

# more of an avalanche: Leah Clements

## transcript

**John Bloomfield** 00:02

So Leah's presentation is first and I'm just going to give a very short introduction. So Leah Clements is an artist based in London. Her practice is concerned with emotional experiences, the relationship between psychological and physical, and instances of self loss into people or worlds. During Leah's residency at Wysing, she has invited collaborators Rebecca Bly, Uma Breakdown, Elena Coleman, Alice Hattrick, and Lizzie Rose to form a new network of art practitioners who identify as crip, disabled or otherwise non conforming standard ideas of good health. So we'll hear from Leah now.

**Leah Clements** 00:41

Hello! So yeah, as John said, later this year, I'm going to be in residence here at Wysing to work on a project based around cripness and sickness. So crip is a term that maybe not everyone here will be familiar with. It describes a necessarily political position on illness and disability. cripness subscribes to the social model of disability which states that disability is caused by the way society is organized, rather than by a person's impairment or difference. It looks at ways of removing barriers that restrict life choices for disabled people. So an example I'd give is, humans invented stairs for non wheelchair users, so the wheelchair user is disabled by the system of stairs, because it wasn't built for them not by the fact they can't walk. Crip theory owes much to queer

theory, taking its basis of flowy-ness and applying it to identities forged in sickness and unhealth. This includes disability, chronic illness, mental illness, and more. So I began my investigations in cripsness and what this identity could offer me after being diagnosed with the chronic illness ME a few years ago. Since then, I've been in and out of hospital tests and appointments, including two 24 hour tests for narcolepsy, and being diagnosed with three separate anxiety disorders by psychiatrists. My health and its treatment fluctuates, which is the case for many with chronic illnesses. While I've been processing this, I've felt unable and also unwilling to separate it from my practice and so I started to look for critical approaches to illness within an art context. I read Park McArthur's texts sort of like a hug, 'Notes on Collectivity, Conviviality and Care' and Johanna Hedva's essay 'Sick Woman Theory' and I began to feel that there was already a framework and a community in place for me. I got in touch with the Canaries who are a collective of people with autoimmune disorders and other chronic illnesses, and they're mostly all working in art in some way, who experienced who support each other through experience and knowledge sharing. And the group's co founded by Jesse Cohen, Bonnie Swencionis and also, Carolyn Lazard, whose film 'Get Better Soon', is in the studio in this exhibition, and her text 'How to be a Person in the Age of Autoimmunity' is in the zines. I became a member of the Canaries and joined the conversation and I began to feel among my own. Most of this though, was happening in the US and I wanted this community near me. Britt Crips exists already, of course, an organization's like Shape Arts are doing really amazing things to combat ableism and there's a really rich soil to build on here. The Disability Arts Movement in the 80s and 90s led to sustained cultural and political production and activity, helping push towards disability rights legislation in 1995. Work by Tony Heaton, Alison Lomas, Tanya Rob and many more, and phrases and slogans like the Block Telethon protests 'Piss on Pity' and Matt

Fraser's survival of the shittest are still relevant today. Looking around me though, I felt that my community of Crips in my peer group of my generation was already there, but just not quite formed. I wanted to connect all the people I've spoken to individually here in the UK, who were thinking about this and living it but not living it quite communally. I applied to Wysing's open residency call with a project to found a network of art practitioners who identify as crip, disabled or otherwise non conforming to standard ideas of good health. Using the basis of Crip theory as a foundation for a community of people who exist outside of society's accepted idea of wellness. I proposed to invite five art practitioners who identify as sick or disabled to join me at the farmhouse just over there here at Wysing to about and research and develop some practical changes we could make, as well as a critical language that feels right for us and our new community. The reorganization of Wysing's residency application structure to make it as open and free as possible for the applicants to define for themselves meant there was a feeling of flexibility that would work particularly well for a group of Crips. The group is writer Rebecca Bly, artist and writer Uma Breakdown, artists Elena Coleman, writer Alice Hatrick, and artist Lizzie Rose. Once I put everyone in touch, recently, we found we had so much to say and share that we decided to meet up regularly in the lead up to the residency in October, because straightaway, the group already felt like an active thing. We've been meeting once a month with half the group together in real life and the other half online to catch up and talk about personal experiences, talk about a relevant text per month as a kind of reading group and we've also just started looking at a relevant artwork per month as well. So we've begun our work. Crips face many barriers to work, social life, day to day living, and political participation. For many of us who sometimes or often can't leave the house, or even the sofa or the bed. Johanna had the 'Sick Woman Theory' that I mentioned before, which gave me one of those first

revelatory moments on my current position, offers a framework for rethinking this participation. In it they reassess the Rentier model of politics as any action that's performed in public from the perspective of someone who cannot get their body in the street. They describe a period of illness in 2014 when Black Lives Matter, marches pass through the neighbourhood as they held up a sick fist in the air in solidarity. They write. I started to think about what modes of protest are afforded to sick people. It seems to me that many for whom Black Lives Matter is especially in service might not be able to be present for the marches because they were imprisoned by a job, the threat of being fired from their job if they marched or literal incarceration, and of course, the threat of violence and police brutality, but also because of illness or disability, or because they were caring for someone with an illness or disability. I thought of all the other invisible bodily bodies with their fists up tucked away and out of sight. They ask – how do you throw a brick through the window of a bank if you can't get out of bed and they restate the feminist mantra the personal is political, through the lens of cripness going on to say, Sick Women Theory is an insistence that most modes of political protest are internalized, lived, embodied suffering and no doubt invisible. The most anti capitalist protest is to care for another and to care for yourself, to take on the historically feminized and therefore invisible practice of nursing, nurturing, caring, to take seriously each other's vulnerability and fragility and precarity and support it, honour it and power to protect each other to enact and practice community, a radical kinship and interdependent sociality, a politics of care. When we're here in October, we plan to spend time with all of us physically together, living in the same space and working out what our individual needs are for ourselves and from an arts organization like Wysing. Beginning a new community now as six of us, we plan to found and put in place a way of communicating with others in this position and for this network to expand. We'll invite

some key people to the farmhouse to talk about the practicalities, politics and criticalities of sickness and cripness, people who have experience of accommodating specific needs about workers and people who have found ways to work in the art world as crips. I think some of the things we'll be talking about will be crip time. So doing things slower in an obviously time pressured social and work context, particularly in the art world. Asking for access for less visible or commonly understood needs. So alone time, having alone time and space, and needing to lie down have come up with really big ones in our discussion so far. So how can you nap in a gallery that you're working in, for example, cure and anti cure politics and the temptation to keep invisible illness invisible for fear of discrimination, and to read or come off as well. For those who can. We will carry out a workshop to publicly talk about crip issues to share some of what we're thinking about and to hear from other people. We plan to establish a consultancy for arts organizations to engage with in order to better accommodate the access needs of the artists, writers and other practitioners they work with and find ways of professionally and clearly defining our own individual specific requirements when entering into working relationships. And importantly, we will spend time sleeping, napping, crashing and decompressing. Something Rebecca Bligh said in our group email chain has really stuck with me. She said, It's so nice to be able to say we about something which is ongoing in my life and has been very solitary lately. I think this articulates the importance of bringing sickness and cripness out onto platforms like this one. Perhaps we can move from privately coping or not coping, to being able to identify as collective, support each other and find ways to engage in art and our work as crip and plural, rather than individually constantly trying to fit existing standards. I can't and don't want to separate my illness and cripness from my practice, because it forms the conditions and process I make my work in and through. Crip is a necessarily political

position, and it is a necessarily collective position. Our cripness affects the ways we partake and don't partake in a wider socio economic structure, through the consumption of medication, through the withdrawal of labor, through our unattendance of events, and how many of us there are. We plan to keep talking and maybe writing towards building on what already exists to further develop a critical language around cripness and sickness. I want this language to become more familiar, and I want thinking from a crip position to become a habit for anyone thinking practically and critically about art. I'm thankful to Lotte and John and everyone at Wysing for asking me to begin this conversation today ahead of the residency in October and I hope this conversation can continue beyond the residency and expand outwards to all the crips in their sick beds. Thank you. \*audience applause\*