

iLiana Fokianaki

The Bureau of Care: Introductory Notes on the Care-less and Care-full

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The Bureau of Care: Introductory Notes on the Care-less and Care-full

This text was co-commissioned by Katia Krupennikova and Inga Lāce as part of four special contributions to e-flux journal – two texts published in the present November 2020 issue, and two more in the upcoming February 2021 issue. (The other November text in this series is “Enjoy Your Security: On Kafka’s ‘The Burrow’” by Aaron Schuster.) This collaboration aims to expand on the themes raised in the contemporary art festival Survival Kit 11. Titled “Being Safe Is Scary,” after a piece by artist Banu Cennetoğlu for Documenta 14, Survival Kit 11 took place in Riga from September 4 to October 4, 2020. It was organized by the Latvian Centre for Contemporary Art and curated by Katia Krupennikova.

Exploring the mechanisms shaping the politics of safety, and taking the heavily charged title “Being Safe Is Scary,” the festival aimed to establish a continuity of urgent discourse on security and political violence. At the same time, the festival sought to explore how it might be possible to transform the suppositions that undergird this discourse – reconnecting safety to practices of love, intimacy, sharing, commonality, mutual support, attention, care for each other, and care for the environment.

– Editors

In previous texts, I have described a new form of power that I named “narcissistic authoritarian statism.” This power is visible globally through statesmen, national leaders, and their policies, and manifests under the guise of democracy. In a two-part essay for *e-flux journal*, I first defined narcissistic authoritarian statism (NAS) as a neoliberal power structure that merges old components of the nation-state with contemporary forms of corporate transnationalism defined by narcissism.¹ I discussed its mechanisms of slow and fast violence, normalized through policy and legislation, and examined how art institutions can be both complicit and critical. In the past year, a prominent characteristic of this type of power and its forms of violence was made brutally visible through the emergence of Covid-19, and the diminishing of care at all levels of services in many countries. To continue an analysis of NAS in light of these developments, I want to ask what this year’s events mean in relation to the politics of care and their legacies, and how the art institution is implicated.

The various forms of care provided by the welfare state model have been dismantled: health care, especially for the disenfranchised, the poor, and the unemployed; care of the mentally and physically differently abled, the elderly, and victims of domestic abuse; and on a more conceptual level, the care provided by



Petra Bauer & SCOT-PEP, *Workers!*, 2018. Film still. Photo: Caroline Bridges.

social justice, intersectional alliances, collective rights, and environmental justice. While depriving citizens of care, NAS nonetheless capitalizes on the individualist notion of care, widely promoted as “self-care” through an industry with billions in revenues. By “leaning-in” and taking care of oneself, contemporary subjectivities of the so-called “developed” world are tasked with the care of their overworked bodies, but are less and less interested in the well-being of bodies that are outside of the immediate realm of their family, class, workplace, city, country, and continent. They are further burdened with individual responsibility for their own care, since care has lost its character as a human right and has become a paid service.

Through a complete disregard for the politics and ethics of care, contemporary power clearly desires to banish the commons from collective consciousness. And I suspect that this desire is not only related to the classic NAS rhetoric of managing financial losses and “tidying up” one’s economy. It is also a strategic and premeditated effort to quell any possibility for people to gather, discuss, organize, and effectively resist the nativist narratives, “alternative facts,” and violent realities it aims to impose. I will discuss the conceptualization of care and the problems that arise from the feminization of care in contemporary society, but I will also examine the new typologies of “care” practiced by those who decide to live and organize themselves *otherwise* – and who pave the way for imagining and practicing alternative forms of collective caring.

1. Some Comments on the His-tory of Care

The word “care” derives from the Latin *cura*, which according to some linguists refers to a mythological figure known as Cura. The myth of Cura is found in the writings of first-century Roman author Gaius Julius Hyginus, who documented the oral histories of his time in his book *Fabulae* (Myths).² *Fabulae* consists of some three hundred very short myths that might otherwise be lost to history, and is valuable for its references to authors of Greek tragedy such as Aeschylus. There are very few manuscripts of *Fabulae* left, and only parts of the original book survive, with the first translation from 1535 found in the library of a Bavarian monastery; another fragment is today in the Vatican library. The myths of the past are kept in the safes of patriarchal religiosity.

The myth of Cura tells the story of the creation of the first human. Cura, a female goddess, creates the figure of a man from clay. The god Zeus arrives on the scene and Cura asks him to give the lifeless figure a soul and a spirit,

and for it to carry her name. Zeus grants her first wish, but in true patriarchal fashion insists that the new man bear his name. At this point the goddess Earth appears, also claiming that the figure should be named after her, since its body was created from her soil. The decision is left to the fourth deity that appears, Cronus, who decides that Cura will own the entity throughout its life, Zeus can have the spirit of the figure after its death, and Earth can keep its body. The name Cronus decides upon is *homo* (human), because the being was made from *humus*, soil.

This typical fable from antiquity carves out the dual character of care. Cura forms and “owns” humans but also carries their burden. In Latin, *cura* had a double meaning. On the one hand it signified worries and anxiety due to the stress of having to care for things and people and being burdened by responsibilities. On the other hand it signified what is commonly known as care today: the satisfaction of caring for others, the word having a positive connotation of devotion to caring for someone or something.

The myth of Cura, and the dual meaning of the Latin word, is revived in the writings of philosopher Martin Heidegger. In his seminal *Being and Time*, he equates Cura with his own concept of Dasein (Being-in-the-world).³ Heidegger extracts and highlights the role of Cura as a creator, very much opposite to the dominant traditional Christian genealogies of man proposed up to that time. Thus Heidegger breaks with the accepted and normalized notion of woman as God’s second creation after man, incapable of creation herself. Yet his understanding of care is limited by the singular logic of individual versus society. Heidegger’s Dasein is an entity that is structurally “with” others but separated from them.⁴ He seems to propose an ethics of care – that is, a cultivation of the self through the act of care – but does not understand or analyze care as a collective endeavor and way of being.

Care is the most important component of Heidegger’s explanation of Being-in-the-world. But the word for “care” in German – *Sorge* – also means “worry” or “concern.” On a first reading, his definition of care seems to challenge the common understanding of care, albeit from an individual perspective; care is an act by one individual upon others, and is a form of “betterment of the self” (both through the care for oneself and the care for others). But looking at Heidegger today, I cannot help but wonder whether his conception of care stops at the individual’s relation with the world and others, whether he is at all interested in the potential and power of collective care. Dasein is described as the idea of “being-with-others,” but Heidegger also refers to the limitations imposed by these

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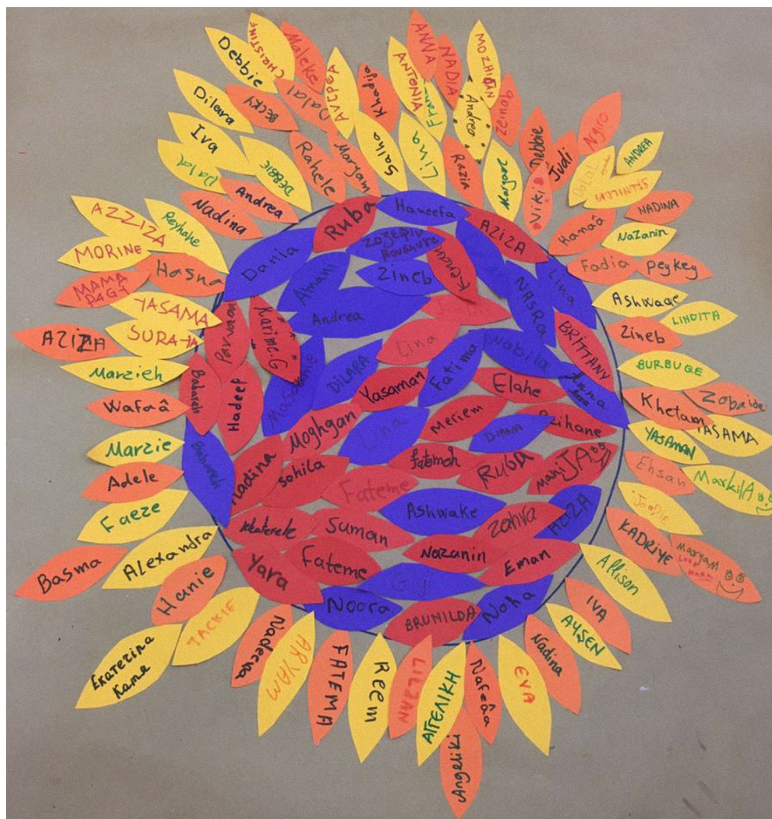
others. It is possible that Heidegger (and other thinkers and writers after him) prepared the ground for the concept of care to be looked at solely through an analysis of the individual and his/her relationship to others rather than as a collective practice to begin with. Such academic legacies of Eurocentric thought may have laid the groundwork for the “good charitable” care of neoliberal subjectivities today.

In contrast, feminist theorists and activists have focused in recent decades on the idea of care as a collective responsibility and collective act, performed and embodied by a community. Throughout history this position has been the cornerstone of indigenous knowledges and practices. Building on these existing knowledges and practices, contemporary feminisms enact collective care. One such example is found in the collective care performed by Women on Waves, a Dutch NGO founded by Rebecca Gomberts, which provides tool kits for nonsurgical self-abortion as well as early abortion services and education to women in countries with restrictive abortion laws. With their so-called Abortion Ships, Women on Waves takes advantage of laws defining international waters and borders, to sail between countries where abortion is illegal. Another example of collective medical care is the

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Catalan collective GynePunk, which provides women with pap smear tests, DIY and DIT (do-it-together) tool kits, diagnostic lab tests, and techniques structured on what they term “ancestral body wisdom.”⁵ The latter echoes the traditions of many First Nations and indigenous peoples and the way they understand and care for their community and for nature. Māori notions such as *manaakitanga* (caring for and supporting others) and *kaitiakitanga* (caretaking for the environment and people) are always discussed as collective practices. In the words of Mexican indigenous filmmaker Jade Begay, “Now more than ever it is imperative for us to decolonize from individualism and reconnect with ways of community care.”⁶

As is the case with GynePunk, collective care often derives from and is inspired by various premodern (or non-Western modern, or other-than-modern) traditions and non-patriarchal social structures, some characterized by matriarchal relations, where the sharing of care at all levels of human activity – perhaps extending also to the nonhuman realm – shapes the way people understand and exist in the world. The political subjectivity of certain indigenous groups in Guatemala, for instance, is perceived as “a collective and community one,



Collage made by women for International Women's Day, March 8, 2017. Copyright: Melissa Center for Migrant Women, Athens.

not a liberal one in which an individual citizen exists, represented and protected by the State,” in the words of theorist and activist Gladys Tzul.⁷ This also translates into the way subjects understand themselves; the politics and ethics of care are less about the burden of responsibility, or the idealistic and “charitable” act of care that makes one a better person, and more about collective joy and fulfillment. Patriarchy and NAS have tried to erase and sideline these histories as much as possible. Thus, the current structures of society, shaped by the legacies of colonialism, imperialism, the Industrial Revolution, and globalization, have caused many to understand care more as an individual responsibility than a collective joy.

2. Diminishing Care and its Feminization

The sidelining of the collective joy of care, and the absence of state-provided care on all fronts, has become more visible as a result of the deadly Covid-19 pandemic. Given the general decline of care and the propagation of care as an individual and solitary act, care and its labor have been systematically undervalued for much longer than just this year. Patriarchal societies, especially since the seventeenth century, have made sure that all forms of labor linked with care are widely identified with women and their supposed innate desire to facilitate care for their families and communities. Despite the feminist revolution of the 1970s, this belief remains strong to this day, and is continuously revived by the descendants of Phyllis Schlafly and their contemporary Tea Parties.

In this framework, care labor has been treated as a gendered responsibility following from “natural” behavior. From the second wave of feminism to today, many feminist theorists – from Shulamith Firestone and Silvia Federici to Christine Delphy – have highlighted the link between care in the household and productivity in the marketplace, especially with initiatives like Wages for Housework. Some forty years later, and with the clarity provided by a global pandemic in turbo-capitalist times, it is even more evident that care labor, whether paid or unpaid, remains feminized. When paid, it is associated with low wages and poor working conditions.⁸ As both Silvia Federici and Encarnación Gutiérrez Rodríguez have argued, the class that performs this work is the epitome of precarious, and is made up overwhelmingly of women.⁹ But even when not performed exclusively by women, this work remains feminized; look, for instance, at the thousands of workers – women and otherwise – employed in new types of care labor during the pandemic, such as delivery people, funeral home assistants, morticians, garbage collectors, sex

workers, educators, and nurses.

When it comes to unpaid care labor, the legacies of feminist struggles (mainly in so-called first-world economies) are evident in neoliberal state policies that recognize the monetary value of care work through benefits for nonworking parents and caretakers – although in recent decades such benefits have been reduced or completely cut. An important contribution to understanding this process is the research of scholars Sabrina Schmitt, Gerd Mutz, and Birgit Erbe, in their paper “Care Economies: Feminist Contributions and Debates in Economic Theory.”¹⁰ They examine how care is understood and provided through different manifestations of power – state, market, civil society, and household – and how these structures sustain social injustices. They focus on current feminist proposals regarding collective care and its role in shaping new forms of economy; for example, feminist theologian Ina Praetorius has proposed that the decline of the welfare state can be countered by incorporating collective care into government policy. In 2016, Praetorius participated in a three-day workshop organized by the late David Graeber and the Heinrich Böll Foundation, where she argued that care should not be talked about in terms of economic value. She called value a “nineteenth century concept of white male Europeans,” which prompted an interesting debate on labor valorization within the care economy.¹¹

Unpaid care labor and paid care labor, and the way they are valorized, have become even more closely connected in recent decades. As women from “first-world” economies have entered the waged workforce, their formerly unwaged labor has been passed on to predominantly migrant women from so-called “second-” and “third-world” economies, who face low pay and precarious working conditions, often living in uncertainty with zero-hour and flex-working contracts. Migration and the feminization of labor are inextricably connected. So are the burden of care labor, its low monetary value, and its close relationship to inequality. The need for a fundamental restructuring of care and care work has prompted feminists to organize in movements that call for a care-ful society. They critique neoliberal policies and turbo-capitalism while promoting a feminist commons, a redistribution of power, social justice, and ecological consciousness. One exemplary group is Madrid-based Precarias a La Deriva, founded in 2002. The *derivas* were inspired by the idea of coming together to create a cartography of feminized precarious working and living conditions by sharing experiences and reflections, for common struggle and resistance.¹²

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In a 2006 paper, the collective discussed what they call a “physiognomy of the crisis of care,” identifying four of its characteristics:

1. “The passage from the Welfare State to ... ‘risk management.’”
2. “The externalization of the home: many of the tasks that were previously conducted in the home now are resolved in the market.”
3. “The lack of time, resources, recognition, and desire for taking charge of nonremunerated care.”
4. “The crisis (and destruction) of worker neighborhoods and their strong sense of community,” and “the privatization of public spaces,” which hinders the construction of “bonds ... and relationships of solidarity and care.”¹³

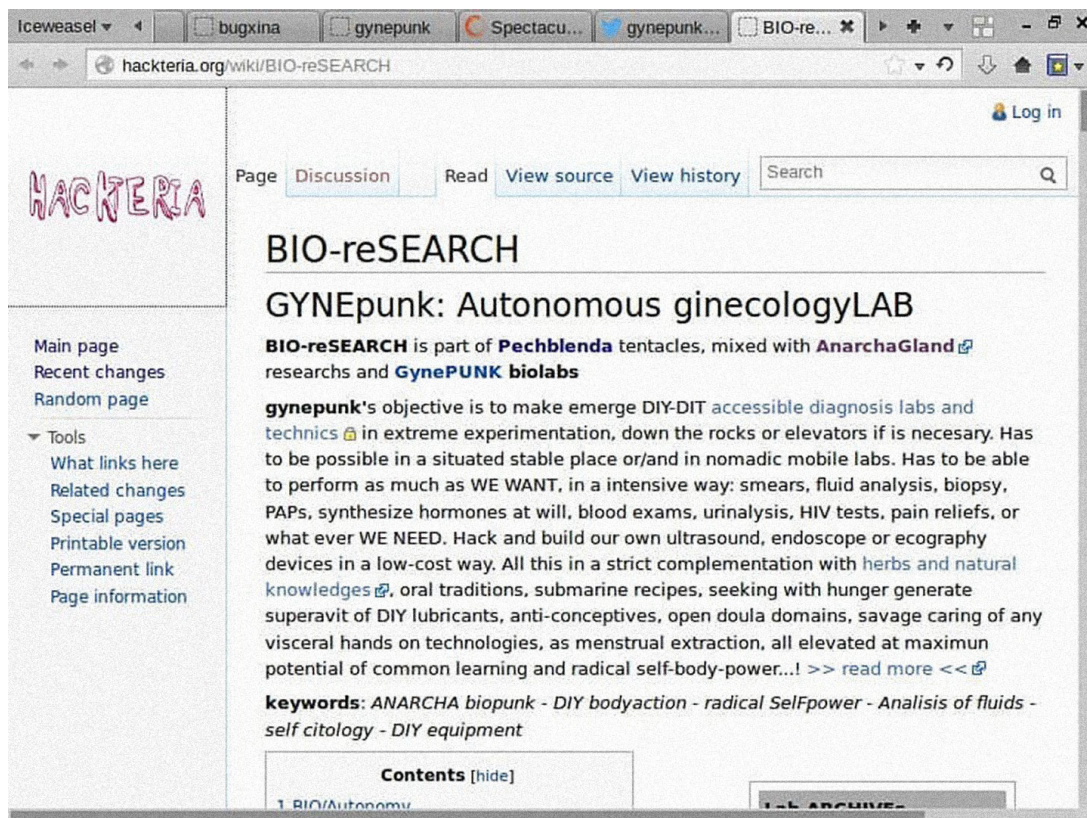
This last element has been at the forefront of discussions of collective care in the “state of exception” of the pandemic. We can learn a lot from Precarias a La Deriva’s proposal for “a care that appears here as a mode of taking charge of bodies opposed to the securitary logic, because, in place of containment, it seeks the sustainability of life and, in place of fear, it bases itself on cooperation, interdependence, the gift, and social ecology.”¹⁴

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3. Organizing around Care

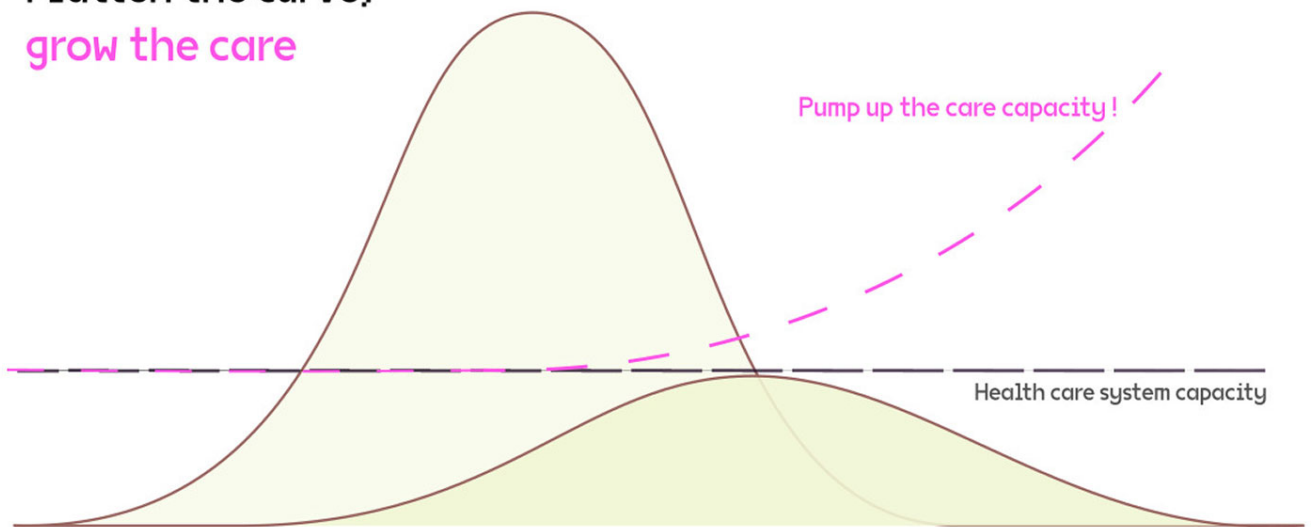
What the *derivas* argued in 2006 is even more clear today: the only transformative approach to organizing around the concept of care is through a collective, feminist, intersectional perspective. What we need is a kind of *bureau of care* that care-fully considers care as a collective and structural practice not only for others but *with* others. It is thus crucial to think of organization in a dual sense: to re-organize the thinking processes and theoretical threads of the last decade, but also to organize physically so as to enact collective care.

While many theoretical threads are relevant here, of key importance is to reverse the usual neoliberal, for-profit appropriation of knowledge arising from civil society, indigenous practices, and activism, and avoid translating it into a rigid, theoretical trajectory of collective care. Rather, we must directly look to those who practice collective care today so as to contour, frame, and define their work as a collective care paradigm. From movements and collectives, workers’ unions and activist circles, we can “take instructions” on how collective care has been enacted, even as it has been under continuous assault. In my native Greece, initiatives such as the public kitchen set up by O Allos Anthropos,



GynePunk’s entry at Hackeria.org. See <https://www.hackteria.org/wiki/BIO-reSEARCH>.

Flatten the curve,
grow the care



Graph from the article "Flatten the Curve, Grow the Care" by Pirate Care, 2020.

and organizations like the Piraeus Open School for Migrants and Melissa, offer such knowledge.

O Allos Anthropos (“The Other Human”) is an organization that refuses to be framed or validated by state or supra-state structures and their funding mechanisms. It is not an official institution and it does not accept state or EU funding; it is supported solely by individual donations and voluntary work. It was started in 2012 by a forty-year-old unemployed man who one day saw two boys fighting over food scraps in an open-air market in his central Athens neighborhood. The next day the man prepared food at his home and returned to the market to share it with others. The initiative grew exponentially; as of this writing more than two thousand volunteers have cooked, shared, and distributed upwards of five million servings of food.

The Piraeus Open School for Migrants has been active since 2005, with the aim of supporting immigrants and refugees residing in Greece through education, training, and cultural activities. It operates on principles of self-organization and communal democracy. All decisions are made by assemblies that include teachers, parents, and students, seeking to “create a broad social front to defend the character of education as a free social good that, as such, will be pluralistic.”¹⁵ Similarly, Melissa is a network for migrant and refugee women living in Greece. Founded in September 2014 with the direct involvement of migrant women leaders, it aims to create and sustain bonds among women of different backgrounds, inspired by the word *melissa*, which in Greek means “bee,” emphasizing the cooperative character of beehives, and consequently collective practices of care. Similar examples can be found all over the globe, and are a true indicator of how feminisms focus on collective care as a response to the patriarchal face of NAS.

4. The Politics of Care and the Art Institution

Care and its politics have been a subject of concern to the art world, made all the more urgent by the global pandemic. But is it a real concern that can lead to changes in the way we operate in our institutions and working relationships, or is it merely surface level? How can care, if studied care-fully, provide solutions to the various problems that art institutions and art workers face? How is it that contemporary art institutions are keen – and comfortable – to talk about care when they have been so *care-less*?

The global pandemic has brought the behavior of the care-less institution into the light. In the first months of the pandemic, the most precarious workers at major institutions

like the New Museum and the Tate were fired or put on furlough, which prompted strong resistance.¹⁶ The salary disparities between art workers and the heads of their institutions in both the US and Europe reflect the increasing class disparity of the first two decades of the twenty-first century. Decisions about the distribution of emergency funds and the way labor is valorized, made by boards and managing directors, have not reflected a politics or ethics of care.¹⁷ Furthermore, for decades institutions have often been care-less in relation to their audiences, failing in their programming to address anyone beyond the specialized and trained art audiences that belong to a certain class. Leaders of institutions have also been callously care-less in their public remarks about contemporary society and identity politics. The global Black Lives Matter movement has called attention to this in 2020, and institutions are now clamoring to prove their “wokeness,” often in care-less ways – or worse, they continue to refuse responsibility for their care-lessness through gaslighting, silencing, and sabotaging staff seeking to unionize.

Since 2019 initiatives such as “A Better Guggenheim” have highlighted salary disparities and racial discrimination at major museums. This initiative was prompted by the exhibition “Basquiat’s Defacement: The Untold Story,” whose curator Chaédria LaBouvier was not fully acknowledged by the Guggenheim for her curatorial and academic input. This sparked a public debate on the ways the museum has care-lessly addressed (or completely failed to address) racial equality.¹⁸ By investigating misconduct and giving public support to workers who are harmed, initiatives of this kind attempt to provide the collective care that the institutions so abjectly fail to provide. A Better Guggenheim’s mission statement articulates “a desire to uplift those who had for so long been subdued and silenced,” with the aim of “building the community we wish existed within the museum and offer a path to restorative justice for those disempowered and erased.”¹⁹ Identifying and documenting the harmful and care-less ways these institutions operate, as well as creating a support structure for the precarious workers of institutions, is one crucial form of collective care.

Thankfully, some art institutions – mainly small- and medium-sized ones – are care-fully programming and practicing collective care. Since 2014, Casco Art Institute in the Netherlands has been developing a program of study with artist Annette Krauss, named “Site for Unlearning.” It is an ongoing collaborative research project focused on the power structures of the art institution and “how rarely we question

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the social norms and structures that we internalize, and thereby sustain. Krauss deploys ‘unlearning’ as a tool to collectively reflect on our habits, so that we can adapt our ways of behaving and thinking towards a more common practice.”²⁰ In similar vein, curator Lucy Lopez researches collective care in relation to the art institution. She cofounded the London-based space Jupiter Woods, which is based on a model of “slow production,” and has initiated curatorial research projects that examine “types of exchange and economic relations that are championed and prioritised through the work of small-scale grassroots art organisations.”²¹

Artist Petra Bauer has long been a firm believer in a collective approach to film production, inspired by feminist filmmakers who have highlighted the importance of making films *with* their subjects rather than about them. Bauer’s film *Sisters!* (2011) was made in collaboration with the Southall Black Sisters, an advocacy service for women from black and minority ethnic backgrounds who face abuse or asylum difficulties. Her film *Workers!* (2016) was also a collaborative endeavor, this time with SCOT-PEP, a sex worker-led organization in Scotland. Recently, Bauer founded a collective called the Feminist Research Group. Together with curators and theorists Nataša Petrešin-Bachelez, Marius Dybwad Brandrud, Binna Choi, Kirsten Lloyd, Frances Stacey, and Marina Vishmidt, the group explores collective practices of care through an intersectional feminist lens. Petrešin-Bachelez, along with fellow curator Elena Sorokina, is also forming alliances through their new Initiative for Practices and Visions of Radical Care.

Other examples abound, sketching a blueprint for future cultural practice. Forensic Architecture has made truth and truth-telling a form of collective care by exposing slow and fast violence. The Rojava Film Commune’s collective task has been to spread the ecologically conscious, intersectional-feminist paradigm of the Rojava Revolution outside of Syria’s geopolitical borders. The duo of Libia Castro and Ólafur Ólafsson has been engaged for some years in their project “In Search of Magic – Proposal for a New Constitution for the Republic of Iceland,” working with many groups in Ólafsson’s native Iceland to enact collective care for the polis: they have recently concluded a big demonstration-performance that, together with hundreds of citizens, demanded the reconfiguration of the Icelandic constitution. Artist collective Chto Delat’s many projects “based on commoning and [the] solidarity economy,” such as “The School of Engaged Art” and the cultural space “Rosa’s House for Culture,” have the goal of “creating a community of comrades engaging into cultural

activity and self-education.”²²

Possibly the most potent collective-care initiative I have encountered recently is the Pirate Care Project. Founded by Valeria Graziano, Marcell Mars, and Tomislav Medak, Pirate Care is a transnational research network of activists, scholars, and cultural practitioners who stand against the criminalization of solidarity.²³ Since late 2019 they have been documenting numerous efforts and initiatives around the globe that aim to oppose neoliberal policies that dismantle care. They have also organized meetings and a reading group, and in 2021 will present an exhibition identifying the problematics of care as a “global crisis.”²⁴ Their vast research is available on their website and forms an impressive library on the politics and ethics of care.

The examples discussed here show that for art workers, collective care has become an increasingly important paradigm for transforming our working and living conditions. As we take up this work, it is important that we treat activists and care workers from other professional fields as equal partners, or better yet, as *primary* guides, in our efforts to change art institutions. We must move from institutional critique to institutional transformation. For years now institutional critique has identified the problems, but true institutional change has been slow and minimal. The same problems have been popping up since the seventies: salary disparities, class and racial inequality, whiteness, heteronormativity, and so on.

NAS has brought new forms of violence into the mix, creating toxic environments that deplete care as a concept. We need to structure the institution differently, in accordance with the idea of collective care. For instance, imagine a museum where the salaries of all staff members are calculated with the same valorization method used to calculate a director’s salary. How can care be enacted by all equally in the institution? Care must be enacted not just by a few people for the sake of others, but on the premise that all will benefit. This may sound romantic and utopian (I blame capitalist patriarchy for vilifying romance and utopia) but it simply requires reworking power structures and responsibilities. We can and should learn from the structures of NGOs, from refugee squats, and from care initiatives that operate outside state systems. These organizational structures are often based on the principle of collective responsibility, showing that working within a group can be more effective for all, not just those explicitly suffering.

While past institutional critique has focused on making inequalities visible, it is now time to actually change our institutions, taking inspiration from intersectional feminist,

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indigenous, queer, and black struggle and demanding the redistribution of care. We have to seize the possibilities enabled by the legacies of countless forms of collective care: healers, care workers, parents, social workers, educators, and cultural workers. We must be guided by those who have successfully forged counter-power structures against efforts to quash collective care as a way of being. Taking lessons from existing collectives is necessary for the contemporary art institution to change its current shape, which is somehow still stuck in the nineties. We can start by simply reformulating the way we understand cultural practice: we should experiment with horizontal structures, the collective sharing of knowledge, the collective formulation of programming goals, a real engagement with audiences instead of tin-pot marketing solutions, a reevaluation of the compensation and value of all workers, rotating tasks and leadership roles, sourcing material and workers locally, and using less fossil fuel. And really: less paper. The blueprints were written eons ago. Our task is a matter of implementation. This is how we will dismantle and transform the institutions of old into beehives of collective care.

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Which in turn led in June 2020 to the release of a joint letter by the curatorial team of the museum, and ultimately the removal of chief curator Nancy Spector in October 2020. See the website of A Better Guggenheim <https://abetterguggenheim.com/>.

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Lucy Lopez, "Collective Practices: Instituting with Care," lecture delivered at Museum Sztuki in Łódź, Poland.

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See the group's website <https://pirate.care/>.

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