head, on my brain...make it stop! I close my eyes tightly. The sound hurts, but it’s consistent,
rhythmic, hypnotic. I focus on the faint words in my head — in her head — trying to reach beyond to explain that she can hear you. I can hear you! Voices talking about me, deciding what to do. The undercurrent of sound builds. There's a moment where I start to drift. My eyes are heavy: don't sleep! I focus on the voices, but the ringing in my head persists.

The distinction between scenarios depicted in the performance and dream-like images from my unconscious seem to blur as I drift between states of wakefulness. Even now I recall the performance as if it were a dream, or as if the rhymical scraping sounds had rendered me hypnotised. My own affective memories — of my loved ones, past illnesses, hospital rooms — though notably different than Yee’s, blend with the performance material. This phenomenological conflation — between my autobiographical self and Yee’s shared memories — only intensifies as she enters into a coma; the voice in my ears (in my head) narrativises her thoughts and feelings as I lie in the hospital bed, unable to utter a word or communicate with those sitting at her bedside. While the dramaturgical framework of the piece cannot — indeed does not — seek to replicate her traumatic experiences, it creates a convergence at the threshold of our different affective experiences and memories in a way that provokes an embodied, empathic connection.

By having audience members complete the pre-performance questionnaire that asks us to think about any friends or loved ones who have experienced brain injury and why we decided to attend the performance, we are prepared to not simply appreciate Yee’s story but to connect with the feelings it conveys, which we might recognise from our own lives. Listening to the soundscape is challenging — many sounds are jarring, and the spatialising experience of binaural recording is intense — but Yee effectively amalgamates our journey with her experiences as she remembers and tries to make sense of them. Through associations, references, sonic experimentation, and physical restriction, Reassembled also triggers our perceptual ability to mentally image ourselves in different past, future, or imagined situations. On some level, it begins to feel as if I am remembering experiences I once lived; the details I imagine feel ‘real’.
Autobiographical memory, also known as episodic memory, refers to ‘a conscious recollection of a personal experience that contains information on what has happened and also where and when it happened’; it also ‘implies a kind of first-person subjectivity that has been termed autonoetic consciousness’ (Pause et al. 2013: 9). Reassembled plays with this process of conscious, subjective recollection, using binaural recording to simulate Yee’s experiences as well as the way she remembers and re-contextualises those experiences through performance. Because the binaural audio prompts detailed mental imaging, it helps us effortlessly imagine ourselves within the scenarios fleshed out through the recording, even though they are not our own memories. Audience members ostensibly engage in a process of retrieving Yee’s memories with her through the performance journey and as a result, Reassembled asks us to not simply understand the significance of the performance and Yee’s story, but to feel it – to register it at ‘skin-level’.

This combined experience of feeling and understanding recalls performance scholar Josephine Machon’s ‘(syn)aesthetic’ mode of appreciation, and particularly, the affective consequences of ‘slippage between the verbal and physical, the chthonic and noetic, the “felt” and the “understood”’ (2009: 34). Machon addresses the ‘noetic’ in her theoretical framework, explaining it as the ‘ineffable quality’ of experience: that which is beyond words (ibid. 16). But Reassembled goes one step further, drawing attention not only to the noetic (knowing and understanding), but also to the experience of ‘autonoetic consciousness’ – self-knowing and remembering. It asks audience members to retrace another’s memories, to remember with and to become otherwise, to know one’s self but in another’s shoes: to empathise. In this way, the performance implicates and challenges the stability of self-knowledge when it presents Yee’s story. It exercises each audience member’s capacity to use habitual experiences and memories in order to visualise each scenario; then it asks them to reach further and to envision the unusual, critical circumstances beyond the familiar constraints of the performance environment. This complex self-awareness characterises the imaginative experience of Reassembled. Audience members are invited to engage with Yee’s story on a level beyond words, to appreciate her
experience and understand what she went through; but they are also invited – perhaps more significantly – to know themselves within those recollections, to performatively live through remembering elements of Yee’s experience and to discover personal, affective connections.

The amplified scratching sound is moving around my head now, between my ears, drowning out the voices I vaguely register at my bedside. I am sinking into the bed, my limbs heavy with stillness. Don’t worry, I’m OK. Yee’s partner says something, then the voice in my head calls out: Why can’t you hear me? The repeated scratching builds like a ticking clock. I feel weightless and floating – on the cusp of unconsciousness, sleep… Suddenly my mother calls to me at the foot of the bed. She’s smiling at me. Here I am, here I am, here I am. Did I fall asleep? Am I dreaming, or – HERE I AM. The sound suddenly stops, and I open my eyes. We’re invited to take our time removing the headphones and blindfolds and to slowly sit up.

This final episode, of Yee emerging from her coma and connection with her partner, leaves me with feelings of nostalgia and heartache; the feeling of almost losing a loved one but knowing – remembering – that you are here, that you are always loved, became a lasting memory for me following the performance. The invitation (and need) to establish a point of connection with the haunted figures at my bedside influenced my appreciation of, and eventually my affective response to, the personal memories Yee dramatises through her work. Through my embodied reality within the performance environment – feeling motionless, heavy, dreaming yet conscious – in conjunction with the intensity of listening experience, I encountered a level of dis-ease and confusion that compelled me to listen to Yee’s story with my whole body. Ultimately, this ‘force of encounter’ (Gregg & Seigworth 2010: 2) culminated in embodied feelings of care and compassion: an affective recognition of another’s trauma.

Competing Interests
The author has no competing interests to declare.

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