

ARTIGOS

- ESTUDOS TEÓRICOS OU HISTÓRICOS

MICHEL HENRY: AFFECTIVITY AND HALLUCINATION¹

Michel Henry: afetividade e alucinação

Michel Henry: afectividad y alucinación

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Abstract: In this article, we show how Michel Henry takes hallucination as a paradigm of the phenomenality of life. According to him, the phenomenality of hallucination refers us to the affective life laid bare by the phenomenality of subjective life. And because the affective life is pure experience brought to existence from life through modes of hearing, vision, anxiety, fear, in it, hallucination, while phenomenon suspended in its own phenomenality, appears as a phenomenon that is exemplary of life, though experienced in a feeling of pure intolerability of this affective experience of life. However, it is from the experience of intolerability of the self-experience of life that one finds, inherent to the feeling of affection of life, the possibility of reverting suffering into fruition. We also show convergences between the phenomenality of the affective life and clinical, laboratorial or other practices, and their developments into interdisciplinarity in our research group.

Keywords: Experience of oneself; Hallucination; Unbearableness; Pure possibility; Interdisciplinarity.

Resumo: Neste artigo mostramos como é que Michel Henry toma a alucinação como paradigma da fenomenalidade da vida. Nele, a fenomenalidade da alucinação situa-nos na vida afetiva deixada a nu pela fenomenalidade da vida subjetiva. E porque a vida afetiva é vivência da pura vinda a si da vida nas modalidades da audição, da visão, da angústia, do temor, nela, a alucinação, enquanto fenômeno suspenso na sua própria fenomenalidade aparece como fenômeno exemplar da vida, ainda que vivido em sentimento de pura insuportabilidade dessa prova afetiva da vida. Todavia é a partir da experiência da insuportabilidade da prova de si da vida que se encontra, inerente ao sentimento da afeção da vida, a possibilidade de reversão do sofrimento em fruição. Mostramos ainda convergências entre a fenomenalidade da vida afetiva e práticas clínicas, laboratoriais ou outras, e seus desenvolvimentos em interdisciplinaridade no nosso grupo de investigação.

Palavras-chave: Prova de si; Alucinação; Insuportabilidade; Pura possibilidade; Interdisciplinaridade.

Resumen: En este artículo mostramos cómo Michel Henry toma la alucinación como paradigma de la fenomenicidad de la vida. De acuerdo con Henry, la fenomenicidad de la alucinación nos emplaza a la vida afectiva mostrada en su desnudez a través de la fenomenicidad de la vida subjetiva. Y dado que la vida afectiva es vivencia de la pura venida a sí de la vida en las modalidades de la audición, la visión, la angustia o el temor, en la alucinación, en cuanto fenómeno suspenso en su propia fenomenicidad, aparece como fenómeno ejemplar de la vida, aunque vivido en sentimiento de pura intolerancia de esa prueba afectiva de la vida. No obstante, es a partir de la experiencia de intolerancia de la prueba de sí de la vida como se encuentra, inherente al sentimiento de la afección de la vida, la posibilidad de reversión del sufrimiento en frucción. Mostramos por último algunas convergencias entre la fenomenicidad de la vida afectiva y las prácticas clínicas, de laboratorio o de otra naturaleza, y sus desarrollos en nuestro grupo de investigación desde una perspectiva multidisciplinar.

Palabras clave: Experiencia de sí; Alucinación; Intolerancia; Pura posibilidad; Interdisciplinariedad.

1. The question

With the title *Affectivity and Hallucination*, we will give voice to the interdisciplinary research field concerning both the phenomenology of life and health sciences, ratified by Michel Henry, in Porto, in 2001 (Henry, 2001). A validation that only appears at this point in his work and his life, because at this point there are conditions of possibility of a debate that goes beyond the pure and simple refutation of the causes and reasons of the opponent (Kant, 1781/1985), in this case, the cultural clash

between the paradigm of scientificity conveyed by sciences and that conveyed by the phenomenology of life. Now the actual experience that is brought, at this time, to debate and that ratifies interdisciplinarity is the experience of the insufficiency of a model of rationality that disregards the subjectivity phenomena. A model whose insufficiency the work of Michel Henry – his entire work – denounces; a model whose insufficiency is, also, recognized by those – scientists and clinicians – who follow it in their activities.

However, if subjectivity was at the center of the questions that, in the words of Michel Henry, brought together those whose investigation's purpose is *to bring a sick life back to power and joy of living* (Henry, 2001, p. 142),

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today affectivity is at the center of that debate. Affectivity is the horizon of phenomenality opened and laid bare by subjectivity: phenomenality of the emergence of life in the living, in the words of science, or auto-affectation of life, in the words of Michel Henry. In either case, it is the affection of life in the living that is, today, at the center of questions shared by science and philosophy. Both question what was culturally considered – and somehow still is – the specificity of our being and of our action: its unconditional freedom and with it the personal responsibility inherent in our actions.

Today, science and phenomenology of life lead us to question the spontaneity of the auto-affectation of the life that we live in a body endowed with senses and its implications for our action, since action, human action, is also connected to the feeling of this auto-affectation originated from life that, living, we are. Feeling at times quietly lived by us, at times abruptly interrupted by the affections of life that disturb not only the silence of the senses, but of the organs, as well as of the most recessed and forgotten parts of our being, impacting our life completely and with it our identity and singularity. Affections whose silence the so-called pathologies of life awaken, laying bare the life that the silences silenced.

It is in this context that we bring to debate the theme *affectivity and hallucination* so that, in it, we highlight the contributions of the phenomenality of life that are at stake in the research and clinical practices confronted, every day, with facts that challenge our beliefs and our mindsets. These facts lead us to think how humanization and dehumanization of the experience of oneself intersect in the phenomenality of life concerning the sense of affection of which hallucination is an example.

A theme that we will discuss having as reference two texts by Michel Henry, directed to the same audience – scientist-philosophers and therapists – showing their internal coherence and the dynamism of their questions. The texts to which we refer are *Les sciences et l'éthique* and *Eux en moi: une phénoménologie* (Henry, 1992). And we will present them in three points that articulate the phenomenality of subjectivity with that of affectivity and this with interdisciplinarity, in a course, in our research groups.

In the first point, we situate the theme presented here, in the phenomenality of pain and suffering while phenomena that refer to the domain of sensitivity and, therefore, of subjectivity. In the second point, we show that the phenomenality of pain and suffering refer from subjectivity to affectivity, inasmuch as all feeling is the feeling of an affection of life itself. And, in the third point, we present the intertwining of the phenomenology of affectivity with the life sciences, including clinical practices.

We will see that, in Michel Henry, the truth of hallucination is the truth of life and, therefore, based on its truth, we will seek solutions for its/our (de)humanization. Thus, we will continue this expression of Michel Henry:

“Man begins where begins this living defined as experiencing oneself and ends where it ends. Now this domain of phenomenality is that of ethics” (Henry, 1992, p. 8).

2. Subjectivity and medical practice

In *Les sciences et l'éthique* (1992), Michel Henry shows the importance of subjectivity in understanding our humanity, especially when scientific knowledge fails in its ability to support the experience of phenomena such as pain and suffering. Michel Henry shows how audible is the *silence of the senses, of the organs, and of life* that, from the dawn of modernity to the present day, insistently echo and scream in the bowels of its suffocation undermining any attempt to being able to ignore them. And he shows it in line with the way opened by the phenomenality of life that has been developing steadily since his first novel *Le jeune officier* (Henry, 1954) to *Paroles du Christ* (Henry, 2002). The novelty of this article from 1992, if any, is in its possibility of the phenomenality of subjectivity articulating with the issues of health sciences, in particular laboratory investigations and medical and clinical practices. And we say, if any novelty, for it is known by all Michel Henry's dialogue – particularly throughout the decade of the 1980s – with the sciences, although by this time it was limited to dialogue with psychoanalysis, specifically to its history and to the need of its refounding². However, now it is not just a matter of refounding the sciences around the human psyche, but around the life we know living in a body, not any body, but in a body endowed with senses: a body that suffers, that loves and hates, that wants and rejects, that desires and is frustrated, that lives and sickens, that dies and is reborn from its own death!

Thus, in line with the phenomenality of life, it is not surprising that Michel Henry was invited to speak at the international conference *Suffering and pain: subjectivity in medical practice*³ (1998), a Symposium where scientists, clinicians, therapists, and philosophers are united in the recovery of a cultural tradition, ours, in which knowledge and action, rather than opposites, constitute a harmonious unity (Henry, 1992, p. 1), inasmuch as they are only modes of our being and of our living.

As it is not surprising that Michel Henry outlines, a little later (2000/2001), that which he intuitively to be a possible phenomenological domain of interdisciplinarity with biomedical sciences: “all objective knowledge operating [in the clinical act] is crossed by a stare that sees, beyond them, [...] what results from them to a flesh” (Henry, 2000, p. 317).

² We refer to The Genealogy of Psychoanalysis and to the multiple articles on this theme, namely the text *Phénoménologie et psychanalyse*, in *Psychiatrie et existence*, Grenoble, Millon, 1991, p. 95-107.

³ Colloquium organized by the medicine Philosophy group from the Oncology Institute of Lisbon, Francisco Gentil, at Arrábida, 1998.

Thus, we can say that medicine, even the medicine of pain, appears as irreducible to the physicality of pain and psychotherapies are not exempt from physical or bodily manifestations, for both appeal to the humanity or inhumanity that are part of them, that is, to the phenomenality of subjective life (Gély, 2012, p. 177), since it is in such phenomenality that we find the possibility and the refusal of supporting the life that is dealing with itself.

At the root of clinical practice is the life of each and every one of us; a life whose phenomenality is processed in another manner instead of objectivity and in which subjectivity recovers its space in clinical practices and in the phenomenology of life. A space that opens to interdisciplinarity and that Michel Henry eventually recognize as an indispensable practice both to philosophy and science: “Interdisciplinarity is not an opportunistic term or a merciful vow, it is the daily work and bread of those, medical doctors and philosophers, who are united by a single purpose: to bring a sick life back to its power and joy of living” (Henry, 2001, p. 142).

A space that – after his death – we continued and whose most recent results are already published (Antúnez, Martins, Ferreira, 2014; Antúnez, Safra, Ferreira, 2014). In these works, we show that sensitivity is part of medical practice, for it is constitutive of our humanity. Nevertheless, as sensitivity refers to the affective essence resulting from the occurrence of life in us and as us, it is towards the phenomenality of this essence in articulation with the life sciences that now we guide our investigations. This is the context in which we will present, then, now the theme *affectivity and hallucination*. That is, we will articulate the phenomenality of hallucination with the phenomenality of affectivity from which hallucination appears, in Michel Henry, as an exemplary phenomenon.

3. Subjectivity and affectivity

Subjectivity, seized in its positivity and not in opposition to objectivity, opens pain and suffering to a phenomenality that becomes effective without any predictability and, therefore, of any objectivity or being, because pain and suffering experience themselves in the process of life that originally we only know by living. Pain and suffering experience themselves in life’s affections in us and as ourselves, such as joy, anguish, a color or a sound experience themselves: they experience themselves as constitutive of our being. Because the materiality or phenomenological fabric (Henry, 1990, p. 6) of pain and suffering are pain and suffering. Pain and suffering install in us, restructuring us even in the deconstruction of what we are, enabling us to recreate ourselves even from what we call sickening. We feel them, experience them in this establishment of life, taken in its foundations that is it-

self its support in the *pure* phenomenality of its affection. Or in Henrian terms: “Pure are the feelings that come from the experience of oneself which is the being and life, an absolute life”, adding “the purity of feeling resides in its foundation” (Henry, 1963, p. 843).

Now in Michel Henry the *essence* of feeling is the affection of life in itself; affection that we experience as elementary possibility of our living, because in it we are and exist. However, if we all agree that life installs in us as primordial possibility of our living in the modalities of seeing, walking, wanting, rejecting, thinking, feeling, since not everyone will agree when this primordial possibility is attributed to apprehension, hallucination, anguish, fear, despair, as Michel Henry does. And it can be done because that is what the phenomenology of life reveals: pain, suffering, hallucination, fear, anguish, color, sound, smell, desire are emotional tonalities of the life that we experience as impulse, instinct, desire of life appealing to life. Impulse or drive that in Henrian terms also translates into excess of power lived in each mode of life. Excess which is a burden in itself, which is suffering, because this drive leaves us dealing with the experience of this excess: “The force of that which originally adhered to itself, in the edifying union of the being, the force of affectivity and feeling, this is that which suffering is responsible for before being the weight of its own tonality, the supplement, the excess of power that it lets out and releases as that which in it is permanent even when it culminates and breaks into extreme pain and sob” (Henry, 1963, p. 840).

Then we have that every affective tonality of our living is pure cohesion with itself – a cohesion that allows the identity of every tonality – it is also a burden. A burden all the more difficult to bear the more excessive is its weight. Weight or excess that can break into pain and solutions that can ultimately render us powerless. Power of life that in the limit of its excess can render us powerless; this is what characterizes the phenomenality of hallucination. And thus if any and all experience of life – sight, hearing, love and hate, perception – are establishments of life in us, as us, essentially experienced as feeling of an affection that drives us to action, the action resulting from an affection that in its excess renders us powerless, similarly, it also deprives us of the possibility of enjoying this primordial possibility of our living.

And it is in this sense that once again the phenomenality of hallucination opens the phenomenality of life not only to its truth, but to the truth of ourselves: being allowed to enjoy the powers of life or not; the same is to say moving in and with the essence of life itself so that life itself is enhanced by itself.

Let us return to the theses of the phenomenology of life in Michel Henry: in the phenomenality of life sight or hearing are no different from the phenomenality of anguish or despair, as well as they are no different from the phenomenality of hallucination. Apropos, the hallu-

ination collects in itself the paradigm of all the phenomenality of life, because its phenomenality is processed in a priority (Kanabus, 2011; Kanabus, 2014, p. 144) that is absolute in relation to any control that we can exert over it as well as over any reference to a reality that is heterogeneous in relation to it (Gély, 2014, p. 107-136). Nonetheless, we are involved in each mode of the experience of life, for all its experiences are experienced by us as pure feeling of sight, hearing, love, hate, anguish, fear, despair. Pure feeling or pure consciousness of an affect. *Simple* to feel involved with itself, life, in a Henrian sense, has nothing to do with being unconscious (Henry, 1992, p. 4). Even when it succumbs to itself, especially when it succumbs to itself, life feels that it succumbs to its powers plunging into anguish, plunging into its own despair. Life sickens in the experience of itself, succumbing to itself.

Now if we address the phenomenality of this succumbing to itself, we observe that that to which life succumbs is the weight of affect. To an excess of itself that keeps it from being its being, that is, living, feeling, experiencing, creating. An excess of itself is an excess of affection that emerges from its availability to another one, whosoever this one may be. Understanding the various modes of giving this excess is to understand the various ways to manage it, and this seems to be the question that brings together, to the same discussion, philosophers and physicians, because therein lies the possibility of bringing a sick life back to its power and joy of living (Henry, 2001, p. 142).

And so, once again the phenomenality of hallucination opens the phenomenology of life, in Michel Henry, to the issues that are, today, at the center of our cultural questions. It opens, beyond the debate which implies the need to consider subjectivity in clinical practice, to the current debate with neurosciences, around the question about the possibility of an ethical action when one discovers that the essence of life in us is inhabited by an "arch-intelligibility with its own laws" (Henry, 1992, p. 6) that drive and determine our action, whatever the mode whereby we experience that arch-intelligibility and its laws: in the mode of hallucination, of anguish, of fear, of sight, of hearing, of thinking, of walking, of love, of hatred, of lust or of nuisance, in a word in the specific modes of our being. However, modes that involve us in them so we can live with them. Life, the life of each and every one of us is originally relationship, community. The feeling of oneself is experience of this relationship. Resuming the dynamism of this relationship is to bring a life back to its power and joy of living.

Which can only be attained if in the phenomenology of self-experience there is, beyond the break with narcissism, self-absorption or closure of life in itself, in it, space to move in affect. When experiencing itself in life, the self experiences itself more than itself; in affect experiences itself united to all the self(ves) that in life ex-

perience themselves; yet not only to all self(ves) that in life experience themselves, but to everything that in life undergoes a self-experience (Henry, 2004, p. 224). May life then move in this self-experiencing more than itself, in this experiencing the other in affect.

Michel Henry devises no ethic: he only indicates the extent of its phenomenality which is that of the domain of action. A domain that is the domain of self-experience of life that, in experiencing oneself, involves us in it, driving us undeniably to interact with the affective essence whereby and in which it is revealed or manifested in us. An essence that is primarily relational because our action, in life and towards life, is primarily ethical. The interdisciplinarity between life's sorts of knowledge is based on this arch-relationality of affective life.

4. Affectivity and interdisciplinarity

The first important element of the phenomenology of life brought to this debate is the possibility inherent in experience itself or in the experience of oneself and consists in the possibility of life supporting itself from its own affection of life. Each of us, when experiencing life in its affective foundation, supports oneself from oneself by sustaining from life itself. A possibility whose intuition seems to be at stake in the insistent reference of Michel Henry to Kafka: a chance that "the soil on which I stand is never wider than the two feet covering it. Because the mystery of life is this: that the living is coextensive to the Whole of life in him, that everything in him is his own life. The living did not create his essence, he has an Essence that is life, but this essence is not different from him, he is the autoaffection in which he affects himself and with which, thus, he identifies" (Henry, 1990, p. 177).

An essence of life is not even an anonymous essence nor an unrelated singularity. It is a selfhood because it is experienced in the modes of pure consciousness of anguish, of despair, of fear, and even of helplessness. Helplessness is its awareness of its possibility of being in and through the pathic life. Because when all is wrecked, eliminating any possibility of recovery (Henry, 2002, p. 123), the pure feeling of abandonment, of emptiness (Henry, 2003, p. 291) is still even possible itself in its living, but now open to possibilities still to live, still unthinkable, still nonexistent: for the future!

In revealing by the feeling of life, it is exposed as pure affective consciousness and in doing so allows us to know it knowing with its limits its possibilities. The webs of life are affective webs: relationships are the threads in this fabric of affects! Threads often lived in an entanglement of emotions that render powerless the one who lives them like this. But, still, threads that hope to be entwined into fabrics yet to be woven! Desire threads!

Michel Henry, in the novel *The son of the King*, refers to this possibility in this manner; in the desire mode. It says about one of the characters in the novel, Mariette/Lucile: “[...] pierced by more arrows than the saint attached to the column, it is not out of weakness but out of your powers that you succumb [...] may the perfection displayed by your flesh and that it radiates remain no longer among us excessively horrendous, oh yes, may it be stronger than the unbearable. May it not be mad!” (Henry, 1981, p. 65).

May life be stronger than the unbearable! May it support itself from this unbearable! May it not madden! May it live with the primary revelation of the power of the affection of life, even when it in the immersion of itself renders it powerless, destroyed, reduced to wreckage! May it be reborn from the pure consciousness of the wreckage!

May she! Desire transformed into possibility, left open by the phenomenality of life in the article “They in me: a phenomenology”: the possibility of “bringing a sick life back to its power and joy of living”. A possibility already acknowledged in the novel *The son of the king*, but denied in the ineffectiveness of clinical practices that were supported by a divorce between theory and practice. Michel Henry’s conference in Porto in 2001 draws attention to the possible reconciliation of this divorce. A reconciliation we consider possible, not as application of a theory to a practice, but by the inherence of both in the phenomenality of life in themselves, as we have been exposing.

In phenomenological terms, it is attending to the (un) twining of the threads whereby life regenerates and recreates: the threads of the passage from the pure consciousness of an essence to the involvement with this essence in order to revolve in its same essence. In Husserlian terms, we would say we want to know the articulation between two modes of the consciousness of the wreckage: the pure consciousness of wreckage experienced as feeling that, while pulling away from itself (*ante-simul / Vor-Zugleich*) the pure passivity of the wreckage, lives, at the same time (*Zugleich*), renewed from the recovery of this wreckage. In Henrian terms, we would speak of body-propriation (*corpspropriation*) of the wreckage: pathos-avec.

The design of an interdisciplinary research project around the Henrian concept of body-propriation was the subject of the international colloquium held in 2012 in Lisbon (Martins, 2014, p. 73-76). The implications of the concept of body-propriation in therapies, raised by the presentation of Benoît Kanabus’ conference *The concept of body-propriation in Michel Henry and Christophe Dejours* in the international colloquium *Michel Henry: The unconditional of the human condition*, held in Porto in 2013 (Kanabus, 2014, 101-103)⁴, resulted in an inter-

disciplinary meeting, held at USP (Universidade de São Paulo/Brazil) and UGS (Universidade General Sarmiento, Argentina) in 2014. The results of these meetings and discussions are already published⁵.

In this article, we show how this concept of body-propriation meets a need left pending in the novel *The son of the king*. In it, Michel Henry, after having referred the concept of the unconscious to the pure phenomenality of consciousness in the modes of anguish, of helplessness, of annihilation, of collapse, leaves open in it the possibility of the support of life to the excess that it creates itself! If the other lives as excess that annihilates, then this other can also be lived as excess that supports! Excess experienced as affect; excess that identifies each one in oneself even when in this same excess lived! Excess waiting for recreation of itself. Unsuccessful desire in the novel *The son of the king*. Desire resumed in the article “They in me: a phenomenology”, but now answering to the theme of the colloquium itself: “the others in I”! The others in I, like the others in me: pathos-with! Life! Relationship that in affect is woven and lived! In affection is renewed from the wreckage!

It is in the continuation of this possibility that the theme of body-propriation while possibility of a phenomenality of support of life from the pure feeling or consciousness of an affective essence to which we are bound allows giving new developments to clinical practices whose receptivity to the phenomenology of life is already part of their activities as well as integrating others that discover that same affinity. Such is the case of the clinical practices which relate to motor issues. A work started in *Primavera de saudade em fios quatro-zero* (Martins & Teixeira, 2007, p. 17-28) and which aimed the interdisciplinarity of therapies to recover a mobility lost either by disease or by accident. A work which Renato Mauri continues, integrating the concept in the study of human movement and sport movement. A practice that may receive a relevant contribution from a cultural tradition in Brazil, which is the game of *capoeira*⁶. A game that, in phenomenological terms, consists in supporting oneself totally from the body movement of another one, transforming the opponent’s aggressiveness into a continuous game. Physically, in a group, in community life overcomes shunting inertia and death, scam, fraud, pain, suffering. The life of each of us overcomes and develops by becoming involved with the lives of each and every one of us. And that is why community life, in Michel Henry, is not only subjectivity but feeling: pathos, *épreuve de soi*, that while support of self is co-pathos or pathos-avec (Henry, 1990).

⁵ The results of this research will be published in the USP Psychology Journal (Revista de Psicologia da USP). Articles are written by Andrés Antúñez; Benoît Kanabus, Florinda Martins, and Maristela Ferreira.

⁶ The phenomenology of life is nothing apart of life: its potentialities revealed themselves to us in a “capoeira” party for children, which took place at Fondation Lycée Pasteur - Casa Santos Dumond - São Paulo. We thank the foundation and the organizers.

⁴ In Michel Henry: o incondicional da condição humana, Revista da Faculdade de Teologia, Porto.

It is in the web of this pathos that we collect the very laws of our living and with them their possibilities and limits (Henry, 1992, p. 6). Limits or constraints revealed by the dynamism of the affective life that we live in our “flesh”; that we live “in the flesh”. Limits within which, in the words of Adélia Prado, *nothing is ever dead* and where *what seems static awaits* (Prado, 2001, p. 19). To say that Jacqueline Santoantonio well knows her practices of Painting Workshop (Santoantonio, 2014, p. 253-272). In it, energies that long lurk, fearful, for means of expression, are set in motion. And as in Kandinsky, in the Painting Workshop colors also express this originating motion of life that is essential to all originating expression that the work of art embodies. Therefore, in Michel Henry the narrative of the feeling of sun on the back (Henry, 1981, p. 105), in *The son of the king*, brings with it the same dimension of eternity of the work of Kandinsky or a Renaissance work. The truth of hallucination is impossibility of its opacity to itself. The opacity to itself is its falsehood. But these are the truth and falsehood of each and every experience of life: the impossibility of opacity to itself in the pure affective consciousness versus its opacity as unconscious as its visibility without essence.

With the concept of body-propriation, it is the human condition that must be re-thought in its foundation. Supported by the affect that is experienced from the outburst of the innermost emotion (Henry, 1996), supported by that which the observation of an X-ray can tell us what from there results for a flesh (Henry, 2000, p. 317), supported by an affection that translates into a protein with implications to memory (Teixeira & Martins, 2006, p. 321-233), or in the creation of an enriched environment that favors a certain morphology of neurons with implications to the quality of life of an Alzheimer patient or in the determination of human development periods that are more or less conducive to the appearance of psychiatric disorders (Yu, Teixeira, Mahadevia, Huang, Balsam, Mann, Gingrich & Ansoerge, 2014), supported by its essence, the phenomenality of life, as evidenced by itself, enables passing from the approach of objectivity to that of subjectivity so in it are found the laws that revolve it completely: with the phenomenological reversal life is reborn in its essence and the essence is reborn with it.

Therapeutic Accompaniment, while monitoring of the emotional entanglements of life in each and every one of us, could become the expression of a culture, in which clinical practice, rather than following the representations and symbolizations of the real, follows that which gives them expression: affective life with its constraints and possibilities in loving intertwining of threads that weave each living.

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