

forms of relief

an exhibition of artworks

by

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Author's Declaration

I hereby declare that I am the sole author of this thesis. This is a true copy of the thesis, including any required final revisions, as accepted by my examiners. I understand that my thesis may be made electronically available to the public.

Abstract

I am calling this paper, and the body of work that it supports: *forms of relief*. The word *relief* has a couple of meanings: in the sculptural sense, the Latin root word *relievo* means to “raise or to lighten”, visually resulting in sculpture that combines two- and three-dimensional forms, where the sculpture remains supported by a background of the same material. Relief as an emotion, means to feel a lightness after a period of anxiety, stress or pain has been experienced and has passed. The artwork in my thesis examines the dual reality of relief and chronic pain through material and conceptual explorations. To live with chronic illness often means to live in friction with the hyper-performance of modern western society; to live in resistance to behaviors of individualism, acceleration and competition. It is my opinion that the labour of illness is connected to every other aspect of an ill life. For me, this raises questions about the role that art can play in cognitive and physical restoration practices. What can communicate ideas of imperfection, simulation, trust, time, and importantly, support? How can I both maintain my physical well-being, and my love of building things and fabrication? The sculptures in this exhibition manifest the ideas, philosophies, physical labour, energy expenditure, conversations, research and heart that has made up the last two and a quarter years of my life as I worked to heal and rehabilitate my body and mind, in tandem with making the art presented here.

Land Acknowledgment

In writing a thesis support paper that speaks critically of particular care practices within Western society, I am speaking from a perspective that has benefitted directly from a history of settlement and colonialism. In my personal narrative, I tell a story of frustration, navigating the dynamics of institutionally managed medical systems within this country. But my experience comes with the privilege of being a white settler living in a stolen country with foundations built on racism and genocide towards its First Peoples. Despite promises, these systems are failing to change, failing to decolonize, failing to hold up to promises of reconciliation; in essence, failing to care enough. Until Turtle Island is returned to the Indigenous Nations it belongs to, we are all failing.

I have made this work for my Master's program at the University of Waterloo, which exists on land that was promised in treaty in 1784 to the Haudenosaunee of the Six Nations of the Grand River, within the traditional territory of the Attawandaron (Neutral), Anishinaabe and Haudenosaunee peoples, but it was never given. My familial line plants multiple generations of my relatives on the East Coast on land belonging to the Beothuk and Mi'kma'ki (Newfoundland), in the West on land belonging to the Coast Salish Peoples (Gulf Islands), and in the middle, on land belonging to the Anishinabe (Ojibway), Ininew (Cree), Oji-Cree, Dene, and Dakota, and the Birthplace of the Métis Nation (Winnipeg). For many years I have lived in Tkaronto (Toronto), the traditional territory of the Huron-wendat and Mississaugas of the Credit, as well as the Anishinaabe, the nations of the Haudenosaunee, and more.

I say all of this to acknowledge the space that my ancestry has occupied within this country, and to show how large a web we weave as we navigate our time on this planet; how many lives we have the potential to affect. The history of colonial violence, genocide, neglect and racism that has been perpetuated on Indigenous Peoples—and continues to be so— has been purposefully erased and ignored by colonial settlers. It is time to do better as a society and to care more.

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First and foremost, I want to thank my dear friend Ben, who has been many things to me over many years, but for the past 27 months has been a caregiver. Thank you for feeding me, for all the car rides, for sleeping on my floor, for talking me down and building me up over and over again. Thank you for loving my dog. Thank you for everything.

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Thank you to all of the health practitioners who have helped me over these past two years, but especially, Kristy Commerford and Iven Chung for bringing me back from the brink, and literally keeping me functioning.

To the staff and faculty at the University who supported me when I realized I had to do things at my own pace, thank you for not questioning my decision, but instead saying the words I needed to hear. (Looking at you, Bojana).

To my advisors, Tara and Logan, thank you for being only an email away, and for supporting my research in healing and restoration from day one. Your feedback and questions guided me through this process, and I see that dialogue in this work. Also, thank you to the ever-giving Lois, for stepping in for a time, and for always getting what I was doing.

Huge thank you to the technicians in this department: Adam Glover who pivoted next to me every time something new was thrown at us (you are the engine that keeps things running), Rick Nixon for understanding and supporting my love of making noisy, messy work, and Tim for many things, but mostly for our long conversations about being dog parents.

And finally, as the straggler of the group, I've had the joy of knowing the members of four different cohorts, and I appreciate you all. Thank you to the Angles© that came before my year, for teaching us the way of things and being hilarious. Thank you to all the lovely people in the next cohorts for keeping me going, especially during the final push. And, a special acknowledgment to Hair Cut, Birthday Suit, Hush Money and Mom, I truly love you guys and appreciate your support. You are talented and smart as hell, and I'm proud of you.

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Intro

It's all in your head // musings on chronic illness

Everything that I have ever lived is concentrated in my cells and somehow persists even as my body continues to regenerate itself. This undifferentiated mass of tissue and memory, alive and sticky, is an unknown place worth approaching with an openness and willingness to let it reveal itself to me. Everything I have ever lived burrows in my cells and never leaves. It is ghost matter, the stuff of the past mixed up with the present. It's the body, haunted. Here and also everywhere. —Carolyn Lazard¹

¹ Carolyn Lazard, "The World Is Unknown," *Triple Canopy* (April 2019): <https://www.canopycanopycanopy.com/contents/the-world-is-unknown>.



Fig 1. *forms of relief*, exhibition installation, University of Waterloo Flex Space Gallery, 2021

forms of relief is a site for imperfection— a built skeleton of rusted metal, held together with welding seams, screws, plates and bolts, I view its materiality in kinship with my own flesh and bones; weathered and scarred, tarnished but strong. Hand-formed ceramic objects marked by the body that made them, largely left unadorned, embracing the autonomy of clay's materiality where chips and cracks are welcomed. Formalities of sculptural relief are played with, and referenced throughout the ceramic components of the installations: the three dimensionality of the rock and pebble slabs of *Untitled Stream*; the stone-like corporeal impressions of *(In)tensional Balance*; the

hand-built pulley wheels of the physic sculptures of *To Work Upon as A Medicine Does*, all of these clay objects display their roughness with purpose and embrace their flaws.

It is also a study of support. While making this work, I have been navigating my ever (r)evolving physical and mental health, coming to terms with the fact that I am in a new life-stage where ignoring my chronic neurological illness (a painful mix of several conditions) is no longer an option. My studio research is an attempt to reconcile the limitations of my body, and my will to be productive—to find ways in which my artistic practice can convey a feeling of support that instills a practice of slowness as a form of intentional and meditative creation and labour. Working through a lens of speculation and feminist theories, I search to understand how a somewhat balanced life² can be a positive and welcoming existence.

Finally, *forms of relief* is a rumination on trust and time. It proposes that taking moments to rest, observe, listen, touch, and contemplate are subversive acts, challenging us to slow down. I have been making this work while the world has been turned upside down by COVID-19. It has revealed the massive inequities and inadequacies of care practices, and people have had no choice but to stop working, to stop living high-paced lifestyles, to hit pause, to think about their own health and wellness, as well as the welfare of others. Perhaps it's time to reshape our model of burnout culture? To propose something other than hyper-productivity as our gauge of success? Something that I myself wrestle with.

² A tongue in cheek life goal phrase that I've coined for myself in an effort to squelch my perfectionist tendencies.

1

Have you tried exercising more? // the problem with pain

At the Vital Forms symposium in 2013, Melissa Buzzeo asked questions:
“Why people who are sick are also looked at as waste products in society.
Why people, especially women, especially sick women, do not want to draw
too much attention to themselves... What does it mean to talk about yourself?”

Welcome to the Myspace of my constant pain.

—Amy Berkowitz³

³ Berkowitz, Amy, *Tender Points*, 42

A wise friend once told me that “healing isn’t linear.” It’s a sticky phrase⁴ that has stayed with me and I have repeated it to others many times. She said it to me shortly after I was injured in a car accident, a week before this MFA program began. On the ceremonial last drive from my old home to my new one, I was routed off the QEW Highway onto a secondary road by my GPS; the stream of cars in front of me slowed to a stop for reasons unknown, and the driver behind me, paying more attention to his phone, slammed into my car, propelling me into the ditch on the other side of the road. I changed my life to attend this program, relocating after eight years to a city where I knew no one. That was intentional—moving somewhere new, to focus on my artwork. It was supposed to be a fresh start. Change has been my go-to method to gain a sense of control in my life, especially after long periods of feeling overwhelmed and exhausted. A familiar pattern, these conditions are warning bells that I’ve historically not paid much attention to. This is because my body has been shouting at me since I first learned to walk and ignoring the internal berating has been my coping mechanism—a way to brush off my chronic illness. This time though, I thought I was ready; I was prepared for the rigors of graduate school. Of course, control is a fool’s game, and the car accident was reality literally slamming into me. A reminder that the happenings of the world are not ours to control; we are only one thread within a greater web of things. This

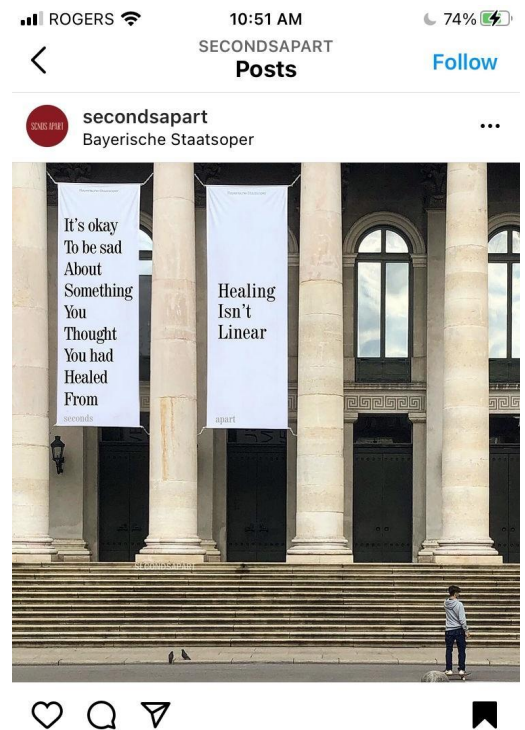


Fig 2. Screenshot @secondsapart

⁴ Quoting the generous Tara Cooper ☺

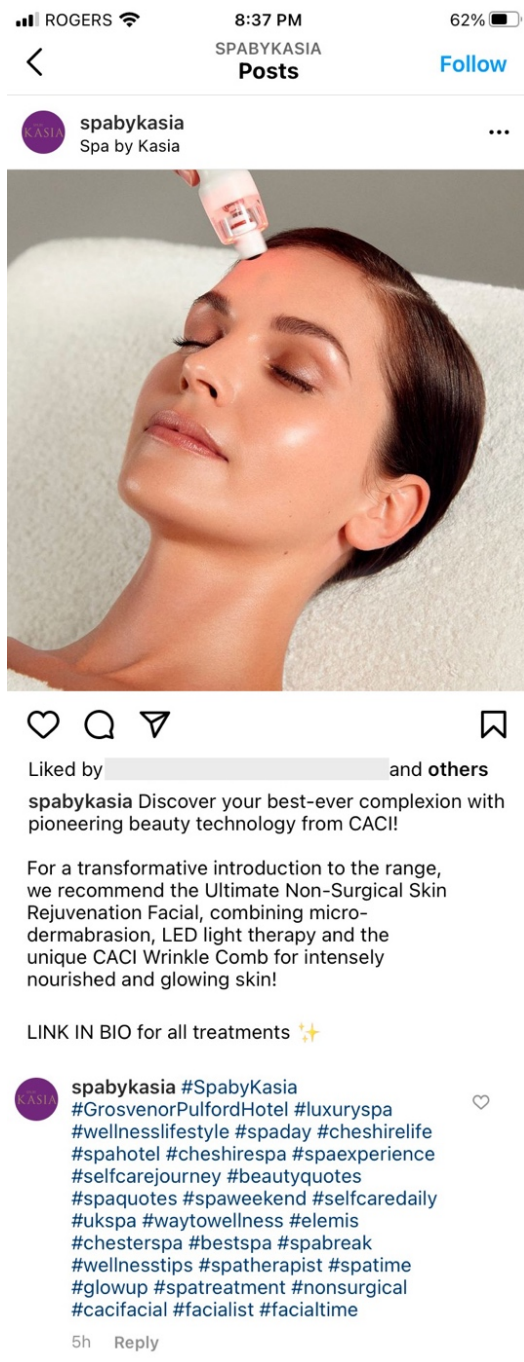


Fig 3. Screenshot @spabykasia

(according to philosophers⁵, feminist theorists⁶, and self-help influencers⁷ alike) is the way the universe functions (from a micro level to the macro). This lack of control has been a well-researched personal lesson; I walked away from the accident with a broken shoulder, but the true repercussion is that the injury shifted my chronic illness into a higher gear that I now have to live with daily; it is now a matter of management. Through 2020/21 as the world as a whole navigated through a global health crisis (and continues to do so) with severe acute respiratory syndrome–related coronavirus (COVID-19), conversations surrounding the labour of illness and the greater web of care it weaves, have never been more ubiquitous.

When discussing ideas of healing, I use the word restorative for its capacity to be distanced from the Western rhetoric of “cure”. Even terms such as “wellness” and “health”

⁵ Byung-Chul Han
⁶ Joan C. Tronto
⁷ Glennon Doyle and most self-help influencers on social media.

have been compromised by neoliberal and capitalist notions of care, becoming a marketable commodity that caters to the middle and upper classes who have both time and money. These days in the media, “self-care” can look more like luxury, ignoring those who will never fit into the definition of health set by these standards (Fig. 3)⁸. The definition of restoration that I am interested in engendering, which is supported by the work of writer and activist Eli Clare, proposes that restoration of the body-mind not be perceived to mean cure as in returned to a predefined state of “normal” perpetuated by white Western culture, but rather suggests that restoration could and should be considered a return to a state of well-being that embraces the differences of lived experiences and the marks of living: trauma, injury, chronic issues with physical and mental health, and more. As Clare explains in his book *Brilliant Imperfection:*

*First, cure requires damage, locating the harm entirely within individual human body-minds, operating as if each person were their own ecosystem. Second, it grounds itself in an original state of being, relying on a belief that what existed before is superior to what exists currently. And finally, it seeks to return what is damaged to that former state of being.*⁹

This is where cure fails so many of us. It pressures us to become a version of ourselves that fits a definition of normal that may never be our reality. Perhaps because our lived experiences have changed who we feel we are, or maybe we never fit that definition to begin with? Is this really the definition of care we should be striving to

⁸ My first career in my early twenties, was as an Esthetician and Spa Therapist. I spent \$9000 on training, and I worked in a spa in a five-star hotel for five plus years. I feel this qualifies me as having some opinion on the co-opting of self-care in the luxury business. (I still love a pedicure of course.) #selfcarejourney

⁹ Clare, Eli. *Brilliant Imperfection: Grappling with Cure*, 15

implement? Cure sees imperfection as damage that must be erased, whereas restoration advocates for well-being. It embraces chronic illness, disability, and the scars of trauma, as permanent states of being that are lived with, and through, as well as possible.

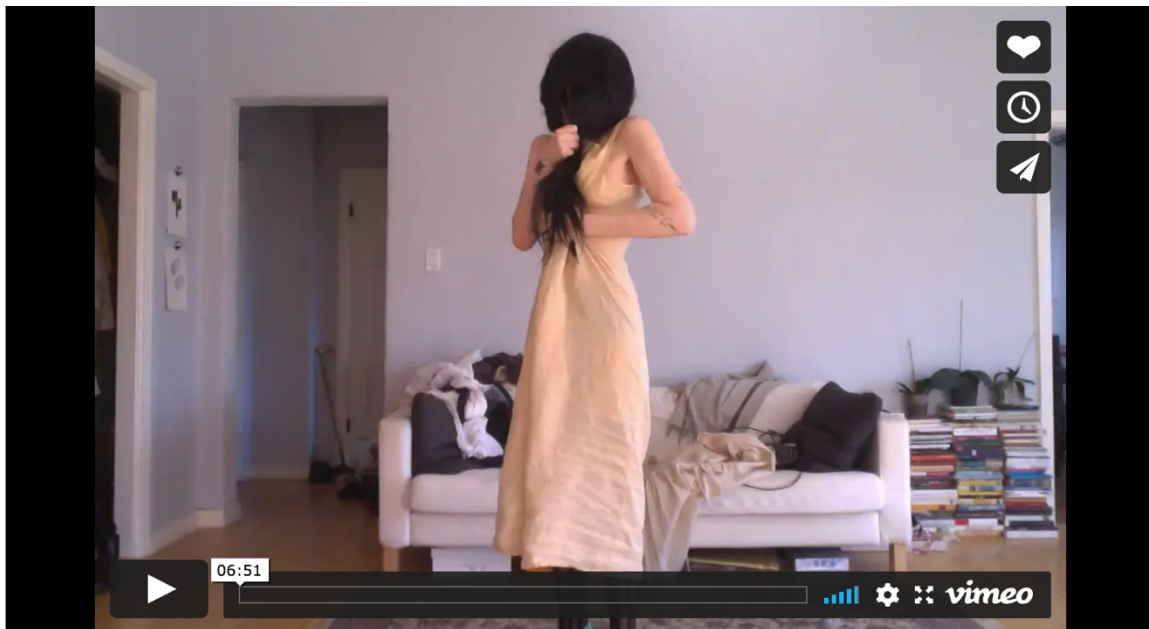


Fig 4. *Sick Witch* is the performative id of Sick Women Theory, Johanna Hedva, video still, 2016

Artist and writer, Johanna Hedva establishes this point in their essay, *Sick Women Theory (SWT)*, which “redefines the body with its vulnerability as the default, so therefore, we are constantly (not only sometimes) in need of care and support.”¹⁰ In *SWT* Hedva states,

‘Sickness’ as we speak of it today is a capitalist construct, as is its perceived binary opposite, ‘wellness.’ The ‘well’ person is the person well enough to go to

¹⁰ Quote borrowed from Hedva’s talk, *My Body Is a Prison of Pain so I Want to Leave It Like a Mystic But I Also Love It & Want it to Matter Politically*, held at the Women’s Centre For Creative Work in Los Angeles in 2015.

work. The 'sick' person is the one who can't. What is so destructive about conceiving of wellness as the default, as the standard mode of existence, is that it invents illness as temporary. When being sick is an abhorrence to the norm, it allows us to conceive of care and support in the same way.¹¹

In Hedva's 2016 video-performance *Sick Witch* (2016), they present a character depiction of their Sick Woman Theory, referenced as the "stand-up comedy routine". In the video, Hedva "retches, screams, needs to sit down, wobbles, regurgitates bullshit people have told [them] to do, takes off many wigs, and is wracked by ghosts."¹² Moving with a slow, jerky quality, like a body hesitant and fragile, they ask loudly, "Have you considered exercising more?" Questions like these, inane and frustrating, are constant deflections by ableist good intentions when explaining what existing in a body in pain feels like. Hedva illustrates the vexation experienced by many chronically ill folks as they are regularly offered unsolicited advice on how to be "better".

The reality is that the majority of people navigate the world in bodies that only know pain and trauma through temporary experiences of hurt or injury, that is until they find themselves old and in a body that is naturally deteriorating. Of course, this is logical: experience leads to understanding. However, this unawareness is also perpetuated by capitalistic and patriarchal patterns of society. A body that is fit and strong is a "healthy" body, i.e., a "normal" body, something to aspire to. But as Hedva notes, the danger with framing illness as something that should always be temporary, is that caring is then in turn, treated as a temporary act that ends when we are "well"

¹¹ Hedva, Johanna, *Sick Woman Theory*, 12
http://johannahedva.com/SickWomanTheory_Hedva_2020.pdf

¹² Quote from Hedva's website, <https://johannahedva.com/>

again. If health is a competition, there will always be people who lose. So, what if instead, we see imperfection and slowness as strengths? People who live with chronic pain possess a threshold of pain tolerance that would take most people down. They must pace their energy every day and understand the delicate balance of boundaries and empathy. They must find strength in the acceptance of differences, and the normalization of vulnerability.

Hollow is an installation of multiple slip cast ceramic bricks assembled against a wall as an unfinished stack. Some are cracked and broken, a few are glazed with colour. I built a plaster mould of my favourite brick and cast it repeatedly into light shells of ceramic. Three bricks have the imprinted words “How”, “Are”, “You” in relief similar to industrial brick branding. Much like unsolicited health advice, I feel the question “How Are You” has become a hollow one; a polite nicety used as a passing greeting. As a question, it has a great capacity to make a difference, to make someone feel cared for. Bricks are inherently heavy; to transform them into hollow shells is to take away the weight of the words.

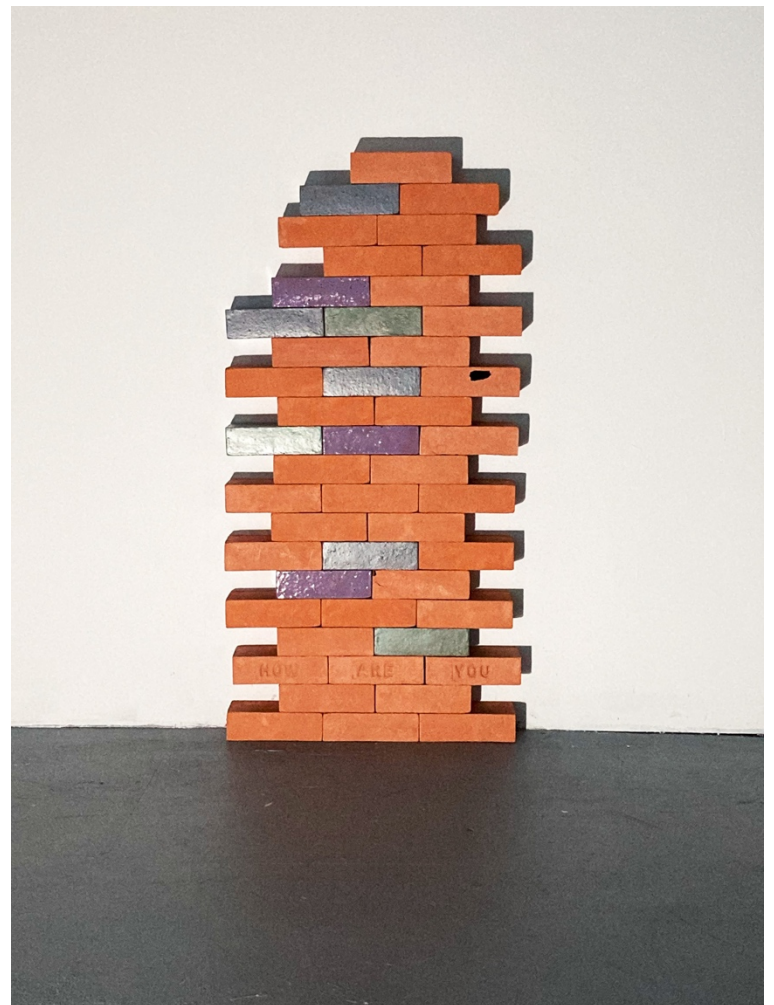


Fig 5. *Hollow*, cast ceramic, glaze, 2021

Rehabilitation is a slog it's true, but the reason I am so interested in reframing our expectations of healing is because I also have a chronic neurological illness (+). Meaning that I, like most people with chronic disorders, have a cocktail of conditions that interject my every waking (and sleeping) minute with fluctuating pain, discomfort, anxiety, depression, and exhaustion. I can say this now, I have a diagnosis.¹³ Pain has been something to ignore and get on with. It started in childhood; having pain when you are young seems to baffle experts. Having pain that doesn't manifest as something easily visible, something physiologically measurable, means that people, even those whose life's practice is medicine (i.e., caring), tend not to believe you no matter what your age. Doctors would take a cursory glance at the joints of my 20-year-old hands and brush off my complaints of body pain because they showed no signs of swelling, as if this was the most thorough examination they could perform. I share this rejection with so many who have sought answers for chronic illness; our mystery sicknesses. When every fiber of your being tells you, something isn't right: "I live in this body, I should know, and you should hear me".

Essayist and Professor Elaine Scarry analyzes the inexpressibility of pain: "To have pain is to have certainty, to hear about pain is to have doubt."¹⁴ In her book, *The Body in Pain*, Scarry explores the relationship between pain and language, how inadequate our verbal expression of pain really is, and how this affects the politics of pain and agency.

[W]hen one speaks about "one's own physical pain" and about "another person's physical pain," one might almost appear to be speaking about two wholly distinct

¹³ Diagnosed Fibromyalgia, unofficially diagnosed Chronic Fatigue Syndrome and Hypermobility Disorder.

¹⁴ Scarry, Elaine, *The Body in Pain*, 13

*orders of events. For the person whose pain it is, it is “effortlessly” grasped (that is, even with the most heroic effort it cannot nor be grasped); while for the person outside the sufferer’s body, what is “effortless” is not grasping it (it is easy to remain wholly unaware of its existence; even with effort, one may remain in doubt about its existence or may retain the astonishing freedom of denying its existence; and, finally, if with the best effort of sustained attention one successfully apprehends it, the aversiveness of the “it” one apprehends will only be a shadowy fraction of the actual “it”).*¹⁵

Scarry explains that pain, above all other internal emotions¹⁶, resists the objectification of language because it is not *for* or *of* anything outside of ourselves. “We do not simply “have feelings” but have feelings *for* somebody or something, that love is love *of* x, fear is fear *of* y, ambivalence is ambivalence *about* z.”¹⁷ Those who have never experienced chronic pain have no reference with which to understand and empathize, and in fact are statistically more likely to doubt pain’s existence than to believe it is there.¹⁸

I find myself interested in marking my presence by creating impressions of my body through the mediums with which I work, in preference to literally showing my body in movement (or lack of movement) and framing that as my art practice. Making art is inherently a performative action—a methodology with which to trace the corporeal and investigate the regenerative effects of art, whether through an intended expression of ideas, or simply through the act of physical creation.

¹⁵ Scarry, Elaine, *The Body in Pain*, 4

¹⁶ Although pain is defined as a sensory and emotional experience, it is traditionally researched and clinically treated separately from emotion. Conceptual and mechanistic relationships between these constructs highlight the need for better understanding of their bi-directional influences and the value of bridging the pain and emotion research and clinical communities.”

Gilam, Gadi et al, *What is the Relationship between Pain and Emotion? Bridging Constructs and Communities*: <https://doi.org/10.1016/j.neuron.2020.05.024>

¹⁷ Scarry, Elaine, *The Body in Pain*, 5

¹⁸ Ibid



Fig 6. (Clockwise from top left) Rebecca Horn, Hannah Wilke, Eva Hesse and Jo Spence

Using their craft as a vessel of expression and documentation, artists such as Hannah Wilke and Jo Spence shared their vulnerability and sickness with the world, mapping their changing bodies through cancer. Rebecca Horn developed wearable sculpture that augments the body in ways that alters its relationship to space and movement after being bedridden with lung poisoning caused by her artistic practice. The sculptures of Eva Hesse, consciously or not, evoke a haunted bodily aura, almost in prophetic acknowledgment of how short her brilliant life would be. The contemporary artists I researched for this thesis have brought more to my life than their respective artworks. As practitioners, they have become guides. While each story is unique, the honesty in their art and writing offers a raw look into their living experiences, while also questioning the shortcomings of the current state of medical and societal care for those

with chronic illnesses and/or invisible disabilities. I find commonality in these differences, the collective experience of navigating an unfamiliar world in altered bodies—a Q&A of experimental existence with hard found solutions. It's easy to get lost in the malaise of existential dread, knowing how much work living in your body takes. As Hedva puts it, the “radical kinship” found within shared experience helps. There is power in community, even when distanced by the solace of one’s own bed.¹⁹

¹⁹ This has never been more apparent on a global scale than now, as we continue to negotiate a pandemic that demands isolation.

2

Drink more water // caring-with

But support will always have a special and vividly erotic set of image/meanings for me now, one of which is floating upon a sea within a ring of women like warm bubbles keeping me afloat upon the surface of that sea. I can feel the texture of inviting water just beneath their eyes, and do not fear it. It is the sweet smell of their breath and laughter and voices calling my name that gives me volition, helps me remember I want to turn away from looking down. These images flow quickly, the tangible floods of energy rolling off these women towards me that I converted into power to heal myself.

—Audre Lorde²⁰

²⁰ Lorde, Audre, *The Cancer Journals*, 39

“In her critical essay, *Who Cares? How to Reshape a Democratic Politics*, feminist political theorist, Joan Tronto begins by defining her meaning of care,

*In the most general sense, care is a species activity that includes everything we do to maintain, continue, and repair our world so that we may live in it as well as possible. That world includes our bodies, ourselves, and our environment, all of which we seek to interweave in a complex, life-sustaining web.*²¹

I would edit Tronto’s definition to include that care is a multi-species activity, however, it is Tronto’s phrase “as well as possible” that I feel is key to understanding the ethics of care politics in relation to daily living. The phrase asks us to question the ways in which we care for ourselves and for each other with an outcome of “as well as possible” which, in its own way, does not advocate for perfection, but an intentional, conscious effort to understand (and potentially re-learn as needed) what is best for those involved. In these terms, using artmaking as a method of restoration both in a performative way, as well as in methods of art therapy which are then actualized through artwork, can be seen as a system of care to both the maker of the work, and to the viewers through passive contemplation.²²

The odds are, eventually every one of us will be personally affected by a changing body that we find unsettling. Our own health will be challenged, or we will witness a loved one become physiologically ill or contend with mental health issues.

²¹ Tronto, Joan C., *Who Cares? How to Reshape a Democratic Politics*, 3

²² More on passive contemplation in chapter 4.

When these challenges cannot be cured by a pill, or by exercise, by diets, herbs, surgery, or positive thinking²³ we are faced with learning to live with, and care for, ourselves and others differently. Through the making of *forms of relief*, I am processing my own coming to terms with what a future in my body will look like. Over the past two years, multiple people have asked me, “What will you do if you can’t make art anymore?” As an interdisciplinary artist with a love of physically demanding materials, I view my practice as a method of therapeutic movement, supporting my illness by providing my body with a variety of motion and in some cases, exercise. Moving forward, my body may not allow me the freedom to be in the world as I planned, as such this requires a new calculation of what being means.

For years I have been curious what the artistic aesthetics of care and support can look like and have carried with me the term “systems of support” which in my studio research is realized in metaphorical and material ways, considering weight, balance, tension and gravity. Artist Carolyn Lazard performed a 2016 piece titled *Support System (for Park, Tina and Bob)* where they laid in a bed in a gallery space for twelve hours, while visitors booked 30-minute appointments to sit with the artist. The original intention was to support the needs of Lazard whose stamina and energy levels are limited; however, it became a project of exchange as they reciprocated by offering the visitors whatever form of support they could provide in that moment. The cost of admission was one bouquet of flowers.

²³ Overt positivity has always been difficult for me to digest, leading me to think that I might be more of a pessimist than the pragmatist I believed myself to be. But recently I have come to understand that many chronically ill folks feel this way (if not most), and that “toxic positivity” is in fact real and damaging in that it can dismiss and invalidate the experiences of others.



Fig 7. *Support System (for Park, Tina, and Bob)*, 2016

Materially my works vary, ceramic now being the most constant of mediums and a common thread through most pieces. What I love about working with ceramic is its direct relationship with the body through its haptic qualities; the marks of my body are literally and permanently formed in its shape. Ceramic to me presents a production process that centers the body/labour relationship alongside ideas of therapeutic making. Its correlation with time, slowness and transformation, characteristics that I consider connected to what I call “empathetic labour” (a forefront of the chronically ill mind). Textiles, metal, found objects, sound, and video also combine and exchange roles throughout my work.

A care-full practice reflects on the complexities of empathy, including self-empathy, and I investigate this materially through intentional and durational making, as

well as through conscious, self-reflective processes. Reiteration and multiplicity often play a part. Once I develop a method of working that does not negatively affect my body, I often repeat it, finding satisfaction and a meditative mind-set in slow production. At the same time, repeated movements that encourage sedentary positions of the body can aggravate chronic pain, so I have to be careful and listen to what my body tells me. For instance, weaving a net by hand is an intensive process; a slow labour that is demanding and contemplative. It is this state of contemplative making that links art to both regenerative work and regenerative rest which I feel are one and the same. To me, there is a sweet spot in the creative studio process, where the body labours while the mind wanders; this contemplative, meditative productive mode is regenerative and restful to me because it is quite literally a labour of love, and this form of restoration is a collaboration between myself and the materials with which I work.

(In)tensional Balance speaks to the tendency to compartmentalize the areas of our lives that we have to live with. Whether it is grief, difficult memories, or suffering mental health, it often feels necessary to separate these parts of ourselves, closing the door in order to get on with life. The compartments of *(In)tensional Balance's* netted structure are grid-like and organized, attempting to keep everything arranged and systematized. Inside the compartments are ceramic impressions of parts of my body, made with remnant pieces of clay accumulated over several years. Taking a handful of clay, I press it against my body, producing an imprint of that location: an ear, my knee, my breast, my neck. These ceramic reliefs reference my living with chronic pain, which at times feels like my body is breaking into pieces. For most of my life I have joked that I have "old bones" as a way to explain-away why my body feels like I am generations

older than I really am. Someone mentioned the fossil-like quality of these ceramic pieces, and I like this, I feel like they are in on the joke.²⁴ The height of the netted grid equals the upright reach of my hand when standing, and its width measures the span of my outstretched arms—a representation of my body and a portrait. I do not always recognize my body as it is now. I find it requires more preparation, thoughtfulness, and management to keep myself in balance.

As the compartments of *(In)tensional Balance* cradle the ceramic reliefs like small hammocks, the strain of each weight is visible. The textile sculpture, made of



Fig 8. *(In)tensional Balance*, ceramic, linen, steel, 2021

hand netted linen yarn, is standing because it's in a constant state of tension. The weight and gravity of the ceramic parts pull the overall structure down, causing it to stand. Suspended and balanced, the tensile strain of the supporting strings is akin to fascia and the musculoskeletal push and pull. A network of support, the woven linen holds the ceramic body together, carrying its weight even as it sags in the process. This network is further supported by an outer

²⁴ The critically critical, Logan MacDonald ☺

structure of rusted steel, the industrial base anchoring the tension to the floor, and the square tubing pulling the net towards the sky. Metal turnbuckles at the bottom of each vertical support are intentional and meaningful. They are the locus of control, determining the amount of tension the strings are under as they thread through the hardware, inflexible on one end, and free to fall as they wish on the other. The net is likewise meaningful—made from one string, it is tied in knots until it forms a shape that expands and contracts. Alone, one string of linen cannot provide much strength, but woven as a whole, the structure becomes self-supporting, and the weight equally distributed.



Fig 9. Lygia Clark, *Rede de elasticos (Elastic Net)*, 1979

I have huge affection for the *synthetic therapy* that Lygia Clark developed later in her career in the 1960's after undergoing psychotherapy. Determining that her mental health and her artistic practice were not separate, their labour became one and the same for her. Clark created what she called *Relational Objects* from mundane found

materials that engaged in corporeal and sensory interactions with the participants, first on a person/object basis, then through instructional actions, and large group experiences led by the artist.²⁵ Eventually, in the 1980's Clark viewed participants as "patients" who engaged with her one-on-one using her relational objects as a form of experimental psychotherapy.

The changes she proposed in the subject-object relationship embodied in artistic communication are surely models or proposals for a vast number of similar cases where pairs of opposites have come to be seen as antagonistic and mutually exclusive: Body and mind (or cerebral and the sensuous), inside and outside, the real and imaginary, masculine and feminine, art and life. The very economy and simplicity of her work was a way of touching this crisis accurately and experientially at many levels and in many guises. Not only touching it, but of proposing a solution to it.²⁶

Lygia Clark evolved her artistic practice into something larger than itself, something that provided a process of healing to the artist and to her participants. Her art and life combined through embracing the idea that the maintenance of her mental health and the production and experience of her art, were wholly connected.

This is the center of *Tronto's care*, we cannot sustain "wellness" alone, care is a collective and democratic act, one that is not dispersed equitably in our current neo-

²⁵ Brett, Guy, *Lygia Clark: Six Cells*, 18

²⁶ *Ibid*, 20

liberal society. It is the networks of support that hold us together, collect us, carry us forward, and keep us as well as possible.

This balancing of care roles can thus occur on a social level. We can even call it a fifth phase of care: caring with. The first four phases of care imagined a citizen as someone who is attentive, responsible, competent, and responsive, 'caring with' imagines the entire polity of citizens engaged in a lifetime of commitment to and benefiting from these principles. 'Caring with' is our new democratic ideal.

What makes care equal is not the perfection of an individual caring act, but that we can trust that over time, we will be able to reciprocate the care we received from fellow citizens, and that they will reciprocate the care we've given to them. In such an ongoing pattern of care, we can expect moral virtues to deepen: We will trust in one another and in our social and political institutions, and feel solidarity with other citizens, seeing them as partners in our own caregiving and receiving.²⁷

In their 2018 piece, *What Do Stones Smell Like in the Forest*, collaborative artists, Chloe Lum and Yannick Desranleau explore the experience of Lum's diagnosis with chronic illness and her changing relationship with her body. The operatic narrative consists of two simultaneous videos, scored and choreographed by the artists, the piece is performed by professional actors. On the right we see a single performer—the golem—sedentary on the floor as if weighted down by the strange, tentacle-like objects

²⁷ Toronto, Joan C., *Who Cares? How to Reshape a Democratic Politics*, 14



Fig 10. Chloe Lum and Yannick Desranleau, *What Do Stones Smell Like in the Forest*, 2018

that wrap around her. In slow movements, she gently writhes and shifts, encumbered by her new limbs, awkward in her new body. On the left, the video shows us the “choir”, lithe and mobile, three performers dance and interact with the items around them, holding masks and colourful, papier-mâché objects effortlessly as if they are easy extensions of their own bodies. Together all four figures sing, at times in chorus, at times in competing verse. “In Jewish folklore, golems are beings made from mud or clay who are animated via mystical processes.”²⁸ In *What Do Stones Smell Like in the Forest*, the golem represents Lum’s story of illness, of reconciling a mysterious and ailing body in reflection of an ableist world.

As I find myself doing now, Lum questioned her own ability to make work, faced with the repercussions of what a week or a day in the studio will do to an ill body. In her

²⁸ Hogeveen, Esme, *Sickness and Strength: The Golem as Diva in Chloë Lum and Yannick Desranleau’s What Do Stones Smell Like in the Forest?*, <http://cleojournal.com/2019/08/23/sickness-strength-golem-as-diva-chloe-lum-yannick-desranleaus-what-do-stones-smell-like-in-the-forest/>

accompanying paper, *What Do Stones Smell Like*, she asks, “How does one continue to birth a body of work with a body that doesn’t labour or function?” Lum and Desranleau have developed a transdisciplinary collaborative practice, allowing much of the energy, productive labour, and physicality of their art to be performed by others who surround and support them. Collaboration is not just important within artistic practice, but in the sustaining and maintenance of a life with chronic illness and invisible disabilities.

In my studio research, I am attempting to let go of my habitual pattern of control. As Eli Clare noted, harmful notions of “cure” operate as if each person were their own ecosystem; collectivity and transdisciplinarity are keys to restoration. Through pieces like *(In)tensional Balance*, I am producing sculptural models of systems of support through a studio methodology built with support systems in place: through empathetic and regenerative labour, as well as collaboration. Again, like Lum, I sometimes have the privilege of turning to generous friends to help me continue my work when needed. The allowing of, and accepting of support in both my personal health maintenance, and in my studio work is essential to the mode of restoration that I am examining. It is now a fact that the labour of illness is a part of my life and my artistic practice, and I do not see these things as separate.

3

If you think only positive thoughts // self-care and other trouble

*I always want to see something
Better if I can feel something,
Better if I can make something*

*I want to understand my body,
Not to control it,
But to live and enjoy it.*

—Vanessa Dion Fletcher²⁹

²⁹ Dion Fletcher, Vanessa, <https://www.dionfletcher.com/project-07>

What I love about both hidden and recognizable applications of physics within sculptural installations is how physics plays on ideas of trust—the relational aspects of gravity and balance set by the presence and absence of supports and anchors—a nod to how illness and trauma can injure one’s ability to trust that the world is out to love you. *To Work Upon as a Medicine Does*, is a series of sculptural collages, or what I call *Physic Sculptures* that reference the physics of bodily movement through constraint and support, but also the emotional and logical act of trust. Weights, ropes, rubber cords and pulleys play upon ideas of physiotherapy and allude to apparatuses of rehabilitation — tools used in the restoration of damaged bodies. They speak to this failure of trust, the inadequacy of wellness rhetoric, and the indirect trajectory of pain management: my personal labour practice. Choosing to use physiotherapy as a symbol in this piece is not criticism towards it as a method of restoration, in fact I find myself dependent on it in my own physical maintenance, and for that reason I see it as a symbol of my own self-care. The complexity of the exercise frame as a form is its own inspiration, healing tools are layered upon healing tools and the overall dominance of its structure can be intimidating as well as comforting as a support system. It symbolizes the labour of illness as time spent both in the pursuit of wellness and in the potential of (what often feels to me to be) tortuous physical activity, all in the name of true self-care.

One of the red herrings in the quest for true self-care is that the damage of damaged bodies isn’t always visible. It makes them difficult to pin down. Genetics, bacterial infections, viruses, injury, generational, physical, emotional and psychological trauma are just some of the culprits that can have lasting physiological effects on the body, effects that may take years to present. Following my surgery from the accident,



Fig 11. *To Work Upon as a Medicine Does*, ceramic, linen, hardware, rope, rubber tubing, foam, 2021

I progressed towards rehabilitation with improved range of motion in my shoulder, six screws, a metal plate in my body, and a healing scar, However, I am still not healing at the rate experts expect, and my mobility, strength and stamina are compromised. I should be “better” now, and I’m just not. With my chronic illness there are usually days of “flare-ups”³⁰, and there are days that are calmer. The very familiar exhaustion and

³⁰ “A flare occurs when symptoms of a disease that has been present for a time suddenly worsen.” “Flares can be spontaneous and occur randomly with little or no warning. At the same time, the pain can be triggered by vigorous activity such as exercising and even routine movements like coughing. Flares can also stem from emotional triggers like stress and can show up abruptly when pain medication wears off.” <https://www.medicinenet.com/flare/definition.htm>, www.practicalpainmanagement.com Flare-ups can last for a few hours to a few months. Amy Berkowitz criticizes the term “flare-up” for its cuteness, asking “Why this insistent cute-ing of illness?” Berkowitz, Amy, *Tender Points*, 97

overwhelm still overtakes me like before but with more voracity, and the droning hum of pain causes me to consciously negotiate every movement of my body.

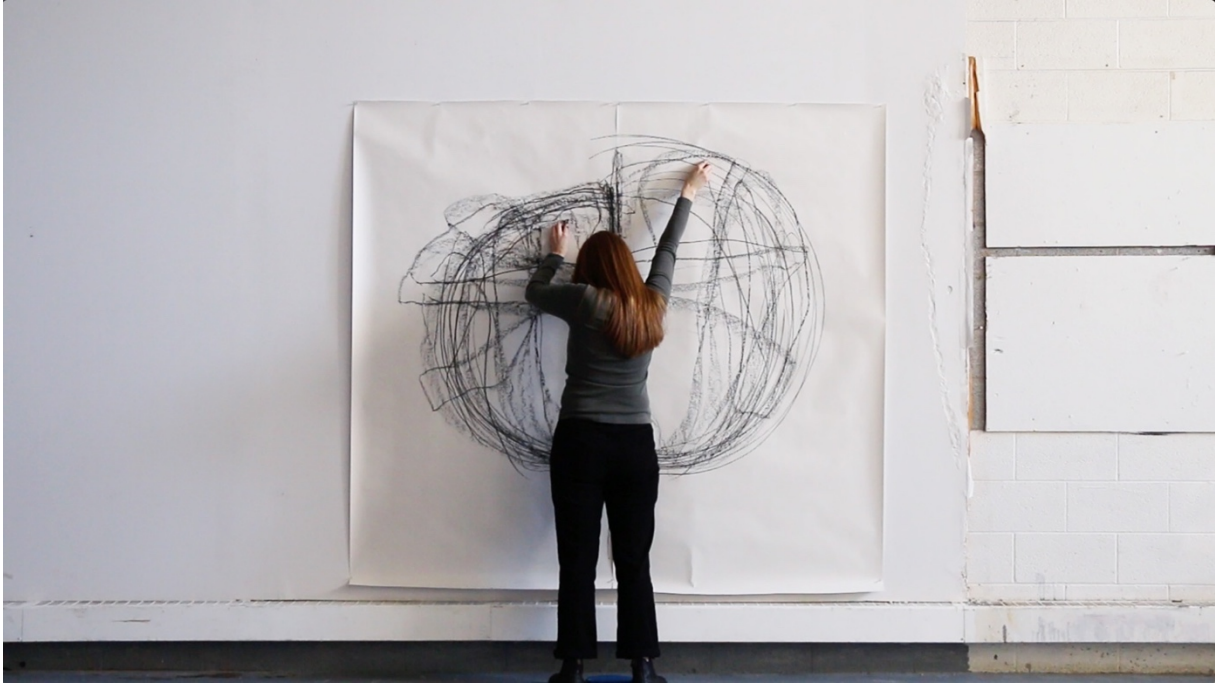


Fig 12. Seven & a half minutes, video still, 2020

In the winter of 2020, I recorded a video the week I broke through a small piece of scar tissue in my frozen shoulder³¹ and was able to move my left arm higher than before while using the wall as support. I was alone in setting up, filming and taking down this work, which in itself was a slow and amusing struggle. In the spirit of Tom Marioni's action drawings,³² I pushed the performative gesture of drawing to the edge of my physical range of motion, drawing charcoal lines in half circles to the perimeter of my

³¹ Frozen shoulder, otherwise known as *adhesive capsulitis*, is a condition where scar tissue forms in the shoulder following injury or a break, causing the joint to seize painfully, and reducing its mobility.

³² Tom Marioni, *Drawing a Line as Far as I Can Reach*, 1972

reach. *Seven & a half minutes* was the length of time I was able to trace circular motions with both my arms before I had to stop. Filming this work was something I had never experienced before— performance is not a medium I naturally turn to. But there was something about this day that was different, and I was compelled to do something out of my comfort zone, while my body was still incredibly uncomfortable in itself. Now this work feels like the anchor to the entire exhibition. It is a moment of witnessing what pain looks like. What the limits of a body can look like. The sound of drawing fills the exhibition like simulated nature sounds of a white noise machine or an ASMR video.

In *forms of relief*, I am creating pieces that represent modes of healing, or suggest moments of rest and slowness associated with life with chronic illness. All these words could cluster under the umbrella of self-care—a useful term that is necessarily and heartedly defended by intentional boundaries and the polite refusal of social invitations; but is also a term that makes my insides cringe. I have trouble with “self-care” when it is portrayed lavishly through positive affirmations and aesthetically beautiful, highly produced photographs in self-help books, magazines and social media feeds. It feels performative; proclaiming that you too can be cured if you think only positive thoughts—a handwringing, hair-pulling slight to the sensibilities of the chronically ill. Real self-care is taking charge of your well-being when doctors won’t, and it’s a necessity when it comes to managing illness. It’s following Tronto by learning what is best for yourself and defending it as well as you can.

In her 2016 exhibition, *Own Your Own Cervix*, Vanessa Dion Fletcher created an installation titled, *Cervical Self Exam Room*, which was very much what it sounds like. As a neurodiverse artist, Vanessa Dion Fletcher’s work subverts colonial narratives of

selfhood and the gendered body. In this piece, Dion Fletcher’s intention was to use “installation and performance to invite us all to think about how our bodies, and the ways we think about our bodies are marked and defined, challenging a medical or anthropological lens”.³³ The audience at the exhibition, “those with or without cervixes”, were invited to use the space to give themselves an examination.



Fig 13. Vanessa Dion Fletcher, *Cervical Self Exam Room*, 2017

By positioning a highly representational, and by all accounts fully working examination room within the space of the gallery, Dion Fletcher is disrupting both the typical experience of a gallery-goer, and the generally private and rarely spoken about female experience of maintaining vaginal and uterine health. This is, as the press

³³ Vanessa Dion Fletcher, *Own Your Own Cervix* press release, Tangled Art Gallery, <https://tangledarts.org/wp-content/uploads/2018/05/Own-Your-Cervix-Press-Release-1.pdf>

release says, “self-examination in the context of a feminist decolonial discourse.”³⁴

Through the gendering of the space, and the use of both Indigenous and European icons within the decor of the room, Dion Fletcher is questioning what defines a body both physically and culturally by pointing out how the art practices of both women and Indigenous artists have been historically devalued in the Western canon.³⁵ I would suggest that Dion Fletcher is also pointing to the inequality of care that has been historically provided to Indigenous people, disabled people, and women, by the Western medical industry. I cannot help but connect *Cervical Self Exam Room* to chronic illnesses such as Endometriosis³⁶ which can be a highly debilitating and painful illness, and one that has been historically difficult for women to diagnose due to a deeply rooted patriarchal medical system; again, a failure of trust. Dion Fletcher’s piece aligns a feminist body practice with self-care, by proposing self-agency as a method of reclaiming power.

Like Fletcher, the overall structure of *forms of relief* references the architecture of Western healthcare—in this case spaces that facilitate

rehabilitation and the therapeutic exercise contraptions



Fig 14. Pulley detail

³⁴ *Own Your Own Cervix*, Tangled Art press release, Ibid

³⁵ Quote from Vanessa Dion Fletcher’s website <https://www.dionfletcher.com/project-07>

³⁶ “Endometriosis (en-doe-me-tree-O-sis) is an often-painful disorder in which tissue similar to the tissue that normally lines the inside of your uterus — the endometrium — grows outside your uterus. Endometriosis most commonly involves your ovaries, fallopian tubes and the tissue lining your pelvis.” <https://www.mayoclinic.org/diseases-conditions/endometriosis/symptoms-causes/syc-20354656#:~:text=Endometriosis%20>

found within. These contraptions or frames house multiple training tools used to strengthen an array of bodily movements. Fabricated from stainless steel bars, they are reminiscent of medical grade equipment. In my version, the steel frame is rusted and strands of linen, rope and rubber tubing lace through handmade ceramic pulleys, creating web-like forms silhouetted by projector light. Again, like *(In)tensional Balance*, their form and relation play on ideas of tension and gravity. Antique metal weights ground some of the cords, and ceramic pieces both interrupt and hang from the supports by nets (a subtle nod to Eva Hesse). Overall, their form echoes the apparatuses of rehabilitation, but there is something a little unsafe about the activities they are proposing; another indication of the ups and downs of healing, and the trying experience of navigating the medical and insurance systems associated with health care.



Fig 15. *To Work Upon as a Medicine Does*, progress photo, pulley parts and ropes, ceramic, linen, jute rope, nylon cord, 2021

4

You seem fine today // slow the fuck down

Say what you will, there's something to be said
For desperate calls unanswered, meals alone,
Keeping corners, and lying late in bed.

For bodies over-full but seldom nourished,
For cold and rain that's carried in the bone.
Say what you will, there's something to be said

For useless women raging for more red,
Loud visions urging them to quell the sun
By keeping corners, lying late in bed.

By rising slow and learning from the dead
To feign indifference to light and motion
Let dawn flirt as she will. And something said

For intimate messages baked into bread
Meant for birds that have already flown,
Impatient grown of lying late in bed.

And something more for love that won't be had,
And comfort that's despised until it's gone.
Though bitch we will, the half has not been said
For keeping corners, lying late in bed.

—*Bitches on the Bright Side*, Constance Merritt³⁷

³⁷ Merritt, Constance, *A Protocol for Touch*, 26

The installations, *Untitled Stream* and *Soft Spot* invite their viewers to circle, pause, sit, stare, wonder, rest, and contemplate. Exploring the partnership of new media technology and the traditional medium of ceramics, *Untitled Stream* combines moving image, sound and form. Fifteen videos of various streams filmed by me—iPhone in hand and feet in water—are collaged to create a constant flowing, meandering current, weaving in between rocks, leaves and the occasional insect. The video is projected onto thirty ceramic slabs, molded with relief forms mimicking the rocks within the video. The three dimensionality of the projected surface gives the stream a realistic looking form, and yet slightly warps the video causing a visual strangeness so that you're not quite sure what you're looking at. The water in motion swirls around the rocks and there's a clear view of the pebbles resting on the stream's bed creating the illusion of depth, but there is no edge to the body of water, so the flowing water is neither contained, nor does it travel anywhere in particular. The longer the viewer contemplates the work, the more its simulation reveals itself. The various videos, looping after only a few seconds, cause "glitches" in the images, underscoring the fabricated nature experience. The overall effect is surprising and then mesmerizing, calming and then disconcerting. Surrounding the stream is a rusted metal apparatus. It holds the projectors, but also creates a path around the installation. The ceramic stream sculpture, elevated on castors, straddles the frame. A bench sits next to the sculpture, inviting viewers to sit awhile.

Within the disciplines of biomimicry and biophilic design³⁸ is the belief that

³⁸ Biomimicry, or biomimetics is the examination of nature, its models, systems, processes, and elements to emulate or take inspiration from in order to solve human problems. <http://environment-ecology.com/biomimicry-bioneers/367-what-is-biomimicry.html>



Fig 16. *Untitled Stream*, video, ceramic, steal, wood, castors, hardware, projectors, 2021

humans should look to nature as the genius of good design. Many of us (though not all)³⁹ associate nature and natural space as a locus of “tranquility”, finding peace and calm in escaping to the cottage, or from a walk in the park. *Untitled Stream* asks, what is a natural experience? The commodification of nature, specifically for the intent of “healing” purposes, often benefits the privileged through the production of nature-based healing products and land used for sport, recreational purposes, and nature “retreats”.

³⁹ I have friends who have the opposite reaction to natural spaces, finding themselves anxious and uncomfortable within the flora and fauna of nature. This could subvert the restorative purpose of these sculptures, however, a common reaction in this case has been that the sculptures within the gallery space are actually more restorative and soothing to these friends because of their simulation. Almost allowing them the experience of restorative nature that they otherwise do not feel in real life.

By using nature as a model, *Untitled Stream* attempts to mimic its restorative qualities inside the gallery space through artistic means; offering the viewer a moment of regenerative rest similar to the real experience, while at the same time highlighting our distanced relationship to it by becoming a kind of “portable nature”—a nature “experience” that does not come from or belong to anywhere in particular. Ultimately with this work, I am interested in asking the question, can a synthetic, artistic interpretation of nature, speak both

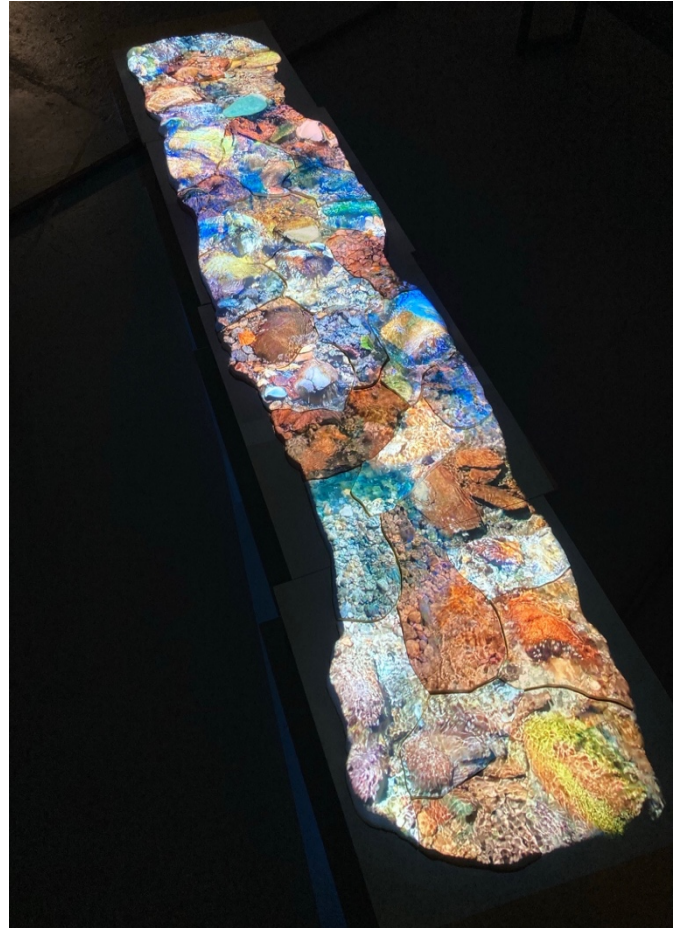


Fig 17. *Untitled Stream* (detail)

to our dependence on this restorative relationship, as well our responsibility to treat it with care in exchange? (The interwoven web of care.)

In the late 1980's, Environmental Psychologists, Rachel and Stephen Kaplan, showed through qualitative research that spending time in a natural environment, or incorporating “nature” into the urban environment, helped to reduce stress levels and anxiety, producing restorative responses in their subjects⁴⁰. While today this not a groundbreaking theory, their research incorporated photography (i.e. a simulation of

⁴⁰ Kaplan, Rachel and Stephen, *The Experience of Nature*, 195

nature) as part of their testing. For example, *Fascination Tests*⁴¹ compared photographs of cities with photographs of natural environments, discovering that even through a photograph, restorative effects were achieved when subjects were exposed to the natural setting⁴². The Kaplans propose that the key to nature being a restorative experience is called Soft Fascination,

Clouds, sunsets, scenery, the motion of the leaves in a breeze — such patterns readily hold the attention but often in an undramatic fashion...[this] permits a more reflective mode...First, the involuntary aspect is of only modest strength. Second, there seems to be an important aesthetic component involved. These two themes fit well with the role of aesthetics, or preference, in the control of pain.⁴³

With *Untitled Stream* and *Soft Spot*, I am curious whether artworks that provide this same “bottom-up”⁴⁴ absorption can effectively achieve a restorative function by creating space for passive contemplation.

In my research, I have been looking at the role that art can play in ideas of restoration as a mode of support, questioning self-care and other definitions of wellness.

⁴¹ Fascination Tests of Attention Restoration Theory (ART) provide an analysis of the kinds of environments that lead to improvements in directed-attention abilities by measuring the different responses to stimuli between natural and urban environments. Nature, which is filled with intriguing stimuli, modestly grabs attention in a calmer, bottom-up fashion, allowing top-down directed-attention abilities the chance to replenish. Unlike natural environments, urban environments are filled with stimulation that captures attention dramatically and additionally requires directed attention (eg: to avoid being hit by a car), making them less restorative. (1207 Bergman et al)

⁴² Berto,Rita, *Exposure to Restorative Environments Helps Restore Attentional Capacity*, 249

⁴³ Kaplan and Kaplan, 192

⁴⁴ Soft Fascination in regard to nature is explained as: Nature, which is filled with intriguing stimuli, modestly grabs attention in a bottom-up fashion, allowing top-down directed-attention abilities the chance to replenish.

Here, I want to end by talking about what a life-with-chronic-illness has taught me. It's very simple: to slow the fuck down. Working through Tronto's democratic form of caring-with as being a complex web of support, the cessation of narrow, capitalistic descriptions of success—a "normal" that excludes more people than it admits—could be attainable. What I wish to offer to the viewer with this work, is the opportunity to consider what regenerative rest truly is, and what it could mean if we allowed for such restoration within our institutional spaces, and within our lives in general.

Without rest human beings are incapable of seeing what is at rest. Making the vita activa an absolute value drives everything out of life that is not an act or activity. The general time pressures destroy all that has the character of a detour, all that is indirect, and thus makes the world poor in forms. Every form, every figure, is a detour. Only naked formlessness is direct⁴⁵.

Philosopher Byung-Chul Han proposes that the solution to Western society's obsession with hyper-productivity, is to disrupt it through the act of passive contemplation.

Active life without any contemplative dimension is incapable of friendly gentleness. It finds expression in accelerated production and destruction. It uses up time. Even in the time of leisure, which is still subject to the compulsion to labour, the relationship with time is no different. Things are destroyed and time is killed. Contemplative lingering gives time. It widens that being that is more than being-active. When life regains its capacity for contemplation, it gains in time and space, in duration and vastness⁴⁶.

⁴⁵ Han, Byung-Chul, *The Scent of Time*, 163

⁴⁶ Ibid

Soft Spot is inspired by one of my favourite restorative outdoor activities: sitting under the dappled light of a tree on a warm, breezy and sunny day (preferably in a hammock). In the gallery, similar to *Untitled Stream*, a projector is suspended by a rusted metal frame, shining down onto the floor. At the base of the circle, a pillow welcomes the viewer to stop and relax under the light of the projector as if sitting in a beam of artificial sun, the dappled light playing over them. I find a day of viewing art within a gallery physically painful and feel a great sense of relief when there is somewhere to sit down and rest. *Soft Spot* is another moment that invites the viewer to take some contemplative time, to foster restorative regeneration through a sensory experience of soft fascination—a welcome sight to folks with chronic pain, but also a distinct bookend to the installation—a form of relief.



Fig 18. *Soft Spot*, video, pillow, projector, steel, 2021

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