



Ted Kerr

Jim's map documents his life experiences.

living with HIV, imposed over their bodies. An overlapping outline of another person acknowledged the help they had received; other sources of strength were recognized in word and image.

Each artist developed a symbol of his personal power. Jim located the astrological sign Aries (represented by a ram) on his brain. David depicted an image of his power symbol, a horse, on his mouth. The third artist (who preferred to remain anonymous) located a dagger on his forearm.

The participants described experiencing a heightened awareness and appreciation of the various threads and storylines making up their lives. They noticed the sometimes limiting ways in which they had narrated their stories, and they had a renewed appreciation of all that helped them to sustain their courage, integrity and hope. In addition, they experienced a renewed commitment to promoting increased acceptance and understanding that would help reduce the stigma of HIV, a fundamental goal of the exhibit.

Ted Kerr, Canada's first artist-in-residence at a community organization that provides support, education and advocacy in relation to HIV/AIDS, said "People with HIV can be in charge of their own representation. AIDS quilts were created to commemorate those lost to AIDS by others left behind. The unique stories depicted in these body maps are not dealing with the prospect

of death, but represent what it is like to live with HIV and AIDS."

Body mapping supports a process of personal reflection and making meaning that relates to one's lived experience of illness. It can also be used to augment medical histories by contributing to the understanding the patient as a whole person, which may, in turn, yield supplementary information that is relevant to treatment and patient education.<sup>3</sup> Heightened awareness of illness as lived through the body offers a way to connect with patients about their experience of illness, which may also be of significant therapeutic value.<sup>4</sup> Other possible body mapping applications come to mind, such as body mapping with patients with eating disorders or those living with chronic pain.

As a cartography that recognizes the lived experience of illness, body maps reveal how the biomedical intertwines with an intimately personal history. The body maps in this exhibit remind us to take the body seriously. They also allow us to appreciate the experience of HIV/AIDS and related experience of

stigma, in ways that allow new possibilities to emerge — for self, others and our communities.

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### CREATIVE WORKS

## A beautiful heart

Each weekday morning, I review my clinic schedule to see who will be visiting. With just a glance, I can predict the tenor of the day. Certain names evoke joy, others indifference, some dread. I still remember the first day of spring, some years ago, when my schedule augured a banner day: Opal Hendricks was on the list.

I had met Mrs. Hendricks 7 years prior to that visit. Her previous doctor had retired and I was assuming her care. She was 81 then and not a day younger. Her wizened face was framed by long sheaves of metallic grey hair. Her hazel eyes were large and round like saucers. She had thin lips and crooked teeth, and she wore a faded brown dress, which was immaculate. She sat perfectly upright with her arms neatly folded. Her hands were arthritic,

her legs were like twigs, but when she smiled, she was Helen of Troy.

During that first visit, I asked about her health, which caused her to giggle. "I'm fine," she replied. She had the voice and manner of a child. Her eyes were curious like a toddler in the attic. She looked at me as though I had just given her a box of candy.

She was not concerned about her blood pressure, which was high. I asked if she had taken her medicine. She had been out for several months. Her previous doctor had not filled her medicine because she had missed several appointments. Why had she missed them?

"Because Willy needs me."

"Willy?" I inquired.

With that, she effervesced. Her smile grew large like the sun. Her eyes radiated joy. She lifted her hands like a girl impatient to tell a story.

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Over the next hour, I learned about Willy. He was “slow.” When he was born, the doctors predicted a short life. That was 62 years ago. Now he was well — and happy. He loved to sit by his mother on the porch and watch the cars go by. And he could sit all day-long, unassisted.

As I listened, I could tell that his mother assisted him with everything: walking, bathing, clothing, eating. But this had to be inferred, for she spoke only of what he could do. She savoured his every achievement and marvelled at his independence. Once, he had almost buttoned his pants. On several occasions, he had correctly used a spoon. And he always recognized his aunt Myrna.

As Mrs. Hendricks spoke, I was drawn into her ethereal world. She was bewitching. With her soft, feathery voice, she pranced from word to word like a fairy. Her bubbly manner and impish tone had an anachronistic charm. She had aged; yet, with her son, she occupied an ever-green world where innocence prevailed. If sadness ever visited, it left no footprint.

To hear her was to enter a realm of verdant pastures and placid lakes. Perhaps her elfish tone was an accommodation to her son’s simplicity; or perhaps, by some miracle, her heart had been rendered impervious to erosion. I luxuriated in the cadence of her voice and was sad when her story finally ended. Before she left, I filled her medicine and asked her to return in 2 weeks.

And return she did, repeatedly over 7 years. At each visit, we revelled in Willy’s exploits. He was Achilles in an ongoing epic, the provenance of a legend. Her tale was lush and limitless; her enthusiasm, incandescent. She had the world’s greatest job — Willy’s mother, exalted and triumphant.

Over the years, Mrs. Hendricks missed only 2 appointments, both because she could not find a sitter for Willy. But that did not matter. To fault

this paragon of motherhood for her truancy was unfathomable.

And so on that lovely spring morning 3 years ago, I was delighted to see her name on the list. As always, she arrived



punctually. I entered the room and turned to greet her. And upon seeing her, I fell speechless. She was gazing forward, tears streaming down her cheeks. Her tortured face made me recoil.

“What happened?” I asked fearfully. She responded with the plangent cry of a lamb being devoured. Her eyes protruded as if a ghost had appeared. Her lips quivered; her hands shook. Through sobs and snorts, she muttered a few broken words. Then, slowly, as her voice cleared, she began her lachrymose tale.

Willy had caught a cold. After a few days, he had started to feel better, but then developed a fever. Soon he was coughing and congested. The next morning, he was confused. The ambulance was called, but he fell asleep before it arrived and never awoke.

Her story complete, Mrs. Hendricks fell silent. Her head was bowed, her eyes were closed, her arms outstretched. She was the pieta incarnate. I gazed at her as I would gaze upon the pyramids of Giza — with awe befitting a work of ineffable grandeur. That she had been devoted to her son was unremarkable, but that she had subsumed every thought, word, and action for more than 60 years to the care of a disabled child, boy, and man — indeed, to her very soul — was breathtaking.

I tried to comfort her and told her we would discuss her health another time. But I knew there would be no other time. She would never return.

Three years passed without a word. Then one day, her nephew called to say that she had died. I forwent dinner that evening and retired to my bedroom early. Seeking comfort, I listened to a recording of Beethoven’s final sonata and journeyed into sublimity. As the piano evanesced, I was transported to the very altar of music.

Mrs. Hendricks’ influence had been similarly transcendent. She had been my bard for 7 years. My fascination with her, borne of amusement, had evolved into a reflection on archetypal virtue. Indeed, to gaze at her divine countenance was to rise above her broken heart, bask in her goodness, and witness the face of Love itself.

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Dr. Blevins enjoys string quartets, French literature, European history, Caribbean beaches and ice cream.

The patient’s name and pertinent details have been significantly altered to conceal her identity. She passed away many years ago.