

iLiana Fokianaki

A Bureau for Self-Care: Interdependence versus Individualism

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It feels like I am talking to you from the future, or the past, because the present is like a continuous, monotonous screeching sound. I have begun to believe I must be an extra in *Groundhog Day*. I am writing to you from a self-made office. My small, jerry-rigged desk, approximately sixty centimeters in length, is made from a metal shelf. We have been confined to the house for about five months now, with very few days when measures have been loosened and we're allowed greater freedom. We have to text the government every time we leave the house.

Living in a small flat in a pandemic with your partner and dog means reconceptualizing the architecture of your domestic environment. I work in a corner that was formerly occupied by plants, and the plants are now in front of a window, which I guess is better for them. The plants are in an altered state of orgasmic growth, taking over walls, growing immense roots that spread out wildly on the floor, obstructing the movement of our dog but also giving her shelter and shade on sunny days. She is happier, calmer, and more eager to learn new tricks. Perhaps our continual presence has provided a more diligent, meticulous type of care for both dog and plants. Our nonhuman kin are thriving in this space of confinement, whereas the humans feel not only cramped, but very uncertain about the future. Our collective closeness, however, has changed the relations of care within the space. The humans here are discovering a new purpose: prioritizing care – care for others as well as ourselves. In fact, caring for others changes the way one cares for oneself. Care and self-care become interdependent.

States of Change

The pandemic has altered the state of so many things: the state of relationships, the state of movement. Zooming out of my own personal confinement, I think of the large-scale things that have changed: the way nation-states function, the way care systems for whole societies work, the way citizens conceive of their liberties and responsibilities. Such changes have made it necessary to place care at the forefront of conversations, locally and internationally. However, states and societies remain trapped in technocratic discussions about legislative measures, vaccination campaigns, and the distribution of services and funds. I would like to focus on self-care through a reading of the collective, distinct from the general notion of self-care as concerning individuals (an act for one's self).

The pandemic has shown that when it comes to providing care for those who care for us, we have a long way to go. Millions of care



Libia Castro & Ólafur Ólafsson, *In Search of Magic: Proposal for a New Constitution for The Republic of Iceland*, 2020. View of polyphonic performance-demonstration, Reykjavik Art Museum, Reykjavik's city center and Austurvöllur Square, Iceland. Walking with the work: Libia Castro & Ólafur Ólafsson and The Magic Team, 2010 National Assembly Note: **DO NOT BULLSHIT YOURSELVES AWAY FROM THE RESULTS OF THE CONSTITUTIONAL ASSEMBLY**, 2020. Photo: Owen Fiene.

workers have been on the ground trying to hold us all together. Yet the primary way we have acknowledged this work is by clapping from balconies. However moving this display has been, it doesn't begin to do justice to the immense sacrifices these workers have made for those of us with the privilege to stay home. Healthcare workers, funeral home workers, couriers, and many other workers have endangered their own lives for others, and have put their self-care aside. It is crucial to recognize that care work is gendered, racialized, and typically delegated to the precarious classes. The communities who do not enjoy white Western privilege or wealth are those who provide the majority of care for those who do, while receiving disproportionately little care themselves. For those of us in safer positions, the first act of care we can offer these workers is to simply recognize the privilege of being able to stay inside and care for ourselves and our loved ones. In what follows I will flesh out the history and politics of self-care in relation to community care, and argue that self-care should be considered a collective project.

Self-Care, Gardening, Gurus, and Neoliberalism

I have recently written about the roots of care, picking up on its linguistic, philosophical, and sociopolitical genealogy and its connection to the idea of *curare*, the Latin word that means both “to cure” and “to care.”¹ This connection between care and healing, including the curative relationship to the self, is found in many ancient cultures – for example, ancient Egypt with its advanced medical practices. The ancient Greeks borrowed medical knowledge and techniques from Egypt and mixed them with their own traditional folk healing practices. The belief that care for oneself is paramount to living a good life can be found in the Greek mantra νοῦς ὑγιής ἐν σώματι ὑγιεῖ (“the body can only be healthy if the mind is”). Many cultures have drawn a connection between mental and physical health. Qi Gong, an ancient Chinese practice of movement, breathing, and meditation that aims to improve both mental and physical health, has been practiced in China since the fifteenth century.

From Egypt to Greece and China, we encounter the human need to preserve and develop knowledges of self-care. In the Middle Ages, these knowledges were preserved by medieval monasteries in northern Europe, which maintained gardens full of curative herbs. The only surviving major architectural drawing from the Middle Ages – the plan of the Monastery of St. Gall (dated between 820–830 AD) in what is now Switzerland – demonstrates the importance

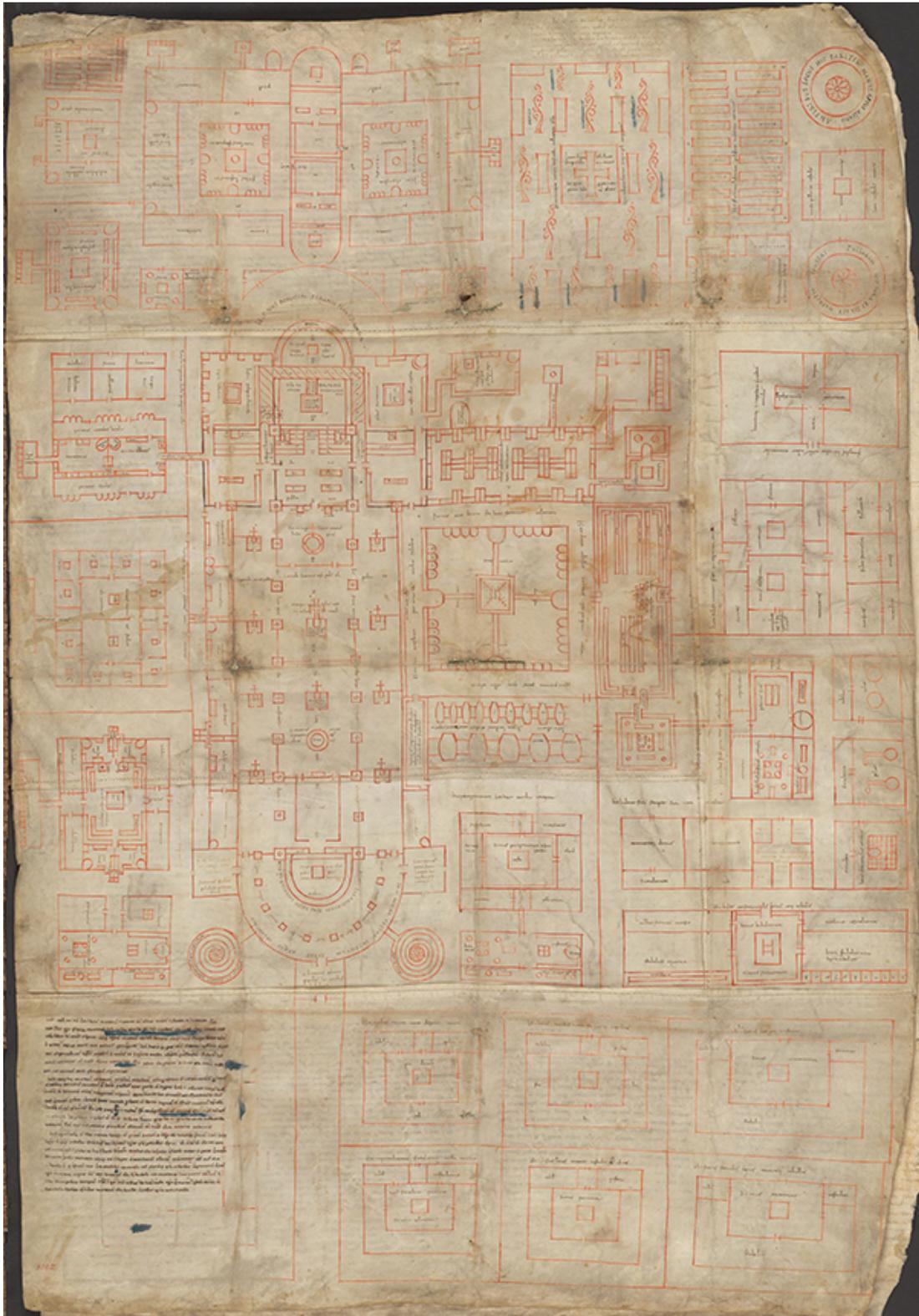
of herb gardens during those times. The plan shows that the gardens were included in the medicinal section of the monastery alongside an infirmary, a physician's house, and a bloodletting house. Until the industrial revolution, this type of garden was extremely popular, cultivated not just in monasteries and manors but also in peasant communities. In other words, before the arrival of industrial capitalism, the cultivation of herb gardens was a practice of collective care and curing that was accessible and open to almost anyone.

With the industrial revolution, curing and caring for oneself took an individualist turn: it became a private affair for the privileged. Self-care was turned into a sign of cultural sophistication for the Western imperialist class, and looking after your own well-being was framed as the individual's obligation towards society. This warped notion of self-care is exemplified by Victorian Britain, where it was widely propagated through the work of Samuel Smiles. Smiles was a Scottish political reformer and author of the 1859 book *Self-Help; with Illustrations of Character and Conduct*.² A lifestyle guru before lifestyle gurus existed, Smiles was hailed in his time as the epitome of Victorian liberalism. His book proposes that any man can become anything he wants as long as he does not depend on others. As historian Asa Briggs writes:

Relying on yourself was preferred morally – and economically – to depending on others. It was an expression of character even when it did not ensure – or indeed, not offer – a means of success. It also had social implications of a general kind. The progressive development of society ultimately depended, it was argued, not on collective action or on parliamentary legislation but on the prevalence of practices of self-help.³

This focus on the individual is fundamental to the founding of the United States. A 2017 paper titled “Frontier Culture: The Roots and Persistence of ‘Rugged Individualism’ in the United States,” coauthored by economists Samuel Bazzi, Martin Fiszbein, and Mesay Gebresilashe, revisits an influential 1893 essay by historian Frederick Jackson Turner. Turner analyzed how “the frontier that divided settled and yet unsettled locations strongly influenced American culture, fostering the development of unique cultural traits. Salient among these were individualism and opposition to government intervention.”⁴

The settler colonialism that created the United States was one chapter in Northern



Plan of the Monastery of St. Gall, Reichenau, c. 820–830. The drawing shows that gardens were included in the medical section of the monastery alongside an infirmary, a physician's house, and a bloodletting house, demonstrating the historical importance of medicinal herb gardens. Photo: Wikimedia Commons.

Europe's colonization of much of the globe. The individualistic ideology at the root of this colonialism positioned self-care above and in opposition to care for the community and for others. This notion was at war with the collective notions of care held by indigenous populations in much of the Americas, Asia, and Africa. Individualist self-care, with its implied cultural superiority, helped Western imperialists justify their takeover of whole territories and continents.

I want to focus on one specific aspect of this individualist notion of self-care: its relationship to cure and hygiene. There is a wealth of evidence demonstrating how systems of colonial oppression operated in part by imposing certain standards of hygiene and diet on indigenous populations, "teaching" them to take care of themselves. Alison Bashford writes in her book *Imperial Hygiene: A Critical History of Colonialism, Nationalism and Public Health*:

"Imperial cleanliness," wrote an early twentieth century public health bureaucrat, is "development by sanitation ... colonising by means of the known laws of cleanliness rather than by military force." Like many of his contemporaries, the connection between hygiene and rule was obvious for this commentator, both commonplace and a driving mission. This relationship between public health and governance has, in many ways, been rediscovered by critical sociologists and historians of health and medicine. "The power to govern," wrote one, "is often presented as the power to heal."⁵

This logic later gave rise to the twentieth-century notion that Western global powers had no responsibility to care for so-called "second-" and "third-world" populations.

Although individualism continued to develop after the industrial revolution, and still thrives today, there was a brief moment in history when a radical shift seemed possible, with the arrival of two earth-shaking events: the First World War, which began in 1914, and the Spanish influenza epidemic, which started in 1918, before the war ended. The state of exception that was created by this war – the first war after the industrial revolution – was rooted in an idea contrary to individualistic self-care: that of collective action. Although colonialism and imperialism continued to expand during the First and Second World Wars, this era precedes the commodity capitalism of the 1950s, which would reinforce individualism, exploitation, and class disparity. I cannot help but think that there was a small window of opportunity in those years to conceive of care towards others and towards

oneself on a collective, rather than an individual, basis. If such a change had happened, maybe today's Covid-19 crisis would have turned out very differently.

Individualism, Community, and Self-Care

In the 1960s, the idea of indulging one's own well-being through practices that became known as self-care took center stage – and quickly became monetized. A segment of mainstream society from the sixties onward began to base its existence on "self-betterment" and social mobility; upward mobility was dressed as self-care. With the rise of globalization and then the turbo-capitalism of the 1970s and after, collective care declined globally. State-provided healthcare and welfare went from a right to a service. Increasingly, it has become a paid service, due to the privatization of health systems and public infrastructure.

Research shows that belief in individualism correlates with wealth and GDP per capita.⁶ Wealth drives individualism. The most "developed" regions of the world are the most individualistic, compared to regions such as Eastern Europe, which is defined as "partly" individualistic. The most collectivist cultures are found in so-called "developing" or "underdeveloped" countries in regions such as sub-Saharan Africa, Southeast and Central Asia, and South and Central America.

The counterculture fever of the seventies brought Western appropriation of non-Western culture into the mainstream. New-age spiritualism and hippie culture appropriated Eastern and South American religious and self-care practices such as yoga, meditation, and Buddhism. In the eighties, the growing popularity of new-age ideas of self-care led to an explosion of the wellness industry. The era of the guru had arrived. Jane Fonda – "Hanoi Jane" of the sixties – popularized practicing self-care in the comfort of one's living room and became an icon of the fitness industry. The cultural imprint of that period can still be seen today. In a 2020 article in *Women's Health*, the author writes that when she discovered Fonda's 1982 workout videos during quarantine, they were a "bright spot in my self-isolation."⁷

In contrast to these individualist notions of self-care, the Civil Rights Movement in the US and the second wave of feminism promoted both collective care and a different type of self-care. The Black Panther Party offered an array of free social programs, including clothing distribution; classes on politics, economics, self-defense, and first aid; free medical care; transportation to prisons for family members of inmates; an ambulance service; drug and alcohol rehab; and its famous Free Breakfast for School Children

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Program. The idea that self-care should be a form of care towards one's community is clear in the words of Black Panther cofounder Dr. Huey P. Newton:

All these programs satisfy the deep needs of the community but they are not solutions to our problems. That is why we call them survival programs, meaning survival pending revolution. We say that the survival program of the Black Panther Party is like the survival kit of a sailor stranded on a raft. It helps him to sustain himself until he can get completely out of that situation. So the survival programs are not answers or solutions, but they will help us to organise the community around a true analysis and understanding of their situation. When consciousness and understanding is raised to a high level then the community will seize the time and deliver themselves from the boot of their oppressors.⁸

The feminist movement of the sixties and seventies focused on healthcare and the patriarchal systems that defined how the female body was understood and cared for. Feminists contested the idea that care was an obligatory

act of female love, and that healthcare should be an unemotional governmental service. Housework as a form of care was reconfigured through the work of Marxist feminists who demanded that domestic and reproductive care labor be recognized *as labor* and be duly compensated, most famously in the Wages for Housework campaign. One of the main figures of the movement, Silvia Federici, argued that “by denying housework a wage and transforming it into an act of love, capital has killed many birds with one stone.”⁹

Although many white feminists failed to recognize the systemic oppression imposed on black women, a common front developed against the white patriarchal medical profession. Caring for one's community and oneself became an act of political dissent. Activist groups adjacent to or allied with feminism and the Civil Rights Movement highlighted how poor health was correlated with poverty. Facing a medical profession that disregarded the needs of women, POC, and LGBTQIA+ people, members of these communities organized to share information about safe abortions, nontraditional medical practices, and self-healing methods. As poet and theorist Audre Lorde, who battled cancer, wrote in her essay “A Burst of Light” (1988): “Caring for

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Feminist Health Care Research Group, *Being in Crises Together*, 2020. Zine, Epilogue, Berlin Biennale 11. Photo: Inga Zimprich.

myself is not self-indulgence, it is self-preservation, and that is an act of political warfare.”¹⁰ Here, a focus on the self does not contradict caring for the community, but is instead integral to it.

In the late eighties, the LGBT community reconceived self-care as an act of self-defense and grassroots organizing against a heteronormative system that was apathetic during for much of the early AIDS epidemic. The Treatment and Data Committee of ACT UP provided healthcare and research when the careless state would not. In 1991, the Treatment and Date Committee was renamed the Treatment Action Group, eventually becoming a nonprofit organization focused on accelerating treatment research. In 2020, Doctors without Borders, in collaboration with the still-working Treatment Action Group, exposed the astronomical profit margins of the pharmaceutical company Cepheid, which was overcharging patients for rapid tests for tuberculosis, Ebola, and Covid-19.¹¹

Viral Care

The pandemic has undeniably brought people together, increasing our sense of collectivity. We have cared more for our families, partners, pets,

neighbors and coworkers. Those of us who could afford to stay home began to care for our overworked and overstressed bodies and souls. We finally had time to because the turbo-capitalist global economy was on pause.

At the same time, the pandemic has shed a harsh light on the state of care, both collective and individual. Self-care has never been more individualistic (nor more commercialized). Simultaneously, systems of collective care have rapidly deteriorated. Care workers around the globe have faced burnout during the pandemic. In countless news stories, tweets, and Facebook posts, these workers have described the emotional toll of long hours, and of seeing patients die a grisly, lonely death. Some healthcare workers have taken their own lives, unable to cope with the feeling of having failed their patients – or with the knowledge that they themselves have been abandoned by the systems that should have supported them. Many people like me, staying inside, have been preoccupied with our own survival and the well-being of our immediate loved ones. We have not given sufficient attention and care to the workers saving our lives. Could this apathy be the natural outcome of a system that regards care workers as employees who deliver paid services? Can we

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Libia Castro & Ólafur Ólafsson and The Magic Team, 2010
National Assembly Note: DO NOT BULLSHIT YOURSELVES AWAY FROM THE RESULTS OF THE CONSTITUTIONAL ASSEMBLY, 2020. Installation view, *Magic Meeting - A Decade On*, Hafnarborg Art Center Hafnarfjörður, Iceland, 2021.

only think as consumers?

If the pandemic has made one thing clear, it's that individualistic notions of care and "self-care" are extremely harmful to human existence, even threatening the future of the planet. Depleted healthcare systems, the idea of healthcare as a paid service instead of a human right, special deals between rich countries and big pharma for vaccines – all the care-lessness has been revealed in its full ugliness. On the micro level, isolation has shown that our established practices of self-care are entirely individualistic. Those who could afford to make bread, created Corona-kitchen Facebook groups, took online yoga classes, made jam, and paid insane amounts of money for "loungewear," new tech, and organic food, all brought to them by delivery workers who pee in bottles so as not to miss their daily target of two hundred deliveries.¹²

I cannot help but think that art and the art institution, after forty years of neoliberalism, are very much shaped by the individualistic approach to self-care: for many, art is considered an indulgent activity, entertainment, an acquired taste, proof of social standing and class, something one does for oneself as a part of "self-betterment." More importantly, mainstream cultural institutions, with their claims to political neutrality, often ignore work that centers collective care and self-care as political acts. Until recently, it has been difficult for politically engaged art to enter the mainstream art world, let alone the art market. The pandemic seems to have changed things a little. Some art institutions are now seeking out artists they regarded as "too political" before 2020.

Community, Self, and Care Politics Today

The pandemic has begun to break down the entrenched divisions between collective care and self-care. Many new initiatives have been launched to care for those communities most affected by Covid-19 across the globe. Facing the failure of governmental care, citizens have organized themselves into impromptu groups that gather protective equipment, deliver food, or simply check on neighbors.

Cultural practitioners and institutions have been discussing ways to offer better care. In the field of contemporary visual arts (the field I'm most familiar with), the notion of self-care is losing its commodity facade, and many institutions are realizing that they must revisit the idea of self-care as a political act. They are inspired by the work of feminists and civil rights organizers of the past, but also by the feminisms and social-justice movements of the present. "Myseum" in Toronto is a nomadic para-institution that presents projects around the city.

Their "Stories" series addresses issues such as the historical presence of the Ku Klux Klan in Toronto and a string of racist attacks in the city in 1977. Most recently, Myseum began a series of "Stories on Collective Care in the Time of Covid-19" together with artist collectives and activists.

In Germany, the Badischer Kunstverein organized an event called "Being in Crises Together," which posed the question of how we care today and involved members of the Feminist Health Care Research Group. An artistic project by the group, focused on Berlin's Feminist Archives, was presented at the 11th Berlin Biennial in collaboration with artist Virginia de Medeiros. It featured documents, posters, and interviews about radical health initiatives such as HeileHaus (Healing House), Radical Therapy, Apothekerkollektiv (Pharmacists' Collective), and Feministisches Frauengesundheitszentrum Berlin (Feminist Women's Health Centre).

Other artists have addressed the commodification of self-care. Geumhyung Jeong's installation and performance *Spa & Beauty* (2017), exhibited at various institutions since its launch at the Tate in 2017, examines the relationship between beauty products and their users. Beauty products are used to take care of one's body, but they also require careful management, according to the artist. In the installation, Jeong carefully arranges beauty products by type; images demonstrate how the products are used. At the same time, Jeong intersperses images showing the industrial production process behind these objects of "grooming" and "self-betterment."

Curators have also been discussing the dichotomy between individualism and community. For instance, curators Galit Eilat and Nataša Petrešin-Bachelez aim to undermine the illusion of the "independent curator," since it is interdependency that defines their livelihoods. They present themselves as "interdependent" curators rather than independent ones. This choice of words calls attention to the larger structures that force dependency, but also expresses a desire to position oneself as part of a group, especially given the extensive unpaid care labor that female freelance curators are often expected to provide.

Self-care needs to abandon the individualistic approach of "self-improvement" and focus on bettering the self for the benefit of others. In our efforts to cure ourselves, there is one affliction we should not overlook: the neoliberal approach to self-care, which is rooted in the legacy of the heteronormative, white, Western Enlightenment. If we can cure ourselves of this affliction, self-care might become a radical political act. In order to change the policies that for decades have prevented us from

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thinking of care as a human right that must be protected, self-care must aim to transform people into active and engaged citizens.

For artistic duo Libia Castro and Ólafur Ólafsson, this translates into engaging in local politics through a framework of care. Their long-term project *In Search of Magic: A Proposal for a New Constitution for the Republic of Iceland* demands the implementation of a new Icelandic constitution that was passed by a national referendum in 2012 but never put into effect. Their project is a collectively conceived and executed performance of musical scores that recite and explain the articles of the new constitution. The impact of their work was evident in an email I received from the artists while writing this essay. The mayor of the town of Hafnarfjörður, on the outskirts of Reykjavik, ordered the removal of one of their works that hung on the facade of the local museum where Castro and Ólafsson were having an exhibition. The work was part of a series of conceptual paintings that resemble banners. As Castro explained to me in the email:

The images are copied and enlarged parts of forms that were used by various citizens to write anonymously their concerns, questions, wishes, and warnings about the future of the democratic process they were starting in the country in the second national assembly in 2010. The notes were addressed to different bodies, such as the parliament, the press, and the constitutional assembly. Many of these notes were used in the national assembly in 2010, when the writing of the new constitution was decided and the future of the country was being debated in an unprecedented democratic process ... Those anonymous notes written by the thousands are now kept in the national archive of Iceland. They read now as letters that were sent to the future. But they were lent to us now, and as with the rest of this project, we are making them public again through our artworks.

A mobilization by local citizens, institutions, and the artists led to the reinstatement of the work two weeks after its removal. The artists' careful and diligent work is one example of how care for national politics and care for the commons can align. It makes me think of Sarah Ahmed's reading of Audre Lorde's "A Burst of Light" essay, which is useful for artists and cultural institutions interested in the politics of care and self-care:

Self-care: that can be an act of political

warfare ... And that is why in queer, feminist and anti-racist work self-care is about the creation of community, fragile communities, assembled out of the experiences of being shattered. This is why when we have to insist, I matter, we matter, we are transforming what matters ... For those who have to insist they matter to matter: self-care is warfare.¹³

It is noble warfare, and culture should be its shock troops. The transformation of art institutions may have to wait for now, since many are still closed or operating below normal capacity due to the pandemic. But we can think of these places the same way we think of our homes: as intimate spaces where care can be nurtured. For the time being, our private homes can offer fertile ground for future transformations in how we practice care in both private and public space: as an interdependent and revolutionary process that creates new relationships among humans, nonhumans, and their shared habitat.

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