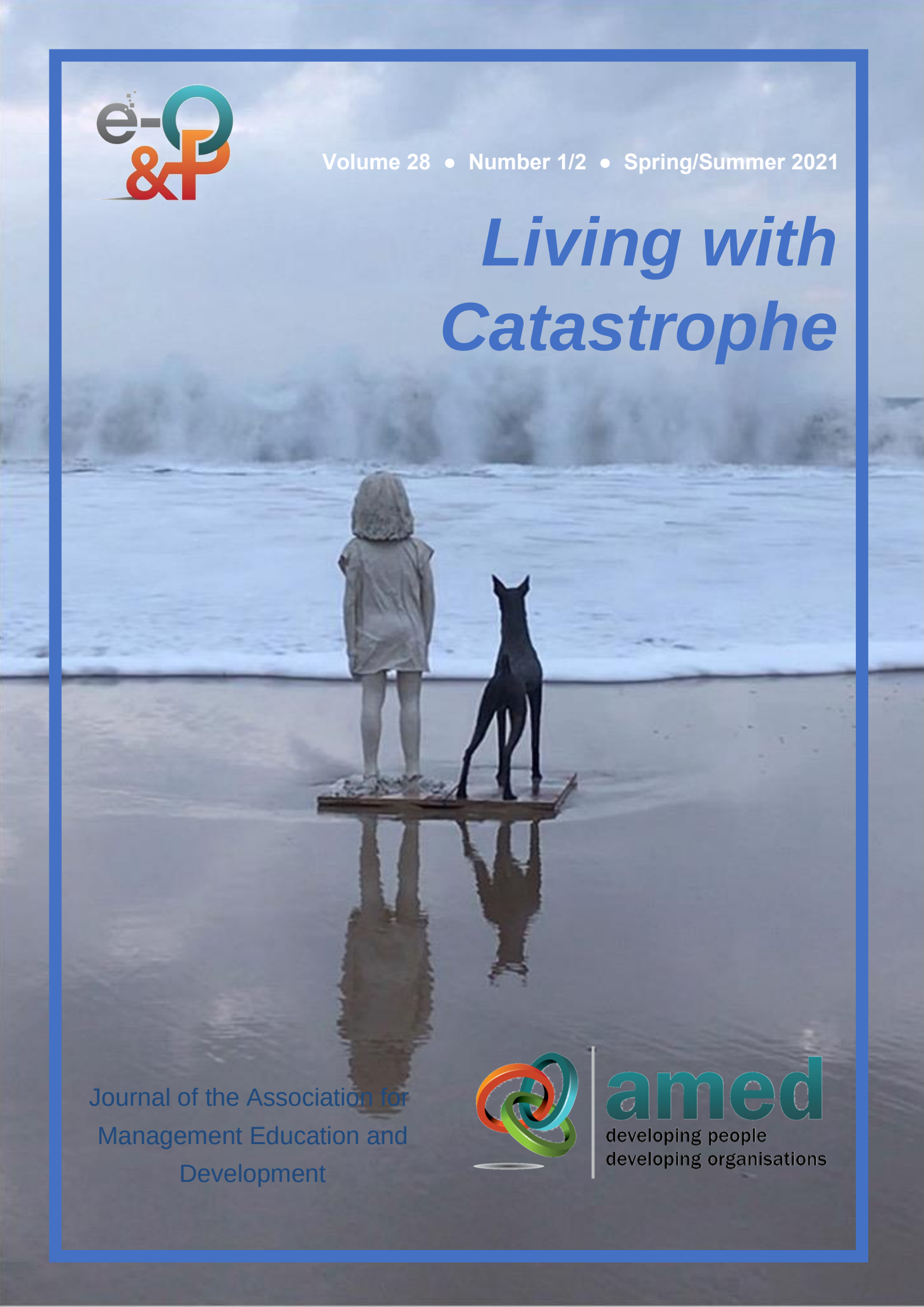
Volume 28 • Number 1/2 • Spring/Summer 2021

Living with Catastrophe



Journal of the Association for Management Education and Development

amed
developing people
developing organisations

Edition Editors: Erica Piasecka and Fizza Hasan

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Cover image: Still from video artwork: 'ORILLA II' (SHORE II) by Concha Jiménez Muñoz

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Contents

Living with Catastrophe 1

Editorial

Erica Piasecka and Fizza Hasan

The Sound of Lockdown 11

A poem

Diyo Mulopo Bopengo

SECTION 1: THE BODY AS A SITE OF CATASTROPHE

The practice of rest in a tradition of blame 12

A Black woman's experience

Alicia Easley

Elogio al Fracaso 23

De Concha Jiménez Muñoz

In praise of failure 31

Concha Jiménez Muñoz

Translation from the Spanish by Irene Hidalgo Caparrós and Erica Piasecka

Just writing 39

Emma Langman

Sample 42

A sound piece

Aniela Piasecka

Contents

SECTION 2: PROFESSIONALS DEALING WITH CATASTROPHES OF OTHERS

The Other Everything 44

(An extract)

Jonathan Massey

Stories of not recovering 54

Beth interviews Stephen about 'Green Icing'

Beth Davis and Stephen Musk

Living on the edge with epilepsy 63

RajVinder Singh Gill

SECTION 3: MACRO-CATASTROPHES

Somewhere in Karachi 69

For ammi and papa.

Syeda Rumana Mehdi

Tätermentalität 86

Jacinta Nandi

Buried Beneath 97

A video piece

Hazel Soper

Bright Side 99

A poem

Ian Andrew

Some forthcoming events 100

Your invitation to become more involved with e-O&P 101

A note about AMED 102

Living with Catastrophe

Editorial

Erica Piasecka and Fizza Hasan

Keywords

catastrophe, process, critical friendship, resilience, discourse

Post-pandemic discourse

Over a year and a half after Covid-19 first shook the world, in the midst of alarming new variants and severe vaccine inequity, we appear to be living in a state of cognitive dissonance. The world has undergone changes of the likes not seen since the middle of the last century. Against the backdrop of millions of deaths and sometimes severe health repercussions for survivors, we have seen a return to large-scale government interventions as well as a ruthless politics of vaccine nationalism. We have thus been jolted into awareness of the fragility of our global systems; forced to acknowledge our dependence on the labour of multitudinous, anonymous, and frequently underpaid frontline workers; and brought face-to-face with how poorly equipped our systems of care are, especially for people made vulnerable by age, illness, poverty, race, or gender. And yet, there has also emerged a discourse of 'returning to normal' which disavows these fault lines, which seeks to paper over the cracks without looking at the scale of the damage to our planet, countries, workplaces and homes. Such damage has been revealed, magnified, but not necessarily caused, by the pandemic, and so, even if we are able to 'fix' the pandemic, there is no simple solution for the long-term problems we have created.

Covid enters our lives. Image: Erica

Thinking differently about catastrophe, survival, management and writing

This Special Issue on 'Living with Catastrophe' of AMED's online journal *e-Organisations and People* (e-O&P) is a response to such discourse. It seeks to emphasise the ubiquity, continuity and the intractability of the diverse hardships faced by so many, by bringing together new ways of thinking and communicating about catastrophe and survival. Conceived over a year ago when talk of 'post-catastrophe' life was quickly beginning to take hold even before the first lockdown spring was over, this edition emerged from conversations about the many catastrophes which we felt, and still feel, that are deeply entangled with Covid: inequality; the climate crisis; structural racism; gender violence. Not pretending and indeed not wanting to provide some lofty treatise on the state of the world as we know it, as guest editors we decided, inspired by critical disability studies, to focus more specifically on stories of the un-heroic. We wished to move away from narratives of triumphant overcoming and/or tragic demise and concentrate instead on the kind of state which we believe is more frequently the norm: on the state, to quote Lauren Berlant, of "ongoingness, getting by and living on" (2007, p.759).

Re-thinking 'management'

In seeking such an understanding of what it means to live with and through catastrophe, we have taken some liberties with the concept of 'management, education and development'. As committed feminists and students of gender studies we wanted to think more obliquely about the scope of the journal. Management, we thought, does not necessarily have to mean what we expect it to mean. What if, we asked ourselves, 'management' could describe the "ordinary work of living on" when one has been "marked out for wearing out" (Berlant, 2007, pp.760–761)? What if it could mean managing one's self, one's own experiences and life, managing one's home and one's community? What if it could mean managing Covid and its fallout? While we realise that the notion of "living on" without necessarily "getting better" (Shildrick, 2015) is somewhat anathema to the concept of 'development', we hope that our readers will be able to think of this edition as a chance to take stock, and to reflect on the viability of 'normality' as it is upheld in our societies; a normality which is leading to the collapse of our systems, be they bodily, social, or environmental.

As co-editors, our own backgrounds have a part to play in our overall approach. Both of us have worked, and continue to work, in education and training, but we have not formally studied business. What we have tried to do with this edition, then, is to unravel somewhat the basic principle of 'management, education and development,' thinking in particular about its connections to the concept of care, whether that be of self, of family, or of other others. While we wish to learn, if we can, from our critical friends (qv), readers and collaborators who have different backgrounds and skill-sets, we also believe that the relentless pursuit of profit embedded within a cult of individualism has led us to the very edge of the cliff. Now is a time for thinking about how we might do things differently, more inclusively, from a position of mutual aid.

Diverse 'writings'

In developing this approach, we also decided to 'push the envelope' a little more and to consider different ways of encapsulating such stories. The academic article is one, very valid form of writing, and one which we, rather ensconced within our university contexts, are all too familiar with. However, it occurred to us that

writing may not only take other forms but be all the more powerful for it. Writing can be visual or auditory; it can be personal, sharing insights only visible from the writer's vantage point; it can be fictional and still be deeply revealing. Given this realisation, and our desire to make this edition as accessible as possible, we decided to embrace a creative spirit and to invite a wide range of contributions, including works of a more multimodal nature. The edition therefore includes poems, sound and video work alongside more traditional articles and excerpts from a narrative and a theatrical piece. Although there is something of a novelty element, we also view the range of contributions as a continuation of a tradition already established within the journal - a tradition of embracing elements of creative and/or poetic writing which seems fitting to us in the light of AMED's own philosophy of doing things a little differently.

Questioning resilience

In trying to support the development of critical friendships amongst our collaborators, we organised two workshops, both of which were hugely energising, inspiring, and indeed moving. In our first workshop, one of the words that came up again and again was 'resilience'. Without wishing to say that resilience is necessarily always used exploitatively, it occurred to many of us that the notion of resilience appears to contain an implicit expectation of violence. What happens, after all, when our capacity for resilience has dried up? And is resilience a universal necessity? Or are some of us expected to be more resilient than others? Sarah Bracke (2016) has identified three manifestations of the modern resilient subject. Firstly, there is the resilience of the First World subject, contained within the discourse of 'back to normal'. This is a resilience which disavows vulnerability, "absorb[ing] potential transformation for the purpose of going back to the same, to a ground zero where the hazard or impact ultimately leaves no impact" (p.58). Secondly, Bracke points to *presumed* resilience of the Global South, a resilience born out of colonisation, exploitation and "the practice of getting up in the morning and making it through the day in conditions of often unbearable symbolic and material violence" (p.59). This is the resilience of those who have no other choice, who become imbued with an innate 'toughness' so that we may avoid looking too closely at the brutality at the heart of global systems. And finally, there is the gendered resilient subject "who continues to survive patriarchy, is increasingly exposed to the neoliberal labour conditions of flexicurity, and is considered individually responsible for her survival" (p.65). Unpaid reproductive labour has long been an unacknowledged cornerstone of capitalism without which there would be no 'flexibility' – as millions of home-schooling mothers have become all too aware.

Locating the "I"

What Bracke's account of resilience makes clear is that living with catastrophe means very different things in different contexts. In order to reflect this reality, we have tried to bring together a range of voices from various different backgrounds. Many of the contributions here contain a multilingual element, reflecting the hybridity within the lives and identities of each author-creator as well as within the group. While all of our final contributors were, at least at the time of writing, based in the Global North, some of them have relocated here from other contexts, and our initial workshop reflected an even greater range and scope. The reasons as to why some of these prospective initial contributors had to bow out subsequently is an important consideration in weighing the overall merits of a project curating creative productions. Being able to write and create is in

itself a privilege that requires bringing together material and psychological resources – epitomised by Virginia's Woolf as that elusive 'room of one's own' - that not all who have joined us on this journey have had access to throughout. Thus, we do not pretend, by any means, to have achieved complete inclusivity. Yet we are both pleased and grateful to have been able to create a space in which we hope a fairly diverse group of people with important experiences felt able to come together and share their perspectives.

Without becoming entrapped within a 'tyranny' of individual experience (Price and Shildrick, 2002, p.66), we believe that situating one's work and acknowledging the 'I' is essential to avoiding the "god trick" of the disembodied universal gaze which "[sees] everything from nowhere" (Haraway, 1988, p.581). For this reason, we have tried to practise reflexivity in terms of *who* we are writing about, *how* we are writing about them and *who* is doing the writing. Many of our conversations with authors revolved around pinning down this slippery 'I', which was also the core theme of our second writers' workshop held in April. Almost as a natural accompaniment to the desire to push the "I" into visibility, to the issue of self-disclosure, our workshop also focused on care, exploring with our contributors whether they felt able to care for themselves, what sort of support they found useful, and what they needed going forward.

How this edition came together

Writing in a time of upheaval

The process of assembling this edition has been a complicated one, with many stops and starts, and a heavy sprinkle of guilt and inner turmoil, as we tried to juggle the work for the journal with paid work, university studies, childcare, and just general living through a pandemic and trying to cope mentally with all that that involved. As guest editors, both of us are somewhat used to living uprooted – somewhat nomadic – lives. But it is one thing to be doing so in an ordinary context, and quite another to have had to manage it during a state of Covid-induced semi-isolation and uncertainty. We thank our contributors and many critical friends for their patience and warmth while we experimented with our roles and attempted to balance editing with other commitments.

Likewise, many of our collaborators have had their own upheavals, some of which have meant that there was not always the time and space for them to complete their work within the timeframe for the publication of this edition. These people we thank for their critical friendship, for their participation in the workshops and enthusiasm about the project, and we hope to have set enough gears in motion for them to be able to publish their work in a different form later down the line. *

At the same time, we have wondered, and still do, about what we could have done differently. Many of the contributions are deeply personal, and we realise that the process of creating them has been an emotional one. How much and in which form to reveal was a real sticking point, and like our authors we, too, have grappled with whether the vulnerability required was justified. And while our commitment to reflexivity and responsible writing means that we have often encouraged our collaborators to 'write from the I,' we have also come to realise that this can in some circumstances be both taxing and risky, and requires careful

consideration. It is one thing to place a duty of care at the centre of a project and another thing, sometimes, to accurately predict the level of support that everyone will need. While we still do not have all the answers (and in all certainty never will), we hope to have grown in our approach to these questions. We would also be very willing to hear any feedback participants and readers might have on these issues.

Juxtaposition I. Image: Fizza

The practice of critical friendship

Critical friendship (e.g. MacKenzie 2015), in fact, as with any AMED project, has been central to the successful completion of this edition. In tandem with the experimental element, we have tried, wherever possible to honour the principles of AMED and the journal itself, and for us critical friendship seemed to embody from the very beginning a kind of politics of writing (and even, dare we say it, a feminist praxis). As we have understood it, critical friendship is based on the understanding that creative work (much like the creators themselves) requires a degree of outside constructive, humane challenge and support. Perhaps conceptually this is not a novel idea, but it was refreshing to be part of an organisation which saw this element as central rather than peripheral to the success of the project.

As co-editors, we also saw it integral to our role to provide something of a scaffolding for critical friendships to be forged among our contributors. In support of this endeavour, we experimented with a number of possible fora, a Learning Management System, a dedicated discussion 'group' situated on the AMED website, a

contact sharing system, and two workshops. Setting up and running these platforms presented a learning curve for us -- and indeed some were vastly more successful than others. This also taught us invaluable lessons, for instance on the importance of ground rules and boundaries as our community of practice evolved.

About the contributions

The stories in this edition include narratives of trauma, of pain, illness and destruction. They are poignant, disturbing, hopeful, sardonic, and often urgent. Some of them indicate a possible path towards healing, but more often than not they draw attention to survival - not in terms of recovery, but rather of living *with* catastrophe. Without diminishing for a second the scale of the devastation which people have suffered in the wake of the pandemic, we would also like to acknowledge that there are still many, many stories of day-to-day hardship which do not feature here.

While we have tried, as much as possible, to feature a diverse range of positionalities, the catastrophes which we present here are in no way intended to paint a comprehensive picture of human hardship in the twenty-first century. Rather, they are a first step towards a very partial view of everyday life in our bodies, in our systems, and in our relationships with others. A rough sketch of living with catastrophe but, we contend, significant nonetheless.

How this edition is organised

We have distributed the contributions across three sections. The first deals with accounts of catastrophes experienced within ourselves, when our bodies stubbornly refuse to cooperate with us. The second section looks at catastrophes unfolding in contexts that we have set up to run our collective lives, such as the government or the workplace, but which are intimately influenced by larger, global forces and attitudes. Finally, the third section takes a more ‘macro‘ approach to framing catastrophes, as traumas perpetrated or reinforced by society, often because of our membership of a certain demographic or social group.

Before delving any further into these sections and the contributions contained therein, we would like to acknowledge that the categories we have devised are not mutually exclusive. Each of these categories contains within itself allusions to its entwinement with the others: our bodily experiences take place within social contexts and our access to our own experiences is dictated by the systems that surround, or rather, encompass, our lives. Our first contribution, by **Alicia Easley**, provides multiple examples of this interconnectedness. It is a sensitive account of personal trauma in the wake of illness which engages with the idea that her experience of her body has been highly mediated by social and organisational demands and messages. Moreover, while the contributions we have grouped together seem to us to be responding to the same or closely linked questions, this should not keep our readers from making their own links between the texts. Of these, we are sure, there are many to be uncovered and discovered. Perhaps the discoveries will prove as inspiring as our own experience of developing a community of writing practice, in which members began to find shared passions and common causes among themselves.

Section 1: the body as a site of catastrophe

The contributions in our first section, then, are reflective accounts on catastrophes that take place within our bodies. What happens when our bodies, like soldiers gone rogue, appear to turn against us? When experiences of illness, pain, or death alienate us from the world at large? Such events can prevent us from making sense of ourselves and our place in the world, and may be made worse by our inability to fully know what it that is that we are struggling with. **Alicia Easley**, **Concha Jimenez** and **Emma Langman** have contributed three seemingly different responses to these questions. Emma's is a haunting poem about an extremely difficult period in her life, Concha explores pain and grief in ethereal visual and textual modes, and Alicia shares her reflections on her surgery by connecting the personal with global political themes. We invite the readers to see with us the emergent commonalities in these various struggles, such as the challenges of seeking or making use of help. Finally, **Aniela Piasecka**'s sound piece is an invitation for us to connect with our own bodies, complete with all their burdens.

Section 2: professionals dealing with catastrophes of others

Our second section shifts the focus somewhat to professional (eco) systems designed to deal with catastrophes. As such, this section is closest to AMED and e-O&P's traditional themes. But as our contributors make amply clear, discourses of normality, responsibility and productivity, to name but a few, intersect with the workplace. Ideas about what it means to be a functioning individual are brought to bear upon these contexts, shaping or obstructing the ways in which people are talked or thought about. Neglect and omission impact the individuals employed in these organisations as well as those they 'serve' and stymies their ability to provide meaningful care. The excerpt from **Jonathan Massey**'s play presents a tense encounter between two such individuals in which the benchmarks for sanity and responsibility are negotiated. The other two pieces in this section, by **Beth Davis and Stephen Musk** and by **RajVinder Singh Gill**, are espousals of a more compassionate approach than the ones made possible by current discourses of mental health and social services.

Section 3: macro-catastrophes

'Macro-catastrophes' is the theme of our third and final section, the one which we, as co-editors, have agonised over the most. The lengths and depths of our conversations, given our time-constraints, are somewhat surprising, perhaps even to us as, in some ways, it is expected that a journal co-edited by two intersectional feminists would carry pieces on gender-based violence or catastrophes perpetuated because of one's social identity. What we worried about with this section in particular, but also with the journal as a whole, was that we could unwittingly create what is sometimes termed 'oppression porn' (Morris, 2021). We were conscious that a lot of tropes, such as those about the helpless brown woman, directly and indirectly feed contemporary (neo) colonialist and chauvinistic thinking, keeping Victorian racial hierarchies alive in subtle ways. We strongly feel that such images harm everyone, regardless of where they may be in the supposed 'racial hierarchy', as it allows our societies to point fingers elsewhere, instead of looking inwards at deep-seated misogyny and other forms of oppression within their own communities. Yet, we could not simply

look away from the very real catastrophes that are taking place every minute around the globe. These catastrophes, often fatal for the victims, such as the ones in **Rumana Mehdi**'s poem based on Sylvia Plath's "Three Women", make us all a little less safe and a little less free. The excerpt from **Jacinta Nandi**'s short story about 'perpetrator mentality' pushes back at the overwhelming narratives of passive victimhood. What also gives us confidence in our decision to include this section on macro-catastrophes is that our contributions come from both the Global North and the Global South. In this context, **Hazel Soper**'s video contribution drives home the interconnectedness of our experiences on this planet we share.

And two poems

We also need to mention, though they speak for themselves, the succinct yet powerful poems by **Ian Andrew** and **Diyo Bopengo,** whose contributions reached us via Tom Boydell and the Good Chance project.

Acknowledgement of a collective, collaborative and creative project

For a few of our writers, this was their first foray into a new genre, which they were compelled into by the power of their visions. Many of our authors had to tap into painful memories to be able to share their experiences. Yet, in the hope of illuminating and connecting with the experiences of others, they were determined to share their experiences, and we applaud their courage for doing so.

Process I: Fizza's laundry

Process II: Erica's earthquake fort

The process of putting together this journal broke us all down at different times. In the end, however, we are proud to share this edition with the larger public and hope that our readers can be moved by these stories, just as we have been, touched by the sensitivity, and enlightened by the insights of our contributors. We are eternally grateful to all our contributors who made this journey with us.

While we had had some experience in similar roles before (thank you, **Anna Fairtlough**, for letting Erica support you as co-editor in 2017!), it was our first time having full control -- and full responsibility. We could not have made it this far without the support of our contributors, critical friends and other collaborators*, or indeed without the enormous amounts of help and guidance we have received from our commissioning editor, **Bob MacKenzie**. To Bob we are especially grateful for his openness, and indeed encouragement, for new ways of doing, for his ability to listen to us deeply, and for his courage and patience in continuing to do so even when he may disagree with us.

We also give thanks for the encouragement of experienced AMED collaborators such as **Steve Dilworth**, who was kind enough to help facilitate our first workshop and provide additional guidance on critical friendship; **Ruth Slater**, who was an active participant throughout; and our design and technical editor, **David McAra**, for his good humour, enthusiasm and readiness to embrace experimentation, along with his colleague **Rory Samuels. Linda Williams**, AMED's Administrator, and the larger **AMED Council** have also been a constant support and resource. While it has been exciting for us to introduce some new faces to AMED, it has also been a real privilege for us to be able to benefit from the knowledge and skills of existing AMED members, and we hope to have given something in return.

Finally, the publication of this edition is not the end of the story. It is certainly not for e-O&P, but this edition, too, lives on for as long as we are 'Living with Catastrophe'. We hope our readers will feel empowered to share with us their responses and comments. Additionally, in the future we may continue to publish select pieces as addenda to our web edition. We will also be hosting a post-publication get-together with our contributors and critical friends to continue our discussions on some of the questions this edition has raised. Watch this space for more details.

* We would like to give special thanks to our critical friends **Andy Piasecki**, **Aurelia Streit**, **Caterina Mapel**li, **Christine Hollywood**, **Dina Farag**, **Elsa Costa**, **Eman Alyan**, **Farhad Mirza**, **Hani Yousuf**, **Helena Brandist**, **Jim McCarthy**, **Romana Lalarukh** and **Tom Boydell** and to the many, many others who gave us a hand (or an encouraging pat on the back) along the way.

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About Erica and Fizza

Erica is a postgraduate student in the very final stages (she hopes) of the Erasmus Mundus Joint Master's Degree in Women's and Gender Studies at the universities of York and Granada. Her research takes a phenomenological approach to feminist performance art on chronic pain and she has also worked as an English language teacher for a number of years. You can contact her at: erica.piasecka@gmail.com

Fizza is a full-time solo parent who, after nearly a year's break, is looking forward to writing her thesis at the University of York. After studying a combination of literature, sociology and art history during her time as an MA student in the Erasmus Mundus Joint Master's Degree in Women's and Gender Studies, her research hopes to find how heterosexual marriages in urban Pakistan are faring in the current socio-economic climate. She can be contacted at sfizzahasan@gmail.com

The Sound of Lockdown

A poem

The Sound of Lockdown

These leaves staring at me from the window.
They whisper at me as if they have something to say.

I shut the window when I hear the police siren,
or is it an ambulance?

My mate snaps her fingers and the microwave beeps.
I rush down to the kitchen on these squeaking stairs.

Diyo Mulopo Bopengo

About Diyo

Diyo Bopengo is a Congolese who grew up in South Africa and now lives in the UK. He volunteers with Volunteer Action Sheffield and other humanitarian organisations. He is a part of Good Chance Theatre's poetry collective Change the Word and has co-published two of their anthologies.

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The practice of rest in a tradition of blame

A Black woman's experience

Alicia Easley

Keywords:
Illness (non-COVID); lockdown; medical inequity; racism; rest

The revolutionary Black feminist Audre Lorde said, "caring for myself is not self-indulgence, it is self-preservation, and that is an act of political warfare," (Lorde, 2017: 130). As Black women, we spend significant portions of our lives "shouldering the burdens of others with little concern for our own health and happiness" (Dionne, 2015) which makes centering these acts of self-care vital. However, when self-care and rest come with the possibility of being charged with selfishness or self-indulgence, whether by voices outside ourselves or internalised, the idea of rest and self-care becomes fraught.

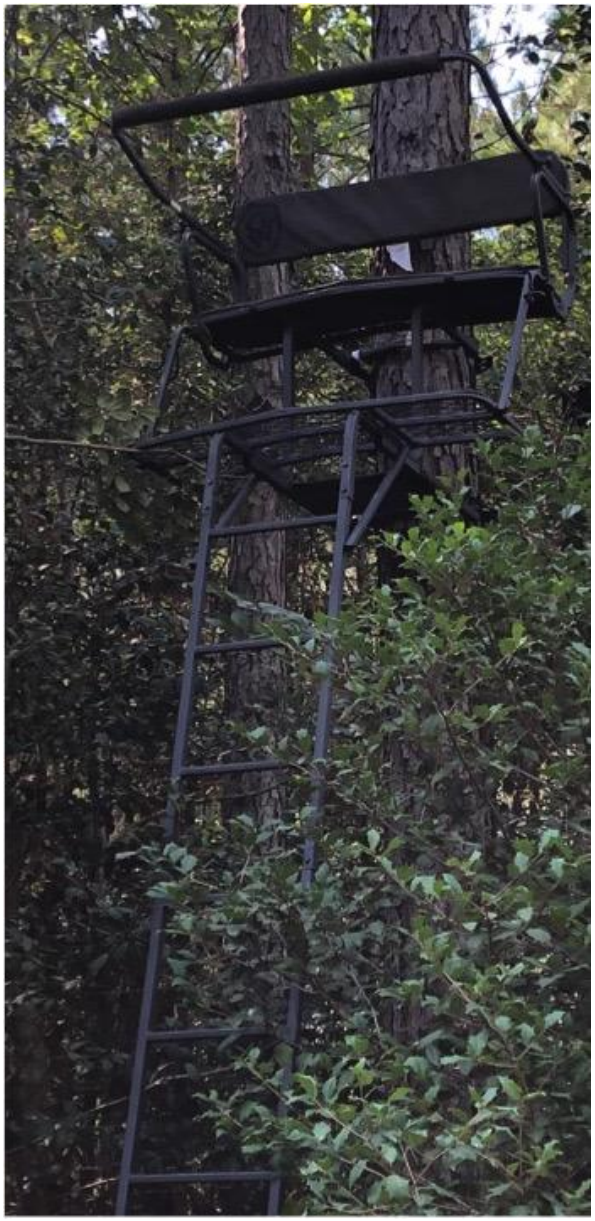
Locator map of the Azores by Tyk.

My dad used to take my sister and I rabbit and bird hunting when we were small and living on Terceira Island in the Azores. Once we were older and living in the US it changed to hunting deer. Eventually, however, responsibilities took precedence over spending time with family, and the hunting trips became less frequent. What stands out to me from those memories is the rest that was embedded into each day in the woods, because the very nature of those trips meant that rest was necessary. No phone calls or access to the internet. No disruptions from the outside world.

I found myself thinking about these trips frequently through the first lockdown in the UK, and also when I was recovering from a major surgery in November-December 2020. When, during my recovery, just getting up from the chair was a challenge, I would think back to how my body used to seem to glide up tree stands with ease. I would think about how my joy was predicated not on the kill but on just being whole, rested and understood.

The foundations of rest and of its denial

My last hunting trip was in November 2018. I had just finished my US Peace Corps service in Armenia. Because I had some time before the start of my new job, my dad and I took a road trip to Georgia to go hunting. It was my first time back in Georgia, and I felt the weight of not being able to see my grandmother this time. Visiting her was always a part of the joy of these trips, but she had died while I was in Armenia. My grandmother was a woman who never seemed to rest. She was always working; and when she wasn't working, she was headed to church for an activity or a service; and when she wasn't going to church, she was taking care of somebody. She was nonstop. An indomitable force of nature. And being in her presence was simply breath-taking. On the few occasions I did see her rest, the pauses seemed brief and irregular.



A tree stand, Image: Curtis B Easley

My grandmother was very much on my mind when we pulled up to our hunting camp -- just in time to embark on a morning hunt. We changed into our hunting clothes and went out to the woods to wait in our respective tree stands. When it became clear that we were not going to see anything during the morning hunt, we went back to camp, changed out of our hunting gear, washed up, and started getting ready for breakfast. After breakfast, we cleaned up and made plans for where we might go for the evening hunt, and then we took our naps.

: When I was younger, I didn't always use that time between the morning and the evening hunt to nap. I normally had some form of schoolwork to finish, or a book I wanted to read. Only as I got older did I begin to understand the fullness and necessity of that nap. It was an opportunity to refresh and resharpen myself, rather than pushing through fatigue. Our hunting trips disrupted the idea that we had to push through even when we did not need to do so.

I was lucky to have this foundation that taught me the importance of resting, and it was central to my wellbeing, but, for a while, I forgot the lessons I had learned from it. When the COVID-19 pandemic turned everything on its head, making apparent the reality of relentless, state-sanctioned violence, oppression and class disparities in the US, the UK, and globally, my initial response was to continue the grind as if nothing out of place was happening. I carried on working on my Master's thesis, picking up projects on the side, interning at multiple places and volunteering. I was living my life disconnected from my systems of support, while also witnessing, mainly through social media, Black and marginalised communities in the US undergoing trauma after trauma.

This pushing through was to my own detriment, as I ignored my own worsening health. I told myself that what I was going through was not as bad as what was happening elsewhere.

> *August 9, 2020*
>
> *My body hurts.*
>
> *There are just aches that I don't really understand, and that are so different from the aches and pains that I'm used to having.*
>
> *I'm thinking about my gut and just how badly my stomach hurts…*
>
> *I also think about how my body is just changing. It's just changing, and that makes me sad. It's a sign that I'm just getting older, and the getting older bit is fine, but I'm not recognizing my body---this body that I've lived in my entire life.*

Even though I started noticing changes in my body months before writing the above journal entry before the first lockdown in the UK, where I was now based, I had originally attributed those changes to getting older and to a lack of exercise. These once-subtle changes, a thickening of my belly, fatigue, and a weird bubble-like feeling in my gut that I only really noticed during yoga, were getting worse, but I chose to ignore everything that was wrong with me.

The pandemic's effects on women's healthcare

When I did think about my health, I was initially concerned about putting undue burden on the NHS or my General Practitioner's (GP) surgery. I did not see my symptoms as a priority and preferred that the country's medical resources be used for someone who really needed it. While I now know I need not have worried about making such demands, at the time I did not want to be accused of unnecessarily burdening the NHS.

I wasn't alone in that feeling. Since the first lockdown, studies have looked at the impacts of COVID-19 on the care for people. Many were made aware of resources diverted to hospitals and the considerable pressures on the NHS even before the pandemic hit the UK. Access for in-person services was reduced or changed to remote and online methods; women's use of health services fell, more so than men's, because of concerns about the coronavirus and breaking restrictions (Charlesworth, et.al., 2020). Like me, many people with various chronic conditions delayed seeking treatment, and often people had to "manage exacerbations to their condition on their own" (The Asthma UK and British Lung Foundation, 2021). Of course, the NHS did begin to tell people not to avoid going to the doctor during lockdown should they need to (Whitehead, 2020), but the desire to not feel like a burden made me want to wait for as long as I could.

> *August 11, 2020*
>
> *I kind of feel like I'm making my tummy worse. Like thinking about it is causing it to be painful and that I'm using that and my migraines as a distraction for avoiding doing any work.*
>
> *Maybe that is what I'm doing.*

Perfect female body 15: Gretchen Andrew (2018) Wikimedia Commons

Reaching out for healthcare in England

I assumed my symptoms were getting worse because of stress. I was dealing with a thesis that didn't seem to be going anywhere, a neighbour whose voice was so loud it made it seem like there wasn't a wall between our flats and the onset of migraines. At the same time, I was doing work directly related to anti-racism while also dealing with the loss of the last matriarch of my family. My symptoms were happening in tandem with what felt like the whole world burning, and I assumed that the stress of all of these things was having a domino effect. My therapist agreed.

With these thoughts in mind, I decided to call my GP surgery with a list of complaints about what was wrong with me. The receptionist assured me that I was not the only one who waited and got me a tele-appointment with the doctor. A treatment plan for the migraines was easy to implement and quite effective, but my other symptoms were not so easily addressed.

I had already sought help from the chemist to deal with my irregular bowel movements, so the GP asked me to come to the surgery to pick up a stool test kit so I could bring back a sample for tests, before going to a different place to get a blood test. The idea of going to multiple places in the middle of lockdown just added more pressure. I didn't drive; I felt low on energy; I was about to move to another city; I had this paper to complete; and a litany of other reasons. By the time I could mentally ready myself for these errands, amounting to three trips into the outside world, I told myself that too much time had passed. I let my own shame, for not being well enough to just get on with it, hold me back.

> *September 24, 2020*
>
> *The bloating has gone down a bit, except for the area just below my ribs.*
>
> *It's the strangest sensation.*
>
> *…*
>
> *My body doesn't feel like it's been my own for months. If it hasn't been my lack of bowel movements, it's been my migraines, and if it hasn't been that, it's been my depression.*
>
> *And I can't control any of that. They just come and take over my life in monstrous ways.*
>
> *I know that skinny doesn't mean healthy, but in my case, I think it's exactly that. Me being bloated isn't healthy. Me being sedentary isn't healthy. These are things I know about myself, yet I'm doing nothing to change anything.*

The struggle to switch GPs in Scotland

I moved to Scotland with my boyfriend, into his parents' house, with a plan to get jobs during the pandemic. I also continued work on my thesis for which I had been able to get a deadline extension. Our new location had irregular public transport, and we now had to rely on others to get around. In this move, I lost the independence I had grown accustomed to. I already felt like a burden on others and became adamant in avoiding asking others for anything.

I attempted to switch to a new GP, a frustrating process, while managing my symptoms using information I had found on the internet. I was told by the GP surgery that my boyfriend and his family used that I was outside their catchment area and denied registration. Turning to Google, I found that the first GP surgery was closed. Another one, according to my boyfriend, was rough and I was more likely to get a disease going there than anywhere else. It got to the point where finding a new GP felt more burdensome than simply dealing with my symptoms. Although the NHS had been working on reducing inequalities in access to healthcare by publishing guides and issuing what are meant to be helpful tips (NHS, n.d.), the pandemic made many of those tips redundant, and it took time to fill the newly created gaps.

Even though I am a dual citizen of the UK and US, I have spent the majority of my life in the US military healthcare system, graduating to private health insurance once I was older. Navigating NHS Scotland during a pandemic required knowledge and experience that I did not have. Instead of expending more energy on symptoms I was still trying to convince myself "weren't that bad," I switched focus to job hunting and the thesis. I told myself that once I had tackled my thesis, I would have more energy to deal with getting an appointment. Even though I was becoming more and more concerned about my symptoms and how I looked because of them, I had managed to convince myself that this problem with my health could wait, and would turn out to be something benign.

> *November 19, 2020*
>
> *I'm not going home tomorrow. Turns out the reason why my belly hurt so bad was because of a rather large cyst hanging out in my ovary.*
>
> *It came in at around 12lbs and was pushing everything out of the way. It could've burst. But it didn't. [My boyfriend] made me go get checked out, so I spent the weekend getting checked out and having surgery. They had to take my left ovary and the fallopian tube that went with it.*
>
> *…*
>
> *It's a lot.*

My symptoms had escalated to the point where I couldn't walk. I was having painful cramps that I had at first attributed to my period. But the pain level was unlike anything I had ever dealt with before. My boyfriend called all the numbers I had already tried in a desperate bid to get me an appointment. When I had originally done this on my own, he was convinced that I wasn't trying hard enough to get an appointment with his GP or at any other GP surgery. But when he called 111 to see what the protocol was for someone who did not have a GP, he couldn't get through to a person. Instead, an automated message told him to make an appointment with "your" GP, which meant nothing when I didn't have one. He called his GP, only for the receptionist to tell him that I wasn't a patient or in the catchment area. She got a nurse to speak with us at my boyfriend's insistence. This nurse let us go through all of the symptoms only to tell us once again that they couldn't treat me. Despite my pain, I was stuck with that maddening refrain:

a) Call 111;
b) Go to the chemist's;
c) She's not our patient or in our catchment, so we can't treat her.

Stewing in his anger and frustration, he called the next GP surgery. The receptionist who picked up this time tried to push us off—that I wasn't a patient and that it was almost time for the surgery to close and that I should either call 111 or wait until Monday if I could. Luckily, a GP who was in the office overheard our conversation and said that I should come in.

Diagnosis and treatment

After that, everything began to run more smoothly. The GP saw me, ran some tests and found nothing wrong. She felt my stomach and felt a hardened mass. She ran a pregnancy test and took a doppler to my stomach.

Nothing.

She decided that I would need to go to the hospital. When she called Gynaecology she said, *"She's not pregnant, but if she were I would say that she is 27 weeks along."*

I ended up being admitted that night. At this point I had managed to only cry once . The cramps were very painful, but I didn't want to appear weak or dramatic over 'nothing'. I didn't want someone making a fuss over me. I walked into the ward and was asked to wait for the doctor. I was deeply uncomfortable, trying my best to stay in a position that hurt the least. When the doctor arrived, she talked me through the next steps. It ended in more tears. On the pain scale, I was at a 9. She said, "You're so stoic", but assured me that I didn't have to be.

The next day, she stood next to me as the doctor who would perform my surgery walked me through my ultrasound. The cyst was so big it didn't fit on the screen.

The doctors were careful in not letting me feel like it was my fault. Even when the possible implications of this delay in seeking help began to dawn on me, I was reassured that I was likely not alone in my thinking given the pandemic and lockdown.

Ascribing blame

I stayed in the hospital for five days. My boyfriend and his family made arrangements so that I could rest and heal at home, as going back to the US was out of the question. I was made to rest. But while I was in this state of rest physically, I was being bombarded with questions that would gnaw at me.

> "How could you wait so long?"
>
> "Why didn't you see someone sooner?"
>
> "How could you let this happen?"
>
> "Well, aren't you lucky you were in the UK and not the US"

Since my surgery, I've been fielding questions about how I let the problem get so big. The assumption usually is that it was all my fault, even though I had had conversations with my GP about what I now know to be symptoms of the problem.

British Airways representatives downplayed the danger that I was in, telling me that since I was not terminally ill, I was not eligible for refund on my flight -- not taking into account how the flight could have worsened my condition and in all likelihood even proved fatal.

Despite all that I went through, I even felt guilty for missing a holiday season with my family and burdening another family with taking care of me.

Where does the blame, and self-blame, for women, especially black women and women of colour stop? And, how? I understood the questions people were asking me were well-intentioned; but I could not help feeling attacked for something beyond my control. It was only because a GP saw me in person that a problem was

detected. Otherwise, it was fair for them to assume that nothing really was wrong with me. The blood tests had come back normal; the pregnancy tests were negative; and other than my growing belly, which I had attributed to bloating and lockdown weight gain, there was no evidence that anything was wrong with me. Yet, here I was, still carrying this burden of blame and guilt while I was meant to be healing.

In reflecting on this catastrophe, I believe that my decisions went beyond simply not wanting to be a burden on anyone else, even though that was surely a factor. The messages I had internalised about my own value as a Black, mixed-race woman had a bearing on how the events unfolded. From yet another angle, my story is one that is shared by countless women, especially women of colour. When Serena Williams shared her childbirth experience in a Vogue profile (Haskell, 2018) we came to learn that being a respectable, wealthy Black woman with access to resources does not necessarily stop doctors from ignoring one's pain. And while more attention has been given recently to maternal deaths and complications in Black women in the US, that has not stopped the perpetuation of racism in the healthcare system.

The American healthcare system, in particular but not exclusively, has a "long history of disparate treatment of black women, whose health struggles have been systemically minimized or dismissed" (Lockhart, 2018). Black women can't seem to "escape skepticism, even when the topics in question are their own bodies" (Lockhart, 2018). Even when they are doctors who become patients, Black women face skepticism when it comes to having their pain treated seriously. When Dr. Susan Moore became a patient in a hospital in Indianapolis, complaints of her pain and reliance on harmful stereotypes caused Dr. Moore to be given substandard treatment (Eligon, 2020). Dr. Moore made a video and accompanying post on social media, which has since gone viral, in which she detailed how she was treated by the predominantly white staff in charge of her care. She ended her post asking, "Why do I have to prove that there's something wrong with me in order for my pain to be treated?" (Moore, 2020). Dr. Moore would subsequently be removed to a different facility, where she would become one of the millions to die due to COVID-19 (Eligon, 2020; Worldometer, 2021).

This history of distrust of Black women in need of care is not exclusive to the American healthcare system, but is true in all systems where racism and white supremacy have been institutionalized. In February 2020, The BMJ did a special issue on racism in medicine and found that "ethnic minority doctors and patients still face too many injustices in the NHS" (The BMJ, 2020) with nothing really being done to address the inequities.

The foundations of blame

In the UK, studies have shown that long-standing health inequalities were further exacerbated by COVID-19 (Public Health England, 2020; 13). While the government did compare with data collected in the US, they found that given the "historical differences in the impacts of racism and slavery, and the radically different healthcare systems between the US and the UK, it is difficult to generalise the effects of social and structural impacts on health," (ibid.; 16). Yet, "the emerging evidence suggests excess mortality due to COVID-19 is

higher in BAME populations. Individuals of Black African or Black Caribbean ethnicity may be of highest risk" (ibid.;13). This has been the case for hundreds of years. Laura Briggs says of gynaecology in the late 19th and early 20th centuries that "the medical and scientific literatures of obstetrics, gynaecology and racial differences between women were deeply invested in making dualistic distinctions about the effects and prevalence of nervous disease" (Briggs, 2000; pp 256-257). These same gynaecologists and obstetricians used their racialized viewpoints about the perceived ease of labor in Black women and other racialized minorities to conclude that Black women in particular had the inability to feel pain (Briggs, 2000; 259-262).

While Briggs's study focused on perceptions from over 100 years ago, those perceptions about pain, and Black women's inability to feel pain, and the weakness of women in general still hold. Pryma found that "all of the women [she] interviewed, regardless of race, recalled doctors who ignored their pain," with Black respondents frequently describing situations where medical providers ignored their pain or doubted that their patients were reporting their pain truthfully (Pryma, 2017b; 155).

With such evidence, it's a wonder why people even ask "why did you wait so long?" Well, why would I have gone sooner? I was disillusioned. And my disillusionment left me in a worse situation than if I had been empowered to seek help in the first place. And if I, who had always received decent care in the US and the UK, didn't feel empowered, how many other women like me also came up against the same walls? At one level, internalizing the idea that I wouldn't be taken seriously stopped me from seeking the care I deserved. It made me feel that I must keep a stoic front in order to be taken seriously and it made me blame myself for waiting to seek the care that I did deserve.

Asserting the right to rest

With all of these facts about how healthcare systems in the UK and in the US are unequal, and reinforced by my own experiences, we must turn away from blaming women for waiting until the last minute, and work instead to empower institutions to change their practices to be more inclusive of those communities that are distrustful, unwilling, or unsure of accessing services.

For me, this looks like having a healthcare service that is fully funded to be able to handle burdens, even in a pandemic. For the US, it means incorporating accessible healthcare through a national service so people don't have to count themselves lucky for not being in the US to receive life-saving services. It means having a reception team that is willing to be helpful to those who might not be in their catchment area.

Patients should also be able to trust that their healthcare providers have their best interests at heart. This may mean having diverse staff members. It helped me to trust the team that treated me in Scotland, because nine out of eleven of that team were women, two were people of color, and two did not have British accents. I was able to trust the people providing treatment, because they looked like me, understood that I worried about whether I would be believed, and treated me like a human being with a full range of valid emotions. We must shift from blame to care and make it integral not only in our health systems, but also within our communities beyond the healthcare system.

Finally, we need to allow Black women and women of color the time to rest. This is especially important as we grapple with the impacts of Covid-19 and the racial inequality and inequities that have come to the forefront because of it. We must look into practices that reinforce the idea that our bodies, our lives and our health as Black women and femmes matter. If we are to be deeply committed in dismantling white supremacy and racial inequality and inequity not just in our health care systems, but throughout our communities, we must honor our bodies, and rest (The Nap Ministry, 2021).

We must practice this rest *always*, and not just when we have an illness or are confronting the ramifications of a global pandemic.

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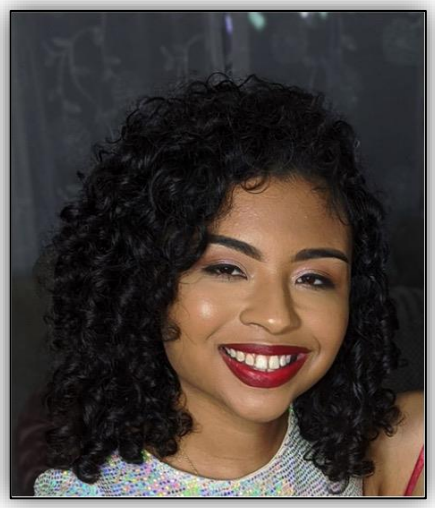
Image References

Gretchen Andrew - Own work, CC BY-SA 4.0, https://commons.wikimedia.org/w/index.php?curid=66137255

Tree stand, Curtis B Easley

Tyk, Locator map of the Azores based on European_Union_(blue).svg

About Alicia



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Elogio al Fracaso

(English translation follows on p31)

De Concha Jiménez Muñoz

Nota de la autora:

Durante la mayor parte de la pandemia mi único vínculo con el mundo de artistas, poetas, ilustradores y fotógrafos en el que solía estar, ha sido a través de una pantalla digital (con una media de unas cuatro videollamadas a la semana).

Este ensayo explora los procesos afectivos y creativos de mis dos últimos proyectos artísticos: *Lo insondable* (presentado por última vez en febrero de 2020) y *Nada que ver* (proyecto actual), ambos afectados considerablemente por las circunstancias del confinamiento, los cierres perimetrales y los inusuales horarios a los que nos hemos visto restringidos.

Como mujer, madre y artista, exploro aquí las posibilidades creativas del aislamiento, la austeridad y el abandono.

Para que la experiencia de lectura se aproxime mejor a las obras que analizo, recomiendo acompañar la lectura con este audio.

La orilla

Viene sin llegar muy lejos
una ola y otra
con un interlineado impreciso,
constante,
y un ruido de fondo que no cesa.

Más allá no llegaremos
ni siquiera cuando el sol irradie

Creando desde la quietud

Una posición constante, una circunstancia determinada inamovible termina por resultar desgastante y a la larga, demoledora. Cuando los cambios son imperceptibles, el deterioro es constante. Y no hay marcha atrás. Eso sentí en una ocasión mirando una serie de fotografías impresas de un chico haciendo windsurf sobre el mar. Lo que realmente me llamó la atención no fue el movimiento congelado del mar, de la vela o del cuerpo del joven, sino las

Figura 1: El joven (Jiménez Muñoz 2006)

manchas amarillentas que en menos de quince años habían emergido arbitrariamente en la imagen, el envejecimiento inevitable de la fotografía impresa.

Comencé a pintar en una pequeña tabla el mar a partir de esas fotografías. Desenfoqué las olas y ensucié el azul del cielo y el blanco de la espuma. Omití al joven y la vela de windsurf. Sentí la necesidad de cortar en círculo el soporte a modo de visor o foco. Utilicé resina para simular el barniz de las fotografías y amarillee deliberadamente la superficie. Pretendía representar el brillo de los antiguos álbumes, ese deseo de preservar y proteger las imágenes familiares. Quise repetir el resultado en un formato mayor y ahí comenzó una serie de un total de siete mares con el horizonte a diferentes alturas, inscritos en círculos y barnizados con resina. De ahí nació el proyecto artístico *Lo insondable* al que dediqué dos años de trabajo.

Figura 2: Mar I (Jiménez Muñoz 2019a)

La exposición de *Lo insondable* fue sobrecogedora para mí. Los espectadores tenían la sensación de estar sumergidos en el agua debido a las pinturas circulares del mar a modo de ventanas. La instalación sonora, los vídeos y el resto de obras creaban una escena distópica de ensoñación y ausencia en cierta forma incómoda. La escultura de una niña blanca junto a su cama, en su habitación, observaba de pie en el centro de la escena.

Vista de la primera muestra de *Lo insondable*

Figura 3: Vista de la exposición *Lo insondable* (Jiménez Muñoz 2019c)

Lo insondable se expuso por última vez en febrero de 2020, justo antes del estado de emergencia provocado por la pandemia.

Figura 4: Memoria Fotográfica (Jiménez Muñoz 2019b)

Creando recuerdos no digitales

El chico de las fotografías que inspiraron *Lo insondable* es mi hermano. Aunque no lo representé en ninguna de las pinturas circulares, su ausencia era fundamental para el proyecto. Mi hermano falleció en un accidente de carretera en febrero de 2007, justo el año en que Facebook invadió nuestras vidas. Debido a sta catástrofe, él no tuvo tiempo de tener la pionera red social ni mucho menos Instagram. De él conservo e apenas medio centenar de fotografías. Cincuenta imágenes a lo largo de la vida de una persona de 27 años, si lo comparamos con las fotografías que un joven de hoy tiene de sí mismo a esa edad, no es nada.

Otra diferencia es que la reducida memoria de mi hermano está impresa y sufre un deterioro imperceptible pero constante. Gran parte de nuestra realidad es virtual y nuestra imagen digital ha sustituido con creces las imágenes impresas. Nuestra ventana al mundo es hoy más que nunca una pantalla y sin embargo, la superficie de la pantalla es demasiado lisa para el tacto (aún más plana e imperturbable que una pintura o una fotografía susceptibles al cambio); una pantalla es impenetrable por el roce del tiempo, su obsolescencia abruma y la proliferación de la imagen promete una eternidad aparente, banal y engañosa.

Mirando al mar

En el confinamiento, sin poder ir al estudio a trabajar y entre videollamadas y trabajos on-line surgieron estas reflexiones. Desde mi piso de ciudad de interior nació un nuevo proyecto artístico al que titulé *Nada que ver* y la firme decisión de mudarme en cuanto fuera posible frente al mar.

Pero antes tenía que acabar una obra que había quedado a medio hacer y estaba copiando en el museo de Bellas Artes de mi ciudad cuando estalló la pandemia. Se trataba de una pintura al óleo titulada *Escena de familia* de Rafael Martínez Díaz pintada en 1954, cuando el hambre y las penurias de la posguerra aún azotaban España. Es conocida también como *Niñas pobres*.

Figura 5: *Escena de familia* (Martínez Díaz 1954)

Hacía varios años que esta obra me había cautivado por la desolación doméstica en la que las cuatro niñas de la pintura habían sido representadas. En cierto modo me provocaban un desasosiego similar al de "mi" escultura de niña desamparada y a la sensación de desolación que sentí en el confinamiento. En agosto de 2020 pude retomar el trabajo en el museo. Apenas había visitas, por lo que me permitieron trabajar a jornada completa. La intensidad del esfuerzo estaba relacionada sin duda con aquellas extrañas circunstancias, todo resultaba extremo. La copia sufrió cambios considerables, especialmente en los confines de la escena: la ventana y las vistas. Después de un periodo tan intenso de aislamiento en casa, esta "Escena de familia" doméstica alrededor de la mesa había adquirido otros significados.

Figura 6: Detalle de mi copia de *Escena de familia* (Jiménez Muñoz 2020b)

Aislamiento

Una vez terminado el trabajo en el museo, me mudé con mi hijo a las afueras de un pueblo costero de Cádiz y comencé a desarrollar el nuevo proyecto aquí. Donde vivimos no hay comercios ni vecinos pero desde nuestras ventanas vemos la playa y siempre nos acompaña el sonido del oleaje. He habilitado un espacio de trabajo en el salón y he renunciado a la posibilidad de alquilar un estudio fuera de casa por lo que pueda pasar. A la reducción de nuestra vida al espacio doméstico y la vida digital se ha sumado el amado horizonte, una línea que es a la vez un lugar de unión con la Naturaleza y el contorno de nuestros límites. Vivir en un lugar de inmutable desolación exige un abandono del ser, al menos del control o lo que fue. Nada volverá a ser igual aunque el vaivén de las olas parezca constante. Situados en una situación límite veremos mutar todas nuestras cosas, a veces lentamente, a veces rápidamente. No hay certezas. En una suerte de abandono, nuestra vulnerabilidad queda expectante y abierta a cualquier posibilidad. A veces alguien pasa haciendo windsurf o skysurf.

Así vivimos ahora. Esta situación límite, la desacostumbrada incertidumbre, nos obliga a la espera, nos aplaca y nos templa como nunca antes supimos estar.

Vídeo: ORILLA I (Jiménez Muñoz 2020c)

Vídeo: 'ORILLA II' (Jiménez Muñoz 2020d)

Figura 7: Orilla II (Jiménez Muñoz 2020d)

Nos hemos convertido en los voyeurs de nuestro mayor "fracaso" - la incertidumbre.

Como después de la guerra, como en la pintura *Escena de familia*, el mundo doméstico al que hemos sido históricamente relegadas las mujeres, es el reflejo más fiel de la pobreza, las ausencias, el abatimiento y, a la vez, el refugio más seguro. Comencé a "sacar" de la pintura lo menos mutable: la mesa, la jarra, el plato, el "escenario", el hogar de esa familia que pereció (las niñas, su alimento...) Después llevé esta escena al mar. Como en todas las catástrofes, un extraño escenario quedó expuesto al lento cambio de la naturaleza. Y grabé otro vídeo en el intento de representar el desamparo y la desolación de los hogares, a veces constituidos por un solo comensal.

Figura 8: Lo único que queda (Jiménez Muñoz 2020a)

Video artwork: ORILLA III (SHORE III) (Jiménez Muñoz 2020e)

Figura 9: Orilla III (Jiménez Muñoz 2020e)

List de Ilustraciónes y Obras

Jiménez Muñoz, C. (2006). [fotografía]. *El joven*. Colección privada de la artista.

(2019a). [pintura de oleo]. *Mar I*. Expuesta en Camas: Sala Nuevo Ateneo. Oleo, resina y arena sobre lienzo. 195x195.

(2019b). [fotografía]. *Memoria fotografica*. Colección privada de la artista.

(2019c). [fotografía]. Vista de la exposición *Lo insondable*. Colección privada de la artista.

(2020a). [fotografía]. *Lo único que queda*. Colección privada de la artista.

(2020b). [fotografía]. Detalle de mi copia de *Escena de familia*. Colección privada de la artista.

(2020c). [vídeo online]. *Orilla I*. Disponible en: https://youtu.be/w9yB2IRV2rM

(2020d). [vídeo online]. *Orilla II*. Disponible en: https://www.youtube.com/watch?v=C8LI60WOG0Q&t=87sist's

(2020e) [vídeo online]. *Orilla III*. Disponible en: https://youtu.be/LMqovG0l-HA

Martínez Díaz, M. (1954). [pintura de oleo]. *Escena de familia*. Sevilla: Bellas Artes. Oleo sobre lienzo. 130x195. Fotografía hecha por la artista.

Sobre la artista:

Concha Jiménez nació en Sevilla, ciudad en la que ha vivido gran parte de su vida y donde se licenció en Bellas Artes en 2004. Se especializó en Grabado y Diseño gráfico aunque sus intereses se extienden desde la instalación hasta la fotografía, la poesía, la literatura, la escultura y la ilustración, aunque su principal foco de atención ha sido siempre (y sigue siendo) la pintura.

Mientras que sus primeros trabajos destacan por su expresividad (sobre todo en los retratos), en los últimos años ha tomado una dirección más austera, consciente y contenida en la que no deja de estar presente una fuerte implicación personal.

Pertenece a UAVA (Unión de Artistas Visuales de Andalucía), y a MAV (Asociación de Mujeres en las Artes Visuales).

Para más informaciónes sobre la artista y su obra, pueden consultar su página web o mandarle un email escribiendo a conchajimenezmunoz@gmail.com.

In praise of failure

Concha Jiménez Muñoz

Translation from the Spanish by Irene Hidalgo Caparrós and Erica Piasecka

Author's note:

For most of the pandemic, my only link to my usual world of poets, illustrators and photographers was through a digital screen (at the rate of about four video calls a week).

This essay explores the affective and creative processes behind my two most recent exhibitions: *Lo insondable* (exhibited for the last time in February 2020) and *Nada que ver* (current project), both of which were considerably shaped by the lockdown, travel restrictions and the unusual working hours with which we were required to comply.

As a woman, mother and artist, I explore here the creative possibilities of isolation, austerity and abandonment.

For a reading experience that best approximates the exhibitions I discuss, I recommend playing this sound file in the background from this point on.

The Shore

A wave comes without stretching too far
and another one
with a vague line spacing,
constant,
and a background sound that never stops.

Further back, a place we won't reach
not even when the sun shines.

Creating from stasis

Constant positions and immovable circumstances become wearing, and ultimately, destructive. When changes are imperceptible, deterioration is constant. And there is no turning back. Such was my feeling while looking over some old photographs of a boy windsurfing on the sea. What really struck me was not the frozen movement of the sea, the sail or the young man's body, but the yellowish stains that in less than fifteen years had arbitrarily emerged on the image due to the inevitable ageing of the printed photograph.

Figure 1: The boy (Jiménez Muñoz 2006)

With these photographs as my guide, I began to paint the sea on a small board. I blurred the waves and dirtied the blue of the sky and the white of the foam. I omitted the young man and the windsurf sail. I felt the need to cut the surface into a circle like the viewfinder or lens of a camera. I used resin to simulate the varnish on the photographs and deliberately yellowed the surface. I wanted to represent the brightness of old photo albums, that desire to preserve and protect family pictures. I wanted to repeat the result in a larger format and so began a series of seven seas in total, with the horizon at different heights, framed in circles and varnished with resin. This led to the art project, *Lo insondable*, to which I devoted two years of work.

*[**NOTE**: In English, "lo insondable" loosely translates as "the unfathomable", but also means "bottomless", as in "the bottomless sea"]*

Figura 2: Mar I (Jiménez Muñoz 2019a

The exhibition *Lo insoldable* was overwhelming for me. The circular paintings of the sea were like windows, creating the effect in the viewer of being underwater. The sound installation, videos and other works created a kind of dystopian reverie and absence that was somewhat disturbing. The white sculpture of a girl, standing next to her bed in her room, stood watching from the very centre of the scene.

Video view of *Lo insondable*

Figure 3: View of exhibition *Lo insondable* (Jiménez Muñoz 2019c)

Lo insondable was exhibited for the last time in February 2020, just before the State of Emergency brought on by the pandemic.

Figure 4: Photographic Memory (Jiménez Muñoz 2019b)

Creating non-digital memories

The boy in the photographs that inspired *Lo insondable* is my brother. Although I didn't depict him in any of the circular paintings, his absence was central to the project. My brother died in a road accident in February 2007, the same year Facebook invaded our lives. Because of this catastrophe, he didn't have time to create an account on that “pioneering” social network site, let alone Instagram. I have barely fifty or so photographs of him. Fifty pictures in the lifetime of a 27-year-old, when compared to the number of photographs any young man of the same age might have of himself today, is nothing.

Another difference is that these few memories of my brother are printed and subject to imperceptible but constant deterioration. Much of our reality is virtual and the digital image has replaced its physical counterpart with ease. Now more than ever, our window on the world is a screen, and yet the surface of the screen is too smooth to touch (even flatter and more immutable than a painting or a photograph, which are susceptible to change). A screen, with its oppressive obsolescence, is far more resistant to the slow erosion of time and the proliferation of images promises a seeming eternity, banal and deceptive.

Seeing by the sea

These are the thoughts that came to me in lockdown, in between the video calls and online projects that replaced my usual visits to the studio. From my flat in the landlocked city of Seville came the idea for a new artistic project titled *Nada que ver*, alongside the firm decision to move by the sea as soon as possible.

*[**TRANSLATORS' NOTE**: Nada que ver translates as both "nothing to see" and "nothing to do with" as in, X has nothing to do with Y; it is something completely different.]*

But first I needed to finish a half-completed painting that I had been copying from its original in my city's Fine Arts museum when the pandemic broke out. It was an oil painting by Rafael Martínez Díaz, titled "Escena de familia" (Family scene) and painted in 1954, when Spain was still being ravished by the hunger and scarcity of the post-war period. It is also known as "Niñas pobres" (Poor girls).

Figure 5: Escena de familia (Martínez Díaz 1954)

Figure 6: Detail of my copy of *Escena de familia* (Jiménez Muñoz 2020b*)*

For several years I had been captivated by the domestic desolation in which the four young girls in the painting are depicted. In a way, they provoked in me an uneasiness similar to that of "my" sculpture of a helpless girl, as well as the sense of grief I felt in confinement. In August 2020, I was able to resume my work at the museum. There were hardly any visitors, so I was allowed to work full time. The intensity of the effort that I put in was no doubt related to the strange circumstances. Everything seemed extreme. The copy underwent considerable changes, especially in the confines of the scene: the window and the view. After such an intense period of isolation at home, this domestic *Family Scene* around the table had acquired other meanings.

Once the work in the museum was finished, I moved with my son to the outskirts of a coastal town in Cádiz and began to develop my new project here. There are no shops or neighbours where we live, but we can see the beach from our windows and the sound of the waves accompanies our days. I have set up a workspace in the living room and given up on the idea of renting a studio outside the house because of what might happen. The shrinking of our lives to domestic and virtual space has been balanced somewhat by the beloved horizon, a line which is at once a place of union with Nature and the contour of our own limitations. Living in a place of immutable desolation demands an abandonment of the self. Nothing will ever be the same again, even if the rolling of the waves seems constant. Placed in this limiting situation, we see *all our things* mutate; sometimes slowly, sometimes quickly. There are no certainties. In a kind of abandonment, our vulnerability remains expectant and open to any possibility. Sometimes someone passes by, windsurfing or skysurfing.

This is how we live now. This liminal situation, with its unaccustomed uncertainty, forces us to wait, placates us and tempers us as never before.

Video artwork: ORILLA I (SHORE I) (Jiménez Muñoz 2020c)

Video artwork: 'ORILLA II' (SHORE II) (Jiménez Muñoz 2020d)

Figure 7: Orilla II (Jiménez Muñoz 2020d)

We have become voyeurs of our greatest "failure" - uncertainty.

Just like after the war, just like in the “Escena de familia” painting, the domestic world to which women have historically been relegated is the most faithful reflection of poverty, absence, despondency and, at the same time, the safest refuge. I began to "remove" from the painting its least mutable parts: the table, the jug, the plate, the "stage", the home of that family that perished (the girls, their food...). I then brought this scene to the sea. As in all catastrophes, a strange setting was exposed to the slow change of nature. For the last piece in this exhibition, I shot another video in an attempt to represent the helplessness and desolation of our homes, sometimes inhabited by just a single, solitary diner:

Figure 8: All that remains (Jiménez Muñoz 2020a)

Video artwork: ORILLA III (SHORE III) (Jiménez Muñoz 2020e)

Figure 9: Still from *Orilla III* (Jiménez Muñoz 2020e)

List of Illustrations and Artworks

Jiménez Muñoz, C. (2006). [photograph]. *The boy*. Artist's own private collection.

(2019a). [oil painting]. *Mar I*. Exhibited Camas: Sala Nuevo Ateneo. Oil, resin and sand on canvas. 195x195.

(2019b). [photograph]. *Photographic Memory*. Artist's own private collection.

(2019c). [photograph]. View of exhibition *Lo insondable*. Artist's own private collection.

(2020a). [photograph]. *All that remains*. Artist's own private collection.

(2020b). [photograph]. Detail of my copy of *Escena de familia*. Artist's own private collection.

(2020c). [online video]. *Orilla I*. Available at: https://youtu.be/w9yB2IRV2rM

(2020d). [online video]. *Orilla II*. Available at: https://www.youtube.com/watch?v=C8LI60WOG0Q&t=87sist's

(2020e) [online video]. *Orilla III* Available at: https://youtu.be/LMqovG0l-HA

Martínez Díaz, M. (1954). [oil painting]. *Escena de familia*. Sevilla: Bellas Artes. Oil on canvas. 130x195. Artist's own photograph.

About Concha

Concha Jiménez was born in Seville, where she has lived much of her life and where she graduated in Fine Arts in 2004 having specialised in Printmaking and Graphic Design. Although her interests range from installation to photography, poetry, literature, sculpture and illustration, her main focus has always been (and remains) painting.

While her early works stand out for their expressiveness (especially in portraits), in recent years she has taken a more austere, conscious and contained direction in which a strong personal involvement is still present.

She belongs to UAVA (Union of Visual Artists of Andalusia), and MAV (Association of Women in Visual Arts).

Concha's upcoming solo exhibition, NADA QUE VER, will take place at the Sala Alfonso X in El Puerto de Santa María (Cádiz, Spain), from 7th-28th August, 2021

You can find out more about Concha and her work on her website or send her an email at conchajimenezmunoz@gmail.com

Just writing

Emma Langman

If you had asked me two years ago to write this, I would have put the pillow back over my head.

Just hiding.

I was asleep for more hours than I was awake. School run in my pyjamas. Kitchen in chaos.

Just surviving.

My LinkedIn page shows a successful woman. Smiling and professional, and sometimes called:

"Just inspiring".

Now here I was scraping by on benefits and wondering how this had all happened. My career and health gone.

Just bewildering.

Referred to social services for 'Early Help', and on the waiting list for counselling.

Just waiting.

My church arranged person-centred counselling. It was enough to keep my head from the walls.

Just howling.

I told the counsellor I hadn't done my tax return. I thought 'they' would take my children.

Just terrifying.

One afternoon I walked through the churchyard and hid in the porch. Praying for it to stop.

Just quitting.

Hands clutching my phone. Trying to work out who might answer my distress call.

Just scrolling.

My friend picked up and their family wrapped around me. The children's father came to them for a week.

Just sleeping.

The dog bounded around, far too strong for me. A human sled across the snow, scratched and embarrassed.

Just hurting.

Sat in a room full of people 'like me' as we were taught the tools of CBT. I wanted to scream.

Just angry.

I tried everything I could think of; Job hunting, NLP, Coaching. I even counted out my blessings.

Just nothing.

Met a man who was born with his stomach outside - just like me. Now he's a professional comedian.
Just laughing.

Talked to the Archbishop's daughter. Promised her that we would both be OK.
Just praying.

Went to the doctor and they changed my medication. Side effects abated.
Just awakening.

A walk by the school. I could process sound, smell or sight. Only one at a time.
Just overwhelming.

Started off for home. My feet turned to lead. I could hardly walk.
Just stumbling.

Referred again. A high priority case. Waiting list of years. Nobody called.
Just disappearing.

Desperate now. Walked out of A&E because the people in there are REALLY ill.
Just despairing.

The nurse at the counter asked me what it was I wanted. I answered.
Just dying.

She broke the rules, made the doctor see me. He made me promise to live to see the next Star Wars movie.
Just watching.

Inquests are bad for the bowels, he said. Don't make me have to explain it to your children.
Just promising.

My GP reviewed my case. At last they helped me understand the root cause was life.
Just acknowledging.

People told me to let the trauma go. They didn't understand what it does to you.
Just invading.

An alien visitation. Pain, searing through every cell and sinew of my soul.
Just darkening.

Embarrassed friends stepped in. Concerned that they would overstep the line.
Just polite-ning.

Others shared the mess. The journey they had taken.
Just talking.

I called the therapist. Explained the situation. Went to visit.
Just exploring.

He told me that you can't let it go. It holds you. But he would walk with me. I wouldn't be alone.
Just escaping.

Back to the incubator. The door of my brother's room. The operating table. So much loss.
Just excruciating.

Working through the pain. Experiencing it. Acknowledging it. Climbing out of the pool.
Just feeling.

A coffee and some cake with my boyfriend after each session.
Just grounding.

People said that if I made it public it would limit my career. But I knew what that would be.
Just lying.

And now I am here. Mothering. Earning. Enjoying. Back to work with kind clients.
Just emerging.

And because it might help others. That's why I said yes. So here I am, writing this for you.
Just writing.

A note about Emma's photo

Emma's photograph is a poignant illustration of how 'surviving' may have many faces. She writes:

> "I was very ill at the time, and yet had managed to win some work in Malta, run to the shops when the plane had lost my case, and delivered something vaguely coherent. It's a moment to be proud of."

About Emma

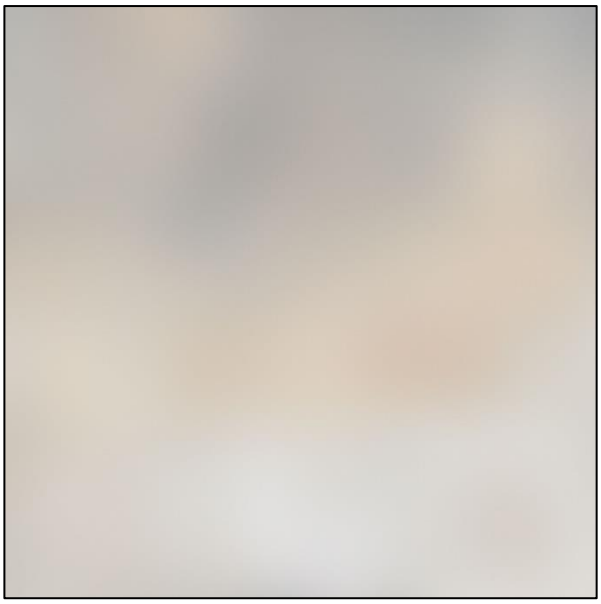
Emma Langman lives in North West England where she works at BakerFish as a Change Optician. She specialises in helping people to see, grow and do work differently. She lives with three fantastic children, a patient and kind boyfriend and a German Shepherd called Honey. Her remaining life goal is to create a post-hospice-holiday-house, which helps families to hurt, heal and hope after the loss of a child.

Contact: emmalangman@gmail.com

Sample

A Sound Piece

Aniela Piasecka



Title of Piece: Sample

Artist's Statement

Sample is a voiceover sound work, a short meditation on biomedical understandings of the body, choreographic concepts, and personal experiences of chronic illness. It is also an invitation to step back from the hyperdrive of visual online content; to listen to your own body.

Inspired by the world of ASMR and motivated by a desire to explore the intimate potential of sound, the work engages in choreographic, linguistic, and aural expression, weaving a nuanced and ever-changing textural web, stemming from a sense-based appreciation of the body.

Suggestions for experiencing the full power of this work

Please make yourself as comfortable as possible, lying down or sitting, you may wish to use cushions or blankets to stay cosy, or even set yourself up in bed, feel free to honour any movement that arises. The immersive format of the work is designed to provoke physiological reactions. If you are uncomfortable at any point, please feel free to pause the audio and take a break or stop it at any time. The use of headphones is recommended for the best listening experience, but loudspeakers can also work well. Please close your eyes after pressing play if you feel comfortable to do so.

Acknowledgements

Sound design, mixing and image by Ailie Ormston. Supported by Dance 4.

Artist portrait photo by Michael Cradock.

About Aniela

Aniela Piasecka is a dance artist whose work tends towards the collective. Aside from her work with Olivia Norris, Isabel Palmstierna, and Paloma Proudfoot for the group STASIS, she also collaborates frequently with film-maker Daniel Cook; curator, artist, and DJ Francis Dosoo; and musician Ailie Ormston.

In both collaboration and solo research, a continuous will to explore the link between affect and space underpins Aniela's work, coupled with an ongoing curiosity regarding how different environments impact on, and are impacted by, the body. Her outputs combine choreography, text, film, sound, and installation; colliding between visual art contexts (Glasgow International, Edinburgh Sculpture Workshop and the Irish Museum of Modern Art) and performance contexts (Dance International Glasgow, The Place).

Contact: anielapiasecka@hotmail.com

The Other Everything
(An extract)

Jonathan Massey

The Characters:

AUSTIN DANE *seventies*

MARTHA SISSAY *mid-thirties, a social worker*

Notes.

-- means an interruption from the next line.

... at the end of a speech means it trails off. On its own it indicates a pressure, expectation or desire to speak.

the lack of a full stop on a line indicates the next line follows directly on.

ONE

A surge of gulls.

It's late afternoon in the small downstairs living room of an unkempt house near the seaside.

The walls are stacked with old cardboard boxes; Some have names written on or notes attached, they spill over with aged newspapers and varying books.

There is an open partition leading to a kitchen on the left, and a front door not quite center. The steps leading upstairs are on the right, they are cleaner than the rest of the carpet. The whole place is, in a word - unsanitary.

AUSTIN is barely distinguishable from the mess that surrounds him. Small, gaunt, and splattered with varied cuts and bruises, he sits astride a ratty wheelchair with one leg in plaster. His warlike stare piercing hard through a window in place of an audience.

AUSTIN.

They don't f**k around.

MARTHA enters from the kitchen and adjusts an official looking lanyard around her neck. Not on her usual game, she's made her best attempt to appear professional, her damp hair is up and jacket removed; There is an obvious stain on it she's tried to mop out with water. A file under her arm and notepad in hand, she steals moments to glance around during the following...

MARTHA.

Sorry, Mr. Dane?

AUSTIN.

The birds. I mean, they're monogamous, you know? Seagulls.

MARTHA.

You've read them SPCA guides then?

AUSTIN.

Do you know the divorce rate amongst seagulls?

MARTHA.

They divorce?

AUSTIN.

Twenty five percent! That's seventeen percent lower than the UK average and seventy five percent lower than mine.

MARTHA.

I'm sorry, you've lost me.

AUSTIN.

Those are facts, new facts, ones I didn't know last week, and can tell you about now. Ones that nobody knows, because nobody normal gives a rat's a*se about f**king seagulls.

MARTHA.

Laws can seem very arbitrary can't they?

AUSTIN.

My name is Austin Dane. I'm seventy-one years old. I was a journalist for--

MARTHA.

Mr. Dane--

AUSTIN.

--fifty-two years and now I'm bored out of my bl**dy mind. But not in that way! You listening, Mary?

MARTHA.

Martha. That's not--

AUSTIN.

--See! I've told you. My head is fine. I've relied on it for years.

MARTHA.

Nothing's been decided. It's your safety being considered. Social Services have followed up today on recommendation from your doctor and the police, The concerns after--

AUSTIN.

--A big fat lot of nothing. A mishap. A snafu. I had one day. A single day. One day that – that I can't. I couldn't bl**dy. I can't. One day...

MARTHA.

One day in which the authorities had to get involved. I'm just checking in. Now, I've had a chat with your neighbours and--

AUSTIN.

--Junkies.

MARTHA.

And they've said that was maybe not the first time you've had a bit of a funny turn. Do you know what they could be talking about?

AUSTIN.

They're skag-heads. They don't know what they're seeing.

MARTHA.

Alright. Well, could you take me through your routines, maybe? I just want to get an image of your day to day. We'll just start with a cup of tea? I'll let you make them

AUSTIN.

I – I don't need this. I'm an adult. I don't need any of this! Denying my liberty!

MARTHA.

Just assessing it. You understand, I'm not here to stop you doing anything

AUSTIN.

Good.

He gestures to the boxes.

It's organised. I know where everything is...

AUSTIN looks MARTHA up and down.

And frankly speaking, you don't look like you should be sorting anyone out.

AUSTIN studies her closer.

I've seen your face. Were you working at the courts?

MARTHA.

No, I've been referred for my professional opinion, as I said on the phone, to see how you can best be helped

AUSTIN.

Government all the same

MARTHA.

If you like

AUSTIN.

I don't.

A moment. Loud caws. AUSTIN looks back to the window. MARTHA thumbs through the file.

MARTHA.

As your condition worsens, your GP says there is a high risk of more episodes. More instances where you could end up hurting yourself and – uh – others like this. It is up to you, Mr. Dane, but for everyone's peace of mind--

AUSTIN.

--Whose peace of mind? What about mine? Or what! Or what... you think, you think, I'll just forget about it?

MARTHA hides in her notebook.

Gulls scatter outside.

(sighs) Did you know they were protected?

MARTHA.

No. I'll admit it was a surprise

AUSTIN.

See, it could have happened to anyone.

MARTHA.

Not anyone--

AUSTIN.

--Not anyone smashes a gull into a bus stop, sure.

MARTHA.

What do you remember?

AUSTIN.

That the bus is the only way to get my shopping done

MARTHA.

That's not what I--

AUSTIN.

You seen the town now? It's tragic! Boarded shop fronts and everywhere: closing down - must go now sales. If they aren't closed they're selling something bright plastic. You know? Used to be buckets and spades, now it's phone cases, you can't dig in the sand with phone cases

MARTHA.

...

AUSTIN.

Now, I like a bet, but why do we need twenty bookies, aye? This town used to be a real destination! People would come from all over the country for their holidays. The stations got big columns! Corinthian! and those gulls, they've grown muscular. Bruisers, all of them. Taken over.

Why is everyone eating at the McDonald's?

MARTHA.

Can we talk about the bus?

AUSTIN.

It's all covered in bird mess now. All of it. They've shut up the post office. The offy. Even the Tesco, and they shut the old grocers! Boarded it. Now, how am I supposed to get this... to this... retail park they've built?

MARTHA.

Were you angry?

AUSTIN.

At?

MARTHA.

The gull?

AUSTIN.

...

MARTHA.

So, to your knowledge this is the first time that's happened?

AUSTIN.

Wouldn't know, would I? But I'm not a child, and I do know me and my head are perfectly capable of living here unassisted, thank you. Good bye.

AUSTIN wheels himself toward the door.

MARTHA.

It could help your case. I can't promise but --

AUSTIN stops. He turns to face MARTHA.

AUSTIN.

It could help my case? It's either you lot take me out of here and plonk me in some home or--

MARTHA.

--I want to help. We're helping you explore options--

AUSTIN.

--But it's where you're going. Or – Or! The courts fine me under the Wildlife and Countryside Act of 1981, something else I also learned about recently. It's ridiculous money, but I'd rather be inhumane than an invalid. Satisfied, Mary?

MARTHA.

Martha.

AUSTIN.

What?

MARTHA.

My name is Martha. Martha Sissay.

MARTHA begins to write in her notebook.

AUSTIN.

Don't write that down. That doesn't mean any – wait.

A look has come over AUSTIN.

What did you say your name was again?

Moments of separate recognition.

MARTHA walks toward the front door.

MARTHA.

I'll put your comments in my report, Mr. Dane. My office will be in touch.

AUSTIN.

WAIT!

AUSTIN wheels over to a nearby box. It's marked: Stories.

Wait. Please.

AUSTIN is sorting through newspapers.

MARTHA goes to open the door. She struggles with the deadlock.

I'll talk to you!

The door opens, but MARTHA stops.

MARTHA.

If you need anything further I can refer you to one of my colleagues. I hope your leg feels better.

MARTHA sees AUSTIN is holding up a collection of newspaper clippings.

AUSTIN.

I said I knew your face.

MARTHA supports herself in the frame of the open door. A wobble.

AUSTIN keeps a gentle distance.

I – I kept everything I ever wrote and yours is the only one I've regretted.

MARTHA.

(pointed) The only one?

AUSTIN.

I wrote a lot of toss, I admit. But I know the harm I did you.

MARTHA.

I'm at work right now, Mr. Dane. I'm working. Whatever you wrote has nothing to do with me.

AUSTIN points to a picture on one of the clippings.

AUSTIN.

But this is you?

MARTHA.

Goodbye.

beat.

AUSTIN.

(desperate) I need your help.

MARTHA.

(shaking her head) This is a conflict of interest now.

AUSTIN.

You'd never met me. You don't know me.

MARTHA.

I wouldn't be impartial.

AUSTIN.

I don't want you to be. Crucify me for all I care.

A moment. MARTHA looks like she has the nails ready.

MARTHA.

There's professional practice. It's unethical.

AUSTIN.

That never stopped me.

beat.

MARTHA takes off her lanyard.

MARTHA.

Imagine. Imagine for one moment that I even entertained this idea. Do you think for a second that I wouldn't f**king throttle you before any more of your vile, f**king vile, words could come out? Why do you even think I would listen to anything more you have to say?

AUSTIN.

Because you're still doing this job. Because you're still here now.

MARTHA closes the front door.

Just hearing gulls used to conjure the old town, the heyday. Family trips. Car rides. Ice cream. Heat. Sun, or lack of. Tastes. Of salt. Of waves. I could treasure those. I could see my ex-wife. My little girl. Now they're something foggy, they've taken on a cruelness - I try to imagine specifics and I can't. I hear them now and I think of where I know you parked your car... I think of those sounds you would have heard. I think of...

AUSTIN gestures to her clothes.

I take it you've got your own kids now.

MARTHA is barely holding herself back.

MARTHA.

No. No. We are not talking about me. You can spit out what you have to say.

AUSTIN.

I'm scared. I'm scared that sometimes I realise it's suddenly five AM and I don't know where I am. I'm scared that I find myself there. Or going there. I'm scared that once nothing else exists, that image still will. That I won't know anything, but I will know I caused you to be there.

MARTHA has gone very still. Coiled.

MARTHA.

Is that an apology? What? What do you want?

AUSTIN.

I wrote –

MARTHA.

Unforgivable things. Things that. About things that were out of my control. I was doing my best. My best to help...

AUSTIN.

Sophie.

MARTHA.

You think I've forgotten her? I had my misgivings about that home. I had my doubts about that family. But I never thought in a million... I saw kids like her every day. You wanted to sell a story. You invaded my life. You wanted to make something out of me that was, yes, unethical: " Where is --

AUSTIN.

"Where is the compassion?"

MARTHA.

Where is her compassion? You said. Where is her compassion. That's a fact. What was I supposed to do?

I had to drive her to the only home that could take her for just three days – two hours away. To someone she didn't know, to another scary place she'd never been in. She couldn't process why no one wanted her... I was the one bit of permanence in her life - Me! and I thought as I did every time: I could just take you for those days, I'm ten minutes away. She could've stayed in my spare room. But of course, I couldn't do that.

MARTHA.

I could have told her: I'm sorry you're upset, I get it! This system stinks, doesn't it? I'm sorry this is happening to you - but we allow it to!

But what message does that give anyone? What would that teach her? That we adults can't fight it. That none of us can. That none of us can do anything about it. So, I left her there and as soon as she couldn't see me I pulled over and cried. That's compassion.

Acknowledgements

I'd like to thank my critical friend and constant source of inspiration **Beth Davis** as well as my teacher, playwright **Ben Musgrave**

About Jonathan

Jonathan Massey is currently studying scriptwriting with The University of East Anglia (UEA) and previously spent time as an actor with The Oxford School of Drama. Originally from New Zealand, he has been involved in various film and theatre projects in the UK for just over ten years. His most recent production, a stage adaptation of *Just William's Luck*, premiered at Underbelly as part of the Edinburgh Festival Fringe in 2017, and went on to tour theatres across the UK and Europe. *The Other Everything* is the beginning of a current work in progress, and Jonathan greatly looks forward to seeing where these characters go from here…

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Stories of not recovering

Beth interviews Stephen about 'Green Icing'

Beth Davis and Stephen Musk

This article draws on a series of recent conversations between Beth and her neighbour Stephen regarding his memoir, Green Icing (Musk, in press), in which he reflects on living with mental ill-health and on 40 years' experience of psychiatric services and community care. They argue that whilst defining recovery as an absence of illness is applicable in some contexts, for many people maintaining the ability to "navigate society" (Amrani, 2021, 11:50) should be supported and recognised as a success in itself.

Keywords

mental health, illness, maintenance models, recovery, memoir, writing, voice, power, interview, social work, navigating social norms, sanctuary

An introduction to Stephen by Beth

Stephen (a 60-year-old writer and retiree of 25 years) and myself (a 27-year-old student close to completing a master's degree in Social Work) first became acquainted in the pandemic summer of 2020 whilst volunteering at our local foodbank. It was a pleasure getting to know more of my neighbours outside of my generational bubble, and discovering the impressive skill and energy going into local community organisation and activism. It was a summer of contrasts: evidently, Covid brought with it a devastating emotional impact society-wide, especially for those who had lost friends and family, were under financial stress, or had plans and dreams dashed.

Through the foodbank we saw the discriminatory effects of the lockdown on young families, people with disabilities, and those struggling with addictions and poor physical and mental health. But as was noted at the time (Baker, 2020), wholesale, rapid change in society's structures and rules also brought unexpected opportunities for some. For me, it was the first time in my life, certainly as an adult, that government messaging was telling me to prioritise my health over financial pursuits. For Stephen, having experienced over 45 years of managing with the ups and downs of severe depression and anxiety, the pandemic felt like the first time we were facing a common adversary all "in the same boat." Stephen enjoyed lockdown, saying that it "excused myself from needing to play the social game" (Musk, 2021). This is our first example of how even a catastrophe as universal as the Covid outbreak can be experienced differently by everyone.

When I first met Stephen, he told me that he wasn't always very good at keeping up with conversation. I must say that I have never found this to be true: I find Stephen to be cheery and sociable, and conversation flows. I like to think that we learn something from each other every time and we enjoy the neighbourliness, although I will say that I can't always follow Stephen's cricket references. Stephen is, and always has been, a great

cricket fan, and I don't at all doubt that he is the most knowledgeable person in the world on the history of the Norfolk county cricket scene. I admire Stephen for persevering, but unfortunately I have an appalling knowledge of the sport and any such references tend to be met with a blank. Sorry Stephen!

Our encounters need never be awkward since we have common ground. We share a dislike for Tory politics and feelings of guilt when shopping in Tesco instead of our local Co-op; and as a patient and client of mental health services for over 40 years, Stephen is involved with the delivery of my Social Work degree as a member of the 'service user and carer' group. Stephen has taken a great interest in my studies, asking me about the course and enquiring after members of staff. In his view, the most useful task of social workers is to "fill out forms correctly" (Musk, 2021). I will hold this in mind when bogged down by bureaucracy, reminding myself that whilst filling in forms may not feel very revolutionary it is a crucial part of advocacy, promoting welfare rights and helping people to retain independence. Stephen has been supportive throughout my learning journey – to the extent of mapping out a career for me! – which I thank him for.

When I was invited to contribute to this edition of the journal, I immediately felt that there was a strong link between the theme of 'living with catastrophe' and social work as experienced both by professionals and by people who need social work services. Social work education debates how to best equip people to work with the emotions of crisis (Taylor, 2016). Social work practice endeavours to support people through moments of crisis or trauma, and to minimise the potential for these personal 'catastrophes' to negatively impact on their long-term wellbeing (Bell, 2016). But we have to continually interrogate our assumptions of what it means to live well, as attitudes which consider recovery to mean 'fixing' people to a model normal are at risk of being discriminatory, oppressive and harmful. For many people, maintaining the ability to "navigate society" (Amrani, 2021, 11:50) needs to be supported and recognised as a success in itself. Stephen's memoir explores what this means in real life experience, beyond academic rhetoric; in his own words, "the purpose of this book is to express my particular stories of 'not recovering' over more than 40 years" (Musk, in press). It has been a privilege to interview him for this journal, drawing on our conversations over the months of the pandemic, and I hope to do his writing and his experiences justice.

Stephen on his Memoirs

> Unfortunately, I have always suffered from psychiatric ill health. In my early years I hid this remarkably effectively – as psychiatrists would say 'I presented well' […]. And so, here I am in my middle fifties – a prolific writer and a life-long loony. (extract from *Green Icing,* Musk, in press)

Stephen explains that his friends encouraged him to see his story as one worth telling: "I wouldn't have thought to write it myself" (Musk, 2021). Written over three years, *Green Icing* covers experiences from childhood; a degree and then PhD in Cell Biology at Cambridge; his early career building to crisis point when he was first supported by mental health services at the age of 25; and his work and recent falling-out with the Labour Party (over Brexit, a cliff-hanger on which the volume ends). Stephen reflects on experiences which have been "intensely distressing to downright disturbing" including alcohol addiction (Musk, in press). It is therefore all the braver that his intention from the start has been to write these memoirs not only for his personal journey, but also to share as a published book.

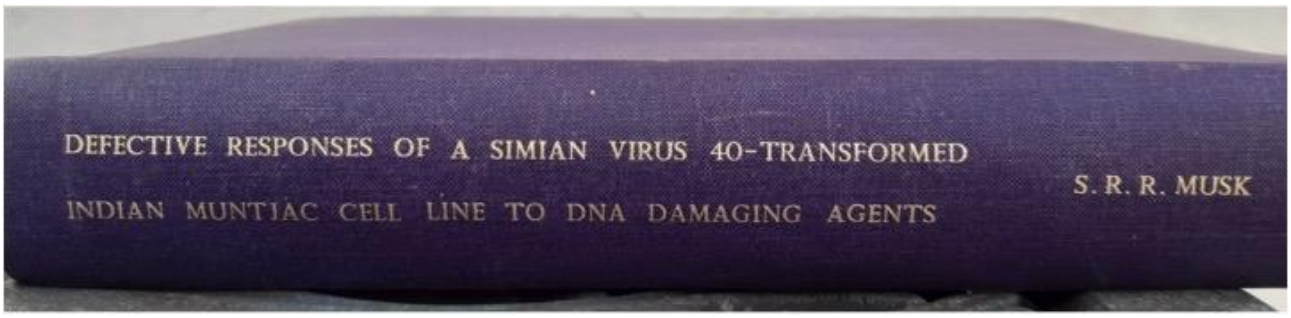

Figure 1: View of Stephen's book Defective Responses of a Simian Virus (Davis 2021b)

The considered reflection that Stephen provides, along with the clarity of his writing, appears to express an underlying quiet confidence and a point of resolution and acceptance. But this doesn't mean it is any easier to talk about these personal and otherwise private experiences. He says that, understandably, *"sharing is still a little hard to do"* (Musk, 2021).

Stephen states early on in the memoir that loneliness has been a persistent feeling throughout his life. He writes: *"the fact that I became severely ill before reaching adulthood means that I genuinely believe that I have no idea how to behave like an autonomous, coherent, caring human being"* (Musk, in press).

Yet what strikes me about his writing is the lively character description of friends, acquaintances, and passers-by, a skill which brings the stories off the page. I put it to Stephen that this appears to depict diverse social interactions, full of empathic understanding of others' experiences. He responds that this attention to detail reflects a need to reach out and connect with others, an often desperate feeling. What is clear is that, as for all of us, relationships and meaningful interaction are important, and other people shape how we experience crisis and our ability to cope.

Maintenance vs. Recovery

Through my social work education, I am somewhat familiar with different models of 'intervention' and treatment that are proposed for working with people who need help from professional services, as well as the theory and evidence behind them. Yet I was struck by the accessible way in which Stephen outlines the Maintenance and Recovery Models of mental health support, directly linking the impact of these different approaches to the lives of acquaintances and friends. By demonstrating how these different models affected the delivery of the local drop-in service, and thereby the livelihoods of fellow attendees, Stephen clearly expresses key contemporary debates in social policy about how to support people living through 'catastrophe' and crisis.

Stephen would like to see much more of a Maintenance Model of service delivery, one which acknowledges that, for some people, complete 'recovery' from mental illness is not a reality. Services that provide consistent social support with housing, health, finances and occupation, are known to reduce the likelihood of a return to crisis point and the need to attend hospital. This approach recognises how to best 'live with' the presence of mental ill-health rather than the short-sighted, perhaps unattainable 'living without'.

In contrast, Stephen writes in his book:

> The indiscriminate application of the Recovery Model to those with severe and chronic mental health problems causes much distress to many of those who are caught up in the health system. Some are given rosy pictures of their futures, only to have those hopes dashed, whilst others, with more realistic views of their futures, wish only for support to help them survive in the community and object strongly to being told that their goal should be to recover, with the final proof of that recovery being defined by the [Department for Work and Pensions] as the ability to hold down a full time job stocking shelves in a local supermarket (Musk, in press).

Stephen reflects that he has benefitted from certain recovery-based approaches such as time-limited series of Cognitive Behavioural Therapy (CBT). In his experience, this has been effective in overcoming specific, tangible, moments of getting 'stuck' in a particularly unhelpful habit or distressing thought pattern. CBT appears to have a strong evidence base which has attracted funding and investment from the government (NHS, 2019). The problem with the Maintenance Model in a period of extended austerity and increasingly minimalist and digitised period of governance is, as Stephen says, that "funders can't see a tangible target" (Musk, 2021). But people using these services, alongside professionals, academics and communities, provide evidence-through-experience of the positive effects of accessible face-to-face support such as the drop-in service that Stephen attends. At this point in our discussion Stephen is reminded of a friend's comments, initially made in reference to his interest in writing about cricket: to be effective, treatment is *"not about the product, it's the process"* (Musk, 2021).

The therapeutic effect of writing

I am interested in how Stephen found the process of writing the book. Does he consider writing therapeutic? "Absolutely!" It helped him, for example, to reflect on his relationship with his parents (for the better). Stephen feels that writing makes up for "an inability to express myself coherently face-to-face… I'm better expressing myself on paper. I'm not a very quick thinker when it comes to talking" (Musk, 2021). The language we use gives meaning to our experiences, and having the power to express the truth of what we feel can help us to regain or maintain a sense of control and ability to cope (Johnson, 1973; Howe, 2009). But Stephen explains that it is not just the thought process of writing he finds useful, but the activity itself: researching and writing about cricket is an enthusiastic hobby which he considers an effective coping mechanism. Writing about cricket is a positive distraction from the "not-helpful" thoughts brought about by re-visiting life experiences for the memoir (Musk, 2021), and so the book would not have been written without a healthy balance of the two.

I am intrigued as to how Stephen has engaged with and developed his writing skill throughout his life. I find this particularly interesting as a younger person whose writing experiences tend only to be for study or for work, rarely even via social media. He explains that his career in academia came to an end in his thirties as the anxiety of publishing peer-reviewed research became too painful and debilitating. He can still experience some of this anxiety now when worried if a finished piece is not good enough to be published, or not referenced correctly (Stephen reminds me that his academic work required two references to each sentence,

and that high standard has stuck with him). He was worried that such a factual writing style would not be

suitable for the literary demands of a memoir, but drew confidence from his cricket books which, in recounting history, exercised narrative skill. Stephen also found security in the uniquely personal nature of memoir; he would otherwise worry that he had nothing new to say.

> But then things began to improve. I joined a group of cricket statisticians researching very obscure matches and was inspired to write my first cricket book. This came out in 2010 and has been followed by six more books. When I submitted a draft of the first half of that debut book to the prospective editor the voice of inadequacy did return to torment me. Mercifully, it was not nearly as fierce as it had been at the IFR [Institute of Food Research] and I am now a confident author. This is partly because I choose subjects so arcane that virtually nobody is in any position to contradict me! (Musk, in press)

Figure 2: A selection of Stephen's published works on cricket (Davis 2021a)

Voice and power

Stephen's memoir is structured as a series of vignettes, the intention being that they can be read in any order (other than the introduction and final four chapters, for which he explains his reasoning). Stephen drew inspiration from his favourite author B. S. Johnson, who settled upon this structure for his experimental novel *The Unfortunates* (1969). Stephen explains to the reader that he felt "forced" to write in a non-linear manner after struggling to construct a chronological story of his life (Musk, in press), as perhaps is more traditional in autobiographical work. Understanding our experiences as story can give us a sense of agency and purpose, and can help us to make sense of life and our place in it (McAdams, 1993). But Stephen quotes B. S. Johnson to express a different perspective that he identifies with:

> Life does not tell stories. Life is chaotic, fluid, random; it leaves myriads of ends untied, untidily. Writers can extract a story from life only by strict, close selection, and this must mean falsification. Telling stories really is telling lies. (Johnson, 1973, p.14)

This made sense to me: to shoehorn experiences into a developing story of meaningful, connected events may make accurately expressing distinct facts and feelings impossible, and certainly ingenuine. In many ways, narrative theories also recognise the truth in this: in order to create the 'personal myths' which sustain us, narrative has to be generated (McAdams, 1993). But I find that Stephen's writing does express a strong sense of connection over time, place, and people, despite not being strictly chronological, which is perhaps a result of this decision not to sacrifice too many truths for a fairy tale.

Readers will find that Stephen sometimes contradicts his own perspectives from chapter to chapter, demonstrating how multiple truths can be held at once. Stephen and I discuss the similarities with another of Johnson's novels, *House Mother Normal* (1971) in which an account of an evening in a care home for older people is retold in the distinct voices of several of the residents and the staff member in charge. Johnson used this form to demonstrate how there cannot be a universal understanding of what is 'normal' or 'abnormal,' and how we cannot assume that those who have authority derived from their social status are better placed to make this judgement (such as the 'house mother'). I make parallels with the problems of measuring outcomes for mental health services: who can decide what recovery means for an individual, and who does society give the power to do so?

Stephen shared with me that his emotional health can decline very rapidly, sometimes due to triggers he recognises and sometimes without warning. On many occasions he has requested to be admitted to a psychiatric hospital, a place that people may consider undesirable because of associated stigma and lack of liberty. However, being able to self-define moments of crisis through self-referral in this way appears in Stephen's account as not only empowering, but life-saving. What can be more humiliating and deeply troubling is the wait often endured to be granted access to a service that you not only want but need, and the uncertainty around whether this will be available to you when at your most vulnerable.

People living with periods of mental illness have expressed that:

> In moments of crisis, they turn to services not just for a diagnosis or for medical care, or support in developing resources and capabilities, but for sanctuary, to alleviate suffering, to help make sense of what has happened, to grieve, to recover voice, to rekindle hope, to address the stigma that comes with a mental health diagnosis, and perhaps many other important things besides. (Collins, 2019, p.28)

For further insight into the realities of modern psychiatric in-patient care in the UK, I would recommend watching Stacey Dooley's documentaries *On the Psych Ward* (2020) and *Back on the Psych Ward* (2021), which I admire for their push to break down barriers to public understanding.

My response as a reader of Stephen's memoir

I took some time to think about the right words to convey my experience of reading Stephen's memoir. I found the writing style a 'pleasure' to read, but this does not appropriately acknowledge the distress and profoundly personal experiences that Stephen reflects upon. I settled on 'engaging' to express how the memoir kept me reading page to page, drawn by its evident honesty, thoughtfulness and skill in depicting personalities and feelings, and I feel privileged to have been able to read these accounts. In discussion with Stephen, he affirms that it is not meant to be 'enjoyed'; his intention is that it is 'interesting,' and he also welcomes its use for academic and literary research.

I also felt a need to tell Stephen "I'm sorry" that he has often felt so painfully low. There was little that I could personally apologise for, but this phrase seemed apt to express my empathy as appropriate without

pretending to understand his full experience. This was followed by the feeling that I needed to ask how I, and others in 'helping' occupations, could best support people living with enduring mental ill-health. I suppose that this came from a place of professional anxiety, as a trainee social worker, that I should 'listen to experts-by-experience' and display competency in intervention and support. Ironically, linking back to our criticism of recovery-dominated services, this question assumed that Stephen must have written the book for a purpose in addition to its process.

Stephen's reply quickly put an end to my self-indulgent train of thought: "re-open the long-stay wards and put me in there!" he asserted, explaining that he likes the structure and safety that this would bring. "We need care in the community… but we have despair in the community" he continued (Musk, 2021), referring to the impact of cuts to social care and health funding which have been inflicted under the guise of increased independence and personalisation in adult social care. This re-emphasised to me how therapies which are focused on individual rehabilitation can only go so far to address the causes of distress, and that what will make the greatest difference for 'service users' are campaigns for fundamental economic and political changes within our social structures.

As Stephen writes:

> I often tell people that I would have been much happier if I'd have been able to spend my entire life as a resident in an old fashioned psychiatric hospital. I don't do this to raise a laugh, to show off exactly how compromised I am, or to wallow in self-pity. I do this because I genuinely believe that I would be far more comfortable in full-time care. (Musk, in press).

There is so much more to say, for which I redirect readers to Stephen's book. It is a unique and comprehensive first-person account and reflection on his life experiences, all the more valuable for its insight into enduring mental ill-health. I hope that I have managed to communicate some of this here, but ultimately it is Stephen's words which are the most impactful.

Stephen and I discussed a little about the 'medical' and 'social' models of understanding mental health and illness: whether changes are primarily caused by social pressures, expectations and oppression, or biological systems and genetics (for further discussion, see the interview by Amrani, 2021). There is an argument to be made for both approaches. Although Stephen advocates for continued and improved community support, being prescribed different medication within the last couple of years has enabled him to maintain better mental health and fend off the worst of the 'negative automatic thoughts.' This "fantastic" change may, in time, be recounted by Stephen in a second volume (Musk, 2021). However, this 'treatment' does not amount to recovery, and I end with Stephen's thoughts on living with and after the effects of crisis as an ongoing experience:

> My 'wonder' drug, sertraline, hasn't made me 'better' - it's just made me happier about being ill. 'Mad' doesn't have to rhyme with 'sad' all the time - it can also rhyme with 'glad'. (Musk, 2021)

Note

Stephen's memoir *Green Icing* is due to be self-published in September 2021 (book launch 25 September at Anteros Arts Foundation, Norwich). If you would be interested in purchasing a copy, please contact StephenMusk@outlook.com

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About Beth and Stephen

Beth Davis is an MA Social Work student at the University of East Anglia. From Norfolk, UK, she first studied languages and lived abroad before returning to pursue a career and learn more about local community development. Her interests include social work education and the power of 'peer' learning; local democracy and green politics. During lockdown she has spent far too much time on Twitter, but enjoys venturing out to admire local green spaces and support the businesses, voluntary projects, pubs and eateries that Norwich has to offer.

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Stephen Musk grew up in his beloved Norfolk. His mental health was shot before he took his O-levels, although he wasn't aware of it at the time. He eventually forced his way into Fulbourn Psychiatric Hospital at the age of 25 and has been in the mental health system for the past 35 years. Stephen has always regarded modern society as toxic and incompatible with sanity (whatever that might be). This view has not always been helpful but he has recently realised that poor mental health does not necessarily have to lead to unhappiness.

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Living on the edge with epilepsy

RajVinder Singh Gill

Keywords

Epilepsy, psychologist, communication, autism, learning disability, carer, children, young people, feelings, dance, performative, staff, talk, suicidal

Introduction

Illustrated by three vignettes, this article reflects the complexity and the privilege of working for an organisation such as Young Epilepsy that provides both residential care and education to children and young adults in school and in further education college. These children and young adults have complex education, care and medical needs that are often not met in the mainstream.

The task that Young Epilepsy has set for itself is to advocate on behalf of children and young people with epilepsy alongside other conditions such as learning disability, Autism and anxiety. As a psychologist I have the privilege of working closely with children, youth and staff at the organisation. I bring to my work a certain ethical and spiritual orientation influenced by my training in systemic practice and as an educational psychologist as well as by my life as a Sikh. One key aspect of this worldview is the belief that a person's mind is in conversation with those around them. The other is that what we do and how we act is shaped both by external dialogues with others and by our own mind via an internal dialogue. Words are constructed and negotiated in a dialogic exchange between participants. Their meanings are fixed within the context of the conversation. We are both influenced and informed by those around us just as we influence and inform them in how they are. In a sense, we act and behave as we do since we have certain beliefs about how the world works around us and through us.

In other words, my work with children and young people who have epilepsy and comorbid conditions is influenced by them and their carers. The work, relationships and interactions, thus, create certain emotional responses in me and others as professionals who are working with vulnerable children and young people. The following vignette about 'Ellie' might help illustrate this experience. Please note that Ellie and all the other names used in this article are fictitious and the presentations described are a complex amalgamation of different individuals but these descriptions have a certain truth about them.

Ellie's world of catastrophe

> Ellie is a young woman who has complex seizures alongside learning disabilities. She has few words, as most of her communication and talk is non-verbal. Her words and phrases can often be repetitive. They lack the meaningfulness that we might associate with conversation, yet they hold personal meaning for her. They invite the other person to speak to her and of her. People often respond to her utterances with words that appear to offer reassurance. Her epilepsy is uncontrolled, and a cycle may last for two weeks or even more. During such a cycle, amongst many smaller episodes of epilepsy, there will be a big event that will overwhelm her for a couple

> of days. The difference is noticed by those around her as she manages the small events without too much concern. However, when the big seizure is coming on, she will lunge out to the person nearest to her. It seems almost as if she is attempting to hold on to a straw for dear life in an effort to avoid drowning in a pool of insecurity. Frequently, this results in her lying on the floor with the staff sitting by her as they soothe and cradle her head, looking for signs that she will be back soon.

Seeing Ellie and being with her on these occasions seems to arouse in the staff taking care of her, feelings of maternal nurturing as well as the more general ones of sadness. There is also the accompanying emotion of helplessness, knowing that the seizures can't be prevented and will occur again. In many ways, it reminds me of the dread of the night for the superheroes of our shared fiction. The coming of sunset, for Spiderman, bodes of monsters and shadows that he must survive till the arrival of dawn. For Ellie, the onset of seizures is a similar hiding of light. And every time she has a massive seizure, the idea that she will survive is difficult to stay with, both for her and for those who are around her.

What keeps us going?

In these circumstances where resilience is called upon on a daily basis, the cumulative impact of these experiences of trauma can be hard to ignore. This is so both for the person who is experiencing these forceful life events and for those who are observing, supporting and making interpretations based on their beliefs about what it must be like for individuals like Ellie to go through life living on the edge. In such circumstances, we create a purpose for ourselves to give solace to our own spirit and being. Working and looking after people such as Ellie requires that our words and actions have meanings, so that Ellie's words, phrases and acts of communication matter.

The idea, that what happens matters, is important to hold on to as it provides purpose and meaning. For the staff and for the parents of the young people, the concept of '*it matters'* keeps them alive and, at times, full of passion. Here, in this essay, I share my understanding of what allows those who work with these children and young individuals to keep coming back and continue doing this work – offering meaning and purpose, and also finding them for themselves. The young person with epilepsy and other associated conditions does not have a choice but to live their life and have associated with it a sense of quality that makes it bearable.

A professional carer's perspective

The staff who work at Young Epilepsy make sense of their time with these young people in their own ways. I am interested in exploring the inner worlds of these staff, what happens for them, and the explanations they offer themselves to keep going. The following vignette where I use Pieria's example could, perhaps, give a sense of what matters to them, and how it matters.

Dancing partners: Tom and me; Eric and Pieria

> It was late evening, and I am visiting one of the residential homes at St. Piers to sit down with the staff and students. Often the conversations with students are performative events, during which they use their arms, hands and legs alongside their facial expressions to invite the other person into the dance of communication. Tom walks towards me as I enter the house. I stretch out my hands and he takes them into his grasp. We have a small pull and push play. He takes my hand to his nose and smells it, and then in a reciprocal gesture he offers his hand for me to repeat the action. This is both a hello and a goodbye as he continues on around the house.
>
> I move further into the lounge and see one of the carers, Pieria, sitting on the floor as he holds Eric's head on a soft pillow while wiping his face with care. His voice is almost a whisper as he gently speaks to Eric with the hope that Eric can hear him. I see tears in his eyes as he cradles Eric's face in his hands. Too busy caring for Eric, he does not see me as I approach.

I walked away after a little while, noticing that I had been intruding on an interaction that had all the qualities of compassion, humanity, gentleness and nurturing. These are qualities we frequently have conversations about when we provide training to staff. Here I was watching someone live them -- and it was humbling.

A few days later I caught up with Pieria and told him of my intrusion, and of my observations of the scenario. In his response there was no bravado or arrogance, but there was rather an acceptance that this is what he must do. It was the second time that day that Eric had come so close and the seizure was painfully long. Pieria's parting words were, "I am Eric's key worker".

The impact of caring at the edge

I wonder what it was that Pieria communicated in his reluctance to dwell on or to explore with me what I had observed. This reluctance was not unique to him. I have had similar experiences when I have asked that question of others. I wonder whether my interlocutors imagined that if they were to open up every time about the experience of nurturing a vulnerable life, they would become depleted and emotionally unwell. Perhaps, it was best, from their perspective, to keep the experience locked away and not access their own feelings, but rather concentrate on those of the person experiencing the seizure. It allowed their actions to serve both as communicative and performative acts and as a form of protection. It also provided a meaning and purpose to the 'doing' of work; it gave them the sense that some difference was made.

There are other reasons why I am interested in Pieria's account and his response to the situation. Over the years, I have come across many individuals who have struggled to keep their own sense of being intact while working with the vulnerable children and young people at Young Epilepsy. I have discovered them crying softly to themselves at the end of their shifts as they walk away, sometimes never to return. The notion of catastrophe or finding yourself on the edge does eventually lead to an emptiness or rage. Perhaps, it is easier to distance oneself from the performative act of compassion and humanity by looking through the lens of 'another day at work'.

Communicating with 'Abbi'

> Some time ago, I was asked to assess Abbi, a young woman who appeared to those working with her to be harbouring suicidal ideation at the time. From the perspective of her carers, it seemed that she was on a path of self-destruction. Abbi had complex epilepsy alongside a learning disability and also displayed rigidity of thinking. You would be having a conversation with Abbi as she stands next to you; when you raise your head to listen to her and notice that she is on her back on the floor. In the moment it took you to respond, she had had a seizure. Her seizures were drop seizures (also known as atonic seizures, they occur due to the muscles becoming unable to hold the body in an upright position). The seizures could occur at any time during her waking hours. There were times she could go for days without having a drop seizure, and then she might have two or three in the same day.

Abbi was articulate about her desire for independence and being treated as a normal adult. She felt restricted by people watching her and waiting for the next drop. The staff felt that she lacked respect and regard for her life as she did not want them near her. Abbi, on the other hand, felt that the staff had no respect for her identity, autonomy and views because they insisted they had to keep her safe by staying close to her. The relationship between her and the staff team appeared to be at times impeded by what seemed like a brick wall; both sides felt that their words and actions were misunderstood and not respected. The relationship had got to such a point that Abbi had now expressed loudly that she did not want to live.

This communicative act had an electrifying impact on the network, and I found myself being tasked with keeping people safe in a situation where no one was feeling quite safe. The staff felt concerned that Abbi meant what she had said about not wanting to live, and that they had been put into this impossible situation by the way the organisation had organised support for children and young people. Abbi's feeling was that her life opportunities were being closed off by the closeting and stifling she experienced through the omnipresent proximity of the staff.

Creative ways of mediating hope: art, ventilation and catharsis

I sat down with Abbi with the weariness of the burden I felt on my shoulders. We talked and I drew pictures for Abbi and we coloured them in together. A picture of a young woman looking straight ahead, grass around her and flowers, a house. I wondered about Abbi's choice of colours from the ones available to her. I asked her why she chose particular colours, and we explored what these different colours meant for us in our inner worlds. She listened, I listened, and we talked. I asked her about her plans for the evening. She talked about the bath she was going to have, the dinner she had planned with the staff, the phone call she was going to make to her parents, and the TV programme she was going to watch before she went to bed. I asked her about the day that would follow the night. She looked somewhat surprised as she said, *"I have to go to college and finish off the fxxxing flower pot."* This assertion of the normality of ordinary life seemed to lift a weight off my shoulders.

Then it was time to talk to the staff about the feelings of hopelessness they had been left with by Abbi's utterance. The moment they were able to talk about the burden and hurt they had been carrying around, their anger seemed to explode. We explored their feelings, placing their imperatives alongside the aspirations that Abbi had for herself. After some time spent feeling their way through the mesh of emotions - theirs and Abbi's - we became able to talk about the next day and how it could be different. The concept of responsibility and the different levels at which that responsibility should be held and acknowledged emerged as an important topic in the discussion. Initially, this discourse focused on Abbi's responsibility to herself and to them. The conversation spilled into the next day, focusing then on their responsibility to her as well as to themselves.

Living with catastrophe

As I listened to the staff, I wondered and reflected back to them a question about their care of themselves and each other. I asked them how they talked to each other at the beginning, during, and at the end of a shift? From their responses, it appeared that there was little time for talk since they had to focus on the 'doing' of caring. In the performative act of caring, they could push their own selves to the periphery of their working hours and, thus, provide a defence to their core selves. Their talk was concentrated on the pressure to get things done, and it was felt that, at times, the children and young people were themselves a hindrance to their care, in that they did not appear to want to have personal care, go to school or college and preferred to lie in bed or watch YouTube. The staff felt under tremendous pressure to get things right and felt deskilled by the demands made of them. Often it seemed that the end of shift came with a sense of relief that they had survived. This was not true for all of them, of course. Others, as with Pieria, felt a tremendous pride in the idea that they had a special bond with the young person they were looking after -- their own emotions and identity becoming subservient to the cause of care.

After a difficult scenario (such as the one with Abbi), the team is provided with a debrief to enable the recounting of the events leading to and during the episode and also the preparation for a reflective exercise concerning the feelings and emotions generated within the team. The hope is that their feelings can be accounted for and contained in a safe environment alongside the care and nurturing of the young person.

Reflections on living on the edge

As I left the team and the house, I sat in the car to take the drive home, and found tears welling in my eyes. The ignition of the engine sparked something in me. I cried with the rage and emotions that I had contained that day and others from before, that I had been carrying with me for some time. I recalled a colleague saying, when I had said that Abbi was not suicidal, that any mishap "will be on your head". I wondered about responsibility and the absence thereof. I wondered about the consequences of the words we throw around without a thought for the other. I wondered whether I could go home or if I should stay for longer and keep watch. I wondered how long the night would be. What should I do? What mattered most in that moment? As I sat through the welter of questions and feelings, I also reflected on the fact that I would be working through and processing these thoughts as I continue working in the coming days.

The idea of catastrophe being just far enough removed to enable us to live through the day (or the moment) seems to be quite inviting. Yet, it is not devoid of uncertainty.

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About Raj

RajVinder Singh Gill is a systemic practitioner who is intrigued and curious about people. He is a psychologist interested in how we come to see the world and how we relate to the world we belong to. He works with children, young people and their carers as a therapist and facilitator. Raj's orientation and positioning is defined by the concept that our lives are influenced and informed by the lives of others just as we influence and inform their lives through our experiences.

> "The human sense of our being is the collective experiences of our lives in a shared world in which we construct narratives to explain our origins".

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Editors' Note

The following poem is based on Sylvia Plath's Three Women. It contains references to traumatic incidents and may be emotionally challenging for some readers. Please note that we have provided a glossary for the Urdu/"Urdish" words in the margin and at the end of the poem and we have adopted the authors' practice of American spelling.

Erica and Fizza.

Somewhere in Karachi

For ammi and papa. Thank you for your unconditional love and support always.

Syeda Rumana Mehdi

VOICE 1:

The ash from the cigarette
scattered around the bedside
Like the ones sputtering
From a burnt-out pyre.

I can still see the marks
of my red lipstick on
The cheap cigarette paper.

How many times
Did I tell him
"Smoking kills"?
Secondhand smoking, too.

I got a fat wad
of cash thrown at me
In response.

VOICE 2:

Another day
Another *aashiq*

aashiq: lover

Is it really important
To be invisible in the
Eyes of Man, in order to
Be visible in the eyes of God?
But how can I be
Invisible
When I stand out on the street
In my synthetic black shroud?
Do I have fingers?

Do I have juicy thighs?
Do I have a flat stomach?

Keep 'em guessing.
Keep 'em coming.

VOICE 3:

"*Bahu*, please make
A steaming cup of chai
For your *devar* --
And, make sure
There is less sugar than
Last time."

bahu: daughter-in-law

devar: young brother-in-law

I trudge slowly towards the kitchen;
The baby had now begun
To kick at all hours --
Perhaps, it was a boy after
All this time.

VOICE 1:

"In aankhon ki
Masti k mastanay hazaron hein" *
The lyrics were almost drowned out by
the irritating sputtering of the rickshaw
as it stopped outside the house.

*Lyric of a popular Indian song that translates to: *"These mischievous eyes have attracted too many lovers."*

The stranger made his way up the
stairs, carefully swept twice
a day. Bringing the filth
in his heart along with the filth
in the street.

He worked in a government office
and sent money to his family
In the village.
He said he couldn't come twice
A week, as per the agreement,
Because he was getting married
tomorrow.

"What do you know about marriage?"
He mumbled as he hungrily
Threw the bed covers on the floor.
"Women like you only know how to
seduce innocent men like me."

He left his scent in the sheets,
Which was quite different from the soft
Smell of fresh roses on his bedsheet
The next day.

But then again,
What did I know
Of marriage?

VOICE 2:

`There are many fantasies
Associated with purdah,
And, even though
We try to protect ourselves
From lustful gazes,
Somehow the hijab makes
Us more visible.

And we become public properties
To be groped in buses,
To be catcalled on the streets,
To be followed on our way,
Back home.

And then we are blamed for not
being modest.
I was a modest little girl
when I was nine years old,
And yet the *Qari* sahib
tried to touch me as I
read the Quran.

qari sahib: colloquial name for a teacher of religious studies

How am I indecent
When someone fantasies
Of my full lips
When they see a shapeless,
Black silhouette?
"Such anger is not
Good for girls,"
My mother remarks
Softly
As she too disappears in
the folds of the black
Garment
That makes us
Invisible and
Visible at the same time.

VOICE 3:

"When can we find
Out the sex of the foetus?"
My husband always asked
the same question.

The silent car ride,
the annoyed grunts,
followed by the slamming
Of the door.

Nothing was out
of ordinary this time
either.
I wondered why
The doctor thought
she was protecting me
by not telling us the
Sex of the baby.

I wish she could
Save me from what happens behind
Closed doors
When I remove my make-up
And
look in the mirror.

VOICE 2:

The wind gushed
towards us,
the burqa turning
in a sinister tornado
as leaves swept against
my feet.

Lost in my thoughts,
I didn't see him at first
until he stood right in front
Of me.
His arm outstretched,
A cheap rose and a piece
of paper in his palm.
I turned round and jogged home
The piece of paper tightly clasped
in my palm
tinted with crimson now,
like a watercolor painting.

I realised that I had gripped
the rose so hard that
The thorn cut into my
palm.

A mistake for the future,
An adventure for now.

VOICE 1:

The sari was never-ending.
It had taken three
girls to iron it properly.

It was a rich dark red
with copper hues so
Simple, yet so tasteful
and so full of flavor
like a biscuit dipped
lovingly
into a steaming
cup of chai.

The *cham cham* of
my anklets echoed
as I walked across my
room and took out the
jewellery box. I could never
resist *jhumkas* from
Liberty Market. Every time
I visited Lahore, I would
argue endlessly with the shopkeeper
until I got the pair that I desired
at the price that I wanted.
But which one
of them was going
To satisfy me today?

jhumka(s): traditional dangling earrings shaped like a dome or a bell

Green? Gold? Black?
Sighing in frustration,
I keep the three shortlisted
Contestants aside, gazing
At the colorful
Beads that clung to each of them.

Next, I set up
my makeup station:
Hand-me-downs,
Lavish gifts,
Stolen souvenirs
A playful smile
Spreads across my lips
Like a dollop of ghee
Slathered over a steaming paratha
As I apply
Hashmi's *kajal.*

VOICE 3:

The house is filled
With the irresistible
aroma of freshly baked
Chocolate chip cookies.

Such a picture-perfect
Mother-to-be, baking
sweet treats for the family!

I needed to calm myself down --
The latest medical reports
had diagnosed anxiety,
and if it didn't stop
then the baby might be at risk.

So I did the thing that
relaxes me the most: baking.
They say the way to a man's
heart is through his stomach,
but I never got to find out
if the cookies would
have found the complicated
path to his heart.

"Why don't you whore
yourself on the street
to buy these expensive
baking ingredients?"
My stomach churns.
I pray that the baby
holds strongly to
The walls of my uterus.

VOICE 1:

I never learnt to
Do makeup.
My naturally
Flushed cheeks were
the envy of some,
And the heart-throb
of others.
Tonight would
be no different,
I will let
my *kajal*-rimmed eyes
and my red lips
do their magic.

I glance
at the clock,
wrapping the sari
around my curves as the
girl sits on the floor
mouth agape at my
slim figure.
I smile at her and tell
her that she can wear this
Sari at her wedding.

She smiles back sadly
"*But ammi, girls*
Here don't get married.
They leave and some come back
while others don't."

"You are different
I'll make sure you go to
a good school and university
Like your father."
She doesn't know who
Her father is
Or
That I'm singing tonight
at his 20th wedding anniversary.

VOICE 2:

I texted.
He called.
I dropped my phone.

That was the first day.
Now, as my sister snores,
I sneak into the
bathroom and gently
Close the door.

The phone held to my ear,
I blush with joy at the
words I hear. How
he loves me, how he
will take me away
somewhere far, so I never
have to hide behind the
burqa.

The rose that day was the
first of many.
He followed me to school,
Sometimes thrusting
Heart-shaped chocolates into
My sweaty palms,
the lingering touch of his fingers
burning my flesh.

VOICE 1:

The car is too big
to enter our narrow street.
I wrap the green pashmina
shawl around myself.

They say he's an exemplary
father. A loyal husband.
Tonight, they were celebrating
The love that he has.
The love that he conquered.
The love that blossoms every day.

The black SUV has tinted glasses
and the driver pointedly
looks in the opposite direction
as I climb into the leather seat
at the back.

My bag rattles as I set it down.
I realise that I forgot to bring my

Pepper spray.
It was too late to go back.
Besides, I had been there
Many times before, hadn't I?

Like a moth round a flame,
I walked closer to my
demolition with each
Visit.
But giving yourself in
to your love makes
you immortal.
Or, so they say.

VOICE 2:

We are leaving.
The train from
Karachi to Sukkur
leaves tonight.

There is so much to do!
What should I pack?
Should I say goodbye to my sister?
I peer into the kitchen,
Watching my mother fry
samosas as she pours
chai into mugs.
Just the way my father
likes it.
With a dash of cardamom powder
and ginger.
I anxiously check my phone.
He told me to leave
At midnight.
To pack light.
We shall go to Sukkur, then
drive to his village
And get married
First thing in the
morning.

I enter the kitchen,
kiss my mother tenderly
On the cheek as she grumbles
About having to reset her
dupatta.

dupatta: a long strip of cloth, like a wide sash, that accompanies traditional shalwar kameez and can be worn over the head as a less formal hijab or draped over or across one or both shoulders

Ignoring her protests,
I grab two samosas and
A handful of pakoras.
She smiles tiredly
Thinking I'm up to
my old capers.
But I need snacks
For the upcoming trip, no?

VOICE 3:

It was a nightmare
She was still inside me!
Not floating
in a Moses basket
in the red colored
River that I saw.
The river that,
upon close inspection,
Was filled with blood.

I've now entered the third
trimester.
The doctor continues
to be stubborn.
Even today, she smiles
politely and reassures
my husband that it
is a healthy *baby*.
And reminds him
To take care of me,
As my blood pressure
seems to be on the rise again.

"Take her out for a nice dinner, ok?
It will soothe her nerves."
But
"What is the gender of this child?"
Sometimes, I'm not sure
if they can understand
each other's language.

I turn longingly
At the waft
of freshly-baked chocolate
cupcakes in the canteen.

There was a time
when he spoiled me
with decadent chocolates,
roses, Chinese dinners,
and my one gastronomic weakness:
katora chaat.

dulhan: bride; referring to pretend play

All of that stopped after
the first miscarriage.
"It must have been a boy,
because girls are able to
grip the walls of the uterus
strongly."
The doctor's casual words
changed our marriage.
The following two pregnancies
were normal --
but they were both girls.

Each time, he walked out
of the hospital.
My daughters wait for me
at home. Eagerly playing
Dulhan-Dulhan while their
Father spits out insult after
insult, swearing not to
pay for their milk anymore.
The car moves forward
Swiftly.
I can still smell
The warm aroma of fresh
Baking.
A girl can take her time
to move on, no?

VOICE 1:
Karachi.
Never fails to amaze me.
While the homeless
sleep on the street,
gazing lazily at the
traffic lights,
the mansions of the rich
twinkle with
enough fairy lights
to light up the whole city.

There she is.
"*There you are!"*

I quickly force myself
to smile as she comes towards me,
her earrings dangling like
chandeliers.
"See how Amir spoils
me?"
She shoves her diamond-studded
bracelets in my face.
"He does seem to be a good lover,"
I reply teasingly.

I know my place.
I own it.
I walk to the podium and
began to sing.

He stopped chatting
with his friends. They
were probably talking about
their days in Harvard.
As he inched closer to
the stage, I close my
eyes and transport myself
to another world.
One in which he
claimed to love me.

I open my eyes
and there he is.
What is he doing?

VOICE 2:

This is it.
I'm not sure
If I'm walking
or flying or floating
or doing all of it at once.
The train station is a
10-minute walk.

They say Karachi
is the City of Lights.
Even at this hour,
there is traffic.

Cars adorned with flowers,
Drivers drumming restlessly
On the steering wheel.
Mothers sit on the sidewalk,
Watching their babies sleep
struggling to stay awake themselves
So they can protect themselves
And the money earned after
a hard day of work.

They look curiously at me.
A girl shouldn't be out
By herself at this hour.
Stalls of street food
Stand in front of the
station
like obedient children
lining up for a family photo.

I can hear the trains.
I can smell the lemony tangy
smell of *nihari*.
I can feel my *abaya* more than
ever.

abaya: garment that covers the body from shoulders down

The ticket in my hand says
"Platform 2."
Until next time, Karachi.

VOICE 3:

First, I thought
they were just a false alarm,
and then my water broke.

"Karachi, the city of my
dreams, don't give up
on me now,"
I repeat pleadingly
as the traffic stands solid
like the cars are glued to
the road.

Little children try to chase after cars.
Breathless, they inhale dust
that the Land Cruisers' tyres
blow in their perfectly sculpted faces.
This city is the city of hope.
We all want a better future.

There is no going back now.
The opaque doors of the
Operation theatre stand tall
And mighty before me.

His face is expressionless
As they wheel me inside.
He has offered to wait outside.
I can see him pacing.

I want him to
hold my hand.
I want to reassure him.
Instead, the epidural is
Finally kicking in
And there is no more time to think.

VOICE 1:

Everyone heard it.
The gunshot.
He called me a whore
and told me to go back.
Stumbling backwards,
Bloodshot eyes trying to focus.

His wife tried to steady
Him but he pushed her away.
Her bracelet hit her own mouth
As she attempted to stop
Herself from falling.
Is that what a blood *diamond is?*

He's pointing a gun at me now.
"Please, think of your daughter."
"But he only has a son!"
Why must his stupid
wife interrupt our final
conversation?

"*That is not my child,*
you whore!"
He pulled the trigger
and I pulled my shawl
tighter around myself.

Later that night, a hole
was dug in the garden,

A body was buried
and a short newsclip
appeared the next day:
"Prostitute dies in
attempt to loot a mansion
in Karachi."

VOICE 2:

I haven't moved.
I saw him,
And then I saw my father
behind him.

Then, I heard the gunshot.
I saw him drop to the floor,
crumpled like a rag doll.
Then, I heard the second gun shot,
I felt myself falling backwards,
unable to see the blood wetting my
abaya, but I felt a pellet of
fire enter my chest.

abaya: garment that covers the body from shoulders down

How did my father know it was me?
He stood over me, spat at my face,
and walked away
with a look of
disgust on his face.

Somewhere in Karachi
my mother sobbed quietly, praying silently.
He said he was going to bring her back
and give her another chance.
Hours passed before she adjusted
her *dupatta*, and starting roasting the almonds for
the *halva* she had prepared.
He was coming home.
Alone.

dupatta: a long strip of cloth, like a wide sash, that accompanies traditional shalwar kameez and can be worn over the head as a less formal hijab or draped over or across one or both shoulders

halva: the South Asian version is usually made with lentils or semolina, and is considered festive

The next morning, NGOs updated the
statistic of their honor killing count.
The Edhi Foundation added two
other unmarked graves in their
cemetery.

VOICE 3:

"Such cute dimples!"
The nurse exclaimed as
I groggily looked around
trying to find her.
I knew it would be a girl.
He had hoped it wasn't.
Where was he?
Where was she?

The nurse said she
was with her father.
Three hours later,
I had no idea where either
of them was.

My mother held my hand,
tears falling silently
as they found her
and brought her
To me.
The doctor said
that he had held
her nose until she
stopped breathing.
"How can a father
be so heartless?"

I look down at the bundle
in my arms. At the
feet perfectly poised
for dancing.
At the hands that would
never clap.

I go home. Alone.
Somewhere in Karachi,
Bilquis Edhi
gently rocks the *jhoola*
and requests parents
to leave their unborn
girls in the cradle
and not kill them.

jhoola: swing; here cradle

Urdu-English Glossary

aashiq: lover

abaya: garment that covers the body from shoulders down

bahu: daughter-in-law

devar: young brother-in-law

dulhan: bride; referring to pretend play

dupatta: a long strip of cloth, like a wide sash, that accompanies traditional *shalwar kameez* and can be worn over the head as a less formal hijab or draped over or across one or both shoulders

halva: the South Asian version is usually made with lentils or semolina, and is considered festive

jhoola: swing; here cradle

jhumka(s): traditional dangling earrings shaped like a dome or a bell

qari sahib: colloquial name for a teacher of religious studies

About Rumana

Originally from Karachi, Pakistan, **Syeda Rumana Mehdi** is currently completing her double Master's in Women and Gender Studies with the universities of York and Granada. A true Cancer and poet, she believes strongly in the sensitivity of words and their resounding impact in people's lives. Lately, she had been interested in politics of religion, culture and language and how they influence the reader.

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Tätermentalität

Jacinta Nandi

Editors' Note

The text that follows is an excerpt from a narrative piece exploring female rage in the face of an abusive intimate relationship. The work also deals with the isolation of living through the pandemic in a country where one is never quite allowed to belong. It is a raw and powerful piece which has been trimmed to meet e-O&P editorial guidelines. For the full version, we invite you to contact the author

Erica and Fizza.

Judith beheading Holofernes (1612) by Artemisia Gentileschi. Source: Wikimedia Commons

Exchange #1, on Facebook

Penny, a mum-friend writes to me:

> "I don't want to be a Debbie Downer.. but if this virus mutates so that it's more infectious and more deadly and more unvaccinable, I will kill myself. And my kids."
>
> My response: "Wanting to commit murder-suicide on your entire family is not being a Debbie Downer. Being a Debbie Downer is more like: thinking you haven't made enough quiche for the picnic".
>
> Penny: "Why's this bastard mutating so much, anyway?"
>
> Me: "Vaccinable isn't even a word, you know, Penny".

This is all we do now, mums on Facebook. Swap virus gossip and suicide threats, some more serious than others.

I know lots of single mothers who have moved back to their mum's – or even in with their in-laws. So Granny can look after the kids – supervise the home-schooling – while they work all day. It seems kind of sweet to me? Kind of. Always found those domestic scenes in *The Walking Dead* a bit unbelievable. But not now. They seem believable to me now. My mother-in-law, my oldest's granny, she is basically home-schooling him over the telephone – all I have to do is keep the twins quiet so he can concentrate. We keep quiet so he can concentrate. I keep quiet so they can concentrate. I keep the babies quiet so that Taylor, my husband, and Nicky, my son from my first marriage can concentrate, so they can concentrate.

I am a mother, and I don't need to concentrate, which is kind of good, because I don't think I have been able to concentrate on anything since March 2020.

Exchange #2, In person:

> Taylor says to me, "I'm a *Wissenschaftler* in German".
>
> I say to him, "A *Wissenschaftler* is a scientist".
>
> Taylor says to me, "Yes. In German, I'm a scientist. I'm a scientist of philosophy".

I say nothing for a while.

> Then I say, "Well, that's f**king stupid, isn't it?"

I hate him so much – and he doesn't know – I hug my hatred to my chest, like it's precious, like it's a sweet baby with a delicate skull.

But I know everything about his hate for me. I know his hatred of me off by heart, inside out, everything I ever did or said wrong, he took a razor and etched it onto my skin, like ice laced on a window, traced the lines, tiny thin lines, threaded all over my body, a spider's web of hatred tattooed onto me, my lips stapled together, black lines, needles prick all over me.

I am Sleeping Beauty bathing in hate

And he doesn't know how much I hate him

Because I store it in my body, in my blood, my blood, thicker than water, my blood, thick like treacle, like oil, like syrup, this blood, thick with hate, heavy with sugar. My blood is so red it looks black

And my body is a stagnant pond, polluted. Can you see all the wildlife dying? Look at that, a beaver stuck in tar. Or is it oil? It's all hate, all hate.

My gums are swollen with salt, my tongue with oil. I am with hate, like how women used to be with child. Look at my hate – it's the most perfect thing about me.

§

Exchange #3, with Penny on WhatsApp:

My friend Penny phones me up again – well, a WhatsApp video call – an actual phone call, I think, it must be important, she must be suicidal, or maybe she even needs something from me.

> "Guess what", she says, breathlessly.
>
> "What?", I say.
>
> "Dr Drosten's kid!" she says, "He goes to emergency care!"
>
> "Well!", I say. "He's a very important scientist. He's Germany's Top Scientist. He must be systemrelevant*".*

Systemrelevant is the German word for key worker, essential worker, trust the Germans to make such a soulless, bureaucratic word for it. 'Essential workers' sound so busy and hardworking, like bees, providing for society. Or fat, cheerful nurses with rosy cheeks and their hair in a bun. Systemrelevant sounds like a part of an atom in a diagram, with an arrow pointing towards it. Systemrelevant. It makes it sound like there's only one system.

The German people's relationship to the systemrelevant is interesting, I think. Some people are jealous of them? Because they get to send their kids to emergency care? Because they're important? But some people look down on them, a bit, too. They're important, but in a working class kind of a way.

And people keep on saying, angrily, that artists and children and the homeless and sex workers and bar staff and circus clowns and jazz musicians are systemrelevant. But then, when they decided to let the football happen, people were mad that footballers were systemrelevant but kids' football clubs were still closed.

I don't feel systemrelevant, to be honest. I don't even feel like I am part of the system, I feel like I am a fake, just pretending to be here, all normal, German – but underneath my skin, where the blood and the bones should be, there's just fraying wires, or rotting parsnips, or maybe, perhaps, just nothing at all. My German's so good, people think I am German. Or from Holland, sometimes, but mostly they think I am German. Taylor's German is so shit, and still he despises me. He manages to turn being able to speak German properly into another failure of mine.

Exchange #4, with Taylor, in person:

> "You need to apply for Soforthilfe," he says, crossly.
>
> "I know, I know," I say. Secretly I worry that this isn't, in fact true – I'm not a freelance artist, I'm just a scientist's wife. I imagine the authorities raiding my bank account, dragging me to jail, ripping the kids from me.
>
> "I can't do it for you," he says.
>
> "I know, I know," I say, soft and sullen and defensive like a teenager.

He says nothing for a moment, and the words he doesn't say, the silent accusation, just hangs in the air between us, like a really bad fart. Heavy and poisonous, a volcanic ash cloud. I wonder if the dinosaurs were scared when they started dying. I'd quite like to die, I think, I think I wouldn't be scared. I don't mean I feel like killing myself. I don't feel like killing myself. I don't actually want to die – I just wouldn't mind it that much if it happened to me. It's not nice, living together, with a man who hates you. It's not fun. It fills you with despair, and a bit of boredom.

I'd quite like to fake my own death, I think. If I had the technology – if I were the scientist – I'd do that. Imagine, they can grow a human ear in a bat – was it a bat or a rat? They can grow ears on bats – they must be able to clone people by now. They just aren't telling us to keep us calm, right? So, if I were a scientist, I'd clone myself – me, but with no soul – scientists are clever like that, huh? And then I'd hang her from the ceiling. Taylor would come in and see me. Hanging from the ceiling, dead and – what is it that pops out when you hang yourself? Your intestines, right? And you shit yourself. He already saw me shit myself when I was giving birth. Our mums used to tell us we had to close our eyes when sneezing or they'd pop out, I used to try to keep mine open, it never worked. So there I am, soulless, dead, naked, intestines and crap dangling from my body, me dangling from the ceiling on a rope. And Taylor comes in. I wonder if he'd actually smile, or manage to control himself. I wonder how long it would take for him to notice.

Exchange #5, in person with a friend

> "What does his wife do, though?" I say to a friend. We are walking through the park, pushing buggies. I just pissed in a bush.
>
> "She's an actress," she says.
>
> "Are you sure," I say. "I would've thought he'd be married to another scientist. Some kind of blonde, pale, German scientist. You know the kind of woman I mean. Almost attractive. Blonde and thin. A bit empty-looking."
>
> "No, he's married to an actress," she says. "She's been on Tatort."

My babies have fallen asleep, which means I'll have to walk and walk and walk until 6pm. They're too loud. If Taylor has a videokonferenz, he can't concentrate if we're in. So I just walk and walk and walk, aimlessly and soullessly, through the East Berlin streets. They're kind of too boring to be really bleak, that's the most depressing thing. They must be so happy, I think. Doctor Drosten and his actress. I bet they eat really boring breakfasts together, really dark bread and organic salami. I wonder what they talk about, maybe sometimes he explains the difference between viruses and bacteria to her, really slowly. She must look at him over breakfast and think: every woman in Germany wants you, even the *Ausländer.*

Taylor thinks the problem is, he is too important, and I am too unimportant, and so we have nothing in common. He thinks he can't communicate with me properly. But when we met, I was doing better than him, career-wise – somewhere along the way, he overtook me. I'd like to blame the twins but it started before then, even. It was like something inside me switched and I didn't need to prove myself anymore? And everything I wrote turned to sh*t.

I don't think that's our problem, though. I think our problem is, he just isn't important enough. Philosophy, a doctor of philosophy, a scientist with thoughts. If he were a real scientist, like, someone with a microscope, we would be happy. Imagine being a scientist's wife in the olden days, like when you had to boil them water for their baths. That must've been so much fun, being Louis Pasteur's wife and boiling up the water for his bath. Or Edward Jenner, was that his name? Although I think he had sex with the milkmaid. Probably.

Exchange #6, in person, with Taylor

"Why did you buy unsalted butter," Taylor asks. Only it isn't a question.

I raise my eyebrow at him, like I am flirting.

"They didn't have your favourite butter," I say. I smile sweetly. Maybe I will avoid a tantrum today. "And you got so mad at me when I got the margarine instead, remember?"

"You're so f**king useless, you know that," he says. He is still smiling. If I didn't know how much he hated me, I'd say he was smiling affectionately.

I can feel hairs standing up on my back, like they used to, when we were cave people, when we were monkeys, when we were shrew-like.

"I thought it would be better to get the same brand – "

"You mean to tell me there was no salted butter in the entire supermarket!" He thunders, I flinch, my teenager laughs. Taylor opens his mouth, closes his mouth, looks at me.

"Were you born this f**king stupid or do you take pills," he says. The teenager is cracking up, if we'd stayed in my home country, he wouldn't find this funny.

"We'll talk about this later," he says. I nod. I guess we probably will.

§

So, maybe, when corona is over, maybe I'll get a job in a shop or something, and a Wohnberechtigungsschein flat in the suburbs, and the twins can see Taylor every Sunday, and every other weekend for the whole weekend, maybe. When corona is over. Maybe when corona is over, we'll all go to Disneyland. Maybe Taylor will be in a good mood all weekend or maybe I'll finally die, not necessarily suicide, just carelessness. Maybe.

Maybe when corona is over I'll work again, and earn more than him, and he'll start to respect me, maybe he doesn't hate me, maybe he's just depressed, maybe it just gets to him, paying all the bills, he does pay all the bills, he does pay all the bills, he does pay all the bills, even the teenager's phone bill, maybe when corona is over he won't pay all the bills and he will start to respect me, maybe I won't die, maybe this is going to be okay, maybe we'll go to Disneyland and it will all be okay. Disneyland, Paris, I mean. Disneyland, Paris. Or maybe I go to Greece, alone. Like Shirley Valentine. Or maybe I f**k Dr Drosten, maybe when corona is over, I f**k Dr Drosten. No. No, no. Maybe when corona is over I don't f**k Dr Drosten, maybe I f**k Taylor's boss, maybe secretly, maybe I'll f**k Taylor's boss secretly, maybe when corona is over we'll go to his datscha, secretly, and secretly f**k, and maybe, when corona is over, Taylor will hate me as much as he does now.

Maybe when corona is over, Taylor will finally understand how much I hate him. I think I hate him more than he hates me, although I'm not sure that that's scientifically possible. Maybe I'll electrocute him, like a rat in a lab –

People talk about women murdering their husbands all the time, don't they? But you never hear of it. So, either women are really good at murdering men – much better than men are at murdering women – so clever at murdering men that they never get caught – or they're so rubbish, they never even try. Hardly ever try. Hardly ever, mostly never. If they'd been any famous women murdering their husbands recently, I am sure I would've noticed. I would've noticed and remembered it. I would.

I wish women weren't such cowards. You know what I wish? I wish women would commit murder suicides – just a tiny bit more. Just a tiny bit more often. Then men would respect us. But women are such cowards. They never commit murder suicides, it's only ever suicide, like Sylvia Plath, boring, or maybe they drown their babies in cement and hide their bodies in the plant pots on the balcony. Newborn babies, drowned like kittens. Seriously, women are so weak. Men do this so much better than us: exterminate, exterminate, exterminate, like daleks. First, you kill your youngest, the babies, and then the school-aged kids, and then any teenagers, if there are any, and then your wife, and then, finally, yourself.

Like a king.

No. That's not right. Marie-Antoinette was killed last, wasn't she?

Still, there's something regal about it, isn't there, when men kill off their whole family. Something magnificent.

When corona is over, how many will be dead?

I saw my neighbour in the playground yesterday. I think it's safe now. He had his youngest in a sling, I hate it when German men carry their babies in slings, they look like stupid teddy bears. Imagine Taylor carrying the baby. He would never do something like that. He would never do anything like that. Pushchairs are as far as he will go.

> Yesterday my neighbour said to me, “wir müssen langsam zurückkehren. In die Normalität”
>
> I said, “must we”.
>
> He said, “Ja, langsam müssen wir das”.
>
> I said, “In the first wave, I didn’t know anyone who had died now half of London is dead already”.
>
> He said, “die Kinder werden langsam depressiv”.
>
> I said, “I think my twins quite like me, actually”.

(It was an insult – I think I am a better mother than all these people whose kids are so depressed. But it’s also the truth. My kids love me, and they don’t miss nursery, not even for a second.)

(It’s Taylor who can’t bear me.)

Why do people want to return to normality?

I want to escape from normality, if I am honest.

I want to get away from normality.

I hate normality. I hate having to be normal. It makes me feel like my head is imploding.

You know what I’d like? Instead of normality? I’d like to take the twins and go live in a cave and they could live off my breastmilk and during the day I’d go foraging for roots and nuts, like Rapunzel. Pregnant women are so resourceful, huh? Forage for roots and nuts, steal some salad off of a rich witch who lives next door. Maybe we’re not cowards. Maybe we’re just not murderesses?

What about the teenager? I think. I have to stay inside normality because of the teenager. Soaking up all of Taylor’s hate so it doesn’t seep inside the teenager’s brain, like osmosis.

Osmosis, huh! Maybe I should have been the scientist, after all.

Exchange #9, with a neighbour, on WhatsApp

My neighbour was kind of flirting, and he wanted my number, so he could WhatsApp me a funny video.

Exchange #10, with my daughter, in person

> The girl twin came up to me and whispered, “I think the girl over there has corona”.
>
> I whispered back, “it’s not your job to worry about corona. Mummy and the scientists know how to look after you”.
>
> She whispered back, “I saw it. In her mouth. A really big corona”.

When we got in, Taylor said I had sent the wrong cups back to Amazon. Well. The right ones, actually. I had sent the right cups back to Amazon, and kept the wrong ones. I said I actually liked the blue ones more, which was a lie, I was just lying to save face, and he threw one at the wall by the side of my face. The blue porcelain shattered around me and I noticed that I hadn’t even flinched.

> "You're cleaning that up," he said, but the thing was, I was already doing it. And I was secretly glad. I needed some broken shards of porcelain to grow some oregano in a jar.

I wondered if I had deliberately sent the wrong cups back, just to piss him off, so he would throw the cups at me and I would get some broken porcelain.

(Maybe when corona is over, I will poison him, slowly poison him to death.)

(No. Instead, every time I have a yeast infection, I will put his toothbrush in my vagina, and he'll get gum disease.)

§

Exchange #11, in person, with my son

My teenager comes out of his room. A miracle.

> "I'll make pizza tonight," he says.

I flinch.

I notice I flinch.

> "Better not," I say quietly. "Taylor has a Videokonferenz."

He nods. He's so reasonable, the teenager, and then every now and then, when Taylor is out for a bit, he threatens to beat me up, or kill the twins.

> "I'll make pizza quietly," I say. "And after the twins sleep. We'll watch something in your room? Something stupid and British?"
>
> "Game of Thrones?" He says.
>
> "But there's always so many rape scenes to skip over," I say.
>
> "I wish they'd make, like, a 'Watch it With Mum' cut," he says.
>
> "Let's watch 'Columbo'," I say. "Let's watch one of the female murderers in 'Columbo'. I'm always in the mood for that."

§

I think my friend was wrong about Dr Drosten, though. My neighbour – my sling neighbour, he told me – and a German man versus an Ausländer woman, well, no matter how much of a feminist anti-racist person you are, you know who to believe. Don't you?

So, the sling neighbour told me "Dr Dorsten is married to a scientist". I would love it, if, when corona is over, it came out that Dr Drosten's wife designed the virus in her lab.

Wouldn't that be satisfying? I like all the conspiracy theories, about the Chinese – I kind of hope they did design it in a lab in Wuhan, I kind of feel like the West deserves it, if they did – but it would be really great if it came out it was designed by us, by one of us, by one woman, in a lab.

It kills more men than women, huh?

So maybe it was designed by some evil feminist scientist in a lab, trying to kill off all the men. #killallmen, I think. I think in hashtags now. Hashtag pay the Kieferorthopäde.

At least it doesn't kill children yet, I think. Well, not that many. Not yet. I want my kids to survive this. Huh.

I write about this in my gratitude journal every night – "I am so grateful that the corona virus doesn't kill children!" and sometimes I worry I am trying to manifest something, something bad.

Exchange #11, in person, with Taylor

> Taylor says to me, "and what, if anything, are you contributing to the rent this month?"
>
> I say, "I can give you the Kindergeld".
>
> He smiles. "Imagine that!", he says, slowly. "Imagine that. Imagine me not being the sole breadwinner for one month".
>
> I say, "But I kind of need it back, anyway. For the Kieferorthopäde".
>
> He smiles. "I never signed up for this," he says. "Do you hear me? I didn't sign up for any of this".
>
> I say quietly, "I didn't exactly sign up for this either".
>
> He says, "God, you know what I hate most about you? You have such a victim mentality. It's pathetic!"

I blink, confused.

He's meant to be so intelligent.

People are always telling me he's clever. His boss at work said to me once, *"Taylor is such an exceptionally intelligent guy, it must be hard to keep up sometimes"*.

But here, at home, he says so many dumb things! Like if someone said that in a soap opera, I'd stop watching, that's how dumb it is.

Because I don't have victim mentality – not even a tiny bit. If I had a victim mentality, maybe I'd be a bit happier being his victim.

I have a Tätermentalität, that's why I hate this so much.

I don't want to drink wine on the beach

I don't want to be free.

I don't want the kids to be at uni, and me to be free, and Taylor to forgive me – for what, exactly?

I want to be a Täter, a beautiful, beautiful, perfect Täter.

I want champagne and Taylor's body decomposing under the floorboards.

Maybe, when corona is over, I'll send the teenager to his dad's and make bone broth stew out of Taylor's body, that really would be two birds with one stone, wouldn't it. Heal my leaky gut and destroy Taylor's corpse. Taylor los werden.

§

> My teenager comes out of his room and whispers to me, "can you lend me your eyeliner? We're having a sleepover tonight and all the boys are wearing eyeliner."
>
> I whisper back, "You can't go to a sleepover."
>
> He whispers back, "It's an online one."
>
> I whisper back, "Oh, you kids!"
>
> He whispers back, "Have you got eyeliner or not?"
>
> I whisper back, "Let me do it for you."

And in his room, door shut, the pale sunlight dancing on his wooden floor, me touching his face, teasing him that I wanna give him smoky eyes, for a brief moment, I remember what it feels like to be happy.

Maybe, maybe one day, I will be with love again

Maybe.

Timoclea Killing Her Rapist (1659) by Elisabetta Sirani. Source: Wikimedia Commons

German - English glossary

Tätermentalität: perpetrator mentality

Täter: perpetrator

Tatort: a long-running TV police drama

Soforthilfe: financial relief programme introduced during the pandemic for small businesses, freelancers and the self-employed

Wohnberechtigungsschein: a certificate which demonstrates that a German resident is in a low income bracket, allowing them access to state-subsidised housing

W*ir müssen langsam zurückkehren. In die Normalität*: We have to go back slowly. To normality.

Ja, langsam müssen wir das: yes, slowly we have to

die Kinder werden langsam depressiv: the kids are slowly becoming depressed

Kindergeld: child benefit

Kieferorthopäde: orthodontist

Taylor los werden: get rid of Taylor

About Jacinta

Jacinta Nandi is a single mother who lives in Berlin-Lichtenrade, where she writes - articles, columns, short stories and books. She writes in English and German, her main topics are racism, feminism, motherhood and poverty. Her most recent book was published in Autumn 2020, Die Schlechteste Hausfrau der Welt (The World's Worst Housewife), a fairly autobiographical account of a frazzled mother failing quite badly at both feminism and housework.

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Buried Beneath

A video piece

Hazel Soper

Artist's Statement

This video piece approaches the notion of catastrophe through an ecofeminist lens: standing stones take the viewer on a journey, drawing connections between the objectification and damage suffered by both women and our environments at the hands of the capitalist patriarchy — a system that prioritises production and extraction over all else.

Through the restrictions of the pandemic many women have been confined to their homes. Domestic violence has increased, gender role dichotomies have been exacerbated and reproductive labour has intensified. Nature has been a physical and mental escape for many in this time, with daily exercise being one of the few things allowed by authorities. This video work seeks to give the standing stones, landscape, and the women they represent their voices back, reassurance that we can survive into the future.

About Hazel

I use video, print and sculpture to examine forms of social alienation proliferating contemporary society. Often looking at communication and technology, I examine the influence of global capitalism through an ecofeminist lens, exploring land use, ownership and food production. I have recently completed a residency at Fish Factory Arts, Cornwall which culminated in my solo exhibition, Altar for the Commons (09/2020). My work has been shown both nationally and internationally, including at NeMe, Limassol, 2019; FaB Festival, Bath, 2018; AIR Gallery, Altrincham, 2018, and the Baltic, Gateshead 2021.

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Bright Side

A poem

Ian Andrew

Bright side

Post catastrophe
Hope stars
As the hero

About Ian

Ian Andrew is a member of the Change the Word poetry collective and lives in Nuneaton, Warwickshire. When he's not writing poems he's walking the dog or involved in football in some way.

Some forthcoming events

You are most welcome to join us

Please click on the links if you'd like to find out more.

Date	Event	More info
Mid-August, on amed.org.uk	**Spring/Summer 2021 edition of e-O&P:** 'Living with catastrophe: re-thinking survival as everyday practice'. Please contact editors Erica Piasecka & Fizza Hasan if you're interested in joining a post-publication Gathering .	
7-28 August (Cádiz, Spain)	e-O&P contributor Concha Jiménez's solo art exhibition, NADA QUE VER at the Sala Alfonso X in El Puerto de Santa María	
20 Aug: Roots & Shoots or Zoom 1.30-4.30 pm,	**AMED Writers' Group with Chris Rodgers** Mastery, Mystery and Muddling Through: exploring the wiggly reality of organization – and writing!,	
Sat 25 Sept 6-8pm Anteros Arts Foundation, Norwich	e-O&P contributor **Stephen Musk**'s memoir ***Green Icing*** is due to be self-published. To purchase a copy, please contact StephenMusk@outlook.com	
AMED AGM and Workshop., Wed 22 Sept	**AMED's 2021 AGM via Zoom, followed by a highly participative free hybrid in-person/Zoom workshop,** which is open to anyone who is interested**.** Watch this space for more details.	
15 Oct at Roots and Shoots OR via Zoom (tbc), 1.30-4.30 pm	**AMED Writers' Group** **Writing about working with 'Elites'**, with **Douglas Board** (details to follow)	
13 November, via Zoom (watch this space for details!)	**Open Source Thinking** **Pre-meeting for our Open Source Thinking residential gathering OST2022,** at Bore Place, Kent (18-20 March 2022), with the OST Hosting Team. Contact Alison for more details.	
December	**Publication of the Autumn/Winter 2021 edition of e-O&P 'From** ego to eco' on the theme of 'doing better things'. Contact guest editors Tom Boydell or Mike Pedler to find out more.	
Friday 17 December, 1.30-4.30pm,	**AMED Writers' Group** **Private Passions and Highlights of our Writing Year.** Our annual review and celebrations. Contact **Bob MacKenzie** bob@amed.org.uk for more information.	

Your invitation to become more involved with e-O&P

About e-O&P

e-O&P is AMED's quarterly online journal, available in pdf format, for academics, professionals, managers and consultants at all stages of their careers. It addresses innovative approaches to personal, professional and organisational development in a reflective and accessible way. It has a practical bias with a balance of well-written thought pieces, case studies, interviews, articles, reviews and editorials. Our articles are succinct, engaging, authentic and easy to read. We maintain our high standards of writing through the careful selection of relevant themes, through applying the principles of critical friendship, and through our support of outstanding guest editors.

About our guest editors

Once selected, our guesst editors have a pretty free hand within a broad set of guidelines. They deliver to the *e-O&P* editorial board a set of articles of suitable quality, ready for publication, according to a pre-arranged schedule. This involves editors in inviting proposals for contributions, identifying authors, commissioning stimulating articles, reviewing, and where appropriate, critiquing drafts and proof-reading final copy copy in a spirit of critical friendship and liaising with the e-O&P Editorial Board.

About our Critical Friends

For their particular edition, guest editors often find it useful to create a small, temporary editorial team to support them, including Critical Friends. The *e-O&P* editorial board is happy to help them find such collaborators, and is on hand to explore any issues or concerns that arise, bearing in mind our limited time to engage in extensive, detailed reading or conversations.

We are always looking to expand *e-O&P*'s critical friendship network, which would be available to guest editors or individual authors on request. Depending on their preferences and any specific need, Critical Friends can help by reading drafts, offering constructive feedback, clarifying ideas, commenting on style, providing encouragement, or by proof-reading or copy-editing pre-publication texts. In return, this offers Critical Friends the opportunity to develop greater insight into, and awareness of possibilities for, their own writing and professional practice. They might even consider subsequently becoming a guest editor or author for *e-O&P*.

Are you interested in joining our exciting project?

If so, please contact one of us on the *e-O&P* editorial board as soon as possible. We'd love to hear from you.

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A note about AMED

AMED stands for the Association for Management Education and Development, www.amed.org.uk. We are a long-established membership organisation and educational charity devoted to developing people and organisations.

Our purpose is to serve as a forum for people who want to share, learn and experiment, and find support, encouragement, and innovative ways of communicating. Our conversations are open, constructive, and facilitated.

Through AMED, we strive to benefit our members and the wider society. Exclusive Member benefits include excellent professional indemnity cover at a significant discount, free copies of the quarterly journal *e-O&P*, and discounted fees for participation in a range of face-to-face events, special interest groups, and our interactive website. We aim to build on our three cornerstones of ***knowledge***, ***innovation*** and ***networking*** in the digital age. Wherever we can, AMED Members, Networkers and Guests seek to work with likeminded individuals and organisations to generate synergy and critical mass for change. www.amed.org.uk, or contact **Linda Williams**, our Membership Administrator, E: amedoffice@amed.org.uk, T: 0300 365 1247