BEING AT HOME: A PHENOMENOLOGICAL ANALYSIS OF THE
EXPERIENCE OF SPACE

A Thesis in
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by
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Influenced significantly by the works of Merleau-Ponty and of Heidegger, I argue that space is not the predetermined and uniform geometrical grid that many mathematical, physical, and psychological theories have claimed and in many cases continue to claim it to be, but rather the network of engagement and alienation that provides one’s orientation in the inter-human world. In addition to challenging the adequacy of certain canonical as well as many ‘commonsense’ conceptions of the nature of space and the perception of space, I provide original analyses and extensions of the phenomenological studies of space offered by both Heidegger and Merleau-Ponty. Furthermore, I present an original contribution to the conception of human spatial perception by arguing that our spatial experience is phenomenologically related to our experience of “home.” Specifically, like the experience of home, being spatial involves two complementary and inseparable aspects: It involves both the ability to stay safely within what is our own and also the need to venture out into what is other. These are not isolated moments; they are essential features of the same experience—the experience of our articulation into a world, or, said more basically, the very experience of human spatiality. I support this claim in part through an innovative analysis of agoraphobia—a common, but frequently inadequately treated spatial ‘disorder’. My analysis of agoraphobia allows me not only to offer new insights into the nature of a problematic spatial experience, but also to illuminate ways in which the experience of being at home is incomplete without the accompanying experience of being able and willing to leave the home. Ultimately, I draw together my phenomenological studies of space, agoraphobia, and the home to argue that being-at-home is the fundamental experience of space. I maintain that at the core of this character of our spatiality is the existential structure of our being as always both self and other, always both here and there.
# TABLE OF CONTENTS

## Introduction

Introduction ........................................................................................................................................... 1

## Chapter 1. THE SPACE OF PHYSICS AND THE SPACE OF EXPERIENCE

### I. Newton and Space

1. An Introduction to Absolute Space and Relative Space in Newton .......................... 10
2. The Ground for Absolute Space ............................................................................. 12
3. The Necessity of the Concept of Absolute Space in Newtonian Physics .......... 16

### II. Descartes and Space

1. Differences Between Newton’s and Descartes’s Analyses of Space ............... 18
2. Commonalities Between Newton’s and Descartes’s Analyses of Space .......... 20
3. Descartes’s Theory of the Visual Perception of Space ..................................... 25

### III. Current Accounts of Spatial Perception that Accord with Descartes’s Theory

1. Connections to Descartes’s Theory of Spatial Perception in Cognitive Science ........................................................................................................ 33
2. Current Research Projects that Align with Descartes’s Theory of Spatial Perception ...................................................................................................... 36

### IV. Current and Historical Accounts of Space and Spatial Perception that Challenge These Conceptions of Space

1. Challenging the Notion that Spatial Perception is Euclidean in Nature .......... 41
2. Challenging the Notion that Spatial Perception is Absolute and Perspectiveless ................................................................. 47
3. Challenging the Notion that Spatial Perception Predetermined and Universal ........................................................................................................ 49
4. Challenging the Notion that Space as Exists as an Independent Entity ........ 54

### V. Conclusion

Conclusion ........................................................................................................................................... 56

## Chapter 2. HEIDEGGER AND THE PHENOMENOLOGICAL CONCEPTION OF SPACE

### I. Being and Being-In

1. Being and Being-In as Care and Relevance ............................................................... 61
2. The Worldliness of Being and Being-In: Being-in-the-World ................................. 70
3. The Interpersonal Character of Being-in-the-World .............................................. 73

### II. The Spatiality of Being-in-the-World

1. The Deseverance and Directionality of Being-in-the-World ............................... 76
2. The Explicit Spatiality of Being-in-the-World ....................................................... 83
3. Measurement as a Mode of Lived Space ................................................................. 87
4. Mood and the Shape of Space ............................................................................. 94

### III. Conclusion

Conclusion ........................................................................................................................................... 98
Chapter 3. MERLEAU-PONTY AND THE BODILY BASIS OF LIVED SPACE…..101
  I. The Perception of Space………………………………………………………….103
  II. The Body of Space………………………………………………………………111
     1. Body Schema and Orientation……………………………………………….113
     2. Spatial Levels………………………………………………………………...121
     3. Outside Support for the Body as Integral in the ‘Production’ of Space……137
     4. A Possible Challenge to the Body’s Role in Spatial Experience…………….140
     5. Space as the Dilation of Body………………………………………………..143
     6. Space and Embodiment as Interpersonal…………………………………….152
  III. Conclusion……………………………………………………………………...165

Chapter 4. CURRENT CONCEPTIONS OF AGORAPHOBIA AND THEIR
  LIMITATIONS…………………………………………………………………..…168
  I. Why Are We Looking At Agoraphobia Now? …………………………………..168
  II. General Phenomenon of Agoraphobia....................................................172
  III. Current Approach to Agoraphobia……………………………………………176
     1. Current Theoretical Approach……………………………………………….176
     2. Current Treatment Approaches………………………………………………183
     3. Motivation for the Current Theoretical and Treatment Approaches to
        Agoraphobia…………………………………………………………………..188
     4. Spatial Assumptions Made by the Current Model…………………………...198
  IV. Problems with this Approach From Within the Field of Psychiatry…………...204
  V. Phenomenological Criticisms of the Current Approach………………………...216
  VI. Conclusion……………………………………………………………………...238

Chapter 5. A PHENOMENOLOGICAL STUDY OF AGORAPHOBIA AND BEING-
  AT-HOME………………………………………………………………………….240
  I. The Constriction of the Agoraphobic’s World…………………………………...240
  II. Existential Roots of the Agoraphobic’s Constricted Life-World………………..247
  III. A Phenomenological Interpretation of Home…………………………………..260
  IV. Conclusion……………………………………………………………………...303

Chapter 6. THE HOMELESSNESS OF AGORAPHOBIA …………………………...305
  I. The Agoraphobic’s Experience of Home…………………………………………306
  II. The Interpersonal Roots of the Agoraphobic’s Fractured Experience of Home...318
  III. The Role of Home in the Prevalence of Female Agoraphobics………………...326
  IV. Agoraphobia, Citizenship, and Society………………………………………...333
  V. Conclusion………………………………………………………………………337

Conclusion……………………………………………………………………………...343

Bibliography……………………………………………………………………………360
Introduction

What birds plunge through is not the intimate space in which you see all forms intensified. (Out in the Open, you would be denied your self, would disappear into that vastness.)

Space reaches from us and construes the world: to know a tree, in its true element, throw inner space around it, from that pure abundance in you. Surround it with restraint. It has no limits. Not till it is held in your renouncing is it truly there.

--Rainer Maria Rilke

It is perhaps commonsense to be confident that space exists outside of us, that it depends in no way upon human beings for its composition; instead, it stands complete without us—except insofar as we are members of its myriad spatial relationships. Equally, it seems sensible to think that space has a regular and stable shape to it, and that objects within space retain constant figures and constant distances from one another unless they are moved or altered in some way. Engineering and home building projects, mileage estimates and air travel, maps and GPS systems all rely to a great extent on space as similar to (if not, in fact identical to) a fixed and eternal coordinate system in which measurements are constant to be sure for any viewer, but also for all time. Contrary to this common notion of what space is and what its measure is, I argue that our spatial experience and the very possibility for the experience of space are rooted in the way we are engaged with and in our world. Influenced significantly by the works of Merleau-
Ponty and of Heidegger, I argue, more specifically, that space is not the predetermined and uniform geometrical grid that many mathematical, physical, and psychological theories have claimed and in many cases continue to claim it to be, but rather the network of engagement and alienation that provides one’s orientation in the inter-human world. I maintain that at the core of this character of our spatiality is the existential structure of our being as always both self and other, always both here and there.

I pursue this study of spatiality by first examining canonical conceptions of space that take space to have a rigid and predetermined form. I demonstrate in my first chapter that though these conceptions may have practical applications both in daily life and in scientific pursuits, they do not adequately capture the human experience of space, nor do they make adequate claims about what space is or might absolutely be. I begin this study by first considering Newton’s influential conception of the nature of true or absolute space. I then turn to an analysis of Descartes’s conception of our knowledge of space, which, I argue, takes up key components of Newton’s conception of the nature of space—e.g., that space is rigid, homogenous, and without perspective. After discussing notable contemporary accounts that arguably take up Descartes’s account of how we know about and perceive space, I then turn to more current studies in mathematics, psychology, and physiology that allow me to demonstrate important problems in both the Newtonian and Cartesian conceptions of space and the perception of space, respectively. Here, I principally demonstrate that space cannot be understood as absolutely given, as having a fixed or rigid metric, or as perspectiveless. Thus, though Newton and Descartes attempt to provide accounts in turn of the nature of space and of how we perceive and can make judgments about space, my argument demonstrates that their accounts do not
adequately capture the breadth of human spatial experience, and, moreover, that, in the
case of Newton, his account reaches beyond what it is even possible or meaningful to say
about space. The human experience of space reveals that space must be understood
through the perceiving being, and that space insofar as we can ever experience it is
fundamentally perspectival and situated.

In my second chapter, I propose that phenomenology—a philosophical method
that pays attention to and analyzes how we experience a given phenomenon—is able to
provide a comprehensive account of human spatial experience and of space as such. I
begin this phenomenological study by appealing to texts of Heidegger in which he offers
a preliminary account of our spatial experience of being in a world. I offer an original
synthesis and analysis of Heidegger’s claims regarding space, and also propose additional
conclusions that are implied, but not pursued by Heidegger. Fundamentally, I use
Heidegger’s philosophy to demonstrate that our experience of space is wrapped up with
the way in which as beings that care for what is around us, we are always bringing things
close to us and also always directing ourselves towards a particular region from which we
can bring these things close to us. This basic understanding of our spatiality allows us to
explain our experiences of location, the existence of regions, and of ‘space’ as such, as
well as our experiences of orientation, distances, and measurement. In the end, I argue
that Heidegger’s analysis of space leads up to, but ultimately neglects an adequate
analysis of the body’s role in spatial experience.

In my third chapter, I take up this issue of the body’s role in human spatiality in
conjunction with an analysis of Merleau-Ponty’s investigations into body and spatiality.
In this chapter, I offer an innovative analysis of this author’s arguments pertaining to
spatial experience, and additionally take up his arguments to provide support for my own claim that space is the experience of the dilation of ourselves into the world. In other words, a person is, I claim, neither an isolated I-here that orients herself with respect to independent there-things, nor is she at the center of a rigid set of distant objects. Rather, she is always stretched out into the things to which she is attending, and it is from this stretching of herself that her senses of space and of world arise. Moreover, our sense of orientation and our possibilities for moving about in space in a particular way arise through our ability to find a spatial level, and this level arises in conjunction with our body’s abilities to function in a particular situation—i.e., to secure a means of being successful in a particular project we are undertaking. I examine the ways in which these abilities are shaped by our interpersonal relationships, our physiological possibilities, our developed habits, and so forth.

In my fourth, fifth, and sixth chapters, I turn an analysis of a prevalent spatially-rooted ‘mental disorder’—agoraphobia. Though people commonly recognize agoraphobia as involving a problem with space, they mistakenly, I argue, tend to conceive of the agoraphobic person and space as separate entities. By looking closely at the experience of agoraphobia in light of our phenomenological analyses of space and spatial experience, I am able not only to offer new insights into the nature of a problematic (and not uncommon) spatial experience, but also to illuminate significant aspects of ‘normal’ spatial experience, and especially to support my claim that our spatiality is tied up with our way of engaging the world as always both self and other, here and there. Ultimately, I connect the experience of spatiality as a whole to our experience of being-at-home, and, correspondingly, argue that the agoraphobic’s spatial
contraction is rooted in a problem of ‘failing’ to be-at-home anywhere. The chapters unfold as follows.

In chapter 4, I consider the basic phenomenon of agoraphobia, and discuss the treatments and conceptions of this disorder (as well as the motivations that arguably lie behind these) that are common within the fields of medicine and psychology today and historically. I then offer criticisms of these views arising both from within the very fields typically studying agoraphobia as well as from the phenomenological study of space that I have already developed. I argue that central to the failings of these current approaches to agoraphobia is an underlying assumption that space is something independent of the subject, and that this stance, which fails to recognize and, therefore, to address, the lived significance and nature of space, is a viable source for the high rate of treatment failure in agoraphobia.

In chapter 5, I begin to construct an alternative conception of agoraphobia. I offer a phenomenological study of the disorder, which is rooted in results of studies on and testimonials of agoraphobic persons, and also uses the phenomenological observations about space that we have established so far. Arriving at an initial conclusion that the home is, perhaps surprisingly, at the core of the agoraphobic’s problematic experience of space, I then turn to an initial study of the human experience of home. I argue that we are beings for whom home is a developed extension of ourselves, and one that is particularly significant insofar as it provides us with a basis from which we find ourselves able to expand into a larger ‘space’—a world. Ultimately, I argue that the experience of home is fundamentally one of inward turning and outward moving ‘moments’, of ingress and egress.
In chapter 6, I argue that agoraphobia reflects an existential insecurity in a person’s way of making a home and of being at home. These problems should be understood both literally—i.e., with respect to the actual way in which the agoraphobic is able to have what we ‘objectively’ identify as a home—and also more broadly—i.e., with respect to the agoraphobic’s general experience of being human insofar as this involves being both here and there, self and other—experiences that I maintain underlie the existential experience of what it is to have a home. I argue that in agoraphobia the experience of venturing forth from home—of being able and willing to leave home—to engage with what is other is troubled, and that the agoraphobic is, thus, never at home in the way that ‘healthy’ persons are.

In my conclusion, I draw together my phenomenological accounts of agoraphobia and the home to argue that the experience of home is a significant tangible and personal articulation of the manner of our spatial way of being-in-the-world. I use Heidegger’s analysis of the anxiety at the core of Dasein’s existence to reiterate one final time the argument that our spatial experience is rooted in our way of being-in-the-world, and that it is, as such, perspectival, situated, and creative. Correspondingly, I demonstrate that just as it is central to the experience of home that we go away from the home, it is central to our spatial experience that we are always both here and there, self and other, that we are always articulated through a world. Equally, just as in the experience of home, the alien and uncertainty are always underlying the familiar and the secure, so too in our spatial way of being-in-the-world, anxiety at the nothingness of our world—anxiety at the ‘nothingness’ of space—lies beneath our everyday sense that space simply and certainly is around us, spread about, out there, and absolutely so.
In summary, I herein challenge the adequacy of certain canonical conceptions of the nature of space and the perception of space, and also provide original analyses and extensions of the phenomenological studies of space offered by both Heidegger and Merleau-Ponty. Furthermore, I present an original contribution to the conception of human spatial perception by arguing that our spatial experience is phenomenologically related to our experience of “home.” Specifically, like the experience of home, being spatial involves two complementary and inseparable aspects: It involves both the ability to stay safely within what is our own and also the need to venture out into what is other. These are not isolated moments; they are essential features of the same experience—the experience of our articulation into a world, or, said more basically, the very experience of human spatiality. I support this claim in part through an innovative analysis of agoraphobia—a common, but frequently inadequately treated spatial “disorder.” My analysis of agoraphobia allows me not only to offer new insights into the nature of a problematic spatial experience, but also to illuminate ways in which the experience of being at home is incomplete without the accompanying experience of being able and willing to leave the home. Ultimately, I draw together my phenomenological studies of space, agoraphobia, and the home to argue that being-at-home is the fundamental experience of space.
Chapter 1. The Space of Physics and the Space of Experience.

Our typical sense of the world around us involves a notion of space as something that is independent of us. At a basic level, this sense of space arises out of our experience that the objects we encounter in the world have their own self-sufficient identities and reality; for, implicit in our sense that objects exist and persist outside of us—regardless of whether or not we are present to notice them—is the sense that there is a location or a place in which objects can do this—i.e., space. As with objects, we do not think of this space as relying on us in any manner. Rather, we take space to be a fixed and absolute entity in which things can move and be moved, but that does not itself ever diminish, change, or disappear. In short, space is for us the independently existing and unchanging place where real things exist.

This conception of space not only serves as a general model for how we conceive of space on daily basis, it also serves as a basis for significant theories and practices in the fields of physics, physiology, biology, psychology, and so forth. The effect of this scholarship only amplifies our sense that space can be accurately defined in such terms. Yet, in spite of the weight of these theories and our daily assumptions regarding space, I argue that there is a fundamental error made in any conception of space that holds it to be something that is fixed, pregiven, or free of the human perspective. Though it may be convenient, practical, and even ‘normal’ to think of and treat space as an independent and rigid entity, I maintain that we can never have any lived experiences of space as absolute
in any of these ways, and that to think otherwise distorts our understanding of the nature of space.

In this chapter, I begin by considering two prominent and related conceptions of space that have had significant and lasting influences on a range of academic disciplines as well as on our daily sense of space. I look first at Newton’s conception of true space as absolute space. I then argue that Descartes’s conception of space, albeit distinct from Newton’s in certain ways, is ultimately connected to Newton’s, and that Descartes can be understood as presenting an analysis of human spatial perception that follows from an account such as Newton’s in which space is taken to be absolute and, thus, to be rigid, homogenous, without perspective, and so forth. Following this historical analysis, I turn to contemporary accounts of spatial perception. I first present accounts that carry forward the conceptions of space shared by Newton and Descartes. To close the chapter, I appeal to current research that allows me to argue that there are flaws in the conception of space discussed up to this point. I argue that space should not be understood as automatically given, as without a center, as unvarying, as following a fixed metric, as above and beyond us, or as ‘absolute’ in any other way. Instead, the human experience of space proves that space must be understood through the perceiving being, and that space insofar as we can ever experience it is fundamentally perspectival and situated.
I. Newton and Space

1. An Introduction to Absolute Space and Relative Space in Newton

Newton argues that space in its true and, ultimately, most intelligible form exists as absolute space (Newton 8, 11-12). Newton defines absolute space as space that remains always similar and immovable, and that is so without reference to any further point or place of reference (Newton 6). This space exists independently of any and all objects as well as of matter whether formed or formless. As such, it is empty and without any adhering properties, such as color, texture, or even extension. It is utterly undifferentiated. As always similar and immovable, absolute space also must be understood as existing regardless of whether or not anyone is present to acknowledge its existence. It neither relies in any way on a percipient or knowing being for its existence or persistence, nor can it be changed by any activity of such a being. Far from being able to exert an influence on this space, we cannot even perceive this absolute space, because there is no substance to it such that it could be noticed by any one of our sensory organs (Newton 8). Thus, since there is no privileged point or points of view in absolute space, nor any part or point in this space that counts as prioritized or unique, absolute space cannot be thought of as having a center or any other sort of orientation such as a top or bottom, a left or right, or a beginning or end.

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1 Casey writes of Newton and other seventeenth-century physicists: “According to the new physics, space is something self-sufficient and wholly independent of what is in space, including particular places; space is thus ‘an emancipated concept, divested of all inherent differentiations or forces’ (Jammer 90)” (Casey 139).
Newton maintains that attributes such as orientation, heterogeneity, and directionality do in fact belong to the sort of everyday space we associate with bodies and the places of bodies. Though this is the sort of space that people typically consider ‘to count as’ space, Newton argues that this is merely relative space. He describes relative space as being a marked off portion of absolute space, and as always open to changing or being moved (Newton 6). For instance, a geographic area such as city or even the celestial sphere as a whole is a relative space, as is the space of a house or a box. There is no limit to the number of possible relative spaces, and they can even overlap—e.g., the relative space of a house coincides with the relative space of the neighborhood, which coincides with the relative space of the city, and so forth.

These divisions or designations do not belong to or arise from space itself. Instead, relative space is always distinguished and perceived by us according to sensible things that are within the space or juxtaposed in some way to the space.\(^2\) In other words, we perceive objects and take the distance or expanse among these objects to be what space is. This is ultimately an erroneous understanding of what space is insofar as absolute space is in no way defined by objects and has no quality to it such that we could ever come into perceptible contact with it. Thus, we are not truly perceiving space when we identify a relative space; instead, we are perceiving objects and using these to mark out a certain expanse. In this way, relative space, unlike absolute space, is dependent upon us insofar as we assign it its boundaries and domain.

Although absolute space is neither defined by its contents or any percipient being nor limited by any features such as shape, limit, direction, etc, this lack of definition does

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\(^2\) Casey speaks of Newton’s relative space as being defined by the activity of measurement and as, ultimately, allowing for a “pragmatics of place” (Casey 143).
not imply that there is no structure to absolute space. Newton speaks of the parts of absolute space as having a fixed and immutable order (Newton 8). It is only with respect to this order of parts, or absolute places, that one can ever identify something as truly moving or truly at rest. That is to say, an object is at rest if and only if it can be identified as still with respect to a position in absolute space; and, true motion is the measure of an object’s movement with respect to something that is still in absolute space. Though Newton does not explicitly identify the measure of this motion or, more generally, of absolute space as based on Euclidean natural geometry, he does so implicitly when he writes: “Absolute and relative space are the same in figure and magnitude...” (Newton 6); since the mathematics of the Principia, which is a study of bodies moving in relative space and, thus, deals directly with the figure and magnitude of relative space, is derived from Euclidean principles. Thus, we can add to Newton’s description of absolute space that it is a fixed order of places describable by means of Euclidean geometry.3

2. The Ground for Absolute Space

Newton does not assume his readers will automatically grant him the existence of absolute space—although he does intimate that a philosophic thinker would not make the mistake made in daily practice of taking relative space to be what space actually is (Newton 11). Since the practicality of relative space is so great insofar as daily

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3 Mathematicians and ‘physicists’ both before Newton and for centuries following him generally agreed that Euclidean geometry was the appropriate model for understanding the physical structure of space. This notion began to be questioned when Einstein proposed his general theory of relativity in which the space-time continuum was deemed to be non-Euclidean (Jammer 145). From this time forward, many scientists, including Gauss, insisted that there was no a priori means of deciding from the logical and mathematical side whether Euclidean or non-Euclidean geometry represented the spatial relations among physical bodies (Jammer 146).
measurements and projects are successfully carried out solely in reference to this space,\(^4\) Newton acknowledges that we may not have reason to notice that this is not in truth what space is. In response to this, he describes the nature of absolute space, offers reflections on the role absolute space has in our intellectual pursuits, and provides two thought experiments to offer more tangible evidence of the existence of absolute space.

Appealing to our intellectual experience, Newton prompts us to consider that although we can neither perceive absolute space nor do we refer to absolute space in our daily dealings with tangible objects or in our activities of day-to-day measurements, calculations, or projects, we nevertheless conceive of space as absolute whenever we are considering the true nature of things and their situation (Newton 8). To begin, Newton observes that we are capable of abstracting from our senses and sensible measures in order to consider things themselves. Newton maintains that when we do so, we will reach a sense of space as this fixed, absolute, and primary place of all things (Newton 8, 11-12). In support of this claim, he observes that we necessarily conceive of things as being placed in space. Newton implies that this conception cannot be understood apart from an understanding that there exists an immutable order of places in which these things can be placed. In his words, “All things are placed...in space as to order of situation. It is from their essence or nature that they are places; and that the primary places of things should be movable, is absurd” (Newton 8). Though Newton does not specifically identify the nature of this absurdity, it seems plausible that he is appealing to our unwavering sense of objects as existing independently of us and as having a definite and unqualified place in which to do so. In other words, he might argue that the very

\(^4\) When dealing with acts of measurement and locating objects, we are in fact confined to dealing with relative spaces, since we can never perceive an object’s absolute position in space.
notion of ‘having a place to exist’ carries within it a sense of invariability, stability, and absoluteness.

Newton offers tangible support for the existence of absolute space by appealing to two examples in which he argues one perceives effects on bodies that can only be explained as the consequence of absolute motions, which in turn can only be understood as existing if absolute space exists (Newton 12). Newton defines absolute or true motions as those occurring as a result of force being positively and directly applied to a body. Relative or apparent motions, on the other hand, do not require that force be applied to the body observed to be moving; in such a case, a body that is still or moving stably may appear to be moving or changing its direction or rate of motion if a body or observer that stands in relation to it is moved or moving (Newton10). Since we cannot perceive absolute space or changes made therein firsthand, we must identify and analyze absolute motions by examining the effects that such movements have on bodies that we can observe.

In his first example of absolute motion—the bucket experiment—Newton argues that the centrifugal motion that water exhibits in a spinning bucket cannot be described as a movement occurring relative to the bucket. Rather, this motion of “receding from the axis of circular motion” is a “true and absolute circular motion” (Newton 10). Newton deduces this from the fact that the water, though pressing upward and outward when the bucket is spinning, is still with respect to the bucket itself—just as it would be if the bucket were at rest. The centrifugal motion must, therefore, be a sign of a type of motion that is not imparted by or defined by the motion of the bucket. Newton also implies that the water’s upward motion cannot be interpreted with respect to any nearby body or any
sort of relative space. If this is the case, it is not sufficient to understand space or all motions within space solely on the basis of our own immediate position or possible positions; instead, there must be a sort of space that extends beyond our own situation—that is, a space that can account for a type of motion that cannot be explained merely with respect to our perspective on the motion.5

In a second example—the globes experiment—Newton argues that true motions can be distinguished from relative ones by considering the tension and forces that exist between and on two globes that are connected by a cord and which are observed to be rotating (Newton 12). Newton’s analysis hinges on the fact that any circular motion actually occurring between the two globes will cause tension to occur in the cord connecting them. If no tension exists in the cord, but the globes are still perceived to be moving, then one knows that the observed motion of the globes is only an apparent motion that is occurring because the viewer or other bodies are moving relative to them. By applying varying pressures on the alternate faces of the globes, we can also determine the direction and quantity of the circular motion of the globes by, once again, noticing what happens to the tension in the cord. These calculations can be made without resorting to comparisons to an exterior position or body. In this way, Newton’s experiment not only offers a way of determining whether a motion is absolute or relative, it also provides a general model for making a measurement of motion that holds with respect to an absolute space, not a relative one.

5 Mach argues, contrary to Newton, that the water’s centrifugal movement is not evidence of absolute motion, but is rather the effect of disguised gravitational actions, and can, therefore, be considered to be a motion occurring with respect to the earth or universe—i.e., a relative motion (Jammer 120).
Newton does not presume that these experiments provide a complete answer or method for how one could access measurements and considerations of absolute movements. Instead, he offers them as thought experiments that will serve to prepare his reader for the sort of mathematical, physical, and intellectual problems he will be discussing throughout the *Principia* (Newton 12).

3. The Necessity of the Concept of Absolute Space in Newtonian Physics

Though Newton leaves behind these thought experiments and his general analysis of absolute space without having provided his readers with an exhaustive account on either of these levels, his appeal to the existence of absolute space is crucial insofar as his subsequent work relies on the possibility of being able to make claims about the absolute motion or stillness of bodies. More specifically, the existence of absolute space is mathematically and philosophically necessary for Newton’s project because his first law of motion requires a spatial reference system that is not relative. To support the first law of motion, there must be an absolute position away from which a resting body can be said to be resistant to move or compared to which a body moving with a uniform rectilinear motion can be said to move in a right line. Without an absolute point of rest, neither of these claims about a body’s inertia could be absolutely asserted. Instead, a body could be said to appear to stay still simply because one’s own viewing position is moving in the same trajectory and with the same velocity of the body’s.

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6 Newton’s first law is: “Every body continues in its state of rest, or of uniform motion in a right line, unless it is compelled to change that state by forces impressed upon it” (Newton 13). For a discussion of the necessity for absolute space in Newton’s project and especially as this pertains to Newton’s first law, see Jammer pp. 101-2.
The first law importantly allows Newton to be able to deem certain bodies as at rest or as moving uniformly, and to be able to compare other moving bodies to these constant bodies and, in doing so, to make absolute assessments about the forces required to cause such motions. So, even though the *Principia* deals mainly with measurements of sensible bodies moving in what we must identify as relative space, Newton can make universal or true statements about these movements only insofar as he can identify at least one body as absolutely still or one motion as an absolute motion—that is, as long as he can locate what we might call his Archimedean point of absolute stillness or motion.

On a more general level, Newton’s discussion of absolute space signifies and underpins the prevailing theme of objectivity on which Newton’s entire project and methodology depend. Newton is seeking in his *Principia* to explain the law-bound motions of bodies everywhere and anywhere. To this end, he seeks to establish foundations for his project that can be understood as objective—that is, rising above the situated experience of any given individual. Absolute space provides Newton with this very foundation.

II. Descartes and Space

Though Descartes’s and Newton’s conceptions of space differ in a few important ways, they also share crucial characteristics that allow one to understand Descartes’s account of human spatial perception as the sort of account that would necessarily follow from the Newtonian account of space. An examination of the similarities and the
1. Differences Between Newton’s and Descartes’s Analyses of Space

In certain significant ways, Descartes’s conception of space is different than Newton’s. Most notably, Descartes argues that space is not and never can be empty. The world is full of extended beings or res extensa; and, space is synonymous with the extension of these beings (Descartes Philosophical Works, Vol. I, “Principles of Philosophy” Part II, Principles X-XI). That is to say, the spatial world is nothing other than the world of res extensa. Space is, therefore, a plenum—occupied at all points by extended being, and comprehensible only in terms of this extension. Matter—the underlying nature or ‘stuff’ of res extensa—in turn, has no other property that distinguishes it as matter other than extension (Descartes Principles, II.11; Discourse (Meditations) 64).

This interwoven view of the nature of space and matter separates Descartes from Newton, who maintains that space qua absolute space is positively empty of things or matter. Newton identifies the underlying characteristic of matter (and, therefore, of things) not as extension, but rather as mass. In doing so, Newton is able to hold the position that space is distinct from objects, since mass though it can be measured in

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7 Casey writes: “Extension (extensio) is the core concept in Descartes’s view of space. Not only is it the common essence of matter and space, it determines the nature of quantity and dimension—and thus of all measurement of distance as well” (Casey 153).
relation to its volume is not of necessity a characteristic that adheres to or defines space, whereas extension is by definition spatial. Thus, where Descartes maintains that space and extended beings are inseparable, Newton argues that space is necessarily independent of objects.

Descartes also makes no formal distinction between absolute and relative space as Newton does. The space we perceive is space; there is no ‘truer’ or ‘more absolute’ form of space that exists above and beyond our perception of it. This does not imply that space relies on our perception for its existence; rather, it is to say that the space we perceive and space itself are one and the same thing. In spite of this unity, we do not have immediate or ‘perfect’ access to space; rather, our perception of space can provide us with reliable and true information about res extensa and space in general, but it is also open to error through acts of misjudgment. Descartes is not willing to extend even this qualified claim with respect to other aspects of perception. For example, he argues that

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8 See Newton’s definition of mass (Newton 1, 303-4), and Jammer on the distinction between Descartes and Newton (Jammer 99).
9 See Descartes Principles, II.10-11. To some extent, this position marks an important similarity between Descartes and Kant. In “The Transcendental Aesthetic” in the Critique of Pure Reason, Kant also argues that the space we know is singular, and that there is no absolute space beyond this space to which we can have access (perceptually or intellectually) or about which we can say anything. Space is what we perceive it to be. Yet, distinct from Descartes, Kant argues that we can know nothing about space or the world in and of itself on the basis of our perception of it (or, for that matter, on the basis of any faculties we possess). Kant maintains that space is one of two a priori forms of intuition (the other being time) that structure human perception, and that although these forms of intuition allow us to make correct judgments about our perceptions of the world, they do not give us access to anything beyond our perception—that is, to the world itself (see esp. sections A26-30/B42-5, pp. 71-4 of Kant’s Critique of Pure Reason). In his “Sixth Meditation,” Descartes claims more than this; roughly, he argues that insofar as God has given us our cognitive capacities and innate principles of natural geometry that allow us to make judgments about the outside world, and insofar as God cannot be a deceiver, we must have access to ‘true’ judgments about the ‘real’ world (Descartes, Discourse “Meditation VI”). For further discussion of the similarities and differences between the positions of Descartes and Kant on spatial perception and judgment, see footnote 19 below.
our perceptions of color do not resemble anything in the object we are perceiving. In general, he argues that perception does not give us direct access to things themselves. Our perception of space is to some extent an exception to this insofar as our intellect gives us access to innate principles of geometry that, in turn, give us access to the extended nature of objects (Descartes, *Principles (Optics)* Sixth Discourse). On this point, one commentator writes: “For Descartes...the only intelligible and true information to be had about bodies is geometrical” (Maull 257; see also Maull 261-3). In this way, we can conceive of Descartes as arguing that our intellect in conjunction with our sensations of the extended world around us gives us access to ‘true’ space and that this ‘true’ space, contrary to what Newton would argue, is none other than the space we perceive on a daily basis.

2. Commonalities Between Newton’s and Descartes’s Analyses of Space

In spite of these differences, there are important ways in which Descartes and Newton hold similar views of space. In the works of both Newton and Descartes, space is fundamentally without perspective or defining qualities (other than being extended in the case of Descartes). Space has no orientation proper to it, no center, and no differentiation or directionality to it. Moreover, for both Newton and Descartes, space

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10 For an analysis of Descartes’s intellectually-rooted conception of vision, see Fóti’s “The Dimension of Color,” esp. pp. 296-297. After discussing Descartes’s problematic dismissal of color as an essential quality of res extensa, Fóti ultimately argues that while Merleau-Ponty makes an important advance in understanding color perception (and, correspondingly, spatial perception) by recognizing color as the “concretion of visibility”—a recognition that connects the body and color in a way that Descartes’s rational conception of vision does not allow, and that enables Merleau-Ponty to acknowledge color as shaping our experience of depth—he does not fully acknowledge the law-like properties that color perception does appear to follow (Fóti 304-8).
has a definite and regular geometric structure—one that aligns with Euclidean or natural
principles of geometry, and to which we have access through our intellect. Both thinkers
also identify space as existing independently of any perceiving or knowing beings, and as
being unmovable and unchangeable by such beings or by any other force for that
matter. Ultimately, Newton and Descartes both conceive of space largely as a sort of
generic location marker for bodies. To be in a particular spot in space is not something
that a body tends toward or some place to which a body belongs. Instead, the location
of any given body is at most a neutral mark of its position with respect to other bodies. In
this way, both Newton and Descartes consider space as a neutral, directionless entity in
which objects exist and are extended. According to such a conception, objects do not in
any way belong to a particular place. Though Newton calls an object’s position in
absolute space its “primary” place, he intends this only as an acknowledgment that it is
only with respect to the primary places of absolute space that a body can be described as
absolutely at rest or, if the body is moving, that it be described as having a given absolute
motion (Newton 8). There is no sense of belonging or of orientation in this description of
an object’s “primary place.” Likewise, Descartes may say that a body’s reality is

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11 Though in Descartes’s analysis, extended things can move, the position held by the extended
thing that has moved is simultaneously ‘filled in’ by another form of extension. Thus, the space
of extension stays constant even though the particular extended being has changed (Descartes
Principles, II.13).
12 Casey writes of Newton’s position on place: “Dissolving into absolute space, a place of any
sort becomes at best an arbitrary subdivision of such space” (Casey 146); and, with respect to
Descartes’s position: “...place is finally only a simple location in universal space, and as such is
only a contingent and transitional phase in the production of a genuine mathesis universalis”
(Casey 160). In general, Casey describes any conception of space like these as one that “...entails
the reduction of place to position—to a pin-pointed spot in a massive matrix of relations” (Casey
138).
13 Descartes distinguishes the concept of “place” from “space.” He acknowledges that when we
speak of place we often have a sense of a body’s ‘situation’ and that this includes a notion of a
body’s relationship with other body’s. Space, however, lacks even this degree of definition,
designating only a quantity of magnitude and figure (Descartes, Philosophical Works, Vol. I,
inseparable from its extension in space, but this does not imply that there is any
significance to the particular space—the place—held by the extended body.14

In addition to these similarities in their conceptions of the nature of space,
Descartes and Newton share some common views regarding our comprehension versus
our experience of space. For both, the way we comprehend space is in important ways
severed from our tangible engagement with space. Newton, as we have already seen,
argues that we only ever perceive relative space. This perception of space, albeit
practical and our daily means of engaging with space, cannot reveal to us the true nature
of space. Newton argues that we come to comprehend the nature of true or absolute
space only by means of clear and unbiased thought, and the truths that are revealed by
this intellectual activity remain within the realm of philosophical contemplation (Newton
8, 11). So, though we can conceive of an absolute or true space, we can only do so by
means of a process of thought that is divided from our actual experience of space.

Although the space we perceive is the same as ‘space proper’ on Descartes’s
account, there is an important way in which we are here too severed from space.
Descartes altogether separates the nature of thinking things (res cogitans) from that of
extended things (res extensa). A body or an extended thing is, among other things,
something “capable of being bounded by some shape, of being enclosed in a place, and of
filling up a space in such a way as to exclude any other body from it” (Descartes,
Discourse (Meditations) 64-5). By contrast, a thinking thing has no extension, and
neither makes up nor takes any part in space. A thinking thing is that which thinks—that
is, that which doubts, understands, affirms, denies, wills, refuses, and senses (Descartes,

and XI).
Discourse (Meditations) 66). Thus, even though we can think of extension, our thoughts about it reflect only the mathematical truths and representations proper to bodies and space,\(^{15}\) because our mind cannot actually hold within itself anything that is itself extended. Thus, the mind is paradoxically both what allows us to understand extension, and also a form of existence that can in no way ‘hold’ or ‘grasp’ extension within itself. Ultimately, then, Descartes’s model of spatial reckoning separates the mind, or res cogitans, from space insofar as space belongs to the opposing realm of res extensa. Thus, space and objects in space necessarily stand completely outside of the mind.

So, for both Descartes and Newton, we are importantly severed from any direct, tangible experience of space proper. We must rely on our intellect to reach a conception of space. Yet, in the case of Descartes, the mind’s nature is forever at odds with the nature of space, and is, therefore, only able to come up with a mathematical representation of space; and, in the case of Newton, the mind can reach a true understanding of absolute space, but it is an understanding that in no way reflects our daily experience of relative space. In short, then, for both Newton and Descartes, we arrive at our understanding of space (absolute space in the case of Newton) through the rational exercise or calculations of a disembodied and disinterested mathematical mind.

These commonalities stand out as stronger still when one contrasts these shared notions of space with the analysis of space offered by a philosopher such as Aristotle who argues that there is an intimate connection between space and the beings situated within

\(^{15}\) The technicalities of Descartes’s conception of how we comprehend space are discussed in the next section.
Aristotle argues that each type of being has a “proper” place that is far more than a mere designation of absolute stationariness or of the extended area taken up by the being; it is, rather, part of the very form of that being. For example, the proper place of air is necessarily above that of earth, for air is by nature lighter than earth. Aristotle also identifies space itself as having an inherent orientation. There is an up and down to space—an orientation that corresponds with the tendency of heavier things to sink and lighter things to rise. There is also a horizontal and a vertical opposition to space, which is observable in the way that water runs down a hill and stays still on flat ground. Lastly, for beings capable of locomotion, there is an inherent character of left and right to space—a characteristic observable in the fact that these beings tend to have dominant sides of their bodies. Aristotle’s observations about the directionality of space and the natural orientation of substances in space lead to a sense of space as a situated and qualitatively charged entity. Such an analysis of space stands at odds with Newton’s and Descartes’s attempts to fashion what one commentator describes as a “quantitative science of nature” (Maull 256)—in other words, a science capable of demonstrating the existence of laws of nature that hold regardless of the perspective of the viewer and regardless of the supposed uniqueness of the particular object or phenomenon under examination.

Thus, even though Descartes’s conception of space differs from Newton’s in a few significant ways, the similarities in significant areas of their conceptions are strong enough that we can approach Descartes’s account of human spatial perception as the sort

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16 For Aristotle’s discussion of the following points, see the Physics Book IV.1-4 (Aristotle 354-61). For a discussion of the contrast between Aristotelian and Newton physics, see Casey’s chapter “Modern Space as Absolute” (Casey 137-50, esp. pp. 141-7).
17 See ch. 4 of Aristotle’s Progression of Animals for his discussion of the sidedness of animals.
that would follow from the Newtonian conception of space; for Descartes’s theory of
human spatial perception relies on the following principles that are shared by Newton’s
account: 1) Space has a fixed, unchanging Euclidean structure; 2) space is uniform,
limitless, and without direction, center, or secondary properties; 3) space exists
independently of us; and, 4) our intellect provides us with the rational rules for
comprehending space properly. With these core notions regarding the nature of space for
both Newton and Descartes, let us turn to consider Descartes’s conception of how
humans perceive space.

3. Descartes’s Theory of the Visual Perception of Space

Descartes’s theory of the visual perception of space involves two main
components: 1) Movements are set up in sensory organs by res extensa; and, 2) acts of
judgment are made by res cogitans in light of these movements and on the basis of innate
mathematical principles. We must examine the two components in turn, since the fact
that Descartes argues that space and extended things exist as a substance that is
fundamentally different than that of the mind means that when it comes to the visual
perception of these things, there must first be a process by which they come to be
‘examinable’ by or accessible to the mind, and, only then will they be open to the
judgments made by the mind.

To begin, then, Descartes argues that when we see an object, our eyes first receive
tangible input or sensory data from outside of us. Descartes emphasizes that this
reception does not imply that an object sends us or emits an image or form that we
passively receive. Rather, visual sensory perceptions begin merely as movements in our eye that signal varying levels of resistance to the object encountered (Descartes, Philosophical Writings (Optics) 153). Such a movement may be crisp and defined like the sharp rebound made by a ball bouncing off a firm wall, or sluggish and vague like a ball slowing and wavering as it enters a body of water. These sensory movements depend on a variety of factors including the receptive organ, the organ’s current state of fitness and readiness, the time allowed for the sensory input, and the object itself. The existence of these sensory movements does not yet count as the perception of the object. Rather, Descartes argues that these movements exist in the eye in a manner similar to the impressions received through a walking cane used by a blind person. Like the cane, the eye allows a person to experience the resistance or movements caused by a particular object—in this case, based on the disturbances caused by the object that are reflected in the quality of the light that reaches the eye. Yet, Descartes maintains that neither the cane nor the eye can perceive what these varying inputs imply.

Descartes distances what the eye “sees” from what the person in fact perceives by noting that one’s perception can be quite different from the initial images or movements set up in the eye by an object or field of objects. For example, he notes that when a person’s soul is distracted by ecstasy or deep contemplation, the person does not perceive anything around her even though various objects may be touching her or even though her eyes may be open and “looking” at objects around her (Descartes, Philosophical Writings (Optics) 164). Descartes also observes that a vague or minimal set of lines in an engraving can and do come to be perceived by us as a distinct landscape or an identifiable

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18 This rejection distinguishes Descartes from the scholastic understanding of perception in which “forms” or “souls” are transmitted from an object to the perceiver (Kirkebøen 164).
figure even though the lines themselves and the related movements they set up in our eyes could not account for such a perception (Descartes Philosophical Writings (Optics) 165). Moreover, Descartes observes that we are capable of correctly situating objects at different distances from us even when the relative image size of those objects fill the same area in our eyes. For instance, even though a very large, but distant tree fills up roughly the same area in our eye as a near, but small flower, we do not perceive them to be the same size. Since the eye is filled with the same sized image for each of these objects, it cannot be the activity of the eye that allows us to accurately perceive the difference in their distances from us.

In light of these and other examples, Descartes argues that it is not the eye, but rather the mind or the soul that perceives or sees an object. Descartes maintains that the mind, drawing on its own innate rational principles, is responsible for making judgments regarding the form or nature of the sensory movements that have been set up in the eye (or, in the case of the blind person, in the hands and arms through the resistance of the cane) and in doing so is capable of seeing or perceiving the object (Descartes, Philosophical Writings (Optics) 166-7, 170-2). Thus, it is only the soul or the mind, which is united with the body, that is capable of perception per se.

Maull confirms this the relationship between sensation and judgment in Descartes’s conception of distance perception: “Judgment of distance [for Descartes] is reasoning about sensation” (Maull 267). Again, Descartes’s position is both like and unlike Kant’s. In “The Transcendental Aesthetic,” Kant argues that in order for principles of geometry to be universal and necessary as well as expansive—i.e., not analyzed from anything previously given—they must be based neither on empirical intuitions nor on judgments of experience; for, these do not carry the weight of necessity nor can they reveal any principles beyond what is already predicated in them. (On this and the following points, see esp. sections A23-5/B38-41, pp. 68-71 of the Critique of Pure Reason. For an important contemporary argument against Kant’s position, see Lakoff and Núñez’s book Where Mathematics Comes From, in which they argue that mathematics can be both universal and necessary and not given in advance. They make a compelling and rigorously supported argument for mathematics as developing with and through our bodies and our everyday activities and concerns. For passages particularly pertinent to a criticism of Kant’s position
More specifically, Descartes argues that the mind reaches judgments about the spatiality or depth of an object by making calculations regarding the sensory data received through the eyes on the basis of innately understood principles of natural geometry—principles based, as they are for Newton, on Euclidean geometry. In a basic example, the mind will judge that one thing is behind another based on the fact that the one thing is obscured by the second, and the geometric certainty that this appearance could happen only if the first thing stood between the viewing eye and the second thing. Descartes describes the more complicated act of accurately perceiving specific distances as fundamentally arising from the judgments that the mind makes regarding the sensible angles set up between an object and our eyes. To begin, he explains that the shape of the eyes changes depending on the proximity of an object to the eyes; the mind is able to

(20 See Descartes, Discourse ("Meditation V") 87-8 and Philosophical Writings (Optics) 179-72).
notice this difference in response to movements that occur in the brain. This occurs mostly without any awareness on our part. The second part of the process, however, requires an active mental act. In light of the fact that we have two eyes, which are located apart from one another, we receive inputs from objects that arrive at different angles. Descartes argues that our mind reasons about the distance of the object from us on the basis of this difference. It is by means of the mind’s judgment regarding this difference that we can arrive at a perception of the distance that object is from us. He compares the judgment that occurs in this action to that made by a surveyor when calculating distances by means of triangulation (Descartes, *Philosophical Writings (Optics)* 170). Thus, in Descartes’s discussion of our capacity to accurately perceive the nearby flower and the distant tree, Descartes maintains that we perceive their proper distances and sizes not by the resemblance of the pictures formed in our eyes, but rather through the mind’s calculations and judgments about their placement—judgments that are possible by means of the knowledge and opinions we have of the objects’ shapes and

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21 Descartes also describes situations in which we reach a perception of distance by making judgments based on the distinctness or indistinctness of the shape and lightness of the object (Descartes, *Philosophical Writings (Optics)* 170-1). Maull emphasizes that even in such cases, where principles of natural geometry are not directly used, there is still an act of judgment occurring insofar as there is some reasoning that must take place in light of the various visual cues that are being weighed and assessed (Maull 263).

22 Cabe et al. offer the following definition of triangulation: “Finding spatial properties by means of triangles is called triangulation. The length of the base of a triangle and angles the other two sides make with the base completely specify a unique triangle and all properties of that triangle” (Cabe et al. 71). Mathematically speaking, triangulation relies on trigonometric principles, and in its basic form works as follows: Take a given point in the distance (point D), and two points from which to take sightings of that point (points X and Y). If you connect lines among these points, you will have a triangle. Having measured the length between two base points, X and Y, and the angles AX and AY, you now know the measure of angle XAY (180 degrees – (angle AX + angle AY)). Using this information, you can calculate the lengths of lines XA and YA by using the law of sines, which states that in a triangle the length opposite an angle divided by the sine of that angle is equal to the like ratio using the other lengths and angles of the triangle—i.e., length XA/sin angle AY = length AY/sin angle AX = length XY/sin angle XAY.
sizes as well as of our innate knowledge of geometric angles and principles (Descartes, Philosophical Writings (Optics) 171-2).

Descartes acknowledges that we may not experience ourselves to be making these sorts of judgments when we perceive distance. He attributes this lack of awareness to the habitual character of these judgments:

That magnitude, distance and figure can be perceived by reasoning alone, which deduces them one from another, I have proved in the Dioptrics. The difference lies in this alone, that those judgments which now for the first time arise on account of some new apprehension, are assigned to the understanding; but those which have been made from our earliest years in exactly the same manner as at present, about the things that have been wont to affect our senses, as similarly the conclusions of our reasonings, are referred by us to sense. And the reason for this is just that in these matters custom makes us reason and judge so quickly, or rather we recall the judgments previously made about similar things; and thus we fail to distinguish the difference between these operations and a simple sense perception (Descartes, Philosophical Works, Vol. II (Reply to Objection VI) 252).

23 Maull explains that the unnoticed character of spatial judgments accords with Descartes’s position that our ability to make judgments regarding distance presupposes that we have an innate access to principles of natural geometry, and that these geometrical principles are directly applicable to the contents of sensation and, thus, to the external world and all extended objects (Maull 253-4). On a related note, she writes: “One must recall here that the apprehension of distance is characterized in the physiiological and optical works as based on a ‘natural geometry’ or very rapid geometrical reasoning which can easily be mistaken for mere sensation” (Maull 267).
The fact that we do not usually notice our spatial judgments often becomes the source of our perceptual errors according to Descartes. Since our judgments regarding distance occur so quickly and, thus, without our awareness of our rational involvement in them, we often experience our perception of distances as clear and distinct sensations—in other words, as unassailable data offered to us by our environment. Yet, Descartes emphasizes that behind each perception of distance is a judgment for which we are responsible. This judgment is, of necessity, open to error, since it requires that the mind make a certain claim about the sensations it is experiencing, and it may make a mistake in asserting its particular claim. This error will never, according to Descartes, be the fault of the sensations, but rather only of the judgments regarding the sensations.

Thus, for Descartes, such errors can only be avoided or corrected by additional or improved acts of judgment (Maull 267). In some cases, avoiding error may require that one notice certain ‘limitations’ in the sensory data that is available. For instance, one’s eyes, though never ‘wrong’, cannot provide accurate triangulation angles for objects that are either too close or too far from the eyes. In such cases, we should not make hasty judgments about the distance of an object. Instead, we should either refrain from making a judgment, or, if we do make a judgment, we should use other visually enhancing aids at our disposal (such as a magnifying eye glass), draw on other available sensory inputs (such as distinctness or indistinctness of shape or boundary), or appeal to other aspects of our experience or reason to help us to make a properly informed judgment. If we follow these guidelines, we are, according to Descartes, capable of making correct spatial

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24 See Descartes, Philosophical Writings (Optics) 173-4). Maull emphasizes that for Descartes, “The apprehension of distance and all the correlates of magnitude is always judgmental. ... Judgment of distance is reasoning about sensation. Lacking the immediacy of sensation, such judgments are open to error” (Maull 267).
judgments and, thus, of having an accurate perception of and connection to space and the extended world around us.25

III. Current Accounts of Spatial Perception that Accord with Descartes’s Theory

Descartes’s analyses of space as well as of human perception played a significant role in the development of visual and spatial perception research. Descartes, like Newton, proposed that space has a definite and regular geometric structure—one that aligns with Euclidean or natural principles of geometry—and he correspondingly argued that we have unerring access to this structured space through the mathematical powers of our mind. By treating vision as an activity to which calculations and rational and mechanistic principles could be applied, Descartes made a decisive shift in how vision and spatial perception were to be understood and studied.26 Vision became something to

25 Descartes admits that we regularly are in error regarding our perception of distance (Descartes, Philosophical Writings (Optics) 173). This tendency is not, however, a reflection of our capacities, but rather of our misapplication of them. In support of this interpretation of Descartes as acknowledging that we can have an accurate perception of and connection to space and extended being, Maull writes: “Although judgments of magnitude provide indirect access, through perception, to independently existing physical objects, this access is limited, but in the end, only by technical and scientific ingenuity” (Maull 268-69, emphasis original).

26 One commentator writes of this influence: “Descartes’ view that perception...is a rule-governed quasi-mathematical process of inference on the basis of sense data has been widely influential throughout the history of perception research” (Reed 743; see also Heelan 157-58, 171). Kierkebøen and Maull also acknowledge the transformative effect of Descartes’s optics investigations. Kierkebøen writes: “By delimiting the mysterious and thorough form/matter dualism in Aristotelian ontology to the mystery of how movements in the pineal gland result in conscious experience or awareness, Descartes opens the way for mechanistic and mathematical explanations of all kinds of physiological and psychological phenomenon” (Kierkeboen 165). Maull identifies Descartes as providing the first physiological and psychological account that uses mathematics as a means to reveal and explain how perception enables us to perceive the primary
be investigated and explained according to scientific principles whereas it had previously been the object of ontological debates that often ended with the claim that God or, at least, non-quantifiable essences or forms are responsible for what we see. Let us turn now to see this lineage in contemporary accounts of spatial perception in fields including cognitive science and psychology.

1. Connections to Descartes’s Theory of Spatial Perception in Cognitive Science

Before attending to the influence that Descartes has had on contemporary perception research, it is important to acknowledge that his analyses are often thought to be out of date and even wholly at odds with current theories of perception. For instance, in the field of cognitive science, one commentator who examines the relationship between Descartes’s psychology of vision and those put forth by contemporary cognitive scientists writes: “Descartes’ normative concept of the mind as a God-given, truth perceiving faculty is often considered as the very antithesis to CS [cognitive science]” (Kirkebøen 162). This incompatibility can be understood as following from the rejection by cognitive scientists of any stance that ascribes mental activity to an external source.

qualities of bodies (Maull 257). Moreover, many researchers have directly connected their work with that of Descartes. For instance, Tresilian and Mon-Williams see their own research into nearness perception as following from a history that traces back to Descartes: “Since at least the time of Descartes, it has been appreciated that observers could obtain an estimate of the distance of a binocularly fixated point from the knowledge of vergence angle [i.e., the angle that Descartes identified in his account of distance perception by triangulation]. Cabe et al. (2003) confirm that “Descartes’s commentary on triangulation led directly to the many studies on binocular convergence and binocular depth perception” (Cabe et al. 72). Some recent studies that have explored the use of binocular vergence in distance perception include Tresilian et al. (1999) and Mon-Williams and Tresilian (1999). The results of these studies have indicated that binocular vergence is a valuable source of egocentric distance information” (Tresilian and Mon-Williams (2000) 362). For a discussion of one experiment that directly takes up Descartes’s analysis of triangulation in the blind man, see section III.2 below.
such as God, or even one that separates or distinguishes mental activity from the brain or body. It has been a prevalent view within cognitive science that the mind functions roughly like a computer insofar as thinking and other mental processes are made up of computational functions that perform operations on mental representations such as images, rules, logical propositions, analogies, etc. According to this view, the activities of thinking and perceiving are functions or algorithms carried out by various activities and parts of the brain. As such, thought or mental activity cannot be understood apart from the neural actions of the brain. Since Descartes clearly distinguishes the activity

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27 Stanford Encyclopedia of Philosophy, “Cognitive Science: Representation and Computation”, http://plato.stanford.edu/entries/cognitive-science/#His, accessed January 21, 2005. While this approach to the mind and is activities is certainly a dominant one in cognitive science, two contemporary cognitive scientists, George Lakoff and Rafael Núñez, emphasize in their book Where Mathematics Comes From: How the Embodied Mind Brings Mathematics Into Being that increasingly cognitive scientists are increasingly leaving behind the notion that thought is “…the manipulation of purely abstract symbols...a form of symbolic logic” (Lakoff and Núñez 5). They, for instance, present cognition as an embodied activity in which the mind and its thoughts are interwoven with the body and its possibilities in such a way that action and thought cannot be understood separate from one another. With respect to their particular subject matter—mathematics—they argue, then, that the truths of math are developed with and through our bodies and our everyday actions, habits, capacities, and experiences. Lakoff and Johnson speak specifically of spatial concepts as arising through our engagements in an embodied world, in a world structured by our culture, our language, and our interpersonal relationships; see pp. 30-44 of their book Philosophy in the Flesh for their argument for how we develop spatial-relations concepts and also how these inform our cognition as a whole. Accounts of cognition such as these acknowledge the body’s role in what the mind is and how it is shaped, and do so without reducing the mind to cause and effect interactions of physical matter and forces. This ‘creative’ embodied conception of thought is, thus, closer to 20th century Phenomenology in many ways than it is to the “old cognitive science” of the disembodied mind that Lakoff and Núñez describe as prevalent in the 1960s and 70s and that largely is the focus of my discussion of cognitive science. Thus, while I will largely be discussing cognitive science as a field that models thinking on mathematical processes, I acknowledge that not all cognitive scientists see this process as disembodied or unsituated, and that those who are working toward conceptions of the mind and thinking as creatively embodied are in fact very closely situated to the phenomenological studies I will be pursuing in my upcoming chapters. (Lakoff and Johnson’s book Philosophy in the Flesh and Núñez and Freeman’s edited book Reclaiming Cognition are both excellent examples of work in cognitive science that is neither physicalist nor reductivist when considering the mind, the body, and their interrelation.)

28 As one commentator writes: “To a cognitive neuroscientist, the mind is about the brain and its neurological underpinnings” (Boring “Introduction”). On a similar note, another researcher, who is concerned with explaining some of the principle ideas underlying cognitive science, writes:
of thinking from that of the body, his theories of perception clearly stand at odds with those of cognitive science.

Yet, in spite of this clear disagreement, it can still be argued that a strong philosophic lineage connects perception research in contemporary cognitive science with that put forward by Descartes. At their core, many theories of spatial perception in the field of cognitive science posit, as does the Cartesian theory, that the perception of depth is a result of mathematical computations being applied to received stimuli. For instance, David Marr, a contemporary cognitive scientist, considers vision to be primarily an activity of constructing a three-dimensional image from two-dimensional stimulus information received by the eye. Marr analyzes the trajectory and the effects of the incoming light stimuli in terms of standard principles of physics, and the transformation of these stimuli into three-dimensional images in terms of logical and mathematical functions. In this way, Marr’s approach to understanding vision shows strong similarities to that of Descartes. Kirkebøen, a commentator who is concerned with showing the lineage between Descartes and cognitive science and who is also aware of the potential difficulties in doing so (see Kirkobøen quote just above), affirms this similarity: “Descartes’ and Marr’s approach to the study of vision is characterized by a combined logical and physical analysis. They also have in common that they understand vision as a computational and symbolic process” (Kirkebøen 173). In spite of this

“The mind is to the brain as software is to hardware; mental states and processes are (like) computer programs implemented (in the case of humans) in brain states and processes” (Rapaport 2). While they reject the notion that the ‘material hardware’ of the brain or body is inert or absolutely given, Lakoff and Núñez also argue that the mind and our ideas arise from and through our bodies, our actions, our everyday experiences in the world (Lakoff and Núñez xiv, 5, 33-34, 348-53; also see Lakoff and Johnson’s rejection of the conception of the mind as computer-like on pg. 6 of Philosophy in the Flesh).

29 See Marr’s Vision, pp. 24-25, 30. See also Kirkebøen, pp. 170, 173.
agreement, there still remains a fundamental difference between Descartes and Marr (as well as other cognitive scientists working on vision research): Where Marr argues that the computational process is carried out entirely within the domain and activities of the brain, Descartes assigns these mathematical analyses to a mind that has no extension.

Thus, even if to a high degree cognitive science is materialist and computational in its orientation rather than dualistic, and Descartes’s defense of the dualism between res extensa and res cogitans ultimately leads one to separate Descartes’s theory of perception from those theories suggested by contemporary cognitive scientists, there continues to be a dominant similarity among these theories—namely, the active role played by the functioning of geometrical formulas, calculations, and inferences in the organization of spatial perception. Let us look now at particular examples of this connection in research projects in cognitive science as well as in other contemporary approaches to spatial perception.

2. Current Research Projects that Align with Descartes’s Theory of Spatial Perception

One can trace specific comparisons to Descartes’s theory of spatial perception in a sampling of contemporary perception studies. What remains constant throughout these theories of spatial perception is a claim that in some form we have predetermined and organized perceptual and cognitive processes and mechanisms that allow us to perceive space according to rigid mathematical rules. In other words, geometrical calculations are taken as the underpinnings of spatial perception, and space as we perceive it has a fixed and regular structure.
One experiment directly identifies itself as taking up, and ultimately confirming, Descartes’s proposal in the *Optics* that distance perception proceeds in a manner similar to the distance estimates made by a blind man “using ‘natural geometry’” to judge the distance at which two walking canes he holds will intersect (Cabe et al. 71).\(^\text{30}\) This contemporary triangulation experiment reports that blindfolded participants are able to accurately estimate the distance at which two rigid rods—the bases of which the participants hold in their hands—would intersect if extended far enough. The researchers write:

...[R]esults showed that participants gave remarkably reliably scaled distance estimations. Thus, Descartes’s ‘blind man’ illustration, although originally intended simply as an analogy, holds up in practice: The somesthetic information in bimanual triangulation indeed does afford reliable distance judgments, without vision, in a novel task (Cabe et al. 80).

In view of these results, the authors intimate the possibility of an innate “natural geometry” akin to that which Descartes argues the blind man uses in his triangulation estimates. Though the authors suggest that this innate geometric capability may belong to the bodily systems themselves and further suggest that the form of geometry used therein may be nonlinear, they nevertheless draw a clear connection between their hypotheses regarding depth perception and the geometry-based theory of Descartes (Cabe et al. 92-94).

\(^{30}\) For original discussion, see section II.3 above and Descartes, *Philosophical Writings* (*Optics*) 166, 169-70).
Other studies also present visual depth perception as driven by (or at least successfully modeled by) mathematical calculations. One group of researchers argues that depth estimates are reached by “a particularly simple calculation” that provides a weighted average of different types of depth cues such as binocular stereopsis, object motion, occlusion, texture, and so on (Landy et al. 409). This calculation allows for the weight given to any depth cue to change depending on the number of available types of cues and also on the reliability of a given cue both on its own terms and in light of the other available cues. Tresilian and Mon-Williams argue for a similar type of weighted depth cue calculation (Tresilian and Mon-Williams 1999, 686). They propose that distance perception is a result of a perceptual system that takes into account complex interactions between different depth cues, and that eventually settles into an equilibrium, which results in a distance estimate, by means of reciprocal or feedback interactions among these cues.

Another set of researchers discusses the likelihood that an internal mechanism exists that computes direction estimates prior to a person’s movement (Bhat and Sanes 7578). In their research, they acknowledge that it has been shown that humans can calculate environmental distances. They designed experiments in an attempt to try to understand how humans are able to accurately and covertly estimate distances before initiating any movement toward reaching that distance (Bhat and Sanes 7566). They conclude one study by writing: “...[W]e believe that we have revealed and characterized a previously undocumented covert mental process by which humans add distances in the period immediately preceding movement” (Bhat and Sanes 7577).
Still another researcher argues that the problem of how humans perceive three-dimensional depth can be modeled according to a computational theory that solves for XYZ coordinates derived from retinal projections of angles of convergence (Mayhew 388). Although he does not commit himself to claiming that his theory explains the actual workings of human vision, he argues that his calculations offer an explanation for how human vision could work (Mayhew 394, 402).

In all of these cases, spatial perception is understood, as it is for Descartes, as proceeding by means of fixed mathematical rules and calculations. Thus, one’s experience of space is understood as fundamentally impersonal and absolute insofar as spatial perception is accomplished by submitting raw data submitted to a computer-like calculation that produces a rule-bound result. According to this model, one can speak of spatial illusions or spatial irregularities as “inaccuracies” arising from an excess or lack of stimulation, sensory organ failures, impairments to cognitive mechanisms, hasty or flawed application of judgments or mathematical principles, and so on. Barring these ‘problems’, vision can give us a ‘correct’ answer regarding the distances and space we encounter, and, in many of these theories, this perception corresponds or gives us access to the ‘truth’ of an independently existing ‘absolute’ space.

In general, then, these studies treat space as a predetermined container—one that in no way depends upon the authorship or involvement of a human being for its existence or nature. Space is akin to a fixed and eternal coordinate system in which things are best understood as extended or, at least, as measurable substances—that is, as three-dimensional figures located in and defined by the spatial totality. Spatial perception, in turn, is largely understood to be a system of measurement. The activity of spatial
perception can, therefore, be easily compared to the idealized image of a scientist observing allegedly impervious surroundings and objects. In the same way that the ideal scientist is understood as one who investigates and chronicles the nature of things without affecting—or being affected by—this nature, so the spatial perceiver is understood as perceiving objects, distances, and the space of the world that are whole unto themselves both prior to and after the act of perception. Thus, any spatial knowledge gathered by the percipient being is comparable to an inventory of already existent and fixed relations.

IV. Current and Historical Accounts of Space and Spatial Perception that Challenge These Conceptions of Space

Although many contemporary accounts of spatial perception can be understood as descendents of the spatial theories held by Newton and Descartes, there is currently other research into spatial perception that challenges such an analysis of human spatiality and that reveals errors in the underlying assumptions on which these theories are based. In general, this research, which is arising from fields as diverse as anthropology, psychology, biology and some sectors of cognitive science, finds fault with claims that spatial perception can be understood as unsituated and perspectiveless. Instead, key studies from these fields are demonstrating that space is not rooted in or even measured by predetermined and rigid mathematical rules and calculations, but rather develops through the activities and engagements of the percipient being itself.
Though the emphases and conclusions of these studies and theories vary, they share the common conviction that space is not something fixed or something that exists above and beyond a perceiving being, but rather something that arises through the perceiving being’s engagement with the world. Let us examine four distinct, but related challenges: 1) Space perception cannot be defined according to a fixed Euclidean metric; 2) space perception cannot be understood as having a fixed, uncentered, and unlimited character—in other words, as being absolute and without perspective; 3) space perception is not the same for all cultures and is not innate from birth; and, 4) tying the previous three claims together, space itself cannot be understood as a static entity that exists independently of the perceiving being.

1. Challenging the Notion that Spatial Perception is Euclidean in Nature

Although many researchers acknowledge and rely on the fact that employing mathematical geometries can lead to systematized and standardized accounts of human spatial perception, there are also researchers who argue that there are problematic assumptions and restrictions in doing so. Moreover, in many cases, they insist that there are blatant errors in doing so. Before turning to the findings of such research, we should first acknowledge and turn to a brief discussion of mathematical and physical findings to which these current studies are arguably indebted—findings rooted in the non-Euclidean based theories and theorems of mathematicians and scientists such as Poincaré, Heisenberg, Lorentz, and Einstein.31 For our purposes, we will focus on Einstein alone,

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31 For discussions of the contributions that these figures in mathematics and physics made to the ‘modern’ conception of ‘physical reality’, see Margenau’s The Nature of Physical Reality, esp.
since his work into the nature of space so pointedly takes up and argues against the conception of space offered by Newton.32

In his general theory of relativity, Einstein argues that the space of classical mechanics—represented in its ideal form in the absolute space of Newton—is open to at least two significant challenges.33 First, there can be no absolute, fixed reference system or bodies to which relative spaces and other bodies can be referred, because, among other related reasons, “[i]n gravitational fields there are no such things as rigid bodies with Euclidean properties” (Einstein 117, my emphasis). Instead, Einstein demonstrates that bodies and metrics differ in their extension depending on the relative motion the measurer has with respect to them, and also on the gravitational field in which the bodies or metrics are situated (Einstein 84-86, 112-17, 135).34 While a difference in the length

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32 Einstein also stands as perhaps the popular and scientific figurehead for the mathematical and cosmological turn away from Newton. Upon the confirmation by means of observations during a solar eclipse in November 1919 of Einstein’s prediction that gravity has an effect on the pathway of light, the London Times, for instance, published an article with the headline “The Revolution in Science/Einstein Versus Newton,” and a New York Times headline announced “Lights All Askew In the Heavens/Men of Science More or Less Agog Over Results of Eclipse/Einstein Theory Triumphs.” For a general discussion of the revolutionary effect Einstein had in popular and scientific communities, see the online article “Relativity and Cosmos” by Alan Lightman at http://pbs.org/wgbh/nova/einstein/relativity/ (accessed July 20, 2006).

33 For the core of Einstein’s discussion of space in the general theory of relativity and its contrast with the Euclidean structure of space in classical mechanics, see his chapters “Space and Time in Classical Mechanics,” “The Structure of Space According to the General Theory of Relativity,” “The Space-Time Continuum of the Special Theory Considered as a Euclidean Continuum,” and “The Space-Time Continuum of the General Theory of Relativity is Not a Euclidean Continuum” in Relativity.

34 A related claim is made about the time in which these objects persist. Though for the purposes of this study, we will not consider the relationship between space and time in Einstein’s theories, it is crucial to note that the variations observed in the measure of objects are necessarily both spatial and temporal. Space and time are inseparable in Einstein’s discussion; they belong to one concept: space-time. This concept immediately distinguishes Einstein from Newton insofar as Newton, as we saw, argued that absolute space was dependent on nothing else for its existence or determination. In space-time, however, space and time are co-determinants, and a shift in one
of any given body may only become noticeable to a human observer when she changes her motion with respect to the object to a degree that is significant with respect to the speed of light, or when she is observing something of very small mass passing by something very massive (such as a beam of light by a planet’s edge), the fact that differences in the extension of a selfsame object or of spatial shape in general can and do exist rules out the possibility that there is a fixed, atemporal system or structure of spatial measure and location. Space is not, therefore, the pure, independent entity that Newton took it to be; it is, rather, bound up with time and varies in coordination with time. The universe’s ‘structure’ is, then, space-time, and this ‘structure’, which is subject to the ‘warping’ effects of gravitational fields can contain no rigid body or rigid time metrics that could provide a stable background against which consistent or constant measurements could be positively affirmed.

Second, making use of a non-Euclidean geometry that can capture the structure of this space-time that projects and advances in ‘bending’, non-rigid ways, Einstein correspondingly demonstrates that the space of the universe can be finite, yet unbounded, and can be so “...without coming into conflict with the laws of thought or experience” (Einstein 128).35 At the core of this claim is Einstein’s argument that the “…geometrical properties of space are not independent, but they are determined by matter” (Einstein 135, my emphasis). Einstein’s space-time is pulled in on itself, so to speak, by the

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necessarily affects the other. Thus, while it is not substantially addressed in the following discussion, time too is altered by relative motion and by gravitational fields.

35 For Einstein’s explanation of this idea and his arguments for why the universe is shaped in this way, see his chapters “Cosmological Difficulties of Newton’s Theory,” “Possibility of a ‘Finite’ and Yet ‘Unbounded’ Universe,” and “The Structure of Space According to the General Theory of Relativity” in *Relativity*. 

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massive objects within the universe.\textsuperscript{36} This conclusion equally challenges Newton’s position that absolute space is unqualified, unvarying, and limitless. Space-time is necessarily qualified by the arrangement of matter within it, varies overtime according to the gravitational fields of this matter, and is finite insofar as there is a ‘natural’ limit to the reach of these fields. This conception of the universe overcomes the conceptual and practical problems of an infinite universe, such as the need to account for how gravitational forces can act on things becoming infinitely distant, and also to deal with the consequence of a universe that is slowly losing ‘energy’ to the infinitely distant.\textsuperscript{37}

While the following discussions of contemporary criticisms of Euclidean-shaped space do not directly take up these cosmological issues, they are arguably made possible by the mathematics and physics of Einstein and his contemporaries, which established (with an ‘earthshaking’ effect) that Newton’s mechanics, while practically accurate for everyday purposes, do not in fact reflect the structure of the universe, nor for that matter can they capture the gamut of perceptual possibilities. The following studies also make certain advances on Einstein (for our purposes here at least) insofar as they probe further into the daily perceptual experience of the human being, and in doing so even find reason to challenge the dominance of Euclidean principles in our everyday perceptual experiences. Let us turn now to see this further departure from the dominance of the Euclidean metric to measure our world and, more pertinently, our perception of it.

\textsuperscript{36} Since we are on ‘the inside’ of our particular space-time continuum, we cannot ‘see’ this finitude of our universe. For Einstein’s explanation of how space can seem infinite to those within its given dimensions and yet, in fact, is finite, see his chapter “Possibility of a ‘Finite’ and Yet ‘Unbounded’ Universe” in Relativity.

\textsuperscript{37} For explanations of these problems and their connection to the notion of a universe of infinite space, see again Einstein’s chapters “Possibility of a ‘Finite’ and Yet ‘Unbounded’ Universe” and “Cosmological Difficulties of Newton’s Theory” in Relativity.
To begin, one contemporary study demonstrates that although some current research confirms that humans often rely on reference points to organize locations in space, there is not evidence to support the notion that there is symmetry or commutability among these reference points (Sadalla et al. (1980)). The human perception of space between two given points can vary depending on which point is taken as the starting point. For instance, if a person is asked to state the distance between her home and a recognized, but infrequently visited local landmark, she will tend to give a distance that is different than (more specifically, it will be less than) what she will give if asked to consider the ‘same’ distance but to do so from the starting position of the local landmark rather than from her home (Sadalla et al. 517-18). This discrepancy suggests that human spatial orientation and cognition does not arise from rigid, definable rules, but rather varies according to a person’s particular engagement with her surroundings. In view of this, the researchers argue that Euclidean geometry cannot adequately model all aspects of human spatial cognition (Sadalla et al. 527).

Making a related claim, Cutting argues that different modes of traveling, variations in environment, and personal differences are capable of affecting the functions of various distance cues and, consequently, one’s experience of the surrounding space. Generally speaking, he identifies three types of spaces we can regularly experience: personal space (the space of the body and within direct reach of the body), action space (the action space around the body in which one can immediately carry out any given project), and vista space (space at a large visual and practical distance from a person and that extends all the way to the horizon, and that lies beyond one’s immediate activities). He argues that personal space may come close—but, only close—to being Euclidean in
nature, but that action space and vista space appear to be affine—that is, bending or even irregular—in nature (Cutting 32-34).³⁸

Wagner challenges approaches to human spatial perception that are rooted in fixed geometries of any sort. He argues that there is a fundamental and untested assumption made by any approach to visual perceptual psychology that starts out by assuming or applying a predetermined geometry, whether that geometry be Euclidean, hyperbolic, or any type of affine metric (Wagner 493). He argues that the visual space must be defined analytically according to what the perceiver reports of her experience in a wide range of spatial situations and activities, and, this definition must avoid relying on any preconceived assumptions that come with a predefined geometrical system. Wagner also observes that the style of the experimental design may be influenced by the working tenets of the experimenters and may, therefore, inadvertently contain hidden clues that influence the subjects’ responses. In light of this, Wagner argues that a proper investigation into the nature of spatial judgments must include a wide range of experimental situations so that observations about the nature of visual space can, as much as possible, be independent of the experimental method employed (Wagner 483). Following this principle, Wagner’s own far-spanning investigations reveal that “...no single geometry can adequately describe visual space under all conditions” (Wagner 493). Thus, not only do these experiments generally challenge the model that spatial perception has a Euclidean metric, a number of them argue that there is in fact no stable metric to spatial perception.

³⁸ See Previc’s article “The Neuropsychology of 3-D Space” for a further discussion of these terms and their use in various studies and theories.
2. Challenging the Notion that Space Perception is Absolute and Perspectiveless

Related to the rejection of spatial perception as having a fixed, external metric are studies that challenge the claim that human spatial perception can be understood as enduring, geocentric, and comprehensive in character. Opposed to a notion of human spatiality as having a fixed, uncentered, homogenous, and unlimited character, some current research identifies human and mammalian spatiality as dynamic, egocentric, and limited (e.g., Wang and Spelke (2002); Halligan et al. (2003)), and as fundamentally arising through the perceiving being. This position carries through Poincaré’s rejection in the early 1900s of absolute space as the model for human spatiality. He wrote: “Absolute space is nonsense, and it is necessary for us to begin by referring space to a system of axes invariably bound to the body” (Poincaré 257).39

Studies sympathetic to this conclusion reveal that although humans make use of enduring, geocentric, and comprehensive maps when they navigate by using a cartographic map, humans do not appear to have an internalized fixed form of such maps.

...[M]aps are enduring, but [the human spatial representation] is continuously changing: it specifies environmental distances and directions from the animal at that moment, rather than timeless spatial relationships. Second, maps are geocentric, but the representations that underlie place recognition [in humans] are egocentric: they specify the appearance of landmarks from the vantage point of the navigating animal, rather than the distances and directions of all places in the environment from one another. Third, maps are unitary representations, but none of the mechanisms found

39 See Mach on a similar point (Mach 38-39).
in animals gives rise to unitary representation of all perceptible features of
the environment (Wang and Spelke, 378).

Thus, spatial navigation and perception cannot be understood as static, since the perceiver
continually responds in the moment to the developing environmental scene; it cannot be
understood as having its foundations in an absolute geometry or metric, since the
perceiver experiences the surroundings based on her own vantage point and concerns;
and, it cannot be understood as pervasive and complete, since the perceiver does not
approach the environment as having generically interesting qualities, but rather as having
areas and objects of particular interest. These claims regarding the nature of spatial
perception prove challenging to mathematical conceptions of spatial representation
insofar as this dynamic model of spatiality defies complete and accurate description by
any fixed set of mathematical rules or algorithms.

Neuropsychological research continues this challenge through experiments into
spatial cognition that demonstrate that at both a physiological level and at an experiential
level, the human experience of space regularly shifts as a person moves from one type of
activity to another. For instance, in contrast to the notion that human spatiality is one of
“...Euclidean space [that] extends seamlessly to infinity in three dimensions,” many
researchers propose, as we saw above, that there are three frames of reference in which
persons typically function—personal space, peripersonal space, and extrapersonal space
(Halligan et al.126). These researchers argue that even though they have identified
independent physiological processes and mechanisms that relate to activities carried out
in these different frames of reference, these frames of reference and their physiological
correlates are actively altered or modified by human activity. For example, a person can
extend what counts as her peripersonal space by utilizing a tool such as a long stick or a
car. This research suggests, therefore, that human spatiality is not a fixed, pregiven
phenomenon or process. Rather, the research demonstrates that “[w]e are not passive
recipients of information projected onto the retina, but rather actively influence the
perceptual process...” (Halligan et al. 131). This position rejects the notion that a fixed
mathematical rule or set of rules can adequately explain how human spatial perception
functions, since such rules fail to capture and explain the variability and influence of
human concerns, perspectives, interests, and activities on the perception of space
(including our judgments of spatial distances, shape, etc.). Moreover, it also rejects the
notion that space and spatial perception can be defined as absolute or perspectiveless in
character, since the research demonstrates that one’s experience of space is
fundamentally defined in and through one’s own self and activities.

3. Challenging the Notion that Space Perception is Predetermined and Universal

In principle agreeing with the claim that one’s experience of space is actively
influenced by the perceiving being, some anthropologists are currently arguing that one’s
cognitive experience of space is shaped or ultimately determined by the sort of language
one speaks—a position highly at odds with the notion that spatial perception is based on
certain innate, universal, and rigid mathematical principles. Chokron and De Agostini,
for example, observe that French and Israeli people have a tendency to favor,
respectively, a left and a right “mid-point” when asked to bisect a line (Chokron and De
Chokron and De Agostini argue that the tendency to favor a left or a right “mid-point” is seated in attentional tendencies that arise from reading from left-to-right (in the case of the French person) versus from right-to-left (in the case of the Israeli person) as well as from other environmental factors associated with this difference in scanning direction (Chokron and De Agostini 57). In an article focusing on current and past scholarship on such free-viewing visual asymmetries, Chokron identifies additional studies that support the view that reading direction influences visuo-spatial performance in areas other than reading—including visual examination of non-directional stimuli, line bisection, perception of facial expression, aesthetic judgment, problem solving, and lateral motion bias (Chokron 111). The fact that these spatial activities can vary from one culture to the next suggests that it is erroneous to claim that spatial perception is a predetermined and universal feature of the human experience.

Another group of anthropologists supports the notion that spatial perception is not a predetermined or universal feature of human experience by arguing that while most cultures appear to have an egocentric relationship to space, some cultures do in fact experience space as having an absolute structure (Majid et al. (2004); Levinson (1996 and 1998); Levinson and Brown (1994); Levinson et al. (2002)). Though this claim may initially seem to contradict the conclusion of the previous section (IV.2)—namely, that there is no absolute spatial structure—it is rooted in the conviction that spatial perception must not be understood as a universal and pregiven capacity. The researchers maintain that the widely accepted claim that a misidentification of the objective mid-point is rooted solely or even primarily in hemispheric activity in the brain; since this claim can only explain the situation in which subjects favor a point left of center owing to the fact that the spatial nature of a bisection exercise stimulates activity in the right hemisphere of the brain, which can in turn lead to forms of overestimation in activities in the left hemispace (Chokron 109). Their research provides examples in which both a left and a right “mid-point” are favored.
that the effect of language on spatial cognition is significant enough that it affects—even defines—the underlying frame of reference from which persons experience and describe the world around them.

These researchers study the differences between cultures that speak “absolute” languages—i.e., languages that tend to include extrapersonal directional references such as north/south/east/west or uphill/downhill—and those that speak relative languages—i.e., languages that include personal reference systems such as left and right or front and back. Their research shows that correlated with the difference in these language systems is also a difference in the way people solve spatial tasks (Majid et al. 109-10). For example, a speaker of an “absolute” language who is asked to duplicate a maze pattern after turning her body by 180 degrees will trace an identical shape through the maze, and do so in such a way that the end point of the path points toward the same cardinal direction it was in the first maze—e.g., with an end point toward the north. A “relative” language speaker, on the other hand, will duplicate the maze pattern in shape while maintaining an end point that is oriented similarly with respect to her own body—e.g., with the end point always on her right (Majid et al. 110).

These researchers argue that these results challenge the view held by many cognitive scientists, including those discussed above, that spatial cognition is fundamentally egocentric (Majid et al. 112). Their studies indicate that children learning an “absolute” language acquire the abilities to make spatial distinctions and perform spatial tasks at a rate similar to—if not faster than—children learning a relative language; in light of this, the researchers maintain that there is no evidence that an egocentric—i.e., a relative—frame of reference is more natural or more fundamental than an “absolute”
one (Majid et al. 111-12). These observations lead them to conclude that spatial cognition is a variable feature in the human experience. They write:

Frames of reference—the most fundamental concepts underlying spatial cognition—seem unlikely things to vary across languages and cultures. But recent cross-linguistic work establishes that they do. ... Rather than cognitive categories being universal and giving rise to universal semantic categories, as is typically supposed, it seems that cognitive categories are variable and they align with cross-linguistically variable semantic categories (Majid et al. 113).

This research, therefore, suggests the implausibility of a model of spatial cognition that identifies spatial estimation and orientation as based on a series of fixed calculations or on a predetermined and universal cognitive mechanism. Instead, it suggests that language affects the manner of a person’s spatial cognition, and that this effect is visible in the different linguistic and practical approaches to spatially related activities.

That is, the linguistic system is far more than just an AVAILABLE pattern for creating internal representations; to learn to speak a language successfully REQUIRES speakers to develop an appropriate mental representation which is then available for nonlinguistic purposes (Pederson et al. 586, emphasis in original).

Levinson and others have additionally concluded that this effect cannot be explained, as some have claimed, merely as a result of the influence of material culture or of ecological factors, because they have found neighboring cultures that share such factors, but which have different linguistic styles (Levinson et al. 2002)).
In these accounts of spatial perception, there is a common recognition of space as depending in a significant way on the percipient being and its situation, and as, therefore, failing to hold at a universal level or to be predetermined in any way. Even in studies that argue that some cultures perceive space in absolute terms, the roles of the percipient being and her body are central insofar as the “absolute” references are learned and, thus, require the activity of the perceiving being, and the “absolute” mappings can in various ways be traced back to some original situated engagement that the perceiving being has with her surroundings. Thus, it cannot be argued that this absolute spatial perception is given to the perceivers in advance, so to speak. Cablitz, for instance, maintains:

...[C]hildren strongly rely on perceptual input from the environment in order to use an absolute system. ... They have to acquire an acute sense of orientation, i.e. they have to learn how their ego is located in relation to the fixed local landmarks at all times and in all places (Cablitz 48, my emphasis).

In a more tangible example, when children in one “absolute” language culture use the directional gestures common to the language, they, unlike the adults, move their bodies and look in the appropriate direction before employing the gesture; and, it is only after this that they speak the word or sentence that is supposed to accompany the gesture. Similarly, in some of these languages, various winds are identified as the “absolute” markers, but, in order, for these geocentric markers to mean anything, they must be felt by the person who uses them. In other cases, the terms uphill and downhill are the “absolute” markers—terms that necessarily involve a bodily orientation of what counts as higher and lower, and so on. Cablitz’s argument suggests, then, that even children who
are learning an “absolute” language system initially rely on personal perceptual interactions with their local environment (Cablitz 48). In light of this research, spatial perception cannot be understood as an already given or universally determined feature of the human experience.

4. Challenging the Notion that Space Exists as an Independent Entity

A common conclusion can be drawn from the varying theses of these research projects: Space, as far as humans perceive it, cannot be understood as a rigidly existing, independent entity. This conclusion is captured more broadly in still another researcher’s work. In his ecological approach to visual perception, James J. Gibson rejects the notion that we exist as perceiving subjects who receive data from a self-contained and value-free surrounding (Gibson 140). His research into human and animal visual perception challenges the notion that the object and spatial surroundings in general are in no way ‘touched’ or defined by the subject’s activities. Contrary to this view, Gibson maintains that when we perceive something, we are defined by this encounter as is the thing we are encountering. He writes:

The perceiving of an affordance\footnote{Simply defined, 
affordances are what a thing or the environment as a whole offers or provides for animals. In Gibson’s own words, “The theory of affordances implies that to see things is to see how to get about among them and what to do or not do with them” (Gibson 223).} is not a process of perceiving a value-free physical object to which meaning is somehow added...; it is a process of perceiving a value-rich ecological object. Any substance, any surface, any layout has some affordance for benefit or injury to someone. Physics may be value-free, but ecology is not (Gibson 140).
In identifying things as inherently value-rich, Gibson not only emphasizes that an animal is shaped by the things and possibilities it encounters, but also that an affordance must be measured relative to the animal (Gibson 127). Thus, although possibilities for shelter, food, and disguise are present, for example, in prairie grasses regardless of whether or not these affordances are being actively engaged, they exist only to the extent that there is a type of animal for which the particular possibility can be significant. The prairie grasses are not and cannot be a medium for aquatic travel, for instance, since they do not possess the characteristics that would afford buoyancy or breathing capacity for underwater creatures. An affordance must, therefore, be understood as both a fact of the environment and a fact of the animal’s behavior.

Reaching beyond the relationship between animals and any particular affordances, Gibson argues that the relationship between animals and their habitat has a similar type of complementarity. Gibson challenges the common definition of niche as a geographic area or climate suitable for the survival of a certain species of animal. According to this definition, an animal’s niche specifies where it lives. By contrast, Gibson maintains that we must look to the activities of an animal in order to understand what counts as the animal’s environment. In view of this, he defines a niche according to how an animal lives—that is, according to its habits of eating, of protecting itself, of mating, of birthing and raising its young, and so on (Gibson 128). As was the case with affordances, so with niches: An animal defines its niche as much as the niche defines the animal. The animal can mark out a niche for its activities only insofar as its surroundings afford possibilities for those activities; and, similarly, a surrounding environment can be identified as a niche
only insofar as an animal does or, at least, can take up the possibilities afforded by the environment.

We can extend Gibson’s recognition of this complementarity to that of the experience of space as a whole. Space is not a site where different organisms and isolated niches exist; rather, space is a system of activity composed of interwoven niches—that is, a system defined mutually by organisms and their surroundings. He writes of space (or, in his words, the medium in which we exist): “Instead of geometrical points and lines, then, we have points of observation and lines of locomotion” (Gibson 17); and adds later: “The notion of [a] space of three dimensions with three axes for Cartesian coordinates [is] a great convenience for mathematics, ... but an abstraction that [has] very little to do with actual perception” (Gibson 148; see also Gibson 69). Thus, like the previously discussed research, Gibson’s description of space also rejects any conception that space is static, pregiven, rigid in structure, universal, and so forth.

V. Conclusion

In view of these various research projects, we must ask: Can a Newtonian or Cartesian conception of space and spatial perception or their derivatives accurately capture our experience of our spatial relationships with the objects in our world? Do things stand against us at the fixed distance that a ruler marks out? Do we experience ourselves as passing through an ever-constant grid of ‘absolute’ space? The studies in this section already suggest that our response to these questions must in certain
significant ways be of a negative character. When we attend to our experience of space, we may acknowledge that at times we engage space as if it were a grid-like container, but if we limit ourselves to this way of understanding of space and our experience of space, we fail to provide a comprehensive account of human spatial experience and, ultimately, of the human experience as a whole.

In the next chapter, I propose that a phenomenological account is able to provide a comprehensive account of human spatial experience and of space as such. Such an account demands that we recognize space as something that we live, as something that develops along with us. Thus, rather than understanding space as an independent entity into which we are inserted, we must recognize that we experience space as the extension of our actions, our moods, our possibilities, and so forth. Unlike the spatial conceptions presented by Descartes and Newton and those who have followed them, this account allows for a range of spatial phenomena—including those situations in which we do in fact approach the space around us a rigid mathematical grid.
Chapter 2. Heidegger and the Phenomenological Conception of Space

“When we speak of man and space, it sounds as though man stood on one side, space on the other. Yet space is not something that faces man. It is neither an external object nor an inner experience. It is not that there are men, and over and above them space” (Heidegger, “Building Dwelling Thinking” 156).

Having concluded in Chapter 1 that we neither enter space as if it were a container nor do we impose upon our ‘outer’ experiences a rigid predetermined spatial form, we must now consider how space does exist for us. To pursue this question, I will turn to phenomenology—a philosophical method that involves turning to the object or phenomenon under inquiry in a manner that allows it to show itself.42 Heidegger writes of this method:

To have a science ‘of’ phenomena [i.e., phenomenology] means to grasp its objects in such a way that everything about them which is up for discussion must be treated by exhibiting it directly and demonstrating it directly. ... Here “description” does not signify such a procedure as we find, let us say, in botanical morphology; the term has rather the sense of a prohibition—the avoidance of characterizing anything without such demonstration (Heidegger, Being and Time H.35, M/R 59).

42 For a more detailed description of the phenomenological method, see Heidegger, Being and Time H.27-39, M/R 49-63. Pagination will be listed according to Heidegger page numbers—e.g., “H. 27-39”—and the translation’s page numbers—e.g., M/R 49-63.
To achieve such a demonstration, the phenomenological method insists that human situations and experiences must be understood on the basis of what it is like for a person to live the situation or experience. Thus, phenomenology describes experiences as they appear to the first-person perspective rather than the way they appear to the third-person perspective of the scientific observer. Far from being ‘subjective’ in the sense of being arbitrary or privately held, phenomenology “is opposed to all free-floating constructions and accidental findings,” and demands “a kind of self-evidence” rooted in the phenomena’s showing of themselves (Heidegger, Being and Time H.28, M/R 50). In other words, phenomenology aims to let us see the object of our inquiry, rather than telling us in advance what we should or do see.

Though it may initially seem as though seeing a phenomenon should be effortless or obvious, phenomenology reveals that there are many ways in which phenomena are hidden from us. Even the most—perhaps especially the most—pervasive phenomena in our experience are not ones that we can most readily or immediately grasp. Our preceding discussion of spatial conceptions offers confirmation of this very point insofar as it demonstrated that centuries of study into spatial phenomena and the phenomenon of space itself can still result in an inadequate account of space in the human experience. Moreover, the conceptions that are yielded therein not only fail to capture the nature of space, they also encourage and solidify an obscured understanding of space. Even without an ‘institutional blur’ such as this, the phenomena themselves can have certain built-in obstructions that block our ability to see them for what they most primordially are. For instance, space is, for the most part, something we do not notice; we are always

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43 For a discussion of the way phenomena can be covered over, see Heidegger, Being and Time H. 36, M/R 60-61.
looking beyond it in order to see something ‘in’ it. In this case, the hiddenness of space is actually a constitutive feature of what space is as a phenomenon. Even when space is the specific object of our attention, it can also show itself to be a phenomenon that has shifting appearances depending on the varying involvements a person may have with it. Thus, it can be easy to notice certain features of space, but miss others, and to make a faulty interpretation of space on the basis of an incomplete view. By pursuing a phenomenological description of space, we will be able not only to reach an adequate ‘seeing’ and interpretation of the phenomenon of space and spatial experience in the human situation, but also to see how certain ‘deficient’ understandings of human spatiality (such as those discussed in the chapter above) have explanatory roots or roles in our spatiality.

I begin this study by appealing in this chapter to Heidegger’s analysis of the worldly character of human beings. Heidegger argues that our unique way of being entails the ‘having of’ a world, and that only through our existence is something like a world possible. Moreover, he demonstrates that it is only on the basis of our way of being-in-the-world that something like space and spatiality can arise. I use Heidegger’s examinations of world and space as a means for providing an initial phenomenological sketch of space and significant aspects of human spatial experience, including the experiences of distance, orientation, measurement, and location. This will allow us to turn, in chapter 3, to an examination of the body’s role in spatial experience. For that analysis, I will draw significantly on Merleau-Ponty’s phenomenological studies of embodiment and spatiality, and conclude that space arises from and with our way of
being-in-the-world, and that space is a dilation, so to speak, of our bodies. First though, we must understand Heidegger’s phenomenological conception of being-in-the-world.

I. Being and Being-In

Beginning a phenomenological examination of space requires that we consider underlying phenomena of our existence that make it possible for us to have an experience of space in the first place. To this end, we will take up Heidegger’s phenomenological interpretation of the particular type of Being that is unique to humans—or, using his expression, to Dasein—namely, the sort of Being that is as being-in-the-world.44 Such an examination is necessary for our current study insofar as Heidegger demonstrates that we are spatial beings only on the grounds that we are first and forever beings that open onto a world, that have a world. He writes:

...Dasein itself has a ‘Being-in-space’ of its own; but this in turn is possible only on the basis of Being-in-the-world in general. ... Not until we understand Being-in-the-world as an essential structure of Dasein can we have any insight into Dasein’s existential spatiality. Such an insight will keep us from failing to see this structure or from previously cancelling it out—a procedure motivated not ontologically but rather ‘metaphysically’ by the naïve supposition that man is, in the first instance,

44 A brief discussion of the significance of “Dasein” will follow in a few pages. For a fuller analysis, see Heidegger, Being and Time H.11-15, M/R 9-12 and H. 42-45, M/R 39-42.
a spiritual Thing which subsequently gets misplaced ‘into’ a space (Being and Time H. 56, M/R 82-83).

By examining the essential way in which we are as being-in-the-world, we will not only avoid making conclusions regarding space that fail to be confirmed by or grounded in the nature of our existence, we will also begin to see how our spatiality and spatial conceptions arise. Let us begin this examination by considering how we are not the sort of being that simply persists alongside other beings; from here, we will gradually develop a sense of what it means for us to be beings who have a world, or, more precisely, who exist as being-in-the-world.

1. Being and Being-In as Care and Relevance

A human being cannot be understood as merely one objectively present thing among many other objectively present things, since as Heidegger rightly observes, we do “...not just occur among other entities. Rather [we are] ontically distinguished by the fact that, in [our] very Being that Being is an issue for [us]” (Heidegger, Being and Time H.12, M/R 32). In other words, we are the type of being—and the only type of being—that cares about its existence—about its nature, about its continuation, about its meaning. Based on this care, we are also a type of being that concerns itself with things.45 In other words, our concern for things is not an elective or secondary feature of our existence. Rather, this concern for things is a primordial structure of our way of being insofar as 1) we care for our existence, and 2) we exist in such a way that we are always finding

45 See Heidegger, Being and Time H. 191-200, M/R 235-44 for a fuller discussion of care. For a discussion of the relationship between “care” and “concern,” see Heidegger, Being and Time H. 57-8, M/R 83-84.
ourselves wrapped up in the things of our world. As such, we cannot help being concerned for things. On a readily observable level, anytime we look from the ‘constructed’ world back to ourselves, we can see ways in which we and our care serve as the inherent criteria by which we ‘develop’ our surroundings. Sidewalks, for example, are paved evenly, because it eases the activity of walking; street lights and indoor lamps are provided for nighttime hours and for times of bad weather, because our eyes require a certain amount of light for us to see when we move or look about; horns and loudspeakers are standard features in public buildings or vehicles, because there may be messages or warnings that we need to hear over the regular din of our activities, and so forth. In these examples of the concern we show in constructing and arranging the things of our surroundings, we see evidence of the care we have for our being.

These are, however, only the most outward signs of our care. We can equally see signs of this care in the way in which are always:

...having to do with something, producing something, attending to something and looking after it, making use of something, giving something up and letting it go, undertaking, accomplishing, evincing, interrogating, considering, discussing, determining.... All these ways of [being wrapped up in things] have concern as their kind of Being (Heidegger, Being and Time H. 56-7, M/R 83).

Even when we are “leaving undone, neglecting, renouncing, [or] taking a rest” from things, we are doing so on the basis of an original concern with them (Heidegger, Being and Time H. 56-7, M/R 83); in other words, although we may be disinterested in things, ignoring things, or even ignorant of things, we are never isolated from them. Even
something as distant and ‘foreign’ from us as the stars in the night sky are still things with which we are concerned. Stars are something we have read about in a science text book; something that scientists are busy studying in an expensive laboratory; things that stir wonder in us when we look into a midnight sky; things that have—whether we are aware of this or not—enabled people to navigate previously unknown territories, make maps, learn about the time, motion and shape of our earth, and so forth. Our existence reaches into the stars, and the stars are, thus, ‘objects’ of our concern. Whatever things we encounter or can encounter are marked by our existence and by our care for our existence. Whether or not we explicitly notice this caring and its primordial role in our way of being, we are always already immersed in and inseparable from things. As such, we can never be the sort of being that stands wholly apart from other beings—even from ‘mere’ things. In other words, we can never be ‘objectively present’ with respect to things even though we may take up an attitude of looking at them as though we were.

Accordingly, human beings are—whether or not we explicitly recognize this—always encountering ourselves and our care in things. To capture this fundamental character of human existence and also to draw us away from our habitual notions of what a human being is, Heidegger identifies us as Dasein. Literally, Dasein means “there-being” or “to be there.” This phrase draws our attention to the way in which, as we have seen, our nature is to be as always there in things. As Heidegger writes: “‘Being-in’ is...the formal existential expression for the Being of Dasein...” (Heidegger, Being and Time H.54, M/R 80). In another text, he describes Dasein as the sort of being that dwells

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in the things for which it cares. Heidegger traces an etymological connection between “to dwell” and “to care for”:

The way in which you are and I am, the manner in which we humans are on the earth, is **Bauen**, dwelling. ... The old word **bauen**, which says that man is insofar as he **dwells**, this word **bauen** however also means at the same time to cherish and protect, to preserve and care for.... (Heidegger, “Building Dwelling Thinking” 147)

Insofar as we exist, we are forever concerned with things, there in things, dwelling in and through things. Each of these descriptions of Dasein points to the way in which cannot be understood in isolation from things or be understood as merely one type of objectively present thing among many others.47

As this analysis already implies, things also cannot first and foremost be understood as independently existing objects. Things are always already wrapped up in a relation of relevance for us: There is no experience of anything that is devoid of this context of relevance. A thing has significance and ‘is’ through us: it is “something-in-order-to” that has us as its “for-the-sake-of-which.” Heidegger describes this character of a thing as the way in which it is ready-to-hand (Zuhanden)—that is, the way in which the thing is primordially ‘defined’ through its way of being for us, and is experienced by us

47 Though Heidegger refers to human beings as Dasein throughout his works in part to overcome our stagnant conception of what it is to be human, I will frequently identify humans by words such as ‘human,’ ‘human being,’ ‘we,’ ‘us,’ etc. That said, I take Heidegger’s terminology to be an important recognition that such words do in fact tend to bring with them calcified notions about our nature—notations that I am also attempting to challenge. Moreover, “Dasein” is a particularly potent designation for “human being” in light of my own project, because it underscores the implicitly spatial character of human existence.
as such. The phrase ‘ready-to-hand’ captures the way that the thing is something ‘handy’ for us—that is, something that we use without prior theoretical interventions for the particular purpose that it affords—the in-order-to that it has for us. We engage the fork as for-enabling-us-to-eat, the phone as for-allowing-us-to-talk-over-a-distance, the window as for-sheltering-us-while-still-allowing-us-to-have-a-view, the rock as for-us-to-avoid, or to-sit-on, or to-enable-the-study-of-the-history-of-the-earth, and so forth. Even sensations are always already wrapped up in this way of being for us. As Heidegger writes:

What we ‘first’ hear is never noises or complexes of sounds, but the creaking waggon, the motor-cycle. ... The fact that motor-cycles and waggons are what we proximally hear is the phenomenal evidence that in every case Dasein, as Being-in-the-world, already dwells alongside what is ready-to-hand within-the-world; it certainly does not dwell proximally alongside ‘sensations’; nor would it first have to give shape to the swirl of sensations to provide the springboard form which the subject leaps off and finally arrives at a ‘world’. Dasein, as essentially understanding, is proximally alongside what is understood (Heidegger, Being and Time H. 163-4, M/R 207).

We grasp this ready-to-hand character of things most fully when we do not explicitly notice this character. For example, it is when we are using a pencil to write a note that we experience—albeit not thematically—the thingliness of the pencil. If we stop to look at the pencil and to examine it as a scientist might, or if the pencil’s lead breaks and it lies

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48 For Heidegger’s discussion of “ready-to-hand” and “present-at-hand,” see Being and Time H. 69, M/R 98-99.
uselessly in front of us, we lose touch with the pencil’s character as ready-to-hand for us. In these instances, the pencil becomes, to use Heidegger’s language again, something that is present-at-hand (Vorhanden)—that is, something that is set apart from us as an ‘objectively present’ entity. Even though this is an approach we can take toward the pencil, no amount of examining the pencil in this way will allow us to see the way the pencil is for us. The pencil is an instrument for transcribing our ideas, a way of communicating, a means to keep track of figures and thoughts, and so forth.

We do not add this ready-to-handness of the pencil to a preexisting and independent entity—that is, to something present-at-hand. This is to say, we do not ‘run up against’ a thing and some ‘assigned’ purpose; instead, we experience these things through their way of being for us. It is only on the basis of the pencil’s primordial way of being-for us as ready-to-hand that it can ever be taken up as an object that is present-at-hand. Thus, the readiness-to-hand of the pencil and of all other things, ...is not to be understood as merely a way of taking them, as if we were talking such ‘aspects’ into the ‘entities’ which we proximally encounter, or as if some world-stuff which is proximally present-at-hand in itself were ‘given subjective colouring’ in this way. Such an Interpretation would overlook the fact that in this case these entities would have to be understood and discovered beforehand as something purely present-at-hand, and must have priority and take the lead in the sequence of those dealings with the ‘world’ in which something is discovered and made one’s own (Heidegger, Being and Time H. 71, M/R 100-1).
Contrary to being a mark of ‘mere subjectivity’ or of our adding to something with a previously established or isolated identity, when we experience or describe the readiness-to-hand of the pencil, we are in touch with the pencil as it is ‘in itself.’ The pencil as it is ‘in itself’ is not, as one may typically take this phrase to imply, a ‘pure’ entity to which we have no ultimate access. Instead, the pencil is known as it is ‘in itself’—that is, as it most primordially is—when we discover its character through our engagement of it as a pencil—i.e., when it is experienced in its ready-to-handness. This is the case even if we are speaking of a ‘natural’ formation such as the sun: There is not first some isolated being to which we add meaning; the sun as we originally discover it in our experience is for giving light, for providing warmth, for marking out the days, etc. The same can be said of ‘Nature’ in general. “If its kind of Being as ready-to-hand is disregarded, this ‘Nature’ itself can be discovered and defined simply in its pure presence-at-hand. But when this happens, the Nature which ‘stirs and strives,’ which assails us and enthralls us as landscape, remains hidden” (Heidegger, Being and Time H. 70, M/R 100). Thus, even when it comes to entities that we think of as the most ‘independent,’ as the most ‘natural,’ we are always livingly involved in these things, and they are always through us. We might say that we live things.

49 In The Culture of Nature, Alexander Wilson makes a related argument that although we typically take nature to be something that exists independently from us, it should not in fact be understood as a ‘natural’ or ‘objectively independent’ occurrence or ‘fact of the world,’ but rather as a culturally constructed phenomenon that changes in response to social and personal attitudes and presumptions. Wilson maintains that we cannot in good faith understand nature and ourselves as separate or separable entities since humans and nature construct one another and are forever implicated in one another. Our daily and long term projects are, for instance, continually shaped by ‘natural’ concerns such as weather contingencies, travel and fuel needs, food and excretory demands, aging and disease, and so forth; we are, in other words, always seeing nature in terms of our demands, needs, and interests. Moreover, when we are considering nature as such, we always define it by and understand it according to humans, human activities, human interests, and so forth; and, this is so regardless of whether we are considering nature in light of obvious human issues (such as concerns regarding public lands or logging) or purportedly non-human issues (such as the description or study of the larval behavior of the praying mantis).
There is a real way, then, in which without us things would not be.\textsuperscript{50} Though a street would not disintegrate per se if we were not there to notice it or if we no longer existed, the street would no longer be a thing as such. The street would no longer be an it that is acknowledged as a something on which traffic moves, as significant for purposes such as traveling and commerce, as for someone, since there would be no one to uncover and sustain such meanings for it. The street, as with any other thing, can only emerge as something that is something through a being that cares for its own self and thereby cares for things that pertain to its existence. Thus, the street could no longer be a phenomenon and would effectively \textit{vanish} if we were no longer existent, since human beings are ‘responsible for’ establishing and sustaining \textit{thinghood} for every ‘it’ that they encounter. Owing to this, things are in such a way that they are always wrapped up in us.

Fundamentally, Heidegger argues that if Dasein no longer existed, \textit{being} as Dasein experiences it would itself cease; for, he demonstrates that it is only on the basis of our human care for our own existence that there is \textit{being} at all. He writes:

\begin{quote}
Of course only as long as Dasein \textbf{is} (that is, only as long as an understanding of Being is ontically possible), ‘is there’ Being. When Dasein does not exist, ‘independence’ ‘is’ not either, nor ‘is’ the ‘in-itself.’ In such a case this sort of thing can be neither understood nor not understood. In such a case even entities within-the-world can neither be discovered nor lie hidden. \textbf{In such a case} it cannot be said that entities are, nor can it be said that they are not (\textit{Being and Time} H.212, M/R 255).
\end{quote}

\textsuperscript{50} Merleau-Ponty makes this very point when he writes: “The thing is inseparable from a person perceiving it, and can never be actually \textit{in itself} because its articulations are those of our very existence, and because it stands at the other end of our gaze or at the terminus of a sensory exploration which invests it with humanity” (\textit{Phenomenology of Perception} 320).
Thus, we can argue that if beings like us did not exist, the street would not only lose its thingliness, but also its very ability to be in any form whatsoever.\textsuperscript{51}

2. The Worldliness of Being and Being-In: Being-in-the-world

Though we have not yet explicitly examined world or our worldliness, we have already been involved in explicating these through the discussion of our way of being in things. As Heidegger writes, “Whenever we encounter anything, the world has already been previously discovered, though not thematically” (Heidegger, \textit{Being and Time} H.83, M/R 114). More explicitly, our ability to be in things is only possible on the basis of our having a world, and it is also reflective of the very character of this world. Let us consider these points in turn. To begin, it is only through a world that things can show themselves to us as things. Although we are always ‘thrown outside’ of ourselves into things, we do not experience ourselves as unified with or undifferentiated from these things. We experience things as distinct from ourselves, as objects that appear to us.

The world is the “wherein” that allows things to show themselves to us, the “wherein” that allows for our reaching ‘outside’ of ourselves.\textsuperscript{52} Describing the world as a “wherein” does not imply that it is a container for our engagements with things. As our analysis of our engagement with things already shows, we do not simply collide with pre-existing entities; we are livingly engaged in them. Corresponding to this, the world is also not something we merely happen upon, nor is it merely a comprehensive

\textsuperscript{51} For Heidegger’s discussion of “Reality” as dependent on Dasein’s care, see \textit{Being and Time} H.211-212, M/R 254-55, and H.226-30, M/R 269-73.

\textsuperscript{52} For Heidegger’s discussion of the world as the “wherein,” see \textit{Being and Time} H. 86-7, M/R 119-20.
conglomeration of objectively present entities. Our way of being is never initially one of isolation from a preformed world, but rather is from the beginning one of opening out onto a world, and this world is as bound up with our way of stretching of ourselves into things. In other words, both the world and we are as being-in-the-world. As Heidegger writes, “Ontologically, ‘world’ is not a way of characterizing those entities which Dasein essentially is not; it is rather a characteristic of Dasein itself” (Heidegger, Being and Time H.64, M/R 92); as such, “…the world is disclosed essentially along with the Being of Dasein” (Heidegger, Being and Time H. 203, M/R 247). Only with us then, does a world come to be, insofar as we are the beings for which and by which the world is.53 In other words, the world is as our “wherein,” a “wherein” that we live.54

53 Though referring specifically to Merleau-Ponty’s analysis of world, Barral makes a germane point regarding the lack of ‘idealism’ in an existential interpretation of world. She writes: “When Merleau-Ponty says that man makes the world to be for himself, he does not propose an idealism. On the contrary, he asserts that the world is a solid tissue, already there before I make any observations about it or analyze it. But it is only man’s presence that makes the world possible as world: it is the existential subject, or the conscious being who alone can be aware of and give meaning to the world” (Barral 171, my emphasis).

54 Sartre’s discussion of the experience of vertigo brings out our role in ‘maintaining’ a world (See Being and Nothingness, pp. 50-52, 65-81). Sartre describes a situation in which a person is walking by a cliff’s edge, and suddenly realizes that he is capable at any moment of throwing himself into the chasm below. In this moment, he experiences that he is a being who is always free—free to continue walking down the path, free to sit and enjoy the view, or free to hurl himself over the edge. There is no greater power or physical barrier between him and these choices. He alone is responsible for the path he follows. Though the cliff is the same cliff it was moments before, it turns in this moment of recognition from a beautiful or perhaps a dull rock formation to a looming, threatening, and even inviting chasm. It will be tempting for him to deny that the change is rooted in him; he may rather consider that the pathway by the cliff is actually an objectively dangerous path, not safe for crossing without special safety gear. Yet, if he is to face the situation in good faith, he must acknowledge that the cliff has changed due to something that has occurred within him. He is now seeing the cliff in view of his recognition that his life path is not guaranteed by any power beyond him. He is responsible for maintaining and choosing what he will do. There is no set and stable world that will provide him with a reliable path. In view of this recognition, the cliff and the world in general seem suddenly frightening, because they do not provide him with the solid foundation he previously thought they had. He is being confronted with the way in which the world is given its stability and character by himself, and that it is not a self-contained and completed entity, and especially not a guarantee or lawgiver for what he does or will do. Sartre’s analysis reveals that we are responsible for maintaining (or destroying) our world. We experience a stable world around us because we maintain this
We can see further into the structure of the world as the “wherein” by attending more closely to the way that things do not exist for us as entities isolatable from one another; instead, “[a] totality of useful things is always already discovered before the individual useful thing” (Being and Time H. 69, Stambaugh translation p. 64). Our experience of the pencil attests to this. When we use the pencil, we are not merely involved with it as an isolated thing. Along with the ready-to-hand pencil comes a web of other things and activities. A pencil always already implies, for example, some material on which to write as well as a firm surface on which this material can rest. This activity of writing also always already involves some idea or image to be communicated, and this activity suggests that there is an audience—personal or public—to which this is to be communicated. There must also be some type of forum or media outlet by which this message can be delivered. These factors bring with them organizations, auditoriums, buildings, printing devices, deadlines, announcements, bulletin boards, publications, lights, paper mills, parking lots, and so forth. We see, then, that the ready-to-hand pencil opens us up to a totality of interwoven references. The world is the “wherein” of this referential totality, and we are at its ‘center’ as the “for-the-sake-of-which” of all these references.

stability. We are capable of feeling vertigo, because we can realize the awesome character of our responsibility in the creation and continuance of our world. Heidegger’s discussion of anxiety resonates with this analysis. See Being and Time H.184-191, M/R 228-35, esp. H. 187, M/R 231-32. I will discuss the experience of anxiety and its relationship to our way of being-in-the-world in greater detail in the conclusion to this work.
3. The Interpersonal Character of Being-in-the-World

Up until this point, we have primarily approached the discussion of world from the standpoint of a solitary person. Yet, as our discussion of the totality of references already suggests, our being-in-the-world is also interwoven with other persons. When a person encounters a street, for instance, she does not come to know it as a privately held entity; nor can she. The street shows itself as a path where others like her travel. Likewise the street implies the existence of people that made and maintain the road, the people who gathered and delivered the sources of material that make up its enduring expanse, the people who designed and use the network of city streets and highway entrances into which this street fits as a snug and essential piece, and the people who write, enforce, and follow the rules that govern the use of the street. Beyond this are the many events that have, could have, or will transpire along its course: the conversations that unfold alongside it on hot, meandering summer days; the parades and street fairs celebrated in the safety and novelty of its cordoned off stretches; the accidents between competing vehicles; the countless stories that tear across its surface on the way to their fulfillment. These happenings and endless others are wrapped up in the recognition of the street. The complex traffic laws, street signs, and traffic customs emphasize even more directly the way that the street is shared with others.\textsuperscript{55} Thus, already implicit in the

\textsuperscript{55} Isabel Dyck also maintains that our daily activities, which are carried out in this common sphere, are necessarily shaped by our communal way of being. She writes: “...what needs to be made explicit is how lives are lived in specific spatio-temporal settings, for it is through routine activity in such settings that society and the individual recursively constitute each other” (Dyck 308). This “recursive constitution” is not limited to explicitly public places. Even in a place as private as a house, we may feel uncomfortable or embarrassed if we do something ungraceful or unbecoming. We continually live with the sense of the valuation of others. See also Sartre’s excellent discussion of the way we always experience ourselves as in the view of others (See
woman’s recognition of “street” is an understanding of others, of diverse means and styles of travel for others, of destinations that differ from her own, of others who build and maintain the street, of a site for encountering others, etc. The street can never be defined apart from other people; for it is not a private object, but rather a shared relevance—a thing that is forever mediated by the existence and, thus, the care of others.56

These acknowledgments could be seen as provisional if we thought they belonged to the street only because it is in publicly defined place, or simply because we have assigned it these identities by custom. Yet, even something that seems to be wholly private is experienced in light of others. A pathway on someone’s personal property is understood as the type of thing that people in general use to cross an area. Even if it is only ever used by a single person, it is something that would be immediately recognizable as a path by anyone else who might encounter it, and it carries this significance with it. Explicitly or implicitly acknowledging this, a person who means to hide a destination might choose not to travel the same way to the destination in order to avoid the development of a path—i.e., something that automatically carries with it the possibility for recognition by others, and that necessarily does if encountered by another person.

These examples reveal how other people are constitutive of our experience of things and of world insofar as other people are also beings who are concerned with and live in things in the way that we do—that is, they exist as being-in-the-world. We cannot

“The Look” in Being and Nothingness, esp. pp. 347-53). I will discuss the importance of the others’ look further in chapter 6.

56 In Marcovaldo, Calvino presents a hyperbolic, but nevertheless instructive story in which Marcolvado loses his regular sense of orientation and ways of moving about the streets when all the other inhabitants leave his town for the day (See the chapter “The City All to Himself.”).
understand things or the world outside of this shared interaction. That is to say, we do not and cannot experience things or the world in which they appear as mattering only to us privately or as conforming to our own private concern; rather, things and world are as shared. Even something as ‘private’ as a successfully encrypted code does not escape this significance for others. Indeed, a code arises only in the context of a shared world: The coded words immediately imply that there is something here to be understood by others if only they had the proper key. The code is an attempt to keep those thoughts from being relevant to other people, but though the thoughts themselves may be hidden, the code only illuminates the way in which other people are always already relevant to and implicated in this ‘private’ code. The other is always implicated in the thing no matter how personal the thing may be, for a thing always arises in the context of an interpersonal world. As Heidegger writes:

The Others who are thus ‘encountered’ in a ready-to-hand, environmental context of equipment, are not somehow added on in thought to some Thing which is proximally just present-at-hand; such ‘Things’ are encountered from out of a world in which they are ready-to-hand for Others—a world which is always mine too in advance (Heidegger, Being and Time H.118, M/R 154).

Thus, the notion of a solipsistic world that originates from the vantage point of a single subject does not and cannot reflect the nature of our existence or of the world. Our world exists as a with-world.
II. The Spatiality of Being-in-the-World

These basic reflections on the way we are as being-in-the-world will now enable us to examine and interpret the way in which we are spatial and in which we have a sense of space as such. Let us turn to familiar features of our experience of space and spatial phenomena to pursue this examination. We will start by looking again at the experience of a ready-to-hand thing. In doing so, we will see how our experience with things is spatial insofar as we are always bringing things close to us and also always directing ourselves towards a particular region from which we can bring these things close to us. This basic understanding of the spatiality of our engagements with things will allow us to begin a deeper analysis of the ways in which we experience locations, regions, ‘space’ as such, as well as orientation, distances, and measurement.

1. The Deseverance and Directionality of Being-in-the-World

Already in our description of our way of being-in, we can see the elemental characteristics of our spatiality. Heidegger argues that two spatial characteristics of existence appear through being-in—those of deseverance and directionality. We will examine these in turn. To begin, we have seen that we are always in things, and that things cannot be understood or even exist apart from our way of being-in them. Even when we are not actively or obviously concerned with a particular thing, we are, as we saw earlier, still in the thing. Yet, our experience is not one of being in everything at

57 For Heidegger’s initial discussion of deseverance and directionality, see Being and Time H. 104-10, M/R 138-44.
once, or, in other words, of being always everywhere. Instead, we are now wrapped up in
this thing and in this area, and later in others. Our being-in shifts in this way in
accordance with our engagements with things of our world. As we launch upon a project
of writing, the things not connected with this writing slip away from us and we bring near
to us those that enable our writing. The pencil, for example, is taken out of its place
among a series of things scattered on our desk, and is brought close to us. Heidegger
describes this way that we bring things close to ourselves as the de-severant character of
our way of existing. As de-severing, we are always doing away with the ‘farness’
between things and us.

Two important clarifications about deseverance must be made here. First,
tangible distances are not at issue here. The clock is de-severed from us when we look up
from our bench and read the time from it across a large plaza. Though the ‘objective’
distance between the clock and our position remains the same, we are suddenly there in
the clock when we are telling the time by its hands and marks. We have in this way
brought the clock close to us from its previously distant position even though we have
stayed at the same ‘objective’ distance from it. De-severing is, thus, not a mark of
overcoming a ‘physical’ gap, but rather one of letting “any entity be encountered close by
as the entity which it is” (Heidegger, Being and Time H. 105, M/R 139).

The second and related clarification regarding deseverance is that things are only
ever ‘far’ from us—in the senses of being stored, hidden, in oblivion, and so forth—on
the basis of their initially being close to us. We can see this through a number of
examples of remoteness. If we either cease our activity of reading the clock, notice that
the clock we are trying to read is broken, or take up the activity thematically, we also
become ‘far’ from the clock insofar as we have lost our grip on the ready-to-hand character of the clock and have thereby allowed a certain distance to come between ourselves and the clock’s in-order-to. In each of these cases, the remoteness of the clock from us is based on the way in which we are initially close to the clock in its ready-to-handness. In other words, we can only experience the clock as remote in the ways we have described, because we are initially close to the clock as a clock. Equally, if we have stored a thing away, we have done so in a way that allows us to return to it when we need it; thus, the specificity of the thing’s location carries our mark of being-in it even though it is tangibly away from us. Moreover, even if we do not know about or understand a particular thing, we can see the way in which we are initially already close to this thing even without our active awareness of this; for, as soon as our attention has been turned to it, we are already questioning implicitly or explicitly, What is this thing for? In other words, we see the thing as a thing, as something meaningful, and, thus, as something in which our being is already implicated. Even our experiences of remoteness reveal themselves, therefore, to be based on our initial character as de-severant—that is, as beings who are always bringing things close. In these ways, our being as de-severant reveals a principal character of our spatiality: We give rise to the expanse of our spatial experience—to the yonder and here of space—through our way of being-in things, through bringing first this thing close, and then another, through letting this thing slip away, while taking up that one.

In this description of our de-severant character, we also find evidence of the second defining spatial characteristic of being-in—namely, our directionality. We exist as directional insofar as we are always bringing things close to us from out of a region to
which these things belong. Two aspects of our directionality are revealed herein. First, we experience things as belonging to regions, as coming out of a place to which they belong. Second, we experience the world as regional, as having locations in which certain things are gathered together through our projects and, more generally, our care. Let consider these in turn.

Whenever we bring something close, we bring it out of a region. Whether we are looking for a thing, reaching for thing, considering a thing, etc., we turn ourselves toward a realm where we know this thing to be found. In other words, we experience the thing as bound up with its realm; its way of being ready-to-hand includes its way of having a reliable and fitting place. Heidegger writes: “Whenever one comes across equipment, handles it, or moves it around or out of the way, some region has already been discovered” (Heidegger, Being and Time H. 368, M/R 420). For instance, to find the kettle for making a cup of coffee, we head to the kitchen. The kettle belongs here—to the interwoven web of things for cooking and eating that is the kitchen. We do not understand the kettle apart from this context; this is to say, the context of kitchen is woven into the meaning of “kettle.”58 The kettle is ‘out of place’ if it has been left outside after being used as a makeshift watering can. The kettle can become misplaced or missing in this way only because we initially always experience it as belonging to the region of the kitchen. If we continue to use the kettle as a watering device, the kettle can take on a new ready-to-hand role, and, thus, appear from within a new referential totality—that of a garden. This new region now informs our understanding of what the kettle is.

58 Sometimes this context may even override our connection to the ‘individual’ thing. We may, for example, head to the kitchen to start the kettle only to find ourselves having arrived in the kitchen without a notion of what ‘specific’ thing drew us there in the first place.
We can, of course, encounter a thing that simply does not appear to have a proper place. In such instances, we may store the thing in the most likely place. Or, perhaps we will place it in a drawer or closet for ‘odds-and-ends’—in a region of misfits, so to speak. Alternatively, we may leave this thing around as clutter. A thing’s character of ready-to-handness may in fact be that of a free-floating entity, a thing that is without a fixed region other than that of the house in general. Yet, even in these cases of seeming ‘placelessness,’ we are always involved in turning toward a region when we bring a thing close to us. We turn toward a certain vagueness, and experience the thing in light of a lost region, a roaming region, or a capricious region.

Having examined the way in which we experience things as always belong to a region—even if that be a region of ‘placelessness,’ we must now consider the second aspect of our directionality—namely, we do not encounter the world as homogenous; instead, the world is always discovered beforehand in us as regional. In other words, our surroundings always already appear to us as shaped by our projects and interests, by our character of being concerned with things; and, we can never step outside of this shaping of our world. Any given region arises insofar as we experience things as belonging

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59 This analysis of regions enables us to account for the different “styles” of world experienced by people who are rooted in divergent situations. Bondi and Domosh, for instance, describe the differences in the surrounding world for women and men of the early 19th century. For a middle-class woman of this period, certain activities and, correspondingly, only certain destinations were acceptable. A woman could shop at respectable department stores or grocers; she could travel to a hospital to volunteer her nursing services; she could attend an appropriate exhibit at a museum. She could only be in ‘unfeminine’ areas or out later than ‘feminine’ hours if she were in the company of a respectable middle-class man. The things, activities, and places that are possibly relevant to this woman are, then, quite different than those that would be available as relevant to a man of a similar class or for women and men of lower classes. Effectively, the regions that are open to these women are fewer than those available to their male counterparts. Even if the prohibited places are recognized by the women, this inclusion is necessarily one of opposition: Their world contains a chain of references in which ‘not allowed’ is a defining feature. This difference between the worlds of men and women of the 19th century cannot be explained or
somewhere, and as belonging somewhere with respect to our projects and concerns.

Thus, the work region, the home region, the park region, the market region, etc. are not regions whose meanings are pregiven or that have simply been assigned to them. In other words, we neither happen upon nor invent a pattern of divisions for our world. Instead, these regions come into existence—and necessarily do so—through the referential totality that arises from our concernful way of being-in things. A region is as the ‘home’ of a set of things that have their meanings woven and held together in a unified in-order-to that has us as its “for-the-sake-of-which.”60 The office, for example, is the region of things for working. It is the place where books, papers, pencils, shelves, and so forth are united as a totality of ready-to-hand things for studying, for writing, for holding meetings, etc.

The office does not come to be without these things in their ready-to-handness for us. As Heidegger writes of a bridge and its location, “…a bridge does not first come to a location to stand in it; rather, a location comes into existence only by virtue of the bridge”

captured by accounts that understand the world as something preexisting into which people enter or as defined by the objects themselves as fixed and independent entities.

60 This notion of the home-like character of space will be discussed in much greater detail in chapters 5 and 6. For Heidegger’s discussion of the region as belonging to a referential totality of things, see Being and Time H. 110-1, M/R 145-46. In The Ecological Approach to Visual Perception, J.J. Gibson presents a conception of organisms and their surroundings that supports Heidegger’s argument. Gibson argues that vision for animals and humans must not be understood as a data retrieving process that receives already complete and fixed information given off by the surroundings. Instead, vision is a process that involves an interaction between the organism and the environment. Gibson uses this general recognition as the basis for his ecological approach to perception. He demonstrates that the relationship between animals and their habitat is one of complementarity, and, in this way, challenges the common definition of niche as a geographic area or climate suitable for the survival of a certain species of animal (See Gibson pp. 127-40, and also the initial discussion of this topic in ch. 1, sec. IV.4.). According to this common definition, an animal’s niche specifies where it lives. By contrast, Gibson maintains that we must look to the activities of an animal in order to understand what counts as the animal’s environment. He defines a niche according to how an animal lives—that is, according to its habits of eating, of protecting itself, of mating, of birthing and raising its young, and so on. The animal can mark out a niche for these activities only insofar as its surroundings afford possibilities for those activities; but the surrounding environment can be identified as a niche only insofar as an animal takes up and gives meaning to these possibilities.
(Heidegger, “Building Dwelling Thinking” 154). This is to say, a location is not given in advance of our concernful dealings with things; the bridge—in its way of being for us—allows a location to appear.

We can observe how things allow for regions to come into being by returning to our example of the ‘misplaced’ kettle left outside near a plant it had been used to water. If there had been no garden prior to our using the kettle in this way, the kettle itself may bring about the region of a garden. In its early stages, the cultivated area may not be noticeable without this marker of this watering kettle; it draws one’s attention to an area that upon inspection is not merely free-growing. A passer-by, for example, may be drawn by the kettle to see this region of our care—a small plot of kettle-moistened soil where the plants or weeds appear to be better tended, growing more vigorously—a garden. In this way, then, the watering kettle allows for a boundary to appear—the boundary from which garden appears. Our directionality is such that we are always attuning ourselves to the appearances of regions in this way. Whether explicitly or implicitly, we always bring the kettle close to us from its kitchen, or the watering-kettle close to us from its garden: We find direction and regions in the things of our world.

The interpersonal character of our regionality can also appear herein. As we saw in our earlier analysis of the with-world, the referential totality rooted in something as simple as a pencil is not privately held. We find others in things, and correspondingly in regions. Other people either have direct access to finding these regions, or, if they are hidden or private regions, the regions still appear in light of the possibility that others could come upon them or, at least, would experience them as significant in some still veiled way. For instance, if we happen upon a set of logs placed so as to make a pathway
across a stream deep in the forest, we experience—even if only implicitly—both a region and other people. The forest gathers around this pathway as a place where others have and may yet cross, as a place for easing persons’ travels. The region is shot through with the presence of others.61

2. The Explicit Spatiality of Being-in-the-World

As these analyses of our character as de-severant and directional reveal, our way of being-in things is necessarily spatial. In experiencing something in its ready-to-handness, we make space for it.62 As Heidegger writes:

When we let entities within-the-world be encountered in the way which is constitutive for Being-in-the-world, we ‘give them space’. This ‘giving space’, which we also call ‘making room’ for them, consists in freeing the ready-to-hand for its spatiality. (Heidegger, Being and Time H.111, M/R 146, second emphasis my own).

We bring the ready-to-hand thing close to us from afar and in doing so bring it to us from a region that is possible only by means of our way of always being-in a referential totality of things; and it is through these ‘acts’ of deseverance and directionality—and only through them—that a spatial “wherein” is possible.

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61 In our discussion of the nature of home in chapters 5 and 6, we will especially see how others are essential in both our immediate and our formative experiences of space.
62 Our way of being spatial and of making room for things is not something of which we are typically thematically aware. We are speaking here, as we have all along, of how we live certain experiences—in this case, our experience of space. Below we will address circumstances in which we take up space as a theme for ourselves. We will see that the very ability to think about space and to consider ourselves as standing opposed to space is rooted in this more primordial way of living as spatial.
It is by making room for things in their ready-to-handness that we also find our orientation within the world; since “[a]s a way of discovering and presenting a possible totality of spaces determined by involvements, this making-room is what makes possible one’s factual orientation at the time” (Being and Time, H.111, M/R 146, my emphasis). Our familiarity with things allows regions to appear to us, and through this we can be oriented. The world is, in other words, meaningfully articulated in terms of regions that are familiar to us owing to the way we are in things. We find our ‘footing’ within these regions by means of this familiarity. For instance, we recognize a series of covered shop stalls as a place for commerce, and we head in that direction to find fruit; we recognize an area of town as deserted by its boarded windows and broken street lamps, and we turn around to go another way; we recognize a church or hospital as a place for quiet concern, and we change our manner of talking and behaving; we recognize a crowded train station as a place of obstacles with respect to our timely departure, and we move more aggressively. In each of these cases, we are familiar with the type of region that the surrounding things gather about us, and we direct ourselves by means of the demands or suggestions of the particular region (or, in other cases, we may blatantly rebuff these suggestions in acts of explicit or careless rejection of them).

We can, of course, pass through a region without paying heed to it or without even being aware of it. In doing so, we are outside of that particular region, but are heading toward, and, thus, already in another region. If we are moving about aimlessly we do so in a region that allows for this: We leave our home or the office; we avoid crowded or otherwise restrictive places; we look past the things that might otherwise catch our attention. In doing so, we find ourselves in a free-floating region that crosses
through or avoids any previously settled region. Even when we are lost, we are still bound up in our way of being regional; we simply cannot find a way into the regions toward which we are aiming. We look around, bringing things close to us to find a clue about our surroundings, but find only regions that are unfamiliar. Our directionality, hereby, proves to be disorienting. We gaze into the places to which these things around us belong, but they open us onto foreignness. We become reoriented when we find something we recognize, and, in so doing, find a region that can connect us with our destination.

Thus, even in being lost or wandering aimlessly, we never stand as essentially isolated beings against a throng of things in a separable, independent ‘space’. We can never unwind ourselves from the spatiality that is bound up with our way of being-in. As Heidegger observes: “In accordance with its Being-in-the-world, Dasein always has space presented as already discovered, though not thematically” (Heidegger, Being and Time H.112, M/R 147). Space is, in other words, tied up with our being, tied up with our existence as beings who are always over there in the things that we are engaging or using, and even implicitly so in those things with which we are not actively involved at the moment. In other words, we are spread throughout our world in the objects for which we

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63 For a further analysis of something like a free-floating region, see the discussion below of Deleuze and Guattari’s “smooth space.”
64 Bollnow describes the experience of foreignness or strangeness in similar terms, arguing that “Strangeness is the area where man no longer knows his way around and where he therefore feels helpless” (Bollnow 35).
65 In chapters 5 and 6, we will consider the significance that having a home has for our ability to go out into the world without feeling ‘lost’, ‘disoriented’, or ‘overwhelmed’. We will see how the home allows us to establish and have an orientation in the world.
66 And, at the moments when we are closest to feeling as though space is standing against us, we are typically in the midst of some sort of crisis (such as being lost or anxious) or involved in a highly particular form of behavior (such as being involved in the activity of surveying)). In other words, ‘space’ stands out against us when we are either disoriented or alienated from our surroundings in some way, and even in these situations it is not accurate to say we are outside of space.
care. Thus, we are essentially beings whose existence extends beyond the tangible confines of our flesh. Heidegger writes:

Dasein takes space in; this is to be understood literally. It is by no means just present-at-hand in a bit of space which its body fills up. In existing, it has already made room for its own leeway. It determines its own location in such a manner that it comes back from the space it has made room for to the ‘place’ which it has reserved (Heidegger, Being and Time H. 368, M/R 419).

Our spatiality can, thus, neither be understood as one in which we occupy a point in a pregiven container nor as one in which we lay a pregiven spatial form atop our experiences. Rather, our way of being-in-the-world makes room for space.67

67 Insofar as Heidegger argues that our way of being is most primordially grounded in our temporality, Heidegger identifies our way of bringing space to our world as possible only on the basis of our existence as temporal. We can only look from this hither to that thither on the basis of our ecstatic way of being always outside of ourselves, always horizontal as being toward a future and being from a past and as making things present in light of these. That is to say, when we bring something close to us, we do not make it into a present-at-hand thing that is isolated in a given moment; the thing is, through our concern, meaningful in a way that reaches from a past and into a future—the thing is temporally dynamic. So, too, are the regions from which they emerge, and the world as a whole. Heidegger writes: “[The world] ‘is’, with the “outside-of-itself” of the ecstases, ‘there’. If no Dasein exists, no world is ‘there’ either” (Heidegger, Being and Time H. 365, M/R 417). This recognition does not, however, invalidate our analysis of our spatiality by demanding that our investigation turn to that of our temporality; for, though our spatiality is temporal insofar as Heidegger argues that Dasein’s Being is as temporal, he also clearly identifies space and spatiality as having a character for which time and temporality cannot wholly account. He writes: “Temporality is the meaning of the Being of care. ... Hence Dasein’s specific spatiality must be grounded in temporality. On the other hand, the demonstration that this spatiality is existentially possible only through temporality, cannot aim either at deducing space from time or at dissolving it into pure time” (Heidegger, Being and Time H. 367, M/R 418). Correspondingly, Bollnow argues “Of course the problem of lived-space cannot be developed simply by superficial analogy to that of lived-time, but gives rise to entirely new questions which would never be suspected if one started from the analogy of time” (Bollnow 31). Frodeman goes further than this, arguing that “each of Heidegger’s categories [of existentialia] have a spatial component that reveals aspects of our being-in-the-world which are obscured by an exclusive emphasis upon temporal considerations” (Frodeman 34). Sefer even proposes that “thematically, Heidegger could just as easily have derived time from space; his first
3. Measurement as a Mode of Lived Space

Our analyses of deseverance and directionality reveal that our experience of the distances and dimensions of our world cannot be understood according to ‘objective’ models that take space to be an independent and rigid container in which objects have movements or positions that are measurable according to constant standards of measurement. There and here as well as near and far are not designations of ‘objectively present’ spatial positions or extensions, but are rather wrapped up with our way of being our world. What is near to us is near because we have turned ourselves toward it and taken the thing up into our care. What is far from us is far because we are either not focusing our attention on it or because it lies out of reach of a project that we wish to undertake. Thus,

...the pathways we take towards desevered entities in the course of our dealings will vary in their length from day to day. ... A pathway which is long ‘Objectively’ can be much shorter than one which is ‘Objectively’ shorter still but which is perhaps ‘hard going’ and comes before us as interminably long (Heidegger, Being and Time H. 106, M/R 140-41).

Consider, for example, a person’s relationship to a coffee shop he dislikes. Since the coffee shop stands outside of his regular sphere of interest and attention, he will generally major tome could have been entitled Being and Space without changing the book’s direction or depth...” (Sefer 251).

Bollnow notes that something only a few feet away from us can be completely inaccessible to us if they are, for instance, inside the house of a neighbor to whom we do not and will not speak. For his compelling discussion of this point and related points regarding nearness and farness, see “Lived-Space,” pp.37-38. See also Schrag on the issue of nearness, “The Lived Body as a Phenomenological Datum”, pp. 214-15.
experience it as far from him. He can pass directly in front of the coffee shop and feel farther from it than he does from something that is miles away from him, but that holds his attention. If he happens, however, to have reason for going to this coffee shop, he will experience it as immediately closer to him than it is on average; it emerges from the distant background of his experience and becomes an active figure for him. This feeling of closeness can be challenged in an altogether new way, however, if he realizes that he is late in meeting a friend there. The coffee shop is now oppressively far from him and his desired end. Worrying that his friend will be irritated by his tardiness, he may walk impatiently along streets that seem to multiply before him. But, then, in a flash, something brings the coffee shop suddenly near to him: He has seen his friend standing out front of it and she has seen him; even though he is still a block or more away from his destination, he will feel, all at once, that he has arrived. He will experience himself as thrust out through space so tangibly that if someone blocks his sight while his friend and he are waving to one another, he may feel jarred and quickly move to regain their eye contact; he may even feel annoyed at the intruder for being in his space.

In the shifting experience of the distance between the man and the coffee shop, we can see how a person’s experience of distances and space varies from standard or given measurements. Space and distance are matters of care and of the mode of being-in-the-world in which we exist at any given time. Thus, space and distance cannot originally be calculated by any standard of measurement; such a measuring would strip space of our experience of them. To tell a person, for instance, that the glasses she is wearing are measurably closer to her than the painting at which she is gazing may be correct according to a standard of measurement, but such an assessment contradicts her
experience of being alongside the painting, or, in other words, wrapped up in the painting, and not in the glasses. As far as her current project is concerned, the glasses are infinitely far from her; for, she is directing herself in another direction—one that may rely on and fully involve the glasses, but which takes no account of them. In general, then, the ‘factual’ measures of the distance between us and a thing or destination as well as of the general shape of our surroundings frequently do not match our lived experiences of them. Moreover, we can see in these examples and through our previous discussion of deseverance that it is our lived experience of the distance, not the ‘factual’ distance, that is the measure of our world.

These reflections on the flexing lived experience of space are not meant to discount the usefulness of standardized measurement altogether. Far from this, there are times when a person may choose to orient herself toward the objects around her through a uniform system of measure. A person may wish, for example, to determine whether or not a writing table will fit under the window of her study. To do so, she will compare the inches of the table’s height with that of the window’s sill. There is nothing false or problematic about doing so; in fact, her efforts will give her a correct answer if she is careful about her measuring protocol. An error arises, however, if we take the unbending

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69 On this point, it is interesting to note that in their embodied theory of cognition, Lakoff and Núñez argue that mathematical ideas such as constancy, universality, precision, etc. arise from our embodied human situation and that these ideas develop as we develop. In spite of being shaped by and through the nature of our brains, bodies, and our general situation as human beings, these mathematical ideas and concepts are by no means are arbitrary or ‘subjective’. To the contrary, Lakoff and Núñez argue in part that it is because of the ‘stable’ character of our human biology and human needs that we have universal and stable mathematical ideas and practices. Though our cultural and historical situations may change, and as a result we may develop our ideas and the capacities of our minds in new directions, this does not mean that we can simply invent our thoughts or mental abilities or that they are arbitrary. For their full argument, see the chapter “The Theory of Embodied Mathematics” in Where Mathematics Comes From.
and uniform ruler she is using to be the reflection of the nature of human space or even simply of the space of the table itself—that is, if we assume that her spatial experience can fundamentally be measured according to a standard rule or, for that matter, by any fixed standard.\(^7\) A standard of measurement can never capture, for example, the way in which the table seems to shrink for this woman when the project she is working on at it seems large enough to crush her as well as the table, or the way that the table is as tall as a room or a cave for a child who makes a fort under it. The unwavering report of the measuring stick that the table is two and a half feet tall and has a surface of three square feet does not and cannot reflect these real experiences.

When one is oriented beforehand towards ‘Nature’ and ‘Objectively’ measured distances of Things, one is inclined to pass off such estimates and interpretations...as ‘subjective’. Yet this ‘subjectivity’ perhaps uncovers the ‘Reality’ of the world at its most Real (Heidegger, Being and Time H. 106, M/R 141).

Let us consider a fuller example to see the force of this claim.

Our experience of the space of an entire building can be shaped by a concern for standard demarcations, and they ought to be if we are involved in building a house from a blueprint. Yet, at a later time, when we have finished building and the house has become a home for us, we will experience this ‘objectively identical’ space as one of intimacy—that is, as a space that caringly compresses itself around us, and that cannot be accurately

\(^7\) Russon offers a clear analysis of problems that arise when “techno-science” treats nature as an object “present-at-hand”; see Russon’s “Embodiment and Responsibility,” esp. pp. 291-93 and 303. Schatzki also warns of the problems arising from treating “social space” on the model of “objective space”; see Schatzki p. 651-53. Schatzi’s analysis is helpful although his understanding of “social space” still retains a sense of being constructed atop of an always present “objective space.”
described by the most detailed analysis of fall lines, angles, or heights and widths. In his analysis of the home, Bachelard emphasizes the inability of a geometric form of measurement to describe or explain the space of a home. He writes: “A house that has been experienced is not a geometrical box. Inhabited space transcends geometrical space” (Bachelard 47). The contractor’s mathematical view of the house is utterly unlike the inhabitant’s lived experience of the same house. Where the one notices the eventual likelihood of a sinking foundation, the other experiences the stable comfort of a home base; where the one counts an ample number of electrical outlets, the other may notice the lack of an outlet in a crucial spot for the purposes of vacuuming; where the one calculates and operates on the basis of figures, measurements, and code compliances, the other eats, sleeps, laughs, relaxes, fights, studies, develops relationships, and, generally speaking, lives a dynamic life.

Though these two views overlap in the ‘same’ house, they open onto two divergent spaces. When the contractor approaches the house by means of measurements and rigid ‘physical’ description,

...the environmental regions get neutralized to pure dimensions. Places—and indeed the whole circumspectively oriented totality of places belonging to equipment ready-to-hand—get reduced to a multiplicity of positions for random Things (Heidegger, Being and Time H. 112, M/R 147).

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71 In the home, we have an excellent example of the way a region is founded through our way of dwelling or being-in-the-world. More detailed discussions of the significance of the home will appear in chapters 5 and 6. See also Bollnow’s excellent and relevant description the home as our way of “...found[ing] a cosmos in a chaos”; a home is “...a picture of the world as a whole” (Bollnow 33).
Though it may prove inconvenient to the homeowner if she is trying to purchase a new rug for a room whose measurements she does not immediately know, she can return home and take up this activity of measurement. The same flexibility is not open to the contractor. Though the contractor can report the square footage of the house, give the precise location of the house’s water pipes, and so forth, the contractor cannot tell which room is the most relaxing or the most productive for the home’s dweller. No matter how detailed the contractor’s descriptions may be, they cannot explain the home in which a person lives.

Although there is certainly a place for this sort of measurement in our lives, we cannot use this form of spatiality as the defining form for space and spatial experience. As Heidegger writes:

_Spatium_ and _extensio_ afford at any time the possibility of measuring things and what they make room for, according to distances, spans, and directions, and of computing these magnitudes. But the fact that they are universally applicable to everything that has extension can in no case make numerical magnitudes the ground of the nature of spaces and locations that are measurable with the aid of mathematics (Heidegger, “Building Dwelling Thinking” 156).

We are only able to reach a notion of space as geometrically pure—that is, as something we can measure objectively—on the basis of our primordial way of being spatial; and this, as we saw, is based in our way of Being as care.72 We are always concernfully

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72 Cerbone concurs, arguing that Heidegger’s study of Dasein reveals above all that Dasein’s “...primary relation to the world is one of practical engagement, rather than detached theoretical contemplation or beholding. In other words, what a phenomenology of everydayness reveals is
invested in our engagements with things and our surroundings. Thus, even when we are considering bodies in space as quantitatively distinguishable externalities, we are still experiencing the bodies and space through our way of having concern for things—in this case, a mathematical concern.

To measure, then, is only one way of engaging with the fluid space that stretches between us and this object for which we are presently and particularly caring. Moreover, it is only on the basis of our care for the objects around us that we ever do—and can—set about calculating a distance according to a standard of measurement. The very existence of standardized measurement offers further testament to our shifting experience of space, since measurement standards and their applications are something humans created and maintained out of an interest in pursuing projects that demand a uniform and fixed scale that bears no resemblance to our lived experience of scale or space. Thus, even when it comes to an aspect of spatial experience that we consider the most ‘objective,’ we are, once again, the source.

agents whose most fundamental activity is the skilful manipulation of equipment in the service of a variety of tasks” (Cerbone 209, my emphasis).

73 For important aspects of Heidegger’s discussion of uniformity and measurement, see Being and Time H.102-08, M/R 135-43; “Building Dwelling Thinking” 154-56.

74 Space, as we now have come to understand it, is an a priori structure of our existence. This is not to be understood as the Kantian a priori of space in which there exists a spatial form to our perceptual experience. Rather, space is always already there for us insofar as we are as being-in-the-world, and this structure of our existence is spatial. Heidegger makes this point in Being and Time H. 111, M/R 146. See also Seifser’s helpful discussion on this issue in “Heidegger’s Philosophy of Space,” pp. 247-48 and 252-53.
4. Mood and the Shape of Space

We have seen now how measurement can be a particular approach we take toward space. It is a very particular mode that holds ‘space’ up before us. Previously, we looked at other ways in which our experience of space shifts—for example, the man’s changing experience of the distance to the coffee shop, and the woman’s sense of the shrinking of her desk. Each of these experiences show how our spatial experience is stamped with the attitude with which we are engaged in our varying projects. Heidegger argues that we are always involved in approaching the world through some mood, and that our surrounding world changes in conjunction with our moods. Perhaps more than any other character of our existence, mood can disclose the way that we exist as being-in: for it allows to notice how the ‘objectively’ identical thing or region holds an entirely different significance for us when we are in one mood versus another. We might say, then, that by means of our moods, our world has a spatial narrative.

Even when in our own homes—a most familiar and ‘known’ place—we can experience changes in our sense of its space. A study in our home, for example, can seem like a place of intellectual accomplishment and studious pursuits when our writing is going well; yet, it can become a place of demands, tedium, and anxiety when we become stuck on a thought. A favorite restaurant may be temporarily or permanently unbearable to us after a disastrous conversation occurs there. Even the scientist, who is typically thought to be an ‘emotionless’ observer, is immersed in the mood of ‘being

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75 See Bollnow’s discussion of the way that mood affects the distances of lived-space in “Lived-Space,” p. 38.
76 Freund (1990) offers a helpful review and analysis of literature that connects varying emotional states with varying experiences of the surrounding world (See esp. pp. 460-61).
objective.’ For the scientist, the world is a place to be approached with measurements and tests, a place of controls, of sensitive equipment and a need for accuracy and coordination. In light of these concerns, the world looks a particular way to the scientist. To the field biologist, for instance, a forest is marked off according to types of terrain, local animal habitats, catalogues of species, or experimental plots. This is not the same place as it would be for a casual hiker, who notices the fresh evergreen smell, the unusual birdcalls, and the view from a hilltop; or, for a mountain biker, who is eager to find a series of challenging dips and rises. Of course, the biologist may be able to experience the forest in ways similar to these if she wanders through it on her day off; then again, she may be so habituated to her scientific mood in this place that she can never quite leave behind her awareness that a particular grove of trees is the site of an important species recovery project.

In Deleuze and Guattari’s analysis of smooth space versus striated space, we can see a more generalized characterization of ‘mood’ as giving shape to our world. Deleuze and Guattari describe two general ‘moods’ with which we approach and, thus, give shape to space—those of smoothness and striation. Their distinction between striation and smoothness corresponds generally to Heidegger’s distinction between experiencing something through the attitude of measurement versus that of immersed or ready-to-hand

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77 Though “mood” is not a word Deleuze and Guattari use to describe these orientations to the world, it seems to be an apt term for them insofar as a mood is, according to Heidegger, a form of comportment toward the world, and one that changes the world’s ‘fabric,’ so to speak; and Deleuze and Guattari describe the smooth and the striated each as a “…mode of spatialization, [a] manner of being in space, of being for space” (Deleuze and Guattari 482, my emphasis). Moreover, Deleuze and Guattari emphasize that one cannot locate a distinct edge of one’s experience of smooth space from one’s experience of striated space. Thus, these forms of space—like moods—can blend into one another, mingle together, can inform one another, and, at times, be difficult to separate from one another. For their full discussion of the smooth and the striated, see Deleuze and Guattari, “1440: The Smooth and the Striated,” esp. pp. 474-75, 486, and 500.
being-in. They connect these distinct spatial experiences to different ways in which we approach our activities and, correspondingly, our surroundings. Let us turn to Deleuze and Guattari for a detailed consideration of what they argue is a common spatial shift in our experience of the surrounding world.

We experience space as striated when we approach a destination by means of premeasured paths, specific turning points, and constant cardinal directions, when “...one goes from one point to another” (Deleuze and Guattari 478). We travel in striated space, for example, when we follow directions that tell us to head north at a particular intersection, to continue for one and a half miles until we reach the lower edge of the park, and to look westward at this point for a sign that will direct us to the entrance of the building we are seeking. This journey can be broken down into preplanned and definite parts. These parts are rooted in various fixed type of measurements and pregiven orientation grids. This journey relies on the fact that someone has already mapped out and defined the space in which we will move, or that we have a means or process by which we will make such a map.

Traveling in smooth space, we have none of the measured, coordinate- and compass-based markers of striated space. Instead, smooth space is a space of qualitative, non-metric trajectories.78 “[Smooth space] is a space of contact, of small tactile or manual actions of contact, rather than a visual space like Euclid’s striated space. Smooth space is a field without conduits or channels” (Deleuze and Guattari 371). We experience space as smooth when we are lead by the rhythm of our project instead of delineating in advance the avenues—both literally and figuratively—according to which

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78 For particularly important aspects of Deleuze and Guattari’s description of smooth space, see A Thousand Plateaus, pp. 371, 479-80, 482, 485, and 500.
that project will be carried out. We move in smooth space, for example, when we leave the house lead by a growing sense of hunger and start walking toward the busier part of town, where houses give way to stores and stalls where people are exchanging goods and services. Once within the commotion of this realm of exchange, we may notice the enticing smell of a passer-by’s roti, and head generally whence this person appeared. It may happen, now, that a friend’s voice catches our attention and we cross the laneway to speak with him. As we converse, we fall in with his steps, and soon find ourselves surrounded by a throng of street vendors selling cold drinks, roasted meats, and fried breads. We move suggestively toward a stall and order a kebab while continuing our conversation. We accompany our friend to his door, and then wander into a park adjoining his property. After purchasing a beverage at a concession stand, we walk the perimeter of a small pond. Our journey has had a certain direction, but not one of rigid end-points or coordinated pathways. Instead, we have traveled by way of our developing interests. We have been pulled along by the momentary and proximate calls of these interests rather than by a preset and overarching plan of how to reach the ends of those interests.

These two experiences of space—the striated and the smooth—weave in and out of one another as the nature of our projects shifts. Whereas space smoothes over—is undulating and developing—when we are moving through our activity rather than toward its predetermined end; space becomes divided and mapped out when we are navigating from a specific point to another specific point. For instance, while circling the pond while finishing our beverage, we may hear the bells of a nearby church and suddenly be drawn to notice the time and to remember a quickly approaching appointment. At once,
our experience of space shifts. We begin to ascertain where in the city’s grid we are and where the meeting is scheduled. We realize these are miles apart. We consider what means of transit will get us there most directly and swiftly. We map a path for ourselves, and set upon the first leg of that plan. Our recent experience of space as a qualitative zone of diverse interests, ranging possibilities, and uncentered and undirected regions of local interest slips away; space now appears as a charted series of turning points, horizontal and vertical lines, and a preset center and endpoint.

Noticing how the ‘identical’ place can appear different to us when in one of these ‘moods’ versus the other further demonstrates the role we have in giving rise to the space of our world. For instance, our world literally shrinks around us when we are depressed or anxious about something we have to do; we are not able to bring ourselves to leave the home or go to certain destinations.\(^79\) Our mood has changed what counts as possible for us, and in doing so has contracted the domain of our world. A longstanding mood of being open and ready to try new things will mean that we have the potential for a larger world than a timid or obstinate person has. Our moods shape our possibilities and, thereby, the nature and reach of our world—that is, the space of our world.

III. Conclusion

Drawing deeply on Heidegger and an analysis of our implicit and explicit spatial experience, we have identified the distinctive spatial manner of our way of being-in-the-

\(^{79}\) See Leder’s discussion of the way that mood shapes our experience on pp. 84-5 of The Absent Body.
world. Specifically, we are always in the world in an oriented or directional way that is articulated in terms of proximity and distance along the axes of our familiarities. Though Heidegger does not specifically address the bodily dimensions of spatiality, he does write: “Dasein’s spatialization in its ‘bodily nature’ [Leiblichkeit] is likewise in accordance with these directions” (Heidegger, Being and Time H. 108, M/R 143). Heidegger, thus, invites us to approach the study of the body in terms of his phenomenology of Dasein’s lived spatiality.

By Heidegger’s analysis, the body does not give us the world; but, it is on the basis of our having a world that we have and can understand our experience of

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80 Heidegger’s scant discussion of the body in Being and Time has been a topic of much debate. Some argue that Heidegger’s accounts of Being and worldhood are marred by or at least problematic in light of this ‘omission.’ See, for example, Didier Franck’s “Being and the Living” in which Franck identifies a certain irreconcilability in Heidegger’s quest to allow Being to appear and the fact that the being through which Being can appear is embodied; see especially, pp. 144-6. Schrag writes that “...Heidegger comes perilously close to abstracting Existenz from its concrete bodily involvement” (Schrag 204). See also Cerbone’s review of those both directly critical of or merely “uncomfortable with” Heidegger’s discussion—or lack thereof—of human embodiment in “Heidegger and Dasein’s ‘Bodily Nature’,” pp. 210-12. Cerbone supports Heidegger’s exclusion of a direct addressal of embodiment, arguing that Heidegger’s aim in Being and Time—namely, that of conducting “…a kind of transcendental investigation, the purpose of which is to reveal various non-contingent features of Dasein’s way of being”—steers him away from addressing our embodiment insofar as this study “…may be considered too contingent to be part of the existential analytic” (Cerbone 214).

Heidegger himself acknowledges that our “‘bodily nature’ hides a whole problematic of its own,” and comments that, “we shall not treat it here” (Heidegger, Being and Time H. 109, M/R 143). Above all, it seems that Heidegger defers discussion of our bodily nature precisely because typical notions of embodiment would obscure his ontological analyses. For instance, he warns early on that we must not think of being-in on the model of the way the human body can be present-at-hand in a building (Heidegger, Being and Time H. 54, M/R 79). Once Heidegger has provided a rigorous interpretation of the nature of our way of being, however, it seems admissible and even mandatory to return to a consideration of our existential way of being embodied and to look at the relation of this embodiment to our spatiality. For instance, Casey, writing on two different Heideggerian themes, argues for the inclusion of the body in his analyses. In one case, he writes that “it is on the basis of the body’s perception—whether self-perception or other-perception—that the determination of direction and dimension is made” (Casey 88). Later, he maintains: “Of one thing we can be certain: both the continuing accessibility and the familiarity of a dwelling place presupposed the presence and activity of the inhabitant’s lived body. This body has everything to do with the transformation of a mere site into a dwelling place. Indeed, bodies build places” (Casey 116).
embodiment. Once this is acknowledged, we can turn to the body as a source of revelation regarding our particular way of engaging with the space of the world; for, as we will soon see, the body—as our potentiality for having a particular type of world—plays a role in shaping our spatial experiences and our experience of space as such.

When we approach the study of body and its relation to our spatiality, we cannot, of course, understand them on the model of extension or mere corporeality. As Heidegger warns: “Neither may Dasein’s spatiality be interpreted as an imperfection which adheres to existence by reason of the fatal ‘linkage of the spirit to a body’. On the contrary, because Dasein is ‘spiritual’, and only because of this, it can be spatial in a way which remains essentially impossible for any extended corporeal Thing” (Heidegger, Being and Time H.368, M/R 419). The body and spatiality must, then, be understood on the basis of our being-in-the-world.81 In the next chapter, we will turn to Merleau-Ponty’s phenomenology, which directly takes up this project. We will turn, in other words, to the study of the spatiality of one’s own body.

Chapter 3. Merleau-Ponty and the Bodily Basis of Lived Space

“All things throw us back on to the organic relations between subject and space, to that gearing of the subject onto his world which is the origin of space”

(Merleau-Ponty, Phenomenology of Perception (PhP) 251).

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81 Cerbone makes a related argument (Cerbone 225), and suggests that Merleau-Ponty’s study of the body in The Phenomenology of Perception, to which we will now turn, demonstrates that our embodiment is at certain levels, as Heidegger writes, “determinate for the character of Dasein’s way of being” (Cerbone 227n.). For a similar analysis of this passage in Heidegger, see Miguel de Beistegui, Thinking with Heidegger: Displacements, pp. 143-48, esp. p. 147.
The last chapter examined the distinctive spatial manner of our way of being-in-the-world. If we consider these analyses further, we will see that our body and its abilities are central to this spatiality. For instance, what is near to us is so because it is within the reach of our hand when we want to grasp it, or within reach of our eyesight, or easy for us to get to by foot or bike or car. We also direct ourselves to a particular region and also to particular bodily orientations such as left and right through our bodily engagement with a particular ready-to-hand thing. Indeed, in general, our experiences of nearness and directionality are tied up in our bodies and our bodily projects and abilities. Heidegger’s study of spatiality intimated the body’s relevance to our experience of space; the phenomenological studies of Merleau-Ponty—to which we will now turn—provide a rigorous and extensive analysis of the body’s foundational role in the experience and construction of space.

In this chapter, I begin by considering the general foundations from which and against which Merleau-Ponty appeals to the body when explaining space and spatial perception. This section provides further support for the rejection of spatial conceptions that we encountered in Chapter 1—namely, those that posit space as a rigid, grid-like container or form; it also extends Heidegger’s understanding of being-in-the-world to include the body as that which allows us to perceive and have a world at all. Following this introduction to Merleau-Ponty’s phenomenological analyses of the perception of

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82 This nearness is not, of course, one of ‘objective’ distance with respect to the body, but rather of things as ready-to-hand for our body. For Heidegger’s discussion of this distinction, see Being and Time H. 107, M/R 142.
83 See Heidegger, Being and Time H. 108-9, M/R 142-43.
84 For another contemporary phenomenological analysis of the body’s role in opening up the world and space for us, see Morris’s The Sense of Space. See especially the second part of this book, titled “The Spatial Sense of the Moving Body.”
space, I pursue a detailed analysis of the body’s role in shaping our perception and experience of space. I first discuss the nature of our body schema and orientation, and their role in opening us onto space. These features prove to be inadequate on their own for explaining our spatial experience, and lead, thereby, to a discussion of spatial levels—our way not only of opening onto space in a given manner, but also of having or making room for space in the first place. Following these phenomenological investigations into the nature of lived space and the body’s role therein, I consider a source of support and a possible challenge to this conception from outside of the field of phenomenology. I then return to phenomenological analysis to consider two significant aspects of our spatial experience—namely, our experience of the expanse or dilation of space, and the interpersonal character of our experience of space. Throughout, I maintain that the body is the avenue, so to speak, by which space is able to open up for us and be shaped by us.

I. The Perception of Space

Merleau-Ponty’s analysis of the nature of space arises from his attention to our perception of space, and from his recognition that the two historically prevalent conceptions of space—namely, those given by empiricism and by rationalism—cannot
account for this perceptual experience. Merleau-Ponty criticizes both traditions of thought for failing to explain or even to notice the way in which perception is forever involved in discovering and creating the meaning of objects and the world as a whole. These criticisms closely mirror the criticisms raised in Chapter 1, where we rejected both the notion that space could be understood as an absolute rational ideal and the notion that space could be ‘calculated’ by means of physiological processes. Let us look briefly at Merleau-Ponty’s criticisms of such accounts of spatial perception.

For the empiricist, the attention of the perceiver is merely a means to pick up stimuli that are available for being beheld. An object offers up to the perceiver exactly what the object is in itself, and the perceiver receives this information through her sense organs, which are passive receptors that merely reflect the sensible qualities of the objects impinging upon them. The empiricist also presents space as an independently existing entity that stands over and against us. By this account, we perceive space by means of sensory organs that receive data from three-dimensional objects spread throughout space, and which, through a passive physiological process, yield a spatial layout corresponding to these impressions. If the perceiver happens to experience an illusion regarding an object or her spatial setting, she either has damaged sense organs or has failed to focus her attention closely enough on the incoming data.

The rationalist’s account of perception of objects and space begins from what initially seems to be the opposite stance. According to rationalism, a person cannot

85 Merleau-Ponty discusses these issues throughout his chapter “The Spatiality of One’s Own Body and Motility” (Merleau-Ponty, PhP 98-147). For the most relevant criticisms of empiricism and rationalism by Merleau-Ponty, see PhP, pp. 13-17 and 26-32.

86 We saw examples of this approach to perception in section III.1 of chapter 1, where we discussed researchers who approach spatial perception on the model of a physiological computer capable of computing spatial estimates by means of various physiological and neural mechanisms.
experience an object except through the structured form given by her consciousness; in other words, a perceiver never has access to an object or to space ‘in itself,’ but only to objects and space as perceived through the structure given to these phenomena through the form of her perception.\(^87\) For example, if a person experiences a book as square, solid, and on top of the desk, it is perceived as such because, in attending to the book, her perceptual powers have given these forms (namely, ‘square’, ‘solid’, ‘atop’) to her perception of the book. Though this account gives the perceiver a more active role, it freezes the activity of perception insofar as the structures of consciousness are already fixed and ever present, allowing the perceiver no ‘creative’ function, but only one of application. So, although the rationalist does not relegate the origination of the perception of a thing to the external object, she does strip all contingency and movement from the perception of an object.

Merleau-Ponty criticizes empiricism and rationalism for failing to capture or explain the complexity of our perceptual experience. Neither can, for example, account for the spatial anomaly of an amputee’s experience of a phantom limb.\(^88\) According to the empiricist’s account, the body is similar to a system of wires that transmit information from the body’s sensory and other organs to the brain, thereby allowing a person to feel her body according to the messages it delivers. A phantom limb would, on this model, result from damage to the transmitters or the receiver of these messages. Yet, Merleau-Ponty argues that this account cannot explain why a phantom limb frequently is experienced as maintaining the very same position and wounds it had before it was

\(^{87}\) This description of rationalism can be most readily connected to Kant’s philosophy, in which space is the external form of all of our perceptions. We saw another example of a rationalist analysis of spatial perception in chapter 1 in our discussion of Descartes, who maintains that spatial perception is only possible through the activity of rational judgment.

\(^{88}\) See Merleau-Ponty’s discussion of the phantom limb on pp. 76-89 of PhP.
amputated. Nor could such an account explain how a phantom limb can disappear if a person undergoes therapy sessions in which a puppet arm is substituted in the place of the phantom arm and made to perform certain relieving or diminishing actions. A rationalist account attempts to answer these very deficiencies by pointing to the role of memory or the form of consciousness itself as constitutive of the experience of the phantom limb. On this model, a person represents to herself a limb as she remembers it to cover over its actual absence. That is, she is able to refuse recognition of her deficiency by filling in its place with memories. Merleau-Ponty argues, however, that such an account fails to recognize that in order to deceive oneself in this way, one must ultimately be focused on the absence of that which one is covering over. Rationalism ignores this point, treating memories more like images that can simply ‘overwrite’ or ‘delete’ other images or ‘realities.’ Moreover, the rationalist account also fails to explain why the experience of the phantom limb subsides altogether when the nerves that correspond to a phantom limb are severed from the brain.

As this example already suggests, Merleau-Ponty identifies the main problem with both accounts as lying in their tendency to hold themselves apart from the experience of perception. The empiricist presents us as mere receptors of what is already there in the world, and the rationalist presents us as possessing a fixed structure and

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89 For a description of this phenomenon, see Ramachandran and Blakeslee, Phantoms in the Brain, pp. 46-50.
90 Merleau-Ponty discusses the severing of the nerves to the phantom limb on PhP, pp. 86-7. For an excellent phenomenological discussion of physiological processes as lived, and, therefore, not objectifiable or localizable in the way that physiology and neuroscience typically claim they can be, see Gallagher’s “Lived Body and Environment,” pp. 140-142. Gallagher, like Merleau-Ponty, acknowledges that certain lived possibilities disappear in the absence of certain ‘parts’ of the body, but from this, it does not follow that those ‘parts’ can provide an adequate explanation of or source for the bodily phenomena associated with them. To offer a crude example, simply because the body dies when the heart no longer functions is not reason enough to explain the significance and functioning of the body by means of the heart alone.
character of the world in advance of all experience. Yet, in perception we engage an object and our surroundings not as something already determinate, but rather as something and someplace both in which we are looking for meaning and also to which we bring meaning. The rationalist makes a certain advance over the empiricist insofar as rationalism recognizes the perceiver as an active component in the shaping of perceptual experience—that is, as someone who is responsible in part for the meaning of what is perceived. In spite of this recognition, the rationalist persists, however, in giving perception a fixed, determinate character. Merleau-Ponty argues that, contrary to such a conception, in perception we do not simply uncover what is already there nor simply bring to what is there a firmly fixed form; rather, we are forever engaged in constituting a meaning for things and our surroundings out of an indeterminate and limitless horizon of possibilities. This meaning will, in turn, change and build upon itself, producing a history of meaning for each object and for the world as a whole—a history that is necessarily rooted in a ceaselessly transforming and transformative consciousness.

It is this active relationship between the perceiver and the perceived that the empiricist and the rationalist ignore when they investigate the world as one that is set either against us or within us as determinately objective. A combination of the two models would be saddled with the overarching problem of understanding the world as if it were objective and existent ‘in itself’ and the mind as if it were isolated from this world and ‘for itself.’ Acknowledging this additionally deficient path, Merleau-Ponty pursues a study of how it is that we actually experience the world and ourselves such that the psychic and the physiological are in no way severed, but rather are ultimately aspects of one and the same whole. John Hull, who went blind in his 40s, uses Merleau-Ponty’s
discussion of the phantom limb to explain his own experience of the interrelationship of the psychic and the physiological, and the opening (or closing) of the world that arises when something impairs this ‘duo’:

The problem for the disabled person is that the ordinary, habitual body, which relates us to the world, is no longer the same as the actual body. This knowledge is unacceptable, because one would be exiled from one’s world. ... The disabled person cannot expect to adjust to the memory of the accident or illness which caused the disablement, as other sad losses in life. The moment of disablement is not one painful memory amongst others, but represents a change in the world itself, which is negotiated and understood through the whole body. ... What the disabled person remembers is not so much the accident as the world before the accident, and that past becomes blurred with the present. ... One lives on a former experience.... So deeply imprinted into us are the stereotypes of our bodily action in the world, that we never really escape from them (Hull 176).

The phantom limb (or, in Hull’s case, the bodily experiences of continuing to be and act in a world of sight) is an expression of an embodied conviction that one lives in a world that has been one’s own—a world to which one belongs—and that cannot simply be dismissed or forgotten either ‘physically’ or ‘psychically’.

Overlooking or denying this interrelationship of humans and world, both traditions of thought posit space as something that is fixed in advance of our encounter with it—as an externally rigid entity in empiricism, and as an internally rigid form of
experience in rationalism. In either case, space stands against or within us like a preformed grid—the dimensions, coordinates, and shape of which we can map out according to objective physical or mathematical principles. Once again, the rationalist’s account improves upon that of the empiricist insofar as the rationalist acknowledges that space is rooted in us. For instance, Kant (who is roughly a rationalist in his account of space) writes: “...space does not represent any determination that attaches to the objects themselves.... It is the subjective condition of all sensibility, under which alone outer intuition is possible for us. ... It is, therefore, solely from the human standpoint that we can speak of space, or extended things, etc.” (Kant, Critique of Pure Reason 71, my emphasis). Thus, Kant argues that space is not something that we can assert to exist above and beyond us; it is, rather, the form of our perceptual experience. Yet, in spite of this recognition, Kant persists in conceiving of space as having a fixed, a priori form that is describable by principles of natural geometry. He maintains that our experience of what lies outside of us follows the regular and fixed rules of geometric principles, and argues that our experience is such because our perception of the outside world is intrinsically shaped by our spatial intuition that gives our perception this precise form. So, even though space on this model is not understood as independent of us, space does always have a given form that determines the shape and structure of our experience of what is outside of us.

Yet, Merleau-Ponty rejects the fixed form of spatial perception that would lead to such a conception of space, arguing that our experience belies the notion that spatial
perception is shaped by a unifying form of consciousness or that it has a static and ruler-rigid form that corresponds point-for-point with an ‘outside’ world. He writes:

The world does not hold for us a set of outlines which some consciousness within us binds together into a unity. It is true that the world presents itself as outlines, in the first place spatially; here I can see only the south side of the street, [etc.].... But the outlines do not follow each other or stand side by side in front of me. My experience at these different stages is bound up with itself in such a way that I do not get different perspective views linked to each other through the conception of an invariant. The perceiving body does not successively occupy different points of view beneath the gaze of some unlocated consciousness which is thinking about them. For it is reflection which objectifies points of view or perspectives, whereas when I perceive, I belong, through my point of view, to the world as a whole... (Merleau-Ponty, PhP 328-29).

Furthermore, although Merleau-Ponty does not deny that we can have an experience of a measured space, he does deny that this description of space offers a full account of our spatiality. He writes:

Experience discloses beneath objective space, in which the body eventually finds its place, a primitive spatiality of which experience is merely the outer covering and which merges with the body’s very being.

To be a body, is to be tied to a certain world... (Merleau-Ponty, PhP 148).

91 The remainder of this chapter will address Merleau-Ponty’s opposition to such claims. For Merleau-Ponty’s discussion of these rejections, see especially PhP, pp. 148-49, 283, and 311. Bollnow provides a helpful discussion of the difference between the homogeneity of mathematical space and the possibilities for discontinuity, variability, and the lack of distinct boundaries in lived space in his article “Lived-Space” (See esp. p. 32.).
The objective space posited in different ways by both the empiricist’s and rationalist’s accounts is, thus, only a type of spatial experience, and it is a form of spatial experience that rests on a more basic spatiality—namely, one that is rooted in the nature of our embodiment; since, as Merleau-Ponty explains, “[t]he body is our general medium for having a world” (Merleau-Ponty, PhP 146), and, again, “[t]he relationship between my body and things is that of the absolute here to the there, of the source of distances to distance” (Merleau-Ponty, “The Philosopher and His Shadow” 166).92 Space is, in other words, an embodied structure of our experience.

Merleau-Ponty founds this claim in his phenomenologically-rooted observation that underlying all experience is a pre-objective sense of the world, which he describes as our being-in-the-world.93 As we saw in our discussion of Heidegger, Being-in-the-world is our way of bringing to existence and simultaneously of existing in and through all that we experience; that is, the world is an infinite set of possible horizons that are ours to unfold according to how we direct our attention, and we live and are immersed in this

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92 In this claim, Merleau-Ponty diverges in his starting point—at the very least—from Heidegger; since, as we noted at the close of the last chapter, Heidegger does not appeal to the body as a primordial source for understanding the nature of our way of having a world. Yet, Merleau-Ponty and Heidegger may be closer on this point than this contrast first suggests. Barral writes of Merleau-Ponty’s conception of the body: “The body cannot even be considered by myself or by another, as a mere object in the world; it is instead, that by which I am able to have objects...” (Barral 176); and, later, “Man’s relations are not only tied in with his body, they are his body” (Barral 177). We may take these observations as means for connecting Merleau-Ponty’s analysis of embodiment to that of Heidegger’s project of interpreting the nature of Dasein. Both Heidegger and Merleau-Ponty are concerned with revealing the existential structures of human existence, and both reject any attempt to do so by considering human beings as objectified objects of ‘scientific’ investigation. Schrag offers an argument for the need to address our embodiment when examining the nature of world that captures the spirit of both Heidegger’s and Merleau-Ponty’s projects. He writes: “Being in the world, as a primordial experience, is a global structure of interrelating practical projects and not a conceptualization of a world schematized through the objectivizing categories of substance, quantity, and abstract quality. ... It is through the orientation of my lived body that the personal meanings of my preobjective being in the world are disclosed, established, broadened” (Schrag 205-6).

93 On this point, see Merleau-Ponty, PhP pp. 81-85.
world. This understanding of space amounts to recognizing that, as Merleau-Ponty writes, “...space is existential” (PhP 293-94). To this recognition Merleau-Ponty adds, that “...we might just as well have said that existence is spatial, that is, that through an inner necessity it opens on to an ‘outside,’ so that one can speak of a mental space and a ‘world of meanings and objects of thought which are constituted in terms of meanings’” (PhP 293-94). In other words, given our way of being-in-the-world, we cannot help being in and of space.

II. The Body of Space

Merleau-Ponty identifies the body as the source of this unfolding of a world insofar as the body is what allows us to have a world. He writes: “...it is one and the same thing for us to perceive our body and to perceive our situation in a certain physical and human setting, for our body is nothing but that very situation in so far as it is realized and actualized” (Merleau-Ponty, PhP 340). The body allows us to extend into and throughout our surroundings and all our experiences of what is ‘there.’ The body is

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94 Many concur with this point. Russon, for instance, writes: “We are embodied. It is our living body which is the dynamic process of our establishing contact with the world. It is in this process, through this process, and as this process that both what the world is and who we are come into being for us” (Russon 293). Barral agrees: “Man’s body is precisely the condition for his relations to the world and to others, because, as an incarnate spirit, man reveals himself through his bodily being” (Barral 171); and regarding our ability to experience space, she writes: “Again, it is because of the body that man can speak of space at all. ... It is always through the body that I make contacts, either with the world and things in the world or with other subjects in the world” (Barral 175). See also “Part II: The Body in Place” in Casey’s Getting Back Into Place for an extended discussion of the body’s “intimate interinvolvement” in direction and dimension.

95 See Merleau-Ponty’s discussions of our body as allowing for a world in PhP, pp. 101, 146, and 320.
equally what allows us to hold something before ourselves—that is, to have a ‘here’ with respect to which a ‘there’ can be experienced. Through the body and its gaze we can ‘pick a thing out’ from an amorphous or, alternatively, a chaotic, overwrought background, and hold it before us as an ‘object of our attention’. The body and its movable gaze are also what allow that ‘object’ to slip back into the background as we shift our attention elsewhere.96 The body also gives us a sense of the relations between these ‘objects of attention.’ As Merleau-Ponty writes:

> When I say that an object is on a table, I always mentally put myself either in the table or in the object, and I apply to them a category which theoretically fits the relationship of my body to external objects. Stripped of this anthropological association, the word on is indistinguishable from the word ‘under’ or the word ‘beside’ (Merleau-Ponty, PhP 101).

It is the body, then, that lets us be spread throughout our world, bring specific things forward from the background of this world, and experience these things as having particular places and positions in the world. Thus, “...far from my body’s being for me no more than a fragment of space, there would be no space at all for me if I had no body” (Merleau-Ponty, PhP 102).

To reach and support this interrelation of the body and space, Merleau-Ponty considers the character and constitutive elements of typical and disturbed spatial experiences. He writes:

> If bodily space and external space form a practical system, the first being the background against which the object as the goal of our action may

96 See Merleau-Ponty’s discussion of the body’s relevance to the figure-background structure of perception on pp. 101-2.
stand out or the void in front of which it may come to light, it is clearly in action that the spatiality of our body is brought to being, and an analysis of one’s own movement should enable us to arrive at a better understanding of it (Merleau-Ponty, *PhP* 102).

In light of this, let us turn now to make a similar analysis of the body and its defining role in our experience of space. We will begin by examining the experience of someone learning a new movement and considering how Merleau-Ponty might analyze this experience as well as how he might criticize an empiricist’s and a rationalist’s account of the same experience. In doing so, we will not only commence an analysis of body schema and bodily orientation, we will also begin to understand more clearly the nature of our experience of space.

1. Body Schema and Orientation

A gymnast who is able to perform a cartwheel with ease may wish to learn how to do a similar trick—an aerial—in which she goes through the motion of a cartwheel, but without touching her hands to the ground. She can see by the movements of peers who can execute the trick that the movements she will need to go through to succeed at the trick are very close to those she can already execute. Her coach may also attempt to help her to learn how to perform the trick by describing what additional motions she must incorporate into her cartwheel to achieve the aerial. Yet, although the coach’s descriptions and her own observations of others doing aerials give the gymnast something to ‘visualize’, they do not ensure that she will be able to accomplish the trick even if the
descriptions are ones that she clearly understands. Merleau-Ponty argues in similar analyses that this inability to perform an action that one wholly understands reflects the fact that our relationship to our body is not based on our possession of either a conceptual or a point-for-point ‘physical’ body map, as the rationalist and empiricist would, respectively, maintain.\(^{97}\) These conceptions would imply that we are mentally or physically aware of our body in such a way that we are able to use and engage it owing to an ability to detect and adjust the relative positions of each body part. Correspondingly, one would learn to perform a certain bodily maneuver by coming to ‘physically’ or ‘mentally’ map out the proper succession of positionings of each part of one’s body.

While it is true that we can be instructed in the abstract about the way to accomplish a certain bodily movement, in the end, the success of the movement relies on the body’s immersion in its project and not on the performer’s awareness of the position of each of her body parts.\(^{98}\) As Merleau-Ponty writes, “...a movement is learned when the body has understood it, that is, when it has incorporated it into its ‘world’...” (Merleau-Ponty, PhP 139). It is, for example, only when the gymnast feels her body wrapped up in the new motion that she will succeed at performing it time and time again. The actions of a gymnastics coach tend to acknowledge this fact: A coach frequently helps to introduce the motion of a new trick to a gymnast by manipulating the motions of the gymnast’s body. For example, the coach may assist the gymnast at a decisive moment in the new trick by pushing or turning the gymnast’s body for her. In this way, the coach helps the gymnast to begin to feel the motion for herself. After repeated coached attempts at the trick, the movements begin to cease feeling foreign to the

\(^{97}\) See pp. 98-101 of Merleau-Ponty’s PhP.
\(^{98}\) See Merleau-Ponty, PhP 99-100.
gymnast’s body; the motions start to belong to her body. When the gymnast succeeds at doing the trick without her coach’s assistance, she will feel all at once that she has it.

Even when the gymnast ‘knows’ the trick, it is not a knowing that can be discursively mapped out; rather, it is an active inhabiting of a certain movement or activity. She cannot give you a step-by-step description of what her body does and when, or even of how her left leg is positioned with respect to her right arm at a given juncture in the trick. To do so, she would likely have to make a mock progression through the trick, and would still only be able to give a general outline of her positions. This does not mean the gymnast is unaware of her body’s motion or schema; far from this, it confirms that she knows her body’s parts and positions through their relation to the activity of her body as a whole, not as a series of mapped-out positions. Her body schema is, in Merleau-Ponty’s words, “...neither the mere copy nor even the global awareness of the existing parts of the body, [but rather] an active integration of these latter only in proportion to their value to [her] project. ... [Her] body appears to [her] as an attitude directed towards a certain existing or possible task” (Merleau-Ponty, PhP 100).

99 Corresponding to this observation, both Gallagher (“Lived Body and Environment”) and Leder (The Absent Body) emphasize the importance of the absence of the body in our daily activities. Gallagher writes: “When the lived body is ‘in tune’ with the environment, when events are ordered smoothly, when the body is engaged in a task that holds the attention of consciousness, then the body remains in a mute and shadowy existence and is lived through in a non-conscious experience” (152). It is in experiences of pain, sexual stimulation, awkwardness, fear, and so forth that the body comes forward and is ‘known’ to us. At these points, we are, to a certain extent, disengaged with our regular lived activity. The gymnast, for example, suddenly notices where her foot is when it is ‘out of place’ and she is beginning to fall because of it.

100 In this quote, Merleau-Ponty is rejecting accounts of the ‘body image’ advanced by both empiricism and rationalism. In Merleau-Ponty’s French text as well as in the tradition of phenomenology as a whole, this term “body image” is often also rejected, and the term “body schema” is taken up—both to leave behind the prejudices wrapped up with ‘body image’ and to provide a more fitting linguistic description of the phenomenon under discussion. For a helpful historical and philosophical analysis of the distinction between ‘body-image’ and ‘body-schema’, see Tiemersma’s “‘Body-Image’ and ‘Body-Schema’ in the Existential Phenomenology of Merleau-Ponty.” Gallagher offers a clear explanation of the body schema as the “...changing
Not only do the empirical and rational accounts fail to account for our body schema, they also fail—in a related way—to comprehend our experience of orientation. With respect to the gymnast, for example, the empiricist would claim that at each moment she experiences her movements in juxtaposition to a world that has a fixed—that is, a natural—orientation. According to this model, the gymnast is able to effect certain motions with her body by manipulating her body’s position with respect to the standard vertical and horizontal axes of the natural world. Thus, when in the midst of a trick that involves flips and twists, she would feel herself to be involved in a series of movements away from her ‘natural’ orientation. Yet, the gymnast’s experience does not support this. She does not feel herself in constant communication with a set horizon or juxtaposing her movements with respect to a ‘natural’ orientation. For example, when performing a series of flips with multiple turns in them, she does not experience herself as moving with respect to the earth’s horizon, but rather as wrapped up in the motions the flips. Her orientation is felt from within this activity, not with respect to an outside plane. She may, for instance, search for a spot on the ceiling that she sees when she is successfully completing the trick; in this instance, this ‘objectively’ upward point may be her ground, her visual signal that she has landed even though her feet may not yet be on the gym’s floor. If you ask her how her body is positioned with respect to the floor at each moment of the flip, she will not be able to tell you from her own experience of executing it; and, it is likely that if she attempts to focus on this question while attempting the flip, she will either fail at the trick or lose track of her ‘mapping’ activity.

postural style of being-in-the-world that is the lived body in its environment” (Gallagher 157); for his complete discussion, see “Lived Body and Environment,” p. 157ff.

101 For Merleau-Ponty’s criticism of the rationalist’s and empiricist’s accounts of orientation, see PhP pp. 243-54.
When the gymnast is performing her flip, she is not only disengaged with thinking and feeling with respect to the horizon of her usual standing position, she is effectively wrapped up in a new orientation altogether—namely, the orientation of the trick. Not only does the account of the empiricist fail to explain the gymnast’s experience of bodily orientation within a trick, but it also fails to acknowledge this ability of the gymnast’s to launch herself into new modes of orientation. We can see similar ‘empirically unexplainable’ shifts in orientation in everyday experiences. For instance, a reclining person whose head is tipped at a significant angle with respect to a television screen loses sight of this angle as long as he focuses on the movie he is watching. He does not feel himself to be at an angle nor does he experience the picture as tilted in any way. His experience of orientation does not match up with what empirical measurements would tell him—namely, that his head is tilted; rather, his orientation is one of being upright with respect to what he is doing. Similarly, a person looking in a car’s rear view mirror before she changes lanes does not feel herself to be suddenly looking at oncoming traffic nor does she feel like she is looking backwards per se. Instead, her view is geared toward her car’s forward moving trajectory and toward ascertaining whether this forward movement can be sustained safely. Thus, even when looking ‘behind’ her by means of the rear view mirror, she is still oriented forward. In view of such experiences, Merleau-Ponty writes:

One cannot take the world and oriented space as given along with the contents of sense experience or with the body in itself, since experience in fact shows that the same contents can be successively orientated in one direction or another, and that objective relationships as registered on the
retina through the position of the physical image do not govern our experience of ‘up’ and ‘down’ (Merleau-Ponty, PhP 247).

Our experience of orientation is, thus, not limited to the point-for-point ‘physically’ bound explanation that the empiricist offers.

The rationalist account initially appears to be more capable of accounting for our experience of orientation, since it stipulates that all orientation is rooted in the form of our perception and, thus, that it is carried throughout the varying positions and movements of our body and our surroundings. Yet, this conception of orientation fails in two competing directions. On the one hand, if this form of perception ‘follows’ the perceiver’s attention wherever it happens to go, it will fail to provide any ground for the perceiver, since the ‘shape’ and ‘floor’ of space simply travels along with the perceiver’s perceptual direction. As Merleau-Ponty writes:

...[A] constituting mind is eminently able to trace out all directions in space, but has at any moment no direction, and consequently no space, without an actual starting-point, an absolute ‘here’ which can gradually confer a significance on all spatial determinations (Merleau-Ponty, PhP 247).

If, on the other hand, the rationalist account posits some starting point in which all perception is grounded, the account ceases to be able to explain the multiplicity and developing nature of our orientation.102 As we have seen, the gymnast does not maintain

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102 Kant argues, for instance, that there is a fixed spatial orientation that corresponds to the shape and activity of our bodies; see Kant’s “Concerning the Ultimate Ground of the Differentiation of Regions in Space.” We have a sense of the difference between left and right, for instance, based on the lack of a true isomorphism between the left and right hands. Though our hands seem identical in shape, they cannot be laid over top of one another, functionally speaking. The right hand grasps with the thumb on the left side, while the left grasps with the thumb on the right. The
a single sense of orientation that she carries with her into each of her new activities. Instead, the gymnast’s experience of her body’s axis and the space about her develop along with her activity, and her orientation changes. As soon as the rationalist posits a starting point for orientation, this change becomes impossible; but, so long as the rationalist fails to posit this point, the change is meaningless. In either case, the rationalist account gives orientation and spatial experience a universal nature—a nature that can account neither for the existence of different types of space or orientation nor for the developing nature of these. Thus, while the empiricist floods the gymnast’s consciousness with an endless train of sensory data that obscures rather than accounts for her experience, the rationalist immobilizes the gymnast with a structure of consciousness that determines her experience in advance.

How, then, can we account for our sense of orientation? The first step in answering this question is to acknowledge the rejections we have just made. To begin, we are not in possession of our body as an object in a preset field. Our body is not, as we have seen, something we experience as a conglomeration of fixed points that we know either by means of a ‘physical’ map of neural data—as the empiricist holds—or by means of a unifying map provided by consciousness—as the rationalist claims. Equally, our sense of orientation is not given to us as a pre-established feature of an existence bound for the one does not fit the other. Kant also argues that our natural propensity to be dominantly-handed or -footed is connected with a sense that there is a right and left side to the space we inhabit. Kant locates the seat of this sense of orientation in an overarching conceptual structure rather than in the body’s experience and abilities. This conceptual structure is fixed, and does not allow for ‘shifts’ in orientation. In this way, Kant separates our experience of orientation from our lived bodily engagement with the world and identifies it instead as a fixed intellectual form of our experience that is laid over our experience of our body and our surroundings. Kant’s analysis cannot, for example, explain the experience of allocheiria in which a person experiences pressures applied to her right hand as occurring in the equivalent part of her left hand. See Merleau-Ponty’s related discussion of allocheiria in PhP, pp. 98-9.
either by the physical forces of gravity or by a perceptual form provided by one’s consciousness—as the empiricist and rationalist hold, respectively. To the contrary, our sense of orientation is open to change, and this is so in part because we are neither locked into a naturally occurring orientation imposed on us by the world around us, nor given a fixed structure of orientation by our consciousness.

Having made these acknowledgments, our next step in understanding orientation will be to return to examining our experience. Merleau-Ponty will start us on this investigation with an observation that shifts us from our current focus into our next field of study—namely, that of ‘spatial levels.’ He writes:

A mass of tactile, labyrinthine and kinaesthetic data, the body has no more definite orientation than the other contents of experience, and it too receives this orientation from the general level of experience (Merleau-Ponty, PhP 249, my emphasis).

Through an investigation into what constitutes as the “level” of our experience, we will not only reach a better understanding of what orientation is and how it is achieved, we will also develop a general understanding of what space itself is.

2. Spatial Levels

Merleau-Ponty describes an experiment in which a person experiences a shift in the way he is experiencing and involved in space. In this experiment, a man is asked to perform certain common tasks while looking at the objects he is to manipulate by means
of a mirror that reflects these objects and his surroundings at a 45° angle with respect to his typical setting. 103 In this altered situation, he is unable for a time to carry out tasks that are familiar to him or even to move about normally; in general, he is not able to make sense of this new scene. Yet, in spite of this initial ‘disorientation’,

After a few minutes, ...the reflected room miraculously calls up a subject capable of living in it. This virtual body ousts the real one to such an extent that the subject no longer has the feeling of being in the world where he actually is, and that instead of his real legs and arms, he feels that he has the legs and arms he would need to walk and act in the reflected room: he inhabits the spectacle (Merleau-Ponty, PhP 250).

When the man is able to walk about and do things as if he were in the spectacle provided by the mirror, “[t]he spatial level tilts and takes up its new position” (Merleau-Ponty, PhP 250). In this new spatial level, the man leaves behind the ‘up’ and ‘down’ and similar ‘anchor’ points in which he regularly lives, and is wholly wrapped up in the directional demands of his new scene. His hand may appear to be reaching at an angle of 45 degrees to an outside observer, but he will report that he is reaching directly upwards.

The man’s new spatial level cannot be understood as a consequence of his learning a new set of correlations between his body’s movements and the tilted scene—as the empiricist might argue, since this sort of correlative action would require a calculation for each new task and could not account for the experience he has of being ready and able to spring into any new action in any sector of the scene. Related experiments also rule out any rationalist explanation that assigns his shift to the powers of an overarching

103 For Merleau-Ponty’s discussion of this and related experiments, see PhP pp. 244-51. Morris offers a thorough and complementary analysis of a number of experiments on orientation in his chapter “Residing Up and Down On Earth” in The Sense of Space.
consciousness. For instance, Merleau-Ponty refers to an experiment in which subjects, who are able to make a shift in level like the one we have just described, are not able to experience a corresponding shift in the auditory levels of their surroundings. Yet, if the spatial level were a result of a power of an overarching consciousness, there would be no reason that the auditory shift should be difficult to establish. To the contrary, it is difficult to understand on such a model how the auditory shift could occur separately from the visual and practical shift. Moreover, as discussed above, the rationalist’s account cannot easily account for a change having occurred in the first place. Having adapted to the angled spectacle, the man—according to the rationalist’s account—is perceiving with the same form of perception that he had prior to the ‘shift’.

Rejecting such explanations and the accompanying interpretation of space as a rigid, predetermined Euclidean field, Merleau-Ponty argues that the man’s new spatial level is not connected to his body “as it in fact is, as a thing in objective space,” but rather to his body as a “...system of possible actions, a virtual body with its phenomenal ‘place’ defined by its task and situation” (Merleau-Ponty, PhP 250). In other words, one’s spatial level is called for by the situation with which one is confronted, and is brought about in conjunction with one’s abilities to find a way of moving and acting successfully in the given situation. The timing of the man’s spatial shift when looking into the tilted mirror confirms this. The spectacle in the mirror becomes his own—his spatial level—at the same time that his sense of his body and its abilities align with the objects it encounters in a way that allows for his tasks to be successfully carried out. In other words, his new spatial level arises in conjunction with his bodily ability to function in the situation with which he is confronted, and the objects and general axes of this...
situation settle into a ‘proper’ position as he finds himself able to be successful in this project. Describing this connection between spatial levels and our varying projects, Merleau-Ponty writes: “Each of the levels in which we successively live makes its appearance when we cast anchor in some ‘setting’ which is offered to us” (Merleau-Ponty, PhP 253). In short, then, the man finds himself in the spatial level that matches his bodily activities, or, said otherwise, his “...body is wherever there is something to be done” (Merleau-Ponty, PhP 250, my emphasis).

These examples support our prior criticisms of empiricism and rationalism insofar as they show that we do not impose an orientation on our surroundings nor do we have an orientation automatically imposed upon us. Instead, as the tilted mirror example suggests, a person’s body finds its orientation in conjunction with his spatial level. Before he has established this spatial level, he is not sure of his own body; he finds it to be temporarily unreliable. It is when the man finds the spatial level of the spectacle in the mirror that he finds himself to be once again ‘in possession of’ his limbs. Even though this possession may be of a wholly different orientation than that which he has in his typical daily life, he nevertheless feels completely at home in this new level of embodiment. He does not notice or attend to a difference; he is living in this new level. We can see a further example of the connection between one’s spatial level and bodily capacity in a more common experience. When awakening abruptly in a strange place in the middle of the night, a person may fail to have a sense of the surrounding layout of the room—even at the basic level of what counts as up and down. If the person attempts to stand up at this point, he will likely stumble or falter, because he has not yet gathered the ‘proper’ sense of how his body fits into the surroundings. It is when he regains a sense of
the room’s level—a sense that is neither purely ‘intellectual’ nor purely ‘physical’, but rather wrapped up with his lived need for and attempts at finding a way about the place—that he will also regain the ability to move about successfully. In both examples, one’s body is ‘owned’ and ‘in position’ insofar as one has secured or settled into a spatial level.

It is, then, the spatial level as a whole that provides us with our stability, with our orientation. Merleau-Ponty supports this conclusion when he writes: “We remain physically upright not through the mechanism of the skeleton or even through the nervous regulation of muscular tone, but because we are caught up in a world. If this involvement is seriously weakened, the body collapses and becomes once more an object” (Merleau-Ponty, PhP 254f, my emphasis). In these moments of collapse, we catch sight of the contingency of our experiences of an ‘upright’ world and of ourselves as oriented beings who have a given spatial setting. There is neither an external nor an internal guarantee of the stability or proper positioning of our body in the world; there is also no fixed spatial surrounding or setting for our experience. Instead, we are always involved in establishing and maintaining a spatial level and, with this, our sense of ‘uprightness,’ or, more generally, of orientation.

Though the body has no preset or pregiven orientation that it imposes on our spatial experience, it has been of central importance in establishing this level. As Merleau-Ponty writes: “...although the body, as a mosaic of given sensations, has no specific direction, nevertheless, as an agent, it plays an essential part in the establishment

\[105\] The sight of this contingency brings with it a sense of ‘vertigo’ similar to that which we discussed in chapter 2, footnote 13; see also the conclusion of this work. Merleau-Ponty writes: “The instability of levels produces not only the intellectual experience of disorder, but the vital experience of giddiness and nausea, which is the awareness of our contingency, and the horror with which it fills us. The positing of a level means losing sight of this contingency; space has its basis in our facticity” (PhP 254).
of a level” (Merleau-Ponty, PhP 249). In the mirror experiment, for instance, it was along with the man’s flexible bodily possibilities for activity that his new spatial level was able to develop. Thus, it is through our bodily-based attempts to navigate successfully with and amongst the things and challenges we encounter that we gain a certain access to our surroundings, and that a spatial level can appear; and it is with this appearance that our body develops an orientation.

By means of this account, we are avoiding the mistake of thinking that the body carries within itself an orientation that it provides to the situation or that it is subjected to an orientation given automatically by the surrounding environment. Though we may find a spatial level through our active engagement with our surroundings, this does not imply that the activity in which we are involved includes the laying down of our body’s prior orientation on these activities. Likewise, though our surroundings may place certain demands upon our bodies—such as the forces of gravity, buoyancy, and so forth, this does not determine in advance how we will establish our spatial level in light of these demands. Contrary to either of these alternatives, if the body is to be capable of taking on new spatial levels—as it, in fact, is—the body must be creatively open to the demands of the new situation—that is, it must neither bring a sense of orientation with it that it imposes on its surroundings nor be a passive recipient of an externally enforced orientation.106 The body should be understood as a capacity for shifting possibilities, for accepting shifting orientations. As Merleau-Ponty observes: “The possession of a body implies the ability to change levels and to ‘understand’ space, just as the possession of a voice implies the ability to change key” (Merleau-Ponty, PhP 251, my emphasis). Thus,

106 Gallagher offers a clear discussion of the, so to speak, symbiotic relationship between body posture and environment on pp. 163-65 of “Lived Body and Environment.” See also Leder on this point (The Absent Body, pp. 34-35).
against both the empiricist and the rationalist, it must be acknowledged that the
orientation of our body develops through the activities we are engaged in, the possibilities
we have for engaging in further activity, and, ultimately, through the spatial levels that
arise through both of these.

Since the body is tied up in the development of our spatial levels, the body and its
specificities not only allow us to achieve certain levels, they can also serve to block the
development of certain imaginable and even common spatial levels. Using only our own
natural abilities, we cannot, for example, take up free flowing movement in the sky as a
bird can; nor can we make agile movements through treetops like a monkey, or glide
across the surface of water as a water spider does. In other cases, it is not a matter of
‘natural’ human limitations or needs that keep us from certain spatial levels, but rather of
a lack of developed habits. The gymnast, for instance, can move about on a small beam
or between a set of uneven parallel bars owing to years of practice that she has put into
learning how to move about in the levels of these settings; most people could not even set
foot or hand on her familiar terrain. In still other cases, there are some levels that are
typically available to human beings and require no extraordinary means of habituation,
but that may not exist for others owing to fundamental differences in existential
possibilities connected to their bodies. Examining one example of such a difference will
allow us to see still further into the role the body plays in our spatiality.

After suffering a stroke, some persons not only become paralyzed on one side of
their bodies, they also ‘neglect’ the world on the side of their paralysis—sometimes even
omitting the recognition that they are paralyzed on this side.107 These persons generally

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107 For clear discussions of this phenomenon (albeit with analyses of the phenomenon that
Merleau-Ponty would largely dismiss), see Halligan and Marshall’s “Neglect of Awareness,”
fail to respond to questions about the ‘paralyzed’ side of the world, fail to report obvious events or features of this side, fail to acknowledge a certain task on this side that has yet to be accomplished, and so forth. If such a person is rotated by 180 degrees, she will, however, come to acknowledge the previously neglected side, but will simultaneously fail to acknowledge the side of the world she had recognized prior to the rotation.

In spite of these ‘failures’, these subjects are not blind to this paralyzed side—a fact that proves problematic to any explanation of this phenomenon that is based strictly on empirical or physiological bases. For instance, spatial neglect sufferers tend to notice vigorous or large motions on this side such as a quickly moving person or a flashing light. Even more strikingly, they demonstrate in certain cases that they can and do notice or respond to details that they fail to explicitly acknowledge. For instance, one study describes an experiment in which patients suffering from spatial neglect pertaining to their left side were shown two nearly identical drawings of houses. In one of the drawings, however, flames were drawn coming out of the left set of the house’s windows. Though the test subjects reported that the drawings of the houses were identical, they also reported that if forced to choose between these ‘identical’ houses, they would prefer to live in the house that—though they themselves did not explicitly mention this feature—did not have the flames coming out of its left side (Ramachandran and Blakeslee 117-18).

In a more routine example, one such woman would not eat the food on the left side of her plate; yet, ‘knowing’ that she was missing something, she would, after finishing with the right side, move herself around the plate in her wheelchair until she found more food, and continue doing so until no amount of turning would produce more food (Ramachandran

Marotta et al.’s “Hemispatial Neglect,” and Ramachandran and Blakeslee’s Phantoms in the Brain, ch. 6.
and Blakeslee 118). In both of these situations, there is a definite spatial omission: The persons do not explicitly acknowledge that they are experiencing something on the ‘missing’ side. Yet, in both situations as well as those in which vigorous movements are detected, the persons do show some type of recognition that they have noticed something on their ‘neglected’ side. These examples demonstrate that these persons at some level have the ability—even if they generally do not acknowledge or notice this—to see their ‘neglected’ side. Thus, they cannot be described as blind to this side. These observations already cast suspicion on an account that appeals solely to physiology to explain this phenomenon. Let us look more closely, however, at one further physiologically-based account that attempts to explain spatial neglect following a stroke in the right brain.

A popular neurological assessment of this type of spatial neglect focuses solely on patients with left-hemisphere spatial neglect, and identifies the damage as existing in the right brain lobe and accompanying neural circuitry. Neurologists have associated the right brain lobe with “global” aspects of sensory perception, whereas the left lobe is considered to have a smaller “spotlight” and to be responsible for perception of things happening entirely on the right side of the person’s external world (Ramachandran and Blakeslee 117). Thus, when the right lobe is damaged, neurologists assert that a person loses a “global” sense and has only the right-side-of-the-world “spotlight” provided by the left lobe. As a result, the patient does not notice the left half of the world. There are significant problems with this explanation, however. To begin, such an account fails to explain how such patients are able to notice things on the left side when the situation demands it. Moreover, this account cannot explain why many spatial neglect sufferers

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108 For a clear account of this position, see Halligan and Marshall’s “Neglect of Awareness.” See also Ramachandran and Blakeslee’s discussion in Phantoms in the Brain on pp. 44-46, 50-51, 115-17.
recover a ‘full’ spatial view even though their paralysis and related brain damage persists (Ramachandran and Blakeslee 119). Perhaps most significantly, such an account fails to offer an explanation for those persons suffering from right-hemisphere neglect.109 According to this account, a person suffering damage to the left-lobe should retain their ability to see the whole world, since the global vision provided by the right-lobe should compensate for the loss of the “spotlight” ability provided by the left-lobe; yet, there are significant numbers of left-lobe stroke victims who experience spatial neglect in the right hemisphere. Once again, then, an empirically based account fails to explain this spatial neglect phenomenon.

A purely psychological or rationalist account also fails to capture the full nature of this phenomenon. The psychological account may, for example, identify the problem as arising out of an emotional need to repress the recognition of the horrible loss that the subject has suffered through the paralysis. Merleau-Ponty argues that such an interpretation rightly addresses the significance of the problem in the person’s life, but it

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109 It has been common in the literature on spatial neglect to emphasize or even to single out patients with left-hemisphere neglect; Ramachandran and Blakeslee, for example, claim “...neglect occurs primarily after injury to the right parietal lobe and not to the left” (Ramachandran and Blakeslee 117). Yet, there are large numbers of cases of people who have right-hemisphere neglect that accompanies the paralysis of their right side and damage in their left brain lobe. For a discussion of this discrepancy, see Bowen et al., “Reasons for Variability in the Reported Rate of Occurrence of Unilateral Spatial Neglect After Stroke.” This study suggests that the existence of right-hemisphere neglect patients are overlooked or at least underemphasized. The authors reviewed a series of spatial neglect studies among stroke sufferers, and noted that in these studies 43% of persons with right-brain damage were identified as showing signs of left-hemisphere spatial neglect, but also noted that a full 21% of patients with left-brain damage showed right-hemisphere spatial neglect. Already the sizable occurrence of spatial neglect in left-brain stroke victims calls for a different account than that given by the right-lobe damage theory. These numbers become even more striking when one considers that the same study found that reports of spatial neglect in left-brain damaged stroke victims were less likely to be reported or were being measured by inappropriate testing strategies given the other types of problems that arise in left-brain stroke victims. These points could suggest that studies into spatial neglect arising in conjunction with left-lobe damage may not be considered closely or carefully enough—perhaps because they cannot easily be accounted for by the prevailing neurological theory and its emphasis on the role of the right brain lobe.

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does properly identify the cause of the disability; it does not, for example, attend to the role of the body in shaping this disturbed perceptual experience. Instead, it assigns the denial to a psyche that represses or cuts off those representations of the world that are associated with the side of the body that is paralyzed. Thus, the psychological account takes up a position similar to the rationalist account insofar as it conceives of the psyche as an overarching and unifying power that gives its form to all perceptual experience. As such, it cannot explain the perceptual exceptions that these subjects experience. For instance, certain types of physical stimuli or apparatuses can trigger these patients to make open admissions regarding their ‘missing’ side. For example, a mirror placed on the patient’s ‘good’ side can allow them to see and respond to objects on their ‘missing’ side, and to do so with awareness and even pleasure (Ramachandran and Blakeslee 124). Stimulating nystagmus—rapid back-and-forth eye movements—or the use of prisms can also lead to voluntary recognition of the previously absent side (Ramachandran 144-47; Parton and Husain 118, respectively). If the psyche and its need for denial are responsible for and capable of securing the subject’s spatial neglect, the stimuli in these experiments should not be able to break through to the subject. Thus, the psychological account joins the physiological account in falling short of explaining this phenomenon.

Returning to our analysis of spatial levels, we can, however, provide a successful account of this spatial neglect. Let us take as a starting point Merleau-Ponty’s assessment of similar cases: “The motor disturbances of cerebellar cases and those of psychological blindness can be co-ordinated only if we identify the basis of movement and vision not as a collection of sensible qualities but as a certain way of giving form or structure to our environment” (Merleau-Ponty, PhP 115, my emphasis). Thus, rather than

thinking of the paralyzed person’s spatial neglect as either as a sign of neurological
damage or of an intellectual repression of such damage, we should understand this
neglect as the general structure that this person is able to bring to his world. These once
able-bodied patients suffered a sudden widespread loss of capacities that is primarily
based on one side of their bodies. Moreover, the reach of their condition does not apply
to a select activity or two, but rather to a systemically affected and changed lifestyle. As
a result, they are not facing an isolated impossible activity or even a set of them, but
rather an entire sphere of impossibilities. Since our spatial level arises, as we saw earlier,
as our body and its abilities align with the objects it encounters in a way that allows for
our projects to be successfully carried out, it is fitting that a person who has suddenly lost
the use of an entire side of his body may experience a corresponding contraction in their
spatial experience, in their experience of their world.\footnote{Kvinge et al. (2002) support this conclusion in their analysis of the changed “life-world” of persons having suffered a stroke (See esp. p. 64).} Merleau-Ponty’s description of
the experience of the phantom limb is helpful here:

> It is precisely when my customary world arouses in me habitual intentions,
that I can no longer, if I have lost a limb, be effectively drawn into it, and
the utilizable objects, precisely in so far as they present themselves as
utilizable, appeal to a hand I no longer have. Thus are delimited, in the
totality of my body regions of silence\footnote{Russon supports Merleau-Ponty’s assessment when he writes that the body is “...the parameters for possible bodily involvement which define the matrix of possible dimensions of perceptual experience” (Russon, “Embodiment and Responsibility” 294).} (Merleau-Ponty, PhP 82, my
emphasis).

Thus, the spatial neglect experienced by stroke victims can be understood as tied up with
their inability to take up a particular range of actions; correspondingly, the spatial level

\footnote{Kvinge et al. (2002) support this conclusion in their analysis of the changed “life-world” of persons having suffered a stroke (See esp. p. 64).}
\footnote{Russon supports Merleau-Ponty’s assessment when he writes that the body is “...the parameters for possible bodily involvement which define the matrix of possible dimensions of perceptual experience” (Russon, “Embodiment and Responsibility” 294).}
they do experience reflects that world that the patients can inhabit. This claim is further supported by research that shows that neglect patients are often able to locate objects on their neglected side when they are asked to locate a thing to use for a specific purpose (rather than asked to locate an object identified by its name) and when they are also able to take up this use in some meaningful way. For example, a person with spatial neglect may not notice “a cup” on her neglected side, but she may find and use “something that can be used for drinking”; this person’s ‘neglected’ side is, thus, “activated by affordances of objects” (Behrmann et al. 261, my emphasis).113

In significant ways, this explanation resembles that of the psychologist. Spatial neglect is a form of denial regarding the inaccessible side of the world. Yet, this is not simply a ‘psychological’ denial, but rather one that is wrapped up with what the person can do. The important shift here is to recognize that consciousness is not a matter of having certain volitional attitudes—such as ‘I think,’ ‘I affirm,’ ‘I deny,’ and so forth—but rather of being able to partake in certain activities—e.g., I watch, I desire, I move, etc. As Merleau-Ponty writes: “Consciousness is in the first place not a matter of ‘I think’ but of ‘I can’” (Merleau-Ponty, PhP 137). Thus, the stroke victim’s denial is not one relegated to an isolatable thought or emotion about a certain isolatable fact of his existence. Rather, the subject is suffering from a systemic lived inability to propel

113 For significant research on the ability of action-based searches to “activate” previously neglected areas, see also Humphreys and Riddoch (2001 and 2001/2), and Riddoch et al (2003). See McIntosh et al. (2004) for a related study in which neglect patients are not able to equally divide a line between two objects, but are able to reach ‘correctly’ for something midway between the same two objects. See also Michel et al. (2003) for a study of induced spatial neglect in ‘normal’ subjects that concludes that sensori-motor activity is crucial in establishing one’s spatial range, and that spatial neglect cannot be understood merely as the effect of damage to the cortical brain areas.
himself forward from the one side of his body, and his consciousness reflects this inability. Merleau-Ponty supports this assessment when he writes:

...the life of consciousness—cognitive life, the life of desire or perceptual life—is subtended by an ‘intentional arc’ which projects round about us our past, our future, our human setting, our physical, ideological and moral situation, or rather which results in our being situated in all these respects. It is this intentional arc which brings about the unity of the senses, of intelligence, of sensibility and motility. And it is this which ‘goes limp’ in illness (Merleau-Ponty, PhP 136, my emphasis).

Thus, the person’s loss of the ability to do things on one side of his body is conjoined with an inability to find himself in the situation belonging to that side. The person cannot act or reach out to this side of the world, and, thus, does not find this part of the ‘objective’ world. Instead, he has a spatial level—a world—that matches his existential possibilities.114

This type of spatial neglect does not, of course, accompany all injuries or bodily limitations and it goes away or diminishes in many paralysis victims. This range of spatial possibilities reflects the way in which spatial levels are tied up with our overall

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114 Gallagher makes a related point about the experience of pain in general in his article “Lived Body and Environment,” pp. 150-52. Before it becomes thematized for us, pain is lived not as a localized bodily phenomenon, but rather as a shaping of our environment as a whole. He writes: “A problem with the body is a problem with the environment because the environment is lived as the body is lived” (Gallagher 164). Leder also extends such an analysis to our experience of moods. Our world can be shaped as much by our emotions as by our physiology or experiences of pain. He offers the following example of what happens to a person’s body and experience of being in the world when anxiety overpowers him: “Reading a paper at an important conference I discover my hands becoming clammy, my voice beginning to crack. My heart is racing and my breathing takes on a choked quality. Try as I might to focus on my talk, my attention is pulled back to these physical manifestations [of my anxiety]” (Leder 84-85). In his example, the body rises to the fore of the anxious person’s attention, and takes up all his ‘attentional’ space. In the grips of this emotion, his spatial level shrinks to that of his overwhelmed body.
way of opening onto our world through our bodies. For an able-bodied person, for example, an impossible activity may be a source of frustration, but it does not—as it does for the stroke victim—signal a sudden change in what one was able to do, nor is it usually connected to an entire sphere of impossibilities. Still, as we have seen through the gymnast, able-bodied people are not equally open to all spatial levels. For example, for most people a cliff wall will not appear to be an avenue for traveling, but for a rock climber there is immediately visible a series of possible pathways. Here, the basic underlying bodily possibilities of one person do not exist in another, and there is a corresponding difference between the types of spatial level that these people can find in the ‘same’ surroundings. Thus, an ‘objectively identical’ place can have entirely different meanings for different people depending on their possibilities for acting in that place. Insofar as the non-rock climber would claim that there is no path to ascend the cliff wall, he may be considered as neglecting this spatial realm or, at least, as not being open to it. This ‘neglect’ does not, however, generally pose or point to a problem for this person, since it is not a lack that permeates the person’s daily experience of moving about or his basic life concerns and interests; it is limited to this particular instance and to an optional form of entertainment at that. This ‘spatial neglect’ is not wrapped up with a

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115 Russon supports this conclusion. He writes: “The world is what it is for us only because we commune with it bodily, and its meaningfulness is a significance in which we are already implicated. This is true from our primitive spatial inhabiting of the world, in which the orientation of things derives from our motor projects, all the way to the extremely sophisticated determinacies which are our social and intellectual existence” (Russon, “Embodiment and Responsibility” 294).

116 The way in which we grow into our bodies—are ‘trained’ into our bodies—necessarily has a tremendous effect on the potential worlds to which we are able or inclined to open ourselves, since it is by means of these early experiences of embodiment that we try certain activities and reject others, that we notice certain aspects of our surroundings and miss or ignore others, that we are curious about developing some new ability and dismissive or scared of another, and so forth. In chapter 5, we will discuss the formative effect that our first home has on our bodies in this way; and, in chapter 6, we will see through the experience of the agoraphobic how a limiting childhood home experience can contribute to a contracted experience of the world in adulthood.
fundamental existential change or lack in his bodily means of opening onto a world.  

Thus, for an ‘able-bodied’ person, an inability to attain a certain spatial level does not lead to the type of spatial contractions experienced by the stroke victim.

Similar points can be made about a person who breaks a limb or, alternatively, about someone who lives with paralysis, but does not show symptoms of spatial neglect. When a person breaks a leg, there are certain ways in which her spatial possibilities shift. Stairs become obstacles; long walks are impractical; and so forth. Still, these changes are temporary and limited, and are experienced from the perspective of someone who will soon regain the ease that once accompanied these areas. Moreover, this change is not accompanied by the neurologically extensive impairments of a stroke victim. By contrast, persons who live with enduring paralysis following a stroke are not typically living with the expectation that their abilities will soon change. They will frequently live from within their bodily restrictions throughout life, and this will play an ongoing role in the type of world that they can engage. Additionally, these restrictions arise in the context of complex and interwoven fields of damage. Still, not all persons with paralysis suffer from spatial neglect, and of those who do, many do not persist in experiencing it

117 I make a related argument about the contraction of one’s space as it relates to one’s embodied existential situation in an article titled “The Interpersonal Expression of Human Spatiality: A Phenomenological Interpretation of Anorexia Nervosa.” In this article, I argue that the experience of the anorectic is one in which her bodily contraction and retractive gestures of not eating or participating in other common and significant human exchanges (around food of course, but also significantly around issues of communication) reflect a tangible spatial contraction in her world, a contraction that is rooted in an ailing interpersonal situation (usually that of the family) in which her voice is not heard and does not count. Supporting the idea (albeit certainly not intentionally) that the anorectic’s world is contracted, the sister of one anorectic comments: “It is like her world is tunneled from here to there [points from her body to the floor] down to where the number points on the scale” (Charmaz 176). Ultimately, I would argue that despite the difference in origin of the disorders, the anorectic’s experience of embodiment has similar features of limitation to that of the person having suffered a stroke, and that she also experiences a corresponding spatial contraction. For a relevant analysis of the experience of ‘losing one’s self’ in people with chronic illness and the corresponding constriction of one’s world, see Charmaz’s “Loss of Self: A Fundamental Form of Suffering in the Chronically Ill.”
even though their paralysis remains. For this to occur, these persons must be able to find a new way of creating and discovering the spatial level of a ‘full’ world, and must do so from within the bodily abilities they possess.

These spatial variations are possible because the body—even though it provides certain structural possibilities and, in some cases, limitations for how we can open onto the world—does not guarantee that we will or insist that we have to do so in a given way. Instead, it is through our bodies that we can find varying ways to take up the demands of our situations. As we have seen, it is as a person’s body finds a way to become coordinated with the demands of his situation that a spatial level unfolds before him. In other words, “...he is his body and his body is the potentiality for a certain world” (Merleau-Ponty, PhP 106). The space that arises therein is a space of bodily based potentialities, not that of a pregiven, ‘impersonal’ Euclidean framework.

3. Outside Support for the Body as Integral in the ‘Production’ of Space

The research of Piaget and Inhelder on the development of spatial concepts in children generally supports Merleau-Ponty’s observation that one’s spatiality is tied up with one’s body and bodily abilities.118 Piaget and Inhelder argue, for instance, that

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118 Piaget and Inhelder’s interpretation of human spatial experience differs fundamentally from Merleau-Ponty on certain points, however. To a large extent, they present their developmental picture of spatiality as one in which the developmental endpoint of spatial understanding is the ‘achievement’ of the Euclidean perspective. Not only does Merleau-Ponty question the weight placed on ‘spatial objectivity’ by this account, but he also argues that the child’s experience of space—even as Piaget and Inhelder describe it—contains important resemblances to the nature of adult spatial experience; in other words, as we have already begun to see in our analyses, adult spatial perception proves to be far less Euclidean-like than Piaget and Inhelder suppose (see also Merleau-Ponty, PhP 355). Moreover, Piaget and Inhelder focus on the child’s “conceptual” experience of space as the site for examining spatial development, whereas Merleau-Ponty
conceptions of space do not follow simply from the mere perception of things in space. Instead, they maintain that children develop an understanding of and relationship with space through being involved in and learning new activities—such as being able to grasp an object, move an object, arrange objects, and so forth (Piaget and Inhelder 25, 41, 449, and 454). To reach a generalized spatial schema—i.e., a spatial system of integrated positions, regular distances, fixed dimensions, and so forth—Piaget and Inhelder argue that children must first develop the abilities to perform activities that would correspond to—and make possible—such a view of space (Piaget and Inhelder 193).

Piaget and Inhelder identify a developmental pattern for the child’s changing conception of space—one that moves from the topological to the projective and, finally, to the Euclidean—and they ascribe this development directly to the child’s development in her abilities to perform certain actions with her own body and as well as with other things.119 The stages correspond, for example, directly to developments in the child’s abilities to accomplish various tasks related to motion, arrangement and organization, rotation, drawing, etc. For the purposes of our analysis of spatial perception, it is most significant to notice that all the stages of spatial concept development are rooted in developments of bodily-based abilities and that the formative root of all spatial notions lies, according to Piaget and Inhelder, in the child’s initial experiences of nearness—an

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119 For a full account of Piaget and Inhelder’s developmental theory of human spatiality, see The Child’s Conception of Space (Piaget and Inhelder). For a brief layout of their analysis of the child’s conceptual progression from topological space to Euclidean space, see p. 419ff. of the same text.
experience fundamentally tied to the child’s own body. Ultimately, Piaget and Inhelder argue that children do not and cannot gain spatial perspective through mere intuition or exposure, but rather through operationally-based bodily activities (Piaget and Inhelder 209). The child’s operative abilities are emphasized at each point as the source of the varying conceptions of space we develop. This research serves to support Merleau-Ponty’s position that it is through our body and its abilities that we experience spatial situations and space itself.

Moreover, though Piaget and Inhelder identify the Euclidean conception of space as the final developmental stage of human spatial intuition (Piaget and Inhelder 454-55), they significantly recognize that this Euclidean stage of spatial intuition is not a framework that is infallible even for an adult.¹²⁰ They argue that, generally speaking, adults—as well as children who have reached the Euclidean stage of development—are capable of operating and thinking of space on the model of a perspectiveless grid system. Yet, they admit that this framework can slip away if an adult is ‘forced’ to make spatial decisions or descriptions under pressure. For example, when asked in a time-limited scenario to place an object in an identical position in a setting that is rotated by 180º, an adult will tend to succeed in placing the object in the proximate position, but will tend not to make the proper rotation of the object (Piaget and Inhelder 426). In this case, then, the adult is, according to Piaget and Inhelder’s analysis, led by the basic topological notions of nearness and internal relationships, and does not operate out of a notion of the object’s

¹²⁰ This and the following points may serve to soften Merleau-Ponty’s criticism of Piaget as a theorist who places the “truths of rationalism” as the peak of spatial development. Piaget and Inhelder seem, for example, to allow more spatial ‘contradictions’ in adult experience than Merleau-Ponty’s assessment of their position suggests. Then again, Piaget and Inhelder persist in framing the spatial experience as one of “intuition,” whereas Merleau-Ponty’s account firmly rejects this, as we have seen in our criticism of the rationalist’s analysis of spatial perception. For Merleau-Ponty’s criticism of Piaget’s spatial analysis, see PhP p. 355.
position in a fixed, absolute grid system. Thus, even for the adult, Piaget and Inhelder maintain that the Euclidean frame or reference is still connected to and relies on past, present, or potential forms of action; it is not a disembodied application of a purely ‘objective’ framework. They write: “Geometrical intuition is essentially active in character. It consists primarily of virtual actions, abridgments or schemata of past, or anticipatory schemata of future actions, and if the action itself is inadequate, intuition breaks down” (Piaget and Inhelder 452, my emphasis). Ultimately, then, as the adult’s failure in the time-limited activity demonstrates, “[t]he ‘intuition’ of space is not a ‘reading’ or apprehension of the properties of objects, but from the beginning, an action performed on them” (Piaget and Inhelder 449, my emphasis). Correspondingly, by Piaget and Inhelder’s own account, the Euclidean conception of space should not be understood as a form of spatial intuition that is a rigid or predetermined feature of human spatial awareness or activity, but rather, to use Merleau-Ponty’s language, a level of spatial experience that is fundamentally rooted in bodily based activities and experiences.

4. A Possible Challenge to the Body’s Role in Spatial Experience

The existence of cultures that use absolute language systems—that is, language systems that use absolute reference frames rather than egocentric or topologically-based reference systems—from childhood onward could initially be seen as challenging the argument that the body is at the basis of all human spatial experience.121 One researcher of absolute language speakers proposes, for example, that Tenejapan people who speak

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121 See chapter 1, section IV.3 for my initial discussion of absolute language cultures and their spatial conceptions.
the absolute language Tzeltal do not think, speak, or navigate with the help of any bodily-grounded or -rooted reference system. He emphasizes the independence of an absolute language system from any bodily-oriented bearings, topological references, and so forth: “Absolute direction systems give us external bearings on an array, but without employing viewpoints. They are ‘allocentric’ systems [i.e., systems that have an externally rather than a personally based reference framework]” (Levinson 372). In light of Tzeltal’s un-centered, perspectiveless nature, Levinson and Brown argue that Tzeltal, as with other absolute language systems, “...fails to make...cleavages of space along the three planes of the human body. Unlike in English or German, there is no entire cosmic system of orientation extended from ego’s body” (Levinson and Brown 22). Levinson and Brown also argue that left and right, east and west, and even clockwise and counter-clockwise discriminations are in no way innate or necessary for human functioning. “You can live consistently...with space thought of merely as a network of positions...” (Levinson and Brown 32). In support of this, they give examples from the Tenejapan culture in which body parts and surrounding spaces are not identified as having left or right sides, but rather are typically considered in view of the symmetry or arbitrariness of the whole; if a position of an object is required, the Tenejapans tend to speak about the object with respect to its position relative to a customary direction of turning or with respect to the culture’s external categories of “uphill” and “downhill” (Levinson and Brown 19-20, 22-23).

Though another absolute language researcher argues along similar lines that “[h]umans have the cognitive capacity to decentre spatial description almost entirely in everyday life, in just the way that Newton explicitly pioneered as a scientific specialism”
(Wassmann 648), neither this claim nor the research of Levinson and Brown prove that people who use ‘decentred’ languages experience space—either initially or fundamentally—as a framework that is absolute and independent of themselves and their bodies. Even a report by Wassmann and Dasen that argues for the likelihood of absolute language speakers acquiring an absolute frame of reference prior to any topological reference system cites an ‘opposing’ study of an absolute language culture that demonstrates that although children in this culture develop projective, non-centered spatial notions earlier than children who speak relative languages, these absolute language speaking children still acquire topological notions prior to any projective ones (Wassmann and Dasen 706; de Léon (1994), respectively). Moreover, five years after Wassman and Dasen proposed that there was a trend in the absolute language subjects to move from absolute encoding toward relative encoding, Dasen, along with two new researchers, admitted that this trend could not be confirmed using similar samples in a more rigorously designed and directed experiment (Mishra et al. 381). In fact, this later study, which was designed specifically to test the connection between spatial language encoding and spatial cognitive development in populations with absolute language systems, revealed, contrary even to these researchers’ initial expectations, that any link between the two is both weak and inconsistent (Mishra et al. 378). These researchers concluded, therefore, that “the overall age trend in spatial language development is not incongruent with Piaget’s theory:...the [spatial] references are first centered on the display and the child’s own body, then projective references become important, either in the immediate surroundings...or further away..., until the geocentric [i.e., Euclidean] systems are fully mastered” (Mishra et al. 379). According to their sampling, this
progression holds true even in cultures in which egocentric language is never used (Mishra et al. 379).

In spite of initial suggestions to the contrary, the research into absolute language cultures can, therefore, support the argument that no matter what form of language a person speaks—relative or absolute—the speaker does at least initially situate herself with respect to her surroundings and does so through her bodily situation. Having dismissed this possible challenge, let us return now to our phenomenological analysis to see how the body can be understood not only as our initial means of opening onto a spatial world and of finding our spatial orientation, but also as the basis for our experience of the breadth of space.

5. Space as the Dilation of the Body

Integral to our spatial level is an experience of the expanse of the space we inhabit. In even a few brief examples, we can begin to see that we experience space as expanding and contracting around us, and also see that it does so in accordance with our activities, our abilities, our interests, and so forth. For instance, as we already saw in the case of the person with spatial neglect, our spatial world can become smaller if we are suddenly deprived of certain abilities. Although for different reasons than for these, the gymnast’s space also shrinks when she is immersed in her routine, and thereby excludes the surrounding audience and features of the gym that stand outside of her region of action and concern. Equally, a person searching for star patterns in the night sky is
stretched out across the atmosphere, and may even feel a surge of enthusiasm upon noticing the immensity of this breadth he can reach across. As these examples already suggest, space is not a static grid of distances or openings that surrounds us. Rather, space and its ‘dimensions’ are bound up with the range of our own activities.\(^\text{122}\) As Merleau-Ponty argues: “The points in space do not stand out as objective positions in relation to the objective position occupied by our body; they mark, in our vicinity, the varying range of our aims and gestures” (Merleau-Ponty, PhP 143). Space is, in other words, a dilation of one’s body insofar as the body is a way of having and inhabiting a world. As we established earlier, we exist as being-in-the-world—that is, we are beings who are spread throughout a world, our world. To make this point more evident, let us turn first to an example that will enable us to see the ways in which our aims and gestures serve to establish the ‘reach’ or dilation of space around us.

A worker on an assembly line who is responsible for precision welding on a circuit board is hemmed in tightly to the space of his work surface. He is not ‘awake to’ the dozens or even hundreds of other workers and work stations around him; if the flow of his work material is constant, he may not even notice the person directly next to him who is supplying him with that material. This worker’s space is very different from that

\(^\text{122}\) For a clear account supporting this position, see Schrag’s “The Lived Body as a Phenomenological Datum”, especially pp. 213-14. It is also interesting to observe here that even what have become our standard or fixed forms of measurement or spatial references are often based on our bodies or bodily experiences. Consider, for example, the bodily-grounded origins of these measuring standards: The foot is distance from the heel to the tip of the longest toe; the hand is the width of the hand including the thumb; the length of the marathon is the distance between Marathon and Athens across which Philippides is said to have run in order to announce that the Athenians had defeated the Persians; the fathom is the length of rope held between two outstretched hands; the cubit is the distance from the elbow’s bend to the tip of the middle finger, and so forth. Though these measures have become standardized and may even seem like pregiven or anonymous features of our world, they are rooted in shapes or activities of our bodies that are readily accessible to us. Even the designation of a light year—which is based on a ‘natural’ phenomenon—is a standard rooted in the human activities of observation, perspective, quantification, etc.
of a foreperson who is responsible for monitoring the overall flow of the various work projects on the assembly line. This foreperson is spread throughout the workroom: She looks across the room, moves about the room, and is generally concerned with the overarching project of the room. She will not be aware of the minute details of each or any workstation. Her space is a larger and more generalized space. Though both workers can be argued to be in the same ‘objective’ space, they inhabit distinctly different spatial ranges—ranges that are tied up with the concerns of their projects. Merleau-Ponty supports this assessment:

Besides the physical and geometrical distance which stands between myself and all things, a ‘lived’ distance binds me to things which count and exist for me, and links them to each other. This distance measures the ‘scope’ of my life at every moment (Merleau-Ponty, PhP 286).

The workers’ projects rely on this difference in spatial scope. If the circuit board welder were to ‘leap out of’ the focused space of his work surface, he would be more susceptible to distraction and error; equally, to ‘leave behind’ the generalized space of the workroom would open the foreperson to the possibility of failing to see a need or a problem in the overall workflow.

Though the workers’ projects call for and bring with them a certain spatial range, these persons are not, of course, confined to the spaces of their tasks. Each can become distracted, and each can and does leave the job for a break or at the end of the workday. At this point, the space each inhabits will shift, and the range of that space will again be determined by the projects upon which each embarks. Thus, even the ‘unoccupied’ or ‘background’ space surrounding our current activities is not something separable or
isolated from our experience, but is rather that which is open to or waiting for our future possibilities. The circuit board worker finds that upon leaving behind the tasks of his work, the contained space of his workday opens onto the larger space of the workroom and he anticipates the even larger space of that beyond the factory, where he can take up his other life projects. In general, then, the existence of ‘background’ space—i.e., space in which we are not currently engrossed, but in which we could become engrossed—is reflective of our very potential to partake in projects other than those in which we are currently involved.

As we saw in the case of stroke victims, our bodily possibilities inform our spatial possibilities, and, thus, give shape to our way of being-in-the-world. This is true not only with respect to our general spatial level, but also with respect to our spatial range or dilation. Dyck’s research into the “lifeworlds” of women who develop Multiple Sclerosis (M.S.) supports this claim. Dyck found that women with M.S. undergo significant spatial contractions and spatial redefinition that corresponds to the changes in their bodily abilities. The women coped with bodily changes including fatigue, visual and sensory disturbances, balance and coordination problems, and bladder and bowel incontinence by

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123 This analysis bears some correspondence to the work of Halligan et al. in which three distinct types of space are identified—personal space (the space of the body), peripersonal space (the action space around the body), and extrapersonal space (vista space) (Halligan et al. (2003)). Although Halligan et al. identify these types of space as rooted in specific physiological processes and mechanisms that relate to activities carried out in these different frames of reference, they do acknowledge that these frames of reference and their physiological correlates are actively altered or modified by human activity.

124 We understand even the most distant space of the galaxy—a space that we will never inhabit—on the basis of this unfolding of action—that is, as a place where a rocket or probe can be sent, where planets can orbit, where things can move about and develop, where things can happen. Equally, the notion of ‘empty’ space is rooted in our experience of activity. When we imagine such a place, we do so by negation: We think of ‘empty’ space as a place devoid of the movements, activities, and things we know. We do not start with ‘empty’ space and then fill it up. Instead, space is both the background from which and foreground into which actions are able to unfold.
changing—either consciously or unconsciously—their spatial range (Dyck 309). For instance, a woman who could no longer walk for significant distances would limit her travels to a short distance from her home or to those destinations that a car or motorized vehicle could take her. Working outside of the home or even spending time in the larger neighborhood also became less frequent for these women. Additionally, many of women moved to homes without stairs or to homes in neighborhoods where essential stores and resources were close by. These examples present the women’s lived spatial range as contracting in conjunction with activities that have become restrictive or even impossible. Moreover, even within the spatial range that is inhabited by these women, their “...changing activity involved a renegotiation of the understanding and use of both the home and public space beyond it” (Dyck 316).125 Dyck’s findings suggest that the illness of these women must not be confined to a description of their ‘physical’ symptoms, but must also include the recognition of a fundamental change in spatial range that

125 Though there are many ways in which this spatial change is primarily one of contraction, Dyck acknowledges that in many ways the change is one of engaging with the ‘same’ surroundings in different ways:

[These] women [living with M.S.] restructure space as they redefine the meaning of their lives. The spaces of the built environment, at the scales of city, neighbourhood and housing are sources of constraint for the women, but are also remapped by them in relation to enabling resources. As the women redefine the meaning of their lives, they also have different perceptions of what is important within the environment and how access to valued resources and relationships could be achieved...(Dyck 318).

Returning to our earlier focus on spatial levels, we can describe these shifts as the ‘discovery’ of new spatial levels in which the women are able to find new ways of accomplishing things that had become or threatened to become closed off to them. We might describe these ‘accomplishments’ as signs of the women’s attempts at and accomplishments in ‘making themselves at home’ in what had at least temporarily become foreign territory. In chapters 5 and 6, we will consider how the home is never something that is simply given to us, but is rather something we are forever establishing, and significantly doing so in the face of the alien. While many people largely accomplish this task upon moving into a home, and thus have a stable experience of home, this is not true for all people (as the examples of the women with M.S. attest), and even for those for whom ‘home’ appears to be settled, we will see that while on a day-to-day level this may seem to be the case, being-at-home is never a completed project.
accompanies these symptoms. Here, again, we see evidence for the intertwining of our spatial experience with our bodily projects and abilities; specifically, we see how our experience of the dilation of space—or lack thereof—arises through our bodily possibilities for being-in-the-world.

Two additional and related aspects of our spatial experience support this characterization of space as the dilation of ourselves. Both pertain to ways in which we can, to some extent, feel the way in which space expands and contracts from us. First, we

126 The significance of these women’s regular spatial ranges also changes. If, for example, a person cannot reach or manage cooking appliances or has severe dietary restrictions or digestive problems, the kitchen may cease being a place of culinary creation and social gatherings, and instead become a site where basic nutritional needs are secured and this perhaps with difficulty. Likewise, if a person suffers from ongoing fatigue, the bedroom may change from the place where the day is ended to the place where the day is mainly spent; and so forth.

127 Given these analyses of the body’s role in determining spatial levels, it is not surprising that a child’s experience and conception of space differ so significantly from that of the adult. The toddler, for example, cannot move quickly or uniformly through even a small area, and thus does not share the adult’s expansive spatial range. Even a child who can walk and run with ease will be restricted to certain heights that her arms and eyes can reach, by her changing and not always proficient abilities to coordinate her limbs and small motor movements, and so forth. In light of these bodily factualities, the child’s spatial levels cannot be the same as those of the adult. Three blocks is a long and strenuous hike for a child who must take five hard won steps for an adult’s one; a counter or stovetop that is a daily part of an adult’s spatial setting is virtually non-existent for someone two feet tall; even a park where a child plays is not experienced as a flowing extension of the child’s daily space, since it is a ‘treat’, so to speak, insofar as it is only by means of an adult that this place is made open to the child.

These examples are not meant to imply that the child’s sense of space should always be considered as ‘inferior’ to the adult’s sense. There are also ways in which a child moves and in which a child experiences activities and scenarios as possibilities that open the child to experiences and conceptions of spatiality that are in many ways more flexible and more diverse than an adult’s. The child is less likely to feel hemmed in by designated pathways, whereas even during a stroll in the park, an adult is likely to follow the way set for her. The child’s limberness and size may also allow her to feel comfortable swinging on monkey bars, climbing up trees, trying different athletic feats, etc. Thus, even though the child may be restricted from certain spatial levels, such as those provided by driving or of other advanced forms of coordination or bodily development, the child may have access to worlds of possibility through the openness and flexibility of her body that the adult no longer sees or feels comfortable accessing. Regardless of any particular value we may place on the child’s experience of space, it remains the case that the child’s spatial levels differ in significant ways from those of an adult’s. Merleau-Ponty’s research can account for these differences insofar as the body, which holds dramatically different positions in the lives of the child and the adult, is shown to be the source of our opening onto a spatial world. Further reflections on the child’s experience of space follow below.
can experience ourselves as present in or spread throughout objects and places that are ‘ours’. Familiar or personal objects and places contain ‘concretions’ of us. For instance, the car a person drives on a daily basis becomes inhabited by him. He feels himself in it when seeing it from afar. If he is unable to find where he left it in a crowded parking lot, he may even exclaim or at least think upon first sighting it, “There I am.” Once he is ‘physically’ in the car, his body feels at home in it. His legs know just how hard to push its pedals and his arms just where to turn the wheel to get his desired results. Merleau-Ponty writes of such an experience: “To get used to a hat, a car or a stick is to be transported into them, or conversely, to incorporate them into the bulk of our own body,” and, in doing so, we are: “dilating our being-in-the-world” (Merleau-Ponty, PhP 143, my emphasis).128

We are also ‘transported into’ the places we frequent or that carry special significance for us. Such places take on our character, and become embodied extensions of us, and we can, therefore, encounter ourselves in these locations. For instance, a person may smile upon passing by a balcony where she spent a summer afternoon in pleasurable conversation. She may feel sadness pour over her when she crosses a street where a pet was hit by a car. She may suddenly remember some youthful escapade of hers when she walks through a park to which she has not been in decades. There are places that hold less pointed meanings for us, but that instead carry entire histories of meaning—for instance, the schools we attended, a stretch of road we have crossed over the course of years, or a regularly visited market. Returning to such places even years after they have ceased to be regular parts of our lives, we can be filled with their effect—

128 Leder also offers an excellent description of this reshaping of the body and world through tool usage (The Absent Body, pp. 34-35).
so strongly perhaps that we are, for a time, returned to certain ways of thinking, moving, and feeling that we had also left behind years before. Places from the past and those of our present can hold onto us so strongly that we may find it necessary to uproot ourselves from a particular place if we wish to leave behind certain ways of thinking and behaving.\footnote{129}{Salvador Minuchin, a family systems therapist, attends to spatially rooted habits of communication that we carry with us in his family therapy sessions. He regularly repositions family members or items of furniture in the therapy room to stimulate or cut off certain habitual and calcified pathways of communication (See Minuchin 122 and 143).}

Moreover, we do not even need to be ‘objectively’ in a particular place in order to be there. As Merleau-Ponty writes:

Our body and our perception always summon us to take as the centre of the world that environment with which they present us. But this environment is not necessarily that of our own life. I can ‘be somewhere else’ while staying here, and if I am kept away from what I love, I feel out of touch with real life (Merleau-Ponty, PhP 285-86).

In such a scenario, a person’s ‘objective’ body may be seeing and otherwise perceiving the immediately surrounding world, but her \textit{lived} body is cast across this ‘spectacle’ and is rooted somewhere far from it.\footnote{130}{In Antony and Cleopatra, Shakespeare captures this all too human experience in the anticipatory pain of Mark Antony, who when forced to part from Cleopatra says: “Let us Go./Come. Our separation so abides and flies/That thou residing here goes yet with me,/And I hence fleeting, here remain with thee” (Shakespeare I.3.50-4, p.1006).} These experiences of finding ourselves in objects and places further emphasizes the character of our spatial experience as expansions and contractions of ourselves that occur in conjunction with both our habitual and past activities as well as those in which we are presently engaging.
Second, and related to these observations, we can also feel the way space is a
dilation of our bodies by considering the reaction we may have to something or someone
entering ‘our’ space. If a person is studying at a public library, she can feel tangibly
encroached upon if another patron sits down with her in spite of the fact that there are
dozens of free tables. Prior to this intrusion, the woman had spread herself out at what
she took to be her own table. She had a certain sense of freedom and entitlement in doing
so, because of the relatively empty library. Thus, when another person chose this table
instead of other empty ones, she felt as though someone has invaded her table, her
space. This experience would likely differ if the library were quite crowded and she
had originally sat down with a sense of needing to share her space with others, or if she
had developed this sense if the library started to become crowded. In these cases, the
woman’s sense of her spatial domain would likely have been more hemmed in or, at
least, more open to contracting readily if another approached the table she was using.
Moreover, her sense of being ‘invaded’ will also tend to differ depending on her own
situation. If, for example, she were already having a hard time concentrating, she may
feel especially infringed upon; whereas, if she were reading for pleasure, concentrating
very effectively on her work, or simply at ease, she may not find the intrusion as
bothersome. In any case, her ability to feel encroached upon without being ‘objectively’
touched is a mark of the way we are dilated throughout the space in which we are
engaged. The fact that she does not always experience the appearance of others in her

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131 As the prior paragraphs already suggest, she can also feel personally invaded if someone
mishandles or presumes to handle one of her possessions. If a stranger picks up her book, for
example, or even if a friend handles a book of hers roughly, she may feel as though she is in some
tangible way being affronted. Her body may feel suddenly tense or irritated, because in a lived
way, she feels as though part of her, part of her body, is being handled inappropriately.
space as an invasion does not contradict this assessment, but is rather a mark of our ability to share and define our space with others.

Both sets of examples—namely, those regarding our presence in objects and places and those regarding our ability to feel others enter our space—demonstrate that we can feel our active engagement with and presence throughout space. Both also confirm that it is not sufficient to describe ourselves and the objects around us as points variously situated in a predetermined spatial grid. Space does not exist around us indifferently. Rather, these phenomena allow us to recognize that we experience space as expanding and contracting around us in accordance with our activities and interests, that space is an experience of the thickness of our own dynamic projects. Drawing on the last of our examples, we will now consider how our spatiality—including its thickness—is necessarily tied up with other people—regardless of whether or not we are inclined toward ‘sharing’ our space.

6. Space and Embodiment as Interpersonal

We have primarily been discussing spatial experience from the viewpoint of a single person, but Merleau-Ponty also identifies our experience of others as fundamentally spatial, and our experience of space itself as fundamentally an interpersonal experience. Let us begin by considering the spatiality of our experience of other people, since this will shape our analysis of spatial experience as such.

132 For helpful discussions of this issue, also see Russon’s “Embodiment and Responsibility,” especially pp. 295 and 301; and Schrag’s “The Lived Body as a Phenomenological Datum”, pp. 208-12.
Merleau-Ponty argues that the child does not initially experience herself as an independent organism; instead, she is spread throughout the persons and objects of the world. For the purposes of our current topic, let us focus on the way the child is spread throughout other people. Almost immediately after birth, a baby smiles if someone smiles at him (Merleau-Ponty, “The Child’s Relations With Others” 116). A baby of two to three months will begin crying if another baby cries (Merleau-Ponty, “The Child’s Relations With Others” 124). Even an older child shows signs of being wrapped up in others when he suddenly identifies himself with his older sister upon the birth of a new baby sister, going so far as to begin calling himself by his older sister’s name and, in turn, inventing a new name for her (Merleau-Ponty, “The Child’s Relations With Others” 147). In each of these cases, the child is demonstrating signs of failing to separate himself from other people. “What is true of his own body, for the child, is also true of the other’s body. The child himself feels that he is in the other’s body...” (Merleau-Ponty, “The Child’s Relations With Others” 134). In other words, the activities and existence of others are not yet delineated for the child as separate from himself, and, correspondingly, the child does not actively experience the tangible boundaries of his body. The child is

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133 For Merleau-Ponty’s full argument, see his essay “The Child’s Relations with Others”, esp. pp. 119, 134-35, 149-50. See also pp. 21-23 in Winnicott on the Child for a discussion by Winnicott on the space of the infant. Though some recent research in contemporary cognitive science maintains that very shortly after birth infants already have at least a nascent experience of themselves as separate from others, this research continues to support the claim that perceptual development in the infant is based on a certain social play between the infant and other persons, and that acts of imitation are possible only on the basis of an “innate” coupling between the observation and the execution of human acts (Meltzoff and Moore (1997); Meltzoff (2005)). Thus, even if one argues that the infant already experiences himself at some level as an independent entity, the infant’s perceptual development and his experiences of others are still rooted in some sort of initial bodily identification or commonality, and in this way, the infant’s perceptual experiences are still wrapped up in a way of being with and even in the other. Thus, in spite of a possible variation in the timeline of the development of the experience of selfhood, we can retain Merleau-Ponty’s recognition that our perceptual experience begins with a certain form of immersion in others.
spread throughout his world. He is not a consciousness that “...is enclosed in a perspective” and that “...pick[s] out across it an object which is outside—but...[rather a consciousness that is] in direct touch with things across a personal-universal vision” (Merleau-Ponty, “The Child’s Relations With Others” 150). As the child grows older, he begins to experience himself as an independent organism with respect to objects, other persons, and, in general, with respect to his surroundings. Merleau-Ponty argues that this occurs when the child begins to objectify his own body (Merleau-Ponty, “The Child’s Relations With Others” 119-20). As the child begins to notice the shapes and limits of his body, he is not only learning about his body, he is also involved in an activity that forms a sort of wall between him and the rest of the world, and one that begins to give him a sense of spatial differentiation in general.134

Though by adulthood we (more or less) have fully developed this sense of ourselves as independent beings, we continue to experience other persons in relation to our experience of our own selves—and do so in a way that is rooted in a continued spatial immersion in others. Merleau-Ponty argues that our very ability to recognize other persons as like ourselves is intimately tied to our original childhood experience of being completely immersed in them. He writes: “...the perception of others is made comprehensible if one supposes that psychogenesis begins in a state where the child is unaware of himself and the other as different beings” (Merleau-Ponty, “The Child’s Relations With Others” 119). Thus, as adults, even though we are no longer immersed in other people, we can, owing to our original immersion, recognize ourselves in them.

Describing, for example, our ability to understand or at least recognize facial gestures,

134 The fact that his experience of spatial differentiation arrives as he notices and feels the tangible boundaries of his flesh and bodily abilities further supports the argument that our body plays a pivotal role in shaping our spatial experience.
Merleau-Ponty writes: “It is the simple fact that I live in the facial expressions of the other, as I feel him living in mine. It is a manifestation of what we have called, in other terms, the system ‘me-and-other’” (Merleau-Ponty, “The Child’s Relations With Others” 146). As we would expect from our analysis of the child’s spatial immersion in the world, our own mature ability to recognize ourselves in others is also related to our experience of embodiment and our accompanying spatial dilation. As Merleau-Ponty writes:

To the extent that I can elaborate and extend my corporeal schema...to that very extent will my consciousness of my own body cease being a chaos in which I am submerged and lend itself to a transfer to others. And since at the same time the other who is to be perceived is himself not a ‘psyche’ closed in on himself, but rather a conduct, a system of behavior that aims at the world, he offers himself to my motor intentions and to that ‘intentional transgression’ (Husserl) by which I animate and pervade him.

... In perceiving the other, my body and his are coupled, resulting in a sort of action which pairs them [action à deux]. This conduct which I am able only to see, I live somehow from a distance (Merleau-Ponty, “The Child’s Relations With Others” 118, my emphasis).135

Thus, it is through a form of spatial dilation ‘into’ the other that we are able to recognize in others the general form of being that matches our own. We tangibly experience other people as like us, as beings who look out onto a world, who have a world, who bring particular attitudes to that world, and so forth. Even if we do not know someone or

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135 In this discussion of ‘coupling’, Merleau-Ponty is working with Husserl’s notion of Paarung (pairing) from the “Fifth Meditation” in Husserl’s Cartesian Meditations.
directly recognize another person’s behavior as like our own, we see in the other person’s way of behaving a certain way of having a world. We can see a person recoil from a scene, and experience her as scared or disgusted; we can hear and watch a person playing an intricate musical piece, and recognize a person who has pursued years of training with his instrument and musical genre; we can notice a person avoiding eye contact when speaking to others, and we experience a person who is in some way anxious about or resistant to engaging with people. We can experience these things, because we also live them or can, at least, feel the potentiality of what it would be like to live them. In short, we discover others through our own bodies and the flexibility and malleability that are integral to our way of having a body. Thus, while no longer ‘mistaking’ ourselves as coterminous with the other—since, as adults, we are “conscious of ... the projections whereby we lend others our own ways of being” (Merleau-Ponty, “The Child’s Relations With Others” 154, my emphasis)—we do recognize and identify with the other by means of our shared experiences of having a body and having a world—both of which are, as we have seen, essentially spatial experiences.

Thus, we are not isolated from other persons even if we are capable of recognizing ourselves as independent organisms at some level. Even though we come to identify ourselves as delimited from others and our surroundings, we also continue to be in them insofar as we are conscious and insofar as we are bodily beings whose bodies dilate into the world. Yet, beyond even these points, we must understand ourselves to be beings who are defined by others. “For we must consider the relation with others not only as one of the contents of our experience but as an actual structure in its own right” (Merleau-Ponty, “The Child’s Relations With Others” 140). That is to say, it is a
fundamental structure of our existence that each person’s way of being-in-the-world is necessarily wrapped up with those of others. Gregory Bateson presents a compelling conception of human consciousness and selfhood that acknowledges this interpersonal character of our existence, and also demonstrates that consciousness, as such, extends beyond the limits of any particular person’s flesh. Let us turn to Bateson’s analyses to see further into the interpersonally and spatially intertwined character of our existence.

Bateson argues that it is erroneous to think of a person’s consciousness as confined to a tightly defined individual. Instead, consciousness is a network, a shared process or system of understanding and communicating that reaches through many persons, things, and structures of our world. A person develops a conception of himself, for example, in conjunction with the reactions and interactions of others with whom he lives and comes into contact. If he decides to make a change—or he refuses to make a change—in the way he does or understands things, his decision affects those around him. Yet, even these descriptions are too ‘self’ oriented, since our language here still makes the person out to be an independently choosing and motivating unit. Bateson argues,

136 For Bateson’s complete argument, see especially his essay “The Cybernetics of ‘Self’: A Theory of Alcoholism” in Steps to an Ecology of Mind. Bateson’s analyses suggest that he has drawn heavily on Gibson’s ecological theory of visual perception in order to understand and interpret consciousness as a whole. (See chapter 1, section IV.4 for an introductory explanation of Gibson’s ecological theory of visual perception.) For a helpful discussion of the relationship of Merleau-Ponty’s phenomenology, especially as it relates to the body schema, to dynamic systems theory—an extension of Gibsonian ecological psychology—see David Morris’s “The Fold and the Body Schema in Merleau-Ponty and Dynamic Systems Theory.” See also Gallagher’s helpful discussion of the “lived body-environment” on pp. 162-65 of “Lived Body and Environment.” Lakoff and Johnson, two contemporary cognitive scientists, also dismiss a dualistic conception of mind and body, arguing instead for an “embodied” theory of cognition that includes the body, the environment, and one’s culture, language, and interpersonal relationships in the human conceptual system; for a summary of their position see their final section, “Embodied Philosophy” in Philosophy in the Flesh, and for a particularly clear and brief explanation of their main idea, see pp. 37-38 of the same book. For family system’s conception of the person as belonging to a system, see Salvador Minuchin’s Families and Family Therapy in which Minuchin identifies mental illness as belonging to a family system not to an individual (See esp. p. 241).
however, that choices, thoughts, and actions do not occur at this level of the ‘individual,’
but rather at the level of a conscious system. He writes:

The total self-corrective unit which processes information, or, as I say,
‘thinks’ and ‘acts’ and ‘decides,’ is a system whose boundaries do not at
all coincide with the boundaries either of the body or of what is popularly
called the ‘self’ or ‘consciousness’... (Bateson 319).

Bateson appeals to the experience of alcoholism to support his argument. He argues that
drinking and alcohol are not things that are merely attached like objects to an independent
subject—i.e., the drinker. Instead, the activity of drinking forms a dynamic part of the
interwoven living processes of all those people, places, and objects connected with the
identified drinker. Drinking may, for example, serve as a social glue, block out or,
alternatively, promote confrontations, enable avoidance of responsibilities, tasks, or
emotional demands, etc.; and drinking does so not simply for ‘the’ alcoholic, but for the
entire network of people involved with and in the alcoholism. The identified drinker
cannot simply elect to cut off drinking as she might elect to cut her hair, since drinking is
an integrated process in a web of activities and ways of thinking that is supported by a
multiplicity of persons as well as by certain activities, places, and so forth.

This conception of alcoholism and Bateson’s accompanying analysis of human
consciousness challenge the notion that we are self-contained individuals confronting
other self-contained individuals in a neutral, pre-existent container. Instead, Bateson
argues that consciousness, and thus we, are spread throughout a network, which, as he
writes, “...is not bounded by the skin but includes all external pathways along which
information can travel” (Bateson 319). Returning to Heidegger and Merleau-Ponty’s fitting description, we must understand our way of being-in-the-world as a dynamic process that includes other persons and that changes, shrinks, and grows on an environmental level, not merely an individual level. We are, in other words, ‘in’ the world not as spatially-inert, flesh-bound entities, but rather as dynamic, fluid-like organisms whose spatial existence and breadth is intertwined with the unfolding processes of a community of organisms.

Now that we have made a fuller analysis of the spatial nature of our interpersonal way of being-in-the-world, let us return to the child’s experience to pursue an analysis of the interpersonal character of spatial perception. As we have seen, the child does not initially experience himself as a separate entity; he does not experience himself as a ‘self.’ Instead, whatever he engages is wrapped up with him; he is the world. Initially, in the child’s first months, the reach of him world is quite small—the range of his mouth, of his flailing arms, of his limited sight. As he grows older, and his bodily coordination and abilities mature, he will gain a larger world. Throughout these stages, other people play a role in the shaping of this world, since the child is not only dependent on them, he is, as we demonstrated, wrapped up ‘in’ them. As such, the child’s initial experience of space itself is one that is interwoven with other people. Supporting this claim, Merleau-Ponty writes: “...recent studies have tended to show that even external perception of sense qualities and space—at first glance the most disinterested, least affective of all the

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137 In chapter 5, we will consider how the home is a particularly visible and palpable extension of our ‘consciousness’.

138 R.D. Laing’s existential psychology similarly describes our existence as resembling a “nexus” of processes rather than that of isolated individual subjects; he describes many deeds as “…the outcome of a continuous series of operations that have no agent as their author” (Laing and Esterson 22).
functions—is profoundly modified by the personality and by the interpersonal relationships in which the child lives” (Merleau-Ponty, “The Child’s Relations With Others” 100). Echoing Merleau-Ponty’s discussion of coupling, Drew Leder argues that we experience spatial extension in part through our ecstatic experience of others’ bodies. Similar to the way we incorporate tools such as glasses, a walking stick, etc. into our phenomenal bodies, we “...supplement our embodiment through the other” in a process that Leder describes as mutual incorporation (Leder 94). “In mutual incorporation, “Leder writes, “each person’s capacities and interpretations find extension through the lived body of the Other” (Leder 94). Accordingly, the child’s experience of space will be affected by shifts in the character and make-up of his interpersonal world.

For example, modifications in the child’s perception of space can occur as a result of the way other people ‘shape’ his access to and experience of surroundings in general. A child’s family may travel outside of the home quite frequently and widely, thereby encouraging a sense of ease, necessity, or excitement about having a wide spatial range; or, alternatively, they may stay close to home, thereby suggesting a sense of challenge, electivity, or anxiety regarding a larger spatial range. This shaping of the child’s experience of his environment can also be less direct. For instance, a home life in which fighting is prevalent may stimulate a child to develop a sense of personal settings as tense, threatening, competitive, and so forth. At either level, early childhood spatial development cannot help being influenced by others, given the child’s initial lack of interpersonal differentiation during the formative stages of his life and the ongoing way in which his perceptual experiences are bound up in his relations with others.
Even when we develop a firm sense of the differentiation between ourselves and others, this shaping influence persists in at least two ways. To begin, in becoming aware of our ‘individuality,’ we do not thereby leave behind our perceptual beginnings—that is, we do not suddenly become divorced from ourselves as beings who were once wholly wrapped up in others. Our early interpersonal immersion is a primordial perceptual experience that, at some level, forever informs our future perceptual possibilities.

Secondly—and this point is not disconnected from the first—even as ‘independent’ adults, we are forever finding our worlds—and, as such, our spatial experience—to be actively shaped by others insofar as they are beings like us who open onto and create a certain sort of world, and these worlds intersect with each other, and, to a large extent, work together to form a world held in common. We can see various aspects of this sharing in a few basic examples: We navigate public streets together with others; we become excited by the cheering crowd around us; our mood or event is dampened by the tears or the obnoxiousness of someone sitting near to us; and so forth. Thus, the world and space itself do not simply happen for or to a crowd of isolated ‘selves’, but rather, as Bateson might say, are themselves reflections of a network of people, things, activities, etc. that are interwoven in shared processes of thinking, perceiving, and, generally, of giving shape to a world.

Let us examine one of the opening scenes from Proust’s Swann’s Way, which offers an apt description of this interpersonal character of our perception of space. In this scene, the communication between a mother and son is revealed as bound up with the son’s changing experience of space.\textsuperscript{139} Cut off from his mother and the festivities of a

\textsuperscript{139} Though this example is drawn from a fictional account, its rich descriptions offer a careful and tangible examination of spatial and interpersonal experiences that resonate with and stand up to
party in the dining room below him, a young boy feels trapped in his bedroom as if it were an unbreachable prison cell. Though he is a mere flight of stairs away from his mother, he feels separated from her presence and her attention by an impassable distance. To his great relief, this isolation proves to be only temporary. As soon as the boy contrives to send his mother a note, he recovers a connection between their once distant worlds. His own description reveals the transformative experience of this sending:

At once my anxiety subsided; it was now no longer (as it had been a moment ago) until to-morrow that I had lost my mother, since my little note—though it would annoy her, no doubt...—would at least admit me, invisible and enraptured, into the same room as herself, would whisper about me into her ear;...that forbidden and unfriendly dining-room, where but a moment ago the ice itself—with burned nuts in it—and the finger-bowls seemed to me to be concealing pleasures that were baleful and of a mortal sadness because Mamma was tasting of them while I was far away, [that same forbidden room] had [now] opened its doors to me and, like a ripe fruit which bursts through its skin, was going to pour out into my intoxicated heart the sweetness of Mamma’s attention while she was lived human experiences. In addition, the fact that the account pertains to a child and his mother brings us back to our discussion of the difference between childhood and adult perception; the child’s sensitivity to the spatial variations brought about through his dealings with his mother could be seen as a reflection of his continued immersion in her—that is, of his continuing existence as a child, as not yet considering or experiencing himself as a ‘fully fledged’ independent ‘self.’ Our analyses have revealed that even once this ‘selfhood’ develops, the child will continue to be spatially spread throughout an interpersonal network. Given our analyses, it makes sense, however, that we lose some of this sensitivity to the interpersonal character of our existence as we ‘mature,’ and, thus, that we would also lose some of our abilities to feel the spatial shifts that occur in conjunction with our relations with others. The boy is not, of course, cognizant of these shifts, but he may, as just noted, be more capable of or susceptible to undergoing them.
reading what I had written. Now I was no longer separated from her; the barriers were down; an exquisite thread united us (Proust, Swann’s Way 32).

Thus, the sending of a simple note opens to this young boy a room that once seemed to conspire to conceal pleasures from him, a world that was previously forbidden to him, and the attention of a person who formerly stood on the far side of a formidable barrier. The boy’s note overcomes this barrier by what he calls an “exquisite thread” of connection: Through this insinuating motion, he feels he has regained his mother, that they are together—and intimately so—where before they stood apart. As soon as the young boy has found this pathway into the realm of his mother’s attention, his bedroom ceases to be a prison. He is no longer trapped alone, for he has forged a pathway to the dining room below and experiences himself as united with his mother and her surroundings; he experiences himself as there.

This young boy’s experience reveals a number of ways in which our sense of space is bound up with our engagements with others. To begin, his initial sense of not being able to communicate with his mother is tied up with his feeling of being cut off from the rest of the world. Next, he experiences a sudden transformation of his surroundings at the moment when he sends his note to his mother. And, finally, after he knows his note has been delivered, he experiences a tangible sense of being with his mother even though he is still objectively situated in the same room where he once felt alienated from her. These experiences identify our spatiality as not only wrapped up with our way of being in the world, but also with our way of being in the world with other
persons. We can see in this boy’s experience the way in which communication with others has a crucial role in the opening of different spatial levels of experience.

We can see further evidence of the interpersonal character of our spatial experience by considering the ways in which certain types of places and spatial levels have shared—or unshared—meanings for people. Returning to Dyck’s analysis of the spatial experience of women with M.S., we will recall that she observed that as the abilities of the women with M.S. changed, so too did the space in which they lived. She noticed shifts that the women experienced in the places they go, their changing perceptions of their homes, and, generally, their development of new ‘maps’ for doing things, getting to places, and so forth. Dyck argues that such changes must not only be recognized as fundamental shifts in one’s spatial experience, but also as spatial shifts that essentially social in nature. She writes: “The ‘biographical disruption’ [i.e., the disruption of ‘normal’ activities and everyday life patterns] of the women is profoundly social and inherently spatial” (Dyck 318). The space that these women inhabit is directly tied not only to the possibilities that they have for private action, but also that they have for engaging in activities that are essentially shared—activities such as being able to sit for a long theater performance, taking a walk or hike, or going to a restaurant without knowing in advance what sort of physical layout it has. Thus, when they change their relationship with their surroundings, they are involved in an inherently social shift and a social shift that is essentially spatial. Destinations, places, and physical settings—such as a restaurant, a theater, or a national park—that these women once held in common with most other people now have a different set of meanings. A place for public exchange with many stairs or a steep incline may simply be off-limits; one’s own home may no
longer seem like a place to entertain if it is filled with various medical aids; even a
grocery store (as Dyck notes) is no longer a place to make a quick stop for milk (but
which is equally a place of casual exchange with others organized around one of the most
basic and frequently pleasurable elements of life), but is a destination that requires
planning and may involve challenges such as lifting things that are painfully heavy or
needing to ask for assistance to reach something on a high shelf.

These spatially based changes serve in certain way to separate the women with
M.S. from those who are ‘healthy’. This separation occurs not only because the women
with M.S. are not able to do certain activities, but also because this change in abilities
involves a corresponding shift in the very way in which space is experienced and defined
for these women. Their definitions of particular spaces, of the world in general, no
longer agree with those that most people have or with those that they themselves once
had. In certain important ways, these women do not share the sense of world that they
once had in common with others. As Dyck writes—in language that resonates with
Bateson’s: “This is not merely a personal interruption, but one which is contextualized in
a lifeworld made up of a web of dynamic interrelationships played out over space” (Dyck
318-19).

As these examples reveal, we are always involved in defining space with and
through others. Space is neither a fixed external grid that we enter into along with other
people, nor a private creation that can have no reliable comparison to what others
experience, nor still yet a rigid intuitive framework that we share in common with other
persons. Instead, space is revealed to be something that we essentially share and create
with others.
III. Conclusion

Through both everyday and exceptional examples of the lived experience of space, we can now recognize space as a dilation of ourselves, of our embodied selves—not as a predetermined grid into which we are inserted. We can see the way we are dilated throughout the things with which we are concerned—as if we were elastic spheres stretching and contracting as our attention and abilities move from one project and one object to the next. We can now see that when we speak of something as over there, we are in truth pointing to ourselves, for in the attention that we extend to that thing ‘over there,’ we project ourselves over there, we are over there. Even the space in which we are not currently engrossed is not a stiff, predetermined structure; it is, rather, a flexing horizon whose definition awaits us and our possibilities. Correspondingly, we are neither isolated I-heres that orient ourselves with respect to independent there-things, nor are we at the center of a rigid set of distant objects. Rather, we dwell in the things for which we care. It is from this ‘stretching’ of ourselves that our senses of space and of world arise—both of which grow and contract in unison with our projects and cares. Moreover, we are always doing this with and through others—that is, we live an interpersonal world in which cares, perceptual experience, and space itself do not ‘belong’ to isolated individuals, but rather to a network or system of interwoven persons. In short, then, space is not an independent entity that is set over and against us, but is rather a dilation of our way of being.
If we ignore these analyses of space and spatial experience, we limit our ability to understand our own nature, for we will ascribe to something beyond us what in fact most essentially emanates from us and, thus, belongs to us. The failure to recognize ourselves as the locus of spatiality in turn makes a significant impact on the way we understand perceptual experience as a whole as well as on how we understand the world around us. It leads us to consider space as an isolatable trait of objects and of the environment, and to isolate our actions and intentions from the significance of the objects around us. In doing so, we lose contact with the living significance of space and, more generally, with the existential nature of the world.

Moreover, if we lose contact with the living significance of space, we not only misunderstand the human experience, we are also led to misunderstand and mistreat human beings. We may do so by responding to people and their behaviors as if they were objects in a fixed world, rather than existential subjects in an inhabited, lived world. Dyck indirectly acknowledges the historical tendency to make this error and the future possibilities for correcting this error when she observes:

The understanding that space is socially constructed, and acts in complex ways as a medium of the operation of social relations which shape people’s experience, has generated interest in new ways of analysing the relationships between space, and health, illness and health provision (Dyck 308).

I, too, aim to make certain corrections to understandings of mental health and personhood that have arisen from what I argue are misunderstandings of human spatiality and space in general. In my upcoming chapters, I will show that agoraphobia should be understood
in light of a phenomenological understanding of lived space. Through such an understanding, this anxiety disorder will be revealed to be not what some might call a ‘mere psychological’ issue, but rather a problem with one’s overall way of spatial being-in-the-world—i.e., a problem of dwelling. My analysis will not only provide novel interpretation for understanding and possibly ‘treating’ this disorder, it will also serve to confirm and expand our investigation into the nature of lived space.
Chapter 4. Current Conceptions of Agoraphobia and Their Limitations

I. Why Are We Looking at Agoraphobia Now?

Psychologists, psychiatrists, medical doctors, and sociologists have commonly identified the reason for the spatial contraction that occurs in agoraphobia to be rooted in a fear of open spaces or, alternatively, of crowded spaces or otherwise threatening spaces. Oftentimes the underlying cause of agoraphobia has been located in the very appearance or structure of the ‘space’ of the city (Vidler 26-32). In recent years, agoraphobia has been treated as a physiological reaction to threatening spatial characteristics. Persons with agoraphobia are correspondingly trained to control their bodily reactions in the face of certain external pressures. Such descriptions conceive of space as possessing predetermined qualities that happen to be unbearable to the person with agoraphobia, and conceive of the person as a body that ‘runs up against’ space. Space is thus taken as fundamentally independent of the subject. Our recent phenomenological exploration of human spatiality should provoke us to question such an approach to understanding agoraphobia insofar as it overlooks the role that the agoraphobic has in creating the contracted space in which she dwells. Though many current theories of agoraphobia acknowledge the psychological participation of the agoraphobic in shaping space as fearful or problematic in some way, these theories frequently persist in casting space as something that is mostly independent of the subject, and that has become negatively charged, so to speak, by the subject’s concerns or fears. Our recent phenomenological
investigations into human spatiality provide two compelling reasons for turning now to an investigation that may challenge some of these basic assumptions and conclusions about agoraphobia.

First, agoraphobia shows itself as a spatially expressed struggle or conflict. This disorder stands out as one in which space is directly taken up as an issue, and in which the typical human spatial experience is disturbed. Persons with agoraphobia tend to avoid particular places or types of places, and frequently feel debilitating anxiety whenever they leave or even think about leaving places they consider to be ‘safe.’ Yet, even though agoraphobia has become the most well- and widely-researched of all the anxiety disorders, it is also currently considered to be both “...one of the most handicapping anxiety disorders,” as well as one of the most intractable and most ineffectively treated of acknowledged ‘mental disorders’ (Öst et al. 1105-6). A phenomenological study of agoraphobia may be able to address some of the current treatment and theoretical failings in the current approaches to agoraphobia. In this chapter, I will in fact argue that the current failings in many common approaches to understanding and treating agoraphobia arise out of a failure to adequately understand the nature of human spatial experience. More specifically, I will argue that many current conceptions of agoraphobia rely on an underlying assumption that space is something independent of the subject, and that this stance, which fails to recognize and, therefore, to address, the lived significance and nature of space, is an underlying cause of the high rate of treatment failure in agoraphobia. By looking closely at the experience of agoraphobics in light of our phenomenological analyses of space and spatial experience, I will be able
to provide an interpretation of agoraphobia that challenges many of the commonly accepted conceptions and treatments of agoraphobia.

Second, and on a broader level, to pursue phenomenology, one must turn to the phenomena themselves. In the case of a phenomenology of space, one cannot merely deal with ‘normal’ spatial phenomena since many of our experiences, and quite notably the experience of agoraphobia, show that space is not experienced in a single, unambiguous manner. Agoraphobia is a regularly occurring human phenomenon that directly calls up issues of how we experience and deal with space.140 A disturbance such as this can provide further insight into human spatial experience by bringing to light the structures of experience that are tied up with our spatiality, but that typically go unnoticed because our spatial experiences tend to proceed smoothly and without remark or notice.

My study of agoraphobia is, therefore, an essential component of a phenomenological study of space. It will allow me not only to offer new insights into the nature of a problematic (and not uncommon) spatial experience, but also to illuminate significant aspects of ‘normal’ spatial experience, including those of being at home, of making ourselves at home, of having a home, and of the nature of home in general.141

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140 Agoraphobia affects a significant number of people, and is considered to be a prevalent disorder. Two studies report prevalence rates for agoraphobia of 4.9% of persons between 18 and 54 (Epidemiological Catchment Area study) and of around 7% of the North American population as a whole (Öst et al. 1105). Moreover, such rates are thought by some to be too low insofar as many patients with agoraphobia receive a primary diagnosis other than agoraphobia and, thus, are not counted in statistics that feature agoraphobia; the most common case of this ‘alternative’ diagnosis is panic disorder—a disorder in which the Anxiety Disorders Society of British Columbia estimates 95% of sufferers develop agoraphobia (http://anxietybc.com/site/index.php?option=com_content&task=view&id=28&Itemid=43, Accessed June 5, 2005).

141 My discussions of home and the agoraphobic’s problematic experience of home will follow in chapters 5 and 6.
My analysis of agoraphobia will allow me to argue that the experience of being at home is inextricably linked with the experience of venturing forth from home, of being able and willing to leave home. I will argue that in agoraphobia this dialectic or articulation of the self is troubled, and that the agoraphobic is, thus, never ‘at home’ in the way that ‘normal’ persons are. I will ultimately argue that we are beings for whom home is a developed extension of ourselves, and one that is particularly significant insofar as it provides us with a basis from which we find ourselves able to expand into a larger space—a world. The home and our experience of home can provide insight into each of us and into the human spatial experience in general insofar as the home is a significant tangible and personal articulation of the manner of our spatial way of being-in-the-world—namely, as beings who are always both self and other, both here and there, who are always articulated throughout a world. Thus, with respect to my pursuit of a phenomenology of human spatiality as a whole, I am by turning to an analysis of agoraphobia offering a phenomenological account of a significant spatial phenomenon.

I will begin this investigation into the nature of agoraphobia by first identifying the basic phenomenon that people typically recognize as agoraphobia and by offering an initial sense of the prevalence and characterization of this disorder. Following this rough outward sketch of agoraphobia, I will discuss the most prevalent conceptions and treatments of this disorder. Next, I will offer a brief historical sketch of certain motivations for supporting the current theoretical and treatment approaches to agoraphobia. I will then consider the underlying assumptions about the nature and relevance of space made by these current theories and treatments of agoraphobia. At this point, I will begin to identify and address certain inadequacies in these positions.
Beginning with criticisms that can be made from within the field of psychiatry, I will appeal both to studies that document significant treatment inadequacies arising from such an approach and also to testimonials and reports that show that even when treatment ‘successes’ are recorded, they often only secure improvements in specific behavior patterns and, thus, leave untouched enduring and significant existential problems. I will then raise further criticisms that arise if one considers the phenomenon of agoraphobia phenomenologically. Paralleling arguments in my previous chapters, I will show how failures in current theoretical and treatment approaches to agoraphobia can be traced to an inadequate understanding of human spatial experience. I will argue that these approaches generally ignore the lived spatial experience of the agoraphobic, and are built on the assumption that space is something that stands over and against human beings, rather than being something that arises through and with us.

II. General phenomenon

Etymologically, agoraphobia is defined as a “fear of the market place.” Typically, the term is taken to refer more generally to a fear of public places, and, even more so, of noticeably crowded or empty places (Goldstein and Chambless 47). In one survey of diagnosed agoraphobics, 56% surveyed avoided streets and open spaces, and 23% were completely housebound (Marks and Herst 18). The diagnosis of agoraphobia has historically and is currently applied to persons who are identified as showing a problematic tendency of avoiding certain spaces, yet who do so without having a specific
and situated phobic reaction to those spaces. That is to say, agoraphobia pertains to a free-floating, generalized fear of being in spaces, not to a fear of a space charged in a specific way or by a specific event, such as one might find in a person who has undergone a traumatic experience in a particular place, and henceforth finds herself tending to avoid that place or places resembling it.142 A person who is frightened of particular place or type of place may, according to contemporary diagnostic schemata, be classified as a ‘simple’ agoraphobic or as having a simple or specific phobia, such a person does not exhibit signs of ‘true’ or ‘complex’ agoraphobia.143 ‘True’ agoraphobia is not limited to a specific phobic situation or setting, but instead is characterized by widespread, generalized anxiety—anxiety that cannot be contained to particular instances and that often invades even those places that are generally deemed habitable by the agoraphobic.144

142 Generally speaking, when people with specific phobias have anxiety or panic attacks, they can associate the attack with a particular event or cause; agoraphobics, on the other hand, typically do not experience their anxiety or panic as arising from a particular source—even when a source may seem readily identifiable to an outside viewer (Goldstein and Chambless 54). In one study, for instance, Goldstein and Chambless found that almost half of the phobics could identify an experience “conditioning” them to their form of avoidance, whereas this was true for only 1/8 of the agoraphobics (Goldstein and Chambless 55). They further distinguished agoraphobics from phobics by noting that while a phobic person encounters her fear in a particular place or event, the agoraphobic is “carrying the phobic stimuli with her or him always, this fear of fear is a less situation bound, more ‘portable’ phobia” (Goldstein and Chambless 55).

143 See Goldstein and Chambless for a full discussion of the distinction between “simple” and “complex” agoraphobia. They note that “simple” agoraphobics can respond quite well to treatments such as desensitization therapies that, as we will see later in this chapter, are not consistently successful or enduring when used for “true” or “complex” agoraphobics (Goldstein and Chambless 49-50; see also Chambless and Woody (1990) on this point). Also see the DSM-IV-TR for distinctions between simple phobias and agoraphobia in the section “Agoraphobia” under the heading “Criteria for Agoraphobia” (DSM-IV-TR, online resource).

144 Hallam supports this view, noting that agoraphobics can experience panic attacks in their homes, and, alternatively, can have ‘good days’ during which they are able to move about freely in areas that are usually threatening to them; neither of these behaviors are likely in the phobic patient, who is consistently anxious in the face of the phobic stimulus and consistently ‘settled’ when away from the phobic stimulus (Hallam 317).
In part to distinguish agoraphobics from those who have phobias regarding specific places, some have moved to identify agoraphobia not as a fear of particular places or styles of places, but rather as a fear of being away from a place or object representing safety (Goldstein and Chambless 47). According to this definition, ‘safe’ places for the agoraphobic are those places in which she feels comfortable and capable of carrying out her daily activities and interests.¹⁴⁵ Unlike persons who have specific phobias of particular places or things, agoraphobic persons also typically have and rely heavily on ‘safe’ companions or even objects that, if accompanying them, enable them to function reasonably well in regions that would otherwise be identified as threatening and to be avoided (Frances and Dunn 435; Goldstein and Chambless 47). When apart from such a companion or when outside of a safe place or a reliable set of safe paths that lead to this place, the agoraphobic quickly loses her ability to engage and communicate effectively with others and her surroundings.¹⁴⁶ Thus, a more generalized description of an agoraphobic might be: One who has a prevalent tendency to avoid ‘normal’ territories of experience, because they are considered to be threatening insofar as they do not lead easily back to what is thoroughly familiar and safe.

Even a description such as this one, which is not confined to describing agoraphobia as a fear of particular places, does not fully capture another important aspect of agoraphobia—namely, the tendency to avoid certain ‘regular’ human activities. The agoraphobic’s contraction tends to include a diminishment in the types of activities in which the agoraphobic is able or willing to engage (Fava et al. 188; Marks and Herst 16; 

¹⁴⁵ For a general discussion of the safe and unsafe zones of experience in the agoraphobic, see Chambless and Goldstein’s Agoraphobia: Multiple Perspectives on Theory and Treatment, p. 2. ¹⁴⁶ Chambless and Goldstein have observed that “...agoraphobics tend to fear any situation where an easy retreat to safe territory is not possible,” and that they will “...avoid any place where flight to safety is likely to be hindered” (Agoraphobia: Multiple Perspectives 2).
Hahlweg et al. 376; Arrindell, Eisemann, et al. 2003). For example, sixty percent of agoraphobic women in one survey reported that they wanted to work outside of the home, but were unable to do so because of their agoraphobia (Marks and Herst 16). Typically, agoraphobics report having a hard time with such common daily activities as holding down regular jobs, going to school, and participating in many common social events such as going out to dinner or a film (Marks and Herst 16; Turgeon et al. 546; DSM-IV-TR, online resource, section “Panic Disorder”). Even within areas that are deemed safe by an agoraphobic, the agoraphobic person tends to avoid many ‘normal’ life activities and experiences—especially those that demand high or even moderate degrees of independence (or, alternatively, of readily identifiable acts of dependence) or that may lead to expressions of emotion or intimacy—whether of a ‘positive’ (e.g., love or sexual interest) or ‘negative’ (e.g., anger or dissent) character (Kleiner and Marshall 313-4, 318-9; Byrne et al. 107; Daiuto et al. 676, 681; Chambless et al. 504). The avoidance of these activities occurs even within the agoraphobic’s relationship with her ‘safe’ companions—that is, with persons with whom the agoraphobic finds herself most capable of entering into otherwise threatening territories. So even in relationships characterized by a certain expansiveness, the agoraphobic is limited and perhaps most noticeably so, since these are relationships that are otherwise ‘progressive’ or ‘opening’ for the agoraphobic. In general, then, an agoraphobic person is one whose general range of destinations and experiences is restricted to a limited set of safe possibilities, and whose sites of safety can even become flooded with anxiety and, thus, become uninhabitable with respect to carrying out normal daily activities, let alone more challenging personal or interpersonal activities.
III. Current Approach to Agoraphobia

Having established an introductory description of agoraphobia, let us now turn to investigate how agoraphobia is currently conceived and treated by medical and psychiatric practitioners. I will begin by presenting the theoretical model of agoraphobia that is currently officially accepted within the psychiatric and medical fields. This current theoretical model marks a recent significant diagnostic shift within the field of psychiatry that has changed both the definition and categorization of agoraphobia, so I will also consider the history and implications of this change. I will then discuss the types of treatment that accord with the new definition. Next, I will look at motivations for the change in the description and, thus, the treatment of agoraphobia. Finally, I will draw out varying assumptions about the nature and experience of space made by the current theoretical and treatment approaches to agoraphobia.

1. Current Theoretical Approach

Since the Diagnostic and Statistical Manual of Mental Disorders (DSM) is the primary reference source in which mental health professionals in the United States find descriptions of, diagnostic criteria and treatment recommendations for, and sources for research on mental disorders, we can identify the basic current theoretical conception of agoraphobia by considering how it is described and discussed in recent editions of the DSM. As one researcher observes: “The labels applied to clinical phenomena have a
profound effect on methods applied to their investigation and treatment, and agoraphobia is no exception” (Hallam 314). The role of the DSM in shaping conceptions of mental disorders can be seen particularly clearly in the case of agoraphobia, because the categorization of this disorder has changed markedly over the last 30 years. Largely because of its status in the medical field, the DSM also comes to form the basis of many commonplace ideas in the general public regarding mental health and illness as well as treatment considerations.148 To begin to locate agoraphobia within the current psychiatric model, we must start at a broad level in the DSM. We must do so in part, because we must understand how it is that agoraphobia is classified not as a phobia—which its name would suggest—but as an anxiety disorder.

In the third edition of the DSM, two new and separate diagnostic groups were created—one for anxiety disorders and one for phobias (Turner, McCann et al. 168). Previously disorders falling under these new groups had been categorized under the common group “neuroses.” Within the neuroses group, there were anxiety neuroses and phobic neuroses, and agoraphobia fell within the phobic neuroses. With the creation of the “anxiety disorders” and “phobias” groups, a more distinct divide was made between disorders that had previously been labeled as either anxiety or phobic neuroses. The main distinction between the two new groups rested in the type and identified locus of the experience of anxiety. In phobias, anxiety is generally localized or contained to a psychiatric diagnoses that accord with the DSM categorization, and directly through testimonies offered on on-line psychology resource sites such as http://www.psychologynet.org/dsm.html. Mitchell Wilson (1993) also offers a helpful historical analysis of the effect of the DSM on the shaping of American psychiatry over the past twenty years in his article “DSM-III and the Transformation of American Psychiatry: A History” (See esp. p. 399.). On this issue, see also Frances and Egger’s “Whither Psychiatric Diagnosis.”

148 One need only pursue a cursory search of Internet websites on any variety of mental illnesses or treatment options to find repeated references--both direct and indirect--to the DSM and its conclusions.
specific type of thing, location, or experience, whereas in anxiety disorders, anxiety is typically not well defined or contained, but instead tends to pervade a person’s life or to show up unexpectedly or without being cued by a particular event or experience; anxiety disorders also tend to entail greater levels of emotional disturbance than phobic disorders (Turner, McCann et al. 168, 171). Though agoraphobia had been considered a phobic neurosis in the DSM-II, in the DSM-III it came to be identified as an anxiety disorder, because researchers argued that the anxiety arising in agoraphobia could not be described as contained to isolated, specific settings, but was rather of a pervasive and often free-ranging character.\^149

In the DSM-III, panic attacks were also included as a primary diagnostic feature of the anxiety disorders whereas in the DSM-II they were merely a variable feature of the anxiety neuroses (Turner, Williams et al. 384).\^150 Thus, through its reclassification, agoraphobia also began to be associated more closely with the occurrence of panic attacks. In the revised third edition of the DSM, a new anxiety disorder—Panic Disorder—was also identified, which is characterized by the regular experience of and debilitating fear of having panic attacks. While agoraphobia was still classifiable as a separate disorder in the DSM-III, it was reclassified in the revised third edition as

\^149 See Turner, McCann et al. (1986) and Hallam (1978) for discussions of agoraphobia as an anxiety disorder, not a phobia.

\^150 Panic attacks are described in the DSM-IV-TR as:

- A discrete period of intense fear or discomfort, in which four (or more) of the following symptoms developed abruptly and reached a peak within 10 minutes: (1) palpitations, pounding heart, or accelerated heart rate; (2) sweating; (3) trembling or shaking; (4) sensations of shortness of breath or smothering; (5) feeling of choking; (6) chest pain or discomfort; (7) nausea or abdominal distress; (8) feeling dizzy, unsteady, lightheaded, or faint; (9) derealization (feelings of unreality) or depersonalization (being detached from oneself); (10) fear of losing control or going crazy; (11) fear of dying; (12) paresthesias (numbness or tingling sensations); (13) chills or hot flushes (DSM-IV-TR online publication, section “Panic Attacks” under heading “Anxiety Disorders,” p. 430).
“mainly a sequela of panic disorder” (Goisman et al. HTML p. 2). The DSM-IV made yet another a change in its classification. It offered three classificatory options: Panic Disorder Without Agoraphobia, Panic Disorder with Agoraphobia, and Agoraphobia Without History of Panic Disorder (Goisman et al. HTML p. 2). This approach to defining agoraphobia linked it even more directly to panic disorder: The fear in agoraphobia was now characterized as an avoidance behavior in which the agoraphobic person attempts to protect herself from the places or situations in which the agoraphobic might experience panic attacks (in the case of Panic Disorder with Agoraphobia) or panic-like symptoms or limited-symptom panic attacks (in the case of Agoraphobia Without History of Panic Disorder) (DSM-IV-TR 300.01 and 300.22; Hedley and Hoffart 436). As such, “...panic is seen as being primary [in the nature and treatment of the disorder], with the avoidance associated with agoraphobia viewed as a means of coping with the fear of panic” (Goldfried and Wolfe 1008). The distinction, then, between panic disorder and agoraphobia became not a distinction in type, but rather in severity: The agoraphobic is more severely limited by her fears of panic attacks than the person suffering from panic disorder, and, as a result, the agoraphobic limits the places she is capable of being. Moreover, cause and effect are reversed with this change in categorization. In “Agoraphobia,” one would imagine panic to be a result of experiencing a fearful place, while in “Panic Disorder With Agoraphobia,” one would

151 Contrary to this assessment, the ICD-10 and WHO (1993)—two additional widely used psychiatric reference sources—identify agoraphobia and panic disorder as two distinct categories (Hedley and Hoffart 437).

152 Within this model of agoraphobia, one can either take agoraphobia to follow the onset of the panic attacks, or vice versa (Hedley and Hoffart 437). Either way, however, panic attacks are taken to be an essential feature of the disorder—one that either leads to the avoidance of places out of fear that a panic attack will occur or that leads to the occurrence of panic attacks as a result of anxiety around entering or being in “unsafe” places.
interpret the fear of places to be a result of the threat of panic; and, as we will soon see, this shift corresponds with the actual way in which the disorder was conceived within the different schemas.

With the initial introduction into the DSM-III of the anxiety and phobic groups, agoraphobia was still considered a “codable” disorder—that is, a disorder that could be given as a primary diagnosis; but, by the fourth edition of the DSM, agoraphobia had completely lost its status as a separate disorder and instead became a variable feature of panic disorder. The problem in agoraphobia now falls under the rubric of panic disorder. If a physician or therapist wishes to identify a person as agoraphobic according to DSM diagnoses, she must identify “...the specific disorder in which the agoraphobia occurs”—namely, “Panic Disorder with Agoraphobia” or “Agoraphobia without History of Panic Disorder” (DSM-IV-TR, online resource, “Criteria for Agoraphobia”). This way of ‘coding’ agoraphobia emphasizes the centrality of panic in the disorder. Even if the clinician specifically identifies the person as not suffering from full-blown panic attacks, she must select a coded diagnosis that falls within and is named according to the panic disorder ‘family’—namely, Agoraphobia without History of Panic Disorder. The DSM-IV further enervates the diagnosis of Agoraphobia Without History of Panic Disorder by commenting that “[r]elatively little is known about the course of Agoraphobia Without History of Panic Disorder. Anecdotal evidence suggests that some cases may persist for years and be associated with considerable impairment” (DSM-IV-TR, online resource, “Criteria for Agoraphobia”, my emphasis). These comments suggest that few cases have been available for investigation; resources for analysis and treatment for this diagnosis

153 Schmidt et al. confirm this point, noting both that agoraphobia is now seen as a secondary result of panic or panic-like experiences and that agoraphobia is codable only in terms of Panic Disorder or limited-symptom panic attacks (Schimdt et al. 1220).
are limited; and information that may exist about the disorder has not been rigorously compiled or confirmed. These deficiencies alone seem likely causes of discouraging a practitioner from making a diagnosis of Agoraphobia Without History of Panic Disorder. By contrast, the DSM-IV-TR offers extensive resources for diagnosing, treating, and understanding Panic Disorder, and Panic Disorder with Agoraphobia.

Not only are the treatment and diagnostic resources poor for Agoraphobia without History of Panic Disorder, there are many sources that appear to discourage and ultimately question the validity of this diagnosis altogether—including the DSM itself as well as a number of current studies that stress that most agoraphobic persons have at one time or will at some time experience one or more panic attacks or panic-like experiences, and thus that these people actually suffer from a form of Panic Disorder. More specifically, the DSM effectively demands of the clinician who wishes to make a diagnosis of Agoraphobia without History of Panic Disorder that she first take a firm stand against the existence of panic disorder in the patient. The requirements for denying a diagnosis of panic disorder are stringent. Even if a person has had unexpected panic attacks in the past, but has been free of them for a long period of time, a diagnosis of Agoraphobia Without History of Panic Disorder is inaccurate according to the DSM-IV.

154 For instance, though population studies provide support for the differentiation between agoraphobia and panic disorder, Hedley and Hoffart conclude that there is not enough clinical evidence to support Agoraphobia Without History of Panic Disorder as a diagnosis existing separately from Panic Disorder (Hedley and Hoffart 442). Turner, Williams et al. argue that there may not even be enough evidence to separate agoraphobia with panic attacks from panic disorder; they argue that the two groups do vary from one another, but primarily along the lines of intensity rather than of quality (Turner, Williams et al. 385). On this basis, they support the revision in the DSM-III-R that groups agoraphobia under the category of panic disorder in such a way that agoraphobia is a variance within the schema of panic disorder. They argue, in fact, that there should be no diagnosis available for a “pure” panic group insofar as they detected traces of agoraphobia in all panic sufferers (Turner, Williams et al. 386). This last claim seems to agree with the DSM’s stance against agoraphobia as warranting an independent diagnosis, since according to Turner, Williams, et al., there is no panic group that can be set against a group showing signs of agoraphobia.
Under the description of “Agoraphobia Without History of Panic Disorder,” the DSM also emphasizes that “almost all individuals (over 95%) who present with Agoraphobia also have a current diagnosis (or history) of Panic Disorder”—a ‘fact’ that makes the diagnosis of Agoraphobia Without a History of Panic Disorder an unlikely diagnosis (DSM-IV-TR, online resource, “Criteria for Agoraphobia”).\(^{155}\) Moreover, although the manual acknowledges that in epidemiological studies more persons are reported as having “Agoraphobia Without History of Panic Disorder” than as having “Panic Disorder with Agoraphobia,” it claims that “problems with assessment” have falsely inflated the former diagnosis, and that reevaluations of such studies according to DSM-IV-TR criteria have led to changes in diagnoses that frequently replace the diagnosis of Agoraphobia Without History of Panic Disorder with a diagnosis of a specific phobia (DSM-IV-TR, online resource, “Criteria for Agoraphobia”).\(^{156}\)

Ultimately, then, the stringency of the diagnostic criteria, the categorization of agoraphobia as belonging to the panic disorder family, the lack of support for a ‘pure’ diagnosis of agoraphobia, and the studies that reevaluate most ‘pure’ diagnoses as either

\(^{155}\) Of patients who were diagnosed with Agoraphobia Without History of Panic Disorder, Goisman et al. found that 73% had experienced panic symptoms in the past, but that these symptoms had not met the criteria for uncued panic attacks; almost half of these patients, however, expressed a fear of panic attacks (Goisman et al. HTML p. 4). Of the complete pool of those diagnosed with Agoraphobia Without History of Panic Disorder, most reported “catastrophic cognitions” associated with their agoraphobia; for example, they were frightened of doing something embarrassing, of fainting, of losing control, or becoming ill (Goisman et al. HTML p. 4). If a person were to experience these feelings and were to have had a panic attack sometime in the past (even in the distant past), this fact alone could be sufficient for diagnosing a person with Panic Disorder with Agoraphobia rather than Agoraphobia Without History of Panic Disorder (See DSM-IV-TR definitions of Panic Attack, Panic Disorder, and Agoraphobia Without History of Panic Disorder).

\(^{156}\) Goisman et al. reviewed a series of studies on agoraphobia and panic disorder using community samples and found that up to 85% of these subjects were diagnosed with Agoraphobia Without History of Panic Disorder, whereas in a sample of clinical studies this diagnosis was given at the most 31% of the time and in at least one study no such diagnosis was given (Goisman et al. 1).
phobic disorders or as accompanied or defined by Panic Disorder suggest that the current conception of agoraphobia is tightly bound up with the definition and characterization of panic attacks and more generally with Panic Disorder. This shift to grouping agoraphobia with panic disorder focuses attention on the role of panic attacks in the disorder. On this model, the problem that needs to be addressed in agoraphobia is, therefore, the role that panic plays in keeping a person from venturing into particular places. The agoraphobic is seen as avoiding certain places out of the fear that a panic attack might occur in those places. To solve this problem, then, one must find a way to allow the agoraphobic person to be confident that the experience of panic will not incapacitate her, since if she is confident that she can control her panic, the agoraphobic will, according to this view of agoraphobia, feel free to venture into areas that she previously avoided.

2. Current Treatment Approaches

Treatment approaches for agoraphobia typically take one or a combination of the following forms: exposure therapy, cognitive therapy, a combination of these two therapies, medication, or psychotherapy. As agoraphobia has increasingly become treated as an anxiety disorder in which panic attacks play a significant role, its treatment has begun to center on controlling the bodily sensations or the thoughts about these bodily sensations that can lead to panic attacks. This shift has included a move away from psychotherapy and increasingly toward the use of exposure or cognitive behavioral therapies and often toward the use of medication on its own. I will discuss motivations
for and implications of this shift in greater detail in the next section, but first I will offer brief descriptions of how each treatment approach addresses the agoraphobic person and the disorder itself.

Currently, one of the most favored means of treating agoraphobia is exposure therapy (Hallam 318; Frances, Miele, et al. 9; Himadi 345). This form of therapy involves exposing the agoraphobic in a systematic and graduated way to places identified as threatening by the patient or sometimes by the therapist without any patient input (Clarke and Wardman 58-9). The graduation of the exposure sessions can include increases in the amount of time spent in a particular place, in the level of activity demanded of the person within a particular place, or in the nature of the place itself. Patients are typically asked to repeat the exposure as “homework” before returning for the next therapy session (Öst et al. 1111). Theoretically, patients are expected to become desensitized to these places by gradually getting used to being in them and doing so “without incident.” In other words, patients are expected to learn through habituation that these places really are not threatening after all. This form of treatment tends to deal with agoraphobia as a problem of acclimation.

Cognitive therapy is a second popular form of treatment, and one that often accompanies exposure-based methods of treatment and, in this case, is called cognitive behavioral therapy. Fundamentally, there are two components to cognitive behavioral therapy—cognitive therapy and behavioral therapy—but these components are regularly integrated into one seamless form of treatment. Separately and in tandem, both components of cognitive behavioral therapy focus on training the agoraphobic person to control her reactions in response to situations that seem threatening, and specifically on
keeping these reactions from elevating to the level of panic. In cognitive therapy, a therapist works with a patient to identify ways in which the patient is misinterpreting bodily sensations in such a way that they are experienced as catastrophic or potentially catastrophic (MacNeil 32). Once these sensations are identified, the therapist works with the patient to develop an alternative, non-catastrophic means of understanding the sensation. Ultimately, cognitive therapy attempts to change the types of thought patterns a person may have when certain bodily sensations occur or when certain experiences may start to seem threatening. Behavioral therapies train the patient—often in the face of specific ‘triggers’—to work on breathing or meditation techniques or other actions that can help her to control or calm certain bodily reactions that may precipitate a panic attack or other feelings of helplessness or loss of control. Combining these techniques, a cognitive behavioral therapist might expose a patient to conditions in which the threatening bodily sensations or thoughts typically occur, and encourage the patient to test whether the catastrophic interpretations hold up in light of these new ways of understanding the bodily symptoms or thought patterns (Öst et al. 1113). In general, then, cognitive behavioral therapies place a heavy emphasis on decreasing the occurrence of panic attacks or even panic-like experiences. The assumption behind this emphasis is that the agoraphobic avoids going out into public places for fear that she will lose control of herself in some way or another. Correspondingly, this form of treatment focuses on building up a patient’s tolerance to threatening situations and on helping the patient

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157 MacNeil argues that “...panic attacks are often only exaggerated reactions to fearful situations. Because of this, learning to control our responses can bring tremendous relief” (MacNeil 35). In this quote, we can see an example of the current focus on treating panic as something that basically needs to be ‘toned down’.
develop behavioral skills that will enable her to cope with the anxieties she experiences in such situations.

A third form of treatment for agoraphobia involves the use of various types of medication to diminish the occurrence and intensity of anxiety or certain bodily sensations that may arise when a person feels threatened or anxious. Like the previous forms of treatment, therapy by means of medication tends to address agoraphobia as a problem involving symptoms that can and need to be controlled. Since agoraphobia was categorized as an anxiety disorder, and especially one related to Panic Disorder, medication has increasingly become a preferred mode for its treatment. In one study that reviewed hundreds of thousands of anxiety disorder cases, researchers found that between 1985 and 1998 the prescription of medication as the sole means of treatment offered by psychiatrists for anxiety disorders rose from 3% to 29% (Harman et al. 168). They noted that the increase in the prescription of medication for anxiety disorders over this period did not reflect a general increase in the rate of treatment being given for these disorders as a whole; rather, medication appears to have been increasingly offered by physicians as a substitute for psychotherapy (Harman et al. 170). Moreover, the researchers found that the highest rate of treatment by means of medication within all anxiety disorder cases was found in patients diagnosed with Panic Disorder (Harman et al. 169).

A fourth means of treating agoraphobia is psychotherapy. The psychotherapeutic approach to treating agoraphobia typically involves talk-based therapy sessions in which a therapist may help the agoraphobic develop ways to ‘manage’ the problems that arise in

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158 It should be noted, of course, that the start of the range for this study is relatively close to the transformative publication of the DSM-III (1980).
his life as a result of his disorder; to work with the agoraphobic and other persons in the agoraphobic’s life to find sources of conflict that may contribute to the disorder and subsequently to work on diminishing these; and, in some cases, to attempt to uncover and understand the meaning of the symptoms and treat their underlying cause, rather than simply to address or change the symptom. Since the publication of the DSM-III, psychotherapy treatment for agoraphobia has increasingly become focused on the first two of these options—namely, on ways of managing the symptoms and the immediate provocations that may lead to the eruption or exacerbation of these symptoms—rather than on uncovering and addressing deeper etiological ‘causes’ of the agoraphobia. On the whole, the psychotherapeutic treatment of agoraphobia has decreased since the publication of the DSM-III (Harman et al. 168). While further possibilities for this decrease will be considered in the next section, Gassner, a professor of psychology and a practicing psychoanalyst who strongly supports the use of psychotherapeutic treatment for agoraphobia, herself proposes that pharmacological and cognitive behavioral treatments may at least initially prove more helpful in the treatment of agoraphobia than psychotherapy insofar as psychotherapy can, she argues, lead to more “threatening” therapeutic relationships between the patient and doctor, which may turn the agoraphobic away from treatment altogether. Gassner’s work suggests, therefore, that treatment of agoraphobia by pharmacological or cognitive behavioral approach may be favored because it can quickly produce “highly-welcomed and urgently needed symptom relief” (Gassner 228-29).159

159 It will be significant for our upcoming criticisms of the currently favored treatment methods that Gassner argues that in spite of their quick and often immediately effective results, pharmacological and cognitive behavioral treatments “...do not address the underlying
Overall, then, the currently favored treatment approaches for agoraphobia tend to direct their attention toward managing certain agoraphobic behaviors and thought processes. Correspondingly, these approaches place little emphasis on the ‘root’ of these behaviors or thought processes except insofar as these can be proved to have a biological or physiological origin. Though a person’s personal ‘psychology’ can be relevant to these approaches, it is typically seen as a site for the possible augmentation of—or, seen negatively, for resistance to—symptom-focused therapies such as exposure or cognitive behavioral therapies.

3. Motivation for the Current Theoretical and Treatment Approaches to Agoraphobia

As the description of the changes in the DSM have already suggested, agoraphobia was not always identified as a disorder fundamentally defined by panic or panic-like attacks, nor was it always dominantly treated by such means as exposure or cognitive behavioral therapies or by medications. The term “agoraphobia” was created by Westphal 1871 in “Die Agoraphobie, eine neuropatische Erscheinung” (Knapp and Schumacher 1, 59). Though some descriptions of agoraphobic-like cases predate Westphal’s publication, it is generally thought that his analysis served as a foundational description—one that “…was to provide a name and a detailed description of symptoms around which future cases and discussion could coalesce” (Knapp and Schumacher 39). Concurrent with and following Westphal’s work on agoraphobia, researchers and therapists identified a variety of causes for the disorder ranging from vertigo as a result of characterological and relational problems that predispose and usually predate such traumatized patients manifesting a vulnerability to these painful debilitating symptoms” (Gassner 229).
visual convergence problems to hereditary origins, from epilepsy to unresolved sexual conflicts (Knapp and Schumacher 43, 47, 74-79, 80-83). Westphal himself searched for a neuroanatomical cause (Knapp and Schumacher 24-25, 45). Correspondingly, Westphal’s recommendations for the treatment of agoraphobia were generally those that would be used to treat any neurotic condition at that time—e.g., a stay at a water spa, drinking of strong wine, and psychological fortification that could come through interaction with an authority figure such as a physician or therapist (Knapp and Schumacher 40-41). Freud’s subsequent discussion of the neuropsychological origins of agoraphobia (and, specifically, of agoraphobia’s roots in repressed sexual desires especially those pertaining to strangers on the street) significantly influenced the conception of agoraphobia (Frances, Miele et al. 4-5; Knapp and Schumacher 45-46; Vidler 37-38), and treatments often tended to take the form of psychoanalysis and of other forms of talk-based psychotherapies, which sometimes involved other family members as well as social workers (Wilson 400-1). With an eye to World War II and its numerous cases of ‘normal’ soldiers returning from the war with various mental illnesses, the first edition of the DSM was published and solidified this emphasis on a psycho-social basis for neuroses, including agoraphobia, and also the treatment of neuroses by means of individualized psychotherapies that looked into the “underlying unconscious significance” of the disorders (Wilson 401).

Psychotherapeutic treatments decreased, however, when agoraphobia was reclassified as a species of panic disorder in DSM-III in 1980. One study reports, for instance, that during visits to psychiatrists’ offices by patients with anxiety disorders (which include agoraphobia and panic disorder), psychotherapy was provided alone or in
combination with medication during 95 percent of office visits in 1985, but was provided in only 66 percent of office visits by 1997-98; corresponding to this change was an increase in prescriptions for medication during these visits from 3 to 29 percent (Harman et al. 168). The same study notes that in 1985 when panic disorder and anxiety disorder patients sought help from their primary care physicians, no treatment was offered in 38% of those cases with unspecified anxiety disorders, and in 58% of cases with a specific anxiety disorder; whereas by 1997-98, primary care physicians were “nearly always offering medication to treat panic disorder and generalized anxiety disorder” and recommendations for treatment by psychotherapy had reduced to less than 5% (Harman et al. 168-9). Lastly, a 1995 study reports that of 100 patients with Panic Disorder with Agoraphobia 54 were treated by “psychological treatments,” but only 33% of these received dedicated psychodynamic therapy (Bandelow et al. 166-7). A 1991 article titled “Decisions for the Clinician in the Treatment of Panic Disorder: When to Treat, Which Treatment to Use, and How Long to Treat” does not even address psychotherapy as a treatment option (Schatzberg and Ballenger 26).

This shift in treatment as well as the more fundamental shift to place agoraphobia within the category of anxiety disorders, and more specifically within the panic disorder schema, follows a general move toward treating ‘mental disorders’ on the model of physiological disorders—a move that we can see more clearly by examining some of the motivations behind the revisions to the DSM. Considering these motivations will also allow us to see more fully how agoraphobia is currently understood and treated, since as

160 The fact that there is some of the discussed changes apparently have not ‘taken hold’ as early as 1985 (in spite of the fact that the DSM-III was published in 1980) arguably reflects that it took some time for the substantial changes to be disseminated through the ‘industry’ through the training of new graduating classes of physicians, psychiatrists, and psychologists, as well as to reach, be accepted in, and be adjusted to in already extant private and public practices.
we already noted above, changes to the DSM have a significant corresponding impact on
the way that human psychology is understood and treated.161 We will begin an
examination of the motivations behind the revisions to the DSM by looking briefly at the
situation of American psychiatry prior to its third edition, since it is this situation against
which the DSM-III is openly claimed to be a reaction.

In the decades prior to the publication of the DSM-III, the general approach to
understanding and treating mental illness and mental health in America was psychosocial
in nature. This model of psychiatry developed in the wake of World War II as a means of
explaining psychiatric cases that appeared as a result of combat trauma (Wilson 400).
The significant number of combat trauma cases prompted the question, How can so many
persons who were perfectly well and ‘normal’ prior to the war become mentally ill? The
psychosocial model proposed: 1) Any normal person can become mentally ill if exposed
to severe enough trauma; 2) mental illness arises from a mixture of environmental and
psychic stresses; 3) there is a fluid continuum to mental health that does not rigidly
separate the mentally healthy from the mentally ill; and, 4) the “mechanisms” underlying

161 See Mitchell Wilson’s article “DSM-III and the Transformation of American Psychiatry: A
History,” which examines the history and the effect of the DSM on the transformation of
approaches toward mental health. Wilson writes at one point that the “DSM-III is commonly
declared to be the most significant factor in promoting what has been called the
‘remedicalization’ of American psychiatry” (Wilson 399, my emphasis). According to Wilson,
the DSM is capable of having this significant impact, because it is the “official map of American
psychiatry’s clinical jurisdiction; it is the centerpiece of the knowledge base of the profession”
(Wilson 399). Thus, any ideological or practical change in the construction of the DSM and its
diagnostic schemas carries within it a power for shaping the very way we think about and deal
with mental health. In light of the significant power held in this way by the DSM (and its human
authors), such changes should not immediately be accepted as inevitable or ‘natural’, but should
rather be investigated to see what causative forces and inclinations might lie behind them. It is
possible, of course, that such an investigation could lead to a conclusion that the changes were in
some way ‘natural’, but it is equally the case, as the following argument suggests, that there are
forces behind the changes that do not arise simply from newly developed ‘truths’ about mental
illnesses, health, etc. Stated simply, it is important, I would argue, to remember that in spite of
(or perhaps because of) its aura of medical and scientific certainty, the DSM is a human construct.
mental illness are psychological, not physical (Wilson 400). As these points suggest, the psychosocial model rejects the views that mental illnesses are discrete psychiatric syndromes, and that they occur only on the margins of human experience. A person who would otherwise have been mentally healthy can, for example, become mentally unwell if unable to deal with the pressures, conflicts, and atrocities of military service. This conception of mental health led to a broadening of the psychiatric community’s range of societal involvement. Psychiatry began to stretch both ideologically and practically into areas of religion, literature, politics, and the social domain in general, and did so as a means of addressing problems in larger social structures that could, on this model, be argued to cause problematic psychological stresses (Wilson 401).

This disciplinary expansion as well as the conception of mental health and illness as having a fluid boundary eventually proved damaging to the field (Wilson 402). From outside of the field, lay and professional persons complained that this approach did not treat psychiatric illness, but rather vaguely defined social and political problems (Wilson 402). From within psychiatry, biologically-based psychiatrists argued that a medical model of psychopathology was needed in part because a fluid model did not allow for diagnoses that would stand up to a traditional definition of disease (Wilson 402). The psychosocial model had, for instance, generally avoided descriptive diagnoses for mental illness—that is, fixed diagnoses with explicit qualifying symptoms and conditions—because this approach to mental illness could get in the way of a careful examination of a particular case or simply be irrelevant to the personalized clinical work that the psychosocial model saw as fundamental to treating mental illness (Wilson 403). Biologically-based psychiatrists complained that undefined mental illnesses—both in
terms of symptoms and physiology—could not be treated according to a conventional medical model, and that this was proving problematic both for the purposes of empirically testable treatment therapies and for issues of financial reimbursement (Wilson 402). There was particular concern with the focus in psychosocial therapies on etiological investigations into mental health. Empirically-based researchers argued that psychotherapeutic investigations into the causes of mental illness could never have the certainty of proof behind them, because these investigations dealt with complex ‘subjective’ histories that could be tainted by either the subject’s ‘faulty’ memory or interpretations or by the particular prejudices of the therapist.\footnote{One study appealing to the opinion of the National Institute of Health (NIH Consensus Development Conference Statement, vol. 9, no. 2. Treatment of Panic Disorder) in 1991 writes: “Presently, the efficacy of psychodynamic treatment in panic disorder is regarded as unproven” (Bandelow et al. 166).}

The personal character of etiological investigations also did not allow for the same type of universal generalizations that measurements of physiological or behavioral symptoms seem to allow. These criticisms were mirrored by cutbacks in funding for psychotherapeutic treatments and studies by both insurance companies and research granting agencies (Wilson 402-3).\footnote{Confirming this shift, Goldfried and Wolfe note that funding for psychotherapy process research from the National Institute of Mental Health was reduced by 60% between 1986 and 1990 (Goldfried and Wolfe 1010).} These cutbacks stood in contrast to the increase of funds that were directed toward the development of new types of medication, which required empirically-based research studies as well as more explicit symptom identification that one could match up with the biological effects of these medications (Wilson 404).

The third edition of the DSM, published in 1980, can be seen as a response to many of these criticisms and ‘problems’. In broad terms, the publication of the DSM-III has been described as a return in American psychiatry to a descriptive diagnostic model...
in which mental illnesses are considered to be discrete disorders that are describable and treatable like physiological illnesses (Wilson 399). The chairman overseeing the revisions to this edition of the DSM himself claimed that the DSM-III was conceived by its authors as a “defense of the medical model as applied to psychiatric problems” (Wilson 405, quoting Robert Spitzer). To this end, the DSM-III was designed as a classification manual that would provide descriptive and rule-bound diagnostic criteria that were derived from “the best available evidence” (Wilson 405, my emphasis).

Correspondingly, the manual would not attend to the etiology in making diagnoses unless claims about a disease’s history and origin carried the weight of ‘proof’. This new focus on ‘medicalizing’ the DSM resulted in a move toward a research-based model of describing and treating mental illness, with the result that “...research investigators replaced clinicians as the most influential voices in the profession” (Wilson 400).

The new emphasis on empirically-identifiable and -treatable symptoms shows up in the change in the definition and treatment of agoraphobia. By emphasizing the importance of panic attacks in agoraphobia, the DSM-III shifts attention toward the body and certain bodily reactions. These bodily reactions can be described in relatively universal and objective terms—e.g., in terms of heart rate, heart palpitations, blood pressure, presence of sweat, body temperature, pupil dilation, breathing rate and depth, balance, presence or absence of sensation, nausea, tingling, and numbness, etc. These bodily reactions can also be manipulated and controlled by standardized treatment procedures. Criteria for success in treating the disorder can then be measured according to changes in the severity or regularity of a collection of these bodily reactions. This

164 For a related historical discussion of the development and impact on psychotherapy of the various editions of the DSM, see Goldfried and Wolfe’s “Psychotherapy Practice and Research: Repairing a Strained Alliance.”
mode of diagnosing and measuring a disorder allows practitioners to avoid ‘subjective’
descriptions and assessments. It also allows them to treat the body directly rather than
delving into the less quantifiable and measurable aspects of the mind or psyche.
Moreover, it allows them to deal with symptoms that are currently present or likely to
show up rather than delving into the ‘subjectively tainted’ history of the patient. Above
all, this approach allows practitioners to focus on a contained set of symptoms rather than
forcing them to branch out into a complex interpersonal system of relationships, a
complicated history of events, and personally specific emotional experiences, events, and
reactions. This focus on measurable symptoms aligns with medical and insurance
communities that are increasingly interested in ‘provable’ claims; it aligns with the
demand to focus on “…what was publicly visible over what was privately inferred”
(Wilson 408).\footnote{Goldfried and Wolfe propose that even within research that still focuses on psychotherapy,
“…researchers may unwittingly be playing into the hands of third-party payers in placing
unwarranted emphasis on the putative fixed efficacy of specific interventions” (Goldfried and
Wolfe 1007).} Compared to controlling and measuring agoraphobic behaviors or
related symptoms, investigations into etiological causes behind a person’s agoraphobic
behaviors will be slow, highly personal, and often not clear cut. Thus, etiological
investigations into the “why” of agoraphobia or into the function of agoraphobia are
typically not pursued by these therapies, and largely because such investigations do not
carry the standards of proof currently upheld by the dominant rubrics in the fields of
medicine and psychiatry.

Related to the shift toward ‘objective’ symptom measurements is the rise in the
use of medication as a means of treating mental illnesses. This increase seems to be a
response to a prevalent concern within the medical community that psychotherapies,
unlike treatments by medication, cannot easily be ‘proven’ to be effective or, at least, cannot as easily have experiments developed and carried out that ‘demonstrate’ certain definite effects. We can again see signs of this shift in the case of agoraphobia and panic disorder. One study, for instance, emphasizes the efficacy of pharmacological treatments for treating Panic Disorder, and, though with less vigor, recommends certain behavioral therapies such as exposure therapies and cognitive behavioral therapies; but, while acknowledging that patients with Panic Disorder “require supportive interviews and attention to emotional states,” the researchers in the study conclude that “[o]ther psychological treatments cannot be recommended due to insufficient proof of efficacy” (Bandelow and Rüther 731, my emphasis).166 Another set of researchers points to the role that finance played in this shift toward medication as a preferred means of treatment: Of the period between 1985 and 1998, they write: “...a marked shift in psychiatric practice occurred over this period, along with cost containment pressures and a larger role of managed care that is substituting less costly medications for expensive psychotherapy” (Harman et al. 171; see also Pincus et al. 531). Within this currently increased state of treatment by medication, agoraphobia and the panic disorders in general show a particularly high rate of pharmacological treatment. One study that cites the rates for

166 It is interesting to note that in recent years articles on the efficacy of CBT for treating Panic Disorder (With and Without Agoraphobia) have been increasing, and many of these are focusing on the cost-effectiveness of CBT on its own or in conjunction with pharmacological treatments. (Searches on online research article databases such as PubMed and PsychINFO can confirm this statement.) This trend seems both to underscore the current observation—namely, that psychotherapy is not a popular means of treatment in part because of its lack of being able to be ‘proved effective’—and also to suggest that while pharmacological treatments had at one point begun to be favored for their cost-effectiveness, there may now be a new swing towards types of CBT (specifically, group, public-practice CBT, which is a significantly cheaper form of CBT than individually administered CBT in a private practice setting) in light of its even greater cost-effectiveness; see, for example, Otto et al. (2000) and Heuzenroeder et al. (2004)). Currently, recommendations for the treatment of Panic Disorder With or Without Agoraphobia focus fairly equally on CBT and pharmacological treatments, and often on some combination of these; see, for example, Nadiga (2003) and Mitte (2005).
treating panic disorder and generalized anxiety disorder by medication as the highest also reports that these are “...the two anxiety disorders on which pharmaceutical companies have most focused their marketing efforts” (Harman et al. 170).

This particular emphasis on the use of pharmacological treatments following the category changes around Panic Disorder and Agoraphobia arguably arose because panic or panic-like anxiety has been a symptom that has more easily been shown in studies to respond to medication than phobias and agoraphobia (MacNeil 31).167 This fact becomes more interesting when we consider that agoraphobic avoidance behavior has proven not to be treated very effectively by the use of medication.168 Possibly as a result of this, patients diagnosed with Agoraphobia Without History of Panic Disorder have typically been medicated far less frequently than those patients who were diagnosed with Panic Disorder or Agoraphobia with Panic Disorder (Goisman et al. HTML p. 5). Given the current emphasis being placed on cost-effectiveness and ‘provable’ treatments from both within and outside of the psychiatric community, this could be one further motivation for encouraging the diagnosis of Panic Disorder with Agoraphobia rather than Agoraphobia Without History of Panic Disorder. If the diagnosis of Agoraphobia with Panic Disorder

167 Schatzberg and Ballenger confirm that panic disorder dramatically responsive to pharmacological treatments (Schatzberg and Ballenger 27). They discuss the target of medication as “blocking panic attacks” (Schatzberg and Ballenger 28). They acknowledge that treatment of panic disorder must also address the patient’s return to “normal functioning,” which means dealing with the anticipatory anxiety and avoidance behaviors that patients with agoraphobia experience, and they admit that dealing with these aspects may require “aggressive pharmacological management, as well as the use of behavioral approaches”; in the end, however, they put these issues off by noting they are beyond the scope of their current paper (Schatzberg and Ballenger 28). Thus, their study tends to confirm that pharmacological treatments are for the most part aimed at the panic-dimension of panic disorder, and not the agoraphobic aspects.

168 For a review of studies correlating non-responsiveness to pharmacological treatment with agoraphobic avoidance, see Slaap and den Boer (2001), pp. 116 and 119. In Slaap and den Boer’s study of various predictors for nonresponsiveness to pharmacotherapy (including factors such as frequency and severity of panic attacks, age and gender, comorbid disorders, etc.), the presence of agoraphobic avoidance stood out as one of the most robust factors (Slaap and den Boer 118-19).
were given to a patient and medication were prescribed as a form of treatment, any signs of improvement in panic-like symptoms could be counted as some form of treatment success; thus, even if the patient were more fitted for a diagnosis of Agoraphobia Without History of Panic Disorder, the diagnosis that includes Panic Disorder may be more ‘profitably’ assigned.

In general, then, psychiatric definitions and approaches have since the conception and publication of the DSM-III been guided by concerns of scientific ‘proof’, ‘objective’ descriptions and definitions as well as by issues of finance (namely, financial constraint on the side of expenditure for treatments; and, arguably, financial profit on the side of companies that can profit from pharmacologically-based treatments, but not from those that are psychotherapeutically-based). These motivations all support the movement toward treating agoraphobia as a panic-driven disorder or, at least, as one that involves the management of physiological reactions or catastrophic ideas about physiological reactions, or as a disorder in which patients need to be behaviorally conditioned to be able to function in an objectively larger environment.

4. Spatial Assumptions Made By Current Model

The current approaches to diagnosing and treating agoraphobia either downplay the agoraphobic’s experience of space or, if they do attend to space, they treat space as something separate from the agoraphobic. Let us consider these points in turn.

To begin, we can see that each of the predominant treatment methods tend to set space aside as an issue of concern insofar as their main focus is to decrease ‘negative’
bodily sensations or to develop new habituations of the body. For instance, we saw that in cognitive behavioral therapy the agoraphobic is coached on how to deal effectively with certain bodily phenomena that may arise when she is threatened by being in a particular place. The patient is trained to reinterpret or moderate her bodily experiences in a way that acknowledges them as normal, non-threatening bodily sensations, and, therefore, not cause for avoiding the places in which these sensations may arise.

Similarly, exposure therapies are meant to help the agoraphobic become physically comfortable being in particular places. The patient undergoing these treatments situates her body in a pre-assigned place for a pre-assigned stretch of time. The therapy incrementally and regularly increases both the length of time that her body must endure such an exposure and also the type of activities that her body must carry out during these exposures. This therapy performs a type of bodily habituation, and does so by treating the patient in a way as a physiological machine, and specifically one that needs adjustment. When medication is used to treat agoraphobia, it is also directed at working on the body as if it were a machine in need of tuning.\textsuperscript{169} Medications given for agoraphobia are frequently drugs that diminish the experience of panic or panic-related sensations; these drugs may, for instance, lower the ability for the heart to accelerate very quickly or above a certain threshold, inhibit the release of neurological chemicals associated with anxiety, and generally work to even out the intensity of emotional reactions by regulating the balance of neurochemicals present in the brain (MacNeil 31-32; Bandelow et al. 165-7; Bandelow and Rüther 725-31).

\textsuperscript{169} Mitte characterizes pharmacological treatments, for example, as treating panic disorder as a “...disturbance in the neurobiological systems; hence the aims of the treatment are regulations of neurotransmitter systems” (Mitte 28).
In general, then, when it comes to the most prevalent forms of treatment for agoraphobia, attention is not given to the agoraphobic’s relationship with space, but rather to the agoraphobic’s bodily habits or, alternatively, her bodily sensations and interpretations of these sensations. These are seen as related to space only insofar as the agoraphobic is considered to fear experiencing these sensations or expanding her bodily habits in public or otherwise unfamiliar, ‘unsafe’ settings. As a result of this type of fear, the agoraphobic may avoid certain places, but according to this model the real problem is identified as the agoraphobic’s relationship to feelings of panic. Treatments, therefore, focus on diminishing the experience of anxiety, not on addressing issues of why the agoraphobic is spatially contracted or how space has become the medium by which tensions arise and are expressed.

If space is addressed in these treatments, it is generally treated as an objective stimulus to which the agoraphobic needs to be desensitized. Rather than working to understand why a person’s space has become variegated into safe and unsafe places or why it has contracted in a way that limits what a person can or is willing to do, or, more generally, to understand what space is that it can become problematic as it does for the agoraphobic person, this model looks at places and space in general as having prefixed forms and characteristics that may happen to irritate or serve as a negative catalyst for the agoraphobic person.\textsuperscript{170} As we have seen, the goal of treatment then is to acclimate the

\textsuperscript{170} This position is taken to its extreme in one proposal that agoraphobia results from a physiological problem rooted in one’s vision. Dupont et al. (2000) hypothesized that agoraphobic behaviors may arise from a physiological problem in visual attention processing. They surmised that agoraphobic persons experienced anxiety in new situations because a deficit in their visual processing system would cause them to spend too much time examining their surrounding environment before finding and selecting the relevant ‘item’ for which they were searching. This study failed, however, to demonstrate that agoraphobic patients spent too long focusing on irrelevant ‘items,’ and also failed to show that ‘confusing’ items distracted agoraphobic patients.
agoraphobic to being around particular characteristics of these places. There is no effort to understand how these characteristics may have taken on a threatening character. Instead, treatment focuses on building up the agoraphobic’s resistance to these threats until eventually the threats are no longer noticed.

The only way in which space is retained in this model is in acknowledging that certain places may need to be ‘desensitized’ for the agoraphobic. The agoraphobic may, for example, need to practice controlling her tendencies toward panic feelings in certain ‘panic charged’ places. Yet, even in this acknowledgment that certain places may be panic-prone for the agoraphobic person, the particular place is simply seen as an external stimulus that for some reason or another happens to serve as a catalyst for the agoraphobic’s panic. The experience of panic is still the focus of the problem. This experience is treated as one that is circumscribed within the person; in other words, it is an internal, delimited experience that leaves behind the ‘external’ world. Panic is not acknowledged as shaping the world of the person experiencing the panic; it is a physiological and psychological reaction that takes place wholly within the confines of the subject’s ‘objective’ body. This interpretation of agoraphobia acknowledges the significance of space only insofar as it can be a site that is charged with certain negative associations or reinforcements.\footnote{Himadi even suggests that exposure therapies could be improved by the adding of positive reinforcements such as the inclusion of a “safety signal” in a typically avoided environment (Himadi 355-58). His suggestion has it roots in part in a Pavlovian conception of the human being in which our behaviors can be conditioned and thereby trained through the use of positive and negative reinforcement stimuli—in this case, stimuli that are objectively ‘out there’ in the environment.}
Of the common forms of therapy, exposure therapy retains the greatest focus on the experience of space in agoraphobia. As we have seen already, in exposure therapy, a patient and therapist construct a hierarchy of relevant phobic situations to which the agoraphobic is then gradually submitted either with or without a therapist present. The therapy largely consists in making the patient go regularly into a place that on her own she would avoid and ‘demonize’. This therapeutic approach acknowledges that certain places bring about a problematic experience for the agoraphobic, but it does so in a way that strips the problem of any lived significance. It treats ‘problem spaces’ as places to which the person is merely unacclimated—in the way that a person may not initially be comfortable going into a cool body of water. The goal of this treatment is to ‘teach’ the agoraphobic that those externally threatening characteristics are not so threatening once you get used to them. It is merely a matter of getting her accustomed to the outside world. Her body needs to become habituated to being inserted into a larger range of places than it typically occupies. In cases when she experiences agoraphobic symptoms even in her ‘safe’ spaces, the current model would seem to suggest that the patient has temporarily lost her behavioral acclimation to her regular surroundings, and therefore momentarily experiences the threats that are typically experienced only in less familiar, less habituated surroundings.

Thus, in spite of its contrast with a situated phobic reaction, agoraphobia is typically understood to be a response to space, specifically to space as something that can generally be inherently threatening in and of itself. In other words, the agoraphobic is threatening or welcoming character of the environment. He writes: “The major element stressed here involves the use of positive reinforcement procedures to establish potent discriminative stimulus control to promote approach behavior. Once this control is established, these environmental properties will have acquired more of a “safety” function for the agoraphobic and should facilitate continued approach during subsequent outings” (Himadi 357, my emphasis).
conceived to be a person who is responding to some perceived threat that exists ‘out there’ in the world, and particularly in public spaces. Though the specific conclusions made by the agoraphobic about space may be considered to be erroneous or at least unhealthy, the activity of perceiving space as having certain absolute characteristics is not questioned by this approach to explaining agoraphobia. It is assumed that we encounter space as something already fixed in advance, and that we have varying types of reactions to this independent space based on variations in our modes of perception and the values that inform our responses to these perceptions. Generally speaking, agoraphobics are, then, people who happen to react adversely to certain pregiven characteristics of public spaces. Even if it is acknowledged that an agoraphobic person may be struggling with personal or interpersonal problems and that this conflict feeds into or even leads to the agoraphobic reaction, there is generally a sense that the reason these problems are brought to the fore by public places is that such places in and of themselves possess the means of aggravating these issues or of tapping into them, because of characteristics inherent in their nature as public rather than private places.

In summary, if the predominant conceptual and treatment approaches make room for the acknowledgement of space at all, they appear to treat space as if it were an external stimulus that excites the agoraphobic in a negatively-experienced way, and they presume that the key to overcoming agoraphobia is either to habituate the agoraphobic to those stimuli or to change the agoraphobic person’s interpretation of her reaction to those stimuli. Either way, agoraphobia is seen as an adverse reaction to something positively present and enduring in the world.
IV. Problems with this Approach From Within the Field of Psychiatry

In spite of their prevalence, these current means of treating and understanding agoraphobia have significant problems—problems that begin to appear from within the field of psychiatry itself. Four particular complaints clearly arise therein. First, and most obviously, there is an extensive discussion of the poor outcome results for treating agoraphobia. Second, there is concern among some researchers that the particular focus on decreasing panic and anxiety in agoraphobia is misplaced. Third, some psychiatrists and researchers have argued that effective treatment requires the consideration of the etiology of the disorder—a practice that is de-emphasized by the current treatment modalities. Fourth, and encompassing the previous three, there is an acknowledgment from at least some sectors of the field that the current approach to mental disorders and their treatment is in general too narrow in both scope and action—and this seems readily evident in the case of agoraphobia. Let us look more closely at sources from within psychiatry to see how and why these complaints arise.

The most striking evidence from within the field of psychiatry that a problem exists with the current way of dealing with agoraphobia is the high rate of treatment failure associated with the present standards for treating agoraphobia.\(^{172}\) Studies have

\(^{172}\) It is interesting to note that these treatment outcome rates exist in large part because of the emphasis currently placed on gathering and disseminating objective data. Yet, even this ‘objective’ data can be misleading. Subjects for research trials are, for instance, often selected because of the ‘purity’ of their diagnosed disorder—that is, for having one and only one clearly diagnosed disorder. In the general population, however, people often, if not usually, present with more than one disorder. Thus, reports made by studies regarding success rates for particular
shown that exposure, cognitive behavioral, and medication therapies for agoraphobia have often had poor short- and, especially, long-term success rates. In a review of randomized clinical trials focusing on agoraphobia since 1990, one researcher found that only 60% of patients achieved “clinically significant improvement” (Öst et al. 1106). In addition to this relatively low level of improvement following ‘approved’ treatments, it is important to note that ‘clinically significant improvement’ by no means implies that a ‘cure’ has been accomplished. For instance, one researcher notes that “even though clients [may] report great improvement from pretreatment anxiety levels, most interventions are not curative, and clients are likely to need additional help eventually (as in booster sessions)” (MacNeil 30). A further study supports this notion that treatment successes frequently do not last in the treatment of agoraphobia: In this study, only 18% of agoraphobic patients who had shown improvement after treatment reported themselves to be symptom-free four years following treatment (Arnow et al. 453, referring to study by McPherson et al.). Even reports such as these may be too optimistic according to another set of researchers, because estimates of treatment success rates are based on patients who qualify for placement in controlled studies, and these are persons who, in types of treatments will likely not correspond with the results that one would find if applying those same treatments to more complicated cases. For a discussion of this issue, see Goldfried and Wolfe, especially pp. 1009-11. Goldfried and Wolfe provide a particularly poignant example of this research ‘problem’ in their article. They report that at one NIMH research workshop, a clinician expressed exasperation at the ease with which researchers appeared to be able to treat their phobic patients. “One of the participants responded, ‘Barry [the clinician], you are overlooking the first law of research: Don’t use real patients.’ This was said in jest, but the reality of the clinician-researcher gap was very much apparent in the uneasy laughter that exploded in the room” (Goldfried and Wolfe 1011).

173 By contrast, in the same studies 74% to 94% of the patients diagnosed with Panic Disorder Without Agoraphobia were symptom-free after 12 treatment sessions, and at a one-year follow-up 71% to 100% were symptom-free (Öst et al. 1106).

174 In general, reports of successful treatment rates for agoraphobia may also be too high because studies often do not examine relapse rates for periods beyond one year, and it is common in agoraphobia for the currently popular treatments to have ‘positive’ effects for some period of time, but not indefinitely. On this point, see Bandelow and Rüther 727; MacNeil 30-31.
comparison with a ‘natural’ population of those suffering from disorders such as agoraphobia and panic disorder, are often younger (and, thus, perhaps more pliable with respect to treatment), less severely ill, and who do not present signs of other neuroses or personality disorders (Bandelow and Rüther 725).

Poor treatment results appear not only when referring generally to the gamut of treatment possibilities for agoraphobia, but also when considering each of the styles of treatment we have discussed in the previous section. For instance, one researcher cites a study in which only one-third of agoraphobics who had been treated by exposure therapy showed improvements in phobic avoidance symptoms one-year after the treatments were completed. In the same study, those agoraphobics classified as least likely to show lasting positive results from treatment did show some improvement in phobic avoidance behaviors, but “general neurotic symptoms, other fears and dissatisfaction with spouse all increased” (Hallam 318, my emphasis). With respect to cognitive behavioral therapies, some researchers note that there is a distinction between agoraphobia and other phobic disorders insofar as studies have shown that agoraphobics fail to show significant treatment responses to such therapy in contrast to other phobics who show marked improvements to this same form of therapy (Evans and Liggett 149). One study reports a forty-four percent “failure” rate for agoraphobics who were treated by a behavioral approach (Gournay 130). Lastly, with respect to medication, one researcher reports that medications have been shown to reduce panic levels in patients, but do not appear to have a significant ability to improve agoraphobia on the whole (MacNeil 31). This same researcher notes that even when medication is used to treat panic symptoms, it is most effective when prescribed in conjunction with psychological therapies—a combination,
as we saw above, that is less and less frequently utilized now, especially because of pressures placed on physicians and psychiatrists by the insurance industry. Even if medication is effective in managing panic experiences in agoraphobia, relapse rates when removing a patient with panic disorder (including panic disorder with agoraphobia) from anti-anxiety medication can be as high as 90% (MacNeil 31; see also Nadiga 58). Moreover, if prescribed in conjunction with exposure or cognitive behavioral therapies— as it regularly is—medication is seen by some as a cause of hindering the treatment of agoraphobia insofar as medications can diminish the reactions to exposure treatments and, as such, diminish the patient’s ability to develop the desired coping mechanisms for the relevant anxiety-producing stimuli (MacNeil 32). Overall, then, these results tend to support an observation made by two researchers that “[a]goraphobia, as well as being one of the most common of the phobias, seems also to be one of the most complex. It proves particularly resistant to treatment, whether by systematic desensitization, graded retraining or indeed by any other means” (Evans and Liggett 149). The high level of treatment failure for agoraphobia may suggest that there are flaws in the assumptions on which the current model of understanding and treating agoraphobia is based.

The poor outcome rates for these common forms of treatment for agoraphobia could in part be argued to result from an inappropriate or exaggerated focus on the management of panic attacks in agoraphobia—a position that seems to be supported by some within the field of psychiatry and also by comparing data regarding the effectiveness of panic-diminishing treatments in cases of Panic Disorder With and Without Agoraphobia. To begin, we should note that cases of Panic Disorder not accompanied by agoraphobia are more likely to be addressed successfully by current
treatment methods than cases that include agoraphobia, and, correspondingly, patients with Panic Disorder With Agoraphobia are less likely, in the long run, to be cured or to achieve “symptom-free status” than those who have Panic Disorder alone (MacNeil 30). In line with this general observation, one study found that cognitive therapy showed significantly better effects for those patients with Panic Disorder alone than for those with Panic Disorder With Agoraphobia: For those with Panic Disorder, 74% were free from panic attacks after treatment, and 89% were free from them at a follow-up point; whereas only 52% of those with Panic Disorder With Agoraphobia were free of panic after treatment, and only 63% at follow-up (Öst et al. 1124). This difference in itself distinguishes the two disorders, and brings into question the practice of applying common treatments to both. There is clearly some ‘residual’ issue—to say the very least—in agoraphobia that is not addressed by the same techniques that are generally effective for treating Panic Disorder Without Agoraphobia. Moreover, even if agoraphobics are successfully treated for their panic attacks and they report being able to go into previously avoided territories, it does not follow that this should count as treatment success. For instance, even in cases where agoraphobics appear to be able to successfully navigate in public spaces to which they have been desensitized, many agoraphobics continue to report significant levels of dissatisfaction about the types of interactions and

175 It is worth repeating a point made in an earlier footnote—namely, that even these results may be inflated insofar as the long-term (i.e., a year or longer from the time of treatment) prognosis for recovery from agoraphobia tends to be poor, and few studies, including the one cited here, extend the range of their follow-up interviews beyond one year.
176 Fava et al. confirm this point and also note that even in cases of ‘pure’ Panic Disorder, the common methods of treatment seem to be failing in a significant way. In a review of other studies and through their own research, they found that “despite successful treatment”—a judgment applied to ‘qualified’ patients by the various studies—‘treated’ patients with Panic Disorder and especially those with Panic Disorder with Agoraphobia continue to show signs of “substantial residual symptomatology” (Fava et al. 188, my emphasis).
activities that they are able to carry out in these arenas. For example, persons with agoraphobia tend to report greater levels of interpersonal conflict than normal subjects, and yet these issues are not directly addressed by any of the three treatment methods described above. Thus, the aim of treating agoraphobia by managing the patient’s frequency and intensity of panic attacks seems not to address the problem at the root of agoraphobia.

Supporting a like position, and turning us now toward the issue of etiology, one set of researchers criticizes behavioral therapies that take the form of desensitizing agoraphobic patients to specific places that they report are fear inducing. The researchers maintain that the focus of this treatment fails to notice the developmental path of agoraphobia. Agoraphobia, they maintain, typically begins with a “period of generalized anxiety” that eventually can erupt in panic attacks occurring under unpredictable circumstances (Goldstein and Chambless 49). As such, they argue that agoraphobia is not a conditioned reaction to a certain set of specific places or situations, but rather shows evidence of being an unfocused, unsituated form of anxiety. This anxiety does frequently show itself more acutely in public places, not, however, because

177 See, for instance, Gournay (1989), who in reporting on the effectiveness of exposure therapy notes that this form of treatment tends to “improve” agoraphobic patients, but to leave them with “significant residual problems” (Gournay 121).
178 I will offer a fuller discussion in the following section of the deeper problems that may persist even if agoraphobics cease both having panic attacks and avoiding previously avoided areas. Also, in making this claim regarding agoraphobia, I do not mean to imply that the sole issue in Panic Disorder Without Agoraphobia can be reduced to the experience of panic disorders at a physiological level. I am not attempting to provide a full account of the nature of Panic Disorder Without Agoraphobia. Instead, I mean to use it and its current treatment protocols as a foil to show how agoraphobia should not be reduced to a subcategory of this disorder; and, arguably, I must do this insofar as I am attempting to explain the current state of the conception of agoraphobia and the treatment it receives—both of which are, as we have seen, presently tied up with that of Panic Disorder.
179 See Goldstein and Chambless’s article “A Reanalysis of Agoraphobia” for a detailed and relevant argument against using desensitization as a primary means of treating agoraphobia.
these places are specifically frightening to the agoraphobic, but rather because the agoraphobic is away from her accustomed safe places. Thus, when behavioral and exposure therapies treat panic in agoraphobia as something that occurs in specific situations and for specific reasons, they are failing to treat the source of the problem that originally opened the possibility for the occurrence of the panic attacks. This position is supported by another researcher, Gassner, who, though acknowledging that important and valuable findings have recently been made in the neurobiology of panic attacks, argues that “...these important findings have led some biological psychiatrists to treat the psychological determinants of such symptoms as mere epiphenomena” (Gassner 222). Gassner emphasizes that rigorous empirical studies have shown that early traumatic relationships can have a profound and lasting effect on the functioning of the nervous system as well as the mind. Contrary to the usual thrust of these studies, Gassner emphasizes that “[t]he important work of these neurobiologists and psychiatrists suggests why there may be some correlation between an individual suffering developmental trauma in childhood and subsequently demonstrating a biological vulnerability to panic disorder in adulthood” (Gassner 226, my emphasis). Thus, while she agrees with reports that claim that damage to the nervous system may prove to be the biological source of panic attacks, she criticizes the same sources for failing to acknowledge the psychological roots of this biological vulnerability. This criticism is particularly significant when we consider that in contrast to those with simple phobias, agoraphobics have been shown to have histories of serious interpersonal problems especially around issues of dependency, abandonment, and emotional tensions, and have often experienced instances of specific interpersonal crises in their lives.\(^{180}\) Maintaining that attention to

\(^{180}\) I will discuss issues commonly present in the interpersonal histories of agoraphobics more
this history of interpersonal tensions is quite important for future mental health, some researchers have actually argued that agoraphobic patients should not be treated by desensitization methods, which effectively numb them to their anxiety, but should rather be treated by methods that encourage them to experience their anxiety and to work on identifying and dealing with the problems underlying this anxiety (Goldstein and Chambless 56). In light of these points, it is arguable that even if dealing with panic attacks is an important element in treating agoraphobia, it is at best a shortsighted approach if the attention is merely on developing skills or habits that keep the panic attacks at bay, rather than on attempting to uncover and address the source and significance of the problems that may have led to the person’s vulnerability to having panic attacks in the first place.181

These criticisms regarding the overemphasis on a physiological approach to agoraphobia and the related under-emphasis on the developmental path leading to agoraphobia matches concerns of a more general nature that were originally voiced when the DSM-III was first being drafted. A significant community of psychiatrists and therapists argued at that time that although the proposed changes to the DSM would allow for a helpful common diagnostic schema for clinicians and investigators as well as

fully in section V below and also in ch. 5, sections I and II, and ch. 6, section II. With respect to differences in the interpersonal attitudes and histories between simple phobics and agoraphobics, see Evans and Liggett (1971), esp. pp. 152-53.

181 While speaking about research recommendations for mental disorders in general, the following point made by Goldfried and Wolfe is certainly relevant here:

The high relapse rates and mediocre recovery rates that are associated with tested therapies in which efficacy has been established for specific disorders indicate that symptom-focused treatments are necessary but not sufficient. Clinical trials should now routinely study life events, personality characteristics, as well as other theoretically derived variables that are presumed to be involved in the generation or maintenance of symptoms of the disorders under study (Goldfried and Wolfe 1012).
for large-scale mappings of disorders across varying communities, the new schema would not deal directly with the nature of the disorders described therein (Wilson 408). In response to these and related criticisms, the American Psychiatric Association set up a committee to deal with disagreements arising regarding the arrangement and purpose of the new DSM. This committee noted the significant difference between a classification system that one would use for research and data gathering purposes and a diagnostic manual that one would use for understanding psychiatric diagnoses and disorders; correspondingly, the committee proposed that the emerging DSM-III be used for research purposes, but not as the psychiatric community’s diagnostic or treatment manual (Wilson 406). This proposal was, effectively speaking, not taken up.\(^2\) As Wilson, a researcher looking at the influence of the DSM on American psychiatry, observes: “...the language of DSM-III is being applied in daily teaching and practice and necessarily takes on the look of something that, more and more, seems natural—not made by human hands” (Wilson 408, my emphasis). In other words, the DSM-III has shaped and continues to

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\(^2\) The drafters of the DSM-III argue in their defense that they were specifically aware of the possibility that the manual may be misused as “...the beginning, middle, and end of a psychiatric evaluation,” and specifically designed the DSM-III with a multiaxial system that would attempt to discourage this misuse (Spitzer and Williams 459-60). This multiaxial system gives clinicians five axes on which to base their diagnoses and make assessments about particular treatment recommendations. Presumably, the defense of the authors of the DSM-III rests on the fact that the last three axes involve questions concerning a patient’s “general medical condition,” “psychosocial and environmental problems,” and “global assessment of functioning”; yet, the DSM specifically says these last axes are not required for a diagnosis and also gives very little guidance on how to fill out these axes (See “Nonaxial Format” section under heading “Multiaxial Assessment” in DSM-IV-TR, Online resource, Accessed August 1, 2006). Frances and Egger confirm not only that “...young psychiatrists training in the DSM era are learning diagnostic classification as the primary way of thinking about patients, without understanding the patient and his or her presentation within a biopsychosocial context,” but also, and relatedly, that although the multiaxial system in the current DSM was designed to encourage clinicians to consider environmental and interpersonal factors, “[c]linicians have no embraced the multiaxial system because it is cumbersome. Axes II-V are often completed as a hasty afterthought and rarely used to formulate a comprehensive dimensional understanding of the patient’s illness” (Frances and Egger 164, my emphasis).
shape the way in which clinicians and researchers think about and treat mental disorders, not merely the way in which they conduct or disseminate research.

In becoming a treatment manual (at least by default if not by design) rather than merely a research manual, the DSM-III had the power to affect the very practice of psychiatric therapy, and to do so in a highly narrowing way. With this issue in mind, the committee addressing disagreements arising around the proposed changes to the DSM also complained that the task force in charge of the DSM revisions “...openly ignored ‘evidence’ garnered through years of clinical practice which did not constitute ‘proof’ according to the rigid canons of the scientific method but which constituted a kind of proof nonetheless” (Wilson 406). The ‘evidence’ the critics had in mind was that drawn from carefully guided and documented therapy sessions and interviews—’evidence’ that may not be quantifiable, but that has been gathered with the precision and care of highly trained professionals, and has often been done over the course of intensive and lengthy therapeutic relationships. By ignoring this form of evidence, the DSM would, the committee argued, offer too narrow of a view of the nature of mental disorders and the treatment they require. Though Wilson acknowledges the difficulty in determining whether the DSM-III was the cause of this type of narrowing or merely a reflection of an already extant leaning toward this type of narrowing, he maintains that “…there is little doubt that DSM-III heralded such a narrowing and signaled a fundamental shift in how psychiatric illness is conceived and how psychiatric residents are trained” (Wilson 408). We have seen examples of this already in the treatment of agoraphobia. Since the advent of the DSM-III, the conception and treatment of agoraphobia have shifted significantly toward the physiological, and away from considerations of etiology. Exposure and
cognitive behavioral therapies as well as medication have become the favored approaches toward treatment; and the nature of agoraphobia has been subsumed under that of panic Disorder in spite of the fact that, as we saw earlier, many have noted distinct developmental pathways or characteristics in panic disorder and agoraphobia.

We can gather these criticisms the more general complaint that since the publication of the DSM-III, the focus of psychiatry has contracted in such a way that it leaves out considerations essential to the whole person. Whereas the psychosocial approach—the standard approach taken to mental health in America prior to the DSM-III—attended to the “unfolding of a life over time—the development of the person and the place of his or her symptoms within this development,” Wilson argues that the contemporary ‘medical’ model of psychiatry taken up in the DSM-III narrowed the focus of psychiatry—and problematically so—by bringing about 1) a loss of the concept of the depth of mind in favor of what is ‘visible’ on the ‘surface’ of the patient; 2) a shrinkage in the amount of time that is both relevant to the diagnosis and also that is taken to make the diagnosis; and, 3) a diminishment in the range of what is considered to be clinically relevant for the diagnosis—e.g., ongoing character development, familial narratives, unconscious conflict, social factors, etc. (Wilson 408). Frances and Egger make a related criticism of the effect the DSM has had on psychological practice:

The result [of the DSM’s emphasis on “diagnostic classification as the primary way of thinking about patients”] is that patients become their symptoms and the descriptively defined syndromes become narrow containers limiting the clinician’s understanding of the patients’ illness and treatment needs (Frances and Egger 164, my emphasis).
These are issues that apply not only across the field of psychiatry in America, but that also arguably match up with the very problems we see in the treatment of agoraphobia—in 1) the overemphasis on treating panic attacks; 2) the increase in treating agoraphobia by means of medication or by short-term behavioral approaches rather than longer term psychotherapeutic methods; and, 3) the turning away from etiology when it comes to understanding agoraphobia in general and when it comes to working with individual agoraphobic patients. In addition to these problems, the current approach washes over differences in the sex of the agoraphobic—a narrowing of view that fails to offer an account for or a means of responding to the fact that there is a far higher prevalence of agoraphobia in females than in males. Thus, Wilson’s complaints—in which he is not alone by any means—point both generally to problems that exist currently within American psychiatry, but also provide a underlying frame of support and explanation for

183 See for instance, Goldfried and Wolfe’s article “Psychotherapy Practice and Research: Repairing a Strained Alliance.” Actively involved in both clinical research and therapeutic practice, Goldfried and Wolfe also criticize the current state of psychiatric research for its overemphasis on large scale, medical-model style trials as a means of determining how best to treat psychological disorders (Goldfried and Wolfe 1007). They argue that the current research methodology produces results that do not fully or, in certain ways, even minimally address the problems presented by patients who seek out therapy with a practicing clinician (Goldfried and Wolfe 1007-8). In support of this, they note that much contemporary research 1) is designed for use by other researchers rather than by clinicians treating patients; 2) selects test subjects who, unlike the typical clinical patient, present with a single disorder rather than with comorbid disorders; 3) focuses on symptom reduction rather than on the development course and ‘cause’ of the disorder; and, 4) generally emphasizes the application of a single form of therapy or the comparison of multiple singly-applied therapies (Goldfried and Wolfe 1009-10). They argue that given that most patients encountered in a clinical setting have a mixture of disorders, a clinician’s treatment response to these patients typically needs to—or at least should—reach beyond the recommendations provided by most research trials and by the DSM categories themselves. Moreover, they point to the high relapse and mediocre recovery rates associated with many research tested therapies as evidence that “...symptom-focused treatments,” which are the very ones emphasized by the current research trend and by the structure of the DSM itself, “...are necessary but not sufficient” (Goldfried and Wolfe 1012, my emphasis). For additional support for Wilson’s position, see Theodore Lidz’s “Letter to the Editor” in response to Wilson’s article.
some of the specific complaints arising from within the field of psychiatry regarding the
treatment and analysis of agoraphobia.

V. Phenomenological Criticisms of the Current Approach

Underlying the range of criticisms we have seen arising from within the field of
psychiatry, we can, by means of our phenomenological studies of space in chapters 2 and
3, posit a more general criticism of the current approaches to understanding and treating
agoraphobia: In spite of the fact that the current forms of agoraphobia treatment may
(and only may) help an agoraphobic to function in an ‘objectively’ larger sphere, they do
not address the reasons why and how the patient has contracted her spatial experience; in
other words, they do not address the significance of space in agoraphobia. Instead, the
current approach to agoraphobia treats the patient as if she were an object in a pregiven
world, rather than an existential subject at the core of an inhabited, lived world.
Correspondingly, space is treated as an indifferent container through which the
agoraphobic must learn to move, rather than a dilation—and, as for any person, a
revealing one—of the agoraphobic’s way of being-in-the-world. We can see especially
clear and revealing signs of these presumptions—and their problems—in the manner in
which the current treatment approaches for agoraphobia treat the body, anxiety, as well as
interpersonal relationships. Let us look at these in turn.

184 Focusing on the treatment of the body, anxiety, and other persons is significant not only
because these are prevalent issues in the overall treatment of agoraphobia, but also because, as we
saw in the previous two chapters, the body, mood, and our relations with others are arenas of
To begin, we should notice that the current treatment methods for agoraphobia generally fail to recognize that the way one has a body is meaningful. Exposure therapy, cognitive behavioral therapies, and medications all approach the body as if it were a machine that needs to be adjusted. They work on controlling certain physiological reactions the agoraphobic is having or on helping the agoraphobic to learn repeatable skills—such as regimented breathing, meditation, or habituation techniques—that will help her to avoid encountering these sensations in the first place. Yet, one’s bodily sensations and self-perceptions are not mere ‘objective’ measurements about which one can simply choose to have or not have a particular attitude; and, if one does cultivate such an attitude, it is not innocuous: it plays a role in forming a certain significance for that sensation. A racing pulse in the face of a particular situation is a meaningful bodily expression. One’s own fear with respect to that racing pulse is another meaningful expression. To train one’s physiology or one’s attitude through prepared methods is to write over those expressions, and fail to acknowledge their initial meaningfulness. It is to treat one’s body as a mere object in the world. Of course, one can do this—and we often do—but in doing so, one can fail to learn something about oneself and, as a result, not only miss an opportunity for growth, but can also cover over an area in which an important problem was beginning to surface. Specifically with respect to agoraphobia, we can be led by the common treatment methods to miss the significance of the agoraphobic’s avoidance of many of the most significant and common places in which human activities and exchanges occur. We may be led to think that she is well because she can move through those places again (or perhaps for the first time), but a closer
examination of her situation may reveal that she continues to move through those places in a contracted manner—perhaps very like the way an object can be said to be in such places.

This idea can be made clear through a preliminary consideration of certain ways in which the treated agoraphobic’s world can still be considered to be contracted even if she has been ‘successfully’ treated by the current methods. As we have seen, exposure and cognitive behavioral therapies train people to be able to go into and be in previously avoided places, and count this ability as a treatment success. Yet, even though the agoraphobic may be able to successfully travel from home to work and in doing so cross or be present in a variety of previously uninhabitable places, she may be doing so only by using a complex set of behavioral or cognitive tools. For example, during the entire passage from home to work, the agoraphobic may be using breathing exercises, repeating meditative calming mantras, etc. In this way, the agoraphobic may make it to a destination that was once impossible for her to reach, but doing so has not meant that the agoraphobic was actively present in the places that she crossed. The agoraphobic’s experience of her surroundings—of the space she inhabits—is, thus, in an existential way just as contracted as it was prior to the ‘successful’ treatment. The agoraphobic continues to remain wrapped up in her own private and shrunken experience rather than being able to engage freely or spontaneously in the surrounding world.

Leder’s analyses of the body and our regular ‘experience’ of its absentness serve to support this claim that the treated agoraphobic may continue to live in a contracted
world. He argues that not only are the body’s powers of perception and activity essential ways in which we have a world, but also that the body’s absence from our attention is a key feature in our having of a world. In other words, an essential part of our lived bodily experience is one of not being aware of ourselves and of our bodies. We do not typically feel or feel in control of our internal organs. We are, for instance, taken over by sleep and fatigue; our bodies grow, shrink, and change without our trying and sometimes against our wishes; we usually do not notice our eyes when we are looking at something; we generally do not notice the shape our hand takes when grabbing an instrument; our digestion occurs without our instruction; and so forth. Leder argues that these absences are essential if we are to be able to be engaged in our activities and in the world (Leder 12-13, 25-27, 31-32, 34-35).

Here Leder is making a point about the body similar to that which Heidegger makes about the handiness of things—the thing, or the body, falls away from notice when one is engaged in the activity or the ‘for-the-sake-of’ that most essentially is the thing or the body; to be so engaged, the thing or the body must itself be absent as an ‘objective presence’.187

When something disturbs these absences, we are held back from the world. In the case of our body, if our eyes are tired, we cannot read easily; a stomach ache can force us

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185 We have already discussed some key features of Leder’s work in ch. 1, sec. II.6 (and in footnotes throughout that chapter). For further discussion of the importance of the absence of the body in our daily experience, see ch. 6, sec. 1.

186 In chapter 3, we saw a similar point in our discussion of Merleau-Ponty’s analysis of the phantom limb and of the ‘knowledge’ we have of our body. There we saw that it is typically only in moments of disability or discomfort that we notice the body, and this noticing is typically paired with an inability to perform the action we had intended or wished to perform.

187 In ch. 2, sec. I.1, we made this point with respect to the way that we engage with things. When a thing is, as Heidegger describes, ready-to-hand for us, ‘it’ does not come the fore; we are sunk into the activity of the thing. It is only when something goes wrong with this engaged way of being ‘in’ the thing that we come to notice it as an objective presence, as something present-to-hand.
to stop walking; even nervousness over a passing pain in our stomach can lead us to cease being engaged in a prior activity. In each of these examples, the body or some aspect of the body loses its absent character and itself becomes the object of attention. The presence of the body becomes a distraction from the previous engagement we had with and in an activity and, more generally, the world. Leder argues that we see this especially in the experience of disease, which in general gives rise to the experience of alienation from the surrounding world. The increased—and typically unpleasant—focus on one’s body that usually accompanies disease causes the previously engaging world of the patient to “...ech[o] as though from an inaccessible distance”(Leder 81). Said more fully, in the face of pain or similarly absorbing experiences, we become less able to participate in world beyond ourselves insofar as these lead to, as Leder describes, “...a disruption of intentional links and a spatiotemporal constriction” (Leder 80, my emphasis). This experience is perhaps quite amplified in the acute anxiety or a panic attack that an agoraphobic may experience: In a moment, the body becomes forcefully present and the world is lost in the distance. The entire body pulses with a racing heart, sweat covers one’s skin and clothes, cold or heat and nausea overcome the whole body. These dominating sensations effectively turn the agoraphobic’s world inward upon itself, since, as Leder observes, in the experience of pain, “[w]e are no longer dispersed out there in the world, but suddenly congeal right here” (Leder 75). The world of the agoraphobic in her fear becomes condensed to the site of her objective body; she cannot see, feel, or go beyond ‘herself’.

In light of this debilitating contraction, it does seem important to try to help the agoraphobic get rid of these bouts of acute anxiety or panic. In this sense, the current
treatment techniques appear to be aiming at the right end: to help the agoraphobic have a larger world by giving her techniques that will help her to control her bodily sensations and habits so that they do not overwhelm and thereby remove her from the world. Yet even though this induced form of engagement with the body may be less contractive than the experience of being completely overwhelmed by the body in a panic attack or a debilitating wave of anxiety, these techniques continue to keep the agoraphobic wrapped up in her body in such a way that she is sunk in her ‘here’ rather than being engaged in what is ‘there’. The experiential absence of body that Leder argues is essential to our daily lived experience is specifically thwarted by treatment techniques that demand a focus on the particular rhythms of one’s body. An agoraphobic who must focus on controlling her breathing, on repeating certain calming mantras, on checking her initial interpretations of bodily sensations, and so forth is necessarily wrapped up with the experience of her body and, as such, is isolated from her world.

To count as ‘cured’ an agoraphobic who can successfully travel through the world by using such techniques is to fail to recognize the lived experience of being-in-the-world, of our spatiality. As we saw in chapters 2 and 3, we are not isolated I-heres that simply need to orient ourselves with respect to independent there-things; we dwell in the things of our world. Treatments by desensitization, by habituation, or medication effectively maintain a barrier between the agoraphobic and the things of the world; they treat her as an object amidst other objects, and thereby fail to help her to be able to dwell in the world—and, even more so, these treatments set up certain barriers that prohibit this very ability. As a result, even if by means of the current treatment methods an agoraphobic patient may appear to be proceeding through the world in a normal manner,
a phenomenological consideration of her situation will reveal that she continues to experience the world as contracted, as something with which she is not yet fully communicating.

A similar and certainly related observation can be made with respect to the treatment of anxiety by the current approach to agoraphobia. As we have already seen, exposure therapies, cognitive behavioral techniques, and medication typically focus on diminishing the physiological symptoms that accompany anxiety and on changing the attitudes that a person can take up toward these physiological symptoms so as to reduce or eliminate the agoraphobic’s anxiety. In these treatments, anxiety becomes something akin to a bodily reaction that one needs to learn to control.\textsuperscript{188} To this end, anxiety, like one’s blood pressure or white blood cell count, is treated as a measurable characteristic of a person: Inventories are given at intervals throughout the course of a treatment or research study to assess the ‘level’ of a person’s anxiety; questions in these inventories ask the patient to rate on a numerical scale how much anxiety she feels, how often she feels this anxiety, how long the anxiety lasts, and so forth; the numbers tell the therapist how severe the case is and whether or not the patient is improving; and therapies can be adjusted accordingly.\textsuperscript{189} This general approach to assessing and treating anxiety fixes

\textsuperscript{188} Freund (1990) offers a brief review (and ultimately a criticism) of physiologically-based accounts of emotion (See esp. pp. 453-55, 166-70).
\textsuperscript{189} W.J.P.J. van Hout et al. (2001) discuss a variety of these numeric inventories and their role in the assessment, the treatment, and the study of agoraphobia. Their report is itself focused on the presentation of a new quantitative assessment test for agoraphobia, and, thus, draws out many of the issues around the need for such tests to offer translatable and, ultimately, generic results around a focused and predetermined set of issues with a fixed range of answers; as such, their new test—in spite of being a “self-assessment” test—cannot help being shaped by current clinical theories and concerns, and, thus, will, like other texts, necessarily affect a patient’s ‘personal’ self-assessment.
anxiety as a manipulable, quantifiable, relatively generic, and isolatable symptom that can, effectively speaking, be excised from the patient.

To focus in this way on the outward and quantifiable manifestations of the agoraphobic’s anxiety will necessarily leave her in a contracted existential state. One might have gathered this immediately from the rather ‘normal’ clinical observation of two researchers that “[a]goraphobia is rarely an isolated set of fears which exists in an otherwise well-functioning person” (Kleiner and Marshall 313). Moreover, it is not simply that the current approach to anxiety overlooks other emotional and practical aspects of the agoraphobic’s life—although it certainly does this—it is also and more significantly the case that this ‘medical’ model of anxiety ignores the existential significance and stance of emotion itself and, specifically here, of anxiety.\(^{190}\) It fails to address the world-shaping significance of emotion, and the significant gestures made by the person who takes up such an emotional stance on her world. Before considering the continued contraction of agoraphobics treated for what we might call ‘circumscribed anxiety’, let us return briefly to consider this world-shaping character of emotion.

We are always involved in approaching the world through some mood. As we saw in chapter 2, any particular mood changes what counts as possible for us, and in

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\(^{190}\) We can see this failing in one of the common assessment methods currently used. In a study by Lewis et al. (1990), a particular test—the Minnesota Multiphasic Personality Inventory (MMPI) is examined for its ability to distinguish Panic Disorder patients from other psychiatric outpatients, and also patients with Panic Disorder With Agoraphobia from those Without Agoraphobia. While the results show “some support” for the MMPI’s ability to distinguish Panic Disorder patients from a general population of psychiatric patients, the study also admits to certain ambiguities that call for further research into “the reliability of the diagnostic interview” for this purpose. Moreover, the test was unable to distinguish differences in the “psychopathology” of Panic Disorder With and Without Agoraphobia—a fact that, given our study, brings into question the ‘power’ and precision of this numerical test for assessing and diagnosing agoraphobia (let alone other disorders). It seems, then, that this commonly used tool for assessing (among other factors) a patient’s anxiety cannot in fact register the particular significances of the anxieties of the agoraphobic versus that of the panic disorder patient.
doing so shapes the nature and reach of our world. Our world collapses, for instance, when we are depressed; it expands when we are joyous (Leder 136). A mood can do this insofar as it changes a person’s perceptual and practical realities. Appealing to our analysis of orientation in chapter 3, we might say that a mood opens us up onto a particular spatial level. This claim is arguably supported by recent theories of emotion that have begun to acknowledge emotions as wrapped up with physiological states and also woven into cognitive and perceptual functions (Hallam 316; Leder 55-6, 136-8). As Leder writes:

> On the one hand, [emotions] are an aspect of our ecstatic relatedness to world. ... Moreover, emotion inaugurates our motor projects, propelling us toward desired goals. ... Yet, while guiding our sensorimotor engagements, emotionality is also rooted in the visceral. ... That is, our visceral states help shape our perceptions and desires” (Leder 136).

As soon as we acknowledge emotions or moods as constructive in our cognitive and perceptual experience and in the experience of our physiological states, as well as being reflections of our most “visceral” needs, they must be treated as something more than mere symptoms for elimination. They must be acknowledged as significant and constructive gestures that ought to be investigated and addressed as constitutive elements in a person’s life and the problems therein.

Criticizing the current trend toward identifying and simply eliminating certain ‘fixed’ emotional ‘symptoms’ such as anxiety, one agoraphobia researcher makes a similar claim, arguing that when “…classifying affective neuroses we may expect a more fruitful return from studying the way in which patients actively construct the world and
strive to act towards it, rather than focus on static mental contents” (Hallam 316, my emphasis). There may, for instance, be something more to glean from an agoraphobic’s experience of and personal ‘relationship’ to anxiety than the current treatment approaches suggest or even allow. By considering anxiety to be something that actively shapes and has come to shape an agoraphobic’s world, one is more likely to realize that simply taking anxiety out of the picture is not going to be sufficient treatment. Anxiety is a structural element of the agoraphobic’s world; it has a history, a functional role that it fulfills. It is not only the agoraphobic who depends on the functionality of her anxiety. Others close to the agoraphobic have either been productive in the development of her anxiety or have adjusted themselves to it, or both; they know the agoraphobic in her anxious way of being, and live with her in that way of being. To treat anxiety as if it were a removable trait—or, perhaps in line with the current medical emphasis, as if it were a contained and extractable tumor—is to ignore the existential pervasiveness of the agoraphobic’s anxiety, is to ignore its world shaping character. Just as one would not—or should not—remove a wall from a structure if it is a load bearing wall, one should not, according to this argument, remove a mood (at least not without careful consideration of the particularities of the situation) insofar as mood is one of the essential ‘structural’ features of our way of having a world, and of finding and situating ourselves within a spatial level.

There is reason to think, in fact, that the treatment failures we have seen for agoraphobia arise from current tendency to treat anxiety in agoraphobia as if it were a physiological reaction or, at best, a symptomatic response limited to objectively present and readily identifiable situations, and also to hold that anxiety can, therefore, be ‘eliminated’
without attention to its existential origins or functional role. Supporting this position, Evans and Liggett, two agoraphobia researchers who question the efficacy and assumptions of current treatment approaches, suggest that the high relapse rates for agoraphobics undergoing behavioral treatments are likely a result of the fact that these treatments are focused on acclimating an agoraphobic to avoided external situations, and, correspondingly, on diminishing the agoraphobic’s outward experience of anxiety in the face of these situations (Evans and Liggett (1971)). They argue that this approach does not touch the underlying reasons for the agoraphobic’s avoidance behaviors and anxiety. More specifically, they argue that such treatments overlook the fact that the agoraphobic’s avoidance behaviors are based on much more deeply seated anxieties regarding fears of abandonment, personal loss, and related interpersonal issues. Noting that agoraphobics are persons dealing with “deep unresolved dependency needs and conflicts...rooted in [their] very earliest experiences,” Evans and Liggett insist that the agoraphobic’s fears are not explicit and obviously grounded in a particular event, person, or object, but are rather “…diffuse and intangible, and much more than the obvious and visible fears of the front doorstep or the town centre. There will be additionally a whole complex of fears concerned with loneliness and rejection which will be much less obvious, explicit and accessible” (Evans and Liggett 150). Hallam, another researcher challenging current approaches to agoraphobic, agrees that it is problematic to contain the treatment of the agoraphobic’s anxiety to public venues and situations. He argues that:

...the major sources of anxiety in the agoraphobic are not, in fact, to be found in the public environment, but that the cues associated with public

191 I will discuss issues of emotional abandonment and interpersonal dependency in agoraphobia more fully ch. 5, sections I and II, and ch. 6, sec. I.
places (crowds, busy noisy streets, unfamiliar surroundings, waiting in queues, etc.) which are normally physiologically (and sometimes emotionally) arousing, can exacerbate other sources of anxiety and produce panic attacks (Hallam 317, my emphasis).

Hallam supports this claim in part by noting that if agoraphobia were in fact a direct response to “discrete features of the public environment,” it would be difficult to account for the ability of a “safe companion” to temporarily eradicate such tensions in the agoraphobic (Hallam 317). 192

These observations about the ‘depth’ of the agoraphobic’s anxiety support the argument that it is too superficial to treat anxiety and the accompanying agoraphobic avoidance behaviors as something that one needs to ‘get over’ or ‘get used to’—whether by means of medication, cognitive behavioral training, or exposure training. Treating anxiety as a removable or excisable symptom fails to acknowledge that an emotion is an attitude toward the world—an attitude that gives rise to a particular world. Such an approach will leave a problematic underlying existential structure in place that may have ceased to show itself in the form of measurable bouts of anxiety or in the form of a set of places that a person will not enter, but that will undoubtedly continue to exist in the shape of contracted possibilities for the agoraphobic, in the shape of a contracted world.

Rather than eliminating or mitigating the effects of the agoraphobic’s emotions, then, it seems essential that the agoraphobic be helped to experience and understand the underlying sources of her emotions, and, with this, the ‘sense’ behind her construction of

192 The ability of a “safe companion” to expand the agoraphobic’s range of possibilities speaks also to the interpersonal character of the disorder—an issue that I will discuss more fully below. As Carter et al. argue, this ‘feature’ of the agoraphobic’s experience also challenges accounts that claim that the panic experiences of an agoraphobic are ‘purely’ physiological in origin (Carter et al. 161-62).
a contracted world. The need for this ‘education’ regarding the significance of one’s own fears and emotions is of particular import insofar as agoraphobics generally have more than an average degree of trouble making accurate connections between emotional responses and the events arousing these emotions (Chambless and Goldstein 52). The most common treatment methods unfortunately would seem only to strengthen this emotional ‘misplacement’ insofar as they continue to turn the agoraphobic’s attention toward the immediate triggers of her anxiety (e.g., public places, large buildings with few exits, crowds of unknown people, etc., or even toward simple physiological experiences such as an elevated heart rate, shallow breathing, and so forth)—triggers that by no means touch upon or obviously reveal the root of the agoraphobic’s existential problem.

The contraction that follows if one does not address emotions as world-shaping can be seen quite clearly in the agoraphobic’s relations with others. Following treatment by the current methods, agoraphobics often experience serious personal problems in their lives. One widely cited study, for instance, found that “disharmony” in marital relationships increased in 60% of couples in the six months following treatment (McCarthy and Shean 478, citing Milton and Hafner (1979)). This same study reported that couples in which this “disharmony” had increased were also the couples in which symptom relapse was greatest (McCarthy and Shean 478). Another study also reported a

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193 Russon argues in *Human Experience* that our neurotic problems—problems that he argues we all have (though, to be sure, to varying degrees)—and the emotions and actions that arise within and through these are the very ones that we will tend to have the most difficulty seeing and changing. He writes: “One’s problems are rooted in the conflict inherent to the most deeply seated habits of making sense that found one’s personality. These habits operate at a level, as it were, behind our self-conscious reflection” (Russon, *Human Experience* 133). And, thus, for this reason (as well as for other complementary existential structures), “…it is not at all surprising that successful therapy typically involves turning to another for guidance in what is really a project of self-transcendence” (Russon, *Human Experience* 137). Therapy for the agoraphobic would, accordingly, call for an education guided by the assistance of others into the currently hidden significance and sources of her emotions.
high rate of acute interpersonal crises in agoraphobics after they had “successfully” been treated by exposure therapies (Hand and Lamontagne 406). These results suggest that the current treatments leave an important dimension of the agoraphobic untouched—namely, the interpersonal dimension—and that they may, in fact, problematically remove certain behaviors to which the agoraphobic and her companions have become habituated and on which they rely.

In addition to increasing stress or conflict within the agoraphobic’s already established relationships, these common treatments may leave the agoraphobic at a loss for how to make (or even without the desire to make) new relationships now that she is ostensibly able to go to places and do things just as others do them. One psychologist commented, for example, on the myopic results of a course of exposure therapy treatment given to a male agoraphobic:

The young man had a phobia about telephones and travelling. About a year of desensitisation enabled him to travel and use the telephone. [Yet,] he commented on the utter pointlessness of such an achievement since he had no one to ring up and no one to travel to. He had formed no relationships with his fellows (Winter 115).

Thus, even if exposure or cognitive behavioral techniques or the use of medication has reduced the agoraphobic’s experience of anxiety or other emotional ‘agitations’, this ‘improvement’ tends to be limited to the anxiety or emotions that arise in situations related to her most obvious, outwardly agoraphobic symptoms. They do not tend to help her develop her abilities to confront and work through emotional tensions or deficiencies within her relations with other persons. This omission reflects what, as we have already
seen, seems to be an underlying assumption of the contemporary approach to understanding agoraphobia and mental illness in general—namely, that the ‘mental’ patient is an isolated unit that can be treated on her own just as one could treat a person presenting with a more obvious physiologically contained illness.194

This approach to interpersonal relationships goes against what we learned about the ‘individual’ in chapters 2 and 3. There we saw that we are not self-contained individuals running up against other self-contained individuals in some pregiven, neutral container known as space or the world. Instead, our way of being-in-the-world is a

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194 Fokias and Tyler (1995) support the claim that historically agoraphobia research has focused primarily on the biological and cognitive aspects of the disease, and, correspondingly, overlooked its social dimensions and etiology. Contrary to this tendency, there are many medical and alternative medicine practitioners who question the assumption that a person is an isolatable unit for treatment even in those ailments that are more directly connected to the ‘physical’ body. Eastern medicine practitioners, for instance, maintain that the body functions in conjunction with vital energy (Qi) that flows up and down the body and through its meridians, and that can be changed and affected through one’s interactions with other people, through one’s spiritual, emotional, and mental states, and through one’s life situation in general as well as through the fitness of the body itself; disease results from imbalances in the energy in one’s system. Chan et al. (2001) present a comprehensive description of the connection among the body, mind, and spirit in Eastern medical practices. See also the collection of essays edited by Sheikh and Sheikh that discuss the similarities and differences between eastern and western approaches to the body, to health, and to medicine. Even in North America, there is a school of medicine—Osteopathic medicine—approved by the American Medical Association that differs on this very issue from the predominant school—i.e., that which issues the degree of M.D. Osteopathy is based on the notion that one’s body is part of a system of health—a system that includes one’s habits, one’s emotional situation, one’s engagements with others—and that acknowledges one’s body as ‘historical’—i.e., as having a bodily-based memory and also as striving for and capable of health. For more detailed discussions of the nature of osteopathic medicine, see the website of the American Academy of Osteopathy (www.academyofosteopathy.org, Accessed August 1, 2006) and also sections on “Osteopathy and Medicine,” “Homeostasis and the Systems Theory,” and “The Holistic Approach” in Discover Osteopathy. See Charles Longino’s article “Beyond the Body” and Si-Pui Pearl Wong Ph.D. thesis “Comparative Anatomy of the Biomedical Model and Family Systems: A New Way of Thinking And it Convergence to Taoism” on the need for and feasibility of integrating ‘alternative’ and Eastern views of the body and health into the Western ‘medical’ model. In their book The Embodied Mind, Varela et al. provide a helpful example of how Eastern and Western philosophies can be fruitfully brought together to examine and explain the human experience and situation—in this case, the human mind and human thought.
dynamic process that involves an exchange with other people and our surroundings.¹⁹⁵

We live an interpersonal existence, and the breadth and character of our world is intertwined with the community of those with whom we engage. Even if one holds off on identifying the interpersonal dynamics of the agoraphobic as the causative element in the development of agoraphobia, it remains the case that agoraphobia becomes a significant part of the relational dynamic of the agoraphobic’s interactions and partnerships with other people.¹⁹⁶ Any treatment that does not address this aspect of agoraphobia will, in the best case scenario, leave an area of vulnerability in which the ‘recovering’ agoraphobic can easily falter if she does not happen to have the insight or the insight of others to help repair or change the structures of her close relationships. And, as the nature of her problem suggests, this resource is something she is likely to be missing and something she needs help developing.

In partial acknowledgement of the problems that seem to arise quite clearly from treating the agoraphobic as an isolatable unit, some research has in fact been done on pairing current agoraphobia therapies with communication therapy that focuses specifically on the interpersonal issues arising immediately around the symptomatic features of agoraphobia.¹⁹⁷ One study, for instance, looked at the difference between

¹⁹⁵ For an additional discussion of the intersubjective character of our way of being-in-the-world, and the contrast of this with the conception of the Cartesian subject, see R.D. Laing,’s The Divided Self, chapter 1. Laing’s discussion is particularly helpful here insofar as he specifically takes up the nature of our way of being-in-the-world in the context of ‘mental disorders’.

¹⁹⁶ McCarthy and Shean acknowledge that studies have provided conflicting and methodologically inconsistent positions on the role of marital problems in the development, maintenance, and treatment of agoraphobia. Though they are not able from their own studies to posit a cause and effect structure for marital stress and agoraphobia onset, McCarthy and Shean measured levels of marital stress in agoraphobics that are consistent with findings of other studies that report higher levels of marital conflict in agoraphobics than in the general population (McCarthy and Shean 484).

¹⁹⁷ It is, however, still quite uncommon to find agoraphobics receiving any form of treatment that involves other persons in their lives. (Support for this claim is found partially in the relatively...
following a four-week course of exposure therapy with either communication therapy or relaxation therapy (Arnow et al. (1985)). In the group receiving communication therapy, therapists helped the agoraphobics and their partners to discuss, identify, and change patterns of partner interaction that may have been inhibiting the diminishment of agoraphobic behaviors, and more generally to develop partner interactions that would support the agoraphobic’s overall improvement (Arnow et al. 464). Patients who received this communication therapy showed a significantly greater improvement in agoraphobic avoidance behaviors as well as in their general attitudes about their situation than those patients and their partners who received relaxation therapy (Arnow et al. 463).198 While the communication therapy offered in this study was largely restricted to issues directly related to agoraphobic avoidance issues, the study’s results demonstrate that improving a couple’s ability to discuss issues—even if limited solely to the symptomatic problem—will positively affect the agoraphobic patient’s ability to maintain and enhance improvements in avoidance behaviors following exposure therapy. Still, although in 8-month follow-up reports for both groups, the communication group still

scant number of studies focusing on or recommending couples-based therapy for agoraphobia (See reviews on this topic, for example, by Emmelkamp and Gerlsma (1994) and Byrne et al. (2004).) and also in the absence of couples-based therapy on lists of recommended treatment options for agoraphobia (See, for instance, Bandelow and Rüther (2004), Bandelow et al. (1995), and RANZCP (2003)). Given our analysis of the motivations behind the revisions to the DSM, it seems a likely reason for this omission is that bringing another person or persons into the treatment plan is not only more costly, it also complicates the diagnosis as well as treatment protocols and treatment outcome assessments. Perhaps even more fundamentally, it would belie the underlying assumption of the medical model that the patient is an isolated, treatable unit. So, even if problems seem to arise at an interpersonal level when an agoraphobic is treated singly, it may continue to be compelling given the weight behind the current view of mental health to look for new ways to treat a person, rather than to look for ways to integrate others into the therapy.198 The patients receiving communication therapy did report higher numbers of panic attacks than the relaxation group patients, but the researchers noted that this accords with the fact that the communication group patients pursued a significantly higher number of out-of-the-home excursions and, thereby, placed themselves more regularly in situations that were likely to induce panic attacks (Arnow et al. 464). Here we see evidence that a change in communication patterns is connected to a change in agoraphobic behaviors.
maintained a greater level of improvement than the relaxation group, both groups showed a trend toward relapse in agoraphobic behaviors (Arnow et al. 462). This trend suggests that the step toward recognizing and treating the interpersonal nature of the agoraphobic, while moving in the right direction, is not yet sufficient; it bolsters the position that in general persons with agoraphobia cannot show substantial or stable improvement if underlying interpersonal issues are not addressed.199

Hand and Lamontagne offer illustrative examples of the interpersonal problems that arise when agoraphobics begin to be treated by behaviorally restricted and, thus, interpersonally inadequate means. In one case, a patient had in fact approached his initial therapist with a desire for psychoanalysis for “personality problems,” but had instead been referred to Hand and Lamontagne for behavior therapy pertaining to his agoraphobia and travelling-phobia; after being successfully treated for his phobic behaviors, the patient “...concomitantly became agitated, depressed, sleepless, and jealous towards his wife” (Hand and Lamontagne 407). In addition to threatening to kill his therapist and himself because he did not know how to cope with his jealousy, he also accused his wife of persistently trying to “destroy his personality” (Hand and Lamontagne 407). In another case, an agoraphobic woman who had described her marriage as good became sexually non-responsive toward her husband after successful phobic behavior treatment. She did not desire any further exposure treatment, but did request antidepressants. She continued

199 This position is further bolstered by results in a study by Daiuto et al. that suggest that more so even than “spouse-assisted” exposure therapy, there may be successful treatment results from therapies that “target the marital relationship,” especially around issues such as “poor emotional expressiveness and problem-solving skills, power imbalances...as well as...how the partners communicate about the agoraphobia, individual lifestyle and relationship changes that may need occur once the agoraphobia partner begins to improve” (Daiuto et al. 680-82). See also Craske et al. (1989) and Byrne et al. (2004) on the increase in long-term treatment success rates when partners of agoraphobic patients are directly included in the treatment methods.
to be free of her phobic behaviors, but remained sexually non-responsive in her relationship with her husband. In spite of this, she continued to describe her marriage as good (Hand and Lamontagne 407). In yet another case, a man who had been agoraphobic for 26 years eventually fought for his wife’s “permission” to try exposure therapy. The wife was resistant to this and other forms of treatment, because she felt the family had adapted to her husband’s phobia, and she did not want her husband to risk the possibility for treatment failure—a failure that she thought could lead him to suicide. In this marriage, the wife was felt by the husband to be excessively dominant, and she also refused to engage in sexual intercourse with him; the husband felt indebted to his wife for all the efforts she had taken to care for him and the family when he was not able. When the exposure treatments were successful for this man, he became very happy (and at this point completely symptom free), while his wife became hostile toward him and criticized him for not improving earlier if it was in fact as easy as this treatment suggested. At this point, the wife interfered with the husband’s “homework” therapy exercises, demanded of him that he make up for all of the housework he had previously failed to be able to do when he was “sick,” and discouraged any further treatment. Three months after the successful behavior therapy sessions, this patient reported some degree of relapse in his agoraphobia and also felt resentful toward his wife who was also refusing to enter into marriage therapy. At six months, this patient had almost completely relapsed, and his wife discouraged any further contact with the study (Hand and Lamontagne 408). In each of these three examples, we see signs of interpersonal tensions arising in conjunction with improvements in agoraphobic avoidance behaviors. In the first case, the agoraphobic showed signs of feeling threatened, betrayed, or infringed upon by his
previously ‘safe’ partners; in the second, the agoraphobic shut down a previously functioning and significant avenue of interpersonal intimacy; and, in the third, the agoraphobic’s improvement led to explicit aggression on the part of the ‘safe’ partner that eventually leads to the patient’s return to his previous phobic behaviors. Though Hand and Lamontagne do not themselves identify on the basis of their study any consistent pattern of interpersonal interaction in agoraphobic partnerships, their research offers potent and consistent examples of the emergence of new struggles in the face of improvement in agoraphobic avoidance behaviors—vivid and representative examples that further support the claim that agoraphobia is intertwined with interpersonal problems.200

This conclusion is also confirmed by numerous studies that have documented agoraphobics as tending to have histories of serious interpersonal conflict. One of the most commonly noted interpersonal issues arising for agoraphobics is that of dependence on others.201 Goldstein and Chambless, for instance, have observed that agoraphobic clients conceive of themselves as incapable of functioning independently (Chambless and Goldstein 52). Similarly, Evans and Liggett have suggested that agoraphobics are people who are overly dependent on others, and who are preoccupied with being abandoned, rejected or left alone (Evans and Liggett 150; see also Byrne et al. (2004) on this point, esp. p. 107). Complicating the issue, Gassner has observed that at the same time that agoraphobics typically rely heavily on others to support them in even the simplest of emotional or practical activities, they also often tend to feel “in danger of becoming self-

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200 This claim appears to be supported by another study to which Hand and Lamontagne refer in which almost 50% of agoraphobics “spontaneously” wanted to discuss family problems during the course of a series of exposure treatments (Hand and Lamontagne 409).
201 This role of dependence in agoraphobia will be discussed in greater detail in chapters 5 and 6.
sacrificing and emotionally enslaved by anyone who offers them care or the freedom to be dependent” (Gassner 225). Thus, agoraphobics tend to both rely on and reject an excessive level of support from their surrounding partners. This conflict is especially apparent during times of change or decision. As Gassner has observed: “At such times, as soon as they move toward greater autonomy, they feel frightened by fears of abandonment. As soon as they reach for a helpful interpersonal connection, they feel controlled, trapped, and suffocated” (Gassner 227). Thus, whether the agoraphobic is frightened of being too dependent on others or of being too independent from others (or usually some combination of these), she tends to be in relationships in which bonds with others are problematically in question. Her world is constricted by the constraints of these interpersonal potentialities, by the reach of those issues she and her companions tend to and are able to engage.202

Other common issues that often arise within the agoraphobic’s relationships and that feed into this contraction include a lack of assertiveness on the part of the agoraphobic (Kleiner and Marshall 313-14; Chambless and Goldstein 52); sexual dysfunction (Kleiner and Marshall 313-14); difficulties identifying the ‘causative’ source of emotions (Chambless and Goldstein 52); problems adjusting to changes and life

202 In Human Experience, Russon makes an important and related claim about the way that our interpersonal relations shape our world. Russon argues that family narratives—i.e., ways of behaving, reacting, thinking about the world, etc. that are ‘given’ to us by our family and that are largely unique to our family—define our experiences of ourselves and the world around us as much as our original ‘physical’ determinacies; for, he argues that these narratives play an integral part in determining what we do and do not experience as possible for ourselves and also in determining how we understand and treat things in the world. Stated more strongly, we are brought into our way of noticing things—into our very way of perceiving—by our families. In light of these observations, objects and events cannot be understood to have predetermined and set identities—identities that could with effort be ‘correctly’ identified. To the contrary, Russon claims that objects and events and possibilities exist for us in light of our developed narratives of what those things mean and how they are to be approached. Russon’s full argument can be found in his chapter “Others” in Human Experience; see esp. pp. 65-68.
transitions (Goldstein and Chambless 53-54; Frances and Dunn 437); and, generally,
difficulties dealing with “strong affects” as well as with sexual and other excitements
(Gassner 224). If these ‘deeper’ emotional issues are avoided over the course of an
agoraphobic’s treatment, they will continue to shape the agoraphobic’s life. This is
bound to lead to the return of agoraphobic behaviors insofar as we can reasonably argue
that these behaviors are a way of masking or avoiding these deeper issues. Evans and
Liggett make a similar conclusion, arguing for a “…dynamic view of agoraphobia as a
symptomatic condition, in which the agoraphobic features provide a means of defence
against the terror of deeper anxieties concerning abandonment and rejection” (Evans and
Liggett 152-53). They argue that an effective means of treatment must involve allowing
the agoraphobic to actively experience—rather than superficially eliminate—her fears,
and to develop a recognition in the agoraphobic that their source is rooted in interpersonal
issues rather than in fixed features of her environment (Evans and Liggett 153).203 This
position supports the claim that although agoraphobia may look as though its underlying
disturbance is something arising from ‘outside’ of the agoraphobia—i.e., something ‘out
there’ in the environment—it is in fact something that arises through and from within the
agoraphobic. She is frightened of a world the shape of which she has had an existential
role in molding. And, any treatment that does not address her agoraphobia as being

203 Evans and Liggett admit that a problem with this proposal is the fact that the agoraphobic
person tends to find the therapeutic venue challenging insofar as it involves the very issues of
interpersonal trust and engagement that are problematic for her. They write, “It is the nature of
the agoraphobic’s disorder that [she] must constantly test, challenge, and assault the relationship,
waiting for it to collapse into the expected experience of loss and despair” (Evans and Liggett
153). Yet, in spite of the collapse that may occur if the therapeutic relationship becomes deeper
by means of addressing the deeper existential structures behind the agoraphobic’s anxiety, these
more ‘invasive’ issues seem essential to address if one is to avoid the superficial, and thus
regularly inadequate, treatment that is offered by the prevalent approaches to agoraphobia. I will
address this issue more thoroughly in chapters 5 and 6.

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shaped by and, in turn, shaping the nature of her interpersonal world will leave her in a fractured world much the same as the one in which she entered treatment.

VI. Conclusion

In general, then, in spite of the fact that the current diagnostic approach distinguishes agoraphobia from simple phobias by noting that agoraphobia is not a reaction to specific exogenous stimuli, the current treatment approaches for agoraphobia persist in acting at an existential level as if agoraphobia is somehow rooted in a conflict with external stimuli. These treatments attempt to find ways to decrease the severity of one’s bodily reactions and one’s anxiety in the face of particular types of places or situations. Even if treatments are less situational than this, and offer methods or medications that allow the agoraphobic to gain a greater ease anywhere, these approaches still treat the agoraphobic as if she were an object being inserted into a pregiven spatial container to which some form of habituation or acclimation is required. At best, then, the current approach to agoraphobia may acknowledge space as important in the disorder, but in doing so reduces it to an objective field that one encounters ‘out there’ in the ‘objective’ world.

The attention that current conception of agoraphobia may give to space is itself problematic insofar as it presumes that the agoraphobic is an isolated entity who is failing to engage with a surrounding world that is initially and always separate from her. Our previous chapters demonstrated the error in considering space as a trait of an independent
world into which we are inserted. We saw that space is not some ‘thing’ or even a field that is set over and against us, but is rather a dilation of our way of being. Space is personal; space is bodily; space is emotional; space is interpersonal. In a phrase, space is meaningful: It is the unfolding of human meaning into a world.

Thus, our phenomenological model has shown the inadequate conceptual presumptions that are tied to the empirical failures of contemporary treatments of agoraphobia, and now in the next chapter we will develop an alternative interpretation that can redress these failings. Fundamentally, it is by maintaining a distance between the subject and space that the current approaches to agoraphobia fail to properly recognize the nature of lived space and, as a result, can neither comprehend the existential foundations of agoraphobia nor recognize agoraphobia as—what I will now claim it to be—a disorder of dwelling.

204 Certain psychoanalytic or psychological models of agoraphobia address various aspects of agoraphobia in more adequate ways than those I have been describing so far. In these models, agoraphobia tends to be acknowledged as developing out of certain interpersonal dynamics in one’s formative personal history. These models also frequently address the fact that this disorder occurs in women or in men who score low on masculinity scales more than in men. Yet, even these approaches seem to leave aside the question of how space functions in human life. They may acknowledge agoraphobia as connected to problems with domestic space, but they do not appear to address the existentially creative role we play in giving rise to and shaping space. If they address the patient’s spatial experience, it is typically cast as an experience of something ‘outside’ the patient that has become charged with certain developmental tensions (usually of a sexual nature) or else of an altogether interior experience—i.e., not as an existential perceptual structure of the patient’s way of being-in-the-world (see, for example, Bollas’s descriptions of patient’s experiences of internal and ‘external’ space on pp. 42-50 of The Shadow of the Object). In doing so, the psychoanalytic approach can fail to see how a disorder pertaining to space may in fact reveal something about our way of being in the world general, not simply about our own development issues pertaining to libidinal development and repression. See Freud’s account of agoraphobia for an emblematic representation of such an analysis in The Complete Letters of Sigmund Freud to Wilhelm Fleiss 1887-1904, pp. 217-18.
I. The Constriction of the Agoraphobic’s World

To begin to support my claim that agoraphobia is a disorder of dwelling—and more specifically, one of not being able to be-at-home—I will first consider the general behaviors and gestures of the agoraphobic, since, as Merleau-Ponty argues, “a form of behaviour outlines a certain manner of treating the world” (Merleau-Ponty, PhP 319, my emphasis). I wish, then, to consider what sort of basic gesture toward the world is being made by the agoraphobic’s symptomatic behaviors. In doing so, I will be addressing the agoraphobic’s physiological behaviors and experiences, and in this way be taking up an approach of investigation as does the current ‘medical’ model of treating agoraphobia, but, contrary to this model, I will be doing so in a way that acknowledges these behaviors and experiences as intelligent and expressive, and, correspondingly, as intersubjective. 205 By considering the ‘intelligence’ of the agoraphobic’s behaviors, we will begin to recognize and understand the generative issues that may lie behind the agoraphobic’s manner of having a world. Through these analyses, we will not only arrive at a better pathway for addressing the agoraphobic’s problem, we will also see further into what the agoraphobic’s stance can tell us about the nature of human spatiality in general.

At an obvious level, the agoraphobic is making a gesture of rejecting or of not being involved in a very large world. Our phenomenological analyses, especially those

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205 Russon argues that “[a]s intersubjective gestures, neurotic behaviors are most fundamentally to be read, to be engaged with as entries in a discourse” (Russon, Human Experience 113). We will now attempt such a reading of the agoraphobic gesture.
in chapter 3, allow us to argue that the agoraphobic is involved in a retraction or
constriction of her very way of being-in-the-world. This claim does not imply that the
agoraphobic merely reduces the range and types of things or places that she ‘objectively’
engages—which is, of course, true—but also that she changes the very way she perceives
and experiences her world. One agoraphobia researcher offers support for the position
that agoraphobia is reflective of a problem in one’s way of engaging and perceiving the
world, not merely a problem in dealing with its ‘objective’ contents. He argues that
agoraphobia should “...be considered to reflect an expression at the behavioral level
of...constriction, in which a person draws in the outer boundaries of their perceptual field
to exclude from awareness material which their constructs are ill-equipped to predict and
which therefore generates anxiety and confusion” (Winter 95, my emphasis). While this
comment remains somewhat too physicalistic, it goes in the direction of acknowledging
that the agoraphobic is involved in—is living—an entirely different perceptual level due
to her disorder.

To begin to see the difference between the perceptual level of the ‘normal’ person
and the agoraphobic, we can note that the mere absence of the agoraphobic’s presence in
the most common sites of human exchange signifies a fundamental severance from the
people and world around her, and that this limiting of her interpersonal engagements in
itself diminishes the character and reach of her world.206 Moreover, even if she does

206 In his chapter “Neurosis,” Russon demonstrates that even the most ‘natural’ seeming of our
bodily activities—walking, eating, sleeping, etc.—are sites of contact with other people, and,
thus, are sites for personal ‘creation’ and difference (see esp. pp. 94-113 of Human Experience).
In other words, we do not simply naturally come to walk the way we do, eat the way we do, etc.;
we develop these personally-charged activities, and they reflect our personal narratives. His
argument is relevant here insofar as the agoraphobic’s fear and avoidance of public places is not
merely an ‘innocent’ or ‘natural’ occurrence; it is a developed intersubjective gesture that was
enter into these sites of interpersonal exchange, she is caged, so to speak, within the confines of a severely restricted body—a body that not only limits when and where she can open herself to others and others to her, but also how that can happen. When the agoraphobic is outside a ‘safe’ zone, she becomes anxious and spends much of her energy thinking about how she can return home and worrying that something may inhibit this return. Thus, even though she may be reaching beyond her usual sphere of safety, she tends to be wrapped up in her anxieties about being away from home and in her plans for how to return there. Her possibilities for being in the world are dramatically diminished insofar as she can no longer throw herself into the situations that present themselves, but by means of her preoccupations and bodily discomfort holds them at a distance from herself. One agoraphobic describes her inability to be actively present in unsafe situations as follows:

> It is difficult to concentrate whilst anxious. Thoughts such as ‘How do I get away from here if I need to?’ and ‘What if somebody notices that I’m scared?’ intrude, impeding the ability to focus attention on external events. Concentration difficulties result from the deployment of part of your attention on anxiety and its concomitants, instead of on the ‘here and now’ (Clarke and Wardman 36).

In this quote the agoraphobic describes an inability to be engaged in living when beyond strictly defined spheres of safety; for, once the agoraphobic travels beyond this sphere,

\[207\text{ See Frances and Dunn (1975) for a discussion of the general anxiety experienced by agoraphobics and also the way in which anxiety increases significantly and becomes more focused in character when leaving a safe space or upon entering a particularly troubling space (see esp. p. 435).}\]
she becomes wrapped up in her anxieties about being away from home and in her plans for how to return there. Moreover, even an agoraphobic’s safe places can become sites of tension and alienation insofar as anxieties about leaving these places can taint the general experience of comfort typically found within these sites of safety. An agoraphobic person may, for example, find that when attempting to make a plan to go beyond her safe range, that safe range becomes the place where hours of anxious planning and nervous feelings and thoughts arise. Though not speaking explicitly about agoraphobia, Merleau-Ponty fittingly describes the contraction of one’s spatiality and its existential consequences that results from comparable bouts of morbid preoccupation. He writes:

> Sometimes between myself and the events there is a certain amount of play (Spielraum) which ensures that my freedom is preserved while the events do not cease to concern me. Sometimes, on the other hand, the lived distance is both too small and too great: the majority of events cease to count for me, while the nearest ones obsess me. They enshroud me like night and rob me of my individuality and freedom. I can no longer breathe; I am possessed (PhP 286).

Even if the experience of spatial constriction is not as great as this, the agoraphobic can feel removed from what is happening around her and even from what she herself is doing insofar as her mood of being anxious can serve as a barrier from being in the world.

One agoraphobic describes the sense of ‘not being quite there’ that is common in agoraphobia in terms of his experience of mood. He reports that “...he feels that he is more or less in an artificial mood...that he cannot feel natural as other people, not even when he appears to be jolly, vivacious, and garrulous” (Westphal 67).
separation from others and the previously quoted agoraphobic’s sense of being apart from the “here and now” can be argued to arise in part directly from their experience of being in the mood of anxiety or fear. Describing the space-altering character of mood, Bollas, a psychotherapist, maintains that though a person in a such mood can still communicate with others, she is somehow still apart from others and her situation by virtue of being in a mood.\footnote{Bollas writes: “A person can be both in a mood and capable of dealing with phenomena outside the mood space. Yet to an onlooker it is clear that the person who is inside a mood is also \textit{not present} in some private and fundamental way and \textit{this absence marks out the territory of mood space}” (Bollas 99, my emphasis). Bollas’s observation serves to support the claim that the agoraphobic is a person in a persistent condition of separation from others and from the ‘world’. The agoraphobic’s ongoing anxiety keeps her from being “present,” keeps her absent from others in her own “territory of mood space.”}

This characterization of mood as separating a person from her surroundings is only strengthened if we consider the particular nature of anxiety—a mood that is perhaps the most separating of all moods insofar as it is not only frequently chronically experienced, it also seems to undo all one’s connections beyond oneself and to lack even

\footnote{Russon makes a similar point, adding that when we are in a particular mood, we are in a significant way also dissociated from ourselves and the other ways we see and interpret the world and our situation: When we are in one mood, we have being revealed to us—revealed in its obviousness—in one way; it is a determinate way, which means we cannot see other ways. When we are angry with someone we cannot remember what it is like to feel tender toward that person, and, similarly, when we again become tender we cannot see how we could ever be angry with that person. ... In our different moods, we are, in a basic way, like different selves (Russon, \textit{Human Experience} 76-77).}
the ‘connection’ that could come from having a focal point for ‘blame’. This chronic state of separation—marked by feelings of being different from others, of not being “natural” like they are, of not really being there—is yet another sign of the agoraphobic’s reduced way of being-in-the-world. Though it ascribes too much conscious volition to the agoraphobic condition to say that she is choosing to separate herself from the world through her moods, she is nevertheless involved in living in a certain way through her moods. She is being-in-the-world through the mood of anxiety, and this is a life gesture of withdrawing from some thing, some structure, some way of being.

Turning again to research on agoraphobia, we can begin to form a general notion of that from which the agoraphobic is existentially withdrawing. One patient-psychologist team reports that “...agoraphobic people show strong tendencies to avoid things, not only physically but also socially, veering away from any kind of interpersonal confrontation or unpleasantness. Most go to great lengths to avoid such feelings as anger and frustration, and even feelings usually valued as positive such as happiness, excitement, and sexuality” (Chambless and Goldstein 185). Another researcher links the agoraphobic’s spatial constriction to her hampered ability to experience and address emotions; he writes: “...the agoraphobic has a poorly elaborated subsystem of constructs concerning emotions, particularly those relating to interpersonal conflict, ...which leads the client to experience anxiety in, and to adopt a constrictive response to, such

209 Westphal would seem to support this characterization of agoraphobic fear as having no site for blame, no distinct focal source, when he writes: “Without exceptions, all patients mentioned that they absolutely do not know the reasons for [their] fear” (Westphal 73). I will discuss the experience of fear and anxiety, and also Heidegger’s analyses of these, in the conclusion to this work. For Heidegger’s discussion of anxiety in general, see Being and Time section 40 as well as H. 277, M/R 321-22

210 A more detailed analysis of the nature and sources of this withdrawal will be addressed in the next section.
situations” (Winter 96, my emphasis). As these quotes suggest, the agoraphobic seems to be leaning away from or even altogether avoiding certain sorts of contact and communion with other persons and situations—namely, those sorts which are or may prove challenging or overly exciting to the agoraphobic. Though it may initially seem to be an opposing position, it is also arguable that, rather than making a gesture of avoidance, the agoraphobic is also clinging excessively to what is familiar. Seen from this

211 Agreeing with the claim that agoraphobics are avoiding certain sexual excitements, Freud argues that agoraphobia reflects a repressed desire to be a “streetwalker” or to have sexual relations with unknown men. He maintains that the agoraphobic cannot leave the house for fear that she will give into these or at least feel these desires openly (Freud 218). Though Freud’s analysis captures the agoraphobic’s fear of engaging the human realm with spontaneity, it restricts her loss too narrowly to particular areas of sexual encounter, and fails, thereby, to capture the farther reaching implications about her restricted way of being in the world. The agoraphobic’s avoidance of the ‘outside’ world is not, I am arguing, merely the manifestation of a sexual dysfunction; rather, it expresses a fundamental shift in the nature of the body, and thus, her overall manner of existence. To be sure, sexuality is a significant and perhaps defining feature of this reduced existence, but at least in the manner in which Freud discusses the disorder, it seems too limited to describe her avoidance as a sexually explicit avoidance.

At the end of the fifth chapter of Human Experience, Russon makes a compelling argument that our way of being-in-the-world is as sexual beings, as erotic beings. Russon argues that sexual experience reveals to us the embodied nature of our intersubjective existence (see esp. pp. 105-12 of Human Experience). He writes:

Sexual experience is the experience of our embodiment as the locus of intersubjective contact and compulsion. In erotic experience, we experience the presence of others in our bodies, that is, we experience the nonisolability of our bodily identity from the significance others place upon it: we experience ourselves as essentially living in the perspectives of other persons (Russon, Human Experience 106).

This conception of our sexual being and experience allows for a more compelling description of the agoraphobic’s disorder as one of sexual avoidance than Freud’s. Russon argues, for instance, that “[s]ex is the experience of one’s embodiment as a locus of intersubjectivity” (Russon, Human Experience 108), and, thus, might conclude that agoraphobia is a stance of attempting to ‘shield’ one’s body, to avoid experiencing its character as the locus of intersubjectivity. While certainly a failed stance—insofar as we can never isolate ourselves from our intersubjectivity—agoraphobia is arguably an attempt to extract oneself from the demands placed on oneself through the gaze and general embodiment of the other as well as the responsive character of our own embodiment toward others (e.g., the smiles with which another can ‘infect’ us, the blush another can give rise to in us, the sweat that is called out by another is us, the rush of the heart or jump of a stomach another causes us to have, etc.). In the most ‘literal’ of sexual arenas, we have also seen in our study of agoraphobia that the agoraphobic tends to withdraw herself from ‘overt’ sexual activities even with her ‘safe’ partner(s). The agoraphobic’s stance can, thus, be seen as an attempt to reject our fundamental character as sexual beings.
perspective, the agoraphobic does not avoid places or situations per se, but rather is
remaining within the circumscribed settings and relations with which she is familiar.
This description is supported by two researchers who argue that at the core of
agoraphobia is a feeling of anxiety about losing, leaving behind, or being left behind by a
protective, stable support system (Frances and Dunn 435).

In general, then, we might say that the agoraphobic is making a gesture of
cleaving the double sense of which nicely captures the duplicity of meaning we are
finding in agoraphobia: either cleaving to something with which she is familiar, or
cleaving—i.e., separating or splitting—herself from something that is foreign or
threatening to her. The gesture is essentially the same, but here seen (and perhaps
experienced212) from two different perspectives. From either perspective, the
agoraphobic is involved in limiting the engagements—interpersonal, emotional, personal,
and so forth—that give shape to a world. Let us now consider more closely what the
specific existential concerns and structures may be that underlie this constricted world of
the agoraphobic.

II. Existential Roots of the Agoraphobic’s Constricted Life-World

Numerous studies of agoraphobia point to childhood crises or family tensions in
the agoraphobic’s past as well as to instances or periods of interpersonal conflict directly

212 The possible experiential difference in these perspectives will come up for discussion below
when the nature of home is considered.
preceding the onset of agoraphobic behavior. Let us look at these issues in turn to see how they may be constitutive of the agoraphobic’s contracted condition.

To begin let us consider studies that examine the typical family history of the agoraphobic. In their research and clinical work, Kleiner and Marshall have observed that a deficient and anxious family background is a significant contributing factor in the development of agoraphobia. They note that families of agoraphobics show a high rate of psychiatric problems including overprotection, depression, phobic-anxiety, and alcoholism (Kleiner and Marshall 320). They argue that it is most likely as a result of “...this family context, [that] anxious and avoidant patterns of interpersonal interactions are developed, as well as dependent interpersonal styles. ... [Moreover, these] personal characteristics may set the stage for an extreme anxiety response to life’s stressors” (Kleiner and Marshall 320). Gassner is more specific in her identification of the familial ‘source’ of agoraphobia. In a review of her clinical reports of patients with agoraphobia, Gassner observed that these patients had typically experienced some form of childhood trauma involving issues of abandonment and neglect (Gassner 224). More specifically, agoraphobia appears to arise in persons who as children experienced familial trauma—whether it be a specific crisis or a chronic problem—and whose parents or caretakers were at some level unavailable to support the child through this trauma by means of “sustained, emotionally attuned, and reality-oriented help” (Gassner 223).213 Lacking this support in their childhood, “[s]uch patients often feel frightened,” according to Gassner, “by emotional arousal and typically manifest intense anxiety in response to sexual and aggressive excitement as well as to strong affects generally” (Gassner 224).

213 Corresponding to this point, Parker reports that, compared to ‘normal’ subjects, agoraphobics tend to report experiencing a lesser degree of maternal care in general (Parker 557).
This feeling of fear arises in part, because, as we have seen, agoraphobics often do not seem to be able to connect their emotional responses with a cause; they often do not understand why they are feeling aroused in the way they are, and as a result can begin to feel a floating, undefinable emotion—in other words, anxiety. Making a different, but related claim to Gassner’s, Goldstein and Chambless suggest that the reason for this emotional disconnection as well as the agoraphobic’s frequent inability to respond with an appropriate level of emotional response may be rooted in either repressed, punished, or exaggerated childhood experiences of emotion. They write:

In their familial setting, where they are frequently the family doormat, the expression of feelings may have been so punished that for preagoraphobics even the internal recognition of some affects such as anger would become anxiety provoking, and they would therefore attempt to learn to avoid contact with the feeling. Alternatively, affect may have become conditioned to anxiety through observational learning when the child was exposed to a parent who experienced feelings in uncontrollable ways such as rage or severe depression. After a time, this response chain might become automatized to the extent that cognitive labeling of feelings no longer occurs, and the automatic arousal concomitant with the usual awareness of an emotion is mislabeled and experienced as diffuse anxiety (Goldstein and Chambless 52n.).

According to this range of researchers, then, one source of the agoraphobic’s problem can be traced back to a family situation in which crisis and emotion were either not given adequate attention or support or else were ‘demonized’—an inadequacy or
‘demonization’ that shows itself in the agoraphobic’s inability or unwillingness to engage even mildly challenging interpersonal or practical situations.

A second familial structure that is commonly problematic in the childhood experience of agoraphobics is the parent-child boundary. Frances and Dunn (1975) argue that agoraphobia arises from an attachment-autonomy conflict in which the subject is expressing a mixture of dependence on and rejection of those close to her. They maintain agoraphobia arises from a childhood territorial struggle in which the agoraphobic’s developing independence was restricted by the dynamics of the child-parent relationship. To set the ground for this theory, they first connect a child’s experience of growing independence with a child’s initial explorations of her spatial surroundings during the process of learning to walk. They argue that learning to walk leads to two interconnected results: 1) the establishment of the child’s separateness from her mother (and other family members presumably) by means of putting an acceptable distance between her mother and herself; and, 2) the separation of space into a “safe territory,” where her mother’s protection exists, and an “uncharted and relatively frightening outside world” (Frances and Dunn 436). According to Frances and Dunn’s analysis, if the child’s move toward independence is compromised either by her parent’s attitudes toward this spatial distinction or toward her independence (and this especially

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214 Frances and Dunn argue that this conflict is the same familial conflict that occurs in families of anorectic patients. They suggest that while the agoraphobic manifests this conflict in her avoidance of places and her reliance on others for support in managing his movements through these places, the anorectic expresses a similar conflict in her avoidance of food and in her reliance on others for support in managing or at least worrying about her nutritional and physical well-being. Frances and Dunn argue that these are two different expressions of the same problem, and suggest that this problem may develop into these different neuroses in light of the fact that “...different issues become charged in different families and carry the weight of symbolization of this central dynamic conflict” (Frances and Dunn 437). For an expanded analysis of the personal and societal significance of these differences, see Russon’s discussion of the interpretative singularity of the family (Russon, Human Experience 62-67).
with respect to the ‘larger’ world), or by experiences of emotional, physical, or environmental crises, the child will likely have a difficult time establishing a firm sense of independence from her family (Frances and Dunn 436). As a result of this, as she grows older, she may be more dependent on other persons as well as on pre-identified ‘safe places’ than those children who made more effective separations from their parents at a young age. They conclude: “The adult phobic then appears to re-enact the earlier drama of leaving and returning to the mother and to safety, using the same spatial and motoric symbolization for separation” (Frances and Dunn 436).  

Both of these analyses of the typical agoraphobic childhood situation also help to explain the typical first onset age period for agoraphobic behaviors, which tends to be around adolescence. Adolescence is a time when children are first ‘pushed’ into being on their own in many significant ways: They can no longer easily remain under the constant protection and guidance of their parents, because they are expected by their peers and society to engage in activities such as making friends, getting jobs, offering and defending their own ideas, taking responsibility for dressing, transporting themselves, choosing friends and activities, and so forth. Typically these expectations are matched by some degree—sometimes a great degree—of interest on the adolescent’s behalf to begin partaking in independent activities and attitudes, and this interest can be quite self-conscious—that is, an adolescent may specifically desire to do something, say something, etc. that is specifically in contrast to what her parents’ may do, say, etc. If, however, the adolescent has not been given or developed the grounds on which to support these

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215 For a related discussion, also see Gassner’s article “The Role of Traumatic Experience in Panic Disorder and Agoraphobia,” especially pp. 224-26).

216 Goldstein and Chambless have observed that while phobias are commonly reported in childhood, agoraphobia generally does not appear until adolescence (Goldstein and Chambless 53).
independent activities, this is a likely time for the emergence of neurotic behaviors—behaviors that will attempt to cover over or somehow make up for the lack of the adolescent’s sense of independence.217

The second typical time for agoraphobia to appear in a person’s life is during times of acute stress and particularly stress arising as a result of making a major life transition—e.g., moving out of one’s parental home, getting married, contemplating breaking off a relationship, the death of a family member, and so forth.218 Kleiner and Marshall maintain that these stresses grow specifically out of relationship conflicts during such transitions, and that these stresses fall under one of three basic categories: (1) prolonged poor relationships, (2) conflicted relationships, and (3) symbiotic relationships (Kleiner and Marshall 317, 320). They offer telling examples of each.219

In a example of

217 See chapter 5 of Russon’s Human Experience for a helpful and original discussion of the nature of neurosis and its place in the human experience. In brief, Russon argues that neurosis arises when a person continues to live and act out of family narratives that no longer fit the new situation she has entered, and when the resulting tension prohibits the person from engaging in this new situation according to the demands and possibilities of the new situation. The neurosis is marked by the way in which the person persists in living out of a narrative that functioned effectively in one sector of her life, but that now stands at odds with a style of behavior or attitude that would allow her to function as she and others would otherwise choose or wish her to function. The no longer effective narrative is now a neurotic pattern of behavior—that is, a way of behaving that marks a person as clinging unreflectively to ways that belong to another situation, and, therefore, as a person who fails to fit within her present situation.

218 Kleiner and Marshall found through rigorous and multi-dimensional interviews that 84% of their agoraphobic patients experienced more than one source of significant stress in their lives prior to the onset of agoraphobia (Kleiner and Marshall 320; on this point, also see Kaplan (1987) 133). In another study, the onset of panic attacks in agoraphobics was identified as being preceded by a period of life conflict in 2/3 of the patients whereas this was true of only 1 in 36 phobic patients (Goldstein and Chambless 55). Speaking to the role of interpersonal conflict in developing this stress, McCarthy and Shean argue that unresolved problems that have built up in the interpersonal relationships of agoraphobics are “...believed to be important stressors that are related to the onset of panic attacks and agoraphobic symptoms” (McCarthy and Shean 478). They also claim that the agoraphobic’s interpersonal problems usually have their source in the tendency of agoraphobics to be fearful, dependent, and nonassertive—a claim that helps to support the upcoming argument that a key factor in the development of agoraphobia is the agoraphobic’s struggle with the establishment of her autonomy (McCarthy and Shean 478).

219 The following examples are discussed on pp 317-18 of Kleiner and Marshall’s article “The Role of Interpersonal Problems in the Development of Agoraphobia with Panic Attacks.”
the first type of conflict—prolonged poor relationships—a woman who had been unsatisfied with her marriage for a long period of time was dependent on her husband for any sort of travel outside the home; her agoraphobia appeared at a point when she was considering leaving her husband and yet found herself unable to do so due to overwhelming fears of being on her own as well as guilt at the idea of leaving her husband. In an example of the second type of conflict—conflicted relationships—a young woman who had had a history of feeling dominated by her boyfriend developed agoraphobic symptoms shortly after moving in with a boyfriend for the first time. An example of the third type of conflict—symbiotic relationships—involved a 25-year old woman who had a history of providing an exceptional amount of household and emotional support for her mother and who was attempting to move out of her parental home for the first time. Her agoraphobic symptoms first appeared after her attempt to move out on her own. In general, Kleiner and Marshall observed that regardless of the type of relationship conflict experienced, their agoraphobic patients...

...reported a history of dependence associated with unassertiveness prior to the onset of their agoraphobia. ... They also reported strong feelings of insecurity reflected by a low estimate of their own abilities and a passive or avoidant style of coping with crises; this was associated with a lack of self-sufficiency and highly dependent behaviors (Kleiner and Marshall 318-19).

Thus, as in the case of agoraphobia arising at the stage of adolescence, we can see from Kleiner and Marshall’s general remarks about the character of the agoraphobic as well as from their specific examples that the agoraphobic person appears to show signs of
agoraphobia at a juncture when a new form of independence is either being attempted or desired.²²⁰

The fact that agoraphobia appears not only at adolescence, but also at other times of significant life transition strengthens the claim that agoraphobia arises from a struggle with one’s autonomy. Offering a basic explanation for why agoraphobia may arise as a result of this struggle, Goldstein and Chambless suggest that it is at such times of transition that a conflict arises “....between the normal desire for individualization and the longing to remain in a familiar, predictable environment. ... The conflict situation may be construed as the competing responses of leaving versus remaining in what seems to be a safer situation than being on her or his own” (Goldstein and Chambless 53-54). Hudson makes a similar claim, proposing that agoraphobia may serve either as a type of control exerted by the patient over those around her or as a means of avoiding the dangers and responsibilities of living an independent social life (Hudson 59). The agoraphobic response can, therefore, generally be seen as a gesture reflecting a fear of and accompanying withdrawal from taking up certain challenging situations as an ‘independent’ person.

This claim is additionally supported by the shift we can see in the agoraphobic’s behaviors that occurs when she is with versus without a ‘safe’ companion. As we noted earlier, the agoraphobic can often go into otherwise ‘prohibited’ territories if she is accompanied by one of her safe companions. Otherwise, she remains tied to those places that she has developed in conjunction with those companions—namely, the home and

²²⁰ This connection is also made by Goldstein and Chambless, whose review of a wide range of studies on agoraphobia have led them to conclude that most agoraphobics are in relationships that they wish to leave, but that they cannot leave owing to their fear of being independent (Goldstein and Chambless 49).
perhaps a few other ‘satellite’ homes. The agoraphobic’s avoidance behaviors often
serve, therefore, to secure her dependence to other persons. Since the agoraphobic is
helpless to go into certain places without the safety of her partner, this partner must stay
close to her or even go to certain places for her. As we have seen, the heightening of
agoraphobic behaviors—such as a decreasing scope of places where the agoraphobic is
able to go on her own or a series of incapacitating panic attacks—occurs when there is
some threat to the closeness of the partnership—say, for example, if either partner
receives a new job, someone in the family goes through a major life change or crisis, or,
perhaps most notably, if the ‘safety’ partner or the agoraphobic partner attempts to depart
or even considers leaving the partnership. As the agoraphobic becomes less able to be
out in the world on her own, the persons closest to the agoraphobic must increasingly
either be with the agoraphobic during her outward ventures or must perform these outings
for the agoraphobic. Frances and Dunn propose that this is not an ‘innocent’ correlation:
“Agoraphobic symptoms become necessary when a more direct expression and recapture
of dependency is, for one or another reason, not possible” (Frances and Dunn 437). The
research of Frances and Dunn suggests that the agoraphobic is able to go into dangerous
situations with her safe companions (or, as Frances and Dunn describe them, her “phobic
partners”) because she fails to distinguish herself from these people, and thus gains their
abilities to go freely into these places that are otherwise off-limits to her. France and
Dunn write: “The phobic partners are the people most closely involved with [the
agoraphobic], often with blurring of psychic differentiation. The agoraphobic patient,
with [her] symptoms, binds the phobic partner within the safe territory and ultimately to
[herself]” (Frances and Dunn 436, my emphasis). The agoraphobic is, thus, practically as
well as ‘psychically’ dependent on the assistance of her ‘safe’ companions when it comes to pursuing her own interests and personal activities.

The typical ways in which persons close to the agoraphobic respond to and engage the agoraphobic also support this conclusion. There are two prevalent—and at first glance seemingly contradictory—patterns that arise in the close interpersonal relationships of agoraphobics. On the one hand, family members of agoraphobics are often observed to reinforce the agoraphobic behaviors by giving positive attention to the agoraphobic “for being ‘sick’” (Goldstein and Chambless 56). Spouses, partners, and parents of agoraphobics are also frequently seen to pressure the agoraphobic back into dependent behaviors at those very junctures when they have begun to act more independently (Goldstein and Chambless 57). In this way, family members or partners of agoraphobics can be seen as encouraging a dependent style of being in the agoraphobic. Moreover, as we saw earlier, disharmony in relationships often increases following many of the common agoraphobia treatment methods. McCarthy and Shean argue that this suggests both that partners of agoraphobics are adversely affected by the improvements in the agoraphobic’s avoidance symptoms and that underlying problems in the spousal relationships help to maintain the agoraphobia (McCarthy and Shean 478). Thus, we can identify relationships in which agoraphobia is present as relationships that foster a certain type of dependence.221

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221 Supporting this point, Arnow et al. even quote one agoraphobia researcher as saying that “it is presumably impossible to become an agoraphobic without the aid of someone who will submit to the inevitable demands imposed upon them by the sufferer” (Arnow et al. 453). See also their discussion of a variety of studies discussing the role of an agoraphobic’s spouse or other close family members in the agoraphobic condition and in possible treatment modalities (Arnow et al. 453-54). See also Emmelkamp and Gerlsma’s helpful review of this topic in “Marital Functioning and the Anxiety Disorders,” esp. pp. 407-8.
Yet, on the other hand, persons close to agoraphobics often show signs of being more removed or less available for support than ‘normal’ family members or partners typically are. For instance, McCarthy and Shean reported that self-reported assessments of spousal support were lower for agoraphobics than for controls; that marital or primary relationship conflict was significantly higher for agoraphobics than for control group members; and that partners of agoraphobics who participated in an agoraphobia support-group scored significantly lower than controls on ratings of perceived support and on depth of relationships (McCarthy and Shean 482). Similarly, in their review of studies dealing with the marital interactions of agoraphobics, Emmelkamp and Gerlsma found that authors described partners of agoraphobics varyingly as “negativistic,” “compulsive with strong withdrawal tendencies,” “hostile,” and in some cases as “psychologically abnormal” or “phobic” themselves (Emmelkamp and Gerlsma 413). McCarthy and Shean also reported that several partners of agoraphobics who partook in an agoraphobia support group with their agoraphobic partners voluntarily revealed to one of the investigators that prior to the support group they “did not believe that their partner’s agoraphobia was a ‘real problem’,” and also that going to the support group meetings helped them to realize the challenges involved in changing their partners’ problems (McCarthy and Shean 483-84). Another researcher notes that even in what she describes as relatively “healthy” families with agoraphobics, family members “...appeared to keep the problems to themselves,” and added that in several cases the patient “...would try to disguise difficulties even from those closest to her” (Hudson 54). In one of these ‘healthy’ families, though no family conflicts were acknowledged to exist by the researcher, “...Mrs. A. [the agoraphobic] thought it would not be surprising if her
husband were to lose patience and leave her” (Hudson 54). These observations suggest that in families of agoraphobics there is a lack of communication and genuine support, and in this way that there is a certain level of isolation among family members—i.e., pointedly a lack of being able to depend on one another in spite of the excessive need on the part of the agoraphobic (and perhaps also on the part of her companions) for this dependence. Thus, what seems like an excessively close relationship is more likely one that has a certain hollowness to it, a certain lack of support in spite of its outward appearance of providing constant support.

Overall, then, these analyses reveal that the agoraphobic tends to be a person who is struggling with attempts at acting independently from those close to her, who is fearful in the face of unknown activities, emotions, etc., and whose close companions tend to reinforce her dependency upon them. We have now made a significant step toward understanding the existential underpinnings of agoraphobia, but it is not yet clear why space is thematized by the agoraphobic through these problems except perhaps at the obvious level of considering agoraphobia to be the avoidance of the objective set of places in which unknown people and activities exist. This basic notion of the significance of space in agoraphobia is not phenomenologically sufficient insofar as it persists in considering space as a mere ‘objective’ container in which events and people are inserted. For the purposes of our phenomenological study, we must consider the constriction of the agoraphobic insofar as it is a spatially manifested avoidance of encounters with other persons, events, and even objects—that is, as an expression of a problem with one’s way of being-in-the-world. In other words, the spatial gestures of the agoraphobic tell us more than that the agoraphobic is simply avoiding a certain set of
places. As Merleau-Ponty writes: “The perception of space is not a particular class of ‘states of consciousness’ or acts. Its modalities are always an expression of the total life of the subject, the energy with which he tends towards a future through his body and his world” (Merleau-Ponty, PhP 283, my emphasis). We must consider, then, not merely what the agoraphobic’s spatial avoidance may tell us about her explicit attitudes about her objective surroundings, but also what her spatial limitations reveal to us about her lived stance as a whole, about her way of shaping a world.

Based on the analyses of the underlying structure and significance of agoraphobia that we have just made, as well as on forthcoming analyses of the experience of home, I would like to argue now that the lived stance of agoraphobia is one that marks a fundamental problem with one’s way of dwelling in the world—a fundamental inability to be at home. While at first this claim may seem counterintuitive given that the agoraphobic is very often partially if not completely housebound (and indeed the lack of attention paid to the experience of home in agoraphobia would seem to underscore the counterintuitive nature of this claim)222, I will argue that the agoraphobic’s manner of being at home is deficient and that this deficiency is at the core of the agoraphobic’s disorder.

222 Marcus confirms that scant attention is paid to the experience of home in studies of agoraphobia. She writes: “Discussion of [agoraphobia’s] symptoms and possible treatment tend to revolve around the place feared—supermarket, department store, shopping center—whereas less attention is directed at the place clung to—the house, apartment, room. My conversations with people about their homes reveal that some people experience not so much a fear or what is outside the home, but a desperate clinging to what is inside” (Marcus 82). Though she does not pursue a detailed study of the experience of home in agoraphobia, her book House as a Mirror of Self provides detailed accounts of the role that one’s home plays in shaping one’s way of being in the world.
III. A Phenomenological Interpretation of Home

To make this case, let us turn first to an analysis of the spatial and existential significance of home. I will proceed in this study of home by first considering perhaps its most recognizable character—namely as a structure for sheltering us. In addition to the obvious means in which the house shelters us, I will look particularly closely at the home’s way of sheltering who we are by reflecting and reinforcing our needs, interests, and habits. From here I will consider the home’s relationship to our bodies, and,

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223 For an extensive literature review of conceptions of the home and related ideas, see the chapter “Home: A Landscape of the Heart” in Porteous and Smith’s Domicide. In her article “Understanding Home: A Critical Review of the Literature,” Mallett also provides an interdisciplinary review of analyses and ideas about home. In my following discussion of home, I attempt to provide an analysis of the human experience of home. That said, I acknowledge that the outward ‘trappings’ of individual people’s and different cultures’ homes can be quite varied: Many people are literally ‘homeless’, and some are nomads; for some, the home is a place of abuse and rejection; in some cases, homes include multiple generations of a family or may be made up of many people unrelated by blood, but instead by occupation, while in other cases, a home may belong to just one person; the home in some cultures and families is a place with strictly defined roles (both customarily and legally based roles), and in others is a place of largely undefined or perhaps changing roles; and so forth. The wide range of these possible ‘expressions’ of home may seem to imply that something constant or consistent cannot be said about the experience of home, but I wish to challenge this notion at some level. Though I acknowledge that there are diverse ways in which my observations (and those I have included of others) about home are manifested, I would argue that there is a basic human experience of home as a place of belonging and of grounding (both of which also imply that the home is a place involving contrast and departure). That a person can be homeless, be nomadic, feel alienated or victimized within her ‘home’, etc. is possible because such experiences stand in contrast to this basic sense of home. So, while I by no means wish to say that we all have or have had an unproblematic experience of being-at-home or that we would define the particular character of our homes in the same way, I do wish to maintain that there is a fundamental human experience of home that, although it may find different expressions, is a human experience. Key to this point is my recognition that one’s literal ‘home’ (if one even has one) may not be the place one is at home. (For support for this position, see Porteous and Smith’s cross-cultural and situationally-diverse review of research into the experience of home, and especially their conclusion on pp. 61-63 of Domicide. For a related review of the experience of home as experienced in diverse range of situations, see Settles’s article “Being at Home in a Global society,” esp. pp. 627-30. Heidegger’s analysis of Dasein as a dwelling being is, of course, making a related philosophical claim. See too Steinbock’s Home and Beyond for a philosophical argument on this point.) The following examples I give to illustrate this experience are drawn largely from the cultures of North American and European single-family situations, but I have also offered some examples from other cultures and styles of family-living that I use in part to support this position.
correspondingly, to our childhood development into our homes and bodies. I will demonstrate how this home-body development that begins in childhood ends up shaping our future way of having a world. In part as a result of this recognition, I will move to consider a very different character of the home than that with which we will begin our study: I will study the outward-enabling and -thrusting character of the home, and argue that without an ‘egressive’ character, the home is not a home. The home is, I will demonstrate, co-defined as familiar and alien. Similarly, I will argue that the home must also allow for the ingress of the alien. I will consider how the home is relevant to those to whom it does not belong, and also how people outside the home are an issue for the home’s inhabitants. As a whole, the analysis will demonstrate that the home is a spatially-manifest reflection of our nature as always both self and other, as beings who are defined as much by the familiar as by the alien.

The notions of home and of being at home immediately suggest experiences of a certain type of inwardness, of privacy and familiarity. Heidegger’s analysis of Dasein’s existential character of caring for its being and of, thus, being concerned with the things of the world would suggest that home is perhaps the place where we can most directly see the concern that we have for things, since the home is the place where our dwelling in things is most thematized by us (next to our body, which is also a thing for

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224 In The Poetics of Space, Bachelard makes a phenomenological study of various animal ‘dwellings’, and argues that when we think of dwellings such as nests, snail shells, turtle shells, warrens, and other protective enclosures, we feel an intimate connection with the animals that dwell therein and, specifically, with their need for the security provided by their dwelling. He writes: “I have simply wanted to show that whenever life seeks to shelter, protect, cover or hide itself, the imagination sympathizes with the being that inhabits the protected space” (Bachelard 132; see also the chapters “Nests” and “Shells”).
us. We make a home, surrounding ourselves with the things and structures most necessary for us and in many cases most dear to us. Ultimately the place that turns toward and accepts the self, the home is a place we recognize as uniquely ours. Even if this private space of ours is wrought with problems—whether emotional, violent, structural, or otherwise—it is still a personal, private place of problems. One woman, an environmental design architect, who considers her own house to be a “collision of dream, nightmare, and circumstance” and fundamentally a fearful place, still acknowledges that “the dwelling is intimate, immediate, a resonant chamber, a mirror of the self…” (Troutman 143). She identifies the home as a self-portrait of sorts, a place that is, as we have just said, uniquely ours and that reflects us as such.

We can find confirmation of this point in the way that children typically express their own state of being in drawings of their homes. A generally happy child will draw warm and inviting features of the house—cozy fires burning on the hearth, winding walkways leading up to an inviting door with a bright doorknob, etc.; whereas unhappy

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225 On this point, see Merleau-Ponty’s work “The Philosopher and His Shadow” in Signs, pp. 159-81.
226 This is not to say that people always explicitly like or put conscious effort into caring for their homes. A home can provide inwardness and familiarity in ways as diverse as humans are. Even if a person is noticeably careless or unconcerned about her home and its decor and upkeep, she can still be setting up a place of living to her personal design or needs—in her case, perhaps according to a pointed unconcern with being concerned about the look or status of her house. On the other hand, if a person makes an unusable home by whatever means, there may be reason to wonder if she, like the agoraphobic, is dealing with some deeper existential problem that is surfacing in a home that fails to function as a home. A person may, of course, also be too busy to deal with the ‘look’ of a home, or not have enough money to do so adequately to her interests or even needs. Even in these cases, we can still ‘read’ something about a person’s care within those circumstances, and the circumstances themselves may be a site for meaningful examination.
227 This self-reflection may include that of many other people if we live in a setting that includes others. In this case even though the home may be shared throughout—i.e., there may be no private space wholly our own—the home still serves as a reflection of who we are, since this larger community of people inform who we are; it is home to be among these people.
228 For a discussion of this phenomenon, see Bachelard’s discussion of the work of the psychologist Françoise Minkowska on childrens’ drawings of their homes (Bachelard 72-73). The immediately following examples are drawn from Bachelard’s text.
children will tend to draw angular, cold houses, and often omit features such as a handle by which one could open the front door, or make the approach to the house a difficult one by including, for instance, a very steep pathway or countless steps leading up to the house. This connection of the child’s experience of self and her situation with the appearance of her home supports the claim that the identity of the person is reflected in the home—and this even for the child, who generally has little control over the appearance of the ‘objective’ home, but who can consciously or unconsciously show through her drawing how the home appears or feels to her. Though admittedly this reflection can be oppressive—for example, in our adult lives, if conflict or outright violence permeates the home, if a lack of financial means threatens our ability to support our needs and the demands of having a home, if the home does not allow our interests or voice to be expressed for reasons of crowding, of interpersonal or cultural ‘rules’, and so forth, or even if we are troubled by something beyond the home, but that we cannot ‘shake’ and that, therefore, comes with us into the home and festers there; or, in childhood, if our parents are, for instance, unduly restrictive or emotionally distant—the

229 This theme is often drawn out in novels. Homes and estates become reflections of the character of their inhabitants. Notable examples of this include Bleak House in Dicken’s eponymous novel—in which the home goes through changes along with the fortunes of its dwellers; Satis House in Dicken’s Great Expectations—a house in which time literally and figuratively stops moving after a bride-to-be is left unexpectedly on the morning of her wedding; in Danielewski’s The House of Leaves, the house on Ash Tree Lane, in which mysterious mazes are inescapable or escapable depending on the particular interpersonal issues and challenges of the characters who travel into them; the shifting states of the castle along with the relations of the castle’s inhabitants in the fairytale “Beauty and the Beast”; the character of the home in Laurence’s The Fire Dwellers as ready-to-burn at the slightest step outside the family boundaries; the House of Usher in Poe’s eponymous short story, in which a home deteriorates along with its emotionally tortured inhabitants, and ultimately falls to the ground when they die; the house and, more particularly, the room (and its wallpaper) in which the protagonist of Charlotte Perkins Gilman’s short story The Yellow Wallpaper is confined to ‘cure’ her of her ‘hysteria’; the reawakening of the summer home in To the Lighthouse—the return from its close call with ‘death’—when Mr. Ramsay and his children and a few select friends return to it to fulfill the nearly lost wish of the now dead Mrs. Ramsay to make a journey out to the lighthouse that looks always upon the home and onto which the home’s inhabitants equally always look out.
reflection of ourselves by our home nevertheless marks a place where these concerns belong, where we belong.\footnote{In the case of Bedouin (or other nomadic peoples), this place of belonging can change from season to season or even day to day, and may in some cases be a set of places to which one can and will return, or may be made anew by means of one’s encampments, one’s portable means of establishing a home. A similar point can in some cases be made about squatters or people who are homeless. Though squatters or homeless people do not legally own land or a house, they do often establish a location for themselves—a location that may be quite easily identified by others (such as an erected structure) or that may be unnoticeable to someone who is merely passing by (such as a particular spot on a city block). For a discussion of home experiences in homeless and nomadic persons, see Mallett’s review of pertinent literature on pp. 72-73 of “Understanding Home.” Mallett is presenting an argument therein that home is not fundamentally a place of “private haven,” because it can be quite public and transitory (or, in other cases, can be strife-filled). While I agree with her point that home does not have the firm boundaries (or the ‘absolute’ security) of the ‘objective’ or the ‘ideal’ house, I would argue that even a ‘boundary-less’ home, such as the Bedouin might be described as having, can provide the experiences of protection, self-reflection, and inwardness that are being captured in the notion of home as a ‘haven’.
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A place of and for the self, the home is a place of refuge for us, a place where we leave behind the outside world. We close the door behind us when we enter into our home. For others to come into the home, we must invite them or at least open the door to them. There is virtually no other place in our experience that holds this kind of inviolable self-enclosure.\footnote{In a place of work, we may have a private office, but it is typically a place for engagement with others, a place where we expect others to enter or at least have the right to enter. The office is a place of exchange, a place where the outside world expects to find and deal with you. Rachel Whitereads’ sculpture House (1993) can be seen as offering a commentary on this self-enclosing character of the house. Her sculpture is a solid cast of the inside of a home, which has then had all exterior wall, windows, etc. removed; what remains is a concrete solid in the form of the home’s inside. Walls, windows, and doors removed, the house continues to conceal its imagined dwellers from our view; there is something in there that we cannot penetrate. On the other hand, seeing even a photograph of the sculpture can in fact still cause one to feel some experience of some sort of violation as well as pure discomfort, as if the original walls of the house both served to deflect attention that the sculpture pointedly invites and also, in spite of their rigidity, offered a certain softness and comfort that the uniform concrete of the sculpture defies. Whiteread’s original (and fulfilled) plan for the sculpture was that it would only be a temporary structure, lasting a mere three months in an otherwise unnoteworthy London neighborhood. This
} To be at home, then, is to have a sanctuary of sorts in which the outside world is temporarily set aside. It is a place where one is secure, protected from outside intrusions and considerations, and given a place to recollect oneself in private.\footnote{In the other hand, seeing even a photograph of the sculpture can in fact still cause one to feel some experience of some sort of violation as well as pure discomfort, as if the original walls of the house both served to deflect attention that the sculpture pointedly invites and also, in spite of their rigidity, offered a certain softness and comfort that the uniform concrete of the sculpture defies. Whiteread’s original (and fulfilled) plan for the sculpture was that it would only be a temporary structure, lasting a mere three months in an otherwise unnoteworthy London neighborhood. This
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way, the home is a place of self-nourishment and development. In the privacy of home, we can let go of the demands made by others—at least by those beyond our household. We can leave behind the responsibilities of our profession, our civic commitments, and our larger social life, not to mention the vagaries of the weather and the contingencies of the ‘outside world’. In the home, we can relax, and do so without a plan, without determining in advance where we should be and for what purpose. We can daydream without worrying someone will interrupt us, and without concern about whether someone wants or needs our chair or whether the halls or yard in which we wander has closing hours or a curfew. In his phenomenology of the home, Bachelard lauds this aspect of home above all others; he writes “...if I were asked to name the chief benefit of the house, I should say: the house shelters daydreaming, the house protects the dreamer, the house allows one to dream in peace” (Bachelard 6).\textsuperscript{233} As this reflection on daydreaming once again underscores, the home answers to our demands or lack thereof. Within the bounds of our own projects, we can do as we wish, when we wish.\textsuperscript{234} It is filled with our

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\textsuperscript{233} For Bachelard this ability to daydream in the safe haven of the home is not simply a mark of the home’s ultimate sheltering character. Daydreaming, he argues, is along with thought and experience one of the activities that “sanction human values” (Bachelard 6). He observes that daydreaming is an activity unique to the human being, and that in the daydream, we are able to feel what thought and analysis so often cover over. For Bachelard, then, daydreaming is an essential part to a phenomenological investigation (Bachelard 3-8).

\textsuperscript{234} This is not true of any of our engagements in public places. Even if there are places that we think of as ‘ours’—e.g., a favorite park bench, a chair in a music club, a vacation spot—these are places that we cannot reserve as our own, or expect to be our own. Someone else may be using the bench when we arrive at the park; a ‘full house’ may mean that we have to stand for the night when we go to the club; we may have to make reservations far in advance even to gain access to ‘our’ cherished vacation spot. Even if we can ‘secure’ our place in these destinations, we are not free to do as we wish in them. We must abide by the customs and regulations that these
interests and with our moments of drifting without any explicit interests, and it protects
us temporarily from the interests and demands of others.

These descriptions of the home as that which belongs to us and marks out a space
for us, or, as Bachelard states so succinctly, as “... our corner of the world” (Bachelard 4),
lay the grounds for a further recognition about the home—namely, that the home is
phenomenologically akin to our body. Whether by serving a parallel role to the body or
by being specifically responsive to the body, the home is a second body for us. At the
most basic level, the home is like the body insofar as it, as we have just been describing,
is a place of initial stability and a foundation for the self.235 As Bachelard writes:

“Without [the home], man would be a dispersed being. It maintains him through the
storms of the heavens and through those of life. It is body and soul” (Bachelard 7).236

Beyond these crucial aspects of stability and ‘self-concentration’, we can see the
connections between the home and the body at the level of functionality: The home
keeps our temperature regulated; the home facilitates our needs and interests in ingestion,
environments give to us, and that we may even give to ourselves according to what we think is
proper public behavior. In either case, we are regulated by our surroundings in these situations in
a way that we need not be in the home. Though there may, of course, be rules in our homes—
rules of cleanliness, rules of where things belong, rules of respecting other members of the home
if they exist—these rules are created by and for us. This is not principally true when we are in
our public ‘homes’; here, the demands of others are upon us.

235 Gordon Matta-Clarke’s sculpture “Splitting: Four Corners” seems to push us to notice the
importance of the stability of the home as well as of its enclosed nature. The sculpture consists of
a suburban house that has been split open by means of a V-shaped crack running from the roof of
the house down to its foundation. The crack not only makes a precarious gap in the floors of the
house, it also admits the outside weather and views into the house. Moreover, unlike a door or a
window, the crack cannot be closed or covered; it allows no say in what enters or, for that matter,
what leaves the home (in a gust of wind or beam of light, for instance). These features of the
crack strip the home of its character of soundness, protection, and subjectivity—the latter insofar
as the bare structure of the house rather than the persons who make it home determines the time
and manner of major instances of coming and going.

236 Tuan makes a similar point by noting the trauma that would occur if a house were taken away
from us: “To be forcibly evicted from one’s home and neighborhood is to be stripped of a
sheathing, which in its familiarity protects the human being from the bewilderments of the
outside world” (Tuan 99).
excretion, hygiene, sleep, sex, stimulation, and rest; the home enhances and protects our senses by means of lighting, sound enhancers and buffers, air circulation, and so forth. In these ways, the house acts as an extension of our body and its needs and interests. In his phenomenological study of the human body, Leder supports this point, arguing that “...the very house in which one dwells is both a reconstruction of the surrounding world to fit the body and an enlargement of our own physical structure. Its walls form a second protective skin, windows acting as artificial senses, entire rooms, like the bedroom or kitchen, devoted to a single bodily function” (Leder 34). We are reminded again of both Heidegger’s and Merleau-Ponty’s discussions of the way that objects that we use habitually become incorporated into us.

This interpretation is further supported by considering our experience of orientation with respect to the body and to the house. As we saw in our analysis of the gymnast’s body schema in chapter 3, we know the position of our body and our limbs not as if they were various parts mapped out on a precise grid, but rather as powers involved

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237 Also acknowledging the window to be an outward projection of the home’s dweller, the architect and artist Hundertwasser does not think that apartment dwellers should be forced to live with a ‘static’ window frame, which he sees as a self-erasing, imprisoning boundary. Hundertwasser maintains that a window frame and its surrounding area should be made available to the tenant’s self-expression, so that the tenant and outside observers can rightly recognize the space of inhabitation as an extension of one’s self—as a “third skin” (Hundertwasser 168). To the end of stimulating this self-expression, Hundertwasser established window rights—i.e., “...the freedom for the resident to recreate the prefabricated space of the apartment he is to live in” (Hundertwasser 258). Hundertwasser stipulated in his building contracts that those occupying offices or apartments in his constructions must have the right to alter anything on the exterior of the building within arm’s reach of the window casements. Hundertwasser’s acknowledgment of the window and the outside of the house as a visible skin of the human skin—and one that we should attend to by means of personal ‘decoration’—makes yet another connection between the home and the body—namely, an aesthetic connection. Just as we spend time on (or sometimes neglect) the appearance of our bodies, so too do we do things to make our houses outwardly attractive to us and, we often hope, to others. One could also argue that our acts of cleaning mimic exercising, just as fixing a broken pipe is like mending a bone, throwing the trash out like excreting bodily wastes, rearranging or replacing the furniture like trying new clothes, and so forth.
in action. A person’s fingers move across the keyboard reaching for the word she is thinking, not as individual digits matching up with a pattern of keys that she has explicitly in her mind’s eye. Similarly, the door handle to the bathroom, the number of steps from the first to the second floor, the turn at the end of the hallway, the height of the easy chair, the location of the salt shaker on the ledge above the stove—these all belong to the body. The body knows the way to the bathroom in the dark, reaches for the sugar bowl without looking, sits down without checking the distance to the seat of the chair, and so forth. The home’s articulations are taken up by our bodies, and become as familiar to our bodies as our bodies are themselves. Referring to the work of Ahmed on what it is like to be at home, Mallett writes: “Being at home involves the ‘immersion of a self in a locality’. The locality ‘intrudes’ upon the self through the senses, defining ‘what one smells, hears, touches, feels, remembers’. Equally the self penetrates the locality” (Mallett 79). Here, too, we find a description of the body and the home as ‘melting’ into one another, as co-defining one another.

238 In his descriptions of his experience of home, John M. Hull, who went blind in adulthood, confirms that this sort of knowing is not merely based on our visual sighting of the home’s walls, doorframes, furnishings, etc. The body knows these locations without having to make a case-by-case visual inventory. Hull writes of his own experience: “I walked right through the house from the back door to the front door only touching the walls once or twice. I just seemed to know when to step sideways, when to move forward. The house is an extension of my body. It is like a skin, something within which I can move and which is appropriate for the proportions of my body” (Hull 177).

239 According to Mallett, Ahmed is particularly interested in ways in which this experience of being at home can occur in situations when a person is traveling or when the ‘home’ is changing by means of ongoing new encounters with others—i.e., in situations when there is not a secure or stable ‘objective’ home (Mallett 78-79). Home can, in other words, encompass both movement and strangers, and still have a sense of familiarity (Mallett 78). We can say something similar about our bodies. Our bodies can experience new movements—e.g., ‘internal’ changes and feelings that may come with illness or growth, or ‘external’ activities or sensations that may come with trying out a new form of motion such as dancing or being exposed to something anew such snow if one is coming from a tropical environment—and yet in the face of these new experiences, we can still feel a certain basic ‘at-homeness’ in our bodies. Of course, sometimes these
This alignment of the body and home can be disturbed in many ways, of course. Objects can be out of place; fatigue, illness, or intoxication can offset our perspective; new additions can take ‘getting used to’, and so forth. Yet, this too is similar to our experience of the body. Our bodies can become sore, injured, or ‘out of joint’, making us experience our bodies as awkward or temporarily unmanageable (as we saw in our discussion of Leder’s account of sickness in ch. 4, sec.5). We can lose our balance, perspective, and sensory acuity through various bodily ailments or impairments. And, we can attempt new activities in which our body has to learn anew how to move or respond to our new interest. In these cases of temporary disjunction with our home or body, the possibilities for acting that are usually open to us through our body or home are somehow hindered, and attention is thereby drawn to our body or home. We must work on the body or the home to return them to their unnoticed state, to their state of being powers in which we are engaged rather than of being objects that we notice. Or, in some cases, we must simply let them return to this state—say, in the instance, of letting a stomach flu works its way out of our body, or letting the after affects of a broken water pipe evaporate from carpeting. Even in these cases, we can, of course, play a hand in aiding or hindering these returns to ‘normalcy’.

In any case, it is essential to our ‘normal’ daily experience of both the body and the home that they are for the most part not thematically noticeable to us; the body and the home recede from our attention while we engage with our projects, our ‘habit body’ and our ‘habit home’. Leder again supports this point, observing that, as with the body, “... the experience of one’s own home will be marked by corporeal effacement. As I gaze experiences—whether of the home or the body—can be so extreme that we can feel ejected from our homes, our bodies.
through the windows, they are in focal disappearance, the means from which I look upon the world” (Leder 34-35). In other words, the house disappears like the body so that we can experience and take up that which is beyond the body, beyond the home. Before considering the importance of this movement beyond the home, let us pause first to examine the developmental similarity and connections between the home and the body—as these affect, so we will see, the way in which we venture beyond ourselves, beyond our homes.

Just as we must learn to use our bodies, we must learn to dwell. In his phenomenological study of the home, Steinbock supports this claim, arguing that “[m]aking ourselves at home as our world to which we belong entails more than a ‘subliminal’ belonging, but an active responsibility for setting limits, for repeating, for renewing the homeworld” (Steinbock 227, my emphasis); and, more pointedly, that “[a] home cannot be ‘given’ from any external perspective. Rather, it is generated developmentally and intersubjectively…” (Steinbock 233, my emphasis). In other words, we are not simply given a home and all that it entails; we are responsible for making a home, for making ourselves at home, and this is something we must learn how to do, and that we learn to do with and through other persons. We begin this learning in our infancy

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240 Leder’s book The Absent Body is a detailed phenomenologically-based argument regarding the recessive character of our body in everyday life. Merleau-Ponty’s discussion of the habit body makes a similar point; see esp. pp. 82-85, 144-47 of PhP.

241 Heidegger supports this claim: “The real plight of dwelling [far from being a shortage of houses] lies in this, that mortals ever search anew for the nature of dwelling, that they must ever learn to dwell” (Heidegger, “Building Dwelling Thinking” 161). Heidegger examines the nature of this dwelling in “Building Dwelling Thinking,” and argues that there is no guarantee that we will come to know how to dwell.

270
and childhood—a time when, significantly, we are also learning how to recognize and use our bodies and its powers.  

This education into our embodiment and into being at home, and ultimately, into our way of being in the world begins in the childhood home. Accordingly, Bachelard argues that the home—especially one’s first childhood home—is that which allows us to form our first sense of and grip on the world: “It is the human being’s first world” (Bachelard 7). It is through our experiences of, in, and through this home that we begin to learn how to be ourselves, how to have a home. In our first home, we learn how to walk, how to climb and descend stairs, how to sleep, how to deal with our needs for ingesting and excreting, and how to secure and manage countless other bodily powers. Simultaneously, our first home is also the place where we learn how to put things in their ‘proper’ place, what it means to have belongings, how to care for and clean our surroundings, how to have a room, how to relax and play as well as to do work of various sorts, and so forth. Equally, this is also the place where we learn to speak, to communicate with others, to share (or conceal) joys and pains, to make plans with others, to simply be around people, and in doing so to be involved with them or to be involved in a ‘private’ undertaking, and so forth.

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242 We made a related point in chapter 3. There we saw that the child’s sense of self and of spatial differentiation develop together, and do so as the child learns about the limits of her own body. This connects with the present discussion of the home insofar as I am claiming that the child’s ability to dwell, to have a home, is wrapped up with her developing bodily abilities. I am proposing that to learn to have a body is in certain strong ways to learn to be at home.

243 Marcus writes of this point: “If our dwellings in adulthood are those settings where we are most at liberty to be ourselves, where we don’t have to put up any facades, then this process clearly begins in childhood” (Marcus 26).

244 Heidegger writes of the importance of a home that is built to reflect all of the stages of the human life—from birth to death—by including spaces both for the child’s crib and the coffin as well as the areas for daily adult activity. Such a home teaches or reminds us explicitly or subconsciously of the expanse and breadth of the human life. See the closing passages of his essay “Building Dwelling Thinking” (esp. p. 160).
These multifaceted aspects of our personhood and their connection to our home are even acknowledged—albeit unconsciously—by children in their activity of ‘playing house’—a “place-making” activity that Marcus maintains is “...almost universal in childhood, regardless of culture, social context, or gender. They are part of the process of growing up” (Marcus 23).\(^{245}\) One way in which children ‘grow up’ is to create their own homes-away-from-home, like homesteads on the frontier. In playing house, children seem to be implicitly recognizing that having a home is something that one must learn to do, that one can do in different styles, but that must include certain essential features, and that one is shaped thereby. We can see this in the way that to play house, children take on different roles and personalities, set up different rooms of a house, partake in various household activities (including that of leaving the home to go to work, to go shopping, etc.—a point that will become more significant further on in our analysis), invite others into the home, etc.\(^{246}\) In doing so, children often mimic what they see in their own homes or perhaps at friends’ homes.\(^{247}\) Other times they surely improvise—perhaps acting in contrast to what they tend to see, or perhaps in longing after some ‘ideal’ home about which they may dream; but, even if by way of contrast, the roles, the issues, the set-up of the play house are most likely influenced by their most familiar surroundings, their own

\(^{245}\) Rasmussen (2004) emphasizes that “places for children” are different than “children’s places”—the former being places that adults have created and designated for children, while the latter are places that children themselves create and maintain, and that may or may not be recognizable to adults. “Children’s places” are elemental in children’s daily lives, according to Rasmussen; these places offer children a ‘break from’ adult places, and are often the places in which children’s most active and intense playing takes place (Rasmussen 161-62, 166, 169-70).

\(^{246}\) See Winnicott’s chapter “Why Children Play” in his book The Child, the Family, and the Outside World for a general discussion of the role of play in childhood development. His chapter “First Experiments in Independence” in the same book also provides a helpful and related discussion of the character of the initial ventures of children acting and experiencing the world on their own.

\(^{247}\) Cobb confirms that the “dramatis personae” of the child’s personal play are most immediately herself and her parents, and next in importance any siblings she may have, and so on (Cobb 30).
homes. Marcus encapsulates these effects of our first home on shaping who we are when she asserts that “...the childhood dwelling and its environs is the place of first getting in touch with who we are as distinct personalities” (Marcus 33). We can state this point even more strongly, concluding that our ‘personalities’ and our very ways of perceiving the world are built in and through our childhood homes.248

As such, whether we show signs of continuing the ‘traditions’ of our childhood home or show signs of turning distinctly away from them, we are ‘marked’ by our first home in terms of how these self-developments will unfold. Our childhood home, in this way, makes its mark on our future way of being in the world.249 If our childhood stairs were creaky, for instance, we may tend to tread lightly when climbing all future sets of stairs. If the den in our childhood home was a place for quiet and private study, we may tuck away our own office space in an out of the way space, or perhaps we will never quite feel comfortable listening to music or sharing a table with another while working. On the contrary, we may find that the oppressiveness of that quiet den has made it undesirable for us to ever create a designated space for quiet study in our own adult home. If emotions of pain or conflict were hidden behind closed doors in our childhood home, we may continue to hide these away as adults, or, in rebellion against such secreting practices of our childhood experience, we may find ourselves displaying such

248 Porteous and Smith quote an environmental psychologist who argues that our childhood homes “...put a permanent imprint on our neurological abilities; ‘You think it only translates into preferences, but it actually affects our nerves’” (Porteous and Smith 47 quoting from Kyriakos, M. “What’s Home is Where the Mind Is.” Victoria Times-Colonist (9) (1994)).

249 Marcus also supports this claim that our original home experience informs our future ways of living, writing: “Either we mirror what we saw and experienced in our childhood home, or we react strongly against it” (Marcus 82). Her book Home as a Mirror of Self presents numerous case studies of the relationship between persons’ past and present homes. And, Bollas at least indirectly supports the point when he writes: “The body memory conveys memories of our earliest existence” (Bollas 46).
emotions freely in the most public of places. Though not speaking explicitly about the
childhood home, Steinbock supports the claim that our home shapes our ways of being-
in-the-world (regardless of whether we would elect this to be the case). In doing so,
Steinbock, too, makes a strong connection between the body and the home, arguing that
even our perceptual powers are shaped by our home experience. He writes:

A homeworld is privileged because it is that through which our
experiences coalesce as our own and in such a way that our world
structures our experience itself. This constitutional privilege of course is
indifferent to whether we like it or not, or to whether it makes us happy or
miserable. The point is that the norms that guide the homeworld are our
norms, our way of life as that to which we have accrued. Even our bodies
take on the styles and habitualities of comportment unique to our cultural
values. Aesthetically (in the literal sense), it structures our way of seeing,
the sounds and tonal ranges we hear, familiar smells and the odors of our
bodies (Steinbock 232-33).

This supports our point regarding the childhood home and its structuring effects, insofar
as we frequently find examples of people growing up to like and dislike certain foods or
tastes—and, in some cases, to be either notably capable or incapable of ‘stomaching’
such foods; to be varyingly sensitive to certain types of music, different accents, and to
entirely distinct forms of language; or, in more specific examples, to be capable of
detecting that a person is entering insulin shock, of distinguishing dozens of different
types of spices, snow, etc., of being almost immediately and continuously aware of where
the entrances and exits of a building are, of seeing where lies the one tiny mistake in a sea
of knitted stitches, and so forth.\textsuperscript{250} As these examples illustrate, our childhood home has, in Bachelard’s words, “...engraved within us the hierarchy of the various functions of inhabiting. We are the diagram of the functions of inhabiting that particular house, and all the other houses are but variations on a fundamental theme” (Bachelard 15, my emphasis). Steinbock concurs, directly linking our lived experience of our bodies with that of our homes, such that it is not merely future homes that bear the shape of our first home, but as we have been arguing already, “[i]ndeed, this is so much the case that it might not be too strained to speak of the lived-body precisely as a ‘home-body’” (Steinbock 232-33).\textsuperscript{251} The home, in short, serves as a type of developmental and extended embodiment for us.

This account of the impact of our childhood home on our future experience of dwelling once again underscores the body’s essential role in the development of our spatiality. Returning to Merleau-Ponty’s analysis of levels, we can make this point

\textsuperscript{250} Tuan offers helpful examples of perceptual potentialities that we may or may not have depending on the culture and environment in which we live and were raised (See pp. 75-79 of Topophilia.).

\textsuperscript{251} Blunt discusses research on traditional courtyard houses or “haveli” in Jaipur, India, which are created according to principles of “Vastu Vidya,” which dictate the proper orientation of the architectural layout of a home and also the appropriate activities for each part of the home (Blunt 208). According to one researcher, Vastu Vidya directly connects the home and the body: “Vastu symbolically and functionally connects the body of the individual with the spaces of the home and the cosmological context” (Blunt quoting Bryden, 208). While I am making an even stronger point about the connection between the home and the body than this, the very existence of principles of home-making and –shaping that take the body into account serves to bolster my argument that the home is a further skin, so to speak, of the body. Feng shui is another example of a practice of aligning the home according to principles that in some ways attend to the body. A possible criticism of these practices arises from their externally-given dictates as to what makes a successful home. As my argument already suggests, the home, while having certain ‘elemental features’, is also importantly a developmental and personal construction—a construction that cannot be simply given to us or locked into place if it is to function fully as our home. While home-making principles or guidelines need not infringe upon our development of a home, they certainly can do so insofar as they can settle things in advance that may otherwise have been sites of an important development of the self, of one’s relations to others within the home, of one’s relations to the world beyond the home and others beyond the home, etc.
regarding the ‘educational impact’ of the childhood home more explicitly with respect to our spatial experience. Tied up in our habits of dwelling, our body’s first spatial levels develop through the childhood home.\textsuperscript{252} As we saw in our earlier analysis of spatial levels, our way of opening onto a world reflects the possibilities within our power for engaging that world, and these possibilities are shaped by our intersubjective relations, by our personal histories, as well as by the particular ‘givens’ of our body and its capacities, and these insofar as they shape our ‘grapplings’ with our surroundings. How these ‘grapplings’ occurred in our childhood home inform us—that is, they habituate us to certain ways of doing things, to tending to open onto or to close ourselves off from certain possibilities. We carry the possibilities opened by (or restricted by) these spatial levels with us even when we have left behind the ‘objective’ home in which they were formed. Heidegger, we will remember, makes a related point when he argues that our “making room” for things is what makes possible our sense of orientation in the world (Heidegger, \textit{Being and Time} H.111, M/R 146). The world is both “given space” and also meaningfully articulated for us through this orientation we have developed by means of the way we are in things. In other words, we both have a world and find our ‘footing’ in the world by means of our developed (and, of course, continually developing) ways of being in things—a development that, once again, necessarily begins in our childhood. In these arguments regarding the role of the home in shaping our spatiality, as well as in our earlier examples regarding related ways in which the home shapes our way of being-in-the-world, we see the important way in which the home plays a pivotal role in enabling

\textsuperscript{252} Informed by a psychoanalytic perspective, Bollas argues for a similar point: “The way in which we position ourselves in space and in time may partly reflect how we were originally situated spatially and temporally in relation to our parents” (Bollas 45).
us to move into a larger world and to take on different spatial levels. Let us now turn to consider this outward-enabling and thrusting character of the home.

We will begin this investigation by considering Deleuze and Guattari’s characterization of the home, and particularly of the childhood experience of leaving the home and the importance of ‘taking a piece of the home’ with oneself in the ‘shape’ of a song. Resonating with our analysis up to this point, Deleuze and Guattari write that by means of the home “[t]he forces of chaos are kept outside as much as possible, and the interior space protects the germinal forces of a task to fulfill or a deed to do” (Deleuze and Guattari 311). Deleuze and Guattari connect this centralizing power of the home to that of the centralizing, calming, and, ultimately, emboldening nature of singing a song. To begin their analysis of this power of song, they describe the comfort that comes to a lost child by means of the song:

A child in the dark, gripped with fear, comforts himself by singing under his breath. He walks and halts to his song. Lost, he takes shelter, or orients himself with his little song as best he can. The song is like a rough sketch of a calming and stabilizing, calm and stable, center in the heart of chaos. Perhaps the child skips as he sings, hastens or slows his pace. But the song itself is already a skip: it jumps from chaos to the beginnings of order in chaos...(Deleuze and Guattari 311).  

253 In Danielewski’s novel House of Leaves, which is about a mysterious home in which unexplainable expanses of cold, dark space appear and disappear, it is significant that the protagonist, Navidson, lost in an apparently unending track of this space, having used up the last of his artificial light sources (and thus plunged into absolute darkness), and seemingly in his dying moments, ceases to think about his pain, his impending death, his life regrets, etc., and begins to sing a song. In this act, “...Navidson becomes almost light hearted, for a moment losing sight of the question of his own end, his own past, derailed by some tune now wedged in his head, drifting up from out of the blue, one he can remember but cannot quite name: “Something like...I
Here, we see that the child’s song provides a much sought after order for the child by laying down a familiar ground on which the child can begin to feel steady and oriented. Deleuze and Guattari’s analysis suggests that the comfort found through the song in this way is not simply coincidental or one of many like comforts. Sounds of a home—and especially those of a sonorous, song-like quality—reverberate off the home’s walls and, thereby, reinforce the experience of a safely enclosed space, of a familiar sounding place. In this way, the song reinforces the home. Deleuze and Guattari offer examples of this power of the song:

think, hmmm...Kinda like...[Coughs] [Coughs again] Now I find I changed my mind and opened up the door...” (Danielewski 476). Not only is this act of singing a way of forming some sort of protective and comforting atmosphere for himself amidst the black nothingness of his surroundings, but it also happens to be the activity that directly proceeds Navidson’s sight of light somewhere off in the distance—an occurrence that brings hope in what has otherwise been an expedition (disintegrating into a marooning) into an otherwise completely dark territory. While a fictional story, this narrative brings out the character of strength and grounding provided by singing a tune or even straggling bits of a tune. Certainly we see examples of this with some regularity in persons, who when nervous or alienated from their surroundings or surrounding persons, will whistle or hum often without even being aware of their doing so.

At some level, Deleuze and Guattari’s analysis as well as my own presumes that song is an integral part of the lives of children and adults in general. This presumption is less bold than it might initially seem to be, since Deleuze and Guattari’s analysis as well as my own do not rely on the fact that there is a particular form of song that all people know or sing. Song can include humming, tapping, skipping, creative vocal utterances or noises, rhythmic patterns of words and sounds, dance and movement patterns, and so forth. Song can be made through one’s mouth, one’s hands, one’s feet, one’s body as a whole, as well as through instruments, available objects, and acoustically responsive surroundings. Cobb argues that “[w]hat differentiates the human from the animal exploratory behavior is the human need to express in temporal experience by giving it continuity and sequence in narrative (i.e., story form). Even a tiny baby “talks” to himself sequentially before experience has semantic meaning” (Cobb 50). Though Cobb does not refer specifically to song here, I would argue that her observation on the human activity of creating a narrative in response to and even during our exploratory experiences is akin to the observation that Deleuze and Guattari as well as I am making about song. The prevalent rising and falling pitches of a baby’s cooing seem to underscore this point. Song—in a plethora of forms and formats—is, I would argue, a general human means of expressing and accompanying our explorations in the world. That said, I acknowledge that the general assumption that the explicit act of singing is a constitutive part of people’s developmental lives does not hold for all people (explicitly or even in unconscious ways) or for all cultures.

In his novel As For Me and My House, Sinclair Ross traces the thoughts of a woman struggling in an uncommunicative marriage. Significantly, her marriage marked a departure from her earlier interests in pursuing a career playing piano—an ambition she described as arising out
A child hums to summon the strength for the schoolwork she has to hand in. A housewife sings to herself, or listens to the radio, as she marshals the antichaos forces of her work. Radios and television sets are like sound walls around every household and mark territories (the neighbor complains when it gets too loud) (Deleuze and Guattari 311).

They emphasize this territory-marking aspect of the song in still further examples: “Bird songs: the bird sings to mark its territory. The Greek modes and Hindu rhythms are themselves territorial, provincial, regional” (Deleuze and Guattari 312). To this list, we can add a particularly potent example of the reinforcing connection between a song and one’s home by considering the role of song for the Yupno people of Papua, New Guinea of “…an opportunity to work and develop myself” (Ross 22). In spite of the fact that within her present life her music serves as a means of comforting herself, of expressing her own often silent voice, or of attempting to make a connection with her husband, when she is particularly alienated from her husband, so too is her experience of her music and, pertinently, of the house. At one such moment, after having a quarrel with her husband, she writes the following:

I hate this house. ... The ceilings are so low; they’re such sly, crafty-looking windows. The way we’re crowded close against the church the light comes colorless and glum all afternoon. It’s hard to laugh or speak naturally. I find myself walking on tip-toe, setting things down with elaborate care lest they let out a rattle or clang. Even the piano, it seems oppressed and chilled by the cold, dingy walls. I can’t make it respond to me, or bring it to life. ... Some part of me is in protest. I can’t relax, can’t accept it as home. There’s something lurking in the shadows, something that doesn’t approve of me, that won’t let me straighten my shoulders. Even the familiar old furniture is aloof. I didn’t know before it was so dull and ugly. It has taken sides against me with the house. I hate it too (Ross 34).

In another scene in the novel—arguably one of the most tense scenes of the story—the woman’s husband accuses her of attempting to impress another man with a particular musical performance, of pointedly turning her back on their home; this accusation stands in complete contrast to her own intention, which was to do everything possible to please her husband through this performance (Ross 189-92). Her preparation for and performance of the piece under discussion was marked by a nervousness and sense of defeat that matches this mismatch between the home’s two dwellers; it is as if her music, a product and reminder of her first home, is now riddled with the same tensions infecting the home she makes with her husband. This close connection between this woman’s experience of home and music further emphasizes Deleuze and Guattari’s characterization of the home-like character of song. In this case, however, the song that should be a protective extension of the home is brittle and troubled, matching the character of the home from which it arises.
(Wassmann 651). In this culture, each person has a personal tune that has been given to the person in a dream or else created by the person. This song is learned by all the people who know this person. Whenever a person approaches or passes by another’s home, she sings the song of the home’s owner and, thereby, identifies herself as a friend—that is, as someone who knows this person, this home, this song. In this culture, then, a person’s very identity is wrapped up with her song as much as it is with her home. The home, the song, and the person are together the way the Yupno person is being-in-the-world. In all of these examples, the song in some way strengthens either one’s own or others’ sense of the home.

The song is not, however, simply a means of reinforcing the familiarity or the identity of home. It is also, Deleuze and Guattari maintain, the means by which we can leave the home. As they write: “One ventures from home on the thread of a tune. Along sonorous, gestural, motor lines that mark the customary path of a child and graft themselves onto or begin to bud ‘lines of drift’ with different loops, knots, speeds, movements, gestures, and sonorities” (Deleuze and Guattari 311-12, my emphasis). Here, the “customary paths” of the child are those that the child has formed within and through the safety of the home; and it is, by bolstering himself with these familiar ways of doing things that the child is able to ‘drift’ into new spaces and new ways of doing things. The song enables the child to strike out into new territory by giving the child something familiar to carry with him. Deleuze and Guattari’s analysis appeals to the way in which the song is like a ‘portable’ home. The song offers a means by which the protective enclosure of the home can be carried with a person; or, if not capable of offering this full protection, it at least allows a person to leave behind the comforting
walls of the home bravely by means of its familiar and, thereby, protective company. The song is one’s own and through its familiarity, through its means of offering us an extension of the home’s protection, it allows the singer to find or forge her footing and orientation in new surroundings. Deleuze and Guattari use the notion of improvisation in music to illustrate this point. Describing the moment when we leave the protective enclosure of the home, they write: “One launches forth, hazards an improvisation” (Deleuze and Guattari 311). We can understand their metaphor more fully by considering what it means to improvise. When a musician improvises, she typically begins with some basic musical trope or theme or at least with a sound produced either by oneself or by others with whom she is improvising. From this starting point, she then launches off into an unscripted creation of music, attempting to keep some degree of coherence by holding onto the original theme either directly or in degrees removed, but somehow connected to this original theme. In improvising, the musician is entering an unknown musical territory, letting herself be open to something as of yet undetermined; yet, she is doing so, ideally at least, with the guidance of some pivot, some inspiration. Deleuze and Guattari compare this experience to the way in which we go into the world, writing that “…to improvise is to join with the World, or meld with it” (Deleuze and Guattari 311). In doing so, they seem to suggest that our way of being-in-the-world involves a necessary mixture of the known and the unknown, of the home and the beyond.

Before picking up on this aspect of Deleuze and Guattari’s analysis of the song, let us pause for a moment to extend our discussion of the song as offering us a ‘portable home’ to the home itself. Just as our bodies and our ability to find orientation through
our bodies serve to open us up onto the world and varying spatial levels, we saw that the childhood home, insofar as it is intimately tied up with these developments of our body, is also responsible for providing a form of habituated orientation for us. In and through our homes (especially those of our childhood), then, we develop certain ways of doing and perceiving things, and we carry these tendencies with us into our future homes as well as into the world. As Steinbock argues: “Simply because I move about, leave my geographical location entirely, or change my residence does not necessarily mitigate the impact of home, nor does it mean that I simply leave its geology behind. It remains in my daily customs of eating, the types of foods I prefer, my measure of distances, in my language, etc.” (Steinbock 234). These “customs” are part of what allows us “to be at home” when we are not actually in our homes. When we talk of people being able to make themselves at home someplace, we are pointing to an important and productive ability of finding a way to make a somewhat (or even very) foreign place their own, of at least temporarily finding a personal pattern or means for moving about in an otherwise unfamiliar situation. A person with a developed habit of reading, for instance, may carry a book with her if she anticipates needing to sit alone at a restaurant or fill time waiting for someone; a person from a very ‘chatty’ household may in the same circumstances rely on his skills of ‘small talk’ to engage people around him he does not know; other people may bite their nails, flip through a calendar, assess the design of the establishment’s ventilation system, listen in on others’ conversations, and so forth. In each case, the person draws on some familiar habit or interest to find a way of settling herself into a surrounding that does not belong to her. The person has carried her home, so to speak, with her. Children, who arguably have not formed completely developed “home bodies,”
will often bring a tangible piece of the home with them to make themselves more comfortable—a stuffed animal, a favorite toy, a security blanket.\textsuperscript{256} Like the adult’s customary ways of being, this reminder of home offers the child something to which to anchor herself until she is settled into the new situation.

Given enough time or even through the intensity of a particular experience, we can develop certain attachments to other places that make these feel particularly personal to us, and, thus, like a home away from home. We might, for example, have a particular bench in a park where we have returned for years to visit with a friend; we might have a regular music club where the staff even know our typical orders, and where two or three tables are the expected spots where we will sit; we might have a vacation destination that we began visiting as children and continue to enjoy visiting; we might have friends’ homes in which we feel comfortable behaving close to the ways we would if we were in our own home. In any of these cases, we have marked these places with our own habits, interests, and history. We have brought our rhythm of doing things into this place, and made it a second home for ourselves. This ability to expand our home in this way is essential to our lives. As Marcus writes: “Like any living being, humans need not only a nest or a dwelling, but a whole ecological setting in which they can feel ‘at home’” (Marcus 214). Feeling at home when we are away from home allows us to do things that

\textsuperscript{256} We can see a similar ‘carrying of one’s home’ in Blunt’s description of research on the home experience of South Asian women living in London: She describes research that supports the notion that these women experience their homes as extending to their original homes in Asia by means of the family photographs, religious iconography, and images of South Asian landscape features with which they have filled their London homes (Blunt referring to the research of Tolia-Kelly, 208-9). This example supports the idea that we can carry our homes with us by means of personal objects. While this may happen more obviously and pervasively in childhood (e.g., in a child who goes nowhere without his ‘blankie’), it occurs in adult life as well. See also Marcus’s discussion of our use of objects (in childhood and adulthood) to make us feel at home (Marcus 72-76, 81-87)
would be virtually impossible were we to feel always ill at ease or to need always to establish new ways of doing things when encountering situations outside the home. At ease on the subway, we make it quickly to our doctor appointment; comfortable in the library, we can work on a paper that needs all of our attention; not worried about the surrounding traffic, we can maneuver our way down the highway at incredibly fast speeds and make our way to a vacation destination. In any of these cases, feeling not at home could be as disruptive to the accomplishment of our interests and goals as an inability to walk without thinking about it, an ignorance of the dominant language around us, and so forth. In short, then, it is not only inevitable that we carry the habits of home with us when we go out, it is also essential to the successful fulfillment of our varying projects and desires that we do so.

In some cases, the habits of our lived bodies, our “home bodies,” can be so deep that we find our home—our way of being in the world—anywhere we go, and thickly so. For example, we can travel to what is ostensibly a new place, but fail to experience it as new, because we have retained our habitual ways of living, our habitual ways of being at home.257 This can happen even if we have sought out what we take to be a truly foreign place—one that we imagine to be far in distance and kind from our home; for insofar as we import our routine ways of looking and our habits of choice into our destination, we

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257 The ease of air travel and the proliferation of chain stores make this transference all the more easy. As a result, we can miss seeing and approaching the people, the sights, and other features that do not fit into our established interests. Traveling with other people or with guides may help to draw us into new ways of approaching a city or place; but it is possible that we will have chosen these companions for their similarity to us and for the comfort we find in the way that these like minded persons are able to offer us a shared way of seeing, moving about, and of creating a certain space. If this is so, these other viewpoints will only magnify the way we tend to see things.
remain rooted in our home.\textsuperscript{258} We do so by seeking out familiar types of areas or establishments, and engaging with them and the people there as if we had never left our point of departure. Consequently, the new place becomes laid over by the level we bring to it. Whether the habituation provided by our home is pervasive like this or is subtler in its orienting effect on our experiences, these examples serve to illustrate that we can and regularly do travel beyond the ‘objective’ home (and sometimes by great distances and into greatly different circumstances) without ever leaving behind the shaping influence of our home.

Implicit in these discussions of the home (and of the song) as enabling us to strike out into new territory is the recognition that we are indeed encountering something that is not home. That is to say, at the same time that the home provides us with a stability and centralizing force, it is also the place of initial contact with the ‘outside’ world, with something beyond us.\textsuperscript{259} Yet, there is an even stronger point to be made here—namely, that it is essential to our experience of home that we engage this beyond. Let us begin our consideration of this claim by returning to Deleuze and Guattari’s use of song and improvisation as a description of our experience of home as well as of how we leave the home. In musical improvisation, we necessarily stretch ourselves out from the familiar

\textsuperscript{258} The character Marcalvado in Calvino’s eponymous novel offers a good and admittedly quite common example of this phenomenon. Marcalvado is generally unhappy with his crowded, demanding, unexciting home life, and so he often wishes for and pursues adventures beyond his home. Inevitably, however, Marcalvado is disappointed in his adventures. Though he does regularly encounter events and people that seem new and outlandish to the reader, Marcalvado eventually finds or suffers the sour note of the experience, and returns home as unsatisfied as when he had left. Even when he and his family move from a dingy basement apartment to a bright rooftop apartment, the home is just as disappointing, and so too are his ventures from home.

\textsuperscript{259} Troutman supports this claim: “Soul, body, and dwelling are but expansions and projections of each other. For the house is not merely walls, doors, and windows, but a doorway to things beyond, a ‘capacity’ of the sense and spirit” (Troutman 143, my emphasis).
into the unfamiliar. Even in a song that is scripted, there tends to be an interplay between a ‘home’ note and a ‘tension’ note; without this tension, it can be hard to define the music’s resting point. We can argue that improvising (or song making)—an act that requires some initial starting point, but that also ventures away from it—is also an essential activity of the home. In other words, just as a song typically requires some tension—some move away from its tonic home to make its original ‘home’ not simply interesting, but also meaningful—the home too demands that one leave behind its habitual, familiar terrain, that one go beyond it if it is to become significant as a home. The home as a place of protection and rest can only exist, in other words, if there is something from which one needs protection and for which one needs to regain energy. The home can be the place of familiarity, privacy, and reflection of the self only by standing in contrast to those other things, those other ways of doing things. Steinbock supports these points: “The home is not a one-sided original sphere, but understood as being co-constituted as home by encountering an alienworld...” (Steinbock 182); as such, “...home and alien belong together in a permanent relativity” (Steinbock 183). Thus, in apparent contrast to our earlier observations about the inward turning and private nature of the home, essential to the experience of home is the experience of that which lies beyond, that which is at odds with the private, that which is alien. In her study of the home, Marcus makes a similar point: “Leaving home—and returning—is something we do every day and throughout our lives. The home is the pivot point of these journeys—the beginning and the end. To never leave home is to avoid risks, to refuse to grow” (Marcus 281). Thus, far from being primarily inward turning, then, a home is that which allows us and even demands that we go beyond its familiar and comfortable enclosure—
beyond ourselves.\textsuperscript{260} The home is the place where resources can be built up again and stored so that one can travel into the world beyond the home.

This importance of the other—of one’s venturing away from the familiar—in defining the experience of home is once again captured in the childhood experience. In addition to playing house, children invariably also play something we might call ‘home away from home’.\textsuperscript{261} This type of playing involves setting up a fort or a hideaway, a place that is marked out apart from the house. Even if this playing occurs within the house, it is experienced as a play that separates the child from her regular immersion in the home. In this type of play, the child begins to experience herself as someone existing apart from and defined apart from the home. Secret languages, secret passwords, secret activities frequently mark this type of play. The child is here playing with being or at least encountering the other. This type of encounter is also seen in childhood play that involves engaging with ‘scary’ things or activities. Like ‘home away from home’ play, this often happens within the house or within reach of the house. The child uses the

\textsuperscript{260} Gilman offers an insightful analysis in her novella \textit{The Yellow Wallpaper} of the destruction of the self that comes with being locked up in the self-same ‘home’. In this story, a woman is ordered by her physician husband to stay in a room in an isolated country home to restore her nerves—an order that stands at odds with her own sense that what would help her at the moment is more regular exchange with people beyond her immediate family. During her time of confinement, her sense of herself becomes twisted up in the strange cage- and maze-like patterns of the room’s wallpaper. By the end of the story, she liberates a woman she has begun to see pacing in the wallpaper by tearing the wallpaper from the walls. She ultimately identifies herself with that woman, and blames her husband and her (former) self for having trapped the woman away in the wallpaper. This story exemplifies the problems with closing off one’s egress from the home and, although it is a fictional account, it arguably offers an insightful description of a common historical means of treating ‘hysteria’, and, as such also offers additional support for the claim that our identities are wrapped up in our homes.

\textsuperscript{261} For a discussion of the character of this type of play as well as play that involves confronting fears within the home, see Marcus’s chapter “The Special Places of Childhood” in \textit{House as a Mirror of Self}, esp. pp. 23-32. Cobb also supports this claim that children are involved in an ongoing psychological separation from their parents by means of their exploration of the environment, and that even as adults we only retain a sense of personal identity through a “...continuous interaction or communication between the bodily self and the environment...” (Cobb 30, 66).
security of the house to go into the dark recesses of a rarely used basement or to sit for three minutes in the creaky, cobweb filled attic late at night. In both types of play, the child is pushing beyond the home to encounter something foreign, and doing so through the bolstering effect of the home.

Once again, we see that the child is learning through the home and her activities in the home how to become a developed person. The child is learning how to go beyond the comfortable enclosure of the familiar, how to break away from the self-sameness that is within the home, while at the same time finding something out and even determining something about herself. One woman recalls this ‘lesson’:

As a child, I explore these hidden spaces in order to explore my fears. From within the safety of the house, I can venture to its edges, its perimeters, and, undetected, experiment with facing my fears of the dark, of adults, of a large noisy world.... In this hollow between the self I know and see and the one I do not know and cannot yet see, but sense, I test my own limits and learn my own secrets (Troutman 147).

The child’s encounter with the other in the home is, we can argue, a crucial experience for her own development. She must learn that there is otherness if she is to grow into a

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262 On a similar point, see Russon’s discussion in chapter 4 of Human Experience of the necessary developmental move that a person makes when exchanging (at least some) of one’s “familial narratives” for the less restrictive (but also less comforting and familiar) “social narratives.” His discussion also emphasizes the importance for our personal development of experiencing other ways of doing things, thinking about things, etc. See especially pp. 69-74. Winnicott also argues that the experience of being at odds with one’s own family members is an essential aspect of one’s development. He writes: “Eventually, if one goes back, one can see that these disloyalties [with our family members and eventually those beyond the family], as I am calling them, are an essential feature of living, and they stem from the fact that it is disloyal to everything that is not oneself if one is to be oneself” (Winnicott, Home Is Where We Start From 141). To become oneself, in other words, requires definition against other things, other people. The child experiences this self-definition by encountering the other outside of her home, as well as by
person of her own. She must learn how to grapple with the unfamiliar in a safe setting if she is ever to grapple with the unfamiliar that comes with leaving home—leaving home to play at a friend’s house, to go to school, and eventually to leave her first home to establish one of her own. In doing so, she not only learns about what is unfamiliar to her typical ways of doing things, she also in some cases plays at being other than her home situation: She may do things not allowed in the home, say bad things about her family members, and so forth. Joining at least temporarily with the other allows her to find out who she is and is not, and eventually where and how she will break away (to some extent) from her family home.

Far from being a true break from the home, crucial to these childhood experiences of venturing to encounter a fear or the alien is the knowledge—whether explicit or implicit—that the child has a safe place to which to return, a place that will accept her and support her. There is an important balance necessary here. The home must be something that allows the child to venture out (and actually encourages this at appropriate times and to appropriate degrees), and that welcomes the child in her return. Winnicott describes situations in which a child is insufficiently welcomed home after a frightening experience—an insufficiency that, he argues, can have lasting effects on a person’s future life (Winnicott, *Home Is Where We Start From* 133-41). The process of discovery, Winnicott maintains, requires—especially in childhood—that we can bring it back to a place of confirmation and familiarity. Without this, we are, to return to Bachelard’s phrase, “dispersed beings.” Typically, our return home reveals a very similar home from temporarily making herself other with respect to her own family—through her play away from them, through her secret languages, and so forth.
which we ventured earlier that day, and whether we notice this or not, we are relieved to come back to a place that knows us and reflects us, and that thereby welcomes us.

Of course, sometimes a significant experience we have away from home changes our experience of home noticeably—say, for example, if we meet an exciting new person, if we have a fight with a friend, if we experience the death of someone close to us, if we make a decision to quit or start a job, if we lie or tell the truth to someone in a significant matter, etc. Alternatively, we may return to a house that has altered from within. A companion of ours may be waiting for us with bad news or may have left with no plans to return; the basement may have flooded; a long awaited letter or check may be waiting for us in the mailbox. Through such events, we can come home to a changed house—a house whose meanings that held for us at the start of the day are somehow altered now or even obliterated. Again the comparison with the singing of a song holds true here. In a song, the final notes typically return the listener to the opening cadences of the song, to a resolution of the tension that led one for a time away from this starting place. Returning does not involve returning to exactly the same place from which one departed, since this starting note or chord is no longer quite the same: It has been ‘colored’ by the intervening variations and tensions of the song. Nevertheless, there has been a return to something familiar. By the end of a song, the song’s home has more or less been secured or remained steady, and has usually even been strengthened. Occasionally, this is not true. A song’s starting point can go through modulations so extreme that the ending is a clear departure from the beginning; the original cadence is no longer the song’s resolution. Still, even in the cases of a home or a song that has been ‘disrupted’, there continues to be a strong sense in which the change is rooted in the original situation and
meaningfully different precisely in contrast to the original. We might consider one’s 
overall life trajectory on something of the same model. Though we leave our childhood 
homes, and change many things about how we live, perceive, move about, and so forth, 
we are, as we have been demonstrating, forever shaped by our starting point, our original 
home.

Up to this point, we have, for the most part, discussed the home and the 
experience of the home from the point of view of its inhabitants, but the home is also an 
issue for those to whom it does not belong, for those who look in on it from the outside. 
Equally, these other people outside the home are an issue for the home’s inhabitants. Let 
us now consider how just as the home is something from which we must emerge, the 
home is also something into which the alien necessarily enters.

Like the body, the home is a surface of contact with others. It is, as we saw, a 
“second skin” for us, and, as such, it communicates something about us to others. 
Speaking of the outer features, such as a wall or other boundary marker, that surround 
one’s home area, one scholar of urban planning and history notes that “[a]nthropological 
literature suggests that walls around the places where one or more families dwelt were 
first used for purposes of social identification...” (Marcuse 103). Through our homes and 
the surrounding grounds, people see something about who we are—for instance, whether 
we are particular about our exterior appearance or relaxed, whether we prefer to keep 
things closed up behind curtains and shut doors or to show (or let be seen) the inner 
happenings of our house freely through open windows, whether we frequently have 
people over or keep to ourselves, whether we leave and return to the house frequently or 
tend to stay inside or away from the house, and so forth, whether we have a style prone to
decoration or to austerity, and so forth. Acknowledging the to-be-seen character of the home, we frequently make obvious advertisements about ourselves on the outsides of our homes—a religious commitment through a holiday display or symbol, a political view through campaign signage, a promotion or financial success in a new car parked in the driveway, the presence of children through toys on the lawn, and so forth. In such ways, we actively show ourselves to others through the home.

People do not simply look at our houses to discern who we are; they are also commonly influenced by what we are doing or not doing. One can find whole streets or even large neighborhoods in which nearly every home puts up holiday displays, has an outdoor grill, parks cars inside or leaves them out front, etc. While the idiom “keeping up with the Joneses” may be a tired one, it points to a real phenomenon that exists in the politics of many neighborhoods: People see what others have, and would like not only to have those things, but perhaps to have even nicer things. People also have an interest in their neighbors keeping up with them, since the neighborhood as a whole reflects on each of its inhabitants. One may be embarrassed by or ill at ease living down the street from someone who has garish taste, or perhaps even from someone who is visibly wealthier.

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263 Blunt describes the practice of the Tamil Nadu women in India of making new designs or “kolams” twice a day on the thresholds between their homes and the public roads (Blunt 508). A researcher of these “threshold designs” maintains that these designs arise from the private sphere of the home—and reflect and define it—but do so in a way that invites the public community to look upon this ‘private’ definition: “[T]he presence of the designs clearly signal ‘home’, ‘woman’, and ‘wellbeing’ to the wider community” (Blunt quoting Renate Dohmen, 508).

264 Richard Ingersoll describes a prevalent and quite particular phenomenon of this sort. In an area of West Oakland, California, people regularly place emptied plastic bleach bottles at random spots on the perfectly trimmed lawns of their single-family homes (Ingersoll 254-55). These bleach bottles, nicknamed “dookie bottles,” are meant to (and, in fact, somehow do) discourage dogs from urinating or defecating on one’s lawns. Ingersoll argues that these bottles, which seem to appear on lawns without discussion or suggestion, but merely by example, serve to connect these households not only against lawn-spoiling dogs, but also against nearby communities in which greater degrees of crime and ‘otherness’ exist. The bottles are a sign of fitting in, of being like one another, of being united against a similar ‘enemy’ or ‘enemies’.
than the rest who live in the area. When a new person moves into a neighborhood, neighbors often want to know what the person does, where she comes from, and so forth; while this may be often be motivated by a friendly interest, it is also a sign that we want to know what new element has entered our domain, and that we will feel more secure if that new element fits comfortably into our way of doing things. The new person will often explicitly or inexplicitly gather clues from one’s neighbors and community to help her determine what lies within the acceptable range for these activities. Co-op housing, elite condominium, and gated communities that require applications and background checks for admittance and that specify what can and cannot be done to the exteriors of the incorporated homes illustrate this concern at a very obvious level.

The home, to be sure, offers us an important degree of privacy from the ‘intruding’ eyes of others: As we saw earlier, when we leave the home, we leave a privacy unlike any we can find in most other places. As the house-focused artist Vito Acconci notes, “Public space is leaving home” (quoted in Vidler’s Warped Spaces, p. 135, my emphasis); and, leaving home, means entering the territory that is pointedly not ours, and, therefore, not run according to our own rules and desires. Consequently, we typically feel (and often even consciously recognize) that we are under the pressure of surveillance by others when we are out in public. Yet, as the examples from the preceding paragraph already begin to show, we are under a certain type of surveillance even when we are at home. A brief exploration of Foucault’s discussion of the importance to the state of citizen-based surveillance will offer us a means of considering just how powerful and influential the presence of others is even within our homes.
In *Discipline and Punish*, Foucault argues that modern society, lacking a centralized monarchical power, has a need for a more diffuse way of controlling its members, and that this has led to the development of various surveillance and disciplinary schemas that are rooted in a state’s citizens rather than in a central agent.\(^{265}\) Foucault argues that Bentham’s Panopticon—an architectural structure conceived for use in prisons, reformatories, hospitals, and schools—provides the ideal model for the means by which social norms can be and are enforced. In the Panopticon, inmates (or inhabitants, as the case may be) are habituated to socially and physically acceptable forms of activity by means of regularized work and bodily maintenance schedules, and are habituated to these activities specifically while under the constant view of others. Crucial to the plan of the Panopticon, the inmates of the structure can be viewed by others without knowing that they are being viewed. As a result, the inmates are always aware that they could be viewed at any time, but cannot determine or sense when this is actually happening. This form of surveillance plays the role of both allowing the supervisors to ascertain progress or problems in the inmates’ behaviors, and, perhaps more significantly, of causing the one being reformed to be ever sensitive to the possibility of this scrutiny. The habituation that occurs in the Panopticon is, thus, not only to the activities of work, bodily discipline, and so forth, but also to the sense that one is always being watched and examined by their surrounding community.

Foucault argues that Bentham’s idea is neither a pure ideality nor is it meant as a model solely for prisons, hospitals, or other institutions of social, mental, or physical reform or education. To the contrary, Foucault maintains the Panopticon “...must be

\(^{265}\) For the most pertinent aspects of Foucault’s discussion of surveillance in the modern state, see his chapters “Panopticism” and “The Carceral” in *Discipline and Punish*. 294
understood as a generalizable model of functioning; a way of defining power relations in terms of the everyday life of men” (Foucault 205). The principles of surveillance described in the Panopticon are the very ones at work in the modern state. The modern state relies on a spreading of its disciplinary power, Foucault argues; its realm—the realm of panopticism—is “...that whole lower region, that region of irregular bodies, with their details, their multiple movements, their heterogeneous forces, their spatial relations...” (Foucault 208). It is within the community members that this spatially-diffuse disciplinary action occurs: the looking of civilians at other civilians coupled with the sense that at any moment another civilian (or a ‘justice of the peace’) could be looking at us. Under this pressure, we curb ourselves to the laws and social norms of our community, watching ourselves to make sure we are ‘in line’. Thus, even with no one actually watching us, we act under surveillance: We incorporate its presence into our bodily comportment. As Foucault writes: “He who is subjected to a field of visibility, and who knows it, assumes responsibility for the constraints of power; he makes them play spontaneously upon himself; he inscribes the power relation in which he simultaneously plays both roles; he becomes the principle of his own subjection” (Foucault 202-3). Thus, surveillance becomes the modern mode of ensuring social discipline.266

266 People who avoid this surveillance arouse our suspicion. There is a common image of ‘that crazy person who never comes out of the house’. We see this notion captured in the Tom Waits song “What’s He Building?” in which the protagonist of the song complains: “He’s hiding something from the rest of us/He’s all to himself” and, at the song’s conclusion, “He has no friends/But gets a lot of mail/...What’s he building in there? We have a right to know.” Further examples of the suspicion that people have of those who remain in their homes include the reaction people have to the character of Boo Radley in To Kill a Mockingbird, to Miss Havisham in Great Expectations, and countless other examples of ‘mean old witches’ or recluses in tales of purportedly haunted or evil houses.
Though surveillance is that from which the home ostensibly protects or shields us, Foucault’s discussion of the spatially-diffuse location and direction of surveillance—namely, in each and every one of us, and turned as much toward ourselves as toward others—may very well disrupt this notion of privacy at a fundamental level. Let us briefly take note of some examples that confirm that Foucault’s analysis does in fact serve as an appropriate description for our social living experience. At the simplest level, we can see the occurrence of self-surveillance in our relation to the law. Even when in our homes we must abide by the laws of our society, and, whether or not this is our only motivation, we may very well abide by these laws in part out of the fear of being detected if we are in violation of these laws. We know that neighbors could call the police on us if we have parties too late, play music too loud, have audible fights, etc.; that medical doctors, teachers, or neighbors could order a visit to our homes by social services if they notice unusual markings, behaviors, or illnesses in our children; that city by-law officers could come to fine and give us a ticket if our neighbors complain about our unmanaged lawns, the junk we leave in our front yards, trash that is piling up, the large number of people who appear to be living in our homes; that detectives could show up if our license plates were spotted in or near an accident or crime; that building inspectors could come if neighbors or utility employees notice building occurring without the proper permits or code regulations, and so forth.

The awareness that our neighbors may be watching us on these or other matters is not simply a matter of paranoia. There are protocols for civilians to make a “citizen’s arrests.” There are often signs telling us that our neighborhood is a “quiet zone,” a

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267 In the United States, all states permit persons (in some cases citizens and non-citizens alike) to make a “citizen’s arrest” or a “private person’s arrest” if a felony crime is witnessed by the
“crime-reduction zone,” a “drug-free zone,” etc. Perhaps most significantly, there are myriad ‘community’ organizations such as “Neighborhood Watch” and “Block Parents” that encourage people to ‘keep an eye out’ in the neighborhoods for any ‘suspicious’ behavior elicited not only by foreigners to their community, but also by their very own neighbors. Blakely and Snyder confirm the regular existence and the effectiveness of community-based surveillance in their essay “Divided We Fall: Gated and Walled Communities in the United States.” They argue that the effectiveness of community-based surveillance is acknowledged and utilized at the level of the state’s infrastructure:

...[U]rban designers and planners have recognized that “eyes on the street”—the social control of a tightly knit community—are basic defenses against crime. Today, programs like neighborhood watch and block safe houses offer ways for families in suburbs and cities to build community and reduce crime (Blakely and Snyder 98).

Blakely and Snyder maintain not only that “...protection from violence and other criminal activity largely depends on the active vigilance of fellow citizens,” but also that “...socially based mechanisms are more effective than additional hardware like gates” (Blakely and Snyder 97 and 98, respectively, my emphasis). In this range of examples person carrying out the arrest or if a police officer asked a person to help in apprehending a suspect. Any person who makes a citizen’s arrest is subject, however, to both criminal and civil charges if any violations of the rights of another person occur during the arrest. Grossack, a constitutional attorney, explains some of the basic features of a citizen’s arrest in his online article “Citizen’s Arrest” (http://www.constitution.org/gossack/arrest.htm, accessed July 25, 2006). For an example of a state’s legal code regarding a citizen’s arrest, see California Penal Code Section 837, which can be found at http://law.onecle.com/california/penal/837.html (Accessed July 25, 2006). The University of Oklahoma Police even provide an online form for a citizen’s self-arrest (See http://www.ou.edu/oupd/selfarr2.thm, Accessed July 25, 2006). While it is difficult to discern the seriousness of this particular page on the police department’s website, the webpage at the very least underscores the notion that we are expected to perform some level of self-surveillance when it comes to civil and criminal laws. 

297
and ‘testimony’, then, we find evidence supporting the claim that surveillance of others and of the self within and around the home is both a common experience as well as an effective one with respect to social discipline and crime prevention.

These ‘tangible’ examples do not yet exhaust the means by which we experience others as watching us or informing our behavior. As we saw in both chapters 2 and 3, we exist as interdependent beings. We experience our behaviors as significant and meaningful in light of how others may see them. Sartre offers an excellent example of the way we carry within us others’ views upon us whether or not others are actually present. He describes a man who, in the ‘safety’ of his own apartment, is overcome with shame when he hears what could be the sound of someone coming up the public stairs as he is peering out of his keyhole onto the public hallway.268 The man feels as though “the look” of the other is upon him in spite of the fact that ‘objectively’ speaking this is not possible. Though this example is one in which a person is doing something that some may consider morally objectionable—namely, spying—and so is perhaps particularly prone to feeling the weight of what others may think of him, we can be overtaken by the sense of others’ look when we are admiring how we look in a mirror, considering the outcome of a project we have finished, considering how to arrange our bedrooms (a room that perhaps few will ever see, but that we still arrange in a way that can fill us with a certain pride in how others would appreciate it), etc. Thus, even though we may primarily experience the home as our private place from which we have a privileged and relatively hidden vantage point for looking out onto the world, these examples confirm

268 For Sartre’s analysis of this example and its implications for our experience of self and of valuation, see III.1.iv (“The Look”) of Sartre’s Being and Nothingness, esp. pp. 347-54.
Sartre’s claim that “'[b]eing-seen-by-the-Other’ is the truth of ‘seeing-the-Other’” (Sartre 345).

Looking (as an evaluative form of seeing) is an activity possible only in a being at which another can look: The evaluations made in looking imply the existence of values in which others are co-implicated.269 As we saw in both chapters 2 and 3, perception is interpersonal. Though speaking more specifically of our perception of the things of the world, Merleau-Ponty encapsulates a crucial point we learned in those chapters, namely that...

...we have learned in individual perception not to conceive our perspective views as independent of each other; we know that they slip into each other and are brought together finally in the thing. In the same way we must learn to find the communication between one consciousness and another in one and the same world. In reality, the other is not shut up inside my perspective of the world, because this perspective itself has no definite limits, because it slips spontaneously into the other’s, and because both are brought together in the one single world in which we all participate as anonymous subjects of perception (Merleau-Ponty, PhP 353).

Just as our perspective on the things around us is an interpersonal perspective, so too is our perspective on other people and on ourselves. We look approvingly, with wonder, disdainfully, with curiosity, etc. These are attitudes of shared significance: Others would

269 Sartre makes this point more strongly in saying that it is the look of another upon us that gives us space. He writes: “In so far as I am looked at, I do not unfold the distance, I am limited to clearing it. The Other’s look confers spatiality upon me. To apprehend oneself as looked-at is to apprehend oneself as a spatializing-spatialized” (Sartre 357). This point accords with our arguments that our experience of space develops with and through others, and that we become aware of ‘space’ as an entity apart from ourselves in moments of disturbance (in this case, through the ‘disturbance’ of being looked at.
also approve, feel wonder, etc. at such sights, or they may challenge us on these feelings. Others would look at us with approval, wonder, and so forth if we were to do such a thing. We may even color in embarrassment looking on another’s shameful act, smile in joy in the face of another’s celebration, or feel a sudden fear as we watch another thrust herself into a dangerous situation. Returning to Merleau-Ponty’s analysis of coupling in “The Child’s Relations with Others” and Leder’s notion of “mutual incorporation,” we find ourselves paired or coupled with or mutually incorporated with the other through our looking, and we implicitly know that we are the subject of a similar pairing, and can feel so even when we are ‘tucked away’ in the privacy of our homes. We live in a world in which others are always present, always implicated.

As some of the recent examples have already suggested, we should not think of this surveillance or presence of others as always an undesirably invasive activity or as merely a means of keeping us ‘in line’ with social norms. As we noted at the start of this discussion about the ingress of others into our homes, we regularly invite the investigative eyes of others onto and into our homes. Though we may do this in part in the hope that this general attitude may at some point protect us from some malicious act or to ‘keep us on our toes’, we often simply want others to notice us; we want them to consider how we are different from or similar to them. There is a sense in which this alien presence or alien view serves to confirm us and to give definition to who we are in a way that would not be possible if the home were always a place of interiority and seclusion. In other words, we need the entrance of the other into our home to help us to congeal our experience of home—that is, to actively feel and confirm the self-reflecting character of the home.
Beginning sometime in the 1600s, the home in European society even began to have a designated area—the parlor—where this openness to others was expected.270 Visitors could call upon you here. (Yet, even in this openness to exchange within the home, a private announcement of the visitor’s arrival typically allowed for the rejection of any further advance.) This parlor stands out from the nature of the rest of the home; it is the public space behind which are protected private quarters. Entrance into these quarters marks a shift from being a visitor to being a privileged member—either temporarily or perhaps more permanently—of the home. While a formal public greeting space may no longer be a standard part of the contemporary home, we do tend to have means of bringing people selectively into our homes, and we also tend to have rooms that are generally ‘public’ (such as the living room) and generally ‘private’ (such as the bedroom). We invite friends, family, or business colleagues over to partake in a meal or some form of entertainment. This frequently involves some form of invitation—formal or casual. There is an expected time in which this inclusion of others in our home space will be carried out. We may prepare quite rigorously for this event: We may clean, decorate, hide certain private belongings, prepare food, close off certain areas, plan a particular style or ambiance for the gathering, arrange appropriate activities, and so forth. More spontaneous invitations into our homes typically happen with people who are closer

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270 For a detailed discussion of the changing character of the home and its nature as a private versus a public place, see Rybczynski’s Home, particularly chapters 2, 3, and 5, esp. pp. 45, 59, 77, and 107-8. Rybczynski maintains that in the 17th century the character of the Western house changed quite significantly—moving from being a place that was very much in the public domain—a place in which work mingled freely with family life, a place where many lived together or shared common space—to being a place held in private by a family. When this change occurred, a place for public ingress to the home was retained in the parlor, drawing room, or other designated non-private section of the home. For related discussions of the role of public rooms in private homes, see essays by Nan Ellin and Anne Troutman (esp. pp. 151-53) in Architecture of Fear.
to us, who can to a certain extent become part of our home rather than being a mere 
visitor to it. We say—explicitly or implicitly—to such people: “Make yourself at home.” 
While this can certainly be an artificial social gesture, and, thus, not a true invitation to 
become part of our home, its meaning stands: We are temporarily allowing a foreign 
person into the fabric of our personal world. We may in this case presume that this 
person knows that there are certain limits to how home-like he or she can become. Yet, 
whether we are truly inviting a person into our home or making a temporary and limited 
gesture of partial inclusion, we express in these words the nature of home as something 
that does not belong to others in the way that most places do. We use the phrase “Make 
yourself at home” in contexts in which we expect people to eventually leave this newly 
comfortable situation. We do not, for example, expect a visiting friend to make our home 
his home for good; we expect him to set down temporary roots, but to be able to pick 
these up again and embark again into the world.

While one’s own home is not so transitory, this use of expression “make yourself 
at home” underlines something significant about the character of home that we have seen 
from a variety of perspectives now: Being at home is not a experience of stasis; it is one 
of creation and also of movements that go both outward from the home and inward 
toward the home. The door to the home is significantly a portal that can be closed off

271 Dickens’s Great Expectations offers an excellent fictional depiction of the problems that arise 
in a house that is closed in upon itself. In this story, Miss Havisham ceases at a very significant 
level to live after she is ‘left at the altar.’ She stops all the clocks in her house at the moment she 
finds she has been deserted by her fiancé; she continues to wear her wedding gown; she does not 
leave the house, nor does she keep up the house or, with a couple of particular exceptions, admit 
visitors. Moreover, she raises her adopted daughter, Estella, in such a way as to keep her too 
from wanting or being able to engage successfully with those outside of the house, especially 
with any potential suitor. The house of Miss Havisham is significantly called “Satis House,” 
suggesting a house in which “enough” has occurred, a house in which no more is desired or
and secured, but that also can easily be opened and crossed over. Moreover, this crossing into is not merely something that we, the home dwellers, can do, but also something that others, those alien to our home, can do; and, we in fact want the (actual or virtual) presence and ‘surveillance’ of our friends, acquaintances, non-immediate family members, and even strangers—strangers who could affirm our taste, push us to do better, check us when we are out of line, etc. Yet, as much as we want this ingress of others, we do not want these others to fail to leave, or to stop seeing and respecting the ways we do things here. In spite of all of this discussion of the way that others are in our homes, the home is still that place that at some fundamental level allows us to be free of being self-aware. The home is a place for being ourselves in the mode of forgetting ourselves as beings who are always seen by the other, always defined by the other.

IV. Conclusion

Taking together our analyses of the home as a place of initial stability and comfort, of the development of our ways of being-in-the-world, of supporting and demanding our venturing into the alien, of being co-defined with the alien and of being necessarily entered by the alien, of being both a place of a certain type of protection from the sight of others and of the unavoidable presence of the sight of others, we can now make a more general statement about the nature of the home. The home should not be understood merely as a place for shelter, subsistence, storage, and the receiving of

allowed to develop. This is a sick house. It is, according to our current analysis, a house that ultimately fails to be a home. A home is never satisfied or settled.
various types of contact; it is also the place for enabling our ventures in the less known and the unknown, to encounter the other and incorporate it or react against it. The home is the pivot for the ingressive and egressive character of our way of being-in-the-world. The home reflects our nature as beings who have a necessary perspective—a familiar center that looks out onto the unfamiliar. Like this way of having a home, our way of being entails a self that is always in contrast with what is other, that is always wrapped in the other insofar as we are perceiving and looking beings. On this point, Merleau-Ponty writes: “...[M]y body must itself be meshed into the visible world; its power depends precisely on the fact that it has a place from which it sees. Thus it is a thing, but a thing I dwell in. ... The relationship between my body and things is that of the absolute here to the there...” (Merleau-Ponty, “The Philosopher and His Shadow” 166). Our study has revealed the home to be a spatially manifest model and ground for this way of being, and as such that it is a developmental and enduring structure for our way of having a world and of being spatial in general. As Bachelard writes, and as our analysis has now shown: “All really inhabited space bears the essence of the notion of home” (Bachelard 5). We are now prepared to return to our phenomenological study of agoraphobia, and consider more fully the agoraphobic’s experience of home. We will be asking, Does the agoraphobic inhabit space, find herself at home, in the ways we have just described?
Our analysis of the home has laid the grounds for us to press further into our phenomenological analysis of agoraphobia. I will now bring together these analyses to demonstrate how the agoraphobic’s fears ultimately revolve around issues of the home in spite of the fact that the agoraphobic’s behaviors appear to focus on what lies beyond the home. Overall, I will argue that the lived stance of the agoraphobic reflects a fundamental inability to be at home, and does so not only in spite of the fact that the agoraphobic is often predominantly ‘house-bound’, but also in large part because of this fact. I will claim that these problems arise because the agoraphobic in significant ways has not learned how to dwell, how to be at home.

To make this argument, I will first examine the behaviors of the agoraphobic that distinguish her way of having a home from that which we have discussed above. I will then return to our earlier analysis of the typical family dynamics of the agoraphobic’s childhood to analyze how these dynamics have arguably shaped the agoraphobic’s experience of home. I will use this analysis to consider the problematic consequences that the agoraphobic’s problems with dwelling have for herself as well as for others. Finally, I will use this interpretation of agoraphobia as a disorder of dwelling to strengthen our earlier criticisms of the current methods of treating agoraphobia and also to offer a basic alternative for how agoraphobia should be addressed. Throughout these analyses, I will emphasize the connection between one’s spatial experience and one’s existential situation—one’s way of being-in-the-world.
I. The Agoraphobic’s Experience of Home

Let us begin by examining the agoraphobic’s apparent fears in light of our discoveries about the nature of our experience of home. In our earlier study of agoraphobia, we saw that the agoraphobic tends to feel anxiety when she is outside of her home or other identified ‘home bases’. In order to carry out even the most basic activities, she must typically be in or within reliable reach of these identified home bases. Her fears are, thus, focused pointedly on that which is beyond her home or ‘homes’. Westphal writes that in the case of one male agoraphobic “…the fear begins as soon as the houses leading to an open area increase their distance from him. … A feeling of insecurity appears, as if he were no longer walking secure, and he perceives the cobble stones melting together. … The condition improves by merely approaching houses again” (Westphal 70, my emphasis). For this agoraphobic, then, what counts as fearful is anything outside of the range of a house regardless of whether the house is his own or a stranger’s. While for most agoraphobics safe places are more personally attached than this, this example emphasizes that it is a house—in this case, any house—that enables the agoraphobic to feel secure. It is only when the agoraphobic is in her home or in easy reach of it that she feels secure enough to carry out her daily activities and interests (Chambless and Goldstein 2). Outside of this range, she feels unstable, as if (drawing on the language of Westphal’s example) the very stones beneath her feet were “melting together.” The agoraphobic experiences her home as virtually the only place in which she can find secure ground. Beyond this, her very body begins to ‘break down’; she is
incapacitated.\textsuperscript{272} As a result, the home and whatever minimal places may function as satellite homes for the agoraphobic effectively mark out barriers beyond which the agoraphobic must not or cannot stray, and, thus, also for the most part circumscribe the experiences of the world in which the agoraphobic is able to engage.

Already, then, we begin to see a fundamental difference between the agoraphobic’s experience of home and the ‘normal’ person’s. For the agoraphobic, home is not a place that allows one to recuperate and then to emerge into the outside world: It is almost exclusively a place of refuge. We might go so far as to say that, for the agoraphobic, home is a place that ideally would have no doors, no intimations of the possibility for excursions into or intrusions from the beyond. Even though the healthy person may identify some particular place as ‘home’ and may often long for this home as a place to find rest and a certain security, the healthy person generally possesses a fluid ability to be at home or to make herself at home in a diversity of situations. By contrast, the agoraphobic’s experience of being at home is one of rigidity and stasis; her possibilities for being at home are rigidly defined and constricted to her particular set of safe places. Home is almost entirely a place of refuge and retreat for the agoraphobic, not, as it is for the healthy person, a supportive base from which projects can be launched.

If we consider the agoraphobic’s relationship with her home further, we will see that the agoraphobic’s preoccupation with her home is a constitutive element of what we can rightly identify as an existential problem of not being able to venture freely into the world. To make this point, let us first reexamine the ‘normal’ experience we have of the

\textsuperscript{272} For a discussion of the debilitation experienced by agoraphobics when outside of their homes, see Davidson’s Phobic Geographies, pp. 62-65, 82-84, and 100-1.
home—specifically, the way in which we experience ourselves in relation to the home both when we are away from it as well as when we are within it. We will start by considering how we experience the location of our home in relation to where we are. For the most part, we know where home is without thinking about it. People frequently end up at their homes without being able to recollect exactly how they got there, and sometimes they even end up at home or heading toward home when they have intended to go elsewhere. This is not a matter of our being ‘absent minded’, but rather a sign of the home’s unthematic, but continuously orienting presence in our experience of the world. We have a ‘habit home’ like we have a ‘habit body’, and these are, as we have seen in chapter 5, very much connected. Just as we pointedly are not thinking of our body and its movements in most of our daily activities, we do not typically need to think of where our home is when we are ready to return to it: we simply head there.\footnote{This recalls our discussion of Heidegger’s analyses of regions and directionality in ch. 2.}

Moreover, we do not even generally think in any explicit way that it is now time to return home, or question if returning home is what we ought to do when we are done with our various activities out in the world: we simply do this.

The home, then, is not for us like an ‘objective’ location—something to which we calculate and consider the distance—but rather, like our bodies, is a lived resource. Appealing to the experience of “primitive man,” Merleau-Ponty confirms this description of how we are fundamentally related to the location of our home:

For primitive man, knowing the whereabouts of the tribal encampment does not consist in locating it in relation to some object serving as a landmark: for it is the landmark of all landmarks—it is to tend towards it as toward the natural abode of a certain peace or a certain joyfulness, just
as, for me, to know where my hand is is to link up with that agile power
which for the moment is dormant, but which I can take up and rediscover
as my own (Merleau-Ponty, PhP 285).

As with the gymnast who does not think of where her foot is with respect to her leg or to
the beam on which she will land, we do not typically find or identify our homes on the
basis of a geographical map or by means of the number on its front door.\textsuperscript{274} We
experience our homes as a resource in the background, as the comfort that we know is
there when we need it and so needs no second thought. The home largely slips into the
background of our daily life. Making a similar connection between the “disappearing”
nature of the home (and even larger neighborhoods) and the body, Leder writes: “I live
in bodies beyond bodies, clothes, furniture, room, house, city, recapitulating in ever
expanding circles aspects of my corporeality. As such, it is not simply my surface organs
that disappear but entire regions of the world with which I dwell in intimacy” (Leder 35).
The home, like the body, is an \textit{essential} background presence; it is a resource that allows

\textsuperscript{274} This notion can be both obscured and supported by examples of contemporary housing
communities in which there is a sea of nearly identical house models. On the one hand, even in
such a setting, it seems unlikely that a person would need to check for her house number to know
which of the virtually matching homes is hers. On the other hand, it seems likely that in this
wash of excessive similarity, there would at the very least be an heightened sense of alienation in
light of the lack of differentiation of ‘my’ home from ‘your’ home—an alienation that could, one
can imagine, lead to an instance in which one would in fact need to search for one’s home like
one searches for one’s hotel room—i.e., by means of numerical clues or map-like patterns. There
are, in fact, complaints about disorientation occurring in ‘constructed’ ‘ideal’ cities (or smaller
sub-communities)—cities designed to be ‘logical’ and to have few specialized or quirky features.
Designers of such cities learned after the first less-than-fully-successful attempts that
differentiation and unique buildings or road shapes and types were essential features of both an
easily navigable and memorable city—i.e., essential if people were to be able to move about in
them without thinking about their movements. On this point, see, for example, Holston’s analysis
in The Modernist City of the “defamiliarization” and disorientation that comes with the
featureless and grid-like city system of Brasilia, Brazil. In his chapter “The Death of the Street,”
Holston speaks particularly to the importance of unique street names, storefronts, and landmarks
for inviting people to ‘know’ the street, and on pp. 148-49, he speaks specifically of the difficulty
people have in remember a store or location without such markers.
us to encounter and engage the world. Yet, just as importantly, the home, like the body, is also essentially in the background. In other words, as we argued earlier regarding the importance of the body’s disappearance, it is crucial for us that our awareness of home slips from our conscious attention; since, as Leder says of the body and, by extension, of the home: “The body conceals itself precisely in the act of revealing what is Other” (Leder 22). Without the ‘disappearance’ of body and home, we would not be able to be involved in and concentrate on the projects that extend beyond ourselves. We must and do let go of our awareness of the home in order to venture into the world beyond our familiar territory, beyond what is self-same.

Similarly, when we are within the home, we do not tend to notice our positions within it. We do not need to think of where our body needs to go to get the cup off the shelf in the kitchen downstairs; we simply do this, and likely do so while carrying on a conversation or while still engaged in the work we have objectively speaking left behind in the other room. Our movements throughout the home are typically so ‘natural’ that they are almost like the rhythms and capacities of our body. We leap up the stairs three steps at a time without pause, walk to the bathroom in the sightless night, wander into the kitchen and begin eating a snack without ever intending to do so, flush the toilet handle in just the right manner so that the water does not keep running, and so on. This is a highly

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275 We, of course, have experiences in which the home is in the foreground of our attention. We may be considering renovations to it, dealing with a sudden problem in it, extremely fatigued and noticeably longing to be able to return to it, suddenly lost in an unknown part of town and trying to figure out just how to get from where we are back to it, excited about some new furnishing there or meal we will cook there later tonight or some person who will be coming over to visit us there soon, and so forth. In these cases, we are turned toward the home in a way that takes up our attention—in some cases in irritating or taxing ways and in some cases in pleasant ways. One way or another, the home has become an explicit part of what we are engaged in, and as such this takes away from other possibilities for engagement that we might otherwise have had (even while in some of these cases it may do so welcomey).
attuned relationship that we have with the home—one that does not require the explicit attention of someone who is new to a place, and who therefore has not learned how to jiggle the lock to get in the door, who is likely to trip on that funny loose step, who does not know to step on the cupboard molding to get an extra lift when trying to reach the dishes in the back of the cupboard, etc. Our home for the most part is the place that does not require such discovery or manipulation; it is discovered and settled, and accordingly slips into the background of our daily experience.

There is still a further way in which the home typically plays a role in letting certain aspects of our lives slip into the background. As we saw in our earlier analysis of the home, the home is a place where we largely feel free from the gaze of other people. When we are within the home, we tend to be less ‘self-conscious’. We can let go of the concerns about our appearance as well as our manners of speaking and acting, and simply ‘be ourselves’. Though, as we also saw above, there are serious exceptions to the following claim, we do not for the most part feel the ‘look’ of the other upon us in the home. As a result, we are freed up to engage in the most personal activities of our lives—close conversations with other people, taking care of our bodies, engaging in sexual activities, sleeping, giving full range to our emotions, playing, pursuing our work and our hobbies, etc. Surely part of our comfort arises from the fact that our home has walls, doors, and windows with curtains that can be drawn. Yet, even when windows are not covered, or when we are in our backyards, or when we are clearly loud enough to be heard by a neighbor through the walls, we still tend to have a sense that we are in a private place of our own, in a place where we are entitled to pursue our ‘own thing’. We temporarily ‘forget’ or feel free of the look of the other. We can pursue ourselves freely
like this principally because of the home’s self-enclosing, self-privileging, and familiar character. The home establishes a territory in which we feel ourselves and also feel left to ourselves, allowing the other to slip into the background of our experience.

For the agoraphobic, these descriptions of the background character of the home are largely untrue. Perhaps most significantly, the agoraphobic is constantly aware of the location of home or her home bases when she is away from them. When away from home, her attention is as much, if not more, on the issue of her home than on the activities in which she is attempting to engage. As long as the home cannot fall into the background of her experience, the agoraphobic cannot become actively involved in the activity in which she is ostensibly engaged out in the world. She is still in a very real way ‘at’ her home. We saw earlier that many agoraphobic persons report being able to travel beyond their safety zones with a fair degree of comfort if they are accompanied by a close friend or family member or even a pet or cherished inanimate object. At first glance, this may seem to be a sign that the agoraphobic has at last successfully left her home behind her. Yet, there are at least two problems with this life structure that show that the agoraphobic is still problematically caught up in her home and others in a way that ‘normal’ people typically are not.

First, insofar as the agoraphobic is relying on the stability and familiarity of her companion throughout any given ‘outing’, she is effectively transferring the locus of home to this companion. It is the proximity of her ‘home’ in this person that allows the agoraphobic to be more at ease in arenas that are ‘objectively’ speaking far from her tangible house. Thus, she has not succeeded in extending herself into her new surroundings: She persists in living within her narrow definition of what counts as safe.
Yet, as our analysis of home has revealed, safety is only part of what makes a home. As long as the agoraphobic is unable to respond and travel out to the inviting calls of the ‘foreign’ people, places, and events that surround the familiarity of home—and to do so on her own—she has not yet succeeded in dwelling, in being at home in the fullest sense. Second, and related to this point, the fact that the dependent relationships of the agoraphobic tend to be filled with significant and chronic strife suggests something not only about her own situation, but also about the existential situation of human beings in general: We are beings who are necessarily intertwined with others, but who also necessarily hail from a perspective—that is, we are also independent from others at some essential level. We cannot give up or renounce our own bodily-grounded situation or perspective in spite of the agoraphobic’s ‘attempts’ at doing just this. Our way of being-in-the-world, of dwelling, is necessarily both interpersonal and singular. The agoraphobic for most part cannot let go of the interpersonal long enough to allow her own experience to unfold; and, as a result, her experiences of herself and of others are obscured. In her reliance on her ‘safe’ companion, she remains locked up in the inward turning perspective of home, in the aspect of home that turns away (as much as this is possible) from the multiplicity of perspectives that mark our existence; and, she clings to this aspect of self-sameness even when she is ‘away from’ her ‘objective’ home.

Even when the agoraphobic is within the tangible walls of her home, she typically fails to be able to ‘forget’ the home, herself, and others in the ways that we have just described ‘normal’ people as being able to do when securely within the confines of the home. For one thing, even being at home can frequently be uncomfortable for the agoraphobic; it is often the site of nervous anticipations at the prospect of having to leave
the home. In such states of anxiety, the agoraphobic’s own body and her relationship to
the home are highlighted. As a frequent site for this type of anxiety, the home of the
agoraphobic can actually become charged as the place of always feeling uneasy. It may
not be a site of debilitating attacks of anxiety as ‘outside’ places may be, but insofar as it
is a regular site of persistent anxiety, the agoraphobic’s home can become a place of
consistent attention to herself. One agoraphobic writes of her own experience:

[Y]ou’re in a state of permanent anxiety, chronic, it’s really quite
disabling, there’s nowhere [pause], whether it’s your home [pause], this is
the scariest thing that I discovered, when I was really ill, it was, my home
wasn’t enough, my bed my pillow, my mother staying here for months
[‘she was my rock’], wasn’t enough...nothing is, and, that’s when you just
lose it completely, you, there’s just nothing there at all, you know, this
fear (“Linda” as quoted by Davidson in Phobic Geographies 102).

Thus, while the home for most people is typically that place where we can be free of
being self-aware—a place for being ourselves in the mode of forgetting ourselves—the
home for the agoraphobic is often a place of alienation insofar as even here she is always
aware of the danger of her situation and, correspondingly, is removed from her
surroundings to the degree that she is focused on these concerns.

Vidler describes the alienated experience of one agoraphobic: “...she even needed
help in mounting the wide stair to her apartment. Once indoors, she was never able to
look out of the window into the courtyard, and filled her rooms with furniture, pictures,
statuettes, and old tapestries to reduce their spaciousness” (Vidler 31). As this example
suggests, the agoraphobic will frequently give a great degree of attention to the
‘construction’ of her home. Though this is certainly something we all do, and is in fact essential to making a home our home, the agoraphobic often shows two tendencies in her ways of making a home that suggest that, not only in spite of her attentions, but because of these, she has not succeeded in making herself at home. The first tendency, which we can see in Vidler’s example, is that of hemming oneself into the home. Some agoraphobics will fill their homes with furniture, keepsakes, or even items that are typically discarded, such as newspapers, recyclable containers, and so forth. By stuffing the rooms of the home in this manner, it is as if the agoraphobic aims to tangibly diminish the possibilities for where she can be even within the home. In this way, the agoraphobic undermines one of the key characteristics of home—that is, the opportunities that the home gives us for being freed up for activities that we cannot easily pursue elsewhere for reasons both of a lack of privacy, but also—and more to the point here—of a lack of space to which we have a personal claim.

The second tendency is one that could be argued to be a positive attempt at making a private space for one’s personal activities, but that reveals itself ultimately to be too excessive to count as ‘normal’ house-making.276 In a study of the spatial experience of agoraphobics, Davidson has observed that “[agoraphobia] [s]ufferers’ homes are frequently organized to minimize the fear of the look” (Davidson 84). Some agoraphobics will, for example, build extensive concealing walls, fences, or natural hedges around the outsides of their homes, or set up furniture in such a way as to decrease the ability for others to see into their houses or yards. While these constructions are made in an effort to combat the invasion of the outside world, and while they may to

276 See pp. 84-85 of Davidson’s Phobic Geographies, for a discussion of cases in which agoraphobics go to elaborate ends to ‘secure’ their homes from the gaze of other persons.
some degree allow the agoraphobic an easier experience while she is within their protective shield, they also place an emphasis on the boundaries of her home and her situation within it. These elaborate privacy constructions bring the existence of the look of the other to the fore. While the home for most people tends to be the place in which we ‘naturally’ feel free of the gaze of others, the agoraphobic continues to feel this pressure, and will often still navigate her home with this in mind. In Vidler’s case, for example, the agoraphobic person cannot look out of her home’s windows; her behaviors within the home are shaped by her need not to come under the possible view of the other. In such noteworthy—if not continual—attempts to diminish the view of the other, the agoraphobic is focused on her relationship to the home in a way that we typically ‘forget’ unless we are feeling temporarily vulnerable and in need of added security within the home. In both this tendency of the agoraphobic to excessively protect her home as well as in the tendency to fill her home, we find a person whose way of being in the home is focused on the activity of being in the home rather than in doing other things or thinking about other things that by not being noticed the home typically allows.

Given our analysis of home, the agoraphobic’s version of ‘being at home’ is, we can see, fundamentally lacking or flawed. Home is not predominantly a place of inward retreat as it regularly is for the agoraphobic: The home is what enables us to go out into the world, and this support of our excursions into the beyond is a fundamental trait of what it means to be at home. Moreover, when we leave home it is essential that it is not always ‘on our mind’: The home, like the body, can be the great resource that it is for us precisely because we do not need to attend to it constantly; it is a ‘habit’ that allows us to move onto other and higher activities. Yet, as we have seen, the home for the
agoraphobic does not tend to slip into the background to become a ‘habit home’. The home is persistently in the foreground for the agoraphobic, and this prohibits anything alien or other from being actively engaged by the agoraphobic. Complicating the situation is the fact that the agoraphobic is also never free of her sense of ‘oppression’ by the other. While the home tends to be the place where we mostly forget the look of the other, for the agoraphobic, the home continues to be a site where the gaze of the other presses upon her. So, while she is never fully engaging the other, the agoraphobic also feels herself always under the debilitating stare of the other.

On the basis of these distinctions between the agoraphobic’s home and the ‘normal’ person’s home, we can argue that in spite of the fact that the agoraphobic is ‘objectively’ speaking frequently ‘at home’ and, in some cases, actually housebound, she is existentially far from being at home. We have seen that the home, like the body, is the connection between the familiar and the alien—the pivot for us to go beyond ourselves and to also find rest for ourselves. Yet, the agoraphobic persistently feels inadequately prepared to enter into foreign territories, tasks, and emotional experiences. Though she may have constructed an environment in which certain props enable her to do certain things, the agoraphobic is chained to these supports in a way that is at odds with the freeing support that ought to be provided by the home. Rather than making a home or being at home, she is bound to something—something that at some level never ceases to remind her of her alienation from the outside world, and thus, cannot allow her a place to be recognized, comforted, and made ready for new possibilities. Ultimately, the agoraphobic’s ‘home’ is a place in which neither the familiar nor the alien find rest: The familiar can never be settled or comfortable, because of the threat of the alien; and the
alien can never be encountered directly, because the familiar is always obscuring the view. In view of this, the agoraphobic fails to experience home as a balance between returning inward and returning outward, as a nexus of ingress and egress, of self and other. As we have seen, the lack of this balance has a critical negative effect on a person’s ability to be in the world: The agoraphobic—a person who has a severely troubled experience of her own home—is, as a result of this relationship, unable to be at home anywhere.

II. The Interpersonal Roots of the Agoraphobic’s Fractured Experience of Home

The reasons for what we might call this fractured home space of the agoraphobic can arguably be traced to interpersonal struggles and deficiencies in the agoraphobic’s developmental life in her first home. We saw earlier that our initial development into being an embodied and spatial being is shaped in part by the very structure of our first home—say, for instance, by whether or not we had our own room, by whether doors were locked or left open, by the presence of a mysterious attic or crawlspace, by the darkness of its interior, or by its ample or, alternatively, non-existent yard space. Even more significantly, this development of our way of dwelling is shaped by the home’s interpersonally informed character—as a home, for example, that allows certain activities in some rooms and not in others, that gives free rein to play or resists it, that comforts and acknowledges one’s concerns or dismisses them, that encourages adventures or cloaks them in fears or admonitions, and so forth. There are two specific interpersonal issues
pertaining to the agoraphobic’s childhood and adolescent life that, in light of our analysis of home, stand out as existential sources of the agoraphobic’s future problems with dwelling—1) the overprotective and dependency-encouraging attitude of the agoraphobic’s parental figures, and 2) the lack of emotional responsiveness on behalf of the agoraphobic’s parents, especially in the face of the child’s experiences of fear. Let us consider these two aspects of the nature of the agoraphobic’s familial history and their effect on the agoraphobic’s ‘initiation’ into the experience of being at home.

First, as we saw in our initial phenomenological consideration of agoraphobia, the agoraphobic typically comes from a family background in which an overly dependent relationship is encouraged between the child and one or both of the parents or parental figures. This dependency arises at least initially through an overly protective attitude on behalf of the primary parental figure(s), and particularly with respect to the child’s range of movement and discovery. The effect of a parent overshadowing a child at this initial stage in the development of motility and exploration is significant insofar as the acts of movement and discovery that we make within our first home are, as we saw, the very ones through which we learn how to extend ourselves beyond the walls of the home. The agoraphobic’s childhood home tends to be one in which caution and restriction loom high. The child is kept close, is wrapped up in the psychic identity of the parent, and is, by means of these interpersonal practices, ultimately discouraged from developing her own interests and explorations. As our study of home would already suggest, this interpersonal structure is problematic insofar as they keep the child from learning about herself as an independent person through confronting the unknown on her own. If a child is not allowed the freedom to move beyond the attentive watch of the parent or is not
encouraged to attempt activities on her own, the child will effectively remain attached to
the parent; she will fail to psychically differentiate herself from the parent. As Marcus
writes:

Part of the process of growing up is learning to do without our parents, to
move bit by bit away from their nurturance and watchful eyes, and to test
ourselves in those parts of the environment that are “not home.” We act
out the inevitable process of separation via games and activities in the
environment (Marcus 23, my emphasis).

Insofar as the agoraphobic was not encouraged (or perhaps even allowed) during her
childhood to venture from the home and, thus, to make her own home-away-from-home,
she failed in significant ways to go through the important developmental process of
learning how to become an independent person as well as how to be at home—a way of
being that we discovered involves both the familiar and the unfamiliar.277

The second, and related, interpersonal childhood structure that we can identify as
underlying the agoraphobic’s existential problem is the tendency that we saw in our
earlier analysis of agoraphobia of parents not to attend and respond sufficiently to the
child’s emotional needs, especially those that arise in times of crisis or insecurity. At
first glance this characteristic of the agoraphobic’s early familial life seems to be at odds

277 Freund (1990) makes a related argument that our experiences of autonomy and “ontological
security” are wrapped up in our early experiences of engaging with others, and, more specifically,
in our sense of our boundaries with respect to them. He writes:

Our experience of physical containment [which he argues all humans have by
means of our embodiment] leads us to develop an ‘inside-outside’ orientation
(the degree and quality of this experience will vary historically and
socioculturally). So gradually our interaction with others also leads us to develop
a sense of self and of emotional boundaries that emerge out of others’
responsiveness or non-responsiveness. Such experiences form the ground of our
sense of ontological security or insecurity (Freund 460-61).
with the structure of excessive dependence and closeness that we have just discussed. One might expect, for instance, that the agoraphobic’s family would swoop in and excessively attend to any emotional concern the child expresses. Yet, when considered from the perspective of the effect made by a gesture of emotional flooding versus that of emotional withdrawal, an excess of emotional attention would seem likely to cause a person to feel suffocated and, thus, encouraging of escape from the system, whereas a lack of emotional support can be seen to correspond well with a system that aims to maintain its members’ dependence. Let us look more closely at this structure of the reemphasis of dependence in the agoraphobic’s family structure. If in childhood the agoraphobic is not given the appropriate care and support following an emotional trauma, she will likely feel even more insecure and troubled around whatever issues may have given rise to these feelings. In a family in which independence has already not been encouraged or supported, the only source for finding support in the wake of this experience of increased insecurity is to turn to the family itself. In other words, having no developed resources for supporting herself, the child must turn back to the very source that has arguably just wounded her by not addressing her emotions appropriately. This point becomes even starker when we consider that the instances of emotional crisis that are not being adequately supported by the family may frequently arise specifically in the face of fearful situations—i.e., situations in which the child is attempting to confront something foreign or unknown to her. This lack of a firm emotional support—of a stable home base—around issues of the alien or unfamiliar serve only to exacerbate the child’s already stunted interest in and ability to reach beyond the territory of the familiar and
comfortable. It encourages her, in other words, to remain dependent on and inclined toward her home.

These two familial structures provide evidence of a developmental setting that would pointedly thwart a person’s ability to learn how to be at home and, thus, to leave the home. The agoraphobic’s family setting is one in which the child is not given a sufficiently comforting and stable home base and, correspondingly, is neither encouraged nor given the tools to venture into what lies beyond the home. Insofar as one’s childhood home is, as we saw, the model for our future ways and abilities of dwelling in the world, the agoraphobic is, as a result of her ‘retractive’ childhood home experience, ill-equipped for dwelling in the world as an independent adult. As Troutman writes: “Psychological spaces, experienced as the locus of childhood insecurities and fears, grow into the adult’s concept of the nature and meaning of certain spaces” (Troutman 151). Thus, public ‘space’ becomes threatening to the agoraphobic through her failure to have a childhood home ‘space’ that was effectively nurturing and preparative for emerging into the outside world.278

In his book Leaving Home, Haley, a family systems therapist, confirms the operative claim here—namely that the structure of the family home is what makes it possible or prohibits the child’s successful emergence from the family into the larger world. He writes:

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278 In his analysis of agoraphobia, Hallam appears to support this position that the anxiety of agoraphobia arises not as a result of some externally threatening ‘space’ or entity, but rather due to a sense of being away from a situation of security. “A further, and by no means novel, proposal is that places of safety and other forms of reassurance alleviate anxiety. Thus, the common observation that anxiety increases with distance from the home need not be interpreted as related to a unitary dimension of some external stimulus; rather, it can be seen as a direct consequence of distance from a point of safety” (Hallam 317).
When a young person succeeds outside the home, it is not merely a matter of individual success. He is simultaneously disengaging from a family, which can lead to consequences for the whole organization. A young person’s success or failure is inextricably part of the reorganization of a family, as new hierarchical arrangements are made and new communication pathways develop (Haley 30, my emphasis).

Haley confirms, then, that if a person, such as the agoraphobic, is not able to leave the home, it is a mark not merely of a personal inadequacy, but rather of an organizational problem in one’s familial life—in this case due to a deep-seated unwillingness to let go of one of its members.

As this discussion already suggests and as the case of agoraphobia confirms, problems in the underlying family structure—in the nature of the home—are most likely to appear when changes to the regular structure are approaching or happening. Haley writes, for instance, of the telltale behaviors of family trouble that appear in an adolescent who is ‘acting out’: “When a person in the late teens or early twenties begins to behave in strange and failing ways, it should be assumed that the stage of leaving home is malfunctioning and that the organization is in trouble” (Haley 30). Appearing precisely at times of transition such as the point of leaving one’s family of origin, agoraphobic behaviors serve, therefore, as an embodied gesture of a definite inability on behalf of the

279 We saw earlier that agoraphobic behaviors usually first appear when an adolescent is socially expected or attempting to move out of her familial home, or, if appearing in later years, they generally emerge around times of life transition and during attempts at changing the nature of close relationships.
agoraphobic and her interpersonal system—an inability rooted in the family’s way of having a home and, equally, of her own way of being at home.280

The agoraphobic’s behaviors function as an alternative to the familial protection that is threatening to disappear or, in the case of a death of a close relation or a divorce, has already disappeared. No longer having (or, in the case of death, no longer being able to fear the loss of) the protective demands of her parents or other persons on whom she depends, she develops a new source of these admonitory commands—her body’s own anxiety in the face of too daring ventures. Such behaviors do not serve simply to address her problems with leaving home. We have seen both 1) that the home is in interpersonal entity, and the agoraphobic’s expression of a problem is an expression not of something privately held, but of something belonging to an interpersonal system; and, 2) that agoraphobic behaviors play a critical role in the maintenance of certain relational patterns. Thus, the agoraphobic’s home-mates also ‘benefit’ from her ‘acting out’. Speaking of comparable family situations, Haley notes that if the case is extreme enough—if, for instance, the family home is wholly unable to function in the face of the agoraphobic’s departure—”...there is one way the trouble can be resolved and the family stabilized—the child can stay at home” (Haley 31). And, in fact, this frequently happens in the case of the agoraphobic: She may very well remain directly attached to her family of origin by either continuing to live with them, by moving back in with them after a failed attempt at moving out—at ‘moving on’—or, even if not living in the same

280 In “The Interpersonal Expression of Human Spatiality: A Phenomenological Interpretation of Anorexia Nervosa,” I make a related argument that anorexia is not an illness belonging to an isolatable individual, but rather one that belongs to an ailing family structure. Anorexia also appears in the identified patient around ‘normal’ times of transition away from the family.
‘objective’ home as her family, by devoting herself to them through acts of caring for them, sacrificing other relationships for the sake of spending time with them, etc.

Whether or not the agoraphobic tangibly leaves her first home, and whether or not she maintains an involved relationship with her original family, she tends to carry this first home with her to a problematic degree. The agoraphobic’s family home was rigid, and, as a result, so too is her adult experience of home. She sets up boundaries that stand in the place of her over-protective and under-supportive parents. The very architecture of this parent-child relationship mimics that of a tangible house and the problems that would exist in a house that, on the one hand, offers too much defense from the outside—and in so doing offers too few exits to the outside—and, on the other hand, has too weak of a foundation—and as a result offers no firm launching point from which to push one’s way into the outside. This pairing of problems is particularly troubling insofar as the structure of overprotection requires—if it is to be broken free of—an extremely stable ground against from one could launch oneself. Growing up with both an unstable emotional ground and a overly stable web of protection, the agoraphobic has not been encouraged and supported in the development of her existence as an independent person, and as a result, she feels the need for the continuation of the parental authority of her first home even as she enters into her adult life. Her agoraphobia sets up such a home for herself.

At this point, we can say something more general about the relationship between the experience of home and that of space. The childhood home experience that does not support a developing person in her initial forays into the ‘beyond’ of the home—into the other or the alien—will shape a person in such a way that she cannot adequately handle the meeting of self and alien inherent in our experience of being a body. Insofar as the
agoraphobic is engrossed in the familiar—in her tangible home, the pathways between her current situation and her home, and sometimes her strong bodily reactions to being away from home—her experience of the space of her surroundings is shrunken to the limited territory of these concerns. The size of her world is diminished to what is immediate to her; she very literally does not perceive what is beyond the area of her immediate concern. She is incapable of **being** beyond this limited range, and, as we have seen, her lack of being able to be at home is at the core of this limitation. The agoraphobic’s body, her home, and her world are existentially co-defined, and her experience of space is bound up in these co-defined aspects, in her way of being-in-the-world, in her way of dwelling or, in her case, of fundamentally ‘failing’ to dwell.

III. The Role of Home in the Prevalence of Female Agoraphobics

This interpretation of the etiology and existential nature of agoraphobia can also help to explain why agoraphobia has historically been and still is so much more prevalent in women than in men. 281 To begin, cultural constructions of the feminine in the 20th century continue to emphasize the woman’s role as concerning domestic issues—of nurturing and maintaining the self, the family, and the ‘home front’—as opposed to what traditionally have been the more masculine projects of work outside the home, of establishing connections with the public, and of other external accomplishments. 282

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281 Daiuto et al. cite a source gathering comprehensive epidemiological statistics on agoraphobia that reports that 75% of agoraphobics are female (Daiuto et al. 683).

282 In his study of the idea of home and its changing significance over the course of ‘modern’ European and North American history, Rybczynski argues that the “domesticity” of home is a
While these conceptions of the feminine and the masculine may be simplifications and unfair as well as ‘outdated’ ones at that, they function nevertheless at some level as an ongoing part of our social situation. For instance, even though women in North America are increasingly employed outside of the home, are increasingly employed in jobs that were once reserved for men, and are even increasingly likely to be the financial ‘head of the household’, it continues to be the case that women are still far more likely to be ‘held responsible for’ the maintenance of the home—for making it functional, comfortable, clean, welcoming, and so forth.283 The daily rearing of children—of educating them into our ways of being and dwelling—also continues to be associated more regularly with women than men, and during pregnancy and often in the years before an infant is eating solid food, this responsibility is biologically necessary as well as culturally encouraged. These cultural norms provide evidence that the onus for making a home—the very "feminine achievement" and offers extensive examples of ways in which the shaping of the home has been and continues to be more in the domain of women than men (Rybczynski 75; see also his entire chapter “Domesticity”, and pp. 159-62). Porteous and Smith cite numerous studies confirming the predominant association of women with the making of the home (Porteous and Smith 48-50; see also Mallett 74-77). Marcus points out that this association may have arisen because until relatively recently the home was for women, “...the one place where they could convey who they felt themselves to be, as mother, spouse, or person in their own right” (Marcus 104). In her article “Houses and the Ritual Construction of Gendered Homes in South Africa,” Waldman provides an example of a culture in which the home’s spaces and what can be done in those spaces are shaped by the circumstances of the women living therein—e.g., in conjunction with their menstruation, their virginity, their marital status, their initiation into ‘womanhood’, etc.; here, too, we see an example of the home sphere as being shaped by the situation of the women in a family (See esp. pp. 662-71). Most pertinently, Davidson (2003) discusses recent work by feminist theorists on the issue of women and domesticity, and also uses this connection to make a case for the prevalence of agoraphobia in women (Davidson 119, see also her entire sixth chapter). My argument differs from Davidson’s, however, insofar as Davidson places a causative weight directly on the relationship between female domesticity and agoraphobia whereas I am arguing that this relationship is significant insofar as it exacerbates, so to speak, the causative issue, which is that of dwelling more generally.

283 Marcus quotes a study from the 1980s of families in which both husband and wife worked full-time outside the home in which women were still responsible for 80 percent of domestic work (Marcus 154). The daily renewal of the home’s “threshold design” by the women of the Tamil Nedu in India is an example of this responsibility for home from a very different cultural situation (Blunt 208).
activity in which the agoraphobic failed to be fully ‘educated’ as a child—continues to be associated more principally with women, and as such is a more likely site in which and through which women will express psychological problems.  

Significantly the ‘training’ into these gender differences with respect to the home begins during the very period of life in which we are learning how to be at home—namely, in our childhood, in the time of our growing up in and through our first home. Here, in the ways that boys and girls are raised into experiences of the home, we see the first impressions of our culture’s greater domestic emphasis on females than on males. Girls are still more frequently given dolls, kitchen and tea sets, and other home-making toys than boys are given; and boys continue to be more regularly given building sets, outdoor play equipment, guns and other toys of empire building and maintenance than girls are given. Girls are also more generally encouraged in cooperative, ‘stabilizing’ types of play that create something—e.g., a story, a fantastical setting, a mud pie—while

284 For a helpful discussion of the normative structures and influences of both the state and the family with respect to gender differences, see Christman’s chapter “Race, Gender, and the Politics of Identity” in Social and Political Philosophy especially the sections “Public and Private” and “Justice and Care.” There Christman deals with feminist theories that in some cases would seek to amend liberal theory to include care—a moral and practical stance connected more highly with women by some theorists—as a more privileged and valued social responsibility. Christman, with others, wonders how these changes could be implemented ‘fairly’—i.e., without “valorizing merely one particular conception [of caring relations] to the detriment of others”—a concern he also extends to the wider conception of women’s moral orientation. Christman’s discussion is particularly helpful here insofar as it not only offers a survey of theories and research looking at the different roles that women and men ‘naturally’ or normatively take up with respect to the home and homemaking, but also considers the role that the state ought (or ought not) to play with respect to these issues—a consideration that is certainly relevant when we consider the state’s influence on accepted treatments of agoraphobia as well as acceptable modes of public presentation, which we will discuss in greater detail below.

285 Simply walking through the aisles of a children’s ‘superstore’ such as Toys R Us or a children’s section in a department store or a search for “top 10 girls toys” and “top 10 boys toys” on the Internet can confirm this general difference in the emphasis on play activities for girls versus boys. Schneider discusses some of these differences in her editorial “The Presents We Give to Girls and Women....” For a discussion of television shows aimed at children that arguably feed into these differences in both practices of buying and acts of desiring, see Powell and Abel’s “Sex-Role Stereotypes in TV programs Aimed at the Preschool Audience.”
boys are frequently directed toward play that confronts and challenges something alien—e.g., competitive team sports, war games, the building and destruction of structures.286

While we have seen that being-at-home requires both stability and confrontation with the other, there is, as we have also seen, a sense of primacy in the nature of home as the grounding point. That is to say, we must first feel the comfort of home in order to have the strength to leave it—a fact that is reflected in our childhood development. Yet, in the difference between the types of play in boys and girls, we see that the aspect of stability and of the creation of a place of stability is emphasized more strongly in the childhood experience of girls than in that of boys; girls through their activities of play are more likely to be trained into the making of a home, while boys in their play are more likely to be trained into the adventure-enabling character of home.287 Moreover, girls are

286 Marcus discusses typical types of masculine and feminine childhood play in her chapter “The Special Places of Childhood” in House as a Mirror of Self; see especially pp. 23-24, 25). See also Kane’s “Boys Will Be Boys” and Dancy’s “Gender and Parenting” for further discussions of differences often observed in the types of play in which boys and girls partake.

287 This general emphasis of home-making in the rearing of girls and home-leaving in boys seems to be reflected in Porteous and Smith’s observation regarding Chawla’s studies of “environmental autobiography” that women generally have stronger and more positive attachments to memories of their childhood homes than men do (Porteous and Smith 47). Both Gilligan and Tannen describe the different attitudes and ways of speaking that boys and girls both demonstrate and into which they are acculturated; and, they note specifically that girls tend to work to ‘make a comfortable place’ for their play and playmates whereas boys are more likely to engage in verbal and physical fighting that leads to ‘breaks’ (even if temporary) in the play group or situation. See specifically Tannen’s book Gender and Discourse, pp. 21-25, 42, 90-1, 98-101, 230, 257; and Gilligan’s book In a Different Voice throughout). While these observations do not at all times refer directly to the role of ‘home’ in children’s play, they serve to support the general argument that girls tend to partake in more inward turning and supporting types of play, while boys tend to play in ways that break away from stable points of contact (whether that be from friends or particular play spots). In her book Gender Play, Thorne largely argues against the notion that boys and girls live in or play in “different cultures” as Tannen and Gilligan both argue and as I am also here arguing to some extent. Thorne’s project is interesting in that she is attempting to bring to light ways in which boys and girls regularly have overlapping types of play experiences, and to point out that many particular boys and girls more clearly fit the common play- and personality-type descriptions for the opposite-sex; yet, though these points are fair and well-documented, it remains the case that there are general trends within the groups as a whole that stand out from each other. For instance, relative to our current discussion, Thorne herself noticed in her observations of schoolchildren that girls tend to play closer to the schoolhouse than boys do
not only more likely to be ‘charged with’ the activity of making a home through the types of play in which they are encouraged, but are also more likely than boys to be raised with an emphasis on the inward turning side of being at home by means of the range of freedom they are given for their play. Boys are, for instance, more frequently allowed to play at farther distances from the home than girls, and also to remain away from home for longer periods of time, until later hours, and with less reporting to their parents as to their whereabouts. We see an important and relevant indication of the effects of such a difference in the fact that even when girls are involved in explorations of independence—in making private places, in speaking or writing in private languages, in pursuing secret activities—they more frequently do this within the home than boys do (Marcus 25).

Once again, then, the cultural bias and related effect is a formation of a certain way of being toward the home that is different for girls than for boys—in this case, the tendency for girls to be more inward turning and boys more outward turning. These differences in the crucial developmental period of childhood—differences that emphasize the importance of home as a place to stay and to create in females and home as a place from which to leave and confront otherness in males—make it intelligible that more women (Thorne 1-3). Thorne is concerned that such depictions of boy-play versus girl-play help to further embed these stereotypes in children and, ultimately, in adult behaviors and attitudes. While this seems likely, it seems dangerous not to notice and acknowledge these differences (even if they are by no means universal or even true of most girls or most boys) insofar as they do have both psychological and practical effects both at an individual level and a societal level. So while I acknowledge that these depictions of boys and girls play tendencies are likely skewed and do not include all boys or all girls, I would argue that at least in contemporary North American society, these forms of boy-play and girl-play continue to be common and easily recognizable forms of social behavior, and ones that have a shaping effect on the future lives of the children involved in them.
than men would tend to develop a problematically ingressive relationship with the home.\textsuperscript{288}

While these cultural norms surrounding the masculine and the feminine relationships to home are certainly not enough to explain the existence or particular occurrences of agoraphobia, in conjunction with our close studies of the existential character of being-at-home and of the agoraphobic’s family situation, these norms do help us to understand why agoraphobia tends to present itself more regularly in women than in men.\textsuperscript{289} They even allow us to offer a plausible interpretation for the increase in the rates of agoraphobia in the 20th century.\textsuperscript{290} Increasingly in the 20th century, women have been ‘forced’ or encouraged to leave the home either for financial reasons or as a result of new social pressures and enticements to go forth into the world like the ‘man of

\textsuperscript{288} This conclusion is supported by a study by Arrindell, Eise mann, et al. (2003) that compared the rate of agoraphobic incidence in a variety of countries alongside of indices that measured the “masculinity” or “feminity” of the cultures of those countries. Countries that have high “masculinity scores” are those in which: 1) it is prevalent to believe in an inequality of the sexes; 2) some jobs and professions are held to be for males exclusively, and others are considered for females; 3) men are the breadwinners and women are the caretakers; and 4) men and women typically have different levels and types of education (Arrindell, Eismann, et al. 800). The study found that countries that had high “masculinity scores” also had high levels of “Agoraphobic fear,” whereas there were low levels of “Agoraphobic fear” in those countries that had a high “feminity score,” which reflects a society in which male and female “breadwinning” and “caretaking” roles are balanced (Arrindell, Eismann, et al. 799-800, 802, 804). See also the portion of the study by Turgeon et al. that reviews studies arguing that agoraphobia could be “an extension of the traditional feminine gender role” (Turgeon et al. 549); their study as a whole demonstrates that agoraphobia is not only more common in women than in men, but also that it tends to be more severe (especially with respect to avoidance behaviors) when occurring in women than in men (Turgeon et al. 548-49).

\textsuperscript{289} Davidson’s phenomenological and feminist geographical account of agoraphobia in \textit{Phobic Geographies}, while very insightful and also supportive of many of the claims I am making, relies, I would argue, too heavily on gender as a—if not the—defining etiological determinant of agoraphobia. By focusing strongly on issues of femininity and feminine ‘concerns’, her analysis regularly stops short of reaching what I think is the more fundamental source of the problem—i.e., that of being-at-home—an existential structure of all humans, which, admittedly, can take on different ontic significances in the face of varying cultural situations, but which ultimately is not something specific to one gender or another.

\textsuperscript{290} This proposal stands in contrast to other once popular claims that it was the crowding of the modern industrial city that caused or made possible agoraphobia. On pp. 25-31 of \textit{Warped Space}, Vidler discusses a number of theorists and doctors who held this view.
the house’ or the ‘breadwinner’ used to do almost exclusively. When a woman enters the public sphere—a sphere in which change, rather than stability is promoted; in which the alien, rather than the familiar is predominant—she must, if she is to successful, become a pursuer and guarder of her goals and even her person. Yet, as much as women may now be both allowed and encouraged to undertake ventures into the ‘outside’ world just as men do, there are still underlying differences, as we have just seen, in the upbringing of children as well as in cultural attitudes and events—e.g., differences in base salaries and hiring practices for men and women, greater rates of sexual assault against women than men, etc.—that persist in resisting to some tangibly perceptible extent the motion of women outward from the home in a way that men do not encounter. Thus, precisely as more women are beginning to feel the excitement of and perhaps the pressure to venture more frequently and more widely away from the home, we should expect to see—and we do see—a rise in the occurrence of noticeable existential expressions of fears and inadequacies around this very issue.

Through this discussion of the gender differences common in the occurrence and construction of agoraphobia, we have seen yet a further way in which agoraphobia is a ‘disorder’ not arising merely as a result of the ‘private’ problems of an isolated person, but also through interpersonal structures that define and even give rise to such problems. Agoraphobia is, in other words, never a private problem or a private disorder, or even one that belongs privately to one particular family. As we also saw in our earlier discussions of the socially-defined nature of home and, further back, of the societal pressures to treat and understand agoraphobia in particular ways, agoraphobia is a problem shaped not only by the identified sufferer. Agoraphobia is, on the one hand, profoundly shaped by those
in her immediate (and historical) interpersonal realm, and, in effect, belongs as much to them as to the identified sufferer.\footnote{In an article titled “The Interpersonal Expression of Human Spatiality: A Phenomenological Interpretation of Anorexia Nervosa,” I make a related argument regarding the nature of anorexia. I maintain, along with family and systems therapists such as Salvador Minuchin, that anorexia is a disease not belonging merely to the identified anorectic, but rather to an entire family system. A similar point holds here. The agoraphobic cannot, as we have seen in our discussions of the interpersonal and familial situations of the agoraphobic, be understood adequately as an isolated individual outside the system of her family or immediate interpersonal relations. The agoraphobic’s ‘problem’ arose and is maintained through the particular social system in which she was raised and in which she continues to shape her constricted adult life. For an excellent discussion of a systems view of mental health (with a particular focus on anorexia nervosa), see Minuchin’s Psychosomatic Families.} Beyond this level, agoraphobia is also shaped by society as a whole.\footnote{Our discussion of the roles of gender, of the role of the other in defining the home, as well as our earlier discussion of interpersonal consciousness as conceived by Heidegger, Merleau-Ponty, and Bateson are all relevant to establishing the societal character of agoraphobia.} We have yet, however, to consider how agoraphobia proves to be a problem to society. We should turn to investigate this now insofar as a study of this issue will continue to elucidate the character of agoraphobia as a spatially manifested existential problem, a problem in one’s way of dwelling.

IV. Agoraphobia, Citizenship, and Society

To begin this part of our study, let us return to the discussion we began in chapter 5 about the role that the look of the other plays in our lives and Foucault’s related insights into the importance of surveillance in modern society. There we saw that we are beings whose very way of being—of experiencing meaning, of having of a sense of self, and, more comprehensively, of having a world—is interpersonal; and crucial to this interpersonal existence is the evaluative looking to which we are always exposed and that we are always casting upon others. Furthermore, we saw through Foucault’s argument...
that, for the purposes of securing social norms, modern society relies on this evaluative interaction of its members, and specifically the evaluative form of interaction that comes through viewing each other. Participation in the state also demands of us that we act as autonomous, rational, isolatable ‘individuals’—that is, as ‘objective’ units that can function and be evaluated as if we were wholly accountable for who we are on an individual basis. Agoraphobia proves to be a problem with respect to these demands of being viewed, of being an ‘independent’ entity, and of being able to engage in the ‘affairs’ (both political and apolitical) of the state—i.e., of simply being a citizen of a community, of an interpersonal community, we might add.

We can begin to see these problems in the agoraphobic’s immediate relationships (or lack thereof) with others. In our study of agoraphobia, we have seen that the agoraphobic generally does not feel equipped to deal with conflicts with other people, and thus tends to avoid situations in which differences of opinions, emotional reactions, or interests may arise. The agoraphobic also tends to worry that she will fail at accomplishing practical tasks, professional responsibilities, and other basic life sustaining and enriching activities, and thus often does not pursue these or does so in very limited ways. In view of the often debilitating anxiety that can arise for the agoraphobic around these issues, she typically holds herself back from many of the most common situations in which we tend to be involved with other people, and also severely limits the number of relationships she has with other people. Marcus suggests that the agoraphobic fills in the place where these types of interpersonal engagements would usually occur with her relationship with her home. She writes: “People who are domocentric [Marcus’s term] are so profoundly connected to their house that this relationship has become both a
substitute for, and a barrier to, close relationships with other people” (Marcus 82). While there is nothing inherently problematic with having only a small number of relationships with others, the agoraphobic limits her encounters with others in a way that is obviously functionally problematic for herself, and, also proves to be problematic for those ‘safe’ companions she does allow into her life: Since the agoraphobic often needs to rely excessively on her ‘safe’ partner(s) to help her in basic life endeavors, she is involved not only in limiting her own engagements with others, but also in limiting the chances that her safe partners have for being freely out in the world. Her agoraphobia, thus, reaches into the abilities of others to carry out a fully realized life. Moreover, in spite of the ‘trust’ that is arguably evident in the agoraphobic’s reliance on her ‘safe’ companions, it is the case that even within these ‘safe’ relationships, the agoraphobic tends to avoid intense interpersonal exchanges—whether of a ‘positive’ or ‘negative’ character. Thus, even in her close relationships, the agoraphobic does not allow herself to come within the full view of others. Once again, it is important to note that this has consequences not only for the agoraphobic, but also for her companions. The agoraphobic is not open to intense examination by her partners, nor is she likely to probe deeply into them: Both forms of inquiry prove volatile for someone who is ill equipped for, and, thus, uneasy about emotional upwellings of either an exciting or conflictual character, or about anything new or unknown in general. Resisting this, she tends to veer both herself and her partners away from many of the most self-revealing and –defining types of interaction we have with other people. Overall, then, when it comes to the immediate interpersonal realm, the agoraphobic largely conceals herself from the look of the other and from the related demands of others; and even when she is around those to whom she
makes herself available for ‘view’, she has such intense defensive and avoidance behaviors that she makes it difficult, if not impossible, for some of the most important and intimate types of examination and exchange to occur.

As this discussion already suggests, agoraphobia proves to be an interpersonal problem at the larger ‘institutional’ level of the state—i.e., to a social organization that, as we have seen, relies on surveillance as a means of social control and definition. We are, as we have seen a number of times now, beings that are co-defined. Yet, the agoraphobic is in many ways taking herself out of the shared nature of the world. While this is something that she can ultimately never succeed in doing completely, she can remove herself in such a way that her senses of herself and of the world become impoverished. This is a problem for at least two reasons.

First, on a practical level, we, as a society, rely on persons’ intersubjective definition for the establishment and maintenance of a range of social norms and laws. A citizen is a person who is asked to and can function to a large extent as an object subject to the gaze of a universal other. Yet, the agoraphobic person tends to remain inside a confined safe place, and thus to avoid being examined by her peers or the relevant authorities. Even if an agoraphobic person has a milder or ‘treated’ ‘case’ of agoraphobia and can, thus, move about in a larger domain, she still tends, as we have seen, to be shut off from her surrounding environment and interpersonal interactions, and thus is likely to shun the ‘suggestions’ of social norms that people commonly, even if unconsciously, accept and adopt. Thus, even when ‘objectively’ in the arena of public inspection, the agoraphobic is existentially speaking largely outside of the arena of public influence—a form of existence that is arguably unacceptable to the surveillance secured state.
Second, and more significantly, the agoraphobic lives in a civil society, and yet she is, very simply stated, \textit{unprepared to be an adequate member of that society.}

Participation in a state demands of us that we function as ‘individuals’, that we respond to laws and situations as if we were isolatable self-accountable units. This ability is not, however, ‘natural’ to us. As we have seen (especially in chapters 2 and 3, but also throughout our study of agoraphobia), we \textit{are} interpersonal beings. To be able to behave and act as if we were separable entities is a mode of existence that we must \textit{achieve} and \textit{develop}. Yet, in her life history, the agoraphobic has not had a good enough interpersonal base to allow such a development. The agoraphobic is, essentially, not interpersonally ‘grounded’ enough to take on the society’s demands that she ‘function’ as if she were an autonomous individual.

V. Conclusion

We can now make the seemingly provocative, but ultimately quite feasible claim that the current modes of treatment for agoraphobia are modeled on the state’s demand that its citizens be both ‘on display’ and also that they act as autonomous agents. As we saw earlier, it is the trend within the psychiatric and medical communities to focus their curative efforts—whether in the form of exposure therapies, cognitive behavioral therapies, or medication—almost exclusively on returning the agoraphobic to the public sphere, to the arena of ‘visible’ interpersonal inspection and norm inculcation. While the medical community treating the agoraphobic surely considers it important for the
agoraphobic herself to be able to navigate public places, our analysis of the motivations behind the changes to the DSM confirms that the community responsible for treating agoraphobia is also clearly affected by the demands of citizenship and by the related legal and commercial interests that accompany the nature of a state. Since it is of the utmost importance for a citizen to show herself and to feel the individually shaping weight that comes with this showing, it makes sense that the most immediate concern of these treatments for agoraphobia is to enable—no matter what the ‘side effects’—the agoraphobic to partake in this public exchange.

In spite of the immediate institutional and even commonsensical coherence of focusing on the habituation of the agoraphobic to the public arena, we are, following our analyses of home and the agoraphobic’s experience of home, even more prepared to refute the therapeutic value of taking such an approach to agoraphobia. At the most fundamental level, we can now say that the current therapies that habituate or otherwise enable the agoraphobic to go into public ‘space’ are problematic insofar as they overlook the fact that objectively being in a space is not the same as being at home in a space. According to the ‘logic’ of the current therapies, the agoraphobic is treated as an isolated object whose actions are detachable and who stands apart from a separate world around her, and her contracted spatial experience is understood as some form of practical or physiological maladjustment. The agoraphobic is seen and treated as a person who does not have a ‘grip on the world’, and who needs to be given tools to allow her to navigate in this given terrain like other citizens do.

Yet, these current treatments have jumped the gun, so to speak. They are focusing on the agoraphobic’s ability to be an effective member of society, when in fact
the agoraphobic does not yet have the appropriate interpersonal grounding and health that would enable turning to this ‘higher’ level activity. Moreover, these treatments reemphasize forms of behavior in the agoraphobic that she already ‘has’ and that are in fact problematic to her. She, like a ‘good’ citizen, already behaves as if she were an independent, self-contained entity in the ‘space’ that we call ‘the world’. While this behavior ‘works’ for a healthy and interpersonally grounded person, it is the very behavior that further prohibits the agoraphobic from ever being able to address her original existential problems, since such isolating behavior further impresses in her the experience of herself as an alienated being, as a being who does not have and who can have no interpersonal home. We might say, then, that these current therapies are effectively working to produce the very behaviors and ‘lifestyle’ that the agoraphobic has already secured and that have proven problematic for her given her underlying existential problems.

The fundamental error in the current way of thinking about agoraphobia is, as we have already argued, its assumption that we stand over and against space, that space is a self-sufficient entity and one about which there is a correct attitude. The current treatments assume, in other words, that the agoraphobic simply needs to get better at ‘going into and going about space’, at being a ‘good’ object in ‘space’. Yet, this is the very activity in which the agoraphobic is already quite accomplished. She already experiences herself and behaves as if she were a mere object in space—that is, as if she had no creative role in shaping the very space that she fears. Quite contrary to these assumptions about space made both by the current treatments and by the agoraphobic, we are, as we have seen, always involved in shaping our experience—including our
perceptual experience—and, thus, our world. There is not an ideal or absolute view of this world that is free from our human subjectivity. We can never step outside of a perspective to get such a view; and to have a view on the world and ‘its space’ that is closest to an ‘objective’ view—one, for instance, describable by fixed, steady, stable measurements or one that ‘acts’ as if we were objects in a container—is by no means the ‘best’ view. It is an important view, but simply one view of many.

Now, this is not to say that the agoraphobic’s view of the world is just as ‘good’ or as ‘healthy’ as any other view. Indeed, her view is problematic. But, it is not problematic simply because she cannot easily go into the most common areas of human exchange. It is problematic because it reflects that she harbors and acts upon a problematic attitude very much like the ‘objective’-biased attitude on which her most common treatment options are founded. The agoraphobic is hung up on space as a thing, and she has—unconsciously, most certainly—invested her concerns about life in this thing, in this thing that she experiences, moreover, as detached from herself and as something that she can avoid. In doing so, she has mistaken the result of her problem for the root of her problem. She is scared of ‘this thing’ space, when it is her own existential situation that has created this space, that is her space. In other words, she is scared of her own life, but since, as Heidegger would say, she is thrown into the world, she experiences herself as scared of ‘the world’ and, thus, shies away from ‘it’ as if it were a foreign entity and some ‘thing’ that she can avoid. In the end, then, the problem with the currently popular therapies for agoraphobia is in fact identical to the agoraphobic’s problem: In spite of the fact that these therapies attempt to free the agoraphobic for going into new territories, they generally work by focusing her attention excessively on the
home and on her body, and as a result reemphasize the agoraphobic’s separation from her surroundings albeit in a different way than her anxiety did. Though such a view of our surroundings and ourselves with respect to our surroundings may be essential for our behavior as citizens, it is, as we have seen, a disastrously undermining attitude when encouraged in a person who already fails to experience herself as grounded within an interpersonal world.

Thus, whether treated in this way or left untreated, the agoraphobic’s body ceases in significant ways to be that by which her existence can unfold, with the consequence that she begins to lose her character as a subject who inhabits the world through her projects and intentions, and becomes closer and closer to a mere object that is impressed upon by an alien world. In this state, the agoraphobic is largely incapable of making free and responsible choices: Her room for movement and action is reduced by the demands of her fears and her insatiable need of the home. Yet, the state—we—ask (and at some level demand) people to emerge confidently from their homes, and to go into the public sphere as dwellers, as people who are capable of being-at-home and, thus, of leaving the home behind; for, only then are we engaging people who are comfortable with and ultimately capable of significant and even essential forms of interpersonal exchange.

While the agoraphobic is defined by the limits she imposes upon her world, the ‘healthy’ subject (and citizen) is a person who is able to extend herself and, thereby, her world by thrusting herself as a subject into the situations that her body opens to her, and who can function within the attitude of isolated agent insofar as she hails from a grounded interpersonal ‘home’. Unlike the contracted and largely predetermined ‘world’ of the agoraphobic, the ‘healthy’ subject’s is a world of possibilities, of the future, of freedom.
to engage and disengage in opportunities as they present themselves to her, of partaking in projects and meaningful exchanges with other persons, etc.

Ultimately, then, it is in the agoraphobic’s, other people’s, and the state’s best interests to acknowledge the existential roots of agoraphobia—to acknowledge that simply to leave one’s home is not enough to be an active or ‘healthy’ member in the social realm. For the agoraphobic to become a functioning member of her society, she needs not simply to train herself to go out in the ‘objective’ places of the world—an activity that arguably she can and does already perform, but from a drastically impoverished base and, thus, in a drastically impoverished way—but also, and more fundamentally, to learn how to be at home therein. It is only by rejecting a dualistic conception of the person, on the one hand, and space, on the other, in favor of one that recognizes spatiality as rooted within the subject herself that the spatial restrictions of the agoraphobic can be addressed in such a way that she, not merely her symptoms, can be addressed, and that she can become a healthy subject in an intersubjective society.
Conclusion

Now that we have made a phenomenological interpretation of agoraphobia, we can look more closely at how agoraphobia can show us something about the nature of space. I have now argued that agoraphobia reflects an existential insecurity in a person’s way of making a home and of being at home in general. We have seen that these problems should be understood both literally—i.e., with respect to the actual way in which the agoraphobic is able to have a tangible home—and also more broadly—i.e., with respect to the agoraphobic’s general experience of being human insofar as this involves a spatially embodied way of being both here and there, self and other. I now will conclude this work by arguing that the human spatial experience is this very articulation of being simultaneously always oneself and always the other. To do so, I will first present the most essential points about the nature of our spatial experience that our study of agoraphobia has made possible. For a deeper analysis of these points, I will then turn to Heidegger’s conception of anxiety to see what it can show us about our experience of world. Finally, I will consider how agoraphobia is a particular form of this anxiety, and one that specifically highlights the role of home in our experience of world and, ultimately, of space.

Admittedly, if we think of the agoraphobic in her ontic character as being afraid of being beyond the home, we might not see much to learn about ourselves here. If we are not afraid of going out of the home, this fear and its sources do not seem that relevant to us. Yet, there are at least two ways in which the agoraphobic’s problem is more
relevant to us than this initially suggests. First, as we have seen, the agoraphobic may be fixated on the home and places away from home as the root of her problem, but we have seen that underlying these concerns is an existential structure of dwelling that is common to all of us and that, moreover, we typically do not notice in our own lives, because in our lives the home and dwelling typically ‘run smoothly’ and, thus, are relatively unnoticed by us, are absent to us. Specifically, we see more clearly through the agoraphobic that we are beings who make a home, who necessarily live in a structure of here versus there, who are always starting out from the familiar and going out into what is other, who are always ourselves by being engaged in the other. A phenomenological analysis of agoraphobia acknowledges the existential importance of having a protected home, but crucially a protected home from which we can emerge. It acknowledges our need for privacy, for a place into which others can be invited or from which others can be excluded, for a place from which we encounter the other, for a place to which we can return after having been in our larger world, for a place we can leave behind. It also acknowledges that the balance between the home and beyond is not set in advance for us; the ranges of each are bound up with our own personal histories.

Through these insights into the nature of home, the experience of the agoraphobic teaches us about the existentially rooted nature of our spatial existence: We are beings who unfold a world, and do so with and through others, on the basis of our personal histories and our personal futures, and who, accordingly, do so in different ways. My point of view on the world, my orientation ‘within’ space, my spatial situation is inherently different from yours—it is mine—in spite of the fact that it is also inherently shared with you insofar as it is intersubjectively defined and meaningful. I am always
reaching across to you. I do not exist apart from this reaching and, thus, from you; still, I hail from some particular perspective and the particular congealed history from which and into which this perspective is unfolding. Space is our experience both of the way we are always thrown into the other through perception and action, and equally of our sense of experiencing this being thrown as being thrown from somewhere—from ourselves. The agoraphobic’s problem illuminates this experience insofar as she not only cannot throw herself fully into the other—whether that be other places, other situations, or other persons—but also does not at a deep existential level experience herself as an independent point of view. That she has a problem simultaneously with being in the other and being in the self is illustrative of the nature of our existence, and of the spatial nature of this existence.

There is also a second lesson about ourselves that the agoraphobic can teach us, and that we have touched upon already, but that needs further explication. The agoraphobic’s problem can teach us something not only about our nature as dwellers, but also about our relationship with fear and anxiety in general. To see how this is so, we must first consider Heidegger’s differentiation between fear and anxiety. Heidegger argues that something that is fearful to us is tangible: It is something that threatens us, that has “…detrimentality as its kind of involvement” and that “...comes from a definite region,” but that “…is not yet within striking distance” (Heidegger, Being and Time H.140, M/R 179-80). The fearful is something on which we can focus our attention, and that looms before us as something that is threatening to ‘attack’ us. As such, the fearful must be something within the ‘world’, and is also something that most likely changes our orientation within the world. We see this in the case of the agoraphobic: The
agoraphobic experiences the places of the world as detrimental to her, and so much so that she tends to avoid these places altogether. These places loom over her on the edge of what she counts as her safe ground. We have already seen one way in which this character of the agoraphobic’s fear distracts her from a more basic fear of hers: She is thrown into her preoccupations with the tangible threat of the ‘outside’ world, and this preoccupation conceals her fears about dwelling in general, about her relations with others, about her responsibility for making a home in this world. Her fear covers over something even deeper. In focusing on her worldly fears, she fails to notice something beneath the ‘world’: her way of existing as being-in-the-world, her responsibility for the very ‘things’ that she fears. To see how the agoraphobic’s fears pointedly cover over the anxiety that is at the base of all human life—the anxiety that comes with our way of being the world—let us consider Heidegger’s discussion of our existential anxiety, and its relation to our experience of being-at-home in the world.

In chapter 2, we established that we are not beings set against a preformed world. Rather, our way of being is as being-in-the-world, as beings that give rise to a world and that are simultaneously constituted through our involvement in the world.\(^{293}\) In other words, we are existentially ‘responsible for’ and at the center of a lived world.\(^{294}\) This is not to say that we simply ‘make up’ the world we desire or need. There are, of course, factical realities that we encounter and to which we must respond; but, the way in which

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\(^{293}\) Here, the use of “‘ in” carries the sense not of an objective presence in a container, but rather both of a sort of doing—the way one can be into something and correspondingly affected and defined by this way of being—and also of being completely shot through something, of being coextensive with it.

\(^{294}\) Though my upcoming discussion will develop this idea of our ‘responsibility for’ the world to some extent, I am relying principally on my previous discussion of our way of being-in-the-world in chapter 2 to make this a meaningful statement. See particularly sections 1 and 2 of chapter 2—"Being and Being-In as Care and Relevance” and “The Worldliness of Being and Being-In: Being-in-the-world,” respectively.
these ‘realities’ are held together by us in a meaningful and oriented whole—in a world—is made possible only because we are beings for whom these things can matter. We are the beings for-the-sake-of-which other things are, the beings by which anything (including ourselves) can count as ‘being’ at all. Yet, in our daily lives, we do not typically think of ourselves as making the world possible in this way. Instead, we think of the world and its contents as independent from us and ‘out there’, and, thus, as something we are simply running up against. Correspondingly, we think of ourselves as ‘in’ the world like water is in a glass—the relationship of an isolatable object in an independently defined container. We are so immersed in the world and correspondingly in this daily way of thinking about ourselves that it is unusual for us to recognize that we are as being-in-the-world—that we are the meaning givers that make the world possible.

Heidegger argues that anxiety is the state of being that allows us and even pushes us to shift from understanding the surrounding world as a fixed entity, as beyond our control, and as making virtually unidirectional demands on us to realizing (whether explicitly or in a covered over way) that the significance of the world—what it means for things to count as things, for things and events to have certain types of sway over us, for there to be even something like a world in the first place—arises through us and answers to the demands of our care.²⁹⁵ Anxiety can bring about this shift insofar as the way in which it unsettles us is not through causing us to feel unsettled about any thing in particular, but rather pointedly about nothing. Unlike we can with fear, we cannot pin

²⁹⁵ Heidegger emphasizes that the awareness of our being-in-the-world that comes to us in anxiety is not a conceptual awareness or recognition. What we experience in the state of anxiety is less settled and definite than this; there is nothing for us to hold onto as there would be if we had a clearly articulated ‘cause’ for the problem. For Heidegger’s discussion of this point, see Being and Time H. 187-8, M/R 232-33. For his discussion of anxiety in general, see Being and Time section 40 as well as H. 277, M/R 321-22.
our anxiety on our worldly affairs, on our worldly possessions or interests, on our involvements with and through other people, or on any other tangible feature of our lives. In fact, these things drop away and become utterly insignificant when we are anxious. Binswanger writes of this experience: “It is anxiety that makes the world appear ever more insignificant, ever more simple, because it “petrifies” existence, narrows its openness, its “here,” down to ever smaller and smaller circles, forces it into ever more difficult and rarer possibilities” (Binswanger 299). We might say (to return to our discussion of spatial levels in chapter 3) that anxiety shuts down the possibilities for our body to open up onto the world, and thereby closes off our experience of the world.296

It is by means of this clearing away of the significance of anything in the world that anxiety reveals what truly underlies it. In Heidegger’s words: “In anxiety what is environmentally ready-to-hand sinks away, and so, in general, do entities within-the-world. ... Anxiety thus takes away from Dasein the possibility of understanding itself, as it falls, in terms of the ‘world’ and the way things have been publicly interpreted” (Heidegger, Being and Time H. 187, M/R 232). As we cease thinking of the things around us, we also cease to be able to interpret ourselves on the basis of these things.

296 Though speaking of fear rather than anxiety, Leder’s description of how the body ‘leaves us’ seems helpful here. He writes:

...[B]efore the onset of fear I am more or less able to take my body for granted. It is that from which I will actualize my goals without the need of explicit self-reflection or self-control. ... This is no longer the case when fear erupts, throwing an obstacle in the path of my will. A physicality that moments before was invisible now asserts itself via sweating palms, a nervous twitch, a choking voice, an almost irresistible urge to run. Though it is congruent with my overall values and long-term interests to press on, my body, as it were, has another idea. It emerges as away, apart, from my desired state and from my experienced sense of self” (Leder 138).

The body in fear, thus, seems to separate itself from our active agency. We cannot find our way in our projects as before, we cannot act. If we take this one step further, and consider what happens in the experience of anxiety, we might say that not only do we not feel the agency to act, but also that we lose a sense that there is any reason for acting, any place in which to act, any sense to action at all.
Our state of being cannot be explained by these things. Thus, in the state of anxiety, we can find nothing on which to blame our anxiety and nowhere that our anxiety belongs. Yet, this anxiety is, and it is defining us. As a result, we become aware of the possibility of the world and ourselves as being essentially “nothing and nowhere.” Since the world and its ‘contents’ become utterly insignificant to us and drop away in our anxiety, we become aware of the fact that whatever ‘is’ is through us and is naught without us. Moreover, since in the state of anxiety we ‘get over’ thinking that we are defined by the world, we also become aware of the fact that we are existentially free beings. Heidegger writes: “Anxiety makes manifest in Dasein its Being towards its ownmost potentiality-for-Being—that is, its Being-free for the freedom of choosing itself and taking hold of itself” (Heidegger, Being and Time H. 188, M/R 232). We come up against ourselves as being-in-the-world—that is the beings for whom there is a world, by whom there is a world, and who are, therefore, spread throughout the world and typically involved in understanding themselves in terms of the world. In short, then, anxiety leads us to encounter the existential nature of the world—not in a thematic way, but rather in a feeling of the utter emptiness of the daily world and in a corresponding sense of our way of being responsible for worldhood as such, since in anxiety, we have no orientation, and have no firm point on which to stand or ground ourselves: We come face to face with the nothingness and nowhereness of the world, and our ‘place’ at the root of this.

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297 For Heidegger’s discussion of the “nothing and the nowhere” of the ‘world’, see Being and Time H.343, M/R 393; H. 188, M/R 233.

298 Morris offers a helpful and related discussion of the connection between our emotional ‘grounding’ and our orientation in the world in his section “Unconcern, Other-Orientation, and Anxiety” in his chapter “Growing Space” (Morris 168-71). His argument that anxiety pulls us away from our experience of and engagement with others helps to support our current discussion of the agoraphobic as a person who is separated from meaningful engagements with others by
Heidegger argues that when we enter the state of anxiety, we feel *unheimlich*—“uncanny” or “not-at-home” (Heidegger, *Being and Time* H.188-9, M/R 233). He writes:

Anxiety individualizes Dasein and thus discloses it as ‘solus ipse’. But this existential ‘solipsism’ is so far from the displacement of putting an isolated subject-Thing into the innocuous emptiness of a worldless occurring, that in an extreme sense what it does is precisely bring Dasein face to face with its world as world, and thus bring it face to face with itself as Being-in-the-world. ... Dasein has been individualized, but individualized as Being-in-the-world. Being-in enters into the existential ‘mode’ of ‘not-at-home’“ (Heidegger, *Being and Time* H. 188, M/R 233).

Our previous study of home can help us to understand Heidegger’s use of *unheimlich* as a way to describe the feeling of anxiety. We are not-at-home when we are in the midst of anxiety, because, in this state of coming into contact with ourselves as being-in-the-world, we have lost our regular grip on the world around us. We have suddenly been taken out of our habitual senses of who we are, what the world is, what things are, etc., and are left without any settled answers about these issues. We are left facing only ourselves, and even our sense of self is changed. We are not our professions, our families, our hobbies, the roles we play in our communities, or even our personal histories or our personalities. These are all factual features of who we ‘are’ in the world, but these ‘realities’ are dependent on the fact that we give and maintain these as meaningful.

means of her emotional anxieties; Morris also connects this type of disengagement with a perceptual spatial contraction of and disorientation in one’s world.
Contrary to our daily sense of ourselves, then, we are nothing and no one in any permanently settled way. Without the security of our self-identity, of our standing among others, and without the permanency of our situation and surroundings, we lose all connections to a settled and familiar world. We are left on our own without the grounding that the world provided us. We feel not-at-home, because we have lost our habitual trust in and connection to our secured place and way in the ‘world’. Returning to Deleuze and Guattari’s example, we are like a small child, utterly lost or perhaps homeless due to a fire or war, and, to make matters worse, with no tune to comfort or secure herself by making for herself a temporary home. Yet, unlike the child, we have also realized that we are the makers of our home, of the very world in which we daily live. Thus, while the child has something specific on which to focus her loss—the loss of a tangible, ‘objective’ home—we have pointedly lost any thing on which to focus our anxiety. We do not even have some thing about which to fret, and, as a result, cannot even make a home of our discomfort.

The experience of anxiety is, thus, one of utter placelessness, of feeling oneself to be fundamentally nowhere. In anxiety, we even lose our sense of self, since just as we realize in this state of being that the world is nowhere, so too do we realize the self to be nothing. Thus, anxiety takes away both our sense of being spread throughout a world as well as of our having a world. We can press these points even further, then, to say that anxiety causes us to feel de-spatialized: It collapses our world and our selves into an experience of nothingness and leaves us feeling as if we are rooted nowhere. In doing so, anxiety reveals to us that we are the beings through whom the depth of the world can be, and what in fact proves to be the same point, through whom space as a ‘place of being’ is.
We are the beings that hold together the meaningful relationships between the here and
the there, the beings who have regions, who have orientation, and who unfold a world.
Who we are and who we experience ourselves to be is bound up with this unfolding of a
world: We are spread through the world; we are spatially extended as a world. We feel
uncanny or not-at-home in anxiety, because in it we come face to face with the ‘reality’
of our home—our world—as dependent on us—as us—and, therefore, as not an absolute
settled for us in advance. Our average sense of home is thus undone: Existentially
speaking, we can never be at-home—i.e., never be absolutely settled and fixed in our
ways. Rather, we are free and, thus, will always and forever be in the process of creating
our home. Anxiety reveals this, and in doing so brings with it the uncanniness that comes
with this freedom that characterizes of our way of being.

Though Heidegger argues that this “...uncanniness pursues Dasein constantly, and
is a threat to its everyday lostness in the “they”” (Heidegger, Being and Time H. 189,
M/R 234), he also acknowledges that we mostly avoid feeling it. For at least two reasons
it is not surprising that we tend not to feel (and also want not to feel) the uncanniness of
our existence. First, and perhaps most obviously, it is, as we have just seen, literally and
profoundly unsettling to our daily lives to feel the “nothingness” of our being. There are
countless diversions by which we can and do readily distract ourselves when we begin to
feel ‘out of sorts’ or anxious. These diversions are our way of “...flee[ing] in the face of
the “not-at-home”“ that is so unsettling to us (Heidegger, Being and Time H. 189, M/R
234). Second, even if we are not willfully distracting ourselves in such ways, our very
way of having a world is essentially distracting. We are unavoidably wrapped up in the
things (and people) of the world insofar as it is our way of being to care for these worldly

352
things. This is where we live and are at home for the most part—i.e., in the public ‘world’, absorbed by the happenings, the things, the ideas of our habitual life with other people. As Heidegger writes:

...Dasein is proximally and for the most part alongside the ‘world’ of its concern. This “absorption in...” has mostly the character of Being-lost in the publicness of the “they”. Dasein has, in the first instance, fallen away from itself as an authentic potentiality for Being its Self, and has fallen into the ‘world’. ... Not-Being-its-self functions as a positive possibility of that entity which, in its essential concern, is absorbed in a world. This kind of not-Being has to be conceived as that kind of Being which is closest to Dasein and in which Dasein maintains itself for the most part (Heidegger, *Being and Time* H. 175-6, M/R 220).

Thus, for reasons both of distraction and of the very structure of our way of being, the ‘world’ for the most part proves to prevent us from noticing the profound anxiety we have been describing.

In spite of our abilities or tendency to avoid the uncanny feeling of anxiety, anxiety always belongs to us. Heidegger argues that “[t]he kind of Being-in-the-world which is tranquillized and familiar is a mode of Dasein’s uncanniness, not the reverse. From an existential-ontological point of view, the “not-at-home” must be conceived as the more primordial phenomenon (Heidegger, *Being and Time* H. 189, M/R 234, first emphasis my own). Our absorption in the ‘world’—our sense that it defines what we are and that it is what counts as important—is possible only because we are beings who care for the world, who give meaning and arrangement to the things of the world and do so in
such a way that these things in turn serve to reflect that meaning back upon us. Said otherwise, we can be at home only because we are that sort of being who as not-being-at-home is capable of making itself a home: Unlike other the things (or presumably even animals) that we encounter in the world, we are not given our way of being or our ‘homes’ in advance.

The worldly ‘anxieties’ or fears we experience are in fact signs of the fundamental anxiety that accompanies our existence. Heidegger writes:

> When Dasein “understands” uncanniness in the everyday manner, it does so by turning away from it in falling; in this turning-away, the “not-at-home” gets ‘dimmed down’. Yet the everydayness of this fleeing shows phenomenally that anxiety, as a basic state-of-mind, belongs to Dasein’s essential state of Being-in-the-world. ... Fear is anxiety, fallen into the ‘world’, inauthentic, and, as such, hidden from itself (Heidegger, Being and Time H. 189, M/R 234, my emphasis).

We may, for example, feel not quite at home in a current relationship, in the way we are dealing with a problem, in a job we have been pursuing, or just ‘in life’ in general. These feelings of not being quite at home in what we are doing are caught up in the ‘world’, and thus do not arise purely out of the anxiety that belongs to our way of being-in-the-world, yet even these more ‘worldly’ forms of anxiety are reflective of the way in which we are and always will be not-at-home. They reflect a recognition at some level that we know that we are not ‘settled’ things, that we are the bearers of meaning and choice. Thus,
although in a concealed way, these ‘anxieties’ still offer a sign of the way in which uncanniness constantly pursues us.  

Perhaps more than any other form of worldly ‘anxiety’, agoraphobia—albeit ambiguously fear and anxiety—can tell us about the nature of our way of dwelling. The agoraphobic is a person who is not only, as we all are, existentially not-at-home, but whose very way of everyday living expresses that she is existentially not at home. In other words, the agoraphobic appears to carry our fundamental anxiety about our way of being-in-the-world into her very way of having and making a ‘world’. We might say that she is not-being-at-home in the mode of being thrown into the ‘world’.

As we have seen with Heidegger’s analysis of Dasein, being thrown into the world is both a regular and essential way of our being, but it is also the very thing that regularly shields us from recognizing the nature of our existence. This structure is

299 Heidegger argues that when our bodies triggers experiences of anxiety—e.g., through a racing heart, difficulty breathing, vertigo, etc.—this is a sign not that our physiology is inducing anxiety—a position taken up by at least some of the current therapies for agoraphobia—but rather that these are embodied signs of our original character of being anxious. He writes: “Anxiety is often conditioned by ‘physiological’ factors. This fact, in its facticity, is a problem ontologically, not merely with regard to its ontical causation and course of development. Only because Dasein is anxious in the very depths of its Being, does it become possible for anxiety to be elicited physiologically” (Heidegger, Being and Time H. 190, M/R 234). In other words, ‘anxiety’ that surfaces in our body is premised on the more primordial anxiety at ‘understanding’ the nature of our way of being-in-the-world.

300 For the sake of the current argument it is not necessary to make a precise distinction between the anxiety that underlies all human existence and the type of anxiety that arises in agoraphobia. That said, I believe there is an important distinction that could be made here. First, as I have already stated, the agoraphobic is most obviously wrapped up in experiences of fear rather than anxiety—that is, in fears of tangible things and events in the world. Second, though underlying these immediately felt fears is an anxiety that the agoraphobic is mostly ignoring, even this anxiety seems a bit removed from that of the anxiety that Heidegger discusses. The agoraphobic’s anxiety continues to be rooted in structures and issues of the world even though it is an anxiety of not being-at-home; she is, it seems to me, experiencing a thrown form of anxiety, and does not, therefore, experience the ‘pure’ nothingness and ‘nowhereness’ of authentic anxiety. In Phobic Geographies, Davidson presents the agoraphobic’s anxiety as identical with the conception of anxiety that Heidegger offers in Being and Time. I think this comparison is too simplistic. In spite of this criticism, for the purposes of my discussion here, I will be focusing on the very significant similarities between the anxieties.
eminently visible in the agoraphobic’s life. Although the agoraphobic generally recoils from the daily life of the ‘world’, the agoraphobic is thrown into her state of fear just as we (Dasein) are typically thrown into the world. The agoraphobic has, in fact, fixated on the closest ontic equivalence of our primordial anxiety: a fear of going outside of the home. Insofar as she lives in her fears, she has turned away from her own interpersonal problems and ultimately from the primordial anxiety about our way of being-in-the-world. In effect, then, her anxiety has been covered over by interpersonal fears that have in turn been diverted into concerns in the ‘world’.

By means of this covering over, the agoraphobic has made a certain sort of home, so to speak, of her fear, and has found a certain stability therein—just as we do by being thrown into the ‘world’. Yet, as we have seen, the agoraphobic’s stability is fundamentally unstable—one in which even she finds and experiences frequent cracks. While she may have developed a set of ‘safe’ places and activities she can typically pursue, the very character of her way of living is that of homelessness—of not having a stable center that would allow her to venture with confidence and creativity into the world and its possibilities. She is fearful of truly being-at-home, of taking on the sort of existence that has, at its core, the experience of not-being-at-home. She, thus, shrinks back as much as she possibly can from the ‘world’, attempting to find—though with no luck—some place of ultimate stability.

Thus, in her fear of the ‘world’, the agoraphobic shows us in tangible terms something about the utterly intangible anxiety that is at the core of all of us who exist as being-in-the-world. Though the agoraphobic’s fear is focused on the worldly character of the anxiety that arises from our ultimate character as ‘unsettled’, her fear and her
corresponding incapacity to be-at-home is an expression of the human situation of ultimately always being not-at-home—that is, as never being determined or settled. The agoraphobic, thus, reveals something to us about the intrinsic relationship between our way of spatial being-in-the-world and our activity of having a home, of making a home, of dwelling. Most basically, the agoraphobic has shown us that even within the ‘world’, our ability to dwell is not a given. No tangible ‘home’ and no accompanying hobbies, projects, or professions into which we are ‘settled’ will ever be enough to absolutely establish either who we are or our ability to be-at-home. More deeply, our phenomenological study of agoraphobia reveals that the thickness of the ‘world’ is not settled, and that the very possibility of world is bound up with our way of being.\footnote{In his analysis of an agoraphobic patient, Binswanger suggests that even in the agoraphobic’s general lived stance of shutting down the space of her existence, she cannot nor does she want to do this completely. He writes: By perpetually asking fate for its opinion, Lola tried to let some light (which always means some space) enter into the uncanniness of her existence. ... To us, this shows the struggle of the existence to create space even in the nothingness of anxiety, a space in which it can move freely, breathe freely, act freely—free of the unbearable burden of the Dreadful. Even if the answer is “no,” space is nevertheless opened through that negation; and although it is limited, imprisoned space, nonetheless it is space (Binswanger 318). This observation suggests that even the agoraphobic herself feels a certain responsibility for her role in creating space.}

Drawing together these points, the agoraphobic helps us to see that space first and foremost has the meaning of home—our proper ‘where’. We have learned that the home is the juncture of our experiences of inwardness and outwardness. It is neither of these in isolation. It is our place of privacy and retreat, but it is only this in distinction from the necessary outside. It is the place that enables us to engage what seems foreign to us. Within our daily experience, the home, as an extension of our very selves, provides a tangible model of this claim that space is our experience of self/other articulation. Being
spatial involves two complementary and inseparable aspects: Being spatial involves experiencing and maintaining a starting point of one’s own—an original point of view—and also involves the venturing forth from this point of own-ness into what is other. These are not isolated moments; they are essential features of the same experience, the experience of spatiality. We are both here and there, and are so all at once. We are both ourselves and other in the same moment. Space is the very articulation of this human experience. Space is the articulation of our possibility of being ourselves not only while we holding the other within us, but because that is essentially what we do—take up otherness and deal with it as our own by already always giving and finding meaning for it.

We do not tend to notice ourselves as constitutively involved in space, just as we typically do not notice our bodies, the locations of our homes or the layout of the interiors of our homes. If we noticed this, we would be incapacitated by this awareness just as tying a shoelace or other ‘thoughtless’ acts become difficult if not impossible for us if we are made to think about the steps that we must go through to complete them. For the most part, we are spatial in an absent way, just as we typically have bodies and a home in an absent way. And, for the most part, this absence is not only good, but, as we have seen, also essential for our way of being-in-the-world. Yet, there is also a way in which we can be inauthentically turned away from our role in home-making and space-making. We can act as if the home and space were simply things we happen upon, things that are preformed and absolutely reliable in their fixity. Perhaps when Heidegger describes us as being in a ‘housing’ crisis—a crisis of dwelling—he is acknowledging that as a society we are increasingly agoraphobic in this way—that is, we are somewhat reticent to feel
and acknowledge both the security of the home we make and also the paradoxically accompanying insecurity that comes from owning up to the fact that it is only we who make a home. There is nothing that can make home or space an absolute, a settled or a priori structure of existence—not even ourselves. We must always go on making our home, making space, and our essential non-being lies therein.
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