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FOREWORD

ILONA SAGAR AND ADAM WALKER

Covid-time has come with a rush of writing about 'care'. The publications and PDFs pile up. We read about 'care' when practices of 'care' are under threat. We do not have time; we try to catch up. The uncaring conditions which continue to exacerbate the effects of the virus – hugely unequally distributed – are both the conditions which create this urgent need for 'care', and which could lead those individuals positioned to do so, clinging to rungs of fashionability on the ladder of capitalist competition, to claim a piece of the hot topic, to leverage 'care'. How to resist complicity? We need to write about 'care'.

At the beginning of the pandemic when we withdrew to a more remote place, there was a lot of discussion about unearthing text that spoke to this idea of isolation; how do we resist, protest, speak collectively when we cannot leave our bedrooms? We have become more attuned to working online, to exhibiting and thinking in this suspension. Early on in lockdown there was almost a sense of hope that these new ways of working would disassemble a neoliberal notion of labour and public space, but are we really creating more inclusive platforms or are these ways of discussing care still framed through an ableist discourse?

'I keep seeing quotes from *Sick Woman Theory* going around the internet. I wrote that piece more than five years ago, and it's both weird and not weird at all to see some of its passages play out in real life these days. the world's ableism has always been a thing, now it's just getting closer to those who normally don't feel it [...] it's true. Crip lives are lived like this always. we always have to stay the fuck home, wait and hope for the world to support us in ways that

never come. so: we find ways to support each other, to stay close even when we're far away. [...] I called the long-overdue halt of capitalism – which would happen once we were all ill, confined to bed, and unable to go to work – “motherfucking glorious.” i don't know, y'all, this doesn't seem that glorious'.¹

As Hevda points out, this quoting felt like misquoting. The routine and invisible isolation of chronic illness is a very different form of restriction to the mass shutdown universally felt, yet Hevda's work was being used interchangeably, their loudest points overshadowed in a desire to give voice to the collective rupture being lived through. To draw on knowledge produced through more marginalised understandings of the body and its social and political agency, in itself does not necessarily create more accessible spaces, the groundwork has to be done first. Our research group sought to challenge what these spaces can be. How do we care in a way that is more egalitarian, that involves more voices?

We read the manifesto – our Declaration of Care – and care glides and morphs, occasionally jumps, a thing easier to describe than define. Some statements seek to cut or intervene into the proceeding of the present. Others hold a space of respite, a vital pausing; an ellipsis for the possibility of ongoing being.

Care as a transaction or an act of transgression?
Together, these proclamations suggest a new grammar by way of intervention, a tentative rallying cry for resistance. Care in this pillar of declarations becomes not only a normative good but situates itself in the realm of power and politics; a practice to maintain in itself with precarious distinctions between the institutional inside and outside.

Care as a nodal point, conceptually constellated
amid bodies, sustaining, providing for;

amid accuracy, rigour, commitment;
amid cause, justice, equality;
amid future, past and present;
amid emotion, love, relationship;
amid myriad further outward spirals.

Are the words we don't say
as important as the ones we do?

As Sara Ahmed asks us to consider, words,
unlike muscles, become floppier, sag with use, unable
to hold up the actions they profess to support.²

Words which fill a space between moments of unspoken
care, and sites of unspoken, unspeakable violence.

Delete.

Felt, not expressed.

An urgent refusal of abstraction.

A coexistent resilience,
a domestic and social obligation.

How instead, on the page, on the screen, to find – to
generate, to sustain – a human, relational connection?
We circle *around* care, despite our need to care and to
be cared for. I think back to where we started: to Paul
Preciado and Judith Butler, to bodies in recovery and
bodies in assembly, to bodies that matter.³ To caring

touch, to care in embodiment. Where does the human sit; where do we sit?

I think these questions are profoundly alert to us all now. The moment we are living through, amid global uncertainty, reveals a discrepancy in the perception of what a body is supposed to do

(to be)

how it changes and affects change. A powerful image Preciado evokes in navigating the subject of care, is wondering how Foucault might have approached *The Birth of the Clinic* in the wake of his AIDS diagnosis.⁴ When things break, become ill, inoperable, it is in that moment they are most visible, the background suddenly foregrounded.

The edge spaces, where the substratum of life becomes explicitly volatile.

Across our work, health and social life, illness challenges how we understand our interdependency. The sick and marginalised – tethered to institutions but not always visible to them – circumnavigating daily life in an entanglement of glances, judgments and acknowledgments. We rely on other structures of care and support, disrupting the notion that personal experience, political rationality and critical awareness are maintained in separate categories of thought and action.

I think about neoliberal proclamations of “self-care”: how the rational productive subject is shorn of context, takes on personal, individual responsibility

for the maintenance and reproduction of their own potential. Foucault, crucially, wrote of care for the self *and the other*.⁵ In contrast to this neoliberal self-care, it is premised on committed, active participation in *one another's* mutual self-examination.

Whose life will be protected and maintained and whose will be collateral? A question rooted in the potency of the word "only"; Covid "only" is dangerous to the sick, disabled and old. The affect of precarity is informed by the notion that a civil bond is forged or frayed, care somehow exposes this most acutely. We are perpetually interdependent; how do we organise based on this recognition?

I recall Marina Vishmidt too: how the body – to embody – she writes, frequently becomes overly literal as a theoretical, political device.⁶ What of embodied concepts, embodied politics? The extending beyond our corporeal skins, in reflexive acknowledgement of our corporeal skins?

I keep returning to Vishmidt's text. She brings into immediate focus how bodies perform the architecture of power, and how consequently embodiment becomes the description for a variety of forms of mapping, metaphor, analogy and blurring. Bodies are reliant on social systems of support, complexly human and technical. We cannot speak about bodies without speaking about the environments, machines and infrastructure surrounding them.

A refuting of the liberal individual subject, who always ignores their social context. Bodies in enmeshment. But also bodies which are persons. Persons who are

not entirely held in place and who might pull on the fibres woven between and through and as them.

Care is not only a physical act, it's an ongoing attention. A close looking as much about recovery as about preservation. What we choose to value and maintain mirrors the ideological values we care to uphold. Joan Tronto defines care as 'everything that we do to maintain, continue, and repair "our world" so that we can live in it as well as possible. That world includes our bodies, ourselves, and our environment, all of which we seek to interweave in a complex, life sustaining web'.⁶

Care as a mesh, a political-ethical-material tangle of filament-fibres by which we might think and act, by which we might pass within and between, amid but apart from the dominant structure. In, but not of, the violent abstraction. Resilient. Resistant.

Caring about, taking care, receiving care, caring for, taking care of each other.

Our relationships as situations of codependent, malleable structures of power. Together we have read around a feminist critique of the politics of care including Mierle Laderman Ukeles' FOR MAINTENANCE ART 1969! which makes the link between the labour of care, both domestic and infrastructural, explicit.⁷

How do we address our own labour within this?
Oscillating between our roles as caregivers
and receivers:
the professional, pastoral and personal.

Here, unpaid, caring about the subject of care,
understanding how the parts of us fit becomes
increasingly problematic.

Why care? How do we care? What do we care about?

There is a tension at the threshold of the body, of what is public. A pressure, internalised by the subject, to care more for and about the object extended into the world than the labours underpinning this. Care must extend both ways, break the surface tension and partake in the depths beyond, contest their separation.

If care is anything, it is complex. Not a complexity to back away from, but rather, a complexity to practice – that must be practiced – continuously spooling onward.

Perhaps our collective work here is to acknowledge that these processes are not infallible but something more transferable, fluid and interchangeable – a symbolic transposition of matter, lived experience, bodily function and emotional complexity? Care becomes an economy of attention, an act of learning or maintenance that requires a gaze, a type of sight on the subject of recovery, a careful looking that is housed in the body, its archives and possible futures.

A system of history concealed, as Anne Boyer articulates, 'within the viscous layers of the body and its porous infrastructures; this system we mistake for everything resides in a system-containing object like a tumour inside a system-containing object like a cancer patient who is a system-containing object inside a clinic, all of it also containing these systems of history'.⁸

Systems can be hard, bruising and painful to the bodies which encounter them.

If care is anything, it is simple. A being, a touching, a feeling human. An affective, emotive, material connection to the other to whom we are both connected and yet distinct. Care is both the matter and logic of these spaces – these motions – vital in the uneven vulnerability which ensues.

Attending to, maintaining, holding, a duty to; work, a provision, an asset, status or kinship. Holding space, administration, time, agency and voice.

Care – a plural, equal, dynamic care – neither stems from nor upholds a transcendental notion of ‘The Human’; it does not reify humanity. Instead, caring human-ness is a porous one, a continually in-process, never-resolving one. The past folds onto the present: to presume to write the future without acknowledging this is an act of careless violence. The wake ripples onward, mourning continues.⁹

Care, welfare and maintenance are more than the limbs of a transactional infrastructure; they are an embodied state with the potential to become transgressive actions.

We parse back and forth seeking out error, clarity, affects of textuality, things we missed and things we change back. Timothy C. Campbell writes of the improper text which ‘does not fit’, tethering in some way to the non-proprietary, non-individuated human.¹⁰ Bodies and words; words and bodies. We

write improperly; we accept our acceptances. Our porous skins nevertheless contain us.

'Language is a skin: I rub my language against the other. It is as if I had words instead of fingers, or fingers at the tip of my words.'¹¹

We allow ourselves to leap, moments of necessary carelessness premised on commitment to the work of care. An elastic cord stretching between the here and now, the once and still, the hopes and dreams, the pains and sorrows. Care as an ethical-methodological milieu holding together this seeming impossibility.

1. Johanna Hedva [@bighedva], 15 March 2020, <https://www.instagram.com/p/B9wdUvBIps6/> (accessed 22 June 2021).

2. Sara Ahmed, 'Uses of Use – Diversity, Utility and the University', *CRASSH Impact Lecture Series Clare College Cambridge University*, 2 March 2018.

3. Paul B. Preciado, 'The Losers Conspiracy', *Artforum*, 2020, <https://www.artforum.com/slant/paul-b-preciado-on-life-after-covid-19-82586> (accessed 17 June 2021); Judith Butler, 'Bodies in Alliance and the Politics of the Street', *transversal texts* (2011), <https://transversal.at/transversal/1011/butler/en> (accessed 2 January 2021).

4. Paul B. Preciado, 'Learning from the Virus', *Artforum*, May/June 2020, <https://www.artforum.com/print/202005/paul-b-preciado-82823> (accessed 11 June 2021).

5. Michel Foucault, *The Care of the Self: The History of Sexuality Volume 3*, trans. by Robert Hurley, New York NY: Pantheon Books, 1986, p. 53.

6. Marina Vishmidt, 'Bodies in space: On the ends of vulnerability', *Radical Philosophy*, 2:8, (2020), 33–46, <https://www.radicalphilosophy.com/article/bodies-in-space> (accessed 2 January 2021).

7. Joan C. Tronto, *Moral Boundaries: A Political Argument for an Ethic of Care*, New York NY: Routledge, 1993, p. 103; Mierle Laderman Ukeles FOR MAINTENANCE ART 1969! A proposal for an exhibition "CARE".

8. Anne Boyer, *The Undying: Pain, Vulnerability, Mortality, Medicine, Art, Time, Dreams, Data, Exhaustion, Cancer, and Care*, London: Allen Lane, 2019, p. 56.

9. I want to specifically acknowledge the wake (as both outward ripples and mourning-period) which Christina Sharpe writes within: that of an experience of blackness. Racism continues, horrifically, in carelessness. Christina Sharpe, *In the Wake: On Blackness and Being*, Durham NC: Duke University Press, 2016.

10. Timothy C. Campbell, *Improper Life: Technology and Biopolitics from Heidegger to Agamben*, Minneapolis MN: University of Minnesota Press, 2011, pp. 5-6.

11. Roland Barthes, *A Lover's Discourse: Fragments*, trans. by Richard Howard, New York: Penguin Books, 1990, p. 73.