

How to Write an Abstract When Your Hands Are on Fire

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Access, Hygiene & Quarantine: Chronically Ill Art in the Age of COVID session
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Abstract

Too often, the art historical canon treats artists' bodies as only worth mentioning in moments of narrative where they might lend profundity, rather than an ever present reality. We ignore that all art is born of physical acts and thus has the inherent potential to be a catalyst for pain.

Pandemic has found many of us working from home, a situation for which chronically ill folks have long advocated. While many reveled in newfound freedom to wear sweatpants during the day, I struggled with the supposition that being home meant things would be physically easier, that because I could work from bed, things should be more comfortable. My illness was not seen as a valid excuse for delay or struggle because I was already home, and the often digital labor of curating was seen as divorced from my body. The expectation of a shared sense of comfort in working in domestic space rests upon an idea that labor done at home is inherently non-physical, with no impact on the body.

Building out of my personal experience with chronic pain, this presentation takes as its starting point the development and ultimate cancellation of the exhibition *An Alarming Specificity* for Haverford College, which focused on embodiment and was called off to protect bodies in the wake of Covid-19. It will explore how to hold a space for pain in arts and arts administration by reconceptualizing sedentary labor as physical work and extricating an expectation of physical comfort from domestic spaces.

Full Text

The full text of this paper, as well as a transcript with descriptions of the accompanying images, is available at www.aubreepenney.com/caa. That's www.aubreepenney.com/caa

In an homage to a 2019 untitled work by artist Shannon Finnegan and as an act of care, I would like to invite you to be as comfortable as you can be at this moment. One of the greatest benefits of not being gathered in a conference room together is that you can kick off your shoes, pour another cup of coffee, and watch this at your discretion. For those of you who will attend the live panel discussion, please feel free to be your genuine selves in that moment. Should this be set up so we can see you on camera, feel free to be in and out of frame, standing up as needed, fidgeting, stimming, whatever you may need. Should we not be able to see you, feel free to do all of those things anyways, if you aren't already.

I would like to recognize that for some of you, finding comfort in this moment is not possible, and some degree of pain is inevitable. It is for you that I have written this paper. I appreciate your presence in this moment.

A few weeks before the North American onset of the COVID-19 pandemic, I was diagnosed with fibromyalgia. After three years of crying upon hearing my alarm ring because I was still so exhausted, struggling through grad school when my brain felt full of cotton wool, and contending with constant aches and pains, I had a name, and perhaps more importantly, an understanding that this was not typical. For years, I thought everyone hurt all over all the time and fought through severe exhaustion each day, and I was just less able to handle it with grace.

After all, the problem with pain is that everyone has it. In so far as pain is embedded in our bodies, we normalize our own individual experience. In turn, the universality of pain often lends itself not to empathy, but the opposite, a sensibility of what I call "me-pathy," i.e. "I-have-felt-pain-and-my-pain-must-have-been-worse-than-your-pain-I-pushed-through-why-can't-you-just-do-what-I-did." In a country where 6 out of 10 people have chronic illness according to the CDC, this is unsurprising. Most of us are sick, or at some point will grapple with chronic illness, or are close with someone chronically ill, even as the type, severity, and prognosis profoundly vary.

Because severity remains largely inarticulable, reliant on subjective 1 to 10 scales of comparison and charts with increasingly grimacing happy faces, we find ourselves at a loss in even articulating our pain to each other. Outside of the rare instances of scientific testing attempting to quantify pain non-subjectively, which brings with it its own complexities and disparities regarding pain acknowledgment and treatment frequently grounded in gender and racial bias, in our daily lives the only frame in which we can operate is based on our own experiences with pain.

As a result, I find myself trying to channel my explanations of my pain into experiences that exist in a realm familiar to most via simile: "It's like having a really bad sunburn, but you can't put sunscreen on it or pop a Benadryl and have it feel any better" I explain, over and over. The long simile feels easier on my tongue than the clinical term dysesthesia, which would still take an explanation anyways. My hands, my shoulders, my arms feel raw as my nervous system works over time, finding pain stimuli where there are none. I suddenly transformed into someone who wears tube tops in hopes of minimizing contact with fabric, only to discover that wearing tube tops on Zoom makes me look like I'm wearing nothing at all.

I wrote the abstract for this paper in ten minute increments, taking breaks to shake out my hands as the fire trickled down to the tips. I cried in frustration when brain fog compromised my planned work sessions. Writing this abstract hurt. Writing this paper *hurt*.

This is taboo: I'm not supposed to acknowledge the writing of this document, admit that I and my body were here writing the abstract and this paper, that it was tiring, that it was painful. It should emerge fully formed: Athena sprung from the head of Zeus with none of the gore of split skull and flesh rendered asunder. We gloss over Zeus's agonizing headache beforehand, the wedge of Hephaestus plunging into his cranium. In a community so fascinated with labor and care, with pain and privilege, is this not a profound omission to act as if our work exists apart from ourselves, including our embodiment?

The digital era has compounded this, lending itself to the narrative of ease and productivity, obscuring labor as it increasingly physically parallels leisure time activity. Running data analysis on a spreadsheet

or writing a paper physically looks quite similar to dabbling on twitter or falling into the black hole of wikipedia searches, though our parasympathetic nervous system may provide pain relief through the latter, but not the former. Eyes darting about a screen, fingers scrolling and clicking, periodically pounding on a keyboard. The mind reels watching a Zoom in a way not required by watching television, video cameras strongarm us into concocting self-portraits of attention and professionalism. Mental labor, emotional labor are physically exhausting. Digital labor is physically exhausting.

One of my favorite books is Kenneth Goldsmith's masterful *Fidget*, in which he attempts to itemize all of his movements throughout the day, ultimately becoming so overwhelmed by the task that he begins drinking and ends up writing backwards. I encouraged you to seek comfort at the beginning. Now for a few moments, channel the opposite: feel in your body the weight of your digital labors. How have your shoulders dealt with hours over a keyboard? Your wrists? How many days have you spent with headache, staring at a screen? Pushing through the exhaustion of Zoom calls? Sick and powering through a project? What hurts? What has hurt?

Take a moment to be that miserably, overwhelmingly aware of your body, where every flick of the finger across your mouse spurs your nerves to fire, each adjustment in your seat makes your back throb. Being human is complicated, being a human in pain even more so. Our digital labors are, all too often, not without pain. Sending our works into the cloud and piling our words into harddrives are not without physical cost, even as the physical manifestations of our work so easily disappear from view.

To qualify some labor as physical suggests that the other, what we term sedentary labor, is in its very nature not physical. That while there is labor that is more physically demanding than others, calling more muscles, more ligaments, and more bodily vulnerability into play, all labor happens through bodies. All labor is physical.

As such, all labor carries the possibility of pain. I am lucky: my body resists the productivity culture rampant in late capitalism with its constant reminders of its limits. I am the personification of the damage and futility of pressing onward. To "rise and grind" would kill me. I now work more deliberately, carefully dividing my time between projects and efforts, avoiding marathons of effort that would send my nervous system into overdrive.

I thought at the onset of COVID that perhaps this new world of increased work from home and the shared sense of mental taxation that accompanies just being alive amidst global trauma would align with my ways of being as a chronically ill person. And for a while, it did. We were generous with each other in the shadows of the early weeks of pandemic. And then I noticed the gradual creep of new expectations: that being home meant we were comfortable, and being comfortable meant that we could produce optimal work. When I cannot sit up in bed, my comfortable office chair at home makes no difference to my ability to excel at my work. Sweatpants do not mitigate national and global trauma, nor do they change how bodies work.

Now that the professional sphere has invaded our homes, eclipsing the idea of private space, rendering the personal professional, we are all the better positioned to insist that the professional be personal: that we are first and foremost beings in fleshy sacks of muscle and viscera and goo, wrapped in a bundle of nerve endings, and we are workers and creatives second, that mutual survival and comfort has to be just as important as profits or missions, if not more so. If we cannot take care of each other within our own immediate sphere, how can we anticipate doing good for others? How can we advocate for the bodies of others when we cannot advocate for ourselves and each other within our praxis?

Consider what it would look like if we imagined all of our colleagues were hurting. Would it change how we structure projects? Anticipate deadlines? Would it shift our timelines for emails? Would we stop allocating sickness to days, containing it to tidy 24 hour periods? Would we offer more flexible hours or continue encouraging people to work from home? Reimagine office supplies to include objects which will nourish bodies and quell suffering? Would we offer more seating in exhibitions for invigilators?

How would we treat audiences if we assumed pain amongst them? Would we prioritize seating? Check how hung work would look from a wheelchair seat? Place works in elevators and bathrooms, acknowledging that these are vital spaces to certain bodies and will profoundly shape their experiences of a gallery or museum?

How can we create work environments and exhibitions in which the expectation is not automatically wellness? In a field that upholds perfection as more valuable than something simply being finished, and the work to benefit the public as more valuable than the wellbeing and comfort of its individual producers, how do we draw the line between professional pursuits and ourselves?

An internal interjection: my hands sting, my nerves suddenly convinced the skin is tightening around my fingertips, gradually pulling up as if I have put too small epidermal gloves on my flesh, flashes of pain rippling across my skin. The bones in my arms stir awake as an ache radiates from within.

My scalp prickles, tense and exhausted. It's akin to the feeling of wearing a high ponytail all day but on every hair, or your socks rubbing your leg hair the wrong direction for hours on end. I think longingly of February 16, 2007, fourteen years ago, the day Britney Spears shaved her head in an LA salon in a moment of catharsis after being denied access to her children following a rehab stint, a look of joy and liberation and exhaustion and pain on her face. I can't decide if my head would feel better that way. I then realize I am too vain, and that because my hair is one of the few aspects of my body visible on zoom calls, I would have to look at it being changed every time I take a meeting. The prospect of shaving seems both liberating and like admitting defeat.

The language of defeat points to a problem in and of itself. "Battle," "fight," and "warrior" terminology abound in chronic illness circles. "Fibromyalgia messed with the wrong girl!" as if it existed outside of ourselves, an inherently other to the self. Externalizing chronic illness offers the illusion of control. It renders it an antagonist, and as such, something not only fightable but conquerable.

Funnily enough, in the midst of my getting diagnosed with fibromyalgia, I was curating an exhibition on embodiment for the Cantor Fitzgerald Gallery at Haverford College. Featuring work by Shannon Finnegan, Chitra Ganesh, GenderFail, Yvette Granata, Lynn Hershman Leeson, Linda Stupart, and Eva Wö, *An Alarming Specificity* engaged with human bodies which do not align with a fictional norm grounded in white patriarchal hegemony. The exhibition examined ways artists subvert the predominance of white, heterosexual, cis-male, non-disabled bodies as the default of humanity, seeking to uphold individual bodies attempting to survive and thrive in a world which frequently neglects to support, protect, recognize, or heal them.

The day we were scheduled to open, March 20, the venue shut down due to the pandemic, following a week of close monitoring and debate about what would happen. Linda Stupart had flown to the US for the installation and a performance, just to have to fly back to the UK. Only the Ganesh work ever entered the space. But I maintain that this show happened. In fact, it took on its highest form, getting

closer to the Platonic ideal of itself than I ever could have planned. What higher calling is there for a show about taking care of bodies than to radically alter itself to do the work of caring for bodies?

In the months since, I have increasingly realized that if I can radically reimagine the work an exhibition is doing regarding care, I should extend that same courtesy to the work our bodies are doing, my own included.

My body is insisting the current late-Capitalist, hyper-productive framework is unsustainable. My body can do its greatest work by insisting that pain and illness proffer insights of their own, that the agonizing pursuit of projects supposedly for the greater good at the expense of individuals is a Neo-Liberal curse, that bodies need recognition as they are rather than as we expect or hope for them to be. That ill people belong in every place people are and that we have much to professionally contribute.

When I was given the opportunity to build a virtual event out of my *An Alarming Specificity* research, I knew this was the space to apply this construction of bodies and work, to operate with a curatorial framework which considered care a guiding aesthetic principle.

In developing the event, the Cantor Fitzgerald Team and I prioritized ease and rest in development and creation, as well as in the experience of said works. Rigor and rest can coexist. Together, the artists and I reimaged audiences not as people who have come to take in art, but people who can be cared for by the art and by the exhibition structure itself.

In developing the event we strategically consolidated emails for everyone's sake, kept things simple and clear. I encouraged artists to find ease in their work and avoid making things difficult on themselves as much as possible. We prioritized larger payments over materials costs. We hired subcontractors for support who were struggling to make ends meet during pandemic. For graphic design, we chose a typeface by Genderfail that would let every place the marketing went espouse that black trans lives matter through the title of the typeface. Our budget prioritized communication access realtime translation, i.e. live captioning, by a stenographer.

Within the event, artist Shannon Finnegan invited attendees to be comfortable, to feel free to move around, to stim, to be themselves on or off camera during the event, a tactic I have adopted in my own presentations. Transcriptions and image descriptions were readily available online. Artist and writer Linda Stupart invited us to turn our microphones on and breathe together in a fond tribute to moments shared in rooms and breaths that carried less danger, to have a shared moment in the messiness of Zoom.

And it worked. I'm a chronic perfectionist, and I say this genuinely: it was perfect. It was an event not marked by precision, but by a generosity to ourselves and each other, that extended to our audience as well. While this model may not work for every project, it demonstrated that there is potential to reimagine how we do things and why, and that our audiences will respond in kind. It was the most thrilling experience of my career thus far.

Recently, I have begun working with Belgian-born and London-based curator Riet Timmerman as the newly formed duo Call You in the Morning, which will operate along these lines, prioritizing care as the determining factor for both our aesthetic and our working practice. This covers everything from ensuring we provide adequate seating in events to crafting image descriptions to resisting obfuscating language and references, such as using the word obfuscate.

We are currently building a digital residency, which will expand to being in person post-COVID, that will offer supported learning and exploration around a central theme within a small cohort of creatives, forging new networks of collaboration and encouragement.

I spent my MFA encouraged to not work with the same people twice, to keep moving like a shark, to always be aiming to work with bigger names and institutions in the art world. In contrast, Riet and I have decided to use Call You in the Morning to prioritize supporting both artists' practices and those artists' survival long term. We knew when we began we wanted to leverage what power we have as curators to encourage, nurture, and fund artists with whom we've developed sustained relationships, rather than constantly extracting cultural value and moving on like some sort of curatorial vampire.

Additionally, we seek to create an institutional structure that prioritizes the wellbeing of staff, ourselves included. In light of my health and a shared concern about work/life balance, we've also decided to try and keep this as enjoyable and pain-minimal as possible. I think back to a beloved mentor of mine at a UK museum who told me about reading papers in the bath and sleeping little because her time was so scant in the early years of her career as she tried to climb the ladder and prove her usefulness. In a museum internship program in the US, a program director fondly waxed poetic on her years of working multiple gigs in New York, being constantly on the move and exhausted, all for the sake of working her way up in the museum world. Listening to those stories at the time, I was in awe. Oh the hustle! The grind! How glorious to give yourself so utterly to the work you love, to overcome your bodily limitations for the sake of art!

In retrospect, I'm heartbroken and horrified. These models leave little room for the success of atypical bodies, for sickness, for rest. Let's break the ladder, and build an elevator. Let us be generous with our audiences, with each other, and with ourselves. Let us anticipate pain and embed care wherever we can, for all of our sakes. Thank you.