

INTRODUCTION to Christine Leroy, *Kinaesthetic Empathy, Ethics and Care*, translated by Anna Pakes, Routledge, July 2025.

The staging of bodies in theatrical performance awakens sensuality. The distinctive feature of dance is perhaps its contagiousness, the intimate way in which it mobilises, moves, even disturbs the viewer. This is why dance is sometimes treated with suspicion. Demanding haptic perception, dance may appear immoral because it makes the viewer lose rational self-control. The idea that dance is contagious is confirmed by the moral censure to which it has often been subject. In this book, I aim to subvert this negative view and explore whether our moral sense is, in fact, grounded in sensuality. I examine whether the ethical dimension of dance in fact derives from its contagiousness, because dance privileges ways of being that are anchored in the kinaesthetic. Arguing against value judgments that position dance as immoral or (conversely) morally normative, I understand the practice as a kinaesthetic introduction to care for the other. In the process, I view dance from the perspective of phenomenal and aesthetic (that is, sensuous) experience, not as objective narration.

I begin by reflecting on the contagiousness of dance as theatrical performance, which offers an intimate experience of kinaesthetic sensation raising interesting questions. What happens in this experience? What is transferred from the movement embodied by the performer to the body of the viewer who is moved by that performance? The key elements of the phenomenon of sensuous contagion demand exploration, just as the phenomenon also needs to be named. To this end, I explore critical dance theory and the concept of *kinaesthetic empathy*, drawing mainly on phenomenology to describe and conceptualise the contagiousness of movement in terms of both the dancer's and the dance receiver's experience of the lived body. I thereby demonstrate the conceptual compatibility between dance research and the phenomenological conception of empathy. Phenomenology's focus on the dynamics of intentionality, Husserl's notion of kinaesthetic perception and Merleau-Ponty's concept of *flesh* help think through the corporeal, sensorimotor grounding of empathy, as well as its transcendental and intersubjective dynamics. I draw also on psychoanalytic concepts of body image, matrix, symbolisation and transitional play space to explain both the psychological roots of kinaesthetic empathy and its ethical-therapeutic import. I argue that kinaesthesia and the empathy experienced when watching theatre dance foster an ethical apprehension of the other, as of oneself, on the basis of corporeal experience.

I then consider the caring power of the kinaesthetic empathy that mediates between stage and auditorium, in a sense which connects the therapeutic and ethical dimensions of movement practices. Returning to Winnicott's distinction between cure and care, I show how far dance, as performance as

well as practice, can develop a human ethical disposition in the flesh. I draw particularly on what we can learn from contact improvisation, from selected dance-theatre works and from some neoclassical ballets as regards the human and ethical concerns related to what Emmanuel de Saint Aubert calls *portance* [uplift]. Maurice Hamington's embodied epistemology of care helps think through how dance, via kinaesthetic empathy, privileges a cognitive apprehension of the other which is non-rational and corporeal. The moving body on stage thus becomes a purveyor of care for both performer and spectator, revealing a mutual ethical responsibility. Arguably, this rests on a fundamental aspect of all movement practice: that of lightening the body and the mind of the person dancing to the extent of sublimating the weight of the spectator's lived desire.

Finally, I explore how the weight of the flesh is connected to care, understood not as cure but as a process of subjectivation and autonomisation based on our corporeal relations with others. The connection between the subject's desire [*dessein*] and movement design [*dessin*], which clearly operates in dance, restores to the lacunary or dependent subject authority over her/his own desire. This means that movement and choreographic practice have significant potential to re-design the (unconscious) body image, remedying the lacunae that the subject experiences as insatiable burden or weight. What is repressed or unspoken generates a silence or empty space, manifest in its ineffable presence and the void of anxiety it creates, weighing the subject down. Conversely, the choreography of movement and gesture enables a symbolisation of what has not already been symbolised, lightening the dancing subject's load. The viewer who feels kinaesthetic empathy for the performer on stage undergoes a similar experience and this empathy is therefore a means to psychologically reorganise the viewer's own body image.

Arguing that ethics consists in restoring human dignity to the individual, I see dance as embodying humanising care in the way it allows and encourages the redesign of the self's desire [*dessein*] through motor gesture. Moreover, following Winnicott's example, I claim that such care is a means of – and the basis for – cure in the therapeutic sense: no healing is possible without the patient's reappropriation of the own-body; to heal is precisely to move from being a *patient*, which etymologically suggests passivity, to being an autonomous agent. This autonomy is not solipsistic, however: kinaesthetic empathy only channels care and reveals moral sense because it implies a *relation* to, and a tension, with otherness. This is a relation of interaction rather than submission or domination. The care that operates in dance does not ignore the interdependence of human beings. Rather, that care restores the subject to his desire [*dessein*] and offers healing through the kinaesthetic (re-)design [*dessin*] of the

unconscious body image. That image is reshaped through both the act of performing and the experience of kinaesthetic empathy.

This argument is developed here in theory and demands clinical application. But already, the argument invites us to decompartmentalise the field of therapy and its contemporary devaluing of care, opening the field up to ethics. More precisely, it seems important to rethink cure in the light of care, by understanding ethics in a way that roots it in the own body. Everything starts from the body, but not the somatic body so much as a body woven from corporeally experienced affects. Caring for someone is thus not merely a question of caring for a *soma*, but rather of tending to this affective and corporeal fabric which calls for care. I posit ethical care as restorative of the subject's movement desire. This restoration via ethics consists, according to my argument, in filling the lacunae of the body-image. On my argument, both movement practice and the kinaesthetic empathy operating between the moving body and the viewing body participate in this process.