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onCocreation
Rehearsing Cancer Ecologies; Sensuous Experiments for Joint Mutation in Cancer Art/Activism

By

CAROLINA NOVELLA CENTELLAS
DISSERTATION

Submitted in partial satisfaction of the requirements for the degree of

DOCTOR OF PHILOSOPHY

in

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OFFICE OF GRADUATE STUDIES

of the

UNIVERSITY OF CALIFORNIA

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Multiple orbits and groups believed in co-creating new cancer worlds. To the onco-creators s over the years, thanks for trusting the process and giving the bravest of you.

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ABSTRACT

Biomedical protocols and cultural metaphors of cancer enact the disease as an individual condition. The individualization of cancer isolates people diagnosed, objectifies certain bodies, hinders physical and emotional variability, centers individual risks while obscuring socio-economic corporate profit or environmental toxicities, cuts ecological relations, limits access to treatments, and detour potential intersectional connections. At the root, the individualization of the disease creates a split between ‘sick’ and ‘healthy’ individuals and serves, among other things, to limit the emotions and alliances that could transform some of the structural settings by which we are all living in toxic conditions and getting cancer., this dissertation starts from the premise that there is no more escaping: we are all -already- living with cancer. In addition to the increasing numbers of cancer incidence in the world, cancer has spread into our existences as a material-metaphor for the worst, a kind of somato-relational technique of horror, and as a mode of engaging health, toxicity, economics, research and all kinds of life on Earth, through fixed notions of hope and/or fear.

As a community arts and experimental dance intervention into cancer-relations, this study is an investigation on rehearsal as method through the oncogrrrls project. Rehearsal as method aims at making cancer ecologies, interrogating and transforming how is cancer in the world, and the world in cancer. oncogrrrls is a project I/we launched in 2011 after my own diagnosis to make something about ‘it’ and do it together. oncogrrrls are series of creative residencies with women and queer individuals who, diagnosed or not, care about cancer. Rehearsal becomes a space for collective interrogation of situated cancer relations that extends into the making of a piece. How do we engage individual/collective change through performance making? What would happen if we treat cancer as an art inquiry instead of a biomedical certainty? The study also explores the

questions emerging in different oncogrrrls residencies. Moving away from attempts at universal knowing, each question, situated in context, offers a line-through for the inquiry and an anchor to hold the cancer rehearsal as a transformative practice

As a Practice as Research investigation the findings materialize in practices and concepts for oncological performance art and activism. To complete this dissertation I facilitated 10 creative processes leading to 5 performance pieces. The writing builds on phenomenological memories, documentation of creative process, close readings of moments, dreams, scores (sets of instructions used in the making of the pieces) and ethnographic notes and stories. The introduction tracks the emergence of oncogrrrls from my own physiological and performative experiences with breast cancer. Score inquiry (not representation)! Cocreate! Start in the Body! are three main principles that enfolded over the years. This study also proposes *transposing* as a meta-score ‘pick an issue, move it somewhere, notice what emerges.’ Transposing figures a movement practice, a technoscientific protocol where the oncological experience emerges as an intense transit with the potentiality of change, an opening of certain configurations to the richness of the possible.

This dissertation proposes rehearsal as a mode of production from the arts to make cancer relations otherwise. Rehearsal, as joint curiosity, enacts the multiplicities already existing within cancer. onCocreation offers tools and concepts for artists, activists, health and social change practitioners interested in making cancer otherwise through somatic art inquiry, experimental dance, and community engagement.

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INTRODUCTION: From a cancer parenthesis to oncogrrrls- rehearsing cancer ecologies

on.co-creation, making cancer ecologies as oncological justice

This project is an empirical (practice as research) investigation on oncological change through rehearsal. With a unique approach to Art and Justice, it draws from lessons I have learned through almost a decade of community-engaged practice with the oncogrrrls project. Emerging as a response to my own experience with breast cancer and fleshed out by the lessons learned over ten years of creating performance pieces with women and gender dissidents through the oncogrrrls project, this project offers a deep exploration into modes for addressing social and oncological justice through artistic inquiry and creation. This project offers a mode of production for artists, activists, scholars, and communities interested in transforming cancer worlds.

The challenge of making art within the framing of cancer is that biomedical protocols and cultural metaphors of cancer enact the disease as an individual condition, and it is hard to pull away from notions that cancer performance only affects those diagnosed. Cancer individualization creates a split between ‘sick’ and ‘healthy’ individuals and serves, among other things, to limit the emotions and alliances that could transform some of the structural settings by which we are all living in toxic conditions and getting cancer. The challenge within cancer performance, as an artistic form of (cancer/health) justice - is to create a relational field (an ecology) that opens up cancer, resisting the individualization of the disease, and as one of the symptoms of the multiple divisive logics and toxicities currently operating in the world and taking form in/as illness. Public Health institutions and medical centers in the US are currently approaching cancer justice through the lenses of inequalities in relation to access to (biomedical)

health care¹². Aligned with social movements for (reproductive, disability, health) justice, that address change from coalitional, multi-issue and intersectional approaches, on.co-creation proposes oncological justice as the restoration of the multiple relations that are severed through the individualization of the disease³. In the spirit of Donna Haraway's proposition of *Staying with the trouble* (D. J. Haraway 2016), oncological justice requires a kind of "kin-making" practice expanding cancer-relations beyond biomedically bounded individuals. Let's face it, there is no more escaping: we are all -already- living with cancer. Taking Michel Murphy's concept, we are already living alterlives⁴. In addition to the increasing numbers of cancer incidence in the world⁵, cancer has spread into our existences as a material-metaphor for the worst, a kind of somato-relational technique of horror, and as a mode of engaging health, toxicity, economics, research and all kinds of life on Earth, through fixed notions of hope and/or fear. Trust me, as a person who has been in the oncologist office more than once, I know that neither this kind of hope or this kind of fear are allowing for living and dying well. We might as well 'fight' for mobilizing some of the pains of cancer uncertainty into a useful inquiry to make

¹ I am recently discovering an emerging pool of 'labs' from Public Health schools that center cancer health justice around inequalities of treatment access. See the Health Justice lab (from Yale University) who orient towards practice of care for marginalized populations particularly individuals leaving prison, or the Cancer Health Justice (from Rutgers School of Public Health). The Cancer Justice Network in Cincinnati serves the poor and minorities through the work of 'cancer navigators' who accompany patients to their treatments and create services to prevent mortality.

² I was excited to find some recent research in culture-centered approaches to cancer justice that, while frame cancer justice within biomedical access and patient navigation, proposes co-construction of meaning as a practice for cancer justice. (Sastry et al. 2017)

³ While The activist group Breast Cancer Action do not self-identify as doing cancer justice, their work focusses on addressing the roots of the problem by looking into systemic interventions instead of individual action. See their work at www.bcaction.org

⁴ A state of already having been altered by environmental violence that is nonetheless a capacity to become something else (Murphy 2017)

⁵ According to the World Health Organization, cancer was the second leading cause of death in 2018, and the estimated incidence continues to grow, reaching 19 Million people in 2020, and 30 Million in 2040. Data from International Agency for Cancer Research.

new kinds of relations possible—and who knows, even end with some of the causes. Thinking with the SPK (Socialist Patient Kollektive) proposition that ‘illness is not an incident in a single person, ill is.. our society’ (Wolfgang 1993; 130), I insist in that we all have cancer, and the only possible way through is together. Following Audre Lorde’s call to the potency of love and coalitions (Lorde 1980; 1981; 1987), the oncogrrrls project aims at nurturing on.co-creation⁶: joint explorations of oncological issues through the arts, to nurture creation of stronger on.coalitions.



Figure 1 cancer is present. Program for the performance Cuentos de nos.otras.oncogrrrls 2017. Design by Melanie

One theory of change proposed by Maren Klawiter, is that health social movements can affect the regime of cancer-practices by 1. changing the individual/their relationship to the regime’s

⁶ oncogrrrls aims at a kind of ‘agitation’ in the mode of the SPK ‘turning illness into an anticapitalist Weapon’. ‘agitation in SPK aimed at requiring the progressive impulse of illness, of the protest and its collective organization.

practices and 2. Changing and expanding the regime's actual practices (2004). Centering rehearsal, this study offers a theoretical and methodological path into changing cancer regimes. oncogrrrls, as research-creation in the arts, offers health social movements a deeper understanding of the mechanisms of individual and collective transformation occurring during the process of making a performance piece. In order to interrogate practices aiming at individual and collective transformation in breast cancer regimes, I attend to processes of performance making in oncogrrrls. From the start, a main set of questions guided this research: How do we engage in collective inquiry and action through performance making? How do we resist the individualization of cancer? What can rehearsal do to animate breast (and other gynecological) cancer justice? And, how does *rehearsal* activate individual and collective new cancer-practices? These initial questions turned into specific and situated inquiry in each residency: while I act as a facilitator, containing the inquiry within artistic practices, each of the creative processes is led by the group's commitments and questions. The starting questions that guided each laboratory are: *What are we waiting for? How do the silences of cancer shape our bodies? How do we become beyond medicalization? How to live with the uncertainty? And... What about race?* And through the creative processes, other questions and discussions emerged. Questions opening up how is cancer in the world, and the world in cancer, what Donna Haraway and Joseph Dumit call, the implosion⁷: How are gender expectations operating through cancer biomedical protocols and cultural expectations? How is toxicity distributed and which kind of biomedical research and interventions are promoted? Which kind of knowledge is valued and recognized? Which kind of care is accessible to whom in current medical system in Spain? How do we address social

⁷ This practice is an exercise that unpacks objects and "teases open the economic, technical, political, organic, historical, mythic, and textual threads that make up its tissues" Haraway in Dumit (2014). Find it in Dumit, *Writing the implosion: Teaching the world One Thing at a time* (2014)

structures and build a network of cancer activists aware of the uneven distributions of vulnerability? The lessons learned in each creative process provide a robust body of practice from which to distill the principles and orientations for the joint creation of cancer relations from a framework aiming at transforming the structures that sustain unjust cancer worlds.

Some of the issues that this research addresses are: How do we center bodily explorations to foreground social justice and environmental care? How do we sustain the complexities of living in uncertainty and biomedical chronicity through mutual care? How do we activate cancer suspicion while supporting oncological care access? How do we engage inquiry with the absent(ed) groups and about the structural barriers? How do we measure the impact of art-based health and social change? I hope that this work will lay the ground to continue engaging with cancer activists across disciplines, centering people living with cancer, and collective interrogation of the structural conditions that make us sick.

Within a Practice as Research (Riley and Hunter 2009) situated investigation into cancer relations, *rehearsal as method* invokes what Lynette Hunter calls ‘situated textuality, knowledge always in the making, focusing on process but situated whenever it engages an audience’ (Hunter 2009, 240) and turns cancer into a process of knowing through joint exploratory art inquiry.

Rehearsal as method becomes a practical exploration of processes and lessons learned, and a kind of ethnography of process. The research covers practical investigations of rehearsals since 2011 (my own cancer diagnosis) and until now (with five oncogrrrls creative processes). From these bodily and artistic explorations, I choose the more relevant instances to reenact in the text.

To craft close readings of the doings of practice, I draw on my documentation material (notes about exercises and plans for the day, reflections on conversations, images, videos and audio-recordings from rehearsal, email conversations), quotes and audiovisual material from the

performance pieces, and testimonies from participants and audience feedback received over the years. In this research project I trace the doings that rehearsal offers to oncological activism. To do this, I take inspiration from Deleuze and Guattari proposal that philosophy is the creation of concepts in resonance with other fields (Deleuze and Guattari 1996). In this way, what rehearsal offers to oncological activism are not only empirical doings but also conceptual tools.

“a sensorium can be trained, to be more excitable, in precise ways. Training a sensorium, as in training in seeing and listening more deeply, has an odd relation to habit. Sometimes one trains in order to develop habits, but sometimes one trains in order to free oneself of habits. Even to become expert in not being habitual”

(Joseph Dumit 2014a)

A Parenthesis set ‘it all’ up in movement.

now, [think as if you had] put a parenthesis to your life and just worry about taking care of your health’

(gynecologist at St. Pau Hospital)

These were the exact words of my gynecologist at St. Pau Hospital some days after my breast cancer diagnosis. A psycho-oncologist would reenact a similar kind of speech act a few weeks later. Quite a common gesture in Spain⁸, this speech act, a biomedical techno-logics of restitution and return⁹, is a metaphor of before and after, a vestibule for ‘hope’ in the antebellum of an uncertain future. While potentially ‘protective in times of acute illness for both patients and clinicians’ (Drew, 88), this parenthetical protection also creates a boundary where ‘a life’ gets placed on hold, suspended¹⁰.

⁸ For example, Doctor Pere Gascón, Head of the oncological department at the Hospital Clinic in Barcelona declared on an interview for the International Cancer Day, past month, that ‘cancer is a parenthesis, there is life after cancer. This is the attitude’ (HBakkali 2014).

⁹ Sara Drew suggests that health care professionals refrain from using the restitution narrative which often hinder the potential for real individual and collective self-reconstruction as it ‘obscures the experiences and concerns of many individuals’. (Drew 2005; 84)

¹⁰ This ‘parenthesis’ resonates with the pink ribbon culture reductionist attempt to simplify breast cancer experiences into a unique monolithic version of the transit through the disease that renders all women brave, cheerful, hopeful and uncritical smiley pink ribbon survivors.

In my case, to set 'life' on a parenthesis meant to suspend my current doctoral program, which had not only the imaginative component of arresting my ongoing career, but also economic, geographic, and relational impacts. In choosing (was that a real choice?) to treat my medical condition in Spain, I had to take a medical leave of absence from my first year of PhD at University of California, Davis; suspend the doctoral fellowship I was receiving; cancel the lease of my apartment and freeze almost all early-stage relationships in California. Thus, besides entering the biomedical initial rush of cancer treatments, I had to re-set my 'living' conditions in Barcelona for one to two years. As a health refugee back into my country of birth I had access to universal health coverage but a source of income was harder to secure¹¹. I could not opt into regular employment — even though I tried, nobody seemed to find my baldness appealing for hire— And state-based support in Spain had become frail in the previous decade of austerity measures¹² following the hit of the 2008 capitalist financial crisis. Also, as an international graduate student worker, my status as a worker was not recognized and I could not access the systems of economic support in place for either national returned migrants or workers on medical leave¹³. Therefore, under these circumstances, 'only care about your health' felt, at least, like a

¹¹ Beatriz Figueroa has been addressing this challenge through her fight for the socioeconomic and labor rights of people with through her decade long activism in Spain. She writes with Anna Porronche in the edited book on cancer and feminism (Porronche-Escudero, Coll-Planas, and Riba-Sanmarti 2017)

¹² Robert Mc Ruer, in his presentation of crip theory, (McRuer 2006) discussed his analysis of the situation of acute fragility that people with illnesses and disabilities are left in certain economies after the financial crisis of 2008 and with the austerity measures (personal communication).

¹³ I wonder how this experience could contribute to the conversation ignited by Sami Shalk and Jina B. Kim on the need to integrate Race into feminist disability Studies (Schalk and Kim 2020). According to the authors, 'feminist-of-color disability studies must take a critical and expansive approach to health/care as one of its central domains' (46).

careless understatement¹⁴. Nevertheless, with a strong sense of losing control and forced obligation, I started the process of ‘only caring about my health’. Over two months, daily screenings, doctors, runnings up and down the hospital, and long hours of waiting between visits filled my days. Amidst a frenetic activity and an unreal sense of pause¹⁵, I dealt with shock, fear and grief for my ‘lost’ life and with the unexpected demons coming along with treatments and their cultural effects¹⁶. Over time, I started feeling an increasing rage at the speech act: ‘place your life in a parenthesis, and only care about your health.’ The parenthetical metaphor was a painful euphemism in many more complex and nuanced ways than the pragmatics (or emotional complexity) of a ‘life disrupted’. A mis-recognition of the fullness of living and a universalizing technique erasing the particularities of the experience, this parenthesis enacted a split creating certain biomedical and cultural cancer relations.

These relations conjure what Maren Klawiter calls a disease regime¹⁷ (Klawiter 2004). Many friends, feminist scholars and activists, are engaging in pointed and nuanced critical works making visible the perils of the current (western) mainstream liberal breast cancer regime (in

¹⁴ Following Sarah Ahmed’s rumination on institutional mechanics and complaints, this parenthetical metaphor acted as a technique of redirection -[now, do this, not that. Place a hold on your life, take care about your health.] aiming to redirect the object of attention into the biomedical process. (Ahmed 2018)

¹⁵ For an expanded perspective on this unreal sense of pause and the intertwining of disability and chrononormativity, see the work of Elizabeth Freeman and Elle Samuels in *Crip temporality* (Freeman and Samuels 2021). Elizabeth Freeman coined the term chrononormativity as governing temporal systems that frame live in ‘normative’ stages and velocities (Freeman 2010).

¹⁶ Many of these demons foregrounded as daily life materializations of misogyny, infantilization, mandatory heteronormativity, ableism.

¹⁷ In her formulation departing from Foucault formulation, disease regimes are ‘composed of the institutionalized practices, authoritative discourses, social relations, collective identities, emotional vocabularies, visual images, public policies and regulatory actions through which diseases are socially constituted and experienced’ (2004, 851). ‘Diseases experiences are shaped by culturally, spatially and historically specific regimes of practices’ (849

which, infantilized victim meets uncritical patient meets heteronormative¹⁸ pink warrior. In doing this, they identify current cancer practices that, for instance, (a) objectify bodies, separate the sick from the ‘healthy’ and normalize through physical interventions (Shildrick 2009; Greco 2019); (b) hinder physical and emotional variability behind the positive and hopeful expectations of ‘pink warriors’¹⁹ (Drew 2005; Ehrenreich 2010; S. L. Jain 2013; Sulik 2012); (c) center origins in individual risky behaviors and genomic research instead of in socio-economic corporate profit or environmental toxicities (L. S. Jain 2007; Spannier 2001; Valls-Llobet 2017); (d) cut ecological relations, hindering ecosocial and environmental justice perspectives on cancer (McCormick, Brown, and Zavestoski 2003; Anglin 2016) (; (e) foster unequal patient-doctor relationships (f); limit access to treatments based on nationality, class, race, sexual orientation or any other –human-made condition - (Anglin 2006; Fishman 2000; Percac-Lima et al. 2013; Porroche-Escudero and Figueroa 2017); (g) detour potential intersectional connections (Brandzel 2016; Kafer 2013; Lobel 2019) and a long etcetera²⁰.

¹⁸ Heteronormativity plays out in mainstream breast cancer – pink ribbon awareness- culture not only as the hyper-sexualization and hyper-feminization of the disease, but also in depicting a heterosexual, family-centered, housed, middle class, mostly white, and docile individual. Also, while a lot has been said about the hyper-sexualization of the disease (Eve Kosowsky Sedgwick 1999; Lorde 1980; Porroche□Escudero 2014; L. S. Jain 2007), my experience - in Spain and the United States- is that sex and erotica are mostly unaddressed in cancer protocols, leaving the erotic field out of the care/healing equation. While the hyperfeminization of the disease entwines in the heteronormative cultural objectification of a female body, the ‘patient’ position also brings in medical and cultural desexualizing practices that evict individuals from the category of desire’ (as desiring individuals). In response to this de-erotizing, I created several entries on my personal blog, onco grrrl. See for instance the entries on ‘sexualidad o gusto’ and ‘post-pink: queering breast cancer through post porn’ (Ludica 2013b).

¹⁹ As the current metaphors for women living with breast cancer. Susan Sontag predicted, the metaphors for cancer are situated historically and change over periods. (Sontag 1978).

²⁰ The list is extensive, and I only intend, here, to point (not develop) towards feminist critiques to breast cancer.

Through my own experience, and in conversation with many friends, I comprehended this parenthesis to be a mechanism that bundles health and politics within the rigid limits of the (one) individualized and isolated cancerous patient²¹-- the sanitized anti-intersectional subject of survival in mainstream pink ribbon breast cancer culture (Brandzel 2016). The parenthesis acted as one more instance of rendering cancer as an individual and natural illness, shifting the focus of attention away from its cultural, structural, corporate production. I saw this parenthesis as a distracting technique, tending towards individual risks and responsibilities for the disease, instead of attending to collective injustices such as profit driven toxic practices, as Audre Lorde warned us (1980), or ‘models of corporate care able to maintain the illusions of their own innocence in the disease’ (Jain 2007: 526).

Also, the parenthesis acted as an attention framing device that subtly and perversely cut ‘me’ in two: a material self (health-body) and a living self (life-social relations) reenacting, once again, the Cartesian body/mind divide. Rendering my ‘onco-body’ as an inert object of study, a natural battle ground, a territory for biomedical science to poke around until ‘cured’ (or else) and an extractive project for profit oriented ‘pinkwashing’²² ventures crystalizing hope into market

²¹ As I have noticed when talking about the parenthesis with people in the US, this metaphor might make sense in a Spanish context, not in a US context. The parenthetical metaphor in Spain sits in relation with 1. The socio-economic context which supposedly affords universal health coverage under paid medical leave 2. The doctor/patient relationship which has a particular expression of the relationship to knowledge, ethics, and power imbalances (different from the market driven relationship in the US). While this metaphor does not automatically translate as a ‘transnational’ medico/cultural object, many of the relationships and cuttings that it produces have effect through other kind of restitution metaphors, as we see in the socio-cultural cancer critiques.

²² The breast cancer activist organization Breast Cancer Action coined the term ‘pinkwashing’ as part of their ‘think Before You Pink campaigns. Pinkwasher: noun. A company or organization that claims to care about breast cancer by promoting a pink ribbon product, but at the same time produces, manufactures and/or sells products that are linked to the disease’ (“About Think Before You Pink” n.d.)

growth. What a productive and damaging bordering²³ technique! Yet, in the stubbornness of ‘living while cancer’, and echoing Cherie Moraga: ‘with a foot in both worlds: I refuse(d) the split’ (Moraga and Anzaldúa 1981: 29)²⁴.

I did not want to rationalize or deconstruct the split, I already got to comprehend it through fleshy interventions. Instead, the parenthesis became an enabling constraint for improvisation (Joseph Dumit et al. 2017). I took the doctor’s invitation very seriously, ‘yesed’²⁵ their offer and started ‘only caring about my health’. Each biomedical encounter offered opportunities to care to and there were so many! I engaged in a very deep exploration, minutely attending to the felt-sense²⁶ of my ‘onco-body’. A kind of embodied process of getting to care for my health, learning through due attention²⁷ (which is Practice as Research²⁸). And unexpectedly, the biomedical score flipped on itself. The more I ‘only cared for my health’, the more the parenthesis burst with lively events.

²³ Gloria Anzaldúa’s work on *la frontera* identifies the rational consciousness of duality, the creation of binaries as ‘the root of all violence’ (Anzaldúa 1987)

²⁴ Miguel Martinez-Garcia, on his research on literary texts about cancer and depression, asserts that medical and cultural forces coopt the experience of the disease, saturating with meanings the space opened by the event of the disease (Martinez-Garcia 2019). In a space-time where the event of the disease breaks the life-narrative and opens a space of uncertainty and unknowability, Martinez-Garcia proposes to be ‘loyal to the event of the disease’ as a tool to resist the biopolitical and cultural cooptation of the experience (2015, 2019).

²⁵ Echoing one of the main techniques in improvisation, the ‘yes and’ (Robbins Dudeck and McClure 2018; Spolin and Sills 2010) the constraint turns into an enabling support for improvisation.

²⁶ Dancer and scholar Nicole Peisl takes Eugene Gendlin coined term ‘felt sense’ as a process to immerse oneself in a situation through bodily sensing, and proposes felt sense in performance as a bodily knowing process that enables performers to open themselves to the embodiment of a process of change. (Peisl 2019)

²⁷ Philosopher of science Isabelle Stengers remind us, writing with Whitehead on the experimental approach, that ‘we can multiply ‘what’ we are aware of in perception. If we pay due attention, more can be found in nature than what we observe at first glance. (Stengers 2011)(37)

²⁸ The methodology of my graduate work, in Performance Studies.

polysemic field that holds the arts (as in artistic rehearsal), the biomedical sciences (as in a clinical trial), and processes of knowledge-making (as in trial and error). Rehearsal also invites variability within structure³⁰, as in trying something new, repeating as a kind of training, and the permission of being ‘not-yet-done-,’ open to modification and available to change, in process. In the ‘only attending to my health’, unusual and extra-ordinary bodily experiences ignited through biomedical intervention, and I engaged in an unexpected experience of bodily discovery: an exploratory process through which medical interventions *aroused* unexpected sensibilities³¹, unsettling cancer certainties and posing new onco-body relationships.

As sensory explorations, the following rehearsals are experiments on deep attention to the bodily experience happening in the moment, a kind of somatic practice tuning into the present moment of noticing. Nita Little, scholar and one of the founders of the dance exploration Contact Improvisation, says that in somatic practices, ‘noticing the experiential moment is fundamental’ (Little 2018). She describes attending to somatic exploration, as a process that does not aim to reach a form, but to engage with the present moment of noticing (me, you, the environment, breath, in/out, rhythms). In slowing down and engaging with what is happening, this kind of inquiry, says Nita ‘holds tremendous potential as an activist practice based in embodied engagement’. And I recognized the activist potential in the fact that each of these rehearsals

³⁰ In *Putting Rehearsals to the Test*, Buchman, Lafer and Ruhm describe rehearsal as a ‘practice suspended precisely between (pre-)determined and experimental role-playing. A pendulum between the conventional and the searching creation of new knowledge. (Buchmann, Lafer, and Ruhm 2016)

³¹ Sense-abilities. Kevin O’Connor, thinking with sensory and cultural anthropologist Kathryn Linn Geurts – Sensing ‘bodily ways of gathering information is cultivated through training, proposes that the ‘sensorium can be thought of as being activated and repressed, reinvented, improvised and in a constant state of rehearsal. Training in sense-abilities can always be done otherwise so that the body even in its most somatic, physiological level is viewed as a process’.

animated bodily states and sensory experiences beyond biomedical and mainstream cancer expectations. These peculiar kinds of rehearsals, in slowing down to the minute experience of caring for my health, enabled me to engage in the full process of living. What follows are some of these moments of becoming, aiming to enact the movement within ‘stillness’³².

Rehearsal #1. ‘Mastitis’ arousing senses. Becoming antenna

February 12th, 2011

Two days after my first breast surgery, the combined sensation of acute localized pain and numbness of the surrounding area started evolving into one of stretch and warmth. During over 24 to 48 hours, I started noticing an ongoing expansion on my breast. I could feel the rise of the temperature in the area and how the upper left side of my body, between my shoulder and my cleavage, was occupying more space than usual. The side vision of my body and my relation to space were also changing (I was expanding!). For a couple of weeks until the doctor cleaned cut the infection, I carefully attended to the subtle changes within and without. I kept noticing a puncture point somewhere deep-flesh between shoulder blade and chest radiating heat outward, the skin stretching and my peripheral sensory awareness activated. The sort of ‘arachnid’ protective state of alert that I started developing right after surgery became more acute. Not only was I more aware of the kinetic experience of/in the upper left side of my body and my own metamorphosis, but I also would

³² By *stillness* I refer here to the social expectation of stillness imposed by this metaphor to (read as) female bodies affected by breast cancer in Spain. – Now, place your life on hold, and only care about your health.

foresee other people's movements, calculate by the millimeter the proximity to all sorts of animated and unanimated bodies, and adjust my position in the space to feel as secure and comfortable as possible.

This post-surgical infection, a microbes and flesh feast within, animated a new sensory aptitude: a highly tuned radar sensing space-time, trajectory, speed, direction, location in-between bodies. I had trained this kinetic sensibility in dancing (studio) floors, as well as walking down crowded streets before. Yet these two weeks of heightened sensing enhanced this attentional practice and grew an extra precise sensor. I named it 'my arachnid sense': a superpower to sense (without depending on vision) the spatio-kinetic forces between bodies to adjust my position and avoid (unwanted) contact. A mastitis arousing a kind of sensory brilliance, or becoming antenna³³. A gift of heightened sensing which would come very useful later on — particularly on overcrowded stages with many bodies simultaneously performing perilous acts³⁴.

Rehearsal #2. 'Chemo' arousing eros. Becoming porous.

March 27, 2011

During the first session of chemotherapy, my body temperature varies, from warm to cold. A sense of sleepiness leaks into my body alongside the orange liquid dropping from the iv(y). While I sit in the chemo chair receiving

³³ This notion of becoming antenna sits in relation with Natasha Myers' *becoming sensor*, in which Canadian dancer, anthropologist proposes art investigations to cultivate new modes of attention to 'detune colonial common sense' in the efforts for restoring Indigenous Stewardship to High Parks' Oak Savannahs in Toronto. (Myers 2017). See more of this project <https://becomingsensor.com>

³⁴ Such as the performance jams with Pocha Nostra, or the solo street and gallery interventions with modified sensory and motor apparatus part of the artistic inquiries *transcorporear* and *corpo-R-ate* that I developed between 2013-2018.

~~treatment~~ I sense the density of ~~my~~ body becoming thicker, ~~my~~ stomach pulling me/us into the chair, ~~my~~ ears shifting slightly the sense of equilibrium and an increasing metallic taste activates ~~my(our)~~ saliva glandules. After two to three hours, while at my friend's house, ~~I~~ start feeling some dizziness. It is as if when trying to grasp the speed of her tone ~~my~~ brain would send melting alarms to the rest of the body, loosening up ~~my~~ auditory sensorium, the grips of the atlas bone, and the internal triumvirate of little bones that fixes my habitual orientation to the world shifts to a new kinetic equilibrium. I can't take too much information. ~~I~~ Can't hold it and if I try, I get dizzy. Feeling the uneasiness of ~~my stomach~~ advancing some nausea, I decide to go home.

Upon arriving, ~~I~~ lie down by the piano, in the 'studio-like' wooden floor room. A comforting flash of Sun enters through the terrace door and ~~I~~ lie there. ~~I~~ start breathing, letting my weight be pulled by gravity, and feeling the touch of the warmth wood interacting with ~~my(?)~~ skin. If there remains an I, here they embraced morphing. A release of muscular tension is followed by a sense of melting; not like an ice cube, more like a porous opening of skin-membranes into the world. Sensations of tiny ticklish movements throughout fingertips, hand palms, face, arms ... The light and warmth circulating through skin-membranes, one inch into the air (~~I am~~) sensuously merging with the atmosphere while the atmosphere plays with open-ended skin cells. A comforting sense of warmth runs ~~me~~ through, exciting senses and arousing ~~my~~ libido: a deep, calm sense of pleasure that has nothing to do with what I had imagined chemo would be. Something is happening, ~~I~~ don't know what it is, but

feels ok. From time to time, when I-trying to reach a complete thought or answer to an external demand, such my mum calling to check on 'me', something - where my stomach used to be - tightens abruptly. As if responding to a need to 'get it together' brings sudden nausea. Posing, or aiming to consolidate a form, or a response, brings dizziness and fear. But if I-flowing in this sensuous porous mass of indecipherable flesh and air, everything is all right. Morphing feels calm, sensuous, and even arousing.

Rehearsing-chemo practices entailed carefully attending to the sensorial experience of changing, and noticing the detail of bodily and sensory movements in relation. Not only with-in or with-out movements, but carefully tuning my attention (attuning) to the sensory micro-events happening in relation (breath releasing tension, heat warming up skin, sunlight opening skin-cells). I also trained in noticing/articulating³⁵ specific multiple bodily states and sensory experiences (melting, sleepiness, arousing, posing). –In attending to the many changes arousing and the multiple bodily sensations undoing my previous sense of one/wholeness, arousal, as a kind of state of *flowing*, or *morphing*, or letting 'go' of forms- emerged. An opening up to the polymorphous, the not yet formed, or yet, undone. A kind of arousal of formlessness turning me on.

In rehearsing with chemo I yield into an emerging state of arousal, letting go of any attempt to contain 'my' body and allowing the porosity of the experience to embrace the unexpected/possibilities³⁶. In the arousal of somatic differentiation, the two body-configurations

³⁵ By articulating I mean being specific with the kind of change. (how is this kind of melting? – is it an ice-melting or another kind of melting?)

³⁶ Havi Carel, writing within the phenomenology of illness, names this sensation of opening the body unity, as 'loosing' body certainty (Carel 2021; 2018). In the experience I describe, I would not qualify the experience as of 'loosing certainty' but as engaged in changing.

(chemo-combo and caro-combo) affecting each other, co-construct a porous chemo-caro-combo transiting through the border of ‘my’ skin. A rehearsal of self (un)becoming through co-composition. Some thing, the materiality of what Lynette Hunter calls ‘selving’ (Hunter 2016), the intensity of physiological co-compositions and bio molecular de(com)positions, bio molecular muddles shifting relational modes --is happening. This something, I don’t know what it is, escapes what Kathleen Stewart phrases as any ‘narrative of social decline’ (Stewart 2007). Arousing formlessness conjures moving assemblages of flesh and pleasure, and invokes polymorphous eroticisms that exceed any previous ‘orientation’ I had about chemo and erotica. From this experience, I crafted the performance piece *Ero(chem)ica*³⁷. Turned the rehearsal with chemo into a public performance with the hopes to arouse more porous orientations and multiply the poses around illness and sexuality. Perhaps this rehearsal process of re-composing flesh, pleasure and possible notions of erotica with chemo fostered my later sexual re-orientation³⁸.

[It follows an excerpt from Published piece in Performance Research Journal 26. Under the Influence] (Novella 2017b)

Ero(chem)ica is a performance piece about the arousing intensity of morphing-with chemo. Invoking the sensuality of biochemical encounters, *Ero(chem)ica* is a story about co-creating with chemo: a kind of collaborative self (un)becoming³⁹. Assembling fragmented texts,

³⁷ *Ero(chem)ica* evolved through several performance iterations: At a Guillermo Gomez-Peña’s cabaret in San Francisco (March 2015), at Cine Teatro Tonalá in Mexico City (June 2015), at El Cadejo in Costa Rica (August 2015), at the Performance Studies Symposium in California (October 2015) and at Amoqa, Museum for Queer Arts in Athens, Greece (December 2016)

³⁸ A few months later, I engaged in a process of ‘queering through crip’, reorienting my sexual affinities and started a relationship with another queer woman.

³⁹ (un)becoming is, here, a kind of creative undoing that emerges in collaboration with the drugs. Echoing Halberstam, I take (un)becoming as a creative possibility; a queering of normalized perspectives on what ‘being on chemo’ feels like. (Halberstam 2011)

sounds and movement, Ero(chem)ica conjures biochemical relationalities as a rehearsal space arousing formlessness and the affective charge of being under the influence of chemotherapy for the first time as an erotic experience.



Figure 3 Performing Ero(chem)ica at the Museum of Queer Arts, Athens, (Greece). 2017

While cancer diagnoses define chemotherapy as medicine, Taxotere -- one of the components of my own chemo/combo -- was originally extracted from *Taxus baccata*, a tree related to sacred rituals and documented as a hallucinogen. Commonly known as European/English yew, *Taxus baccata* is an evergreen, long-lasting and highly toxic tree. While toxicology literature traces the uses of yew alkaloids (taxine) back to suicidal strategies and chemical weapons during hunting and warfare (Burrows and Tyrl 2001), ancient Celtic religious practices and stories enact the uses

of yew as a path from death to immortality (Hageneder 2007) and current neo pagan literature trace its hallucinogenic qualities to shamanistic transits and revelations (Mountfort 2001). With this piece, I attempt to pull the audience beyond the weight of oncological narratives and into the arousal of biochemicalizing (my/our) sensoriums. Taking Deleuze's proposal that 'all cure is a voyage to the bottom of repetition' (1994: 19) the encounter with Taxotere, in Ero(chem)ica, activates the drive of becoming-other (perhaps a chemo-caro-combo), arousing an affective erotic charge resulting from a kind of radical formlessness. Engaging the audience in the morphing quality of the encounter with chemo aims to make borders more permeable: my skin (again), the audience's and the cultural tales that solidify borders of who counts as desirable or desiring, or, even more, of what counts as a life force Ero(chem)ica, indexing the disjointed intensity of luring text/ures, aims to attune the audience into new pharmacoerotic assemblages. To open, through eroticism, more possibilities of existence⁴⁰.

Rehearsal #3. 'Bald' arousing awe. Becoming skin-sensor

April 12, 2011

Last Sunday my last lover murmured: - You are like a kitten - I wondered if it was because of the trace of fur I left on the pillow. Since then, I have been meticulously keeping an eye to the looks of my head. It's Tuesday and in my ritual of mirror checking, I notice some sparse clear areas on the back right side of my scalp—the missing hair announces baldness. With a hint of disgust for

⁴⁰ This questioning of what counts as 'alive' resonates with Mel Chen's work on *animacies*. (Chen 2012) Chen narrates an event of couch intimacy spurred by an episode of toxic undecidability, which I connect to my arousing while chemo affair. Both performances aiming to do a kind of health activist intervention, questioning the categories of live, and aliveness within medical fields.

what I see, I grab a magnifying hand mirror so I can closely examine the cleared clumps. Softly rubbing the areas with the tip of my index, I notice a sprinkle of hair falling into the sink. I start picking crumbs of hair. Slightly pulling, I sense, first, an unusual lack of resistance from the hair-skin within my fingers. The stretch does not hurt! Drawn into the experience by the strange sensation, I continue plucking, carefully attending to the sensory tensions. This is a new kind of resistance I have never sensed before: The hair does not slide out smoothly, neither resists as usual—pulling the skin-flesh with it—, it is a kind of ‘popping’ out of place. As if each filament of hair was somehow planted and the bulb— not attached to the ground anymore, yet still larger in diameter than the stem— created tiny little suctions in each of my pullings. I get carried away by the sensation and start plucking strands of hair all over my head, experimenting with the unique sensation - feeling. As I pull more and more hair, I move into the shower to fully bald myself.

I could have thought of losing my hair as a kind of pose (posing)-as I had seen images and representations of the effects of chemotherapy, imagined what my bald head could look like, and had rehearsed for this moment in front of the mirror for endless hours. However, the intensity of becoming-bald engaged me in a state that exceeded pre-conceived images of the result. The fear and shame I had imagined coming from ‘being bald’ were not in place, at least not during the time frame (an hour, perhaps?) through which I pulled and scratched my hair off while in the shower. I was not thinking on the final outcome of baldness. In engaging with the materiality of changing, I suspended knowing the likely

outcome (or pose) of my image/identity as hairless woman and a complex enfolding of strangeness, discomfort, awe, and playfulness aroused. Radical wonder and the lure of comprehension animated me through the not-yet-known of the event. Seeing bundles of hair go down through the bathroom drain was extra-ordinary, and I had to record some videos of the transition. It was the marked 17th day after my first shot of chemo. Although expected, something totally unexpected was happening, and while in transit, I engaged in a kind of exploratory rehearsal that pushed through and carried along meanings and emotions, beyond what I had known and could have imagined possible. In the following months I would use the video to craft a joint performance with my friend Lucre Masson on aberrant bodies, enabling queer-crip alliances.

Balding, the rehearsal of becoming bald, turns into a somatic exploratory adventure attending to the unusual sensation. Rubbing, picking, pulling, plucking as well as sharpening the somatic sensorium to the point of articulating the sensory experience as one of tiny little suction are some of the practices for this rehearsal. One more time, rehearsing entails the fine-tuning into the material qualities of the somatic experience. Despite marked on the calendar and foreseen, the *rehearsal* of becoming bald turned into an unexpected event. The unusual ‘sensory tension’ lured me to explore the materiality of (~~me~~—~~my hair~~) changing. Captured by the sensory exploration and lured by the extra-ordinary bodily experience of becoming bald, biomedical cancer certainties suspended. The process also aroused a more complex affective ecology than what I had expected. This rehearsal held a kind of ‘transit’ between poses— that is, the movement between being hairy and being bold. A subjective shift already present in my (ours) *chemoverse*⁴¹ imaginations. A

⁴¹ Expand with reference to author from the Chemoverse comic.

recognizable form in transit between a ‘healthy’ and an ‘unhealthy’ corporeality. The enactment of a transit *between* socio-cultural localizations, yet not only⁴². In the experience, socio-cultural positions coexisted with the situating of becoming⁴³. The transit was not only *between* expected poses, but *within and across* a field of change. *Within* rehearsal, or in rehearsing, an ecology of new sensations, practices and unexpected affective intensities emerged. The situating practices — what one does while becoming bald, or the practice of ‘balding’ — had not really occupied my imagination until then. I had heard very little about it aside some advices to cut the hair short or even shave before the day, and I had not yet seen the photo performance ‘hairotica’ (Sprinkle and Stephens 2006). I had mostly been concerned with the final result, or *pose*, and not with the process that would lead me there. Picking or pulling hair, sensing the scalp popping or pulling and throwing bundles of hair -flushed into the toilet- were extra-ordinary emerging sensory actions I was experiencing for the first time, so much so that I had to record them. Also, *across (through)* the transit, in the practice of rehearsing, a complex affective quality *aroused*. An intense blending of curiosity, excitement, surprise, rage, and estrangement foregrounded, moving to the background any pre-formed understanding of the limits of beauty, femininity and disease, or emotion of fear and shame for being bald. This creative practice of tuning into the process of balding, noticing the bodily experience of becoming bald, opened up a field of affective possibilities.

Through these three cancer rehearsals I (me/cancer/sexuality/the world) changed: I sharpened my *arachnid sense* and developed sensorial superpowers, engaged in a multi-porous erotic encounter

⁴² I use Marisol de la Cadena’s notion of ‘not only’ to signal multiplicity and that more-than-one possibility coexist. (de la Cadena 2021)

⁴³ Lynette Hunter articulates the difference between the socio-cultural and the socio-situated in *Politics of Practice* (Hunter 2019). The idea being, here, that the position or knowledge recognized by sociocultural discourse is not exclusive in making differences, but that positions/knowledges get made in situated conditions, and in the making of these differences, change happens in the socio-situated.

with chemotherapy, and activated creative imaginations through radical wonder. In resisting the parenthetical metaphor, in the loyalty to living, these rehearsals emerged as a kind of survival improvisation practice (Joe Dumit 2018). Choreographer and theorist Mayfield Brooks writes and performs about survival improvisation in her work 'Improvising While Black', and she helps me think of improvisation as a practice of shapeshifting, of allowing 'the body to go against its own expectations of itself' (Brooks 2016; 34). The creative process also generated a concept that stick with me: *transcorporear* (transbodying)



Figure 4 cuerpo tendido. Documentation piece from the process of making the performance: I d(e)o Therapy. Presented at 'In Bodies we trust'. Made in colaboration with Sergi, Elitza, L. Bogad's class on non-fictional performance, and cancer. This picture has travelled into oncogrrrrls fliers.

Transcorporear – (transbodying); bodying as health dissidence

Through these creative processes, *transcorporear* (transbodying) emerged as a material live-art practice for tending to bodily changing and a conceptual tool for engaging in conversations and alliances from the cleavage. As material treatments excited my flesh and excised me from narratives of ‘normality’, a transcorporeal⁴⁴ relation with oncological bodies spurred a field of manifold potentials, and new material configurations emerged. Through chemical excitement and interventions of my flesh, I comprehended embodiment (bodying⁴⁵, perhaps?) as a matter of movement, of transit - a process that decenters, cuts across, intermingles, shakes, reverberates, amplifies, resonates with, reinforces, and multiplies (personal and political) notions of what a body can do⁴⁶. Bruno Latour, in *how to talk about a body* proposes a dynamic definition of a body as ‘learning to be affected’, as a process of learning to differentiate more and more subtle qualities with the world (Latour 2004). Latour brings the example of trainees of ‘noses’ for the perfume industry. This definition help me think of how I progressively acquired a skin-sensor, a kind of bordering antenna emerging from learning to notice change with biomedical interventions. Through these practices, many different kinds of borders, or skin-membranes emerged, making the border of ‘my skin’ into a movement sensor (the arachnid sense), a porous membrane (with chemo), and a substrate for rootless hair (in balding). Through biomedical interventions, ‘far from being less, [I] became more’ (227). In training to become sensitive to the different kinds of movement and tensions within and around my skin, I became sensitive to the variations and

⁴⁴ Transcorporeal as proposed by Alaimo’s *Bodily natures*, where transcorporeal is about the exchanges happening across environmental bodies. (Alaimo 2010)

⁴⁵ I take from Erin Manning, in writing about her relationship with illness in social media, this traveling concept of body in process.

⁴⁶ Referencing Spinoza’s notion of a body, as looking beyond what a body ‘is’ and proposing bodies in terms of ‘what they can do’ (Deleuze 1988; 17-20). He brings into the body equation that what matters is not the ‘thing’, but the ‘doing’ and its capacity to affect and be affected.

relations around, within and through my skin, becoming articulated⁴⁷ on multiple skin borders, bordering. I also learned that closely tending to the process of changing could open cancer-relations, and that these relations could be many more things than the expected ones (even arousing!). Through rehearsal, I understood the cancer body as multiple, aroused and in transit, in opposition to the monolithic views that fix and asexualize the disease. Experiences of sensuous experimentation taught me that while the body is a battle ground, bodying is also fertile ground for dissidence of the ‘health’ norm (and the somato-political onco-fiction⁴⁸).

Transbodying started in the physiological disruption of the flesh and entailed a disorientation from the norm: a movement into corporeal indeterminacy, unsettling normative notions of gender, productivity, femininity, and desire⁴⁹. New orifices, scars that connect/merge/blur the inside with the outside, disjointed me from the social. My flesh had been excised from understanding (sequenced narratives of individuality), and I was read as, not ‘a woman’; I even turned into an exile from desire⁵⁰. A kind of ‘non-body’. And by this I meant the impossibility to be read by the ‘grammar’ that used to read me as a productive, reproductive, desirable, woman. The way in which Hortense Spillers, Black feminist author talks about grammar helped me to understand how there

⁴⁷ I am using articulated here as in learning to differentiate and being specific with the differences noticed.

⁴⁸ I owe to Paul Preciado my understanding of the ‘health’ norm as a somato-political fiction. Also, the notion of transbodying points to the permanent state of bodying that resonates with the idea of the ‘crossing’ as a place everybody inhabits (knowingly or not) as Preciado suggests (P. B. Preciado 2020)

⁴⁹ Visual artist and scholar Sonia Báez-Hernández (2009) while describing her own experience with breast cancer treatments writes, similarly, that breast cancer forced her to realize that corporeality changes and transfigures subjectivity. She claims that ‘facing breast cancer forces us to realize the impermanence of the body and social categories’ (Báez-Hernández 2009; 148). She made an art piece in relation to her breast cancer treatment called ‘trans-body (2002): in writing about it, she refers to her experience as a process of deterritorialization and territorialization.

⁵⁰ What I mean here is that my cancerous body could not be read neither as desirable or desiring.

is a grammar of recognition crossed by axis of value that makes bodies into ‘flesh’⁵¹ (Spillers 1987). Through this process, I could resonate with what Sedgwick called ‘a process of embodied deconstruction’⁵². Reading Jain’s ‘Cancer butch’ felt like fresh air amidst so many ‘pink blogs’ of happy families and funny scarf warriors⁵³. There were critical voices revealing the structural masking behind the individualization and hyper feminizing of the disease!

Reactions to my being in the public space offered me clues about the social structurings around illness, particularly around cancer. I dealt with the subtle (and not so subtle) normative forces enacted in biomedical protocols and faced numerous daily manifestations of social cancerophobia⁵⁴ and ableism. Particularly, during the months were I could not ‘pass as healthy’⁵⁵ I felt my monstrous rage at its peak, and it resonated with transgender friends and authors naming this rage as a critical space (Stryker 1994). Nikki Sullivan’s concept of transmogrification sits in relation to notions of monstrosity and strangeness in different kinds of bodily transits (Sullivan 2006) as a way to point to normative injustices. Critical perspectives helped me make sense of the constant instances of gawking and staring, while dealing with the biomedical processes and

⁵¹ Reading her work, I realize how little I know about these relations. And as the work of Black and queer femme of color feminists in the United States touches me through notions of disability and transformative justice, I also realize how much more work needs done to open up queer and crip frameworks to incorporate feminist of color critiques and modes of production as Sami Schalk and Jina B. Kim propose in their recent piece *Integrating Race, Transforming Feminist Disability Studies* (Schalk and Kim 2020).

⁵² Sedgwick refers to the deconstruction of gender and the many oppositions that she was able to destabilize through her experience with cancer (Eve Kosovsky Sedgwick 1999)

⁵³ I particularly sat in her nuanced critique of pink washing, through a queer lenses, and her ‘desire to proliferate the possible identities of illness’ (2007: 506)

⁵⁴ This is a medical term that doctors use to describe the pathological fear of cancer (recurrence). I use it to mark the social dread to cancer.

⁵⁵ Proposed by Alisson Kafer (Kafer 2003), the idea of passing in relation to compulsory able body mindedness is particularly relevant in literature discussing processes of coming out as crip. (Samuels 2003; McRuer 2006)

institutional decisions aiming to regulate my body. Eli Clare, queer/crip poet and scholar writes about finding community to resist the normative/punitive gawking (Clare 2003). And over the months, I became closer to transfeminist circles in Barcelona and Spain, where I found friends, ‘teachers and heroes leading complex, messy lives, offering me reflections of myself and standing with me against the gawkers’ (259). Through this process of *transbodying*, as the process of bodily-relations changing, with the company of friends, also engaging in processes of fleshy-suspicion from various (health, gender/sexuality, race) fictions and bordering regimes, I became a health-norm dissident and moved from ‘sick’ to ‘crip’⁵⁶.

Mutant Alliances. Las alianzas mutantes.

Almost a year and a half after the scratching of my hair in ‘becoming bald’, my friend Lucrecia Mason Córdoba, fat queer activist, and myself, used the recording of that experience to edit a video for a joint performance that we presented at LadyFest Madrid, in 2013. We named the performance ‘aberrant *bodies: ugly, fat, cancerous*’ to point towards the deviant confluences in our situated experiences, and engaged in a rich debate post-performance in which we shared our fat/cancer resonances among a crowd of trans-marica-bollo-raritas y tullidas (queer/crip) folks, transfeminist activists. We talked about the invisibility of extreme visibility in, the interplays of the ‘healthy’ ideal through different kinds of desirability, and cure narratives through gender and sexuality norms. We also led a two day workshop to explore, through performative tools, the interplay of health and body mass a somato-political fictions. We engaged in rich discussions about being ‘non-

⁵⁶ Marie-Garland Thomson proposes the notion of ‘misfitting’ as a term that attends to the process of material mis-alignment from the expectations of the world, and argues that this process can produce subjugated knowledges from which an oppositional consciousness and politicized identity might arise (Garland-Thomson 2011). Transbodying as a term also aims to bring the materiality of the process of bodying, while gesturing to the transit* as a process of somatic dissidence from the norm. Transbodying signals the potential for a somato-political coalition with ‘transgendered embodiments, queered affects, disabled communities, and the racialized, classed, and able-bodied operations of precarity’ (Brandzel, 2018; 130)

bodies⁵⁷, with a group of trans, queer and disabled folks, and I felt at home⁵⁸. Over these two days of creative process/workshop we crafted a collective poem: *mi cuerpo aberrante es. [my aberrant body is]* that Lucre shared in the opening event for the *Pic-nic Mutantes*⁵⁹ in Barcelona a few months later.

⁵⁷ These conversations, which touched on the many differently ways in which each of us felt to be a ‘non-body’, created a sense of shared space outside/alongside the bodily norm. In retrospect, I/we can say that many differences were missing in the encounter, (Egaña Rojas 2017; Sarriugarte Mochales and Masson Cordoba 2018) and some work needs to be done to address the absences and un-naming of other differences (such as racialization, migratory status, class, age, and possibly more). And yet, this being a ‘non-body’, yet occupying an autonomous somatic territory in relation with many dis-similar potential friends, created a very powerful sense of coalitional possibilities. As my partial contribution to the unfolding of those alliances *mutantes* that were boosting in those days and that many recorded and called upon (B. Preciado, n.d.; Masson 2013; Post-Op 2013)

⁵⁸ The sense of feeling at home while ‘transbodying’ touches on the coalitional affective qualities of inhabiting the border as proposed by Anzaldúa in *Borderlands* and *El Mundo Zurdo*. (Anzaldúa 1987; Moraga and Anzaldúa 1981).

⁵⁹ The *PicNic Mutantes* were a series of events co-organized by folks in Barcelona interested in gathering around conversations and workshops on non-normative corporealities and queer/crip alliances. In these *Pic-Nic*, as Andrea, Nuria and Elisabet explain, the motto was to build from these alliances and move into intimacies and trust. (Garcia-Santesmases Fernandez, Vergés Bosch, and Almeda Samaranch 2017)

LADYFEST MAD/2013

JUEVES 20

>> periferia sureste : carabanchel <<

checoslovaquia 34 & vaciador 34

C/ Matilde Hernández 34 -M- Opero

17.00 >> bienvenida > té con pastas <<

19.00 > proyección:
AUDRE LORDE - The Berlin Years, 1984-1992 (Dagmar Schultz)

19.00 > teatro:
ENTRADA CON CONSUMICIÓN (Les Filles Föllén)

19.00 > charla:
CARTOGRAFÍAS TRANSFEMINISTAS (Miriam Solà)

21.00 gruta 77
C/ Cecilia 77 -M- Opero

23.30 > intervención:
BADFOOD

> pinchada:
RAMSAY & HEARST SELEKTORS

> conciertos:
ELCASSETTE
THEE GIRLFRIENDS
MEYRLSTREEP

VIERNES 21

>> periferia norte : tetuán, azca <<

espacio naranjo

C/ Arceño 32 -M- Tetuán

17.00 > exposiciones:
Lola Perla Soto + Mayra Huerta (video)
Maria Gil Uldemolins (instalación)
Elena_Ocho (fotografía)
Trisha Low (poesía)
Marta Ortells y Paula Pè (plantillas)

17.00 > fanzines:
Mesa redonda
Feria
Presentación fanzine

20.00 > recital:
Laura Jaramillo

21.30 PLAGA DE BAILE
ruta en trance hacia

22.30 panamericana disco
C/ Orense 22 (bajos)
-M- M. Ministerio

> fiesta lady cumbiera:
CHICO-TROPICO Djs

>> chamberí y <<

CSOA la morada

> taller:
GUERRILLAS COTIDIANAS - ESCENICAS Y FEMINISMOS (Blanca Ortiga y Jara Coscolluela)

12.00 a 20.00 vestuario
Pasaje de los Melancólicos 3, 2º B

16.00 > proyección cicliatría:
'Dudey free zone'
'The Ovarian Psychos'

18.00 > taller de cicliatría:
ruta a la ciudad

18.00 > charla:
GROSERIAS Y PIROPPOS: CONVERSACIONES SOBRE COMEDIA Y FEMINISMO (Nacho Moreno y Paula Jiménez)

VIERNES 21

C/ Santa Eulalia 4 local -M- Tetuán

PKMN

17.00 > taller (parte I):
CUERPOS ABERRANTES: GORDAS, CÁNCEROSAS, DEFECTUOSAS, ZANOHABLES? (Caro Lúdica + Lucre Pantagruelica)

19.00 > charlas:
PINCELADAS POSTPORNO Y NUEVAS ALIANZAS ENTRE MONSTRUOS (Post-Op)

21.00 > performances:
NEW GIRLS SEX WORKERS (Bluthe Kat + Erika Trejo)

EL DILDO DE KANT EN MI BOCA (Erika Trejo)

SÁBADO 22

>> centrosuroeste: carabanchel y <<

checoslovaquia 34 & vaciador 34

C/ Cecilia 77 -M- Opero

17.00 > charla:
LAS RELACIONES DE AMOR COMO PROCESO CREATIVO REVOLUCIONARIO (Brenda Bengala & Kiara Magnafranse)

19.00 > taller: (parte II)
CUERPOS ABERRANTES: (Caro Lúdica + Lucre Pantagruelica)

19.00 > taller:
MEZCLA & SCRATCH: (DJ Cut Loose)

21.00 > performance:
CUERPOS ABERRANTES

21.00 > performance:
TURNTABLE (Jeleton)

21.00 > conciertos:
LIDIA DAMUNT
SHE SAID DESTROY!
HANSELETT

> pinchadas:
HUMORSELVA mix set
DJ CUT LOOSE

> fiesta de los cuerpos gozosos

DOMINGO 23

>> barrio castiño : chamberí <<

CSOA la morada

C/ Casarubielos 3 -M- Queda

15.00 > pasting-up:
VEGAN BUNNIES

16.00 > muestra del taller de escénicas

17.00 > proyección:
FILLIUS NILLIUS (Maria Khan)

17.00 > taller:
TURNTABLE (Jeleton)

18.00 > taller de AUTOGESTIÓN BISEXUAL

19.00 > taller:
TANGO QUEER: DE/GENERANDO LOS ROLES DEL TANGO

20.30 > velada okupé:
RAQUEL MELLER (Hugo Pérez)

siguenos: fb/ ladyfestmadrid tw/ @ladyfestmadrid

CONSULTA DOSSIER Y ACTUALIZACIONES EN: ladyfestmadrid.wordpress.com

TODO Precio LIBRE

Figure 5 Poster of the LadyFest Madrid, 2013.

This experience deepened my sense of belonging to a movement of somato-political dissidents, the transfeminist movement in Spain, particularly within the current of alianzas tullido-raritas

[queer/crip alliances] emerging those days. While my own experimental engagement with cancer treatments and the attempts to launch oncogrrrls over two years had been my training field into cancer suspicion, this Ladyfest might have been my ‘coming out’ as crip⁶⁰. In this moment of intense reorientations⁶¹ and normative suspicions, the heteronormative grip loosened and I embraced new desires⁶². Returning to Joe Dumit’s opening quote, my opening to sexual reorientations could be a kind of ‘freeing myself of habits’ that entails a normative displacement, a movement of *queering through crip*.

While engaging creative process within biomedical interventions sharpened my trust in the potential of improvisation and bodily experimentation as a mode for making new cancer relations, the coalitional potentiality of *transbodying*, and the emerging mutant alliances made the first oncogrrrls laboratory possible, while laying the grounds for this research project: on.co-creation as oncological justice⁶³ through the arts.

⁶⁰ And by this I mean, embracing a dissident-critical stance to the ‘medical/ableist norm’

⁶¹ Echoing the work of Sarah Ahmed, as in queer reorientations of spatial-affective relations (Ahmed 2006)

⁶² While some read Garland-Thomson cites (Brownworth and Raffo 1999– to offer a reading that grounds the becoming lesbian of some disabled women coming from a negotiation aiming to solve ‘the potential cost of losing her sense of identity and power as a feminine sexual being’ (Garland□Thomson 2005: 18). I would propose a different interpretation that displaces the individual identity crisis, as a kind of ‘lack’ or failure, into a productive improvisation that reveals the structural (heteronormative) grasp, while training new sensoriums.!

⁶³ While the conversations then did not center racial justice or the experiences of migration and racialization, the emerging alliances signaled the spirit of civil rights icon Fannie Lou Hamers’ ‘nobody’s Free Until Everybody’s Free’. Fannie Lou Hamers’ death from untreated breast cancer works here as an incisive reminder of the impact of racialized structural inequality in health disparities.

oncogrrrls

In 2011, I imagined oncogrrrls, an art-activist research-creation project to 'do something about it, and do it together'. I invited a friend⁶⁴ to join me on a research-creation project to co-create with women and gender dissidents, performance pieces from our experiences with cancer as a mode of inquiry, resistance and connection. After two years of 'entering the field' in Barcelona, in May 2013, we consolidated the first oncogrrrls residency, mostly thanks to the alliance with the transfeminist collective 'marimachos cancerosas' (cancer butches)⁶⁵. Since then, we⁶⁶ have run five *oncogrrrls*⁶⁷ iterations, in the form of temporary artistic projects across Spain and Mexico, and we have co-created video dance and documentary performance pieces, live performances and installations, visual poetry, a fanzine and several gatherings on feminism, art, and cancer. A grosso modo, oncogrrrls' practice involves that a group comes together to make a performance piece about some cancer concern we care about. The group composition varies and changes in each iteration of the project⁶⁸. At the beginning of the laboratory, we identify an issue that will be the through-line for the inquiry. With improvisation practices we generate materials (actions,

⁶⁴ Marissa Paituví, an anthropologist interested in arts-based research with women diagnosed with breast cancer.

⁶⁵ See their blog marimachoscancerosas.blogspot.com

⁶⁶ While the composition of the groups keep changing in each iteration, as a project that centers co-creation, I insist in the pronoun 'we'.

⁶⁷ See a detailed summary of oncogrrrls doings as an annex of chapter 5.

⁶⁸ More than 50 individuals have engaged in workshops and creative residencies within the project. 60% of the participants have been diagnosed with cancer, while 20% of the participants had a close relative who had experienced the disease and a 20% were interested in cancer relations from a professional perspective. Two thirds of the participants ranged between 30 and 45 years old, and one third was younger than 30 years old²⁴. 9 artists and/or researchers collaborators have also joined the projects. In terms of general audience, I approximate 500 people have been reached as direct audience through different public screenings and presentations, and more than 5.000 have accessed oncogrrrls pieces through online platforms. In relation to the kind of cancer, different types of cancer, with a majority of primary breast cancer. Other kinds of cancer have been uterus and rectum or pancreatic, lung, liver and bone as secondary cancers.

gestures, texts, sounds, images) that will compose the final piece. oncogrrrls centers activism through art inquiry and has fostered more significant discussions on cancer politics, moving conversations beyond individual stories of survivorship and into environmental health, bioethics, and social justice artworlds⁶⁹.



Figure 6 A slide with oncogrrrls motto, logo/ and image

⁶⁹ Art critics, feminist scholars, film festivals and Museums have reviewed, awarded, and curated this work. For instance, the piece we developed in 2015, Gypsum Laboratory, was showcased in the exhibition, Biomedica: enfermedad, arte y medicina, at the Museum of Contemporary Art in Querétaro, Mexico, and in the exhibition my disease is an artistic creation at the collaboratory for art and biomedical sciences, in Hangar, Barcelona. Research on oncogrrrls has been published in journals addressing Health Movements and Feminist Performance, in a compilation on cancer and feminism (Porronche-Escudero, Coll-Planas, and Riba-Sanmarti 2017), critical work on art and politics (Hunter, 2019), and work on feminist tinkering in DIY communities (Giordano, Forthcoming)

Overview of Chapters

Chapter 1, What are we waiting for? Rehearsal as arousal politics in oncogrrrls

This chapter introduces oncogrrrls through the examination of the first creative-residency that took place in Barcelona, in 2013 and engages with *rehearsal as method* in practice. oncogrrrls, particularly in the making of (Parenthesis), examines rehearsal as a liquid space for the joint creation of new cancer relations. We propose rehearsal, not performance, as a model of somato-political engagement and a way to end life/health splits – where life is put into a parenthesis, suspended, while the patient undergoes treatment. Resisting the individualization of the experience, and inviting coalitional cancer politics, the possibilities of rehearsal emerge while exploring the question: What are we waiting for? This chapter proposes the notion of *arousal politics* as the undoing of self and the renewal of bonds happening in rehearsal.

Chapter 2, Rehearsal as Method, principles for the practice

This chapter presents and examines oncogrrrls' core principles to engage in *rehearsal as method for on_co-creation*. Moving away from notions of 'support group', or therapeutic approaches, rehearsal as method in oncogrrrls aligns with transformative approaches that seek to address the deeper structures entangled in the individualization of the disease. The chapter introduces and examines these core principles and how they work by looking at oncogrrrls' vignettes.

I introduce Rehearsal as Method as a *Process* guided by (choreographic/creative) *principles* to orient the *practices* of jointly creating cancer ecologies. Rehearsal as Method is a mode of production guided by choreographic/creative principles: 1. Score⁷⁰ inquiry (not

⁷⁰ Scores are sets of instructions used in improvisational dance and theatre to invite artistic exploration.

resolution/representation)! As a guide to center curiosity, pro-posing practices for open experimentation and preventing the foreclosure of the experience into univocal solutions or universal representation. 2. *Co-create!* orients the practice towards a process of shared inquiry/creation, moving away from individual authorship. 3. Start in the body! As the orientation to arouse new cancer sensibilities through experiments on bodily movement and attention.

Chapter 3, Mold-Molding, the making of ‘gypsum bodies’ in Mexico City. This chapter presents the work of oncogrrrls in Mexico City, in 2015. In the making of the piece ‘gypsum bodies’ and ‘sounding resistances’, the group engaged in making breast molds. By exploring the question: how does the silences of cancer shape our bodies? This chapter engages with artistic - bodily experimentation to create multiple, situated narratives beyond the stigmatizing of ‘lack narratives’ in breast cancer. This chapter experiments with two modes of critically enacting politics in art-making and traces transposing as a technique for enabling multiple curiosities within attention to structural forces. *Transposition* takes form as a core exploratory mechanism directing attention to the somato-relational doings within oncogrrrls: pick an issue, move it somewhere, notice what emerges.

Chapter 4. Scoring race, undoing ignorance. This chapter addresses the methodological challenge of how to engage somatic inquiry about the unequal distribution of vulnerabilities from a place of (un)felt exclusion, through the making of a live performance in Zaragoza, in 2017. While the group was exploring issues of uncertainty and cancer, the question: what about race? emerged. As unmarked (white-payá citizens) individuals, with access to the Spanish health system we faced the challenge of exploring structural pains through our felt-sense. This chapter proposes

some methodological clues and activist lessons for groups working on cancer justice. Physicalize the structures, particularly, if you don't feel the pain!

Chapter 5. Modeling evaluation. Measuring impact in the arts for social change. This chapter emerges from the challenge/invitation from artists and scholars Stephani Etheridge Woodson and Tamara Underiner (Etheridge Woodson and Underiner 2018) to question what methods, models and materials are best suited to theorizing change within performance studies, and to what extent can we draw on existing theories of change in other fields to animate approaches to change within performance art and activism. After asking all the participants in oncogrrrls about their experience in the project, I engage in an exercise of exploring possible models for evaluating their responses. I take some of the models for evaluation proposed by Animating Democracy and some of the socio-medical models for evaluating change that I had previous experience with (Communication for Social Change and the Socio Ecological Model in health communication). This chapter turns into an exercise in noticing gaps and differentials between models that aim to measure 'impact'. Through the challenging task of modeling evaluations, this exercise provides a very generative exercise in *clarification and assessment* of the work done in oncogrrrls, and a realization of the amount of time and work that certain kinds of assessment require (is it worth it?). This has also been an exercise in running into rabbit holes of *validity*, against walls of *recognition* (what counts as change, who defines it, when) and into the limits of knowing from different perspectives. On the issue of working with others, I wonder, do we need to talk the same language to work together? Can we collaborate and value despite incommensurability?

Chapter 6. Practices for Holding, Arousing and Posing on.co-creation. This last chapter as a practical afterword provides some specific tools for engaging in the making of joint cancer performance. The creative process follows an arc of practices for *holding* the group and the

process in co-creation, for *arousing* somatic processes, and for *posing* new cancer ecologies.

Practices for *holding* are those that insist that the exploration stays within the group: laying out our questions to explore, our ground agreements, commitments, limits and expectations: defining the edges of each process of co-investigation, co-facilitation and co-creation. Practices for *arousing* are those set of practices that will excite, unsettle, or animate the issue. Practices for *posing* are those that foreground what has happened, not a fixed answer or a clear resolution, but a foregrounding of the experience as a kind of return, a kind of sharing of the exploration as an open-ended proposition.

Interludes. oncogrrrls images, videos, links and scores

Appendixes literature reviews that journal editors cut out of the main body of the text as ‘dissertation stuff’, published pieces and some pieces of writing that did not make it into the main body of this text, but that have nonetheless informed this study.

Opening Cancer ecologies

Alexis Pauline Gumbs invite us to think of our bodies as ‘orbits of stars that hold us and name us’ (Gumbs, n.d.). Thinking with her, this dissertation is a compilation of orbits that hold and name cancer-bodies. If we start with asking a question to cancer, where else can we go? That is what this dissertation does. The orbits expand from this introductory *caro-chemo-combo* and into the flesh and bones of *oncogrrrls* and its multiple enactments through the chapters. The interludes offer a peak into the pieces (with links to videos and images from the creative processes). Some of the key lessons in this project arouse from cancer orbits further away, orbits that held on.co-creation with other artists and groups concerned with social justice and kinds of onco-bodies (Quimera Rosa’s *trans*plant, my disease is an artistic creation*, and Annie Sprinkle and Beth Stephen’s *Ecosexuals*). Written pieces from these collaborations can be found

somewhere else. (Novella, 2019) This exploration is already shifting planes of operation and is moving cancer relations into orbits dealing with dying, multispecies and racial relations in *co.sense*, a laboratory on learning with silkworm colonies. It is also moving into re-engaging with transfeminist orbits in Spain who care about health and justice in multiple ways. I pro-*pose* this dissertation as a relational exploration into the many on.co-creations and *togetherness* to come. This dissertation is only a ‘landing’ of the possible orbits. One particular rendering of a living process. The cut comes with some limitations and pains, fears of ‘fixing’ the research, anxiety for how will I continue to manifest this research into the world, and the emotional resistances to letting go. I am also ecstatic for sharing the depths of this exploration, and to let it engage with the world. I hope this dissertation is a relational ‘posing.’ One orientation of cancer and art-making into a more just, pleasurable and curious world. I can’t wait to transform it into something ‘useful’ for artists, activists, and peoples who care about transforming bordering cuts into relational entanglements.

This dissertation is art-making by force. Or perhaps, art-making ‘in justice’: a research into how to proliferate cancer relations through art-making, or how to engage in joint creative process oriented to health justice. When doctors make cuts ‘now put your life into a parenthesis, and only care about your health’ they might not be aware of the generative invitation. Justice feels like a fierce looking into the cut and nurturing connection as a transit through. The cuts exist in socio-cultural structures and this dissertation emerges from many of them, and yet, I do not spend much time on them. I might refer you to some other friends who do work on how the cuts have been excised. Cuts are, in this dissertation, spring boards, questions to open and entangle. Justice turns into a kind of activism that is rooted in doing things together and in moving away from the self as an ‘only’ unity of experience. You will notice many fields informing the dissertation, I

take them as different entry points and angles on how to re-entangle the cut. Insisting on curiosity, togetherness and bodily justice. Briefly, oriented by *how to change* questions, I looked into ‘praxis’ and practices and bodily doings. Communication for Social Change and Community-engaged Arts brought me to liberatory approaches insisting on inquiry to make new worlds. Dance improvisation and Performance scholars offered me practices and concepts to engage with emergence and the bodily exploration of the not-yet-known; tools to play along the edges of making art and politics. I looked into notions of togetherness, alliances and coalition. Transfeminist and queer/crip alliances provided critical lenses and solid friendship: I learn with women and people of color queer and disability activists and artists concepts to uplift bodyminds while noticing unjust structures⁷¹, and I draw my recent inspiration from the practices of joyful togetherness by Black queer feminist artists and thinkers, activists and healers, doing work mostly in the United States⁷². Insisting on the making of cancer otherwise, feminist science allows me to proliferate the onco-body, and Performance Studies offered me the gift of Practice as Research, the slowing down into noticing what is the practice doing, and changing.

This dissertation has been (mostly) written in bursts of somatic joy. Don’t take me wrong, it holds intense pains and has been spurred by constraining concerns. Yet anxiety and arousal mingle within the body of this work: it is alive, pulsating, in process, messy, and haunted by the grief of letting go and the resistance to being ‘cut’. The writing has been happening in connecting tissues, always going back to sensory gushes: the respite of slowing down and bringing attention to the moment, the arousal of sensing juicy moves, the joy of discovery (by

⁷¹ Gloria Anzaldúa, Aurora Levins-Morales, Patty Berne, Rania Rama, Leah-Laksmi

⁷² Alexis Pauline Gumbs, Reshma Menakem, Prentis Hemphill

“playing doctor”), the lure of the unexpected, the fun of bodily tinkering, the thrill of minor play, and the satisfaction of fleshly resisting. The orbits continue expanding, and in rehearsal, exploration and curiosity I am learning to let go of ‘done’ and ‘perfect’, so undone, furtive and amniotic thoughts offer more clues to living in (health) justice.

Interlude i, oncogrrrls

<https://oncogrrrls.art>



During the making of a piece, a lot of things change,
including the people in the room.
(Liz Lerman)

Choreographic researchers question what bodies in-motion can
do and become, rather than only what they are. (Vida Midgelow)

CHAPTER 1. What are we waiting for? Rehearsal as arousal politics in oncogrrrls

This chapter has been accepted for publication at TDR, The Drama Review journal, and I am providing here the edited version for the Journal.

ABSTRACT:

Current debates in the field of socially engaged art dwell on the relational versus antagonist potentiality of performance for social change, while disability scholars and cancer activists call for performance that activates relationalities beyond individual/medical models. oncogrrrls, particularly in the making of *(Parenthesis)*, examine rehearsal as a liquid space for the joint creation of new cancer relations. We propose rehearsal, not performance, as a model of somato-political engagement and a way to end life/health splits – where life is put into a parenthesis, suspended, while the patient undergoes treatment. Resisting the individualization of the experience, and inviting coalitional cancer politics, the possibilities of rehearsal emerge while exploring the question: What are we waiting for?

What are we waiting for? Rehearsal as arousal politics in oncogrrrls

'It is a kind of BDSM⁷³'.

We were all watching the final cut of our video-dance piece '(parèntesi)'.

Ainoha raised both arms, bent at the elbows, to the level of their shoulders/head. Placed their hands at each side of the head, their open palms facing each other, moving up and down, with their fingertips drawing the lines of an imaginary parenthesis.

They spoke: 'The waiting has both, a painful side – of look, what I had to live through – as well as a kind of pleasure side in –damn! I can be somewhere else I've never been before.

BDSM practices also have this kind of liminal quality, you know?'

Barcelona, Spain. June 14th, 2013



1. Figure 7 Ainoha Irueta Isusi, in (Parèntesis). Plaça del 8 de març (March 8th Square), 2013. (Screen Shot- Camera by Carlota Grau and Paitu)

⁷³ The acronym for Bondage and Discipline, Dominance and Submission, and Sadism and Masochism.

oncogrrrls⁷⁴, a project I launched in 2011, is a research-creation project in which women and gender dissidents⁷⁵ who care about cancer relations make performance pieces together. Individuals with diverse cancer experiences (where some are diagnosed and others not)⁷⁶, join each residency. I call these residencies on_co-creations, or experiments towards joint modes of refusing *the split, the parentheses*.

When you are diagnosed with breast cancer, doctors tell you: take it as a parenthesis to your life. As if we could stop life. A parenthesis, an imposed and false corset. How can one stop inner demons, love, the readings made on us from outside, nonsense memories, fear, the blood and cellular movement, futile projections, enriching reflections, the anxiety of waiting, vulnerability, our own body transformations, body constructions that pierce us? (...) ⁷⁷

The split refers to the different kinds of biomedical and cultural practices which, in oncological experiences (as with many other serious and chronic illnesses), aim to place a life ‘in suspension’, waiting for a cure. This dividing technique aligns with medical/individual models of disability (Kafer 2013) and enacts many kinds of alienating cancer relations (Ehrenreich 2010; L. S. Jain 2007; S. L. Jain 2013; Shildrick 2009; Spannier 2001; Sulik 2012).

⁷⁴ Always written in lowercase.

⁷⁵ Individuals who, independently of their gender presentation- identity actively engage in a critical stance towards structural gender norms.

⁷⁶ In oncogrrrls, opening the residencies to individuals with and without cancer diagnosis is a choice based on the transfeminist teachings that engaging difference provides further opportunities for change and makes us stronger.

⁷⁷ This paragraph appeared in my first description of the piece. Retrieved from <https://oncogrrrls.wordpress.com/blog-writing-news/>.

In the oncogrrrls' 2013 creative residency, eight individuals⁷⁸ investigated, through rehearsals, physical explorations and dance improvisation scores, the question: *what are we waiting for?* The question emerged during a potluck brunch at my place on April, 2013, one in which we set up the expectations, limits, and working agreements for the process. We introduced each other, shared our cancer experiences, and established the tone of our process: an activist project aiming to critically examine the many implications of *waiting* while refusing the live/health split.

Ainoha identified the true liminality imposed on women: to stay in a 'sick role', putting aside pleasure until they got better. They⁷⁹ were both individualized and isolated by this command, yet still felt pleasure, sexuality, and power. They invoked BDSM, which names the relational game of negotiating pleasure, power and sociality. They reversed the jarring nature of being looked after by looking out and at others, full of desire as well as illness.

We met for five weeks, two days per week, and made a video-dance piece. In June 2013, the piece was awarded the first MiTs (Movement and social transformation) award in Barcelona. In this essay, I describe the origins of oncogrrrls and how it used rehearsals to hold space for us to take the agency to refuse the parenthetical split and reoccupy our bodyminds⁸⁰.

⁷⁸ Eight individuals participated in the laboratory, including me. The group was very diverse, with women ranging from 28 to 50 years old. Three of us had been diagnosed with breast cancer; four identified as feminist, one as butch, one as trans, one as bisexual, and five as heterosexual. Three are mothers; one has a mother who is living with stage IV (metastatic) cancer; two are doctors; and four of us had previously danced together.

⁷⁹ Note that I am using 'they' as a pronoun for Ainoha, as they identify as gender non-conforming.

⁸⁰ For the term bodymind, refer to disability studies scholars that stress the imbrication of physic and mental processes (Clare 2017; Price 2015) and how these processes are also impacted by experiences of racial oppression (Schalk 2018). Also Phillip Zarrilli's psychophysical approach to acting adding the notion of embodied consciousness to the bodymind conversation (Zarrilli and Thompson 2019).

A few weeks after my own diagnosis, I invited a friend⁸¹ to join me on a research-creation project. Marissa recalls: *‘the moment when you told me to do something about it and to do it together opened a new world to me (...) This way of positioning in relation to the disease, transforming it from the individual to the collective was groundbreaking’* (2019, personal communication). Angry at the many haltings and seclusions, I craved for animating shared projects. Coming from problem-posing epistemologies, dance and movement studio practice, trainings in community-dance and a persistence to work towards political – not just individual – change⁸², I was interested in ‘joint’ modes of production, or co-creation. Oriented by social change commitments, I envisioned oncogrrrls as a research-creation⁸³ project, grounded on dance and somatic practices, as a kind of joint experiment *‘on_co-creation’*. By this, I mean an experiment on co-creating (how to co-create performance pieces within a group) as well as an experiment on joint onco creating (how to create oncological practices and relations refusing the split,

⁸¹ In the earliest stage of the project, I invited an anthropologist friend, Marissa Paituví, interested in arts-based research with women diagnosed with breast cancer.

⁸² From my trainings in community-health and participatory communication, I kept Freirean problem-posing epistemologies and the insistence in horizontality and shared production of meanings (Freire 1970) and Augusto Boal’s attention to rehearsal (Boal 1985). I also trained in community-dance with US based companies Urban Bush Women (UBW) and Liz Lerman Dance Exchange (DE), and in dance-as-education with Colombian contemporary dance company El Colegio del Cuerpo (ECdC). Some of the main lessons learned with them impregnated oncogrrrls. These included, for example, a perspective on structuring the creative process (the ‘BEX’ from UBW), some specific exercises from Dance Exchange toolbox, and an approach into somatic-reflexivity (ECdC). I also briefly trained with Anna and Daria Halprin on their project on creative movement and cancer which I found to be mostly oriented towards individual healing, so did not join the longer training program. I was interested in a move towards ‘joint’ modes of production, or co-creation. This tendency was influenced, most probably, by my experiences with the users-activist group Energy Control and other autonomous feminist collectives in which I had previously participated.

⁸³ I fuse the concepts research-creation, laboratory, residency, and rehearsal to signal an exploratory, inquiry based, devised performance process.

and imbricating ‘living while caring for our health’). At the time, I was also on a medical leave from my doctoral project at UC Davis, where I had just been accepted with a research proposal on a practice-based inquiry with teenagers on gender violences. Curious about praxis for socially engaged performance, oncogrrrls became my unforeseen practice-as-research doctoral project. oncogrrrls emerged, therefore, as a platform to make new cancer-worlds as well as a methodological research on performance for social change and an inquiry into performance as cancer activism.

The first creative residency became possible when meeting and inviting the members of the transfeminist⁸⁴ activist group *marimachos cancerosas [cancerous butches]*. At that time, I also was training in contemporary dance; three dancers from the class joined⁸⁵.

What are we waiting for?

In May 2013, oncogrrrls materialized as a creative performance laboratory asking, *What are we waiting for?* At our first meeting we noted different kinds of waiting⁸⁶:

⁸⁴ This fact deserves a closer and longer analysis-- to explore feminist and queer activism to ignite critical action in relation to chronic illness, more in the ways that queer/crip alliances have been emerging. See (Clare 2015; Kafer 2013; McRuer 2006).

⁸⁵ Since the time of this laboratory, the context in Spain has changed, with an increased number of critical voices being heard in relation to breast cancer. This is reflected by the book *‘(In)visible Scars, Feminist Perspectives on Breast Cancer’*, launched in Catalan 2015 and reedited in Spanish in 2017, to which Marissa and I contributed a chapter on oncogrrrls, as well as by the increase in conferences on cancer/activism over the last decade (Barcelona 2014; Valencia 2015; Granada 2017; Zaragoza, 2018). oncogrrrls also has become a recognizable activist performance project, which, in turn, has made it easier to establish creative residencies. In oncogrrrls’ most recent activities, a much broader range of individuals (many of whom might not identify as feminists or as transfeminists) have participated.

⁸⁶ As collected in the blog.

Waiting room at the hospital; being aware of death; changes in the pace of life; waiting for results; hoping for good news. The waiting, time placed 'on hold', 'lost' times and forced rhythms that are crossed by many emotions: pain, fear, vulnerability, dependency, rage⁸⁷....

This inquiry on waiting was related not only to time and rhythms but also to physical and cultural spaces of containment: the places where we waited, the waiting rooms, and the limitations and containments set to 'hold' us in the biomedical sphere, a set of relations that 'suspended' life, creating a kind of 'suspended waiting'. These relations conjure what Klawiter calls a disease regime (Klawiter 2004), a life versus health split enacting specific biomedical and cultural cancer relations that individualize cancer and split a 'normal' life from a 'sick' one. Many friends, feminist scholars and activists are critiquing⁸⁸ the set of relationalities that held us back from living 'a full life', such as conversations with the psycho-oncologist about 'stopping one's own development', the ways in which we were expected to perform while 'on cancer', and the kinds of surgeries, make-up, or wig that would pretend us back to *normal*.

⁸⁷ In my own cancer journal, I also had many references to temporality such as 'endurance performance'.

⁸⁸ Many friends, feminist scholars and activists, are engaging in pointed and nuanced critical works making visible the perils of the mainstream (western) breast cancer regime. In doing this, they identify current cancer practices that, for instance, (a) objectify bodies, separate the sick from the 'healthy' and normalize through physical interventions (Shildrick 2009; Greco 2019); (b) hinder physical and emotional variability behind the positive and hopeful expectations of 'pink warriors' (Sulik 2012; Ehrenreich 2010; L. S. Jain 2007; S. L. Jain 2013); (c) center origins in individual risky behaviors and genomic research instead of in socio-economic or environmental toxicities (Spannier 2001; Valls-Llobet 2017); (d) cut ecological relations, isolating individuals and widening the man-made distance between human and nature; (e) foster unequal patient-doctor relationships and non-holistic treatments; (f) limit access to treatments based on nationality, class, race, sexual orientation or any other –human-made condition- (Porronche-Escudero, Coll-Planas, and Riba-Sanmarti 2017), and a long etcetera.

And yet waiting, ‘espera’ in Catalan and Spanish, leads into the semantic field of dreams and uncertainties: the subjunctive tense, the verb form that signals possibilities and socialities, prognosis and wishes dealing with life and death and with how are we hoping to live and to die.

‘What are we waiting for?’ invoked an inquiry about the structures that held us as well as a cry to ignite movement together. An activation of the intensities of hope as a field of potentials⁸⁹, the emotional field of hoping, so flattened by commercialized *runs for the cure, and hope*. A refusal of the biomedical and cultural containments imposed on cancer and chronic or serious illnesses, and a call to take back our ‘fixed/immobilized’ lives. A realization, perhaps, that we did not needed anyone’s permission, or that we were always already moving, despite socio-cultural norms of suspension. A call to transform the ‘suspended waiting into an engaged waiting.’

While cancer is recognized under the umbrella of disability,⁹⁰ in terms of activism and mobilization, cancer and chronic illnesses are still mostly confined to the medical/ individual model of disability, where it ‘continues to be seen primarily as a personal problem afflicting individual people, a problem best solved through strength of character and resolve’ (Kafer 2013)⁹¹. As Brian Lobel reminds us in *Theatre and Cancer* (2019), cancer performances are (for the most part) about individual experiences, autobiographical solos. Only a few performances extend beyond the sick person (for example, *Exposed, experiments in Love, Sex, Death and Art* by Annie Sprinkle and Beth Stephens 2007). Activism and performance rarely go beyond raising awareness or fundraising suggesting the strong hold of the medical model. My intention here is

⁸⁹ On hope and prognosis time, see (Puar 2009).

⁹⁰ As in the USA's ADA disability act of 1990.

⁹¹ See Brian Lobel, 2017, 2019

to call attention to the collective processes of performance-making (Bishop 2012)⁹², to focus on rehearsals because that's where new futures emerge.

In Spanish, the word for rehearsal is 'ensayo.' This word is used also in medicine, *ensayo clinico* (clinical test) and in epistemology, *ensayo y error* (trial and error). Ensayo is a way of finding out and a process of inquiry. My rehearsals, my ensayo, is a 'liquid space of openness and plasticity' (Bueso 2016: 114).

My deep questions for oncogrrrls are: How can rehearsals engage cancer relations and refuse the split? How did rehearsals answer the question 'What are we waiting for?' How do we change from practices of individualization to practices of togetherness and collective structural change? How can we merge critical inquiry and interpersonal relations?

Rehearsing the parenthesis

The group was Ainoha, Bárbara, Carlota, Carol, Júlia, Marissa, Ona, and me⁹³. At the beginning, each of us took on particular production, facilitation and support/care roles. But as we moved into the process, these roles fluctuated. Marissa was the liaison with the contest organizers, Júlia with the rehearsal site, Ona and I designed the scores, Barbara supported the facilitation, Ona and Marissa did the camera work, Ainoha and Júlia made sure we remained activists. At the beginning, only those diagnosed with cancer offered their lived-experience perspective but these conversations widened as we moved into the process. Using inputs from everyone, I guided the creative process.

We met at *Ca La Dona* (Woman House), a building in Barcelona's Gothic quarter near la

⁹² 'See Vid Simoniti (Simoniti 2018) for a list of authors and names.

⁹³ These are their real names. We all were part of the making of the piece, and they are named in the credits of the final video-dance piece.

Plaça del 8 març, a square named in recognition of International Women's Day. Ca La Dona hosts several feminist community projects, so Ainoha, Júlia and I knew the space from our experiences in feminist organizing. Júlia proposed the space and became our liason with it. We rehearsed in the main meeting room, an open space with high ceilings, a colorful tile floor, and glass windows and doors. Although the room is not conditioned for dancing, we felt comfortable, at home. We also gathered at my apartment for the initial brunch-meeting and for our final dinner. Opening and closing the project with shared food set the co-creation tone.

On the first day, we laid out agreements for our practice and articulated our main questions. Ona and I planned the starting sessions and crafted some initial exploratory scores⁹⁴ drawing on our shared contemporary dance vocabularies and variations that each of us brought from our individual dance studio lineages and improvisations. We wanted to investigate the temporal and socio-cultural qualities of the 'waiting' question, and we designed scores exploring rhythmic variations, as well as contact-and touch based routines. Crafting exercises was an ongoing activity that I mostly led, adjusting, revising, and devising new scores according to the outcomes of each rehearsal. We met twice a week for five weeks in three- to four-hour sessions roughly from 9.30 am to 1.30 pm. We worked in modules, allowing us to adjust the process to the individual requirements. Each rehearsal generated independent material from previous days, and everyone jumped into the process according to individual needs and agendas. Each session had three main phases: warm ups⁹⁵, a core exploration theme/exercise, and feedback⁹⁶. Similarly,

⁹⁴ See Kevin O'Connor's work on scores as tools for open inquiry. (O'Connor, 2018)

⁹⁵ We mainly used variations on a series of manipulations but also used other warm-up exercises coming from Bodyweather, Katshugen, or series of exercises moving around the space.

⁹⁶ We used both oral return circles, where we would talk about our own impressions on the session, and performing back circles, where each of us would 're-enact' some of these impressions.

the arc of the creative process evolved in three stages -- ‘holding, arousing and posing’⁹⁷ -- . In the next section I offer three vignettes, one from each phase of rehearsal drawn from my journal and from my close reading of video-recordings of rehearsal and transcriptions of the feedback sessions⁹⁸.

Warming-up as bodying the space.

A Warm-up score: From light skin touch to joint mobilizing⁹⁹.

Work in partners, A, the traveler, and B, the mover.

Traveler’s score: bring your attention to the somatic experience.

Mover’s score: attend to the partners’ body and offer kinds of touch from light to mobilizing as needed. Listen carefully and trust your intuition.

What happened on June 5th 2013 at the Plaça del 8 de Març (March 8th Square).

Today we shoot the scores. It is 10 am and we plan to work for four hours. We revisit the various scores, try the different angle shots, and agree on the order in which we will shoot them: we will first warm-up and work on ‘gestures’, then ‘interferences’, then the ‘wire’ and then on ‘doll’¹⁰⁰.

⁹⁷ I further develop on these notions in chapter 6. Here I will only say that holding refers to practices creating the conditions for a supportive container, arousing refers to practices generating material, and posing refers to practices for editing a final piece.

⁹⁸ PaR stands for Practice as Research, the methodological approach of this research as well as one of the designated emphasis in my doctoral investigation. This research draws from the documentation of my doctoral PaR portfolio.

⁹⁹ This is a warm-up practice that we used as our main warm-up during the five-week laboratory. As per these instructions, many kinds of touch-based work exercises could work. The goal is to work towards full body mobilization.

¹⁰⁰ These are the names we have given to the four main scores that have emerged through the laboratory.

In couples and a trio, we start massaging and manipulating the body of our partner with full confidence. Marissa and I work with Carol and alternate our physical offerings. Without much facilitation (only as needed), we gradually move from caressing and touching to mobilizing the joints: rotating neck, opening and closing the jaw, articulating elbows and wrists, pressing shoulders, moving fingers ... increasing the movement range of our partners in the exploration, bending knees, rotating hips and folding backs, creating shapes and instigating movements in the bodies. Barbara puts both hands on Julia's upper trunk, one on her chest and the other on her back while mobilizing her spine in undulations. Ona poses Ainoha's body in relation to the space; facing the wall, touching and caressing the stones. In one moment, we all start entering the space with different parts of our bodies: Ainoh aligns herself with the big Roman stone steps, and Juli imitates her and aligns a bit further away. I align in between. Maris leans into the wall and caresses the stones with her cheek while Barb lounges her face over her right arm, leaning into the wall. As if by contagion, we follow each other's movements and silent instructions, listening to each other's suggestions to warm up our bodies and the space. I raise the rhythm of my exploration, running faster. O jumps. Barb turns to play again the music that had been turned off. Mari turns Ca's position, as she is eyes-closed and dangerously close to the wall. Someone, perhaps O, talks to Car about the position of the camera. Maybe I start shifting the warm up towards the gestures exercise¹⁰¹. The sunlight is still far away but we could start shooting soon. To bring the 'gestures' back, we continue the exploration of the space incorporating our individual gestures. Ju faces the wall moving her hands, Ain lays on the floor moving her feet in the air, Mar flips the pages of

¹⁰¹ I will further explain this gestures exercise on the next section. For now, each of us has been working with three individual gestures that we will be shooting on a wide angle, with all of us in a horizontal line, facing the camera.

an imaginary book while leaning back into the stone wall. This synergy of listening, fluctuating roles, and contagious activity continues as we move into setting the first position to shoot the gestures exercise. We align facing the camera and keep practicing our gestures in this new rehearsal position. O starts calling out numbers and ranges so gestures shift magnitudes and speeds. Accommodating to give each other enough space to move. Attuning to the spatial disposition of the whole, some shift places, as it feels more comfortable. (se) Start shooting¹⁰².

‘Se’ is the reflexive particle in the Spanish reflective verbform: tocar(se) [the practice of touching one-self or one-another]. ‘Se’ as a practical-reflexive-relational pronoun. It activates the infinitive (to) (without which the verb lacks actuality). "Se" makes the practice relational. In "(se) start shooting," (se empieza a grabar), the pronoun emerges from the practice as a relational particle that diffuses individual authorship while engaging the group in the doing.

The warm-up was a way of making room for more than one. The touch-based warm-up increasingly builds from massaging and manipulating our partners' bodies and to an activation of the space. This activation gets the group ready to perform/shoot the first of the scores. Using *touch and attending to touch* activates a deeper listening to each other. Attuning to our partners ripples into attending to the whole group, a kind of a contagious warming up of bodies and space. Having regularly practiced the score over 5 weeks, we launch easily into an unspoken shared exploration of edges: what is needed (for movement), what is long enough, which area requires activation, how to activate the space, where the spatial edges of our exploration are, and

¹⁰² A play on syntax and translation where the Spanish form 'se empieza a grabar' turns the reflexive 'se' into a distributed new subject in 'Se starts shooting'.

how to activate the space. A sensory entanglement to each other through touch¹⁰³. Attuning to the kinetic and affective synergies of the group, individualities disaggregated to become part of the group, engaging in a deep listening of movements amongst the group and within the space in which we let go of individualities, attuning to movement cues and engaging in flowing leadership and followership, allowing ourselves to be affected in and by the process. As if by contagion, we built 'se' a larger body. In *(se) start shooting*, [se empieza a grabar], 'se' becomes a distributed larger-than-any one body, moving from practice centering one-on-one actions to actions that decenters any one in particular and, instead, centers a happening distributed among all the group members. We became, in Deleuze and Guattari's terms, a multiple body impossible to attribute to any single one (Deleuze and Guattari 1987), an assemblage of facilitating practices, technical support, moving bodies, flows of energy and care.

This warm up extends into the space, activating our relationship to the architecture of the Square: *caressing stones, aligning with the steps, facing the wall*. Se, this relational cocoon of emerging practices and disaggregating individuals extends into the structures of the whole Square. In doing so, we make room for our multiple presence in the public space, something that, in turn, becomes a political intervention. As Ainoha suggested, *'performing in the public space is intervening in a space that is generally negated and unfriendly to us when we are in treatment, or as (read as) women in general. To me, this is a reclamation of public space, I feel we are doing a political intervention by performing here, and we will be fine'*.

¹⁰³ See Karen Barad's work on touch and entanglements (Barad 2012).

The warmup activates a container, holding a larger body that enables collective mobility and multiple expressions. The practice challenges notions of individual/isolated/autonomous individuals.

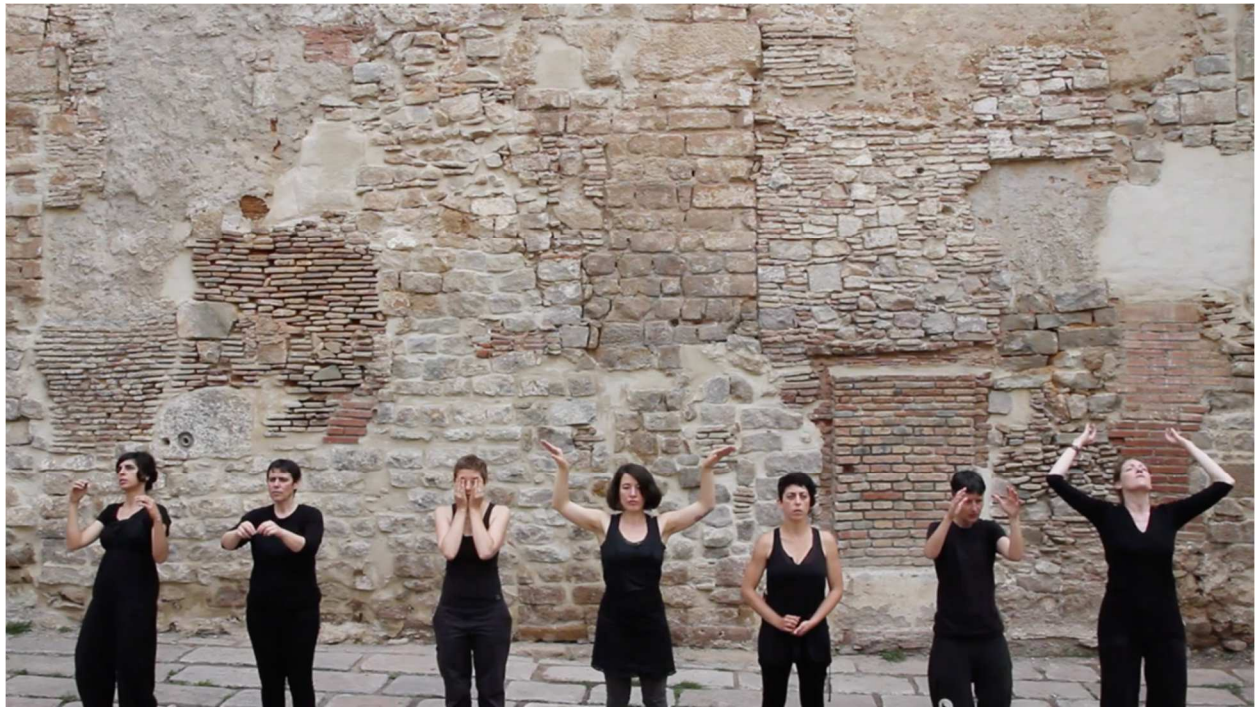


Figure 87. From left: Ona Malleu, Julia Ojuel Solsona, Carol Vallverdú, Paitu, Caro Novella Centellas, Ainoha Irueta Isusi, Barbara Wiltschek in *(Parèntesis)*, by oncogrrrls. Plaça del 8 de març (March 8th Square), 2013. (Screen Shot- Camera by Carlota and Paitu)

Somato-political reorientations in public spaces

In the practice, we also warm-up the space for other kind of cancer socialities. But despite our being internally fueled by Ainoha's claim, I do not assert that on the day of the performance the estrangement and curiosity of passersby exposed these structures. Our corporealities 'read as' *normal* because none of us bore signs of oncological treatment visible to an untrained eye. However, perhaps another kind of politics was taking place, closer to what Petra Kuppens calls 'a politics of engagement and relationality, of embodied contact, of shared

space and common ground'(Kuppers 2009: 16). Sarah Ahmed reminds us that 'orientation involves aligning body and space', and that 'the work of inhabiting space involves a dynamic negotiation between what is familiar and unfamiliar, such that it is still possible for the world to create new impressions, depending on which way we turn, which affects what is within reach' (Ahmed 2006: 8). Thinking with her queer re-orientations, this warming up becomes a kind of somato-political reorientation in which, we engage the public space, moving out of the private (and individual) space of illness and into a shared and public enactment of cancer

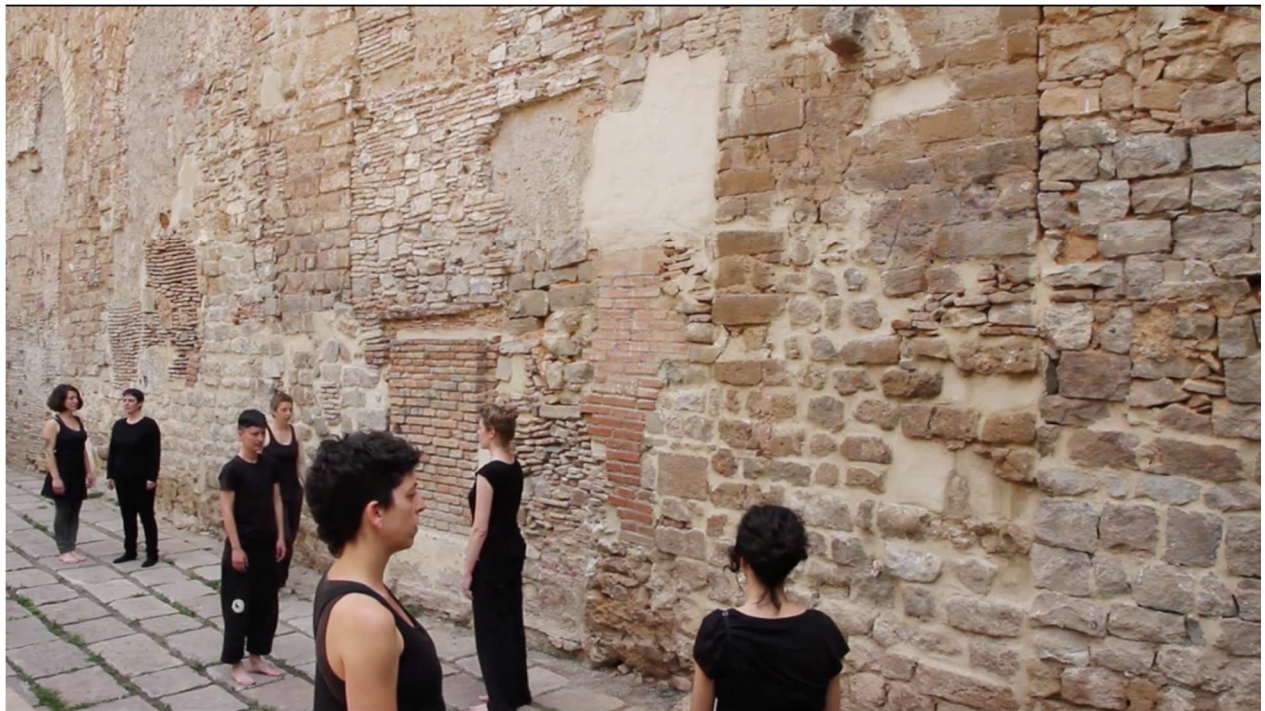


Figure 93. From left: Paitu, Julia Ojuel Solsona, Ainoha Irueta Isusi, Caro Novella,, Barbara Wiltschek, Carol Vallverdú, Ona Malleu in (Parèntesis), by oncogrrrls. Plaça del 8 de març (March 8th Square), 2013. (Screen Shot- Camera by Carlota Grau and Paitu)

The gestures exercise: Arousing ecologies through disappearance.

Score: the gestures rehearsal¹⁰⁴

1. Work in trios to collect your three gestures.
2. *Transpose*¹⁰⁵ the gestures:
 - *Go to your 'rehearsal space' and follow instructions given by the facilitator of the rehearsal*
 - *Facilitator: offer instructions to enact the gestures in different ways (play with changing the order, speed, position, location, etc.).*

What happened on May 15th 2013:

I facilitate the exploration. Ainoha, Marissa, Carol, Ona, and Julia are dispersed, each in their own 'private' rehearsal space, moving their particular gestures. Ona slides against the wall, Marissa marks the air with knees and toes, Julia stands with rigid arms, Carol scratches her face standing near the wall, and Ainhoa moves her legs as in an imaginary bicycle riding the ceiling. Five dancers in the same space with no seeming relation to each other but with synchronized shifts any time that I give a prompt; now move only gesture number two.— I offer more cues:

¹⁰⁴ Adapted from Liz Lerman's practice to generate materials for choreography and an exercise to incorporate performance material from Olga Tragant. This two-part exercise consisted of first, collecting individual gestures from a personal story about waiting and then exploring these gestures through different kinetic qualities. The gestures were collected through an inquiry-based storytelling/interview. We all worked in groups of three, where one was the mover-respondent, one was the interviewer who kept asking prompts to generate more description, and one took mental notes of the mover-respondent's significant bodily gestures. Guiding questions were 'What are we waiting for?' and 'What does waiting mean for you?'. We rotated roles so that each of us had three spontaneous gestures collected by someone else. Finally, everyone would have their own three non-verbal bits of their personal story about the 'waiting'. The bits cohere the memories, values and emotions attached to this story about 'waiting'. In the second part we opened exploration through transposing.

¹⁰⁵ Since this laboratory, transposition has become, for me, a major technique for scoring cancer relations. I describe it as: get an issue, move it somewhere else, and see what happens. I further develop the scope and limitations of this technique in a chapter of my dissertation.

repeat your gestures from one to three, move at a speed of 2, 4, 10, 20, 1. Change your level; move with another part of your body; put it upside down; move at 2, 10, 1. Moving in the space, changing tempos, shapes and positions, the gestures start to fragment. Side to side, disjointed stories punctuate each other, amplifying, responding, reverberating, even collapsing gestures into a kind of syncopated bodily chatter, undoing any possible sense of linear time, containment, or storyline.

The room activates into a textured dynamic field. An electrical wavelength runs through us. I get goose bumps. I sense the thickness in the air, the opening of skin membranes into the haptic density of the space between us. A sense of luring porousness connecting the space and all of us. Fueled by the enticing feedback-loop, I keep offering shifts/instructions: with another part of your body, move at 2 at 10, at 1; find another place; face another direction.

I get sucked into the 'blackholeness' of the experience. I can't stop looking at what is going on, and I get a camera to document. The differentials boost the energy in the room, and the vibrational quality of the emerging form launches epidermal threads within all of us. A thickening marrow tissue of partial memories, motions, and cancer relations accrues in the space. The exploration brings an unexpected response to the individual coherent signed stories about waiting. More than this, the intensity of what is happening not only unsettles the distinct stories but also weaves a thick ecology of 'fleshystories.' Narratives of cure and life-suspension are only one little tiny part. From my journal.



Figure 10. .From left: Paitu, Julia Ojuel Solsona, Carol Vallverdú, Ona Malleu, Ainoha Irueta Isusi in *(Parèntesis)*, by Caro Novella. Rehearsal, Casa de la Dona, 2013. (screen shot-documentation)

How did the gestures exercise refuse the split?

The exploration transposes personal stories on ‘waiting’ into gestures, and then unsettles their coherence by playing around with their somato-kinetic relations. Igniting a kinetic exploration by randomly shifting the different components of the gesture (body part, place in the room, orientation) and its dynamics (rhythm, size/length, order) disjoins their coherence. The exploration opens the bundles of meaning-memory-gesture-emotion of each personal story to the possibilities of unknowing and making new expressions. Marisa recalled in the feedback circle after the exercise that her gestures mutated their meaning and their emotional quality, opening to not-knowing:

Yeah. When I changed the plane, one of the gestures was a complete different thing. It was the same but it changed the meaning, it was another sensation, more beautiful and positive. It was the same but with a different perspective. It was better. I don't know how to say what it meant because I am still trying to understand it.

Or, Ainoha:

The speeds to me were also... wow.... They transmitted a lot. Perhaps the same sensation, not a different one but if I did [the gesture] very slowly it was as if I gained perspective to analyze what I was feeling in that instant. 'Like the 'hamster wheel', as I exactly know what the sensation is when I do it... if I did it slowly this allowed me to analyze it and... 'wow look'.. if I did it faster instead (...) depending on how you move you can produce something that is overwhelming that you cannot grasp, or something that you can look at and observe closely.

Ainoha's 'wow look' is an expression of wonder. Sarah Ahmed says that to 'wonder' is 'to remember the forgetting and to see the repetition of form as the 'taking form' of the familiar' (Ahmed 2006: 82). Techniques of de-familiarization (Brecht) and disorientation (Ahmed) may foreground the structures sedimented by routines or ignite an awareness of sorts.

When centering *joint exploration* (let's do something, and let's do it together) in this rehearsal, disorientation techniques take place in relation, enacting other kinds of 'arousals', that is, the arousal of formlessness, and imbrication.

Arousing formlessness and imbrication

In rehearsal, I am interested in arousal as a kind of undoing - agitation and unsettling to dissolve cultural suppositions about the sociality of illness. An agitation of horizons. This

experience of tactile visuality, the thickness in the air, (as I've written elsewhere), "the porous opening of skin membranes" (Novella 2017: 55) into the haptic density of the space between us, brings about the arousal of formlessness. Being touched by the toxicity of oncological treatments shaped my understanding of arousing as an undoing of the individuated self. This kind of arousal fragmented my own sense of containment while on chemo, resonating with the work of Mel Chen who queers animacy¹⁰⁶.

Arousal emerges in the oncogrrls work as a shattering of horizons, an undoing of the individuated self making each of us porous to the exchange happening in the moment leading to a kind of undoing necessary for a renewal of bonds. And yet, I still need to give an account of the sense of becoming a larger body that happened in rehearsal. Lynette Hunter examines how rehearsals navigate between legible (discursive) and not-yet legible worlds (Hunter 2019). Hunter's phrase for these not-yet-legible worlds is "the alongside." Valuing the political work of rehearsal/practice, Hunter discusses the energy of changing, of affect, of how performers make this energy available to others so they can engage in changing themselves. Thinking with Hunter, I try to create a nurturing feed-back loop, an evolving field in which performers (artists, friends, art critics, and engaged beings) make themselves different through a mutually vulnerable exchange. A differentiating exchange of energies. The arousing of an ecological entanglement of epidermal threads within all of us: a thickening tissue of partial memories, motions, and cancer relations.

¹⁰⁶ Chen points out that 'human patients get defined as inanimate' (2012: 210), particularly through the diagnostic parenthetical metaphor. Chen's episode of intimate toxicity with an undecidable couch resonates with the opening of skin membranes aroused under the influence of chemotherapy, and brings attention to formlessness, as a way to unsettling this definition.

Arousal is about not only awakening sedimented thoughts and feelings in wonder, but also moving away from the individual by undoing possessiveness, dismembering, exploring the unknown, and disappearing. In opening the gesture to unexpected possibilities through physical exploration, what happens is also becoming entangled with a larger, collective/social body. Rehearsal fosters imbrication, disappears distinct individuals. The ‘original’ story, its affects, and cellular memories entangle within the group, creating a new bundle of body parts, rhythms, and memories. No longer waiting alone or having an individual cancer experience. By asking ‘What are we waiting for?’ rehearsal gives form to an awareness for social change. More than that. Rehearsal forms and un-forms. oncogrrrls entangle the "body politic" in cancer performance.

Inquiry as performance

Score: _Score inquiry, not resolution

Practice: March 8th, Square. May 20th, 2013.

It is too soon.

It is our third week into the process, and Carlota, Ona, Marissa, and I are waiting in the Square for everyone else to arrive. We four muse over the material we collected so far. The contest is approaching, and we are sensing the pressure of the deadline. At some point in the conversation, Carlota[3] - responding to her urge of setting a choreography - proposes a final scenario: “With this wall behind, which represents the weight of the wait, we can create a story which tells how difficult it is to wait. One body could stay in the middle, and then another body would approach . . . We need to craft some movements that depict the slowness and.... “ She starts planning the final shooting, already defining shots and angles, thinking on ‘what would represent what’ and what ‘meant what.’ I cringe. Intuition tells me that the deep politics of

rehearsal reside in not allowing a one-only answer to the question ‘what are we waiting for.’ Over time this intuition solidified into the principle ‘score inquiry, not resolution’¹⁰⁷.

Operating from the premise of our creative laboratory: “Let’s do something about it, and let’s do it together,” we decided to not accept Carlota's suggestion. On the one hand, we had agreed on our first meeting not to let anybody from outside the process record and tell the story. As Ainocha said then: ‘there are enough stories told about us, let’s make this our own’ (personal communication, 2013). No-one should impose an interpretation of the work on the rest of the group. On the other hand, a fixed choreography with a set meaning would focus our exploratory process into a one-only story, as if we had found one only solution to the inquiry. Our most profound aim in this exploration was to exist outside the fixed narratives of cure and the biomedical split of life vs. health. Our non-conclusive, non-prescriptive practices had opened a space to hold our lives full and changing, despite biomedical halting and ‘suspension.’ We had made room for holding onto affective complexity, for exploring our experiences by each others’ sides, and for weaving our individual cancer stories into an interconnected fabric of questions bigger than any of our single experiences. Essentializing this into one story would erase differences, preventing us from continuing to explore and change. We wanted to express not erase difference.

Finding answers to ‘What are we waiting for’ meant to arouse, to stir up, the ‘suspended waiting’ revealing more possibilities. Unexpectedly, this discussion led to a score for inquiry, not representation. Scoring inquiry emerged as a composition technique for an open-ended performance, a “final” piece posing inquiry or rehearsal, as performance.

¹⁰⁷ I expand on this principle in the next chapter on ‘principles for rehearsal as method’

[Parenthesis]

Two weeks later, the whole group met and decided on four improvisations to edit into the final piece. We named them, and planned the arc of the piece. By going with a piece with open-ended scores, we performed our rehearsal. That is, we brought into form and foregrounded exploration. Yet, our story of waiting is not about ‘suspended waiting’ but about ongoing inquiry. Sharing many criticisms of Cancer Inc., and the parenthetical metaphor that aimed to fix our becoming, the story in (*Parèntesi*) is not an oppositional monolithic voice or a direct transgressive critique. It is a story of differentiating and interweaving. A myriad of possible meanings emerged while editing the piece: multiple perspectives, the serial medical system signaling the impact of the disease and the profits some are making from it, the interruptions of trajectories through diagnosis, disorienting forces, the burden of waiting, the invisible traces, the resilience of our bodies, the movement within the parenthesis metaphor, difference, individual elaborations of the transit, the potential for change in the dis-joint-ness of time. The jarring soundtrack, a live recording of an MRI, marks the tempo of the piece, which, as Carol said: ‘foregrounds the irregular paces of our transit through treatments- where some stages feel hectic while others are an endurance performance.’ Jamming rhythm through sound, we also gesture towards the disruptions of ‘social time’ that occurs in illness pointing to our own reorientations in the process of making the piece. We named the piece (*Parèntesi*) as an answer to the question: what are we waiting for? (*Parèntesi*) is a response charged with the affective forces of engaging in change. Perhaps, as Ainoha said, the parenthesis is one kind of sensual and arousing liminal

space: a space where the discomforts brought by the experience coexist with the pleasures of unsettling settled relations.



Figure 11 Ainoha, Paitu, Caro, Ona, Carol i Carlota. Collective editing at CC.Tetuan. Barcelona (screenshot. Video available at oncogrrrls.art)

The Politics of Rehearsal

In this article I attend to rehearsal as performance; to notice the political work of weaving inquiry into, somatically addressing, and transforming, cancer relations. This examination of an oncogrrrls laboratory traces three vignettes from the making of *(Parèntesi)*. During rehearsals-as-inquiry, new cancer-relations arouse. Cancer politics were re-imagined as onco-bodies were jointly aroused. The proposition: ‘Let’s do something about it, and let’s do it together’ is an activist approach to cancer. Instead of living the experience individually and in isolation, oncogrrrls proposed a joint creation challenging the predominant medical/individual

model for cancer and chronic diseases. Rehearsal is a way of staying inside the exploration, a strategy to hold onto multiple and co-imbricated realities without erasing difference.

Rehearsal arouses flows of fleshing memories, biomedical protocols, and movement practices. In the process of making (*Parèntesi*), we readjust the components of this bundle. In the process of changing together, we re-entangled this bundle of shared visceral doings and memories and make cancer plastic. In this exploration, while keeping a critical stance towards cure narratives of normalization, biomedical life and health splits, forced performance, etc., we also entangled fleshystories beyond individual experiences and into the group, transforming the public square into not only the political space of illness, but also into relational ecologies beyond biomedical notions of cure, before and after, any returns to a norm. oncogrrrls became a laboratory for “situated fleshing” where each rehearsal-as-experiment enacted cancer-relations differently as a kind of protocol for situated knowing-making onco-bodies. Using rehearsal to enact onco-bodies that are multiple¹⁰⁸, entangled with the public space, aroused and engaged in continuous inquiry. Bodies absolutely different than the fixed, asexualized, domestic and isolated ‘suspended’ onco-body of the split: ‘now, put your life in a parenthesis’. Just imagine how different the experience would be if doctors said: ‘Now, think of your life as a rehearsal: your body will become more porous, and you will have space and time to observe this becoming; engage with it and sense the possibilities emerging.’ Perhaps then we could live through the

¹⁰⁸ From Anne-Marie Mol's work, the body multiple (2003) whose work on opening a body through multiple diagnostic enactments allows me to think rehearsal in oncogrrrls as a technology to open up the onco-body as multiple.

experience as Ainocha proposed, as one kind of sensual and erotic liminal space. A time-space where the discomforts brought by the experience coexist with the pleasures of arousing sedimented relationalities.

The emerging piece (*Parèntesis*) was awarded the first MITS movement and social transformation award in Barcelona (2013) and fueled my doctoral investigation on rehearsal as a performative intervention into cancer activism. Since this laboratory, I have continued developing co-creation processes with women and queer individuals through the oncogrrrls project, using rehearsal as method. A total of 42 individuals have participated in oncogrrrls' creative processes in Mexico and Spain between 2013 and 2017.

In the time of Covid-19, while we risk solidifying scarcity and divisive cuts, rehearsing arousal politics is particularly relevant. We -- artists, scholars and activists for health justice -- need to propose living mechanisms for relational imaginations that keep us noticing and resisting individualizing structures. We cannot afford to put our 'life in parenthesis.'

Interlude ii. In-the-making of (Parèntesis) 2013.

Gestures Score:



<https://www.youtube.com/watch?v=IWeerEl745o=>

Co-Composition





Watch (Parèntesis) at:

<https://www.youtube.com/watch?v=uLIXc-34E2M>



Figure 12 Montage with two still images from (Parèntesis)

<https://oncogrrrls.art/portfolio/parentesis/>

CHAPTER 2. Rehearsal as method: score inquiry! Co-create! Start in the body!

During the making of a piece, a lot of things change, including the people in the room.

(Liz Lerman 2011)

Relation is made up of all the differences in the world and that we shouldn't forget a single one of them, even the smallest. If you forget the tiniest difference in the world, well, Relation is no longer Relation

(Eduard Glissant, in (Diawara 2011)

I. Intro: Rehearsal As Method

This chapter introduces *rehearsal as method* for addressing health issues, particularly around cancer practices from a perspective that aims at transformation and social change. At its core, this is an activist investigation on how cancer changes through art-making with communities. This chapter explores and expands on the principles emerging from a decade of Art-Making for transformation in the field of *cancer-relations*. In particular, this chapter opens-up oncogrrrls core principles to engage in *rehearsal as method for on.co-creation*.

1. An Experiment On Curiosity.

I propose rehearsal as an experiment in curiosity to change cancer relations. Imagine this: at the oncologist visit, instead of diagnosis, prognosis, and prescriptions of medical treatments and protocols you are invited to ask the questions that matter to you and to take a field trip into your own process of change. You are given tools for attending to the physiological transformations and for noticing the many bodily processes involved. The invitation might even extend, perhaps, to people and friends who also care about cancer relations. Imagine that uncertainty is not 'treated' but embraced as a space for engaged curiosity and play. Imagine that 'not knowing' becomes a platform to play with expectations, or even, a space of relief, where (moral/social/family/labor/sexual/medical) obligations are softened, released, turned upside

down. Imagine a field opening more possibilities of existing where your body is not ‘attacking you’, but it is in tune with and responding to ecological conditions, and generating profound (social) change. Imagine that you are given the task to carefully attend and share all the ‘things’ you find in the playground of not-knowing. Imagine you are invited to actively participate in a process of joint discovery. Imagine knowing-making new cancer relations.

This is what rehearsal can offer to people living with cancer. And, I am sorry but, there is no more escaping: we are all -already- living with cancer. Taking Michel Murphy’s concept, we are already living alterlives¹⁰⁹ (Murphy 2017). In addition to the increasing numbers of cancer incidence in the world¹¹⁰, cancer has spread into our existences as a material-metaphor for the worst, a kind of somato-relational technique of horror, and as a mode of engaging health, toxicity, economics, research and all kinds of life on Earth, through fixed notions of hope and/or fear. Trust me, as a person who has been in the oncologist office more than once, I know that neither this kind of hope or this kind of fear are allowing for living and dying well. We might as well ‘fight’ for mobilizing some of the pains of cancer uncertainty into a useful inquiry to make new kinds of relations possible—and who knows, even end with some of the causes.

2. A Mode Of Production: Rehearsal as Method for on.co-creation

Rehearsal as method is a mode of production that aims at the transformation of cancer relations (modes of understanding and practicing cancer)- by creating an experience of joint discovery and performance making with a group about a (cancer) issue that matters to the group.

Rehearsal as method is a mode of producing community-engaged performance around cancer concerns. Community-engaged performance is a field that grapples with a plurality of opinions, particularly at the edge of who and what counts as a community, in the debates between the autonomy or heteronomy of artists, the limits of the practice as an either relational or inquiry based, or the practice as either supporting authoritative states or providing charity in capitalistic

¹⁰⁹ A state of already having been altered by environmental violence that is nonetheless a capacity to become something else.

¹¹⁰ According to the World Health Organization, cancer was the second leading cause of death in 2018, and the estimated incidence continues to grow, reaching 19 Million people in 2020, and 30 Million in 2040. Data from International Agency for Cancer Research.

structures¹¹¹. It is not my aim to trace these debates, but to acknowledge that at the core of these discussions there is a deep care for social transformation and different perspectives on change; discussions about which are the structures to be changed, what are the best approaches for this change, and who are the agents of this change. I share with practitioners in the field a deep care for change, and I uplift the skills of navigating multiple fields, institutions, and groups of people with different interests on what matters. I will insist in the practices and relations I learnt with the oncogrrrls project in different groups as my situated offering to the conversation.

Rehearsal as method is a mode of production for addressing social and health justice through artistic inquiry and creation. As a reminder, the residencies have been almost exclusively joined by women and queer individuals with various kinds of cancer status¹¹². Moving away from notions of ‘support group’, or therapeutic approaches, rehearsal as method in oncogrrrls aligns with transfeminist movements channeling artistic inquiry and creation for political reasons.

Transfeminist lineages and stories differ in each geo-political location and it is not my aim to trace them here. oncogrrrls was born in Barcelona, between 2011 and 2013, shaped by theory within *charlas, talleres, performances, manis y gaupasas* (talks, workshops, performances, demonstrations and overnight hang-outs) with my friends, many of them active within the transfeminist movement in Spain¹¹³. In oncogrrrls, transfeminist values land through the principle of shared creation, the orientation towards open-coding and reinvention, a suspicion witht normalizing and pathologizing structures intersecting gender/sexuality/health, and the insistence in using the body as a space of experimentation for creating more livable lives

¹¹¹ A debate held by art historians such as Bourriaud, Kestner, Bishop, Jackson, as well as practitioners and pedagogues such Matarasso, Helguera or Duncombe.(Bourriaud 2002; Kester 2011; 2004; Miller 2016; Bishop 2012; Jackson 2011; Helguera 2011)

¹¹² Diagnosed, non-diagnosed, health workers, medical anthropologists, family members of someone diagnosed, onconurses, artists.

¹¹³ A reference compilation of articles from artists, scholars and activists foundational to situate the transfeminist movement in Spain is the book *Transfeminismos, Epistemes, fricciones y Flujos*, (Solá and Urko 2013).

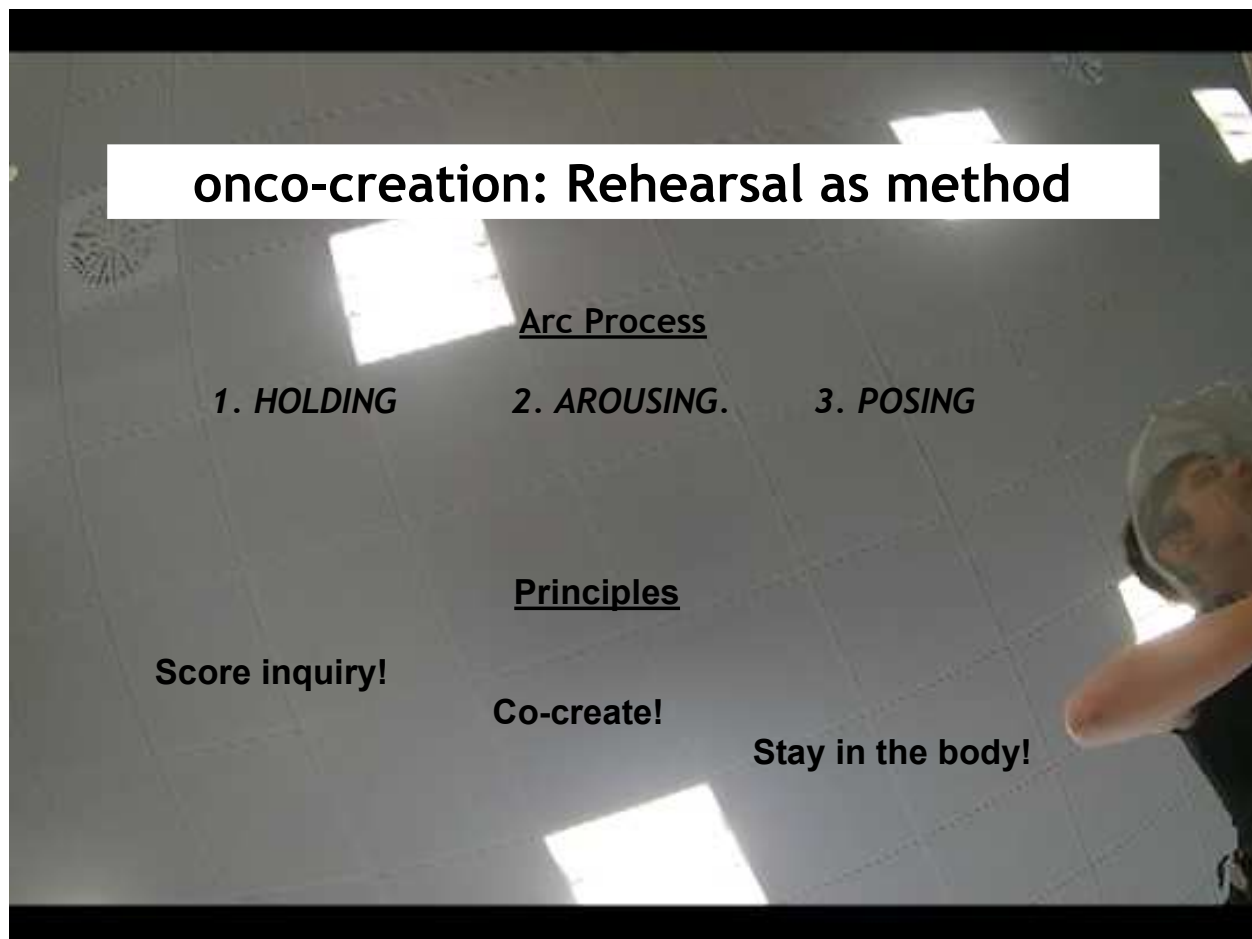


Figure - a synthesis of process and principles over a picture of an oncogrrrls rehearsal. Performer: Maria Zapata, in Cuentos de Nosotras by oncogrrrls- Zaragoza 2017

From this investigation *Rehearsal as method* emerges as a kind of *process guided by* (choreographic/creative) *principles* to orient the *practices* of jointly creating cancer ecologies. The creative process follows an arc of practices for *holding* the group and the process in co-creation, for *arousing* somatic processes, and for *posing* new cancer ecologies. Practices for *holding* are those that insist that the exploration stays within the group: laying out our questions to explore, our ground agreements, commitments, limits and expectations: defining the edges of each process of co-investigation, co-facilitation and co-creation. Practices for *arousing* are those set of practices (scores) that will excite, unsettle, or animate the issue. Practices for *posing* are those that foreground what has happened, not a fixed answer or a clear resolution, but a

foregrounding of the experience as a kind of return, a kind of sharing of the exploration as an open-ended proposition. I will further develop on these kinds of practices in a later chapter¹¹⁴.

Rehearsal as Method (on.co-creation) is a mode of production guided by choreographic/creative principles that will guide the process are: 1. Score inquiry (not resolution/representation)! As a guide to center curiosity, pro-posing practices for open experimentation and preventing the foreclosure of the experience into univocal solutions or universal representation. 2. *Co-create!* orients the practice towards a process of shared inquiry/creation, moving away from individual authorship; 3. Start in the body! As the orientation to arouse new cancer sensibilities through experiments on bodily movement and attention.

Rehearsal, in oncogrrrls aligns the ‘making of a performance piece’ (as an artistic process to generate symbolic material) with the somato-material processes ‘in-the-making’ of new cancer relations. Rehearsal, in oncogrrrls, extends to the performance as a enabling ensayo/rehearsal to be a mode of experimental the ‘final performance to remain as a ‘liquid spaces of experimentation’ (Bueso 2016), so it keeps the audiences engaged in the exploration of new cancer-relations.

Despite working in community health, performance, and social change through many years, oncogrrrls instantiated the lessons into a kind of a method, an ecology of practices, a tool for thinking and a technology of togetherness (Stengers), offering “rehearsal as method” for oncological activism as joint co-creation. Rehearsal as Method is a mode of production that emerges as a response to some of the ills of dominant/mainstream cancer regimes¹¹⁵ and proposes experimentation as a mode to open up universal and deterministic explanations of unique experiences; co-creation as a mode to resist individualization by engaging in togetherness; and bodily experimentation as a mode to re-engage with the processing of lived experience.

¹¹⁴ Chapter 6 ‘behind the scenes’

¹¹⁵ such as the generalizing and normalizing biomedical and cultural - cooptation of the experience, the individualization of illness, the infantilization of patients, and the objectification and normalization of their bodies.

Rehearsing on.co-creation is a mode of production that center togethering and structural inquiry as a social and healing justice¹¹⁶ at the core.

What comes are stories from different oncogrrrls laboratories that will lay out the main principles of rehearsal as method.

II. Principles For The Practice

Principles work as orientation tools that guide decisions and choices throughout the process of performance making. Principles do not aim to be closed step to step guides, they work more as *brújulas* [compass] to stay within edges of rehearsal as a transformative method. Also, these principles are not bound to a particular artistic practice; they are orienting propositions that can be adjusted to different kinds of art practices and technologies. Grounded in a particular set of values, the principles have been mutating and adjusting with different kind of practical lessons and over this decade long investigation. Also, these principles have taken different forms in each laboratory/residency, and keep expanding and mutating according to the needs of each art-making process, turning into guides for the creation of situated knowledges¹¹⁷

1. Principle: Score Inquiry, (not Resolution or representation)!

Scoring inquiry and not resolution is a principle to frame the whole creative process as an open, unsettling exploration that refuses to find one only solution. This principle insists on ongoing curiosity and asks ‘what else’ throughout the process. It avoids jumping ahead the process with explanations of what the piece should be about, and avoids suffocating other people’s curiosity with projections and interpretations. Instead of aiming ‘to find one solution, or to make ‘one critique’, this principle, deeply grounded in principles of improvisation, could also be described as: “keeping curiosity as enough.”

¹¹⁶ Inspired by the lineages of Black and People of color activist and authors involved in the healing justice and the disability justice movements in the US, oncogrrrls honors their efforts to redefine what health and healing could mean, resisting ableist tendencies, and insisting that ‘no one is left behind’ (Piepzna-Smarasinha 2020). I will expand this citation here so these lineages are uplifted.

¹¹⁷ Hunter proposes that ‘In the arts, situated knowledge systems are not closed. They do not prescribe sets of rules or fixed delineations of content. (. . .) they are intended to respond in sophisticated ways to quite different contexts’. (238)

Within a Practice as Research (Riley and Hunter 2009) situated investigation into cancer relations, *scoring inquiry not resolution* invokes what Lynette Hunter calls ‘situated textuality, knowledge always in the making, focusing on process but situated whenever it engages an audience’ (Hunter 2009, 240) and turns cancer into a process of knowing through exploratory inquiry. This inquiry operates slightly differently in rehearsal than in performance. Notice that I am making a distinction between ‘Rehearsal as Method’ – which I am identifying as a mode of production, and rehearsal, as the spacetime of the making of a performance. The principle, *score inquiry* guides the mode of production in all the stages of the creative process: in the holding, arousing and posing – or in rehearsal as well as in performance. In holding, the principle asks to turn cancer into a question; in arousing, while generating material, this principle asks to turn the question into exploratory scores and the group to remain open to more possibilities; in the final editing of the performance this principle asks to compose performance pieces as sequences of open scores that suspend representation, so the audiences witness a performance as an open-ended exploration, asking audiences to also remain open to the more possibilities within cancer relations. See Hunter’s proposition of audiences’ as group of practitioners in (Hunter on audience as group of practitioners – Novella chapter)]

1.1.Scoring Inquiry in holding the process/group, *Scoring inquiry* demands, first, that we turn cancer relations into an experimental inquiry. Liz Lerman, in her making of dances with the community proposes ‘turning discomfort into a question’ (Lerman 2011) as ‘anger and frustration can become inquiry, and that inquiry opens the door to discovery and to art’ (21). As we will see in the following section (in the co-creation principle), in oncogrrrls this question needs to emerge from the group¹¹⁸. These questions will become the through-line to design exploratory scores. This means that scores emerge in relation to the situated question with each group and rehearsal process, in an ever-evolving form that prevents to bring ‘fixed scores’ in advance into new rehearsal processes. In Chapter 6, I offer some of my strategies

¹¹⁸ Which is different than emerging from me as a director/choreographer, or from an anthropologist who wants to know about people’s stories, or from the research done by a dramaturg.

to reveal juicy, material and specific questions from the group, yet one starting premise for the crafting of questions is considering:

What if we treat cancer as a [more-than-human] question?

Over time I developed one of my *repertory* questions, a question that can ignite a brainstorming of questions that matter among the group:

What would you ask cancer?

And from here, more questions emerge:

where have you travelled?

who are your companions?

How many territories have you seen?

How do your silences shape my/our bodies?

How do you shape our collective body through your silences?

How can I accompany you? Why me?

What are we waiting for?

Further discussion on starting with inquiry -

is a prevalent practice in much devised performance work that goes back to the experimental structures of Avant-garde happenings, and the work of Post-modern choreographers¹¹⁹ and dramaturgs (Profeta 2015) as a method to generate performance material emerging from the collaboration director/choreographer-dancers/performers. Another way in which inquiry has played a role in the arts is as an entry point of dialogue with communities. Art critic and performance scholar Kestner proposes the term ‘dialogical’ for community art work that centers community dialogue as the aesthetic experience, and reflects that this kind of work is mostly influenced by the work of educator Paolo Freire (Kester 2004). Liz Lerman is one example of the many current community arts practitioners who keep problem-posing methodologies at the core of their practice influenced by the emancipatory labor proposed by Freire’s *Pedagogy of the Oppressed*. (Freire 1970). In addition to these lineages of art-making practices, starting with a question in holding, in oncogrrrls, is a way of situating the process as a research-creation

¹¹⁹ Such as Judson Church performers- Ivonne Reiner, Steve Paxton or Anna Halprin. Expand references.

emerging from the concerns of each group and the first step towards art-making as the refusal of already-set cancer narratives¹²⁰.

1.2. Scoring inquiry in arousing means to transform these initial questions into movement and art-making exploratory scores that will generate performance material (scores to explore and unsettle cancer relations). In Chapter 6, I offer some of my techniques to craft scores from the material and specific questions from the group.

A brief on scores and the practice of making them: scoring-

Thinking between anthropology and theatre and dance improvisation, Joe Dumit describes scores as ‘small sets of light rules that demand and constrain interactions in ways that make *habitual reactions* visible and self-aware’ (Joseph Dumit 2014a). Cornelia Sollfrank reminds us that scoring, a practice of notating in music aiming for the repeatability of a piece, turned into a practice for inspiration and the continuation of the work in experimental music, and that Fluxus artists adopted as instructions for events, situations or installations (*OPEN SCORES. How to Program the Commons. Exhibition Catalogue* 2019). Improvisational dancer and researcher Jennifer Monson frames scores, within improvisational dance as sets of instructions for movers/improvisers to practice and research, where scores set parameters, orientations and boundaries for the practice, guiding more or less open explorations, situating the research within the conditions present (iLand 2017). Experimental artists and score-makers define scores in relation to their situated use in practice. For example; For Jennifer Monson and her team at iLanding, scores are practices for “activating relationships between participants and ecological conditions” (2017; 4), and to ‘to shift regular orientations to place and help us develop curiosities outside of our chosen disciplinary specialties’ (2017, 14). For the curators of the exhibition: ‘*Open Scores, How to program the Commons* scores are ‘artistic strategies to suggest new ways of dealing with resources and put an emphasis on collaboration and collectivization’. Kevin O’Connor proposes scoring as a method for knowing fascia, as well as for tracking change, and as a form of training.

¹²⁰ Michelle Murphy’s study with indigenous co-researchers on the Imperial Oil Refinery brings refusal as one practice toward decolonial methods for change. Thinking with them, the practice of refusal could be a mode of resisting the imposed biomedical and cultural cancer narratives. (Murphy 2020)

Much of my practice and thinking with scores is in relation to the work of Kevin O'Connor. Kevin, choreographer and performance scholar who works in the interstice between dance improvisation and science and technology studies, defines 'scoring' as a method that takes ideas and images and instead of figuring out what they mean, sets up exercises that examine the problem or concern' (O'Connor, 2019, 114). Kevin and Dumit set up a fascia laboratory at UC Davis, which I joined for some of its sessions. As they recount, this laboratory proposed scoring as an entry into 'experimental embodiment by moving with the different scientific studies and body-based therapy practices concerning fascia' (Dumit and O'Connor 2016, 6). Kevin thinks about 'scoring' as a method for tracking the unformed science object 'fascia' and as the 'creation of propositions and source for what might emerge,' and notices that 'the process of examining the concern might create an ecology where subjects change.'

Thinking with Kevin's proposition of scores as a method for training forms of attention and action, in oncogrrrls, scoring inquiry proposes scoring as a method for training new modes of attending to cancer relations. Scoring inquiry, in arousing, are techniques for turning the questions, the originally shared discomforts, into exploratory practices to situate and multiply possibilities for what cancer relations can be.

A Story

Barcelona, 2013. A group has posed the question 'como lo social nos atraviesa el cuerpo durante el transito oncológico? [how does the social cross our bodies in the cancer experience?]'.

Interferences Score:

For (blindfolded) Movers: keep moving forward in any way you want.

For intruders: offer different kinds of interferences to the blindfolded movers (also, be careful)

For all: notice what emerges

Four movers, blindfolded, are asked to move forward, crossing the space. The movers are invited to move in any form they want (walking, rolling, crawling ...). The main instruction is 'to keep moving forward'. The rest of the group (2 other movers) remain in the role of 'intruder'. The "intruders" offer different kind of intrusions and interferences to the movers, such as:

physical barriers, distracting sounds, subtle caresses, and whatever (non-aggressive) input or surprise could interfere with the movers blindfolded path. After practice, we sat in a circle and talked about the experience. We talked about tripping, loosing balance and pulling harder, as well as about the responsibility of caring for disoriented movers, and about being surprised by their reactions. Gradually, the conversation led to sharing different cancer (and not only cancer) transit stories. Some talked about the weights of being a mother, or the expectations of being a care-taker, of the challenges of being a family doctor in a system that overworks physicists and nurses, or the need to adjust one energy level during the different stages of the treatment. We talked about living cancer as an endurance trail/performance and about having to find ways to keep on going while being surprised, interjected, or interrupted in different ways by the disease. We also talked about family, gender, and productive life expectations continually adding different kinds of pressures while living with cancer, and our different reactions to them.

This practice enabled the emerge of different stories from the practical, lived experience. The interferences score become a practice for creating new understandings from the question: how does the social cross each of the mover's bodies. By not aiming to find one 'right' solution to 'how does the social cross' nor engaging on a discussion about right/wrong positions or true/false accounts of what is, the practice opened up a rich field of situated possibilities that allowed us to appreciate the different experiences of everyone in the room, democratizing the emergent knowledges and opening conversations outside of scales of valuation. Scoring inquiry turns a practice that enables the holding of differences and the fullness of the experience, creating spaces for the coexistence, not the erasure, of difference.



Figure 13 Paitu, Ona, Barbara, Carol, Caro, Ainocha. Rehearsal of interferences score at CC.Tetuan. Barcelona (screenshot. Video available at oncogrrrls.art)

1.3. Scoring inquiry, in posing performance, demands that the final composition leaves room for improvisation, surprise and uncertainty. In composing performance pieces, ‘scoring inquiry’ invites to com/pose performance as exploration, or even as spaces of ‘planned confusion’. In Chapter 6, I offer some techniques to posing (editing-sequencing) performances.

Story: posing (parenthesis)

As we saw in the previous chapter, the principle ‘score inquiry, not representation’ emerged in the moment of editing the piece (Parenthesis) as a refusal to fix our final performance as a choreography aiming to represent one only answer to the question ‘what are we waiting for?’ The day before shooting, the entire group met, selected four of the improvisation scores we had used during the whole laboratory, named them, and planned the arch for the piece. We chose, from all of the exercises that we had practiced, the more significant ones: “interferences,” “the doll,” “the wire,” and “gestures”. We selected each score -with its specific quality of touch-, by the kind of affective tonality that emerged from the practice. We decided an arch for the piece inspired by these touch qualities: from the obtrusive-endurance touch in “interferences,” to the mechanistic-shaping in “the wire,” to the resilient echoes after joint mobilizing in “the doll.” We

added the sound of an MRI with doctor voices, the wall, different angle shots, and a jarring editing rhythm of each of our “gestures,” signaling the multiplicity of stories of the waiting, refusing any one-only story about ‘the waiting.’ Aiming to exist outside fixed narratives of what cancer is, the final piece became a series of open ended, non-conclusive, non-prescriptive practices that hold our lives ‘full and changing’.

By collectively selecting the more significant scores, the practice helped us transfer individual experiences from the creative process to the final piece, opening up a shared reflection about the creative process and its transformative arch. By naming the scores and giving them an order, the practice of com-posing the final performance invited conversations about the kind of cancer relations we had generated throughout the process, and how these cancer relations had mutated through our rehearsal: from an initial more rigid mechanisms towards more resilient and multiple interpretations of the experience. In the practice of sequencing the scores, we situated our exploration, making new knowledges and values about the experience. Scores become practices for creating situated knowledges (D. Haraway 1988) about cancer relations, turning the group into researchers. In *oncogrrrls*, scores are instructions to engage in ‘doing something’ (a movement improvisation) to open up a problem.

Nadine George-Graves, writing about the community engaged work from the Brooklyn-based dance troupe the Urban Bush Women, refreshes the productive quality of the work: ‘Through mutual engagement and inquiry, we move the discussion somewhere else’ (George-Graves 2010). This conversation also allowed us to make collective sense of the possibilities offered by the exploration as an activist practice. We identified our individual experiences as indicators of problems within the current biomedical system. For instance: we talked about the objectification and modification of bodies, about how gender and sexuality norms are forced within current biomedical practices, or about how cancer narratives tend towards monolithic narratives of pink warriors, covering the multiple and different experiences of the disease. Paul B. Preciado, in *Testo Junkie* proposes the guinea Pig principle, or practices of intentional self-experimentation as a modality to reveal the politics of gender and sex relations (B. Preciado 2013). Preciado defines drag king workshops as a ‘collective induction into *gender suspicion*.’ (366). Thinking *oncogrrrls* as joint Practice-as-Research to transform cancer relations, or as a ‘performative

method of mutation', scoring inquiry, in oncogrrrls, emerges as a way of animating *cancer suspicion* and exploring *other possibilities in the not-knowing*



Figure 14 Paitu, Caro, Carol, Barbara, *Interferences score in (Parèntesi)* by oncogrrrls, at Plaça del 8 de Març, Barcelona (screenshot. Camera by Carlota Grau)

Score inquiry as performance

Becoming beyond medicalization (laboratory oncogrrrls 2016, Spain)

VADEMECUM POÉTICO

Busca nubes en la nuca
Circula en la membrana piel
Huele un pájaro en una cuerda
Haz palomitas sin tapa
Sal de la mirilla
Atrapa el movimiento en un papel
Tira del hilo de las antenas
Duerme en el agua
Haz ecos en la piel
Afila tu muslo
Suspende tu cabeza en otra lengua
Quédate sin título
Nada en la sopa
Contáciate del espacio
Pon tu animal del revés
Activa los tentáculos de otro cuerpo
Impulsa con sensibilidad robótica
Arrastra el silencio
Respira con clase
Impón al médico tu experiencia

POETIC VADEMECUM

Search for clouds on your nape
Wander though the skin membrane
Smell a bird on a rope
Make popcorns without a lid
Leave the peephole
Grab your movement in paper
Pull the thread of the antennas
Sleep on water
Craft skin-echoes
Sharpen your thigh
Suspend your head in another tongue
Become title-less
Swim on the soup
Practice spatial contagion
Place your animal upside-down
Activate alter-bodies' tentacles
Propel with robotic sensitivity
Drag the silence
Breath classy
Impose your experience to the physician

A vademecum, a pharmacological source manual for doctors, turns into a poetic (com-positional) score. The *Poetic vademecum*¹²¹ is a collection of ordinary affects, thick presencing instants, and snapshots of intensities crafted throughout the creative process. Impossible allegories that conjure playful actions and sensory alter-stories. In attending to everyday gestures, this poetic vademecum suggests an open score to create multiple practices alongside regulating hospital protocols and medical procedures. Com-pose your own oncological performance. Play with these gifted images, or create your own. Impose your experience to the physician.

Open-Score¹²²: Com-pose a poetic Vademecum

This is an invitation to take this piece and co-compose with us.

1. Pick one of the poetic invitations. For instance: “wander through the skin-membrane”
2. Spend time with it: sense it, draw it, open it up, remember it. Which images makes you think? Which memories brings back? Which smells, sounds, colors, temperatures come to you?
3. Let the materiality of the score emerge from your environment (which kind of skin-membranes call you to play?). Find your own ‘skin-membrane’
4. Play with the newly found material. Let the touch/the smell/ the sound.. of the skin membrane wander you through. Explore different modes of ‘wandering through’. Can you do it differently? Faster? Slower? The other way around?
5. Spend time with it. Which images, emotions, thoughts, movements emerge?
6. Paint, take a picture, craft a sculpture, write a letter.
7. Share it. Perform your own

¹²¹ Piece published in Revista Hysteria (Novella 2018)

¹²² open scores: artistic modalities for the collectivization of symbolic and transformational aesthetic resources.

Score inquiry! (as productive confusion)

The piece above emerged in a laboratory held in several cities in Spain in 2016. As a response to the larger question: how do we become beyond medicalization, we crafted a live performance collecting and enacting scores in the form of an improvisation event guided by the poetic vademecum invitations. In textual forms, *Poetic Vademecum* enacts an open-source invitation, a gift for further explorations (Novella 2017a; 2018)¹²³. As situating textualities, this *poetic vademecum* became modes of altering the oncological experience and our relationships to it. These performative scores emerged as invitations to action, where the audience can try them on and create their own artistic response to medicalizing cancer relations. New modes of engaging with onco-bodies.

Score inquiry! works in oncogrrrls as a principle for not-knowing. Scores, as techniques for “not-knowing” ask to stay in always finding more, continually asking, how else could ‘this’ be? A generative score that prevents conclusive stories of how things ‘should’ be, ‘are’ or will be. Scores function as practices for undoing structures that we deeply know, so deep that we have forgotten that they are not necessary, predetermined or fixed. Scoring inquiry is a way of not talking about what we already know (biomedical and socio-cultural discomforts), but as an improvisational score, opening the multiplicities present in the practice of bodily exploration. Scores work as transitory structures that enable the opening of indeterminacy. Artist and scholar on socially engaged Art, Pablo Helguera talks about the capacity of art to offer new perspectives through ambiguity: “It is this temporary snatching away of subjects into the realm of art-making that brings new insights to a particular problem or condition and in turn makes it visible to other disciplines” (Helguera 2011). Indeterminacy works in oncogrrrls as this soft experience of undoing¹²⁴ the labeling of patient or ‘woman’ or ‘other’ that happens through the biomedical

¹²³ While I am aware that the textual form has not yielded much re-enactment, I aim to continue working with these scores as invitations from oncogrrrls in different forms: as offerings of somatic exploration for people living with cancer and as paper interventions in oncology treatment centers.

¹²⁴ Dramaturg Katherine Profeta proposes ‘soft modes of narratives’, as unavoidable narratives that emerge in time-based performance. While she contends that narrative is unavoidable, she also turns to the field of computer gaming studies to think of performance in terms of its

practices of making cancer. Keeping curiosity at the center enables the movers, and the audience to exist unfinished, unresolved, in a state of development, open to more.

This principle emerges as an attention to ‘unknown’. In rehearsal, it orients our attention towards keeping curiosity as the guiding principle, and asks: what am I not holding open, and how do I keep them (knowledges) open? In performance, it invites to sustain ‘curiosity’ and possibilities for the participants (movers and witnesses) to complicate prognosis, diagnosis, melodramatic metaphors or forced cheerfulness. Making performances as evocative provocations to what might emerge, more than descriptive iterations of what is, *confusion* in the performance works to open up a space to dare to ask questions. On the one hand, by undoing the sense of ‘knowing’, we might open up spaces where people question what they thought they knew about cancer-relations, and invite asking questions and having conversations with someone you would not have talked. ‘Sometimes a little confusion is super productive for world changing’ (Dumit, in conversation)

In the editing of a performance as a series of exploratory scores, we insist in centering the attention into openness, keeping people from concretizing and closing down possibilities. This principle asks: what else can be opened? What is it that I ‘know’ and how can I attend to ‘unkown’? Once we close down and concretize answers, or resolutions, we consolidate relationships, effecting what feminist Quantum physics Karen Barad has described as ‘agential cuts’ in her exploration of more-than-human performativity (Barad 2003). To change certain (biomedical and sociocultural) “truths” that are painful to live-in/by, the principle ‘Score Inquiry! (not representation)’ in the com-posing of uncertain pieces, aims to keep a generative approach and sustain a space where multiple cancer-relations are possible. Scoring inquiry is a strategy for staying in the (un) known and resisting the divisive effects of representational knowledges. In attending to the already entangled, the messy and the potential, instead of the label, the ‘norm’ or the category, Score inquiry (not representation)! is a call to avoid representational modes that foreclose curiosity, emergence and possibilities of connection.

‘emergent narratives’ where the emergent narratives are the ones that emerge from the interaction with the player with the game. (Profeta 2015)

Eduard Glissant, in the interview with Diawara in *One world in Relation*, proposes the right to *opacity* versus the transparency demand of western thought, and claims the generative of the uncertain, as ‘it opens to unexpected forms of complexities’(Diawara 2011). In *Poetics of Relation*, Glissant articulates that the right to opacity would be ‘the real foundation of Relation, in freedoms’ (190), beyond the reduction to self and other, or to scaling someone according to a/the western norm (Glissant and Wing 1997). Existing in opacity is the right to subsist within irreducible singularity. The generative quality of opacity as a stance for relation helps me think of Score inquiry (not resolution, not representation)! as a principle asking that, in staying in opacity, we ‘do not forget a single difference’, a mode of holding differences as a premise for access into the world. In the crafting of performances with open scores, and as *generative confusion*, we refuse clear-cut narratives that tell one conclusive story, but aim to open a space in which all the possible answers to the question are present, a piece that leaves no one behind and where the group and the audience can engage with the multiple differences possible made within the experience.

2. Co-create!.

on.co-creation

on— on.going- insistence. Continuation. And also, ‘on’ topic: To stay within what matters, what bothers, what we care about. To stay ‘on’, engaged, avoiding suspensions, and set-asides.

co- shared, side by side, affecting each other. Together.

onco- cancer relations. biomedical, social, material.

Creation: A making

Co-creating: a process of joint creation. Exploring/crafting/making together.

on.co-creating: A joint process of creation in which a group creates new cancer relations, including, the making of the onco-community.

In response to the biomedical splits, attending to co-creation aims “*to do something about it, and do it together.*” Specific to the task of un-individualizing and animating networks, co-creation is a principle that anchors the process in the group through practices that distribute

ownership and nurture shared responsibilities. Over the years I have advanced some practices to further co-creation such as: *start with a potluck*, *center the group's question (co-investigate)*, *practice contagion (co-facilitate)*, and *perform in relation (co-compose)*.

Story: What Does Co-Creation Look Like?

The next story illustrates what can co-creation look like in practice, and how it can be helpful. This story follows the co-creation principle in an oncogrrrls laboratory in Spain¹²⁵ in 2016. The particularity of this rehearsal is that it took place in 4 different cities, and the collaboration happened 'across sites' by exchanging questions, and creating scores that would travel from one site to the other. A group of women and queer folks¹²⁶ meeting in Zaragoza addressed and opened-up a question to cancer: "why me?"¹²⁷¹²⁸

Start with a potluck

We met with everyone for the first time at Marta's apartment. Monica, Leticia, Bea, Jesus, Marta, myself and Kevin, a canadian choreographer and friend who joined this local exploration. We cooked together, ate, and talked. We shared our cancer stories and talked about the format of this performance- laboratory. Marta shared her passion for cooking and her love/hate relationship with tamoxifen, Jesus revealed his friendship with Marta and his drumming practice. Monica spoke of her circus training and favorite places in the city and about her dad's prognosis; Kevin, also sharing his circus experience, talked about his few movement mentors dying with cancer. Bea talked about her scars, her kids and her love for theatre, and Leticia shared her cancerous nipple yet not-quite (breast-and-chemo) cancer story. Leticia and I also shared some friends in common, part of an emergent movement doing very exciting

¹²⁵ As I have explored with detail this laboratory engaged four groups working collaboratively in four different cities in Spain: Barcelona, Zaragoza, Madrid, and Granada (Novella 2017).

¹²⁶ Four women living with breast cancer, and three more individuals whose parents lived and/or died with different kinds of cancer.

¹²⁷ This was the question that the group from Granada had sent to the group of Zaragoza.

¹²⁸ XX reads the question of the why me as originating on a location of unmarked privilege, in relation to groups who assume their vulnerable positions.

*queer/crip performance work together*¹²⁹. Monica and Leticia had been booking community spaces to rehearse, and Monica took care of the sound equipment, lightning and blankets for our exploration. I talked about the invitations that brought us together, the relational practices of sharing questions and traveling scores, and the larger material conditions of this residency we were all part of. A residency aiming to create scores to become beyond medicalization.

Starting with a potluck, is a practice for enacting familiar conviviality and nurturing shared ownership of the process. By cooking and eating together, a potluck [*una comida de traje*, as we informally call a shared meal in which everyone contributes a dish to a common meal in Spain] invites the co-creation of a shared meal. Over a shared table, as it is common in Spain, we lay out aspirations and intentions for the creative process. *Una comida de traje* sets a trusting tone that within the group we will find the necessary nourishment. A potluck is a practice relying in the abundance already existing within the group, asserting that “sola no puedes, con amigas si” [by yourself you can’t do it, with your friends you can]¹³⁰. Sharing food is a form of mutual care¹³¹: in a potluck we share food, we share stories, we lay out our skills, expectations, and our initial gifts. A potluck orients the process as a feast where every contribution nurtures the group and the process. As such, in oncogrrrls, situated cancer knowledges are an asset. As an experiment in oncological joint creation, an understanding of ‘assets’ will distribute and equalize value among different kinds of practices and skills brought to the project by each individual; weather they are cancer experiences, art practices, production abilities, activist networks, caring and emotional support skills. In a creative potluck, each member of the group contributes their ‘preferred food’, adding their skills and leadership in the areas that the process will need them the most. Starting with a potluck aims to level cancer experiences with art practices. While acknowledging that artists bring a particular kind of dish, so do everybody else. Each “dish” has a different location in the process, and all of them make the meal. By starting with a potluck, oncogrrrls centers the

¹²⁹ Our friend Patricia, who had collaborated in the making of the post-porn film pieces ‘Nexos’ (Post-Op, Centeno, and Carmona 2014) and “Yes We fuck” (Centeno and Morena 2015) was developing a theatre piece with Leticia.

¹³⁰ A sentence from an iconic Spanish TV show for children from the 80’s: “la Bola de Cristal”, that has become a feminist anthem.

¹³¹ feminist networks in Spain have long been advocating for ‘centering life and care’ (cite), and activists in the US are writing about forms of caring for each other in movement work (Birdsong 2020; Spade 2020)

intention to keep the practice and the recognition of everybody's practices and experiences in a collective exercise of sharing, nurturing and tending to each other as well as the larger meal.

I learnt this practice in my communities of origin, in Spain, where we spend time together around food and at the table, as a place holder of family, friendship, trade, and anything worth talking about¹³². And this practice transformed as a principle of community-based performance as I learned new understandings of potluck in 'art-making' with the community-dance collective Urban Bush Women. In the residency training with Urban Bush Woman 'deepening our Roots' I learnt that 'entering a community' meant creating practices to discover and up lift everybody's contribution to the process, as well as holding anti-racist workshops centering community assets and power mapping techniques. Visual artist and educators Susan Jahoda and Caroline Woolard propose an interesting practice that brings ancestors to the table as an introductory art making practice (Jahoda and Woolard 2020) and which I would like to try in the future, as it expands this notion of potluck into a way of making more present our ancestral lines, and all our trainings to be present into the process.

In the translation of 'comida de traje' into pot-luck, I find references to anthropologists' discussions about potluck as an indigenous practice for redistributive gift-giving ceremonies¹³³. A potluck also gestures towards a community-development assets-based approaches that rely in the community strengths and gifts to build their own change¹³⁴. In *Pleasure Activism*, adrienne maree brown brings love into organizing, and I see 'assets-based' approaches reflected in her articulation (brown 2019). She says: "with the perspective that there is wisdom and experience and amazing story in the communities we love, (...) we would want to listen, support, collaborate, merge, and grow through fusion, not competition." A potluck is the basis for co-creation, a space to start, with food, to recognize the wisdom, experience and amazing story

¹³² A 'conduit to connection' borrowing Mia Birdsong's description of the People's Kitchen Collective,

¹³³ Cite- Anthro authors

¹³⁴ As developed by the Asset-Based Community Development Institute.

<https://resources.depaul.edu/abcd-institute/resources/Documents/ABCD%20DP%20Slide%20Presentation%20Descriptions.pdf>

already available. A space to hold cancer stories, art practices, food, and invitations to resist structural limitations in a shared space of equality and mutual nurturing.

Center the group's question - [Or share curiosity, co-investigate]

I had asked the four groups part of this laboratory to send a “how” question that they “would ask cancer.” I collected all the questions and distributed them to other groups as a relational technique to connect the exploration across cities. Instead of a ‘how’ question, we received “why me?”, which we felt, in Zaragoza as a demand that centers the individual in origin/cause stories]. We embraced the challenge and took this question as an opportunity to create practices to “open” the bounded medical individual into world-relations. After lunch, we approached “why me” for the first time. I proposed a collaborative writing score to ‘sit with the question as a group, and make it our own’.

Through the collaborative writing exercise, we engaged in noticing particular ways in which this question affected each of the members of the group, and opened opportunities for affecting each other, creating new relational threads that would weave the group into the creative process. After the exercise, Letizia shared her story, bringing us all into a situated story of this ‘why me’ questions. She had been wondering how her nipple cancer could fit in some of the cancer narratives about cancer that she dreaded the most, cancer as an opportunity for ‘self-growth’. Through the exercise she fleshed the ‘why me’ into a ‘me jugué el pezón por crecer’ [I bet my nipple to grow]. In the translation work happening between languages (I was acting as a spanish/english translator for Kevin and the group) the subject for growing loosened up, enabling a space where the growing subject could be the nipple, not the ‘I’. How to grow a nipple into the world?’ became a situated question that opened up the creative possibilities of the ‘why’ question into a ‘how’ and enabled Kevin and I to translate the framing interrogation into scores for opening up the individual experience of the biomedical and cultural onco-body as a subject/individual to grow, and move the attention to the structural interweaving of the world in the nipple. The collaborative exercise allowed us to think of and situate some practices for ‘softening the I’, and for ‘following the nipple into the world’ and making sense of them in relation with the group.

I propose co-investigating as a required artistic practice for onco-creation; I believe that only questions that we care about bind us fiercely to the deep labor of transformation. This is a principle/practice that I learnt in my early days of activism with Energy Control - a user's-centered risk reduction collective I was part of in the late 90's early 20's, and which centered all our actions and communications on the lessons by and from users as experts. I found this principle in the writings of many community-centered' approaches/frameworks for health communication¹³⁵ inspired by the liberatory work of educator Paolo Freire. In his pedagogy of the oppressed Freire insisted in the praxis of liberation as: 'the action and reflection of men and women upon their world in order to transform it' (Freire 1970; 79). And this principle rippled through the work of Augusto Boal with Theatre of the Oppressed (Boal 2000), and through the work of many community-based artists. François Matarasso in writing about participatory art says: 'art creates change, but it should be in the hands of the person who experiences it, not at the command of another, whether artist or funder' (Matarasso 2019; 105). As I trace some of my own initial liberatory lessons I notice a question raising within myself (I also notice how I get impatiently annoyed by the assumption that someone other than the group can 'restore- taken away-agency to communities' by assuming the location of the outsider-investigator): ... Who are we/you to ask? addressing the artist/funder/researcher who approaches a group of individuals with questions of their own to promote any kind of change, points to the issue of universal knowing which fails to recognize the multiple locations where knowledge happens.

Feminist of science and technology scholars offered generative solutions to this discussion that value situated knowledges over universal abstractions or 'views from above' (D. Haraway 1988). Lynette Hunter proposes the notion of 'situated textuality' as a rhetorical stance that attends to the process by which we (small communities or groups of people working in collaborative rehearsal) make difference (Hunter 2014). Disabled-femme-of-color poet and performer Leah Lakshmi Piepzna-Samarasinha, in her writings about disability justice, reminds us that (in healing justice) 'we center the genius and leadership of disabled and chronically ill communities, for what we know about surviving and resisting the medical industrial complex and living with fierce beauty in our sick and disabled bodies' (Piepzna-Smarasinha 2020; 104). As I invoke the

¹³⁵ See for instance Mohan Dutta's work on culture-centered approaches (Dutta 2015) and Thomas Tufte work on Citizen perspectives on Communication and Social Change.(Tufte 2017)

voices of queer folks of color and disability and feminist witches, *starting from the group's question* becomes a matter of justice and transformation, accounting for the wisdom, expertise and autonomy already within the group.

In this laboratory, the question “why me” was an offering from our partners in the larger laboratory, therefore, the collaborative writing became an exercise to in-corporate the question through our *flesh_imaginations*, sensing the resonances of the question within each of us, a practice to situate the research-creation within the group. Why me? Landed in our group through rhythms and images of medicalized bodies, stories of self-growth, and wondering how far a nipple could travel. Through the collaborative exercise, we situated and collectivized the pain of the individualizing question, ‘why me?’, the image of a travelling nipple emerged, as well as many words and buzzing rhythms that continued with us throughout the project. Leticia taught us to sign the sentence “I bet my nipple to grow”. Sitting in a circle, in silence, we signed it for a few times before we went to the community center that would be our rehearsal space.

Practice contagion (co-facilitate)

Once in the studio, Kevin shared the tenderizing score -as a practice to soften the borders of our bodies. This is a touch-based practices that emerged in a fascia research lab' that Kevin facilitated and in which I took part¹³⁶. I shared a drawing practice as a mode for each of us to stay a bit longer in the somatic experience and return to the group what we noticed without too many words. We did a jamming poetry exercise inspired by a score from Pocha Nostra¹³⁷ with the images and words emerging from the tenderizing and drawing score. Kevin and I designed a drawing version of the implosion score by our mentor Joe Dumit (from a practice by his mentor, Donna Haraway), and engaged 'the nipple' in the world and the world in 'the nipple'¹³⁸. This practice is an exercise that unpacks objects and “teases open the economic, technical, political, organic, historical, mythic, and textual threads that make up its tissues’ Haraway in Dumit (2014). Once we finished the implosion score everyone started talking about their medicines and

¹³⁶ Find the score completely developed here (Joseph Dumit and O'Connor 2016) Sciences and Senses of Fascia.

¹³⁷ *the Poetic Exquisite Corpse*, As described in Gomez-Peña and Sifuentes, 2013, as a ‘poly-vocal chant poem’ (80)

¹³⁸ Find it in Dumit, Writing the implosion: Teaching the world One Thing at a time (Joseph Dumit 2014b)

individual practices, settling down the energies of the joint worlding exploration into discussions of me and you (the self-referential pull is extremely strong in current biomedical dealing with life and death!). To re-arouse the relational world we had just opened-up, we offered an impromptu humming practice in which a storm of spoken poetic images became the rhythmic background for an spontaneous altar-making practice.

Co-facilitation is about swapping authorship and practicing contagion. It avoids being the sole facilitator, dramaturg, or editor, breaking the habits of the *solo* Art (and other) practices. In contagious practicing, Kevin and I invite all our trainings and experience (contemporary dance, improvisation, performance art, fascia studies, feminist technoscience, somatic tunning, transfeminist performance . . .) and our mentors (Guillermo, Joe, Donna, . . .) and the mentors of our mentors, in ancestral lines, as if extending the initial potluck across spacetimes. We share facilitation in a responsive, relational engagement with the process, and the group, and practices of contagion and cross/pollination foster emergence of new forms. adrienne maree brown and her propositions for emergent strategies (brown 2017) ripple with Nick Obolensky's definition of emergence as "the way complex systems and patterns arise out of a multiplicity of relatively simple interactions" (13). In thinking with both, these 'simple interactions' become porous, and practices mutate and loosen-up, creating conditions for the emergence of new forms/practices. Co-facilitating and sharing practices also prevents getting 'sucked into' pulls of hierarchy and power trips in the creative process. I like the way in which adrienne maree brown challenges hierarchy and power positions within movements: as a kind of mutuality that attends to the 'micro-hierarchies in a collaborative environment' (brown 2017; 9) in which what each person contributes to the process escapes rankings of valuation, but contributes to what it is needed in the moment.

I propose co-facilitating as a required artistic practice for onco-creation. I have experienced aiming to facilitate processes of change within the oncogrrrls processes as a 'solo' practice, and its limitations. Besides the load of logistic details while tending to the group and the process, working 'solo' limits the possibilities for contagion and emergence in improvisation. In placing practices side by side and in relation to the needs of the process, practices mutate and evolve, fueling opportunities for newness. Improvising with the needs of the process in co-facilitating, brings lineages of practice to shape-shift in the moment, and allowing for the emergence of new

practices in a sort of *performance jam*¹³⁹ for hybrid scores. For instance, as we see in this example, the implosion practice, a model for doing theory and tracing the entanglements (relations of obligation)¹⁴⁰ of objects in the world that both Kevin and myself have learned with Joe, turned into a score for opening up bounded biomedical objects into threaded stories and relationships, drawings, and an altar/stage headframe.

Stay in relation - Co-compose

*As a closing practice for the laboratory, and in response to the scores emerging in process, we created a living image/tableau with our cancer/care objects. We started by making room in the studio for an altar: we hanged the piece of drawing that emerged from the ‘implosion score’ as a headstand of kinds. Then, we cleaned the floor, installed a red carpet as an inviting device to enter into our world, and placed a chair in the middle. Once we had the space ready, we collected all of our objects of care in the middle of the carpet. To continue the practice with a ‘relational attention to the whole, we then yielded a ‘touch’ score moving with/away the touch into a gentle dance with objects while we posed them all within the space. In the altar; pills, doctor’s notes, Audre Lorde’s *The Cancer Journals*, hospital gowns, bandages and a children’s coloring book composed a reliquary of sorts. In a slow and lengthy unchoreographed dance we create an onco-sanctuary to hold our experience. Once all the pieces were placed in relation within the altar, we all entered the tableau, and activated it from the inside in a modified version of a Pocha Nostra’s score for a tableau vivant¹⁴¹.*

In this closing practice, co-composed with scores, bodies, and medical objects, the final performance becomes an altar of cancer objects entangled in the world. A living image that keeps activating the already entangled cancer relations, avoiding fixations. A ceremony that flesh relations in response to the ‘why me’ question. A mobilization of bodily exposures that challenge how ‘self’ and ‘causality’ currently operate in cancer relations. And one of the multiple ‘bets for nipples to grow’

¹³⁹ Guillermo Gomez Peña’s infamous jams come to memory. In the work of La Pocha Nostra, one the most arousing practices are what the group calls, *jam sessions* (Gomez-Peña and Sifuentes 2013). The generative nature of placing people’s practices side to side in a mode of improvising feast where identities get hybridized, challenged to the core, and transformed.

¹⁴⁰ As explored in Karen Barad’s (Barad 2012)

¹⁴¹ In this practice, once the bodies are in fixed positions, we call for automatic movements (every one moving at the same time, and affecting the visual relation of the components).

I have learned different approaches to co-composition into performance in community-settings with my mentors and friends. From the more intentionally collective selection/curation process, as in the ‘Zapatista-style assemblies’¹⁴² with Pocha Nostra, to the ‘we’ll curate a framing event and within it all is welcome – bring your own aesthetics’ from Beth Stephens and Annie Sprinkle’s *Ecosexuals*’ events¹⁴³, to the showroom- installation of open-lab practices with Quimera Rosa. I also witnessed Jawole Willa Jo Zollar process of working through the editing in an open discussion with cards that contained the particularities and individual gifts emerging in rehearsal. Engaging in shared decision-making in the editing final in different forms is a principle to follow for onco-creation. In *oncogrrrls*, co-composition, an editorial practice of collecting for the final performance, takes also many forms depending on the kind of process, the group and the conditions. It depends on each group and circumstances. However, the closer it is to trusting the life of the process and the group within it to let the result emerge—the better it feels. In this case, the final performing act is also imbued with a ‘contagious potluck’ quality, where everyone brings their part, and the process emerges from the openings happening in the interactions. Co-composition meant creating a space where practices and onco-body-relations could form softly, in relation. Letting go of ‘control’ and allowing for what is present to manifest.

While this process did not end in a live performance open to the public, the images and words, bits and pieces turned into scores that travelled to other groups within the larger across-cities project, into a final public performance in Madrid and a poetic composition of scores for becoming beyond medicalization¹⁴⁴. Also, the group in Zaragoza got energized into a collective effort to invite Kevin and I to return the following year to do a longer creative residency. The following year, we jointly applied for a local government arts-in-community funding opportunity. The grant covered transportation and lodging costs for everyone who travelled to Zaragoza, as well as provided stipends for covering production costs and paying minimum fees

¹⁴² See Gomez-Peña and Sifuentes, 2011, 156

¹⁴³ These events range from parades, conferences and performative weddings.

¹⁴⁴ Published by Revista Hysteria in 2018. (*oncogrrrls* 2018) <https://hysteria.mx/vademecum-poetico-devenires-mas-alla-de-la-medicalizacion-oncogrrrls/>

for people contributing production/publicity skills¹⁴⁵.

The upcoming testimony is from Letizia, who reflects back on her own participation in the process and foregrounds her own change from the ‘why me question’ to other kinds of questions.

So now, what?

Asks Leticia in a fanzine that collects images, scores, texts and reflections emerging from rehearsal processes in Zaragoza in 2016 and 2017: ¹⁴⁶

“This process started with the big question of ‘Why me’? A question surrounded by fear and responsibility, loads that this society put on diagnosed individuals. The time and bonds built with people with onco affinity has allowed me to transit new paths of trust, liberation and sorority with other bodies who also denounce the self-referentiality in cancer and other diseases. Now, other questions emerge. Where is social responsibility, the political responsibility of those who immerse us in stress and productivity dynamics, of harmful alimentation and polluted spaces..? How will the medical system and the medical coverage- access to health evolve?

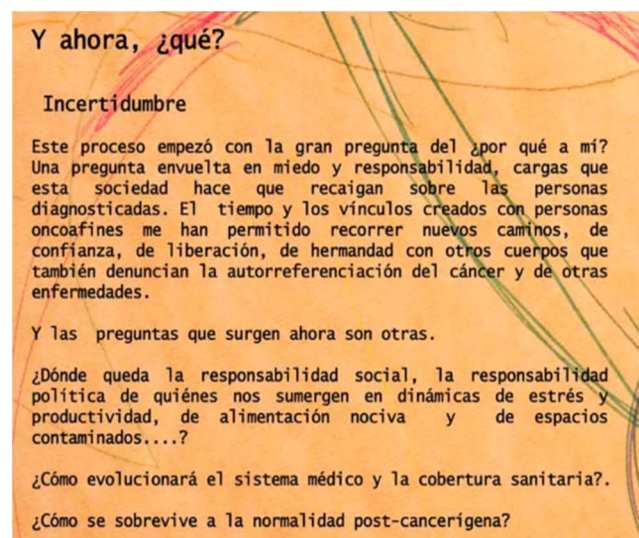


Figure 15. Excerpt of the fanzine from the oncogrrrls residency Cuentos de nos.otras in Zaragoza (design by Melanie Labiersen)

Letizia’s testimony traces her process of transformation through which she reorients the kinds of questions that she asks cancer. From a ‘why me’ question – loaded with fear and individual responsibility— to questions of social and political responsibilities, opening a field of personal

¹⁴⁵ The economic retribution added particular challenges on bringing monetary valuing into the process and setting in place mechanisms for collectively negotiating the distribution of resources.

¹⁴⁶ The fanzine is called *cuentos de nos.otras* [tales of us.others] and emerged from the performance laboratory Find it here: https://issuu.com/melaniea.lafreisen/docs/oncogrrrls_zine

pain into other larger-than-her questions. Letizia recounts how the process allowed her to move into new “paths of *trust, liberation and sorority*.” Her words summon practices of consciousness raising from the women’s liberation movement, through which ‘the personal was made political’¹⁴⁷, by bringing the personal concerns of women into a political understanding of their own oppressions. Letizia names the group --the time and bonds built with people with oncoaffinity-- and the critical stance against individualization of the disease—as having allowed her to open up into other inquiries, an opening into the world from the position of living with cancer and her and others’ resistance to individualizing the experience. This opening to the world from the position of a *cancer-body* “*who also denounce the self-referentiality in cancer and other diseases*” sits in relation to the voices who have defended that embodied experience is a mode of knowing that creates ‘theory in the flesh’ (Cherrie Moraga, Bridge XXIV), brings nuanced perspectives to dominant understandings of reality (Collins 1990), and a mode of making science (Harding 1995)¹⁴⁸. It also brings echoes of women’s health movements that ask questions that mainstream science has devalued (Subramaniam 2009; Spannier 2001)

Letizia speaks of sharing time and promises with people with *onco-affinity*. I marvel at the notion of ‘onco-affinity’, particularly, because it brings traces of anarchist organizing in Civil-war Spain era and emotional work. It invokes the labor of rebelling through mutual support and a sense of affective finitude, a feel for a shared cancer/edge: Death. The end of the self, and the force of fear dulling collectivity in ‘why me?’¹⁴⁹ Audre Lorde wrote (Lorde 1980):

“And I mourn the women who limit their loss to the physical loss alone, who do not move into the whole terrible meaning of mortality as both weapon and power. After all, what could we possibly be afraid of after having admitted to ourselves that we had dealt face to face with death and not embrace it? For once we accept the actual existence of our dying, who can ever have power over us again?” (53)

The recognition of the power that resides in embracing the deepest of fears, ‘develop strengths that challenge those structures within our lives that support the Cancer Establishment’ (59). In

¹⁴⁷ For further development on work on the ‘personal is political’ (Hanisch 2006) and the promises and limits of consciousness raising groups see (to expand)

¹⁴⁸ As these authors adjusted variations of standpoint-and sitpoint theories – to expand-

¹⁴⁹ ---Might this be what Nancy was referring to in the inoperative community. The one community that holds in the acknowledging of its finitude through the death of its members.

co-creating, jointly interrogating the deepest of fears, we engage this power. In Letizia's testimony, fear and responsibility are put into the individuals in a way that silences and obscures the social responsibilities of the disease. While kept in the individual body of those who are diagnosed, cancer remains an uninterrogated sociality, and its histories, causes, and longer traces won't be questioned, nor changed. Allowing, instead the 'why me' to slice cut individuals from collectivity through the cancer diagnosis. However, Letizia's story also illuminates the process by which breaking through the individual fear brings other questions: --. "now other questions emerge" (pollution, alimentation, rhythms of production, medical systems and access)-.. onco-creation, becomes an exercise of embracing the question of finitude together.

In the process, we give space to the emotional exploration and other questions can emerge. This joint emotional exploration summons Audre Lorde's calls to the creative and transformative use of emotions, not only fear, but also anger and erotics (Lorde 1981; 1987). In her work, Audre Lorde spoke to the clarity and intention gained in attending carefully to the truths held in our emotions, and called upon the recognition of emotions as an instigator of collective knowledge and transformation. In so doing, Lorde advocated for coalitional movements where women would gain power and strength for transformation. Letizia refers to this group energy (time and bonds) that from which new questions emerge, questions that care about larger ecologies than the self. Jointly interrogating fear and finitude, creates a community of care holding deep vulnerabilities¹⁵⁰.

From mentors and friends working in community-engaged art and Social Practices, I learned that different kinds of community develop through the practice of making art with others that are not quite a pre-existing community¹⁵¹. My practice is deeply influenced by the lessons from

¹⁵⁰ Lorde also noted the limitations of CR (Consciousness Raising) groups, as they failed to develop tools to deal with anger at each other particularly on the working through racial difference. Later on (in the section on 'score inquiry, not resolution') I will address the tools that oncogrrrls uses to engage difference. Another aspect that CR groups have been critiqued for comes from the self-contained nature of their work, by which the group of women might end up in a self-referential relation to itself and politics. In the case of oncogrrrls, in the making of performances (fanzines, conferences, performance pieces) is where all these new questions enter into the public, creating larger conversations beyond the group, and hopefully mobilizing cancer-representations beyond the group.

¹⁵¹ Practitioner and critique Jan Cohen-Cruz, also reckons with the fact that community-based performance has become less about homogenous communities and more about different participants exploring a common concern together (Cohen-Cruz 2005)

Brooklyn based community-dance troupe *Urban Bush Women* (UBW), their core values, community-building exercises and articulating EBX process¹⁵² (EBX- Entering, Building and Exiting Community). Despite acronyms that might lead some to think that there is a community that the group of artists enter and exit, through my experience with them I learned that Jawole Willa Jo Zollar and her company have worked in community engaged projects in New Orleans since 1992. Over almost thirty years, Jawole and her troupe have been developing long term relationships and friendships with artists, activists and community groups from the area and engaging with their social and political concerns over time. Thus, ‘entering’ is far from a ‘dropping in’ but a deep and intentional community-building process. Also, through their summer leadership trainings they have been developing a larger community of African American individuals and allies concerned with poverty/racism and community-dance performance. These summer camps where artists, activists and members of the troupe work together in the making of a live performance nurture seasonal communities. These communities add to the larger circle of UBW supporters and Art/activists.

And while ‘entering community’ is an idea used by many of my mentors. In the case of oncoerrrls, I think of *gathering the community* when inviting people to join the creative processes. Inspired by many of the lessons learned with UBW, oncoerrrls follows the model of creating temporal artistic communities that expand with each artistic iteration. However, due to my nomadic relation to land, as a student/practitioner migrating across the U.S.A, Spain, and Mexico, oncoerrrls has been growing in circles of people with a shared concern, instead of from a situated land-based location, in temporal communities that weave a larger group of people across the territories. In a fashion similar to the mode in which Guillermo Gomez-Peña call the groups of trainees and artists that take La Pocha Nostra Summer schools, temporal artistic communities.

In Zaragoza, in addition to moving the question away from self-referentiality and linear causality logics, the practice of joint onco-creation, created bonds that lasted over time. Bringing both,

¹⁵² As I read about the Urban Bush Women experience with communities and art for social change art making process, in Nadine George-Graves revision of their work, (George-Graves 2010), I realize that I owe a more extended, more detailed engagement with the lessons I learned with UBW about community-engagement and the use of dance techniques and principles for engaging with groups in reciprocal, reinforcing, and mutually nurturing environments.

Kevin and myself back to do a second edition of *oncogrrrls*. In *doing something about it, and doing it together*, we created an altar, some scores, friendships, and palpitating energies for sustained activism and art-making.

To sum up, the principle of co-creation¹⁵³ takes many forms and it applies to the different stages of creating a piece together. Starting with a potluck insists in sharing as a practice of shared abundance, refraining from scarcity logics. Centering questions from the group insists on co-investigating, and vows to the gifts and knowledges from cancer practices. Co-facilitation requires a commitment to adaptability, change and transformation, to let go of bounded/rigid practices, and foster porous boundaries where practices change in relation to the group and the ecology emerging. Co-composing holds the ecology created, setting the process in relation to larger cancer practices and audiences who are also in relation to cancer.

On.co-creation might feel challenging and risky because it requires a willingness to let go of the spell of cohesiveness, and it can be a risky endeavor. This is where identity-based divides that hold individuals ‘separate’ from the process of change (such as artist or researcher vs. community member) can hinder the process the most, as in rehearsal as a practice for transformation, all the individuals involved must be committed and willing to do the work of changing. Authors talk about this risk in different ways¹⁵⁴ yet, having lived through cancer treatments, the sense of cohesiveness have already gone ‘wrong’(and mythological). We (people living with cancer biomedical treatments) are experts on corporeal shapeshifting and border transiting. Why not make the most out of it, mine this gift, and jump right into the stream of fluid and contagious bodies of practice!

The point of co-creation is to advance a principle for nurturing mutual engagement and transformation, aside from divisive frameworks for valuing individuals. It is easy to feel compelled to make divisions and hierarchies of which practices have more or less value,

¹⁵³ While cocreation might sound similar to what François Matarasso identifies as one stages of the four in the cycle of participatory art projects: conception, contracting, co-creation and completion (Matarasso 2019). I propose cocreation as a mode of engagement that keeps the community of practice at the center. I find particularly challenging the attempt of fixing co-creation within mechanistic understandings of change, and fixed scales of intervention as if the practice could be abstracted from the groups and experiences from which it emerges. I understand co-creation as a principle that takes different forms with each group

¹⁵⁴ See for instance, the work by Lynette Hunter on engaged ethics and disunified aesthetics (Hunter 2014)

particularly when engaging with structures of recognition that center the individual, as the Art world, which tends to recognize authorship and individual skill. As I notice that holding co-creation within structures of institutionalized accountability and mechanistic visions of change might misrecognize the full potential of cocreation, in thinking cocreation, I am inspired by the writings of brilliant disabled queer femme of color Leah Lakshmi Piepozna-Samarasinha. She dreams of cocreating decolonial living futures lead by black disabled folks and reminds us that leaving no one behind; trusting the gifts and wisdom coming from impairments; doing the work of holding emotional complexity (shame and honor with care, softness and healing), and building communities of care through daily showing up for each other, are what sustains the work of care in disability justice¹⁵⁵ (220: 135). She brings cocreation at the center of dreams for change and practices of love. Yesssss.

¹⁵⁵ Leah proposes these main principles as practices for disability Justice. She builds from-with the statement developed by disability justice activists and artists, Patricia Berne, Aurora Levins Morales and Davis Langstaff, within the Sins Invalid collective. (Berne et al. 2018)

3. start in the body!, or tend to somatic/sensuous experimentation

This principle proposes bodily practices as the origin for exploration, and these practices take multiple forms. Tending to the somatic orients our attention towards the sensuality of the experience, tuning into the subtleties of the present moment and the discoveries emerging from physical tinkering. Against biomedical discussions and narrative cancer logics, this principle proposes to undo fixed and individual notions of the onco-body into multiple onco practices: slowing down, sensing juicy moves, playing doctor, noticing edges, shaking knots, sounding fears,. . . in so doing, we might even create new bodies. Baruch Spinoza proposed to change the question from, what is a body?, to what can a body do?¹⁵⁶ shifting the attention from the bounded body to the potentialities of doings in relation.

Central to my questioning of *what can a body do?* in *oncogrrrls*, is the practice/notion of Transposing.

Transposition, a technique I first learnt in classical music training and that is also present in the sciences and the arts¹⁵⁷, entails a displacement. In music, transposition refers to the practice of moving a melody into another key: it is a process of uplifting a musical line (trans) and landing it (posing) somewhere else. In this displacement we change the tone of a melody, its mood, or affective cadence. I use transposition as a dramaturgical mechanism, as a technique to devise exploratory practices/ scores that will generate performance material. I also use transposition as a technique to open up cancer relations into new possibilities. A kind of tinkering¹⁵⁸. Transposing is a playful practice that opens-up formed objects by moving them into sensuous experimentation. In *oncogrrrls*, transposing anchors the process as a somatic exploration, could be narrated as ‘moving the issue somewhere else and see what happens’ and scored as practices to:

¹⁵⁶ Deleuze’s reading of Spinoza.(Deleuze 1988)

¹⁵⁷ Feminist philosopher Rossi Braidotti, in her manuscript *Transpositions: on Nomadic ethics*, explores transposition as a ‘zigzag’ tool to engage across fields of knowledge and politics (Braidotti 2006). Eugenio Barba, engages with transposition as a tool for to generate states of orientation and disorientation in the making of new bodies for theatre. (Barba 2002)

¹⁵⁸ Sarah Giordano, in writing about feminist DIY-DIWO science proposes to think about tinkering as a ‘process that in itself is where new knowledges and possibilities are produced as well as thinking about it as a way of being or becoming’ (Giordano 2018, 226)

1. Pick an issue [that needs exploration]
2. Move it somewhere [in your body, in the room, to another material]
3. Be open to what emerges [notice, attend to what emerges]

Story: What Does Somatic Engagement Look Like? The Periphery Score

“You know what?” Marta called to me from the kitchen’ “Since my brother died.. and thinking about his death and all the process with the doctors and all, has always brought anger, guilt.. you know, these kind of feelings. However, today - in the periphery practice we did this morning- I had so much fun.” Then, she whispered secretly: “yo diría que me puso hasta cachonda! [I’d say that it even turned me on!].”

December 2016. As part of a multicity oncogrrrls laboratory, a group of 8 women and queer individuals¹⁵⁹ gathered for three days in the self-managed occupied social center, CSOA La Redonda¹⁶⁰ —downtown Granada, Spain.

Pick an issue: We had received the question: *How do you [cancer] transit through my body?* from another group in Zaragoza.

Move it somewhere¹⁶¹: we explored this question over a three days residence with different kinds of somatic practices and performative scores approaching notions of ‘entering and exiting’, ‘having someone/something else entering in relation with our bodies’ or exploring ways of ‘moving through’. One of such somatic explorations, which I adapt from a practice I learnt from Marbles Jumbo Radio¹⁶² is the *periphery score*¹⁶³.

¹⁵⁹ Three women diagnosed with breast cancer, one treated for hepatic disease, 2 who lost family members to cancer, and 2 interested in new forms of care/healing and the arts.

¹⁶⁰ CSOA La Redonda, occupied in 1990 as a social center, which held living spaces as well as a circus school, a theatre, and multiple social and collective projects was evicted and demolished in February 2021. RIP.

¹⁶¹ Note on not needing to know where it ‘is’ originally.

¹⁶² While this practice might have other origins, it arrived to me through Marbles Jumbo Radio (MJR), a dancer and visual artist from NY, who shared this practice at a workshop at UC Davis. Marbles shared it as a practice for making the invisible, visible, by passing a very heavy rock, and situating the practice in relation with the weight of processes of racialization. I adapted the score by adjusting its framing, changing stones for water, simplifying some of the more intricate movement tasks that MJR proposed, and adding a visual practice of devolution.

¹⁶³

We start by warming up the peripheral sensing: Standing in a circle, we attend to the length of our spines extending from head to sacrum, and sensing our weight connecting into the ground. Bouncing into the floor we extend our awareness of the vertical space. We step in and out, activating our front and back perceptions, opening to the wide space ‘behind’ us. Finally, we extend the arms to the sides, and wiggle our fingers at the edge of our lateral vision, attending to what is as ‘far-removed as possible’ to notice. I ask: what do you notice in your periphery? And invite everyone to randomly share images, shades, or sounds that they notice at the edge of their perception. Once we have warmed up the peripheral sensing, we move into the core of the practice. I invite to “move –as you want- across the space, your only task is to always ‘stay in the periphery,’ whatever this means for you”. While I insist on ‘staying in the periphery’, I also invite the movers to transit across the room in many ways, exploring different kinds of periphery they might find in the exploration (whatever you do, do it larger; shift the kind of periphery; explore the opposite quality; find the periphery somewhere else...)-

After some time (10”) into the practice, I let the movers know that: “something will arrive to them and they just need to continue “staying in the periphery.” I then offered a sealed one-gallon water bottle to one of the movers, who would start playing with the object for a while. when the gallon of water does not find other movers by itself, I kept passing the gallon of water around, and insist to “remain in the periphery” while the weight of the water gallon increases the pull of gravity of a different mover at a time. I play along, insisting on finding different ways to “be in the periphery”. This practice can last up to 40”.

***Be open to what emerges:** the sound of feet stomping into the wooden floor, laughter, jumping over bodies on the floor, and swirling. Sounds. Turning upside down and shaking, walking on four, rolling, hauling, caressing the walls of the room, clapping. Dizziness. Spinning the water, spinning with the water, looking through the water, sharing the weight, off-centering, (. .)*

To continue this by sharing the experience with the group, in a modality that keeps foregrounding the somatic experience, I offered paper and colors and asked everyone to ‘grab their movement in a paper’—whatever this meant for them. Everyone started drawing and scribbling. I continued prompting as in a kind of meditative background: Which were the sounds

of the periphery? Which were the moves and actions of the periphery? What did the periphery smell like? Taste like? Feel like? How did you stay in the periphery? Which kind of practices moved you to the periphery? After ten minutes or so, as I noticed the hands slowing down, I prompted the questions: How did the water transited through your body? Which mechanisms did you use to stay in the periphery once the pull of gravity increased? ~~which kinds of thresholds did you notice?~~ And allowed some more time to continue the free-writing. After this final set of individual devolution we each shared the drawings, images and texts in a “pop-corn” style¹⁶⁴.

A conversation starts with spirals, fractals and flocks of birds, guiding sounds, and moving intestines, and evolves into “searching for holes”, “keeping a disperse gaze”, “feeling both weights simultaneously”, and “making the water sound off my angle”. To my question: How does this practice think with cancer transits? The floor opened up to people talking about cancer, gravity and marginality in different ways: some shared their stories of having been displaced to the fringes with the disease; others spoke of the relief of this displacement, others shared their already familiarity to marginality due to other sexual or gender orientation. Through the musing, the periphery metaphorical exercise expanded our conversation into strategies to engage with a decentering/unbalancing situation, chance and group support, and also about ways of fleeing from and opening up an omnipresent cancer presence.

How was this practice helpful?

Marta’s startled excitement during the morning session, shows how the periphery score, a bodily exploration into the gravity of cancer, was a helpful practice¹⁶⁵. She refers to the unexpected pleasure that emerged in the practice and how it allowed her to enact a cancer-related practice (and conversation) from a place of enjoyment, and even arousal, instead of from her habitual grief. The practice opened up her cancer emotional bundle to yet another possible affective

¹⁶⁴ a mode of circling-up that does not need to respect any order but that requires carefully attending to each other to know when to contribute, which I don’t remember where I learnt first from.

¹⁶⁵ Despite this score has worked particularly well in early stages of rehearsal as in this case, I also found that it has not worked so well when in later stages of the rehearsal process, or when working with individuals and groups who feel resistant to be ‘off-center.’

response. In transposing the question that bothers, offers new solutions and collective engagement with it, and also the sense that all these feelings are not opposed to one another. Through the joint bodily exploration, the practice creates possibilities for simultaneously feeling rage and pleasure, or sadness and curiosity. Somatizing, in this practice, nurtures emotional variability and multiplicity, increasing the affective range of the cancer experience.

how did this work?

This transposing practice displaced the initial question ‘how do you (cancer) transit through my body?’ to a sensuous experimenting with ways to keep being in the periphery while (water/cancer) transits through my body. It proposes experimenting and exploring with a physical concept, somatizing the question. The movers, first, engage in an active discovery of modes to enact, move, sense and activate possible versions of what “being in the periphery” can be, and explore modes of being off-center. The initial part of the practice aims to generate a physical core of reference for the movers, or bodily state to aim towards. In the second part, the practice asks that the movers actively try new modes to reach towards that state of reference once an unexpected condition affects their experience. Movers, then, engage in an exploration that requires them to incorporate the new weight and their shift in center of gravity. This score creates a differential –between a ‘weightless’ and a ‘weight-modified’ exploration- that opens up a threshold of experience. In attending to the edges of their experience, the movers can register the somatic differences between each exploration: the peripheral exploration with and without the extra gravity pull. Attuning to the somatic field of experience allows for the making of differences. The after movement drawing and sharing allows for a kind of transference of these differences into the field of our cancer experience, opening cancer relations to new sensuous experimentations.

In somatic practices, says Nita Little, scholar and one of the founders of the dance exploration ‘contact improvisation’, ‘noticing the experiential moment is fundamental’ (2018). Dance and studio practice, when attending to somatic exploration, do not aim to reach a form, but to engage with the present moment of noticing (me, you, the environment, breath, in/out, rhythms). In slowing down and engaging with what is happening, this kind of inquiry, says Nita ‘holds tremendous potential as an activist practice based in embodied engagement’ (Little 2018)

Engaging with the present moment of noticing and what is happening, the practice physicalizes and animates a dead metaphor¹⁶⁶. That is, arouses/unsettles through bodily practice, the metaphoric collapse that has frozen up cancer (bodily) experiences (of inescapable marginality) as unavoidably painful. In forgetting the bodily part of knowing, the metaphor is ‘dead’ as in, foreclosed, frozen, immobile. By moving and exploring the periphery in all these other interesting ways we open up the ‘fun’ side of peripherality and cancer, discovering other kinds of ways to explore what is (also) fun about the periphery. By returning to the body as a creative source, the physicalization of the experience enables to unfreeze the dead metaphor (of cancer marginality is painful). By physicalizing the dead metaphor, this practice cracks open the (dis-) embodiment of the metaphor.

Transposing is not a principle for escaping or veiling the painful side of the experience, but a tool for enabling simultaneity. In thinking about improvisation and cultural anthropology Joe Dumit proposes impro games as tools for jamming sensory-motor cultural assimilation, ‘as a form of being present to one’s situation, which means deeply listening and inhibiting or at least being mindful of one’s habitual responses, which means finding something else in oneself’ (Joseph Dumit 2014a). In this finding something else, while the experience continues to bear the inescapable weight of water/cancer and pervasive marginality, the score is also fun and enjoyable, keeping both at the same time. This is not an evading or ever generalizing, universalizing, normalizing practice but a non-exclusionary one, that asks for simultaneous and multiple possibilities of living and dying with cancer. In keeping the score as an open discovery, and the sharing practice as a ‘pop-corn- style (not a rational debate), this practice of somatic inquiry does not ask to choose between right or wrong sides of the experience, but enables for many things happening at the same time.

Audre Lorde’s fierce resistance to being quieted, invisibilized by structural cancer.inc by the covering of her cancer scars foregrounds again while she looks at me from this temporary writing altar of today (Lorde 1980). And in reading Leah Lakshmi’s fierce refusal to embody the

¹⁶⁶ Dead metaphors - all the words through which we think experience are physical words that we don’t remember are physical. The standardization of cancer and marginalization equals pain collapses the experience/metaphor as one frozen metaphor (dead metaphor) of “inescapable cancer -marginality” as bad. That is, the collapse by which experiential knowledge has frozen up cancer experiences (of inescapable marginality) as unavoidably painful.

‘survivor archetype’¹⁶⁷ (Piepzna-Smarasinha 2020, 233) I am called to remember that ‘staying in the somatic experience allows me/us to touch the *(in)visible scars of cancer* (Ludica 2013a) again. It gives me/us tools to engage with the damaging stories that we have been told about cure, recovery, individual survivorship, lineage passed ‘defect’, responsibility, self-harm, and it brings the fierceness of crip/disability artists and activists who refuse ableist ‘cure narratives’. Sitting with the deeply scarring effects of ableist and thanatophobic cancer regimes that both generate and obscure shame, guilt and anger under pink happiness and hope. Living with cancer -- not as cured survivors—but as experimental artists, in oncogrrrls we join forces to explore the emotional richness of living and dying with cancer; and mine on our skills at self-(un)becoming while leaning into the experience of fully sensing what is.

Also, Doing this practice in group turns joint playing into a space of co-learning that nurtures possibilities for seeing/doing/practicing cancer and marginality otherwise. Attuning to the kinetic manifestations (directions, distances, rhythms, spaces and currents) within the group, this practice enhances group awareness and eases co-inspiration. I recognize myself as living with cancer, not as a cured survivor, but as a thriving gifted onco-doula¹⁶⁸ artist engaging groups to interrogate the material historical processes making cancer-relations. Raising collective *onco-suspicion*¹⁶⁹. By experimenting side by side we infect/affect each other, inspiring and stirring each other to try new possibilities for peripheral sensing (with and without the water), arousing new modes of doing/moving/being. This joint somatic practice ignites *sensuous co-experimentation* and transformation of cancer collectively.

[transposing as concept]

transposing emerged as a concept while I was trying to figure the process of differentiation taking place in the rehearsal of the piece (*Parèntesi*) – (presented in the previous chapter). I draw a visual interpretation of the sentence “now, place your life in a parenthesis” and lines, curves

¹⁶⁷ Coming from surviving sexual abuse and violence, the survivor archetype is figure of the ‘good’ or ‘fixed’ survivor who lives through the experience, gets therapy and feels as if nothing had happened, fully cured and returned to normal. The survivor archetype in cancer is the blatant, and ableist assertion that there is a cure, a return to before cancer.

¹⁶⁸ Opening to the understanding of ‘doulaing’ from the community group What would an HIV-doula do, which propose doula as ‘someone who wholds space during times of transition. (“HIV DOULA Work” n.d.)

¹⁶⁹ Preciado proposes a first stage of drag kin workshops as raising collective gender suspicion,’ becoming aware of the opaque effects of cultural and political constructions and, consequently as potential objects for a process of intentional, critical and insubordinate intervention’. (366)

and dots substituted breasts, parenthesis and life continuities (see figure X). Then, I tinkered and swirled around the symbols of this cancer story, jamming its material components with no other rule than to keep the same number of lines, curves and dots. Unexpectedly, childhood memories of learning music foregrounded, and transposition emerged as an alternative to the 'parenthetical metaphor.'

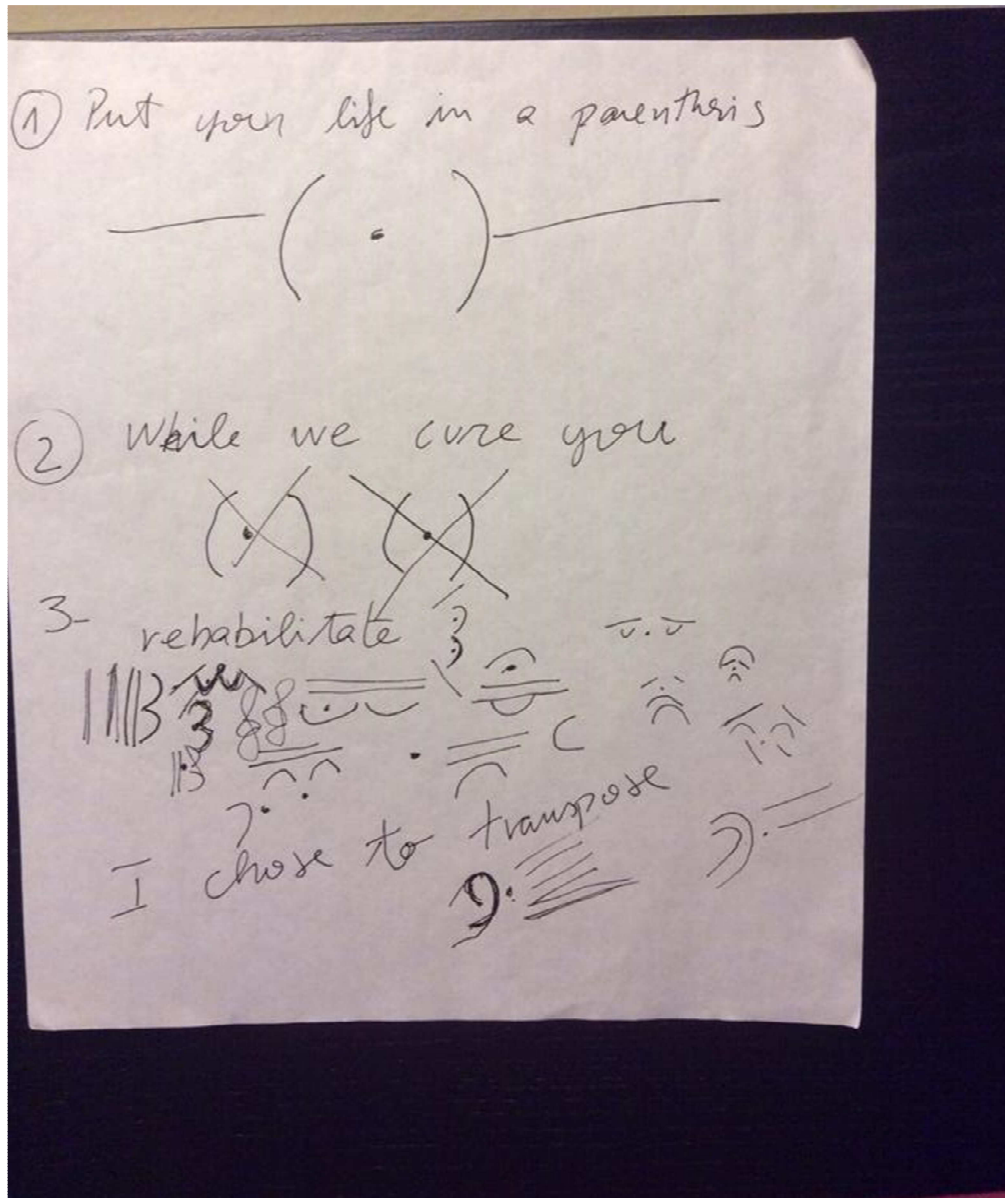


Figure 16 documentation of tinkering with symbols. emergence of transpose #1

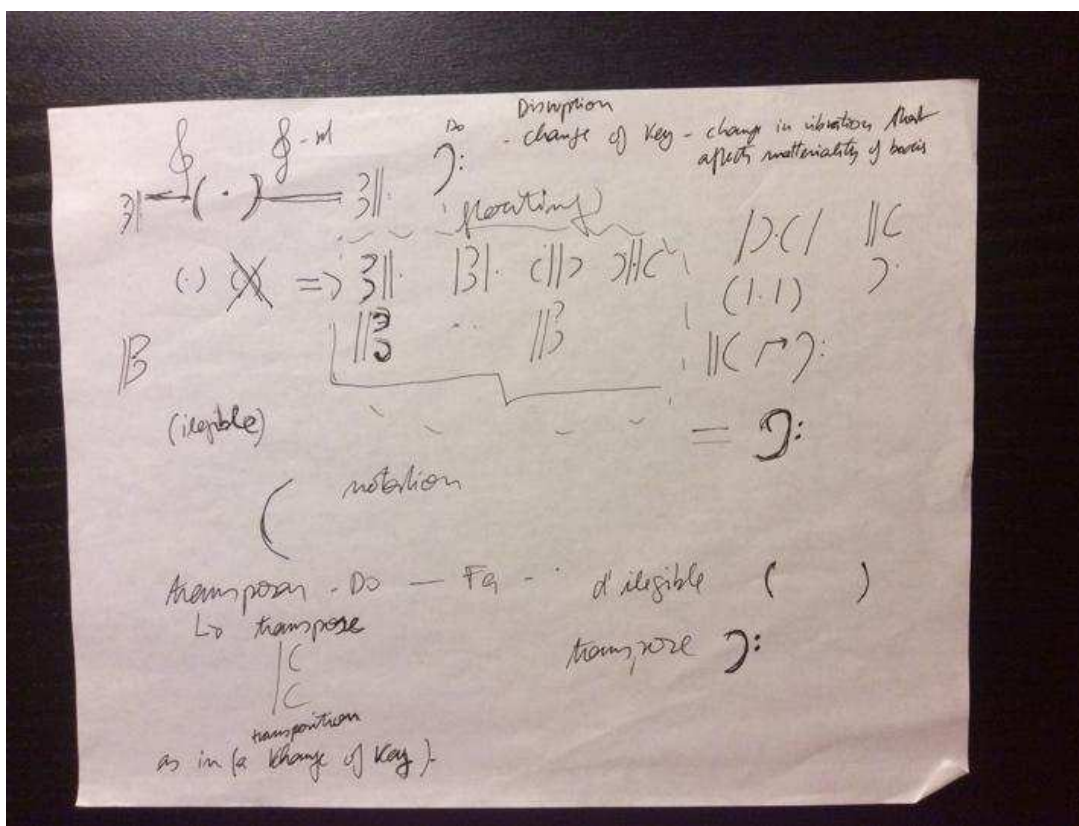


Figure 17 documentation of tinkering with symbols. Emergence of transpose #2

Trans-posing figures a movement practice, a protocol where, instead of a life placed ‘on hold’, the oncological experience emerges as an intense transit with the potentiality of change, an opening of certain configurations to the richness of the possible¹⁷⁰. A “trans”, and a “posing” that speak of situated experiences of engaged working through the pains of cancer stories. I am interested in *trans* as ‘across’ and as ‘through’—not only a movement that might be ‘against’ as in transgressing away from the medical norm. I am looking at the transit *across* or *through* embodied forms. This transit is not a non-consequential wandering on a liminal¹⁷¹ time/space before returning to a previous ‘state’, but an *across* forms most often unknown and unpredictable. An undecipherable process of differentiating that resists cure narratives of

¹⁷⁰ A kind of process of deterritorialization and reterritorialization in Deleuze and Guattari’s terms.

¹⁷¹ A proposed by anthropologists Victor Turner, recuperating Van Gennep’s notion of the liminal in Rites of passage.

‘returning to before, reconstruction, rehabilitation, or pink survivorship – nothing happened here’.

This transit is also a *through*—not a suspended witnessing, nor an indulgent serene touring, ’- but an ‘engaged time space’ filled with intense material effort and affective labor in rehearsal. I am thinking about *Posing* as in the posing into legible forms. Unpredictable, this posing¹⁷² is not about a fixed universal position, but about landing into a new configuration. A process of situating and “taking place” that happens through the practice. A continuous process of ‘posing’, re/situating in the doing. In my mother tongue, catalan, ‘posar’ indicates to place something somewhere, in relation. It also indicates to alter state, as in a kind of becoming. Posing is a situated and situating practice. Posing is about posing in relation, not a fixed ‘pose’¹⁷³ out of a vacuum.

Further Discussion on transposing

In doing research on the impact of an art-education project for social change¹⁷⁴ with the dance company *El Colegio del Cuerpo* (Cartagena, Colombia), I first witnessed how to design social inquiry through art practices in an educational environment. In their weekly modules, the facilitators would transpose social questions into movement and other artistic practices scores to open up dialogue and spaces of engagement with social issues in the classroom. I also witnessed how this technique made “new bodies” among the children¹⁷⁵. Transposing brings us back to Spinoza’s question, and to understanding bodies as doings with affective capabilities. And to the notion of practices that open somato-political , moving away from predetermined, inert materialities and to bodies as processes.

¹⁷² In relation to what Manning and Massumi call *taking* (Massumi and Manning 2014)

¹⁷³ Some might think of this posing as a kind of ‘pose’ - and recall Amelia Jone’s work with the rhetoric of the pose in the work by Hannah Wilke and Carole Sheeman (Jones 1998) which aimed, according to Jone’s to reverse the male gaze. However, I am not addressing posing in this way. Coming from my mother tongue, catalan, in which posar (posar-se), has its origins in the late latin (pausare)- take a pause taking the function of ‘ponere’- to take place. A posing is a kind of landing, it also indicates a way of ‘changing state’. Perhaps even a way in which by posing we offer an alternative mode of being that might affect mainstream cancer practices.

¹⁷⁴ the dance-education project *Proyecto Ma, mi cuerpo mi casa* [Ma Project, my body my house]

¹⁷⁵ In Novella 2010, I explore these changes from Freire and Boal’s liberatory approaches through notions of collective praxis affecting the individual/social body.

In *The body Multiple*, Annemarie Mol teaches us that the many/different practices of physicians, technicians, and doctors *enact* what is conceived as a singular body into more than one (Mol 2003). Opening one singular body into a multiplicity of practices. Thinking with her, transposition works as a practice for everyone becoming scientist/empiricist/creator, enacting the onco-body otherwise. In *oncogrrrrls*, the (activist) point is to displace ‘the onco-body’ from a fixed, deterministic materiality, and into a series of processes that make the oncobody multiple. To enact an ecology of cancer practices and relations. In *Testo Junkie*, Paul B. Preciado proposes us to engage in ‘practices of intentional self-experimentation’ (363) to open up the ecological fictions of gender, sex, and sexuality. Thinking with Preciado, transposing moves the individualized onco-fiction of biomedical and cultural practices of making sick patients towards cancer as a relational ecology open to mutability.

In *picturing personhood* Joe Dumit traces how scientific facts get incorporated into notions of self, into what he calls *objective self-fashioning*, where scientific data imaging become tools to prescribe our life (2004). Transposing becomes a performative tool to move the self of oncology and biomedicine somewhere, and attend to what emerges. Joe Dumit and Kevin O’Connor, propose a series of movement experiments with fascia as practices of ‘exploratory embodiment’ that come to think of ‘fascia as concepts made up of multiple relations rather than a known fixed object’. In relation to them, transposing becomes an exploratory movement tool attending to the multiple relations emerging in cancer, a kind of Practice as Research for attending to *the change that is being done through/within the practice*¹⁷⁶.

Authors describe somatic practices as “processes of undoing existing patterns so that new ones can emerge” (cite). Authors and practitioners working on trauma have been incorporating somatic¹⁷⁷ approaches, mostly to address individual trauma. While I see some potential for

¹⁷⁶ One of the reasons why Artists-scholars working on Practice as Research turn quite often to Deleuze and Guattari’s notion of *becoming*.

¹⁷⁷ For a long time I refused to engage with the field of somatics, as I was looking for working models that aimed at collective engagement and structural transformation. I would find no place for this kind of work within deterministic models that explain the body in individual approaches to ‘cure’ or within the tendency to individualize and enact body-mind divisions that center a brain over a compliant body. Mainstream psychosomatic explanations of the causes of cancer, rooted in individual trauma would make me cringe, as techniques full of harmful effects. In *Gut Feminism*, Elizabeth Wilson proposes an exercise of biological phantasy, and proposes constipation as a bodily utterance, an exquisite alternative visioning to conventional psycho-somatic interpretations, as the bowels enact the archaic work of mourning.

engagement the collective in the emerging field of social somatics, particularly in the work of Petra Kuppers (Kuppers 2009) and Resmaa Menakem, who proposes -body practices- or somatic scores for tending to bodily sensations as cues of social and historical race-based trauma (Menakem 2017), I have yet to fully engage with this field.

The Periphery score

Granada 2016)



periferia- periphery



Figure 19 Still image of video documentation from the Periphery practice at CSOA La Redonda. Granada. 2016 . From Left to right: Caro, Carol, Veronica, La Calva, Noemi

<https://vimeo.com/manage/videos/541494240/25b12866dd>

Transpose, from movement, to drawing.



Figure 20 drawings with movement. rehearsals in Becoming beyond medicalization (Spain 2016)

Tenderizing Score (an excerpt from a joint article with Kevin O'Connor) -Practicing contagion with scoring fascia

Part of Kevin's research has been examining the emerging biological material called fascia through a practice-as-research dance studio. He helped set up an experimental PaR fascia dance lab that Caro participated in and contributed to at UC Davis (Dumit and O'Connor 2016). The lab he worked in created a tenderizing score that we re-enacted in the Zaragoza studio. The tenderizing score was based on a reading of Robert Schleip, a leading fascia researcher who bridges scientific investigation and body-work practice. In his articles on fascia plasticity, he examines the neural dynamics behind fascial plasticity and offers new perspectives for myofascial treatment methods between myofascial practitioners and their clients (Schleip 2003). Through it, we learn stress can cause fascial stiffness, therefore linking the fascia system to the central nervous system. Fascial stiffness is also something cancer researchers care about. They study how complementary and integrative treatments, such as massage or acupuncture, are used by increasing numbers of cancer patients to manage symptoms and improve their quality of life¹⁷⁸. Such treatments may have other important and currently overlooked benefits by reducing tissue stiffness and improving mobility (Langevin et al. 2016).

Surprising to many researchers, fascia contains many types of sensory nerve endings called mechanoreceptors, and each of these receptor types responds differently to different manual manipulation pressures. Through Schleip's review article on fascia, we learn how manipulating the nerve endings can change skeletal muscle tone, therefore changing the stiffness of the fascia system and muscular holding patterns (Gehllhorn, 1967). In the initial fascia laboratory at UC Davis, moving with and activating the fascia mechanoreceptors through Schleip's reading of them, we created a kind of warming up that both calmed us down and stimulated the whole peripheral body. We felt a kind of waking up to attending to the peripheral body and a heating up of the body. Individually, each activation of the mechanoreceptors created a different kind of readiness for further movement, affecting one's future self. We called it a tenderizing warm up (Dumit and O'Connor). We used this tenderizing warm up and we re-enacted in the Zaragoza studio.

¹⁷⁸ In November 2015 the first ever "Joint Conference on Fascia, Acupuncture and Oncology" occurred at the Harvard Medical School where researchers who speak very different languages and do different practices came together to share and learn to talk together.

Tenderizing Score:

- 1) Read fascia researcher Robert Schleips article on fascia and mechanoreceptors
- 2) In groups of 2 practice "waking up" the three kinds of mechanoreceptors:
 - a) Puccinni mechanoreceptors: wake up through patting and jiggling
 - b) Ruffinni mechanoreceptors: wake up through wringing out at the joint and long compressional sliding
 - c) Interstitial mechanoreceptors: wake up through soft skinning the surface of the skin touch or pressing hard along the bones (starting with the fingers and toes)
- 3) Improvise in groups of four playing with these touches for ten minutes (where three members of the group offer alternate kinds of touch to the fourth person dancing and moving with or against the touches)
[In Zaragoza we added:]
- 4) Continue a solo improvisation from the trace of the touches on your body.

This somatic score allowed us to sense into new modes of thinking doing onco-relations. In Zaragoza we did the tenderizing score starting on the second day of the lab and continued to do it each day following. The score had an effect we did not anticipate. It opened the border of the skin creating a feeling of dropping out of the possessive individual. Caro defines diagnosis as a kind of (bracket), being enclosed into becoming the sick one, a kind of object. In the first day of the laboratory the participants enforced this bracket by spending time speaking of their own particular diagnosis, treatments plans and medical interventions they were undergoing. The tenderizing score drew the participants attention away from a focus on their individual diagnosis and to the touch between bodies in the room. Some described it as a kind of felt sense of warming up, melting, tingling, softening. The practice was an alternative to the effects of the multiple pills and drugs that were also in the room with us. It was cultivating a capacity that performance research scholar Andre Lepecki calls a "capacity to make bodies produce their own endo-drugs, their own non-patented and non-controlled substances countering pharmacopower's drive for a compliant subject..." (Lepecki 2010). In our lab it also cultivated a future self that could attend to the knots and entanglements they were becoming with beyond their own "self" practices. In a sense it melted the onco-(bracket) and opened up the participants to feeling into onco-bodilying

relations otherwise. It both drew attention to their skin bound body that contained their onco-relations, scars, and related stiffness, but also activated a responsive mode of becoming, an ecological mode of attending between touches that allowed them to stay with the trouble of being in new kinds of collaborations, both forced and otherwise.

Through this score the concept of "tenderizing" emerged and the score was named so. The entomology of the word tender is to grow soft (Oxford English Dictionary). The term can be traced to the Latin "tender", derived from the Sanskrit "tan," "to stretch," or "to reach. Tenderizing in the oncogrrrls laboratory became a practice of softening into becoming with many. Each time we practiced tenderizing the me became further destabilized, sometimes leading to confusion or dizziness, where questions or differences could not be articulated. Something other than a stable subject position was emerging.

CHAPTER 3 How does silence shape my/our body? Transposing attention and the materiality of changing: Making the onco.body multiple

In this chapter, I introduce one practice of making breast molds in the creative process of making the piece *Resistencias sonoras (sounding Resistances)* in Mexico City (2015) while speculating about modes of (critical/activist/performance-making) production. At the time of my writing, I was trying to articulate the differences between collective and collaborative modes of production in performance making and activism. I was also thinking across fields and trying to engage performance studies with the materialist/affective turn and feminist STS. This chapter is a reflection of that effort. This effort found its way into the dissertation as a further elaboration into the practice/concept of *transposing* as bodily inquiry that enables tending to multiple and interconnected cancer-relations.

A laborious and fast-paced producing of gypsum plaster-filled wood boxes leads to thirty minutes of stillness. A thick silence fills the room while we rest, letting the gypsum forge while we attend to what's happening



Figure 21. Waiting for the gypsum to forge. Gypsum Lab. From left to right: Eva, Rox, Caro and Anna. Video shot by Kani LaPuerta,

It's December 2015. I am in Mexico City, making a performance piece with women, queer and trans individuals troubled by cancer matters. A local transfeminist group, touched by the diagnosis of a close friend, invited me to develop an *oncogrrrls* performance art laboratory with them. After an initial open call to participate, among their networks in Mexico City, a group of fifteen people join the performance experiment. Also Mia Morro, a friend and visual artist from the United States who had largely worked in Mexico, joins the group. Total: 15.

oncogrrrls laboratories are performance making processes in which we attempt to engage in collaborative modes of exploration and creation around our personal experiences with cancer.

oncogrrrls laboratories are temporary artistic communities and critical performative

interventions. Rooted in movement and improvisation, the process of making the performance piece is about asking questions and inviting embodied responses. From an initial meeting with the group in which we all share personal stories, expectations, and our most current concerns, the artist/facilitators involved - who also vary in each temporary artistic community - design movement scores and improvisation games¹⁷⁹ addressing these issues.

What would you ask cancer?

this question ignites our discussions during the first meeting at La Gozadera.¹⁸⁰ A polyphony of questions filled the room: How many landscapes have you visited? Who are your allies? What is your form? How many forms will my body take? What kind of power do you have to create so many silences? What do I have to learn from you? How can I/we accompany in processes of diagnoses and treatment? The amorphous contours and yet polymorphic kinds of cancer, shaping individual and political bodies, as well as the silencing force of (the stigma of) cancer were the main discussion topics. Thus, our line of inquiry for the laboratory became the silences and shapes that cancer molds our individual and political bodies into.

We decided to meet for a month, three times per week. As different people have different capacities, we decided to structure and facilitate the sessions in a way that the process and the final performance piece could be informed by the ideas/images emerging from previous days yet was not dependent on it. In an additive yet non-dependent modular process, in which each

¹⁷⁹ The scores and the kind of artistic practices that we will use varies according the composition of the group.

¹⁸⁰ *Espacio La gozadera* was a feminist art space and restaurant then recently inaugurated in Colonia Centro Cuauhtémoc, Mexico City. They offered us a studio space to rehearse and to present the final video performance piece. While the space became, in very short time, a lesbo-feminist cultural hub, this year 2020 Gozadera closed its doors.

session contains the necessary molecules for the specific experiment, we¹⁸¹ named this mode ‘*probetas*’ (test tubes). For two weeks, we used different movement exercises and improvisation games to implode questions, unfolding one question per day. Day 1. Which form does cancer take in my body? Day 2. How do I/we inhabit other bodies, and which kind of landscapes do we create when inhabiting space with other bodies? Day 3. How does cancer mold my/our bodies? Day 4. Which forms of silence does cancer take in our individual/social bodies? Day 5. How do I/we accompany in times of not knowing? Each day contributes a plethora of images, pieces of text/poetry, movement practices, and discussions about silences and shapes.

At the end of the second week, Mia brought to the laboratory her current artistic practice with gypsum and making molds. As an artist with a disability, she had been recently engaging in a series of works with individuals who lost limb(s) hammering through blocks of gypsum that stay ‘in’ for their missing parts. In the hope that her practice would take some situated form within the group’s process of research-creation, we were excited to move our questions about how do the stigma of cancer shape our bodies into a practice of making breast molds as one more of the practices of the laboratory; the gypsum exercise.

Mia guided the exercise. She introduced the practice by showing an example of her work to the group: a video of a top-naked woman hammering a block of gypsum placed on a table. She then also offered her readings of the meaning of the breast-gypsum mold and the meanings that breaking the gypsum have in relation to cancer. “The mold represents the US health system, patriarchy and capitalism (as a mode of production) and the act of breaking the molds signifies

¹⁸¹ Eva and I named ‘*probetas*’ (test tubes) this daily organizing of the creative process in a conversation about the challenges of the inconsistent and unpredictable attendance.

the tensions between debilitated bodies of people (women) with illness and disability.” Her offering proposed an umbrella narrative of resistance to the objectification and debilitation of bodies through the biomedical machinery, and spoke of collective resistance and united action against a common threat.

While powerful in its articulation of resistance, Mia’s interpretation of the practice before-hand posed a challenge to the collaborative approach to change underlying the oncogrrrls’s practice¹⁸², that is, engaging in an open-research process that enables the exploration of the ‘not-yet-known’ meanings of the practice to inform as much as possible the rehearsal and change of the group. By collaborative modes of production I meant to engage in a process where multiple voices co-exist and co-create. In the process, all the members in the group bring their own experiences, which in the process of making the piece will fuel the emergence of an unpredictable, unscripted piece. Thus, the goal of the oncogrrrls laboratories is to facilitate a process from which a piece will emerge from the imagination and experiences among all of the members of the group. This mode is important not only to enable full ‘ownership’ of the piece by each of the members of the group, but also, to support the emergence of multiple images/meanings/bodies and to promote an intimate mode of working with/across differences. Attending to curiosity, the proliferation of onco-bodies and the possibility of changing, in relation. Discussions in art and politics grapple with differences in autonomy/heteronomy of individuals within between collective and collaborative approaches to art and politics, in relation to where in “the collective, the homogenous, the unified, the similar, conformity and consensus prevails in the name of an agglutinating ideology, whereas in the collaborative there is a kind of coexistence that aims to

¹⁸² While the core of the practice was not fully articulated by then, in retrospect I realize that the use of the word ‘collaborative’ was not of use in our conversations with Mia to describe the exploratory nature of oncogrrrls.

respect individuals (...) it is a paradoxical relationship between co-producers that affect each other' (Biancalana 2018: 11). Or as Lynette Hunter puts it in terms of effecting change/knowledge, 'in short, collaborative work focuses on the not-knowing and collective on fulfilling an aim. Both are important, but have quite distinct political effectiveness' (Hunter 2015).

Lynette Hunter, in *politics of practice* proposes that the rhetorical stances of sociosituated performance engages 'performing and audience participants working with a material on a process in a sociosituated location' - working through the not-known in collaboration, rather than aiming to locate the work in the discursive space of (sociocultural) representation (Hunter 2019). Thinking with Hunter, it seems that collaborative gestures towards unsettling (arousing) what is known and re-engage in making it 'unknown', therefore opening it up to variation, and collective proposes addressing what is known in specific ways. In thinking how to create a space of agency to our polyphonic curiosities in the gypsum exercise, and in finding a way into this more 'collaborative' mode of production, I proposed a 'return to the body' by directing the attention of the group into the somatic experience, engaging with a kind of socio-situated collaboration. As we started the practice, I proposed to remain in silence, while attending to the materiality of the practice, leaning into the sensory events happening. Aiming to keep everyone attuned to their own experiencing of the practice, from time to time I would pose: what are you noticing? which kinds of rhythm, temperature, texture, smells, touch, memories, images .. How are you noticing your body engaging with the mold, the mold with the body?

We rest on the boxes waiting for the gypsum to forge with our breasts. A group coming together to enact cancer relations otherwise. While a story-line of resisting US biomedical imperialism is proposed, we are also engaging with the 'unpredictable ambiguity of haunts the is resonating of

resistance While Mia proposes of different kinds of bodily attention is on the making. While there is a group of and both modes happen in the same practice. In this practice, the principle of ‘starting in the body’ (*Transposition - pick an issue, move it somewhere, notice what emerges*) worked as a mode to re-engage in bodily attending to the materiality of changing as a mode of political engagement. Yet, by attending to different scales of activity happening, two different kind of molds emerge: gypsum-breast molds and breast-gypsum-moldings enacting modes of thinking about performance and change. Let’s call the first one ‘gypsum-breast molds’ – collective, and let’s call the second one ‘gypsum-breast-moldings’—collaborative. I am going to work through this experiment and see what happens.

The gypsum exercise and its makings:

In the making of the gypsum plaster we pour gypsum powder (a hemihydrate variation of calcium sulfate dehydrate – $\text{CaSO}_4 \cdot 2\text{H}_2\text{O}$) into a bucket full of water (H_2O). We have previously-built 20 x 20 wooden boxes into which to pour the re-hydrated gypsum, or gypsum plaster. The plan is to fill them up with the plaster and lay our breasts into the boxes until the plaster forges/sets? around/outside our bodies. The making is frantic, we have little time before the gypsum starts forging/setting, and we have little construction experience, so we measure the quantity of powder that is needed for setting by ‘ear’ – ‘when you see little mountains starting to appear, start stirring it up’, instructs Mia. I see my building comrades working through their buckets, while I sense the thickening of the water in my arms. The deep sound – gluck gluck gluck - of each turn/cycle stirs memories of summer construction work with grandpa: His gentle voice patiently urging me (back?) to stir while he waits with the bathroom tiles in his hand. Caressing smells of grease, sawdust, and gypsum activate my senses and memories of that comforting huge man: ‘Vinga va, chicurrina, remena una mica més ràpid’ (hurry up, stir a bit

faster, kiddo). Once the mortar starts forging/setting we should already be ‘in’ it. There is no time to miss. I lay into the box. Spread across the room, leaning into the boxes, we wait while the plaster dries. Four figures resting on forging/setting gypsum. For thirty minutes, different kind of bodies are in the making.



Figure 22 Still image from Laboratorio de Yeso. Gypsum Lab. Performer: Rox. Video shot by Mafe

A – gypsum-breast molds

The volumes of our bodies entering into the plaster/pool makes a mess. Fluid and semi-fluid plaster overflows from the boxes.

Some of us play with the exceeding plaster on the floor, some others adjust their position, we mostly remain silent, though. Immersed in our own experience.

We lay still, while waiting for the signals that the mold is ready for us to leave the box. – ‘When you feel the warmth, it means it is forging/setting - continues Mia. Then you can, smoothly start to move, exiting the cast’.

One by one we pull away from the box. ‘I think I need some scissors, my armpit hair got trapped in the gypsum’ says Rox.

We all clean ourselves from the rests of gypsum stuck on our skin. Later on, we dismantle the boxes, liberating the gypsum blocks from their ‘shape-giving’ constrain.

B- Breast-gypsum-molding

A cold humidity shrinks my nipple while I see the exceeding material flooding the box.

In a matter of minutes, the corners of the box start pressing too heavy against my weight. Wood sinking into my skin, flesh, and ribs as the gravity force pulls me into the engine, moving memories of mammograms and discomfort. Now, as then, I adjust other parts of my body (arms, legs, feet) to disperse my weight out and away from the painful pressure. I start sinking in, letting my body adjust to the box, becoming softer, finding the pleasure in discomfort.

- treatments were not comfortable either, you know?

An unsustainable human stillness reposes in the speed of the activated gypsum. Calcium sulfate dehydrate mixed with water recrystallizes, reverting to its original rock state. Energy in the form of heat is released while the viscous matter engages in rematerializing. Skin cell receptors sensing the heat on my breast animate memories of radiation

Once the blocks are freed, we sit around the molds and share the experience. Yet again, two kinds of molds emerged:

A – gypsum-breast molds - setting

As a result of the experiment we have produced a kind of mold: a mold that is shaped as a negative of a breast made of gypsum. Negative (human) breast imprints. Each of the molds are different; gypsum-based in-corporations of our particularities.

Copies of the texture and the volume of our breasts in the particular conditions of the exercise (laying over). Each of us recognizes their bodies in the molds. We can trace shape, size, birthmarks, oncological marks (scars and the effects of radiation). These are molds that speak of our bodies, in a Platonic way: the materialization of our absent – once present - soaking breasts in the plaster. In a following exercise, we used the molds as a mode of corporeal mapping, interpreting and sharing our personal stories with and without oncological treatments.

These kind of molds enact traces of our bodies and stories. Performing (bringing into form) the materiality of our bodies despite their absence. In a Butlerian sense, in which a historical norm shapes the materialization of gendered embodiments, these gypsum-breast molds act as a kind of citational memory of our bodies, performing the materialization of our breasts and cancer stories every time we look at them.

This kind of molds perform always already distorted versions of the materiality of our breasts. Shapes and volumes representing repeatedly our absent corporealities. This molds speak of lack; of fixed yet missing breasts, of that which is not there anymore; the missing breast, once present.

B- Breast-gypsum-molding- forging

In the co-composition of ‘human breast’ and ‘gypsum-molding’ an implosion of lively-events making worlds are produced: precipitating, sensing (receiving - activating), remembering, imagining, responding, transforming, molding.

Stillness engages with the speed of events unfolding in the affective differential: Water molecules and calcined sulfate molecules intermingle while precipitating out as solid fibrous crystals, plaster becoming gypsum¹⁸³. Sensory cells in the skin, photoreceptors on the retina, and olfactory receptors activating nervous system and memories.

A co-creation of personal stories emerging from the relationship of gypsum in the making and sensory organs: Roxana’s negotiation with her cold and warm mother, Eva’s reenactment of the slow and fast rhythms in her treatment, Anna’s imagining disease development from pleasure to pain, and my own response to discomfort with the pleasure of becoming softer.

Even larger social narratives are invoked in molding: Eva’s reconstruction by recollection of the exceeding pieces (‘todo lo que me sobra’ [all that exceeds me]) resonates with (health) narratives of personal transformation, Ana’s ruminations with the origins of the disease reflect the multiplicity of ‘cause’ stories surrounding cancer, and my imagining the box attempting to encapsulate the overflowing plaster/matter, resonates with instruments of bodily normalization and ableism aiming to fix fluid, uncontainable bodies.

¹⁸³ From the 100 most important chemical compounds: A Reference Guide. (Pesterfield 2009)

A – gypsum-breast molds - setting

‘The white presence and visible weight of the block dialogues with this seemingly absent breast’ — says Mia, ‘to signify the tensions between the US health system, patriarchy and capitalism and the debilitated bodies of (women) with illness and disability’. Breaking the mold, then, to her, will conjure a sense of agency over our disappearing bodies. As if breaking the mold ‘liberates’ our will from the classifying structures that negates our non-normative existences.

I am starting to feel somehow trapped by the binary logic behind this mode of attention and exhausted by the incommensurable inevitability of a ‘lack’ that impregnates it. This breast-gypsum mold speaks of bodies vs. gypsum, non-human vs. human, present vs. absent, power vs. resistance: binary logics of domination and resistance.

Also, attending to the lack – particularly in breast cancer narratives - we miss the opportunity to attend to the generative. What does materializing our (individual) lacks do for change? How do we move away from narratives of battles, survivorship, and reconstruction that impregnates cancer (and disability) stories?

How do we move away from the inescapable exhaustion of either/or positions yet still accounting for the material ecologies living in the experience of molding?

B- Breast-gypsum-molding- forging

The weight of silence in breast-gypsum-molding can be felt/ as intense as the force of crystallizing stories and intermingling molecules. ‘Una niebla densa que se posa en los cuerpos de las personas y desde allí les saca la lengua’¹⁸⁴ – Gato’s poetic way of describing how cancer molds our bodies resonates in my memory as the silent ‘foggy’ density in the performativity of molding. Breast-gypsum-moldings evoke the co-production of silent (non-spoken) matters, where molecules and stories arouse full of life. ‘More-than-human’ intra-action where molecules, senses, memories, history and stories engage in the performativity of bringing multiple calcium worlds together: Egyptian pyramids, painted cave graves in Pre-historical times, tofu’s production, fires in 1760’s London, the US Gypsum association, US environmental agencies, dried seawater. Molding, crystallizing, also conjures the energy of a metastasic feast. A viscous, formlessness, matter crystallizing in tumoral flesh form. Perhaps of breasts-cells bringing a form of organ speech alive.¹⁸⁵ What tumorous cells speak about I can’t tell, but from a material-ecological-feminist perspective, cancer could be a creative impulse for life in oppressive constraints.¹⁸⁶ A mode of expression, a biologic performative impulse responding to silencing constraints. Perhaps a signal to the world— a call for humans to attend to the variation inherent in the performativity¹⁸⁷ of breast-gypsum-

¹⁸⁴ [a dense fog entering into people’s bodies and from there, it sticks its tongue out]-

¹⁸⁵ From Gut Feminism, she proposes ‘organ speech as a kind of bodily utterance, biological performative - enacting the events it appears only to be symbolizing. (76)

¹⁸⁶ Thanks to Kevin O’Connor, Nicole Peisl and Joe Dumit for helping me think about ‘celebrating cells and cancerous creative impulses’

¹⁸⁷ Shifting, as Karen Barad proposes, from questions of reflection to questions of diffraction in the doing of boundaries happening in the practice (803) (Barad 2003)

How do we enable and account for the agency of the multiple and various matters involved in co-composition?

molding? Hey, humans, pay attention to the more-than-human life!

These two kind of bodies, gypsum-breast mold and breast-gypsum-molding, in a performative both/and way, entangle our initial inquiry about silences and shapes that cancer molds our individual and political bodies into.

A – gypsum-breast molds

The silences in gypsum-breast molds are about representational¹⁸⁸ lack: That which is not there, the trace of the missing breast represented in the mold, and the fear of disappearance. It is also about a silent matter: not speaking about cancer, gypsum without voice, the silencing divide between sentient/non-sentient forms of living.

It is about non-spoken truths. These silences are evocations of non-spoken certainties and emotions: the incommensurability of death, the fear to disappear, incomprehensible causalities. Emotionally charged silences that silence.

Breast-gypsum molds reinforce the duality of matters, in a logic of distinctiveness where the individuality of bodies is defined by their form. Shaping the plaster, fixing a sentient breast into an inert block of gypsum. Our bodies, in this kind of mold are defined by their individual form.

In breast cancer stories, the shape of a missing breast brings the nostalgia of a

B- Breast-gypsum-molding

Silence, in breast-gypsum-molding is about multiple stories presencing. It is a silence letting stories emerge. It is an affectively charged silence, an entanglement of molecules speaking, reproducing, full of live. It is about non-spoken possibilities that multiply; a silence to listen to/for multiple stories.

Within a logics of imbrication¹⁸⁹, breast-gypsum-molding conjures a performativity of becoming-molds. Bodies in the making in the world's ongoing intra-activity¹⁹⁰

In a Spinozian¹⁹¹ way, new bodies emerge in the dynamic and kinetic relations of molding: gypsum accelerating in its forging/setting, human bodies decelerating in waiting. In their differential mode, affecting one another, gypsum and breast collaborate in the making: lying bodies activated in their sensorium, imagination, re-made.

Materializing plaster, taking the presence of the breast as its own, accommodating to it,

¹⁸⁸ As Hunter defines: 'representation' - the use of a medium to re-present an experience in actual life' (2019: 27). In

¹⁸⁹ Echoing Elizabeth Wilson's notion of the minded gut. (Wilson 2015)

¹⁹⁰ Where material-discursive practices mutually articulate matter and meaning (Barad 2007)

¹⁹¹ According to Deleuze (Deleuze 1988)

potential individual lack and the efforts of an ableist system to reconstruct it and bring it back to 'norm.' The collective effort is in reimagining what those breasts looked like to make them anew. Again and again in their imagined bounded individualities.

shrunk nipples become evacuating matter with whom to share space, with whom to co-compose, with whom to become re-made.

The gypsum exercise produced two different kinds of bodies: *gypsum-breast molds* and *breast-gypsum-molding*. Attending to these two kind of bodies, each other materializes a variation in modes of material and affective production. A specific modulation of attention. They speak of scales of engagement with the possible cancer-relations made within performance, or said differently: each mode gives form to/ enacts a different kind of cancer-ecology. These modes also elicit different kinds of affective responses and political imaginations, both possible, with different effects. The exercise follows two modes of attention to the practice, two kind of modes of producing molds. The first describes a mold that is shaped as a negative of a breast made of gypsum; while the second one enacts a combo, an assemblage of worlds that open in the relationality of breast, gypsum, and molding. While the first kind, *gypsum-breast molds*, resonates with notions of absent bodies and calcarium imprints, the second, *breast-gypsum-moldings*, evokes intra-acting matters entangled in the life of the doings of crystalizing, breasting, mothering, receiving oncological treatment, remembering, eating tofu, and building pyramids.

Gypsum-breast molds emerge from a mode of production that departs from an expectation, an already made imagination of what this exercise is about, from a script on how to make molds shaped with our breasts. *Breast-gypsum-molding* emerges from the experiment of doing it, from an attention to the not-yet-known, from aiming to break the script through the wonder of allowing ourselves be activated and made different by the interaction.

In attending differently to these materializations *Gypsum-breast molds* reinforce the duality of matters, the individuality of bodies as defined by their form and their shape, an either/or positionality, and a grid of dualisms: breast/gypsum, nature/culture, sentient/non-sentient, human/non-human, present/absent, lack/reconstruction, oppression/resistance. *Breast-gypsum-molding* works, using Wilson words as, ‘a schema for thinking about the entanglement, rather than distinctiveness’ (Wilson 2015), a co-composition of bodies in movement, an in-between affecting and re-making multiple stories. A dissolution of boundaries through multiplicity¹⁹². A becoming-with in the encounter. In *Gypsum-breast molds*, a sentiment of inescapable lack and nostalgic disappearance brings into form a silence charged with non-spoken certainties about how human breasts should look like. In breast-gypsum molding, curiosity and attention to the silent matters emerging brings us to deep listening, to re-making ourselves, and our stories, aware of the multiple possibilities and the ecological connections of breasts and calcium worlds. And both modes are possible, occurring at the same time and, in many ways, similar: there are breasts, and gypsum, and a performative exercise aiming to raise questions about the silences and forms that breast cancer treatments shape our bodies into. Both modes emerge from the will of doing politics: of doing work together and finding more livable lives for women, queer, and trans individuals affected by cancer. And again, the question is not about which one is true¹⁹³, it is about how do each mode make us feel, and which kind of thoughts do each of them enables us to think.

¹⁹² Echoing coalitional becomings proposed by Jasbir Puar (Puar 2015)

¹⁹³ As Brian Massumi’s reflects on his foreword to Deleuze and Guattari’s *Thousand Plateaus* (Massumi 1987)

Transposing attention. Moving silences into doings, and notice what emerges

Transposing, as a displacement of the attention into the bodily doings of the practice, enabled each participant to engage with the practice on their own terms. What follows is a brief reading of the practice, from the story/testimony of one of the participants in the documentation piece ‘Laboratorio de Yeso’ [Gypsum laboratory] ¹⁹⁴.

Transposing: pick an issue, move it somewhere, notice what emerges

1. “Pick an issue”: Como los silencios del cáncer moldean nuestro cuerpo? [how do cancer silences shape our bodies?].

This question emerged from a long conversation in which a group of 15 individuals, after sharing experiences with cancer and expectations, responded to the question: what would you ask cancer?¹⁹⁵ This question refers to the social stigma of cancer, how cancer is not ‘talked about’ or even mentioned, and how does this ‘silencing’ affect-shape our bodies.

2. “Move it somewhere”: to move them [‘silence’ and ‘shaping’] somewhere else, we decided to do a practice of making breast molds/ shapes, in silence. Moving the questions to the materiality of making molds and the experience of listening and attending to the process carefully. The process of making breast molds entailed preparing the materials to make molds (making the box, preparing the plaster) and lying still with one breast inside the mold.
3. “Notice what emerges” after doing the practice, each of the participants shared our experiences. Ro shared how the experience brought memories of breastfeeding and made her think of the bond with her mother; Ali reflected on her experience of the process in steps:

¹⁹⁴ See the full video here <https://vimeo.com/156509359>

¹⁹⁵ Other questions emerged in that round, such as: Who are your allies? How are your landscapes? How do you affect the social body?

first cold, then discomfort, then pain, and finally, thinking on what is that make us sick; my felt experience of the edges of the box in the body brought memories of the discomfort and pains of ‘dancing with’ clinic machines (cold and pushy mammogram robots, radiotherapy tables and MRI’s) aiming to test/regulate and fix (my) oncobody and brought reflections on the impossibilities to shape everyone on the same mold. The experience allowed Eva another kind of transposition. Her story follows:

Story-: *La prisa y la Pausa [rush and pause]*

Things that I experienced were related to timing: rush and the pause.

The rush of ‘the gypsum is setting’ was very similar to the pre-surgery rush: As soon as the diagnosis appeared it was as if time had speed up in a way . . . mmmh . . .

new. And everything had to be done very fast; veeeeery fast. I had to do everything very fast—I did such an amount of things in a week before getting the surgery! ...

pfffff.

And then, after all that vertiginous rush, I had to suddenly remain very very still.

Because, with the post-surgery, you cannot take a bath, you cannot . . . - you have to remain “there” and that “remaining there” is also an unexpected time.

And what I did in that post-surgery time was to collect everything which- without consciousness was overflowing from me, in my own existence.

And this is what I am doing at present: trying to integrate... my pieces.

And I lived all this. I transited through it again from a new place... so .. Thank You.

This story foregrounds what can transposition do: by engaging in the practice, Eva (as well as all of us in our partiality) revisited her individual experience with cancer from a new place. As she recalls, the (existential) rush and the pause of her cancer story foregrounded through the rush of

making the plaster and the lying still of forging the mold. The practice of making breast molds allowed her to re-life from another perspective her cancer/time relation. A kind of re-enactment that enabled her living the experience from a new place, less painful, and shared with others. Transposing happens in multiple layers: as a practice, moves the initial question of silence and shaping bodies into a molding exercise that generates many particular responses and allows for the existence of multiple curiosities in a shared practice. As an effect, as we see in Eva's testimony, the practice transposes memories of cancer times and silences to molding times and silences, moving Eva's memories of the timing of cancer into a kind of re-enactment through the art practice allowing for the emergence of new cancer-relations.

In transposing the collective resistance story offered by Mia, into the 'felt-sense' of the experience, each of us connected with our own cancer/breast/illness experiences within the support of the practice, and more possibilities were found. The immersion with the material doings of this new practice, with all the differences made by everyone in the group, added layers of complexity to the 'resistance' story, creating an ecology of practicing cancer-relations overflowing any mold.

Interlude iv: In the making and unmaking of molds. oncogrrrls. Mexico 2015

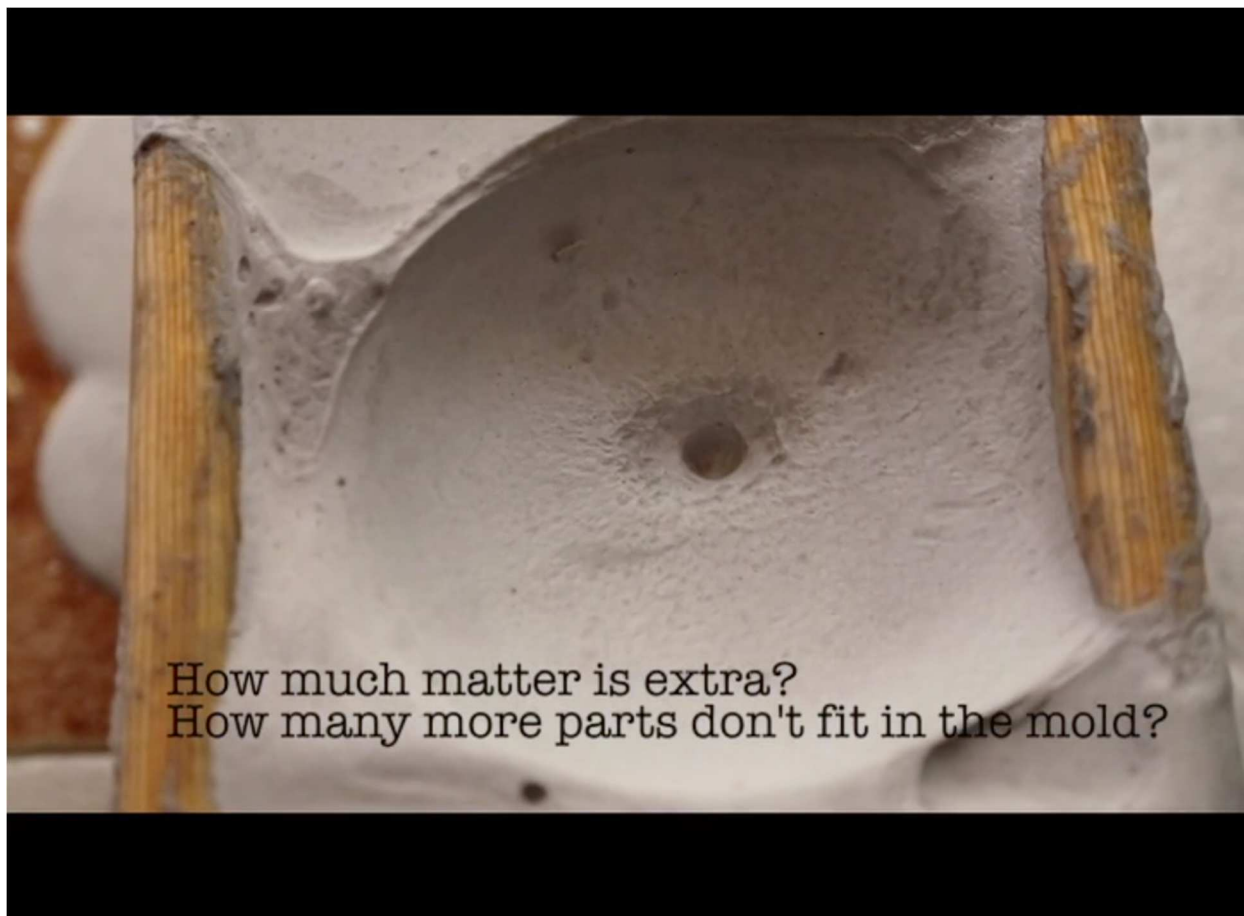


Figure 23 Still image from video documentation. Gypsum Lab. Mexico 2015

<https://vimeo.com/manage/videos/156509359>

Resistencias Sonoras. Sounding Resistances. (Mexico 2015)



Figure 24 Still image from Sounding Resistance. Left to Right: Eva Capece, Mariola. Mexico 2016

<https://vimeo.com/156496178>

CHAPTER 4. - Scoring Inquiry, Unsettling Ignorance. Moving with Racialized Cancer Uncertainties

This chapter has been reviewed and accepted for the forthcoming issue of Performance Research PR 26.3 On (Un)Knowns. The estimate date of publication will be December 2021, although the cover date will remain April/May 2021. (Find the revised article through PR)

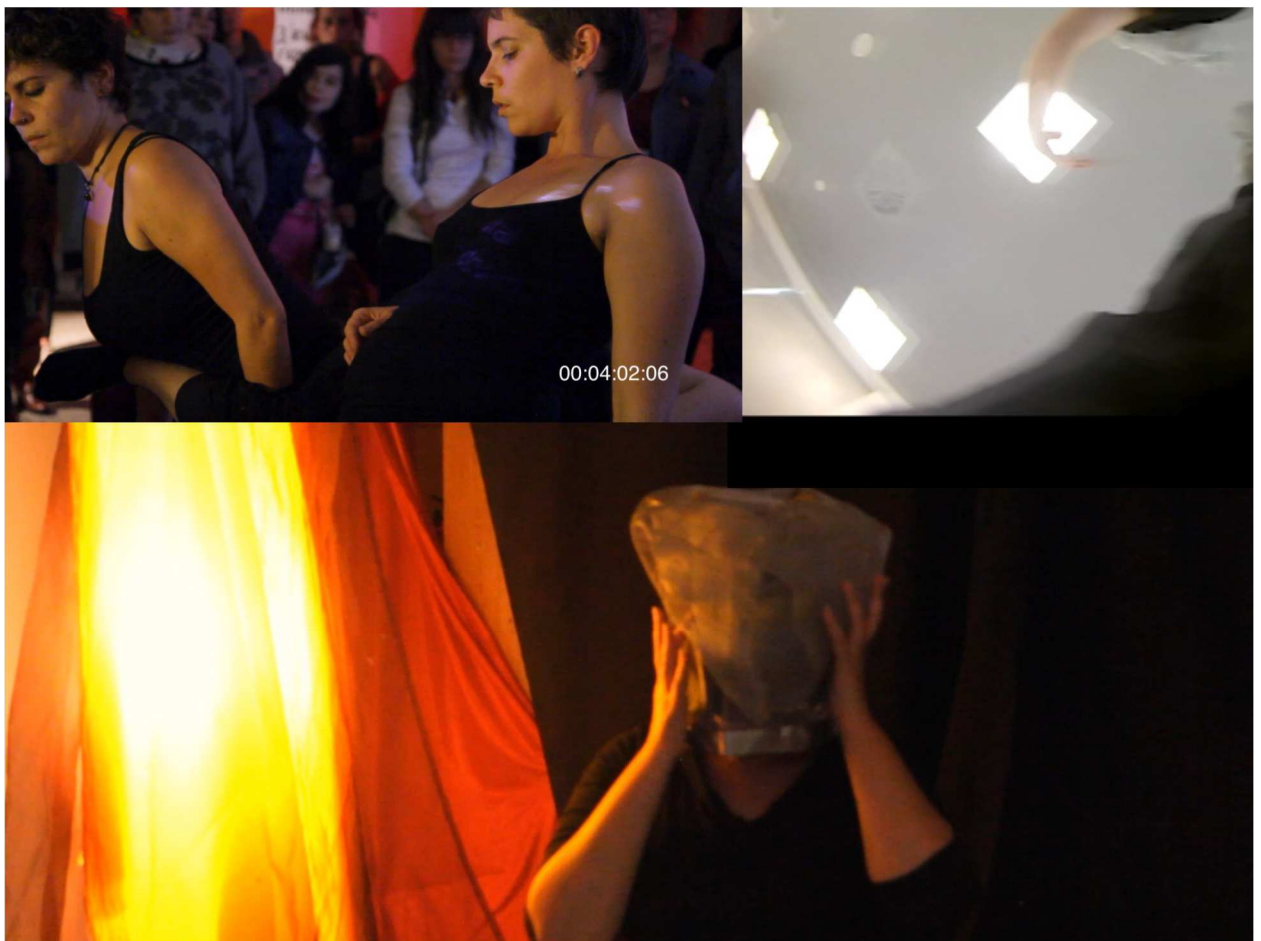


Figure 25 Collage of images from the Performance Cuentos de nos.otras in Espacio Treziclo, Zaragoza 2017

So.. what about race?

Asked Kevin during our lunch break after the morning rehearsal. He continued with his dramaturgical offering: We could bring some graphics with numbers on how cancer affects communities of color disproportionately or even perhaps some visuals about the HeLa Cells¹⁹⁶ into the final performance. “Now? But we already have all the scores for the performance” - I responded. Many questions followed: “And why are we to introduce race and not age?” “or class?” or “transgender sexuality” – everyone suggesting various issues that had not emerged during the creative residency. Witnessing the rupture brought by the suggestion, it became clear that we needed to address the particular absence of race into our performance. In accepting Kevin’s suggestion and the resistance-as-proposal from the group, the question for me, then, became, how?

This snippet emerged in Zaragoza, Spain, 2017; in one of the oncogrrrls creative residencies - a project that I launched in 2011 to make cancer performances with others. I invited my friend and collaborator Kevin, a Canadian choreographer, to co-facilitate the residency with me, and for 10 days, a group of 8 women and queer individuals¹⁹⁷ had been exploring the angsts of uncertainty and cancer chronicity. Kevin and I designed movement scores¹⁹⁸, asking, how else can we ‘know’? Bodily tinkering with new ways to experience knowing and not-knowing

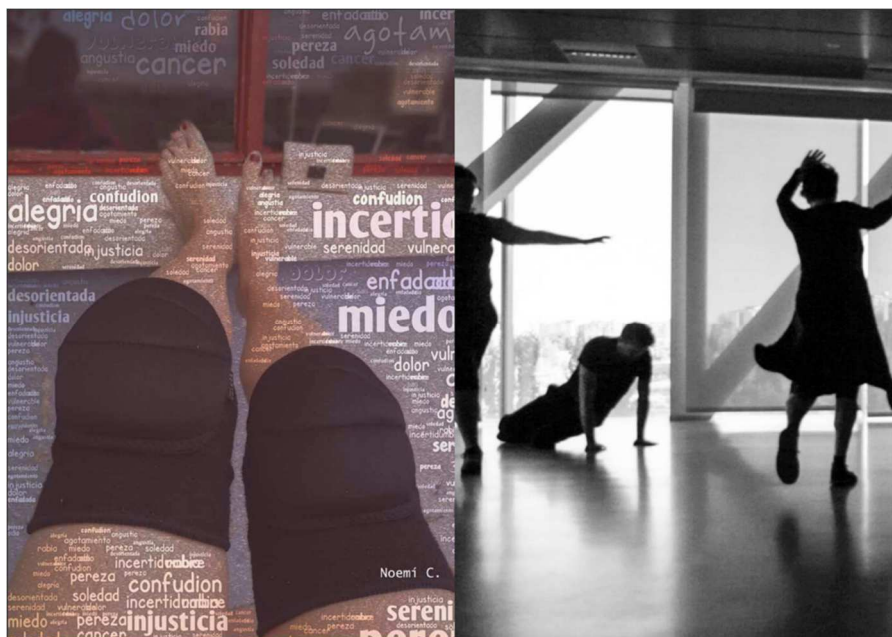
¹⁹⁶ HeLa cells stands for a line of cells that were harvested without information or consent from Henrietta Lacks, an African American woman who died of cervical cancer. The HeLa cells became the first line of human cells able to live outside the body. The HeLa cells have been produced and sold by the trillions and been foundational in bioresearch, while the family never received any support. This is one case of antiblack biomedical ethics/racism. ((Skloot 2010)

¹⁹⁷ Six of us living with different kinds of cancer (breast, colon and knee). Two who lost relatives to cancer.

¹⁹⁸ Scores: light rules, or instructions for guiding movement exploration.

opened-up conversations about whose truths count and which kind of regimes of knowing support which kinds of care practices. We also talked about experiential knowledge, about many ways to poo, about witches and feminist science fiction and about twisted gender expectations. We crafted the live performance *Cuentos de nos.otras [Tales of us.others]* and a fanzine (Lafreisen and oncogrrrls 2017). Also, Kevin's offering to include race in the final performance opened a methodological challenge for me/oncogrrrls: how to address race in a transformative way?

oncogrrrls is a performance activist project that addresses cancer as inquiry with women and queer individuals. Emerging from my own cancer diagnosis in 2011, I have been developing this project as a performative intervention that creates joint interrogations into the structural pains of cancer. From these interrogations, we create performance pieces. oncogrrrls grounds the practice on somatic inquiry and co-creation, or what I call 'rehearsal as method' to uncover structural health injustices.



In this case, the fact that the group does not sense the impact of race in our daily experience is a trait that comes with being ‘unmarked’ by race, and also a methodological challenge for ‘rehearsal as method’. So far, engaging with the unknown in rehearsal has meant, in oncogrrrls, to design scores that would unsettle known (as in experienced) pains and discomforts so more possibilities are enacted, and to center our own aches as signals of larger social structures¹⁹⁹. In this particular situation, rehearsal needs to unsettle another kind of unknown.

To investigate the uncertainties of race/cancer from a place of discomfort became rather complex for the group: as women and queer people living with cancer, we have some experience with unrecognizability and mis-representation, however, we do not have a direct access to the discomforts of racializing structures operating in Spain through our bodies. In this case the challenge was to make the unfelt, somehow, felt. To unsettle the comforts granted by our unmarked positions in the axis of cancer-uncertainty. Or better said, to unsettle the comforting structures that support our ‘ignorance’ about race. How to “score race” as a somatic joint examination in the context of the group? how to somatically (unsettle) a naturalized comfort? How to tackle the structural pains of race and cancer uncertainty within bodies who have a resistance to feeling the pain? How to invite discomfort in tolerable, even joyful- irresistible²⁰⁰, ways? And what all this has to do with ‘unknowns’?

¹⁹⁹ As in the traditions of Women’s Health and Black feminist consciousness raising groups from the 70’s and 80’s in the US.

²⁰⁰ Using Toni Cade Bambara’s words as I hear them through Black feminist lessons by Adriene Maree Brown and Alexis Pauline Gumbs. (Gumbs 2019; brown 2019)

To better understand and situate this challenge, I invite you to follow me for a bit. I will briefly hint into some cancer issues and contextualize oncogrrrls practice and its core principles as an artistic and social/health justice project. This will lay out the methodological challenge. Then, I will trace my own process of operationalizing these principles in the design of a score that centers unknowing as a practice for transformation. Finally, I will follow up the practice - what did happen. to reflect on how these principles for engaging unknowns worked for addressing race and health in a transformative way, and future lessons on how to invite unknowing within health, racial, and social justice art-making efforts.

oncogrrrls as inquiry for cancer justice

I will not get into the detail of the many structural pains of cancer here, many friends have articulated the alienating pains of the emotional and narrative stiffness in cancer (Ehrenreich 2010; L. S. Jain 2007; S. L. Jain 2013; Shildrick 2009; Spannier 2001; Sulik 2012; Martinez-Garcia 2019). At the root of the problem, I believe, are the cancer relations (multiple ways of comprehending and making cancer) that bound the onco-body as individual. And, I am sorry but, there is no more escaping: we are all -already- living with cancer. Taking Michel Murphy's concept, we are already living alterlives²⁰¹ (Murphy 2017). In addition to the increasing numbers of cancer incidence in the world²⁰², cancer has spread into our existences as a

²⁰¹ Particular to this project on knowing, Murphy articulates alterlife as also 'an invitation to consider what infrastructures and concepts have to be dismantled to make room for another way of being and knowing to emerge'. Articulated as such in the Keynote Plenary lecture delivered at the 4S/EASTS meeting, Barcelona, on the theme of 'to what extent is embodied knowledge a form of science and technology by other means?'

²⁰² According to the World Health Organization, cancer was the second leading cause of death in 2018, and the estimated incidence continues to grow, reaching 19 Million people in 2020, and 30 Million in 2040. Data from International Agency for Cancer Research.

material-metaphor for the worst, a kind of somato-relational technique of horror, and as a mode of engaging health, toxicity, economics, research and all kinds of life on Earth, through fixed notions of hope and/or fear.

Performance authors and scholars have proposed making illness/cancer performance as ‘acts of personal-political empowerment’ (O’Brien and Bouchard 2014), and as a tool to create counternarratives to resist the ‘cancer standard story’ (Nielsen 2014, 105), and a creative space for shared vulnerability with the audience (Lobel 2019). oncogrrrls integrates co-creation and somatic inquiry at its core as a fierce collective response to the individualizing forces that root medical and cultural practices in unjust cancer worlds. The practice in oncogrrrls is shaped by three main guiding principles: on.co-creation, scoring inquiry, and somatic tinkering. These principles orient the practice to engage knowing and unknowing in specific ways.

on.co-creation. In responding to individualizing forces in health, oncogrrrls centers joint production and co-creation. Friends and artists working with different media have joined oncogrrrls’ laboratories to co-facilitate and co-design exploratory practices to interrogate cancer with. Co-facilitation helps in distributing the process and invite practices of shared responsibilities among everyone. Most importantly, co-creation distributes agency (and change) among all the members of the group (independently of which practice they are contributing to the creative process). Matarasso, in writing about participatory art and co-creation, says: ‘art creates change, but it should be in the hands of the person who experiences it, not at the command of another, whether artist or funder’ (Matarasso 2019, 105). The principle also summons collective agency in response to paternalistic and/or non-existing structures of health/care. An echo to the disability self-determination activist cry of ‘Nothing about us without

us²⁰³, or the motto of the women's health movement (Morgen 2002; Nelson 2015). Co-creation in oncogrrrls aims to center the joint creation of new oncological worlds.

Scoring Inquiry. In responding to monolithic cancer narratives, oncogrrrls engages exploratory processes for together knowing/making the world that produce open-ended possibilities. We foreground questions that matter to the group, design “scores” as guides for exploring these issues, and engage in rehearsal as investigations of the unknown and the possible within these questions. We compose the final performances by placing the scores in relation to the space, the audience, and each other, with the intention to propose performance pieces as ongoing inquiry. Scores are, in oncogrrrls, sets of instructions to transpose an issue, moving a specific set of cancer relations somewhere else, to see what happens.

Somatic tinkering .To uplift our creative bodies, oncogrrrls centers somatic and movement improvisation to tinker with the discomforts and questions proposed by the group. We physicalize the exploration. In so doing, we reengage with our bodily tissues and sensory abilities (after alienating processes of medicalization). Central for this article, bodily practices offer sensuous paths for unknowing, opening embodied metaphors²⁰⁴. In the emerging field of somatic activism is particularly interesting the work of Resmaa Menakem, who proposes body practices- or somatic scores- for tending to bodily sensations as cues of social and historical race-based trauma (Menakem 2017).

²⁰³ James I. Charlton locates this disability activism slogan to South African activists, 1993. (Charlton 2000)

²⁰⁴ On embodied metaphors

In oncogrrrls, the practice of making scores has grappled with *felt pains as sites of inquiry and transformation* (Novella and Paituvi 2016; Novella 2017a). For instance, in this residency, we had been exploring aches of uncertainty and exhaustion (such as the rage of having others decide on and excise us from our desires and the shame and guilt that solidifies through new-age tales of self-redemption saturating the field). In proposing experiments for new ways of knowing and perceiving we engage in the excitement and pleasures of discovering, therefore displacing the discomforts of uncertainty with the excitement of ‘unknowing’. Feminist technoscience scholar Michelle Murphy, in revisiting the politics of care within feminist engagement with the pap smear and cervical cancer at the end of the 20th century, calls attention to a tendency within feminist technoscience to center gender and sexuality and set aside the interlocking of racism, capitalism and nationalism in health care structures (Murphy 2015). In hearing Murphy’s request to ‘unsettle practices of care’ and following oncogrrrls’ principles for addressing health justice, Kevin’s question offered an opportunity to design a somatic joint inquiry unsettling the comfort of ignoring race.

scoring race

The question “So, what about race?” posed a methodological challenge to me/oncogrrrls and the group. oncogrrrls was organized around working out of and through felt experience and pain. Interrogating ‘race’ created the challenge of having to make the ‘unfelt’ sense²⁰⁵ felt. We needed a score that would engage this question while resonate with the lived experience of the group, that invited a shared inquiry into its unknown, and that started with the body and somatic

²⁰⁵ I wonder, how would this notion of ‘unfelt sense’ expand conversations and practices within somatic antiracism?

tinkering. Also, the performance was the following day. In what follows, I trace the steps I took (underlined text) in order to craft a score that could meet these multiple demands. By demonstrating the mechanics of my process, I invite you to access my/oncogrrrls' way of navigating (un)knowns as spaces for transformation.

First, I searched for what was already present within the group. I mentally reviewed conversations and briefly looked at the notes in my journal for hints of contextually sound entry points to race and cancer uncertainty; I remembered our pajama conversations with Patricia. During the week of the rehearsal, while we were exploring new ways to change our relationship to cancer's uncertainty, Patricia had received four email requests from Latin American women living in Spain: their migratory paperwork status was preventing them from receiving oncological treatment or hospice care in Spain. Our conversation had brought into existence, if not race, enmeshments of health, economics, practices of care, and xenophobic nationalism, back at the center of our investigation on uncertainty. She had joined the residency for the first six days and had left this morning to take a rest from the accumulated exhaustion of palliative living and performance making. Patricia was acting as a point person for "Yo Si, Sanidad Universal, a collective working to restore universal health access in Spain and trying to ensure that everyone receives medical attention. In 2014, the governing party in Spain²⁰⁶ passed the Decree-Law of 2012 (RDL 16/2012) leading to the privatization and limitation of the preexisting universal Public health care system. However, in displacing the Spanish health system from logics of universal health to logics of scarcity and selection, this structure of support is currently crumbling, and communities of migrants and undocumented people living in Spain, as well as

²⁰⁶ Partido Popular

long term unemployed individuals are the most impacted. Despite this policy was officially revoked in 2016 by the new government, many people are still denied access.

Once I found this contextually relevant entry point, -an interrogation into unequally distributed structures of medical care and support-, the next step was to transpose it into a kinetic- somatic exercise. Hoping to make the issue be felt in our bodies, and moved somewhere else, I decided to create a movement exploration and put it alongside with Patricia and her experiences. I then broke down the issue into smaller elements that could be transformed into movement vocabulary and explored through kinetic inquiry. In doing so, “structural support, access, precariousness and equilibrium” became the main conceptual and movement clues to tinker with. Next, searching in my bag of tools, I turned a “space warm-up” from the performance collective Pocha Nostra into an open-ended practice exploring ‘structures of support’. ‘The walk in the darkness’, a ‘trademark Pocha exercise’ (45) as described by Guillermo Gomez-Peña and Roberto Sifuentes in their book Exercises for Rebel Artists, aims to “‘conquer” a new space by making it totally familiar through multi-sensorial and corporeal exploration’ (Peña and Sifuentes 2013, 45). In engaging with notions of familiarity, and knowing and unknowing a space, this practice offered a great ground to somatically explore structures of support. Adapting the practice to our particular context, I oriented the facilitation with notions of ‘support/equilibrium’, and I also invited Patricia to call us, live, during the somatic exploration. Finally, I prepared the materials for the practice: I connected my phone to a speaker and assembled a long piece of butcher brown paper and color markers of all kinds and set them aside. In the next section I describe (in cursive) and explain (in regular letter) what happened.

Rehearsal practice: Unknowing from the unfelt sense.

The group is dispersed into the space. Kevin stands along the wall, so does Maria a bit further down the room. Bea sits by a column, Julia is underneath the wooden stage, Marta lies upside down on the floor, and Noemi crouches in a corner between a column and a foam panel; Patricia is back in Madrid, yet present with us, through the phone. I guide the practice and ask everyone to close their eyes and keep them closed throughout the exploration. As an entry, I propose to spend some time physically noticing the shape and contours of the place they are in : ‘Attend to the textures around you’ and ‘explore the space with your layers of bodily tissues: skin, muscles, memories, flesh, bones,...’ Everyone engages in their solo explorations. Slowly summoning structural notions, I call: ‘notice in which ways the soft and hard structures of your body interact with the architecture of the space you are in’. After a while, I keep prompting: ‘how is the architecture of this place supporting your bodily structure’, ‘how can the physical structure of the place support you in being in and out of balance?’ The movers change their positions and orientations, engaging in a more dynamic contact-exploration. I keep inciting the dance-research: ‘Which other kinds of equilibrium and support can you try? Which are your shared points of support? how else can you lean into the structure? How else can you be held by the space?’ Engaged in a feedback loop aroused by the practice, I continue offering cues to move in and out of balance with the space, and keep the exploration alive.

With closed eyes, the movers attune their haptic sensing with the space while engage on an active discovery of modes of being supported by the architectural structures. This initial part of the practice generates a physical core of reference for the movers, a heightened physical awareness of their balance and reliance on larger structures, for stability. Through the physical exploration, the movers get grounded in their bodies; Their attention turns inward, letting their minds sink into their bodies. Furthermore, in the bodily tinkering with the notion of support and

equilibrium, in the trying out of different ways of comprehending the task, individuals can access notions of ‘stability/support’ in many ways.

Well into the practice, Patricia starts talking. through the live phone call. I prompt the movers to continue their physical explorations and invite her voice to move with them. She talks about her cancer story, about how she came to join the oncogrrrls laboratories: ‘this performance thing is an unknow territory, I am overwhelmed by shyness, but I feel cared for and enjoy the contact’ --and about the work that she has been doing as a point person for Yo si, Sanidad Universal: ‘these days I am tending the email of this platform to which I belong out of necessity, I can’t start to imagine the horror of going through cancer while struggling with a system that is closing doors for reasons that have nothing to do with health, such as being a foreigner’. – Patricia twirls us in her rhythmic storytelling. Between pauses, I squeeze: Which other kinds of equilibrium and support are available? She recounts the stories of Maria, Vanesa’s mother, Estela’s mother and Cristina, all of them living with different stages of cancer: ‘they won’t give her chemo because she does not have her medical card’, and ‘she is afraid to ask for the medical card in case immigration deports her’. At the end of the story, Patricia hangs up and the dancers continue their explorations a bit longer before we move into the next part of the practice.

When Patricia calls, the practice asks that the movers continue their physical exploration on structures, while juxtaposed to Patricia’s many stories of exhaustion and painful medical exclusion. With this new element, the practice saturates the experience with literal and metaphorical associations of structural support/ individual stability and creates a field where difficult socio-cultural significances interplay with the somatic exploration. The practice brought skin and viscera felt spatial relations to coexist with stories of medical exclusion, and fear of

deportation. In holding both at the same time, the practice creates an (un)known field of differentiation felt in the body, where the somatic /material knowing of the space, makes the unfelt socio-cultural lack of support palpable.

The multiple ripples of the exploration gradually fade out. The movers find their ways back into the group when I set up the large piece of butcher paper in the middle of the space. In silence, I open the box of colors and invite the movers to return their felt-sensed notions of equilibrium and support through the experiment into the roll of brown paper. We have done this before, so we share a tacit knowledge about how to approach the invitation and the ground rules for devolutions²⁰⁷. After a few minutes of silent drawing, doodling and sketching, I invite an oral sharing by pointing at the reflections in the paper. We readjust our places in the circle and start to share our experiences, orally.

We talk about rolling and scratching and about leaning into stony edges. We also talked about sharing points of equilibrium with the space, and about finding ways to be “off” center in relation to the architecture. Gradually, the conversation leads to sharing different cancer (and not only cancer) stories. Some talk about the kind of structures that they can lean on during treatment. Some share how certain they were on their first visit to the doctor. None of us have experienced the pain of not knowing whether we will be or not treated because of migratory status. Some reflect on taking for granted these structures. Some talk about being moved by the stories shared by Patricia, about exhaustion, and endurance. About structures that do not support everyone. Some of us share our experiences in the US health system, and how, to date, we both have been able to return to our ‘home countries’ (Spain and Canada) when in need of

²⁰⁷ Some of these ground rules are: refer back to the experience, talk from your own viewpoint, avoiding the generalizing formula ‘one does’, avoid headiness or cognitive engagements aiming for an either/or response, keep contributions in a ‘pop-up’ style.

serious treatment. We talk about systems of support, about caring practices and resources; about different kind of 'families'; and about how we cross borders. We talk about uneven distributions of health care access in Spain, Canada, and the US. Some ask questions about the 2012 and 2018 medical exclusion law and its current state of affairs. Someone brings our attention toward the fact that the majority of under waged and unprotected care givers in Spain come from Latin America. We talk about the political economies behind this decree-law, the privatization of the health system, about migration, and about the gaps and absences we felt in the exercise. We talk about the group as a structure of support amidst uncertainty, and wonder about those who are not among us.

After half an hour, the sharing slowed down. We also had to finish the tech rehearsal for the upcoming performance, and decided to stop the practice. We decided to include the score in the final performance. We called it protocol metastasis.

This second part of the practice is a devolution of what has happened in the previous exercise. This practice holds the process of noticing and articulating, in relation, and facilitates a non-prescriptive conversation. First, in moving the somatic experiment somewhere else (the paper), the practice offers time and space for individuals and the group to stay a bit longer with the somatic traces of what has happened before aiming to verbally articulate. The group notices the effects of the experiment in their bodyminds²⁰⁸, and engage in a drawing/sharing from the felt sense of the experience, moving their bodily abstractions into imagery and letting articulation come out of that²⁰⁹. The conversation that follows is an open-ended and non-argumentative

²⁰⁸ Bodyminds, as developed by Margaret Price, is a concept pointing to the entanglements of mind and body, from a materialist feminist disability studies perspective (Price, 2015)

²⁰⁹ I learnt from Daria Halprin's work the technique to move from dance to visualization in one of her Tamalpa trainings in 2010. She describes the practice in her book *Returning to health* (Halprin 2002)

devolution. It enables the emergence of many threads, where individuals can share with the group their experience of sensing and making sense of notions of support and instability, articulating the meanings of their explorations and their responses to Patricia's stories. The additive formula fuels imagination, and a generative non-linear space holding individual experiences and systemic issues simultaneously.

A situated unknowing for health justice

In aiming to address the question, so.. what about race? we turn into the potentiality of working from the group experiences and engage with what is that we need to (un)know to address race and uncertainty in cancer. Framing the rehearsal practice through Patricia's experience, the group identifies with the exploration as emerging from the process and appropriate for our context. In so doing, the rehearsal practice adds a layer to the ongoing investigation, deepening our ownership and connection with the emerging relations.

The practice makes the unfelt, felt. While not addressing race directly, the investigation provides a bodily entwining into the problem of structural inequality. Opening ways to making structural precarity palpable and making a different kind of sense of it. The practice offers us the opportunity to touch into other things that are difficult to recognize or say out-loud, and creates the conditions through which new conversations are possible. Furthermore, the group trains to stay longer with the discomfort of noticing and articulating the uneven distribution of access to medical care.

The practice invites an open examination of cancer relations and uncertainties many of us lacked familiarity with: the ongoing medical structural exclusion and the unevenly distributed access to health, and the work of the platform 'yo si, Sanidad Universal'. Revealing the 'veiled'

operations of colonial and racial capitalism in the health system in Spain and the work of local health activists.

Scoring inquiry, not resolution, the practice invites an exploration and creates a rehearsal that does not aim to find one already-made explanation about race and health-, but holds the space of potentiality and curiosity in the ‘un’ known. Staying in the un-known (as in exploring) instead of aiming to find a way to represent the problem, allows the group to engage with the difficult question from a generative position, smoothening resistances, cancellations and hierarchies of experience. The additive formula of the exploration, insisting in ‘how else’, encourages multiple possibilities and prevents reductionist representation. Also, the attention to articulating the experience from the lived experience, prevents generalizations, or ‘views from above’ (D. Haraway 1988) that disengage us from the process of situated group value/knowledge-creation, and the making of new cancer worlds.

By opening up this non-resolutive inquiry, the group could engage the mis-alignments and uneasiness of revealing the differentials which we participate in and could not live without²¹⁰. This practice enabled us to emotionally re-invest in the structural erasures and absences, tackling not only experiences of uncertainty coming from our positions of pain, but sensing the precarity already present in the structures that comfort us. The practice is not about feeling for the other, but about noticing the shared character of the structure, and its unequal distribution. In stirring up our positions of access and support, we widen the scale of our perceived relations and responsibilities, situating ourselves within non-innocent health care economies interlocked with histories of colonialism, nationalism and racial capitalism.

²¹⁰ the point is not that we cannot live without the differentials, but that access to health system is vital for people living with cancer. And, we are also participating within a structure that creates fictions of scarcity and difference that limits access to treatments to some and not others.

Finally, we also got familiar with the space and decided to include a version of the score in the upcoming final live performance. Instead of addressing the topic on a merely representational level, the score centers the group and the audience's effort in aiming to comprehend. In the moving and spreading amidst the space the score summoned the shared, yet unequally impacting, trait of racist structures. And gesturing towards the non-selectivity of cancer cells going awry within individuals as whole organisms, we named the score 'metastasis'.

In the performance, the audience could witness a version of the score in which dancers alternated between exploring the architecture and drawing into a piece of paper in the wall while Patricia's voice recounted her story. The score engaged the audience in sensing the movements of the performers distributed throughout the space and amidst the audience. An uncertain and disorienting structure of bodies moving and falling, and voices and stories of medical exclusion and cancer. The performance did not aim to speak for the absent(ed) women, or to tell one global science story about race. In re-enacting the score emerging from our rehearsal, we invited their stories as unsettling cues, making palpable the dis-jointness of a space wherefrom some-bodies (the ones present in the room) explore spatial support structures with their physicality, while others (the ones invited by Patricia's phone call) are falling through the cracks of the exclusionary health system. Enacting a bodily joint inquiry the performance summoned a felt environment where the absent(ed) voices posed uncomfortable questions, in relation to cancer, healthcare systems and colonial and racial capitalism- ripples of Kevin's initial question: So, what about race?

Further conversations on emergent/coalitional possibilities on unfelt sensing and co-creation

I wonder, how would this emerging notion of ‘unfelt sense’ engage in conversations and practices within current somatic antiracist practices? Which opportunities are brought, through situated practices of coalitional emergence within health/care settings to unsettle ignorance of somatically unfelt structures? while these questions might appear to pose Black, Indigenous and other racial categories as receivers only of ‘oppressive’ effects of structural inequalities, these questions attempt to open up the potential for interrogating entanglements of health/healing and felt/unfelt discomforts through somatic practices, and engage in conversations with authors and groups working at the edge of cultural somatics in the US? (Menakem 2017; Hemphill n.d.)

The principles and practices building on co-creation align with authors doing work on science/health justice from a decolonial and antiracist perspective, who are also engaging beyond discursive/prevaling knowledge systems.

This work will benefit from future engaging with the work of Maria Lugones and notions of play and decolonial love. I will also engage with Katherine McKittrick’s recent *Dear Science and Other Stories*, which challenges feminist science studies to expand how Blackness is considered through the concept of “livingness” instead of simply as oppression. In recent months I have also come into contact with the work of Bayo Akomolafe, Nigerian scholar in dialogue with Hortense Spillers, Sylvia Wynter and Franz Fanon questioning freedom, health justice toward shapeshifting, animist, cartographical sci-fi and notions of post-activism and *blackness* as space of emergence. (Akomolafe 2021) Future research will also engage in conversations with his work.

Interlude v: in the making of *Cuentos de nos.otras*. Zaragoza 2017

This oncoGrrrrls laboratory crystallized in many performative offerings: a live/performance, a fanzine, and 2 video-art documentations of process.



Figure 26 fifteen fanzines laying on the floor. Picture by Melanie Larsen

Fanzine *Cuentos de nos.otras* (*Tales of us.others*). Edited by the transfeminist fanzine-collective Amor de Primas. Access to online platform:

https://issuu.com/melaniea.lafreisen/docs/oncogrrrls_zine

Witches Lab (oncogrrrls, Zaragoza 2017)



Figure 27 Still image from a video documenting a rehearsal at Etopía, Centro de Arte y tecnología. By video-artist Keka, collaborating as oncogrrrls

<https://vimeo.com/401930668>

Toxic Land (oncogrrrls, Zaragoza 2017)



Figure 28 Still image from a video documenting a rehearsal at Etopia, Centro de Arte y tecnología. Left To Right: Caro Novella, Bea Gimeno, Marta Maella, Noemi Ciruelos, Patricia Gancedo, Keving O'connor. Video by Keka

<https://vimeo.com/523632734>

Cuentos de nos.otras (Tales of us.others)

(live performance at Espacio Treziclo, Zaragoza, 2017)



Figure 29 Still image from video shot at Live Performance Cuentos de nos.Otras. Espacio Treziclo, Zaragoza, 2017. Performers from left to right: Julia Uviña, Bea Gimeno, María Zapata, Marta Maella. Video by Keka

<https://vimeo.com/manage/videos/542009823>

CHAPTER 5. Assessing Change as an Arousal State. What can a model do?

This chapter emerges from an invitation from the ASTR (American Society for Theatre Research) working group on “Change as an arousal state”. The coordinators of this group, Stephani Etheridge Woodson and Tamara Underiner, invited us to continue the conversation ignited in their co-edited publication *Theatre, Performance and Change* (Etheridge Woodson and Underiner 2018) and examine how performance work arouse as to action. I took the invitation to attend to the mechanisms of *arousal* that lead to change, particularly, within the *oncogrrrls* project. As a (dissertation) reading orientation: I have mostly left the chapter as I prepared it for the working group in 2018, which means that some elements might feel ‘outdated’ or ‘off’ in relation to the current actualization of this research. I decided to include it as one more layer, contributing to this process/study of rehearsal as method for on.co-creation.

Stephani and Tamara framed the invitation by asking our contributions to build from the conclusion and a few articles from their co-edited volume, and then recent report published by the Center for Artistic Activism on Assessing the Impact of Artistic Activism (Duncombe 2018). In thinking with this frame and their proposals, this chapter is an exercise to 1. Explore the questions posed about what methods, models and materials are best suited to theorizing change within performance studies, and to what extent can we draw on existing theories of change in other fields to animate approaches to change within performance art and activism. 2. Assess more carefully what has worked and what has not in *oncogrrrls* 3. Reflect on my own practice/theory of change 4. Craft a relational mapping of this practice within change making practices and fields so I can engage with others in conversations and imaginings of larger social change.

Approaching the questions and concerns posed in both, your edited collection and the article by Animating Democracy, I engaged in a series of modeling exercises drawing from different methods and fields for imagining change, each of which has given me information about what oncogrrrls does to *work*. This essay traces my engagements and disengagements with the different modeling efforts to open up a conversations on the issues aroused in the gaps within each exploration. I have organized the exercise in three kinds of modelings: modeling practices, modeling participants perspectives of change and modeling within fields. In modeling practices I mostly attend to how ‘arousing’ takes place in the workings of the project. In modeling participants perspectives I attend to how ‘arousal’ takes place within what the participants recognize as effects within them. In modeling within fields I aim to find ‘arousal’ in the fitting of oncogrrrls within existing theories of change.

MODELING PRACTICES.

Model #1.1. Definitions. oncogrrrls (2011- 2018)

oncogrrrls is a collaborative performance making project that I created in 2011 as a mode of doing cancer relations with other women and queer individuals. When asked the question *what is oncogrrrls*, I sense my refusal to land a *certain* definition because in every instantiation it does different things. I also deflect the question until I understand who my audience is, so I can offer a productive response for our conversation(s). By this I mean that definitions of oncogrrrls follow my intentions to engage. It follows an example of a recent answer that I offered to a graduate student in communication, art and feminism doing her final master project research about oncogrrrls (Asparó Pedragós 2018)

oncogrrrls is...	oncogrrrls is not...
Research-creation	A stable group
A rehearsal space	Fixed in time
Method	State recognized
Collaborative dramaturgy	A collective with a certain message
Oncologic activism, affective activation	A research for coherence
Artistic creation and health micro-politics.	An individual healing process
Transfeminist self-experimentation.	Psico magic or dance therapy
Somatic and movement research	Neither theatre nor representation
Ambivalence and plurality	one only storyline
Network building.	Consent

This exercise on ‘is/is not’ brings the many tensions coexisting in the naming and the edges of the project, in relation to its intentions. For instance, the name ‘oncogrrrls’ emerges from a call to resist biomedical and corporate-‘pink’ cooptation of individual experiences by engaging in joint action, yet oncogrrrls is an art/research (individual) project, not a collective. Meaning, through the artistic residencies, a network of people have been part of oncogrrrls, and there is a kind of oncogrrrls ecology, yet, in terms I am the one (only) person keeping the project, as an investigation on arts and politics going. This has led to much confusion about ‘who/what is (in) oncogrrrls. I also resist definitions that call for individual approaches to healing/recovery, particularly in cancer making practices²¹¹. These series of tensions aim to situate oncogrrrls as a kind of performance-making project and not others: collaborative not collective; a rehearsal

²¹¹ This resistance comes from my intent to deindividualize processes of medicalization through the project. Also, oncogrrrls is born as a result of a problematic mainstream approach to cancer relations that operates simplifying and reducing cancer stories to stories of battles, pink fighters, and feminized survivors - particularly in breast cancer. Thus, definitions need to be aligned with the goals of de.individualizing and multiplying cancer-making practices.

space not representation; health micro politics and trans feminist experimentation, not individual healing; research creation not search for coherence ; collaborative dramaturgy not representation.

Despite this is a useful exercise to do to situate the project and its limits, I wonder, how does this help me/us think with theorizing change? Are definitions arousing or foreclosing the kind of theories of change and models of assessment that would best suit this project? How do definitions (arouse?) open-up or foreclose the kinds of change possible?

Model #1.2. oncogrrrls doings.

This modeling aims at an approximation to oncogrrrls through a compilation of achievements, a kind of resume that contains quantitative and qualitative data. (See Annex # 1. oncogrrrls resume). In the listing of oncogrrrls' doings as a resume, I find myself wanting to count people participating, institutions involved, awards and recognitions, publications by oncogrrrls, reviews and media and online presence and engagement, yet, as the authors from assessing impact for Artistic Activism assert, there is a kind of information that matters to this particular project that the resume does not include. Information such as the kind of participants that have engaged over time in the project; the effort - time and energy- necessary to engage participants; the cohering of the project as a reference in some fields, the rippling effect that the project might have had in the lives of the participants, or other qualitative indicators needs another kind of assessment.

This exercise brings me back to the questions of which forms are best suited to make the impact of our work (change) visible? And also back to the question of what does *work* mean in oncogrrrls?

Modeling #1.3. what *works*?

Inspired by the resume exercise, I start brainstorming the parameters and principles for a rehearsal to *work* in oncogrrrls:

1. A group engages and continues engaged with a creative process until the expected end.
2. In the group there is a majority of individuals who have a close²¹² relationship with cancer.
3. The process is generative and a performance piece is created.
4. The process engages in practices for holding, arousing and posing.
 1. In holding, a 'time/space' is crafted that feels safe and is porous and flexible enough to allow individuals to participate as needed and manage their live schedules fit within the process.
 2. In aiming to arouse, the participating artists find arousing scores. The scores proposed generate material from the participants experiences and arouse difference in the form of affective responses, habits, imaginations.
 3. In posing, the editing process select materials that participants make sense of and audiences find enticing and potentially arousing of new cancer-relations.
5. Increased participation and increased participation of people who live with diagnosis.
6. The works of art and the rehearsal processes are supported and given recognition in the artistic/activist field where they engage
7. The piece(s) are presented in intimate circles and the closer local community to spark dialogue and conversations about cancer relations.
8. The piece(s) are available online.

²¹² A close relationship does not necessarily mean to have been diagnosed, but to have a personal investment in cancer-relations (either by being part of the support net of someone living/dying with cancer, or by being a health professional.

9. People living with cancer find the project online
10. The project provides a positive frame of reference for some people living with cancer.
 - That cancer-relations are ‘transposed/moved’
 - The practice leads to transformations for the individuals members of the group.
 - The resonances of our rehearsal processes, affect the community and larger society.

(. . .)

I get exhausted and run out of time for this modeling. I notice:

1. That I need more time and effort to design an assessment model that works for oncogrrrls.
2. This model would probably only work for what oncogrrrls is trying to do and would rarely fit any other project.
3. This model only collects my own perspectives on what does ‘working’ mean. What if different things work for different people? What if the ‘work’ is noticeable over time?

MODEL #1.4 synthesizing from practice. on.co-creating

Holding ———Arousing —————Posing

Artistic cancer-making practices have taught me that rehearsing as method for artistic and activist production as co-creation requires attending to mechanisms for holding difference, arousing multiplicities and (trans*)posing- or posing in between.

Step one: holding difference.

Setting up the conditions that will hold different life/art making practices with which a group will make a performance piece together.

Step two: arousing multiplicities.

Crafting mechanisms that unsettle, animate, un.individualize, disorient, perhaps even, turn on, cancer-relations, while generating materials for your performance piece.

Step Three: trans*posing, or posing in between

Edit your final piece by attending to the bodies mattering in between.

(. . .)

In designing this ‘model’ of the process as a model for joint action, I realize that it might be helpful to classify the kind of effects and perhaps to guide and situate the process of co-creation, however, it does not delve into how the practices and mechanisms hold, arouse or pose, neither really assesses the impact or change.

MODEL # 1.5 ‘how’ arousing works in oncogrrrls

First, I list all the scores and exercises that, throughout the life-span of oncogrrrls have

‘aroused’-generated materials. (See attached document). In centering in practices of arousing, I notice that *Arousing mechanisms are different kinds of practices that create a differential.*

By reviewing all these practices, I notice some principles on which I keep insisting for arousing within the practice:

- * Insist on the body; always return to felt-sense and kinesthetic processing.
- * Insist on the question/issue that bothers
- * Insist on *not. knowing.* (Craft mechanisms to disorient/diffract/ dis-member/ stir/unsettle/dehabituate/uncohere)

(. . .)

I notice:

1. many techniques that have created differentials.

2. that differentials can be created in multiple areas of the experience (embodied memories or attention patterns or meanings and gestures, etc.).
3. that by attuning to the gap and attending to what is happening in the moment of the differential, arousing mechanism might have different effects (it might made visible the invisible, the absent, the naturalized, the forgotten, the unspeakable, it might disorient habits of attention, of imagination, de-center).
4. In this arousing is that possibilities for change emerge.
5. The arousing seems unpredictable.
6. Arousing does not talk about the *posing* of these aroused materials.
7. This exploration does not assess the impact or the kind of change that happen for participants or audiences.

MODEL # 1.6. painting

I engage in modeling rehearsal from another textuality: in trying to articulate the process of research creation in oncogrrrls, I come up with the drawings below as holding-arousing-posing.



Figure 30 A visual articulation of creative-process. Rehearsal as method for holding, arousing, and posing.

2. MODELING PARTICIPANTS VIEWS

‘what has your participation in oncogrrrls has done with/at/for your relationship with cancer?’

I decided to incorporate into this exercise the participants’ views, and aimed to model²¹³ some social sciences evaluation protocols I had encountered mostly in the field of communication for social change. For the first time since the creation of the project, I sent an email to all the individuals who had participated in the residencies in Spain and Mexico²¹⁴. I asked them to answer the question: *‘what has your participation in oncogrrrls done with/at/for your relationship with cancer?’* I compiled their responses in one continuous page, copying the ones I received by email and transcribing the two that I received by voice message. To analyze the data, I used an interpretive approach based on grounded theory (Chun Tie, Birks, and Francis 2019). I started by reading the responses one first time to ease my curiosity²¹⁵. Then, I engaged in a second reading in which I attended to the sentence structures and the emergent meanings. I identified categories of change within each response. Then, I gave the categories numerical weight depending on how many responses referred on them. Then, taking the notion of *arousing* as a framework, I reread the responses and the emerging categories and combined them in emergent themes. Unless something emerged as very noticeable /distinct or many times, I mostly structured the themes around the notion of arousing or generating materials. In this process of analysis, I realized that some responses and categories referred to practices within the rehearsal

²¹³ While modeling some of the language and modes of approaching this kind of research, this study would not pass the protocols of a rigorous and valid social science protocol.

²¹⁴ A total of 42 individuals have participated in ‘finished’ residencies (I am not taking into account people who joined partial workshops)

²¹⁵ The responses had such an emotional charge on me that I had to leave them sink in for a couple of days before returning to them with a more analytical mind-set.

while others referred to effects. I also realized that the themes could be interpreted using different models, such as: individual vs. relational change or planned/unplanned change; or kind of labor- effect (affective, somatic, kinetic, critic) .

While modeling an interpretive qualitative assessment through the social sciences, I got stuck in the limits of this kind of assessment that requires certain conditions to ensure the validity of a study²¹⁶. Despite the limitations, this was a very generative practice and a surprising approximation, in which I learned that I was unaware of many of their individual relations to cancer. In what follows, I offer my reflections after the exercise of categorizing the kinds of effect/change through the emerging ‘themes’.

Model #2.1. Individual vs. Relational

From the results, we can see that half the answers center cancer relations within themselves (the individual relations with themselves), and half of the answers attend to relational aspects with other than selves. (See annex for list of answers).

Even though it could be said that the question shaped this kind of answer, as I asked what participating in oncogrrrls had done to their cancer relations, cancer relations do not necessarily assume a centering on the cancerous self, but the many cancer-making relationships and practices. Thus, it is significant that the participants center in their responses on individual and personal changes and this provides new and surprising information to me for a few reasons:

²¹⁶ Some of the many limitations, as defined by social research standards were 1. my clear bias and lack of neutrality as impartial moderator. The lack of saturation - as only : 15 of the 40 living participants responded, lack of neutrality from part of the respondents 2. Due to our emotional connections and friendship it is highly possible that they limit the amount of negative feedback. The limitation of depth and understanding of their answers (as I did not do follow up interviews) Lack of triangulation methods with other researchers in the analysis.

1. I did not intended individual or personal change in designing the project, thus I did not anticipated such a large amount and specific report of individual/personal changes
2. The main goal of the project is to de-center the self, or to collectivize individuating processes of medicalization and get a critical stance of structural issues in cancer that are painful and can be addressed collectively, or another way to put it, to move *cancer-in-me* towards *cancer-in-the world*.
3. I need to further think the implications of this analysis for arousing change, perhaps again, the individual and the relational cannot be split. —

Model #2.2 Process vs. Effects

(. . .)

Despite the majority of answers tackling effects, some of the responses were evaluations of the process of rehearsal. I appreciated the recognizing of the space of rehearsal as challenging, painful, hard work and that might replicate micro-violences.—. Or echoing authors that complicate the *goodness* of community, and said in concepts emerging from the oncogrrrls residency where these micro-violence were executed, perhaps *oncorority*²¹⁷ is not enough to prevent us from replicating erasures.

Model #2.3. Affective-somatic-kinetic-relational labor and effects

(. . .)

²¹⁷ oncorority was a concept that emerged in the making of *cuentos de nos.otras* (*tales of us.others*) in the residency in Zaragoza.

In this model I classify the kind of labor done by oncogrrrls in affective, somatic, kinetic and relational. In thinking affective, I can make-think interesting kinds of *arousing* mechanisms-and effects (see annex). However, in moving from affective to somatic, I start to find the boundary making practice challenging. Some somatic laboring and effects could also be read as affective, and clearly the kinetic laborings had affective and somatic effects, and the affective laboring did impact the relational fields. I am starting to see the 4 ‘kinds’ of labor and its effects interrelated and hard to split. The directionality of practice/effect is neither univocal nor straight (thus not allowing to craft clear cut causal relations). Boundaries get blurry and to exert cuts becomes more and more forced, leaving much nuance and differentiation outside. I feel quite reluctant to execute these kind of taxonomic cuts. I notice my own training to sense muddles of intensity as *material that works* (for performance composing) and the challenge of unpacking these muddles to ‘understand’ how else might this material might *be working* (as programmatic activism).

What I am noticing from these interpretative kinds of modeling is a tendency to explain through either binaries or taxonomic efforts. Grouping and ungrouping as a tendency/tool to make sense emerges as one of the characteristics of this model, making meaning through inductive methods. I also notice that these groupings are dependent on the basis of ‘stable meaning’ yet they change across classificatory devices. I also notice my resistance (impossibility) to effect clear-cut, straight, unapologetic taxonomic differentiations.

Model #2.4 oncogrrrls as animating the many foldings of cancer

Inspired by Silvia, who responded that ‘cancer becomes plastic with the many foldings and unfoldings’, I start drawing a visual strip. A cancer box, trembling with the pressure of

uncontainable discomforts, gets stroked by oncogrrrls and expands into a viscous multi-folded matter impregnated with the many responses from the participants.

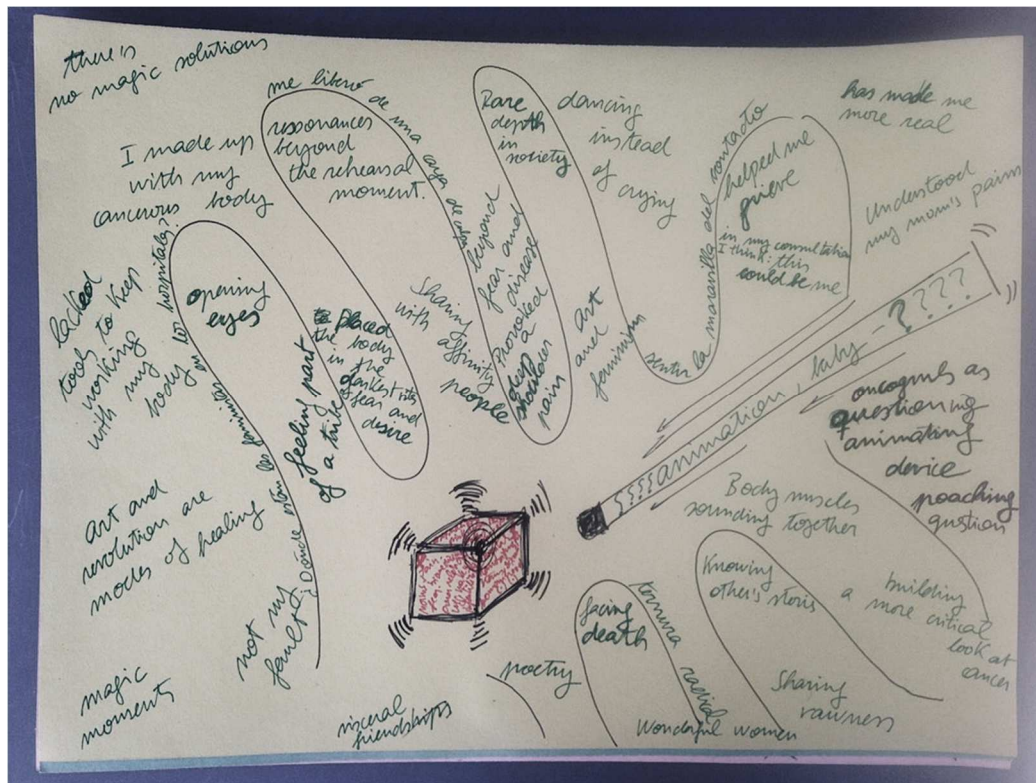


Figure 31 Grounded theory in visual representation. oncogrrrls 2018. By Caro Novella

Would this be a valid form of evaluating - making change visible as a grounded theory emerging form?

PART 3. MODELING WITHIN FIELDS

Modeling #3.1. Close readings in *Arousing multiplicities*. An articulation within the Arts and Humanities.

In the last 6 years of my doctoral research, I have articulated many close readings of specific moments in oncogrrrls in conversations with authors thinking in the fields of art philosophy, Performance Studies, Feminist STS, and queer/crip theories. These conversations have helped

me conceptualize oncogrrrls as a rehearsal process for *arousing multiplicities*: a protocol for enacting the body multiple²¹⁸, technique for arousing a field of potentiality, a stirring up of somato-semantic cancer muddles, arousing a field of multiple cancer relations and critical perspectives, as producing new assemblages, and even, arousing as in exciting erotica and crafting new *desires*.

(. . .)

I wonder, what are these articulations doing for assessing change? How do attempts to assess change challenge practices for knowing within the humanities?

Model #3.2 CFSC (Communication for Social Change) model.

I briefly refer to a model I used years ago²¹⁹ to situate Paolo Freire's Liberatory pedagogy (Freire 1970) and Augusto Boal's *Theatre of the oppressed* (Boal 2000) within a Communication for Social Change framework²²⁰. Placing oncogrrrls through and against it, I notice that the kind of individual and collective transformation these authors propose is acquired through 'conscientizao', or critical awareness, which seems only one aspect of what oncogrrrls does. Despite finding in these models some of the roots of my current practice²²¹, these models omit

²¹⁸ In conversation with Anne Marie Mol

²¹⁹ On my 2011 MA thesis (Novella Centellas 2011)

²²⁰ As Gumucio-Dragon and Tufte defined it (2006), "based on dialogue and collective action, CFSC is a process of public and private dialogue through which people themselves define who they are, what they need, and how to get what they need in order to improve their lives" (p.xix). Collective dialogical process, ownership of the community, horizontal interventions and a goal for change beyond the individual, that aims at norms, values, policies and culture.

²²¹ Such as, for instance, a methodology based on problem-posing, centering the group's question/drive for change, and an insistence on structural/collective change.

the somatic/affective doings of oncogrrrls²²². I also notice this kind of omission in the reading of Augusto Boal's theory of change given in the report on assessing impact by Animating Democracy which limit Boal's work as ideologic and not considering the material impact of doing somatic work. As I imagine how would it be to model oncogrrrls within these frames, I recognize the force that pulled me away from communication ten years ago, particularly the focus on discursive modes of dialogic engagement and the body/mind split which, after a few years of working in the field, I was finding limiting to change. Also, an analysis of the assumptive logics, the emphasis on *liberating* (conscientizao-change through dialogue) assumes a kind of self-contained individual or group that 'returns' to a kind of pre-existing liberated state. I don't even know how to 'fit' oncogrrrls into this programmatic, step-laden model for theorizing change.

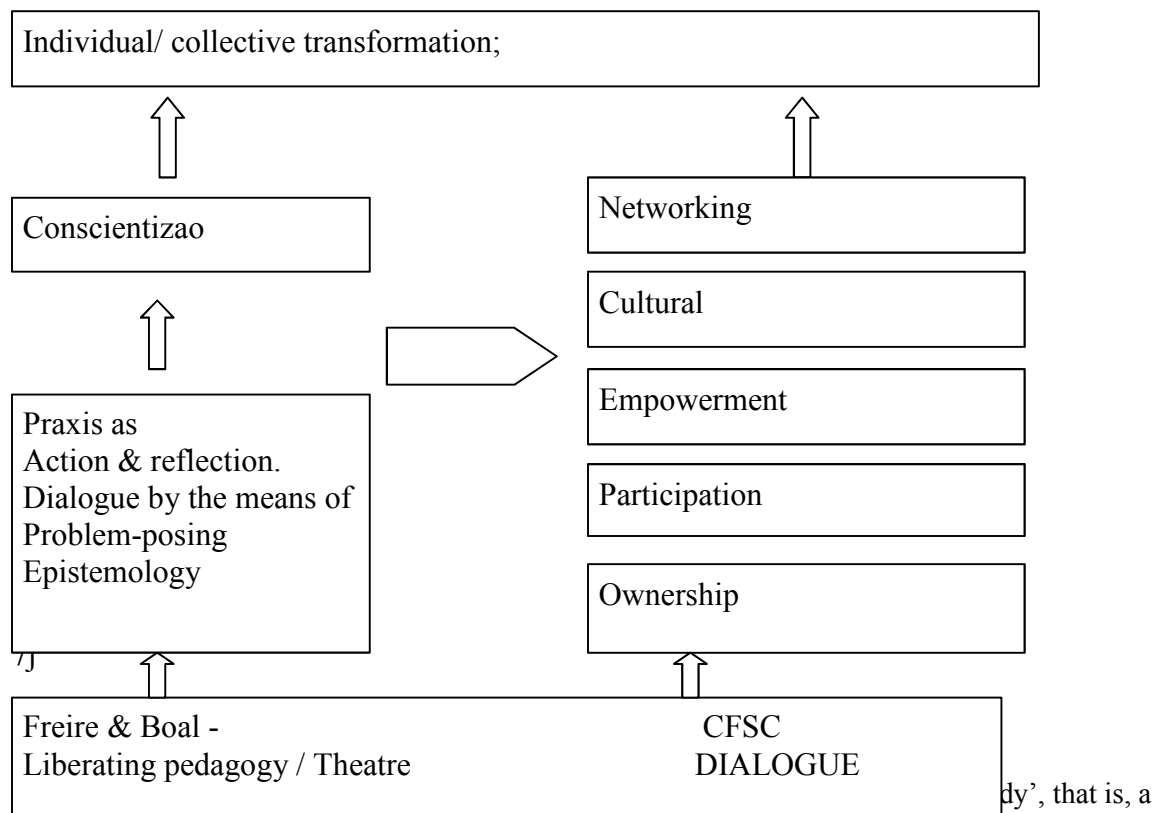


Figure 32 Diagram of Communication for Social Change model.

Model #3.3. Socio ecological modeling for change.

The socio-ecological model is a quite common model in designing health communication interventions that aim at change. This model emerged as a response to dissemination or diffusion of innovations and social marketing models aiming for individuals change in their programming. The socioecological model considers that individuals' behaviors are supported by their environments so they conceptualize change as a multilevel effort.

In this modeling exercise, I attempted to fit *oncogrrrls* within a health related socio-ecological model²²³. Particularly, socio ecological interventions to enable pregnancy in serodiscordant couples. The model lists the problem factors in each fragment of population (individual/couple/structural) and proposes interventions at each level. I try to fit *oncogrrrls*

²²³ I replicated the Figure of the Socio-Ecological approach from (Saleem et al. 2017).

within this model and I keep struggling and finding resistances that speak of the gaps between this programatic model for change and how oncogrrrls as an art and activist making practice

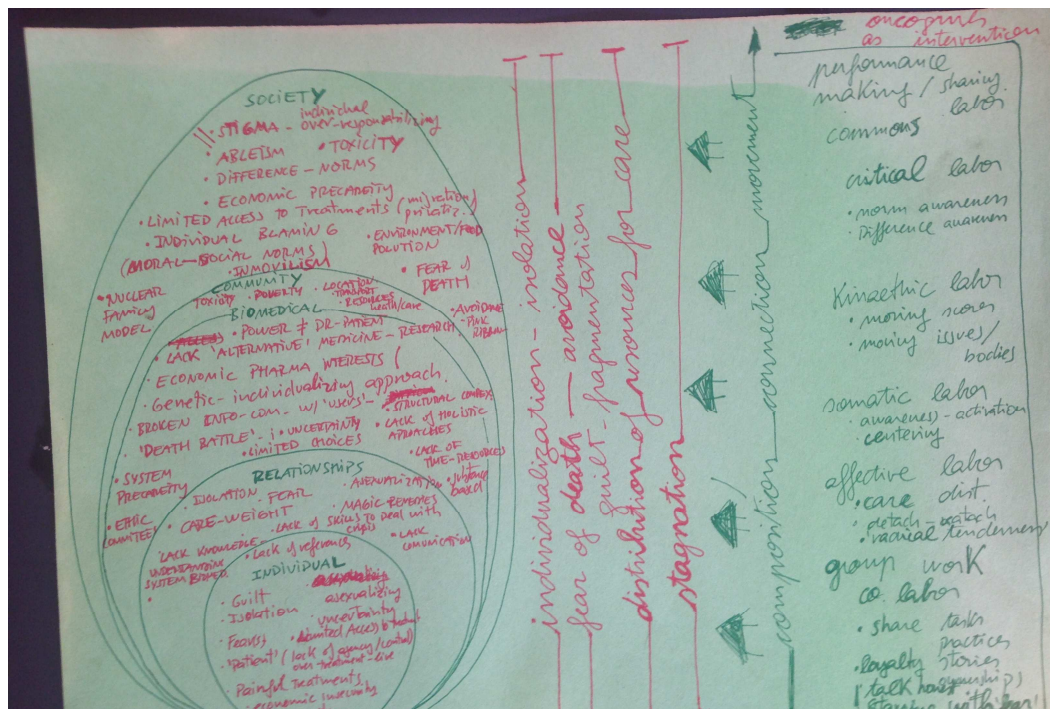


Figure 33 Modeling oncogrrrls within a socioecological model for change in health communication

works.

First, I notice some challenges relating to the definition of a problem. What kind of change is

expected²²⁴ ; who defines the problem or the kind of change wanted²²⁵. And related with the

definition of change, the question of when is this ‘goal’ for change set up. Does the community

already exist before the creative process or does the community get formed around the issue and

the rehearsal process?

²²⁴ for instance, oncogrrrls does not attempt to change individuals behavior in relation to a disease, but to engage individuals in making visible cancer making practices that cause them discomfort, or to attempt social change through group engagement.

²²⁵ Meaning, is it somebody from within the community or an expert from outside. In my work with oncogrrrls, influenced by (some) community health approaches and what Mohan Dutta named *culture centered* approaches to health communication, it is crucial that each group defines the concern/question we will work together on at the start of the residency. Defining the question has larger implications in the kind of involvement of the group.

The second main problem that I face, is the splitting of individual/relational/biomedical/social factors or problems, as if they were not interrelated. The socio/ecological model aims to make an analysis fragmenting and identifying problems at different levels (individual, relationships, community, society) that can be tackled with different strategies for different audiences.

However, one of the principles I learnt *works* in oncogrrrls for addressing interrelated social issues and complex entanglements through somatic and kinetic practices is aiming for imbrication, not fragmentation²²⁶. In an effort to: 1. foreground the more salient problems and 2.

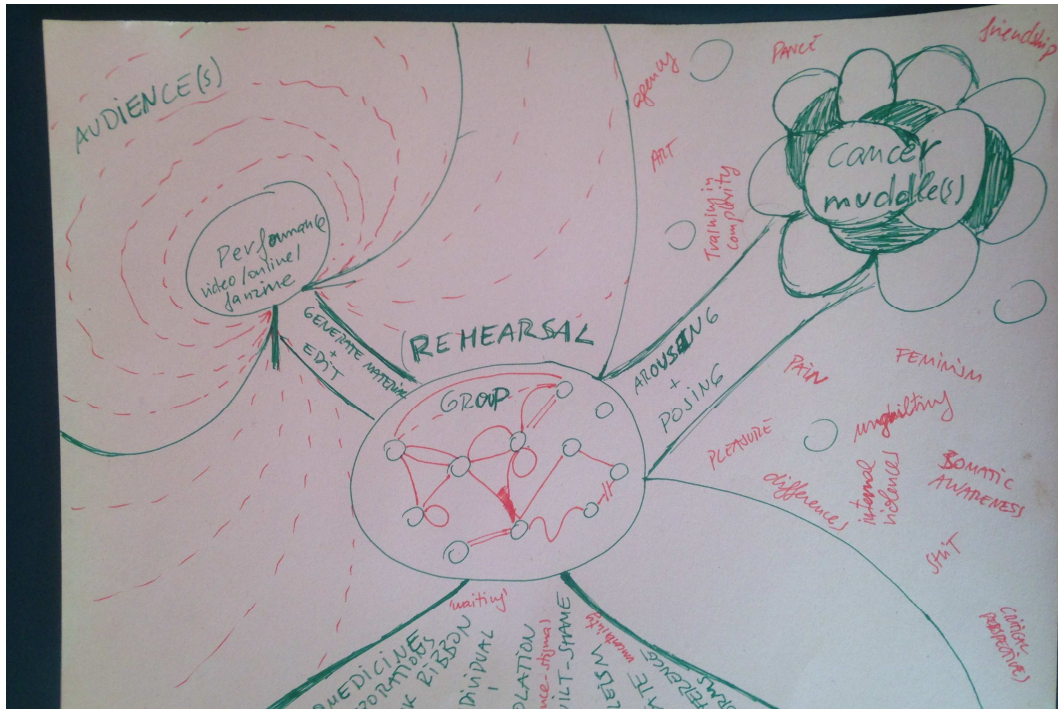
Integrate the different categories - I start looking for patterns across the levels. I find some transversal categories (or values) that have specific materialization in each 'level' but that share assumptive logics and that bother me: individualization and isolation (guilt/fragmentation)- distribution of resources- stagnation- Fear of death/avoidance.

In trying to think if it is possible that oncogrrrls fit into an interventionist model also divided by individual/relational/community and social, I get frustrated again. This is not how *it works*. In oncogrrrls, the group, not the individual is at the center. oncogrrrls starts with the relational field addressing individual/structural values and practices at the same time.

[arrgghhhh]

frustration impulses me to draw my own visual modeling of how oncogrrrls works.

²²⁶ For example, in the first residency oncogrrrls, in which we created the piece (*Parenthesis*), we were bothered by how the social crosses the individual. So, in the posing of a question that mattered to the group so we could design movement scores, instead of dividing social from body from emotional concerns, we asked a transversal question: what are we *waiting for*? That had implications at all levels.



Model #3.4 oncogrrrls as stomach. Digestive and energetic model

This was my own drawing response to the socio ecological model for change. Like an energetic mapping, instead of fragmentation and taxonomies, I see forces pushing through, connecting, reverberating, arousing. I see compression/ decompression/ reverberation.

I see muddles with internal and external forces of relation that cohere them . Can this model for change engage in ‘assessing impact’? Are these articulations not enough? For whom? Do we need to articulate? How to collaborate from difference? Do we need to? Questions emerge such as: Can *close readings* count as assessments of change? Are these models/methods for engaging with performance studies mechanisms not enough to assess change? What do assessments need to include to be considered as such? If we (scholars and practitioners in the field) do not consider them as enough, why are we not including other modes? If we consider them enough, how do we articulate these assessments so other fields can relate?

Figure 34 oncogrrrls as a stomach. 2018

CONCLUSIONS

In aiming to respond to your invitation to question 1. what methods, models and materials are best suited to theorizing change within performance studies, and to what extent can we draw on existing theories of change in other fields to animate approaches to change within performance art and activism, I have engaged in a modeling adventure from my experience with the project oncogrrrls. In this exercise in ‘modeling’ I have engaged with the mechanisms for change emerging from my own practice/reflections, with the ‘effects’ of arousing as perceived by the participants, and with existing theories of change in other fields. For the most part, this has been a very generative exercise in noticing gaps and differentials. perhaps, a kind of arousing questions exercise in itself. This has also been a very generative exercise in *clarification and assessment* of the work done in oncogrrrls, and a realization of the amount of time and work that certain kinds of assessment require (is it worth it?). This has also been an exercise in running into rabbit holes of *validity*, against walls of *recognition* (what counts as change, who defines it, when) and into the limits of knowing and translating across different epistemological perspectives. This chapter enacts one more kind of *transposition*: move oncogrrrls somewhere else (to a model) and notice what emerges, as a score to insist on the ‘in-between’ of interdisciplinary, perhaps, as Hunter proposes ‘not aiming at knowledge but at ways of knowing as practices of becoming’ (Hunter 2015). On the issue of working across fields, I wonder, do we need to talk the same language to work together and aim for change? How do we value the *arousing change* across fields each time? With the lessons from oncogrrrls’ rehearsals on emergence and coalitional change on.co-creation, I shift the original question and pro-pose: what is at risk in interdisciplinary coalitions for change? Do we need to ‘agree’ upon certain models? Or can we meet each other in the encounter? Which disciplinary boundaries might be exposed? Can we work together towards change despite the incommensurabilities?

ANNEXES.

ANNEX #1. oncogrrrls resume

Documentation and pieces

oncogrrrls.art

<https://vimeo.com/68604942>. *Vimeo parenthesis*. 2.085 plays (8 likes)

<https://vimeo.com/156496178> *Resistencias Sonoras* 351 plays (6 likes)

<https://vimeo.com/156509359>. *Gypsum Laboratory*. 4175 plays (27 likes)

Workshops and Residencies (until 2018)

(Oct. 2012) One day workshop in collaboration with AECC (Asociación Española contra el Cáncer). (6 participants)

(Feb. 2013). February. 2 day workshop in collaboration with Centre Civic Parc Sandaru, Barcelona. (4 participants)

(April 2013). April 2 day workshop in collaboration with Centre Civic Mas Guinardó. (5 participants)

(May/Jun 2013). Residency at Ca la Dona, Barcelona, Spain. (7 participants)

(Parèntesis) [Parenthesis]. Video Dance

(Nov/Dec 2015) Mexico City, Mexico. (11 participants)

Laboratorio de Yeso [Gypsum Laboratory]. Documentation-process video

Resistencias sonoras [Sounding resistances]. Video performance

(Nov/Dec 2016. Devenires Más allá de la medicalización. Barcelona, Zaragoza, Granada, Madrid. (22 participants)

Vademecum poético [Poetic Vademecum]. Performance scoring.

(Sept. 2017). Zaragoza, Spain. (11 participants)

Cuentos de nos.otras [Tales of us.others] oncopoetic performance-installation.

Witches lab (documentation. Video dance)

Toxic Land (documentation. Video dance)

Cuentos de nos.otras [Tales of us.others] Fanzine.

Screenings, life performances and public presentations (500 aprox. + visits to Museums

(July 2013) Screening of *(parenthesis)* at MiTS - Festival of video-dance and Social Transformation. (25)

(July 2013) Screening of *(parenthesis)* at jornadas Transfeministas, Barcelona, Spain. (50)

(Oct. 2013). Screening of *(parenthesis)* and presentation. Performance Studies Symposium. University of California, Davis (15)

- (Nov. 2013). Screening of *(parenthesis)* and round table. Jornadas, Cancer de mama y Corporalidades disidentes. Ca la dona. Barcelona, Spain. (40)
- (Feb. 2014). Screening of *(parenthesis)* and presentation. UC Davis. Feminist Research Symposium, California, US. (10)
- (June 2014). Screening of *(parenthesis)*. Performance Encuentro, San Juan Costa Rica. (20)
- (Oct. 2014). Poster presentation at Mondavi Fellowship
- (Dec. 2015). First Open Screening of *Gypsum laboratory* and *Sounding Resistances* followed by an Artists talk. La Gozadera, Mexico City, Mexico. (20)
- (Feb. 2015). Screening of *Gypsum laboratory* and *Sounding Resistances*. Artists talk at Practice as Research Seminary. University of California Davis. (US) (8)
- (Nov. 2015). Screening of *(parenthesis)*. Alternativa. 22nd Barcelona Independent Film Festival. Barcelona, Spain. (40)
- (Sep. 2016). Screening of *(Parenthesis)* and round table on art and research. AIBR. Barcelona, (Spain) (40)
- (Nov. 2016) Presentation at the table. 'Breast cancer and activism(s) CIEDSI Granada. (5)
- (Dec. 2016). Life-Performance *Vademécum Poético. CSOA Escalera Caracola* Madrid, Spain.(5)
- (Jan. 2017) Screening of *Gypsum laboratory* and *Sounding Resistances*. Artist talk. Amoqa. Museum for Queer Art. Athens, (Greece). (40)
- (May. 2017) Presentation at the conference at CUNY, NY (20)
- (Sep. 2017). Life Performance. *Cuentos de nos.otras*. Espacio Treziclo, Zaragoza, (Spain). (40)
- (Nov. 2017). Screening of *Cuentos de nos.otras* and roundtable. Jornadas onco-poéticas, Zaragoza, Spain. (15)
- (Jan. 2018). Screening of *Gypsum laboratory* at Prototype-Ome; My disease is an artistic creation. Hangar, Barcelona, Spain. (15)
- (Feb. 2018). Screening of *Gypsum laboratory* and *Sounding Resistances* and *Master class*. University of California Davis. (30)
- (Mar. 2018) Screening of *Parenthesis* at Cyborgrrrls, Mexico City, Mexico (20)
- (Jun. 2018). Screening of *Gypsum laboratory* and talk at Emmetrope, Artscultures and Autres. In collaboration with Quimera Rosa. Bourges, France. (15)
- (Sep. 2018). Fanzine distribution at the Festival of science fiction, Bilbao, Spain.
- (2020) Exposicion Biomedia

Network: people and institutions involved.

60 individuals have engaged in workshops and creative residencies within the project. 60% of the participants have been diagnosed with cancer²²⁷, while 20% of the participants had a close relative who had experienced the disease and a 20% were interested in cancer relations from a professional perspective²²⁸. Two thirds of the participants ranged between 30 and 45 years old, and one third was younger than 30 years old²²⁹. 9 artists/researchers collaborators. In terms of general audience, I approximate 500 people have been reached as direct audience through different public screenings and presentations, and more than 5.000 have accessed oncogrrrls pieces through online platforms. Many organizations and collectives have offered support in the forms of space, technical equipment and assistance for artistic residencies and public presentations:

Barcelona: municipal centers in Parc Sandarú; Mas Guinardó; Barceloneta; CC Sants . Ca La Dona, La Raposa del Poble Sec. Hangar center for Art and Technologies.

Mexico: Cultural Center La Gozadera; La Chinampa (Mexico City);

Occupied CSOA La Redonda (Granada); CSO Escalera Caracola (Madrid);

Zaragoza: Social Centers CSO (Zaragoza); Etopía, Center for Arts and technology, Espacio Treziclo Centro de Arte y Tecnología (Zaragoza); Espacio Treziclo (Zaragoza); Towanda; Amor de Primas;

France; Arts center, Transpalette. (Bourges)

Awards and Recognitions

Curated into the: Biomedia,

(June 2017). Zaragoza Department of Culture Grant for community arts. Zaragoza, Spain. Grant for the production of the residency, performance and fanzine, cuentos de nos.otras.

(June 2017). HUM Summer grant. UC Davis.

(June 2015).Mondavi Summer Fellowship. UC Davis.

(June 2014). Feminist Research Institute Award. UC Davis.

July 2013). 1st MiTS award, on Movement and Social Transformation by Finmatun and CC. Barcelona for the piece (*Parèntesis*). Barcelona, Spain.

Media presence and art-criticism

²²⁷ Different types of cancer, with a majority of primary breast cancer over secondary. Other kinds of cancer have been bone, rectum, pancreatic, ovaries.

²²⁸ Either health practitioners, anthropologists, or artists collaborators.

²²⁹ 6 participants of one workshop were older than 50. The workshop only lasted one session despite the fact that it was programmed to last one quarter.

ANNEX #2. oncogrrrls practices

A summary of practices for ‘holding’, ‘arousig’ and ‘posing’

Workshops (2011- 2013) trained in ‘holding’: needing safe space - needing flexible processes/
porous containers- questions need to emerge from the group -

Oncogrrrls 1.0. Barcelona. (Parèntesis) (2013)

Q. What are we waiting for?

Holding scores: shared framing, (sharing distributing- frame) safe space, music, mobilization
warm ups, Katshugen, body weather warm up.

Arousing Scores: interferences, alambre, gests, muñeco, (something else I can’t remember now)

Posing scores: feedback circle, shared editing, video dance for MIT award.

Oncogrrrls 1.5. La imatge performada. (2014. failed)

Holding scores: Lacking group momentum. no collaborator, no sharing nor holding. imposed
question and topic. Energy -holding. Space given, some resources.

Arousing scores: some worked, I don’t remember.

Oncogrrrls 2.0 Mexico. (2015)

Q. How the silences of cancer shape our bodies?

Laboratorio de Yeso. Resistencias Sonoras (1 dancer/1 sculpture- 8 non dancers).

Holding scores: safe space, shared framing, Flexible *probetas*, daily evaluation and design of
next day practice. Warm ups: (diffuse attention, walk around the space and pick up from
others). Shared-owned question/concern.

Arousing: Gestures, modeling the other, housing, landscaping, Poetry collaboration, blind folded
discovery, Making the mold—guiding the attention to somatic/material experience—felt
sensed (not imagination), memories, experiences. (molding).

Posing: feedback circle, tableau, Breaking the yesos, documentation. Editing video. Public
showing

oncogrrrls 3.0 molecules Spain. (2015-2016)

Q. How to become beyond medicalization?

Vademécum poético

Holding: Design, local producers, tons of sharing by mail. Craft a design that bends time/space bending design.

BARCELONA: (Question to cancer: How can I accompany you?)- Scores to eroticize

Arousing: periphery, space exploration, materials tableau, drawing/sharing, poetry-rap, needles

Posing: drawing sharing (to avoid too much talking, not enough time to process), scoring

ZARAGOZA: (Question to cancer: why me?) – scores to undo the possessive individual

Holding: writing exercise.

Arousing: mechanoreceptors improvisation, move away/into the touch, touch being touched, move away/into the touch, material implosion

Posing: drawing feedback, Altar/Tableau, (centipede- becoming

GRANADA- (Question to Cancer: How do you transit through my body?) – Scores to altar

Arousing: mechanoreceptors improvisation, Touch being touched (did not work)- slow motion moving, periphery, implosion

Posing: drawing feedback, materials- tableau, poetry writing. Score writing. Poetic vademecum

MADRID- What the f. do you want? (Scores for unsettling ‘healing’)

Arousing: mechanoreceptors improvisation, move towards/away from touch, periphery (did not work- people did not want to be ‘moved’ away from their centers)

Posing: drawing feedback, score listing, final performance.

Oncogrrrls 4.0 Zaragoza (2017)

Q- How to live in uncertainty?

Holding: Resources, transport/housing, local production weak, but transfeminist/friend networks activated, not shared ownership until Gender/structure dynamics were broken. Changed spaces 3 times.

Arousing: mechanoreceptors improvisation, Black Hole, Gender day (move from pleasure?- reassuring of the holding), periphery, fix/free exploration, structure-movement differential space exploration with phone call, Tableau with mask and light. Performance.

Posing: drawing in larger papers, feedback circle, cameras documentation, repetition with layers of signification. Scoring the performance piece.

ANNEX #3. Modeling Grounded theory and categories of changes emerging

3.1- Individual vs. Relational

Individual

Saved me from therapy.
Taught me to not having to hide behind make up or a wig
Allowed me to dance instead of only crying
Helped me grieve for my father. (Grieve): unguilt, talk about it.
Amazed by somatic and movement labor- (body as a Truer/ exposure)
Rescued practices to work with my own work on art-health
Got me a mania- attention to paragons.
Helped me make more independent decisions in relation to my disease.
Convinced me that revolution and art are other forms of healing.
Allowed me to think issues that are disguised as 'attitudinal' as structural.
Exhausted me physically.
Made me aware that violence and descuidos can happen within the women affected
Possibility to talk truly about death and cancer.
Allowed me to reflect on cancer beyond fear and disease.
Allowed me to connect with my body and all the embodied/emotions within.
Allowed me to be aware of these emotions and work through them from another place that is not the mind.
Helped me start a reconciliation process with my post/cancer and menopause body, and to accept it with all its physical and functional changes.
A revindication of my pain and shit.
A mode of process (it- pain and shit) through artistic disciplines.
Being less afraid of being touched.
Helped me integrate the disease in my biography.
Feeling that my cancerous body can participate in art processes and magic moments.
Helped me Process the experience from my mind to my body.
I lacked a follow up.
Sensing the wonder of touch in a safe space, a True safe space.

Relational

Made me political, affected me and befriended
Turned me into a more committed with the disease and people suffering it.
Helped me To build a critical vision in relation to cancer.
Gave me strength to 'come out'
Opened my eyes in front of society
hipocresía/falseness
Offered me the opportunity to know about gender/queer
Talking with others about it -helped me understand
The group entered a depth that is rare in the social scene.
Nice sounding dimension when, the muscles of our bodies learned a rhythm /language wisdom both personal and collective.
Feeling part of a similar group was a apoyo to reflect from a place of freedom and respect.
The reivindicacion of non-selfreferentiality took off a weight of guilt or responsibility
Take the gaze away from mi to open it and seeing other thinking/live options.
I learned about the expression of fear, pain, loneliness and acompañamiento.
Taught me tools for my medical consultations; that it could be me/ that it was me (empathy?)
Learnt to listen a lot and talk little
Rescued practices to work with my own work on art-health
Knowing the name through social media gave me strength and agency
Helped me make our experiences collective.
Helped me start a reconciliation process with my post/cancer and menopause body, and to accept it with all its physical and functional changes.
Helped me come out and talk about it.
Facilitated the creation of a tangible network of people
Crafted a safe space with like-minded people
Represents 'oncorority'. My systers, but not cancer sisters, but art and feminism.
Learnt about the others, with different, even antagonistic experiences to mine.

3.2. Kinds of Labor: affective, somatic, kinesthetic, relational

Affective Labor:

- a. Arousing as in stirring up cancer muddles, uplifting a some sticky affects, such as guilt or shame, still so prevalent in current cancer relations.
- b. Arousing as in multiplying practices and affects possible in the cancer mud (laughter, commitment, pleasure, sensuality, relief, curiosity for others, self-assertion, compassion
- c. Arousing as in uplifting socially imposed limitations in cancer relations (in validating affective expressions of fear, isolation, anger)
- d. Arousing as in an awakening to affective complexity.

Somatic Labor

- a. Arousing somatic connection and self-awareness
- b. Reconciliation/healing/making-up with self/body and changes.
- c. Learning to relate with own body and with others through somatic qualities (weight, direction, contact, etc)
- d. Training in exposure,

Kinesthetic Labor

- A. moving memories and practices.
- b. Shifts / contaminations (noticing own shifts)
- c. Reverberances beyond rehearsal ((pieces, products, online presence, conferences, books, articles,)

Relational Labor

- d. Deep connections (new friendships)
- e. Changes in mode of relating with the doctors, with patients, with family
- f. Increase critical perspectives

3.3 Practices vs. Effects

PRACTICES

Deep and honest engagement with frightening issues (life, death, cancer, vulnerability, friendship) harshness and pain in the process: fiscal pain, exhaustion,

Somatic labor

EFFECTS

Detaching guilt and shame from own cancer muddle (de individualizing/de-blaming)

Knowing (being aware/making) difference (can have positive or not as positive impact)

Arousing critical perspectives in relation to cancer within society.

Make 'cancer' plastic. multiply practices and affects possible in the cancer muddle. (

Contamination//change (behaviors/attitudes) - unexpected, un-intended, un-directed

More Agency/independence from doctor/patient relationship in her biomedical decisions
(autodeterminacion para la vida)

Changed relationship with their bodies (a training in exposure, in holding complexity, in connection and awareness, a reconciling/healing/making up with self-body and changes, trained in somatic relationalities (learning to relate through somatic attention to weigh, position in the space, proprioception)

Training in Complexity/staying with the trouble/loyalty.

More Agency/independence from doctor/patient relationship in her biomedical decisions
(autodeterminacion para la vida)

Longer resonance(s) beyond the rehearsal moment.

Arise networks of -shared affinities, friendships and visceral connections)

3.4 Kinds of effect (expected/unexpected)

Expected

Break isolation and individualization.

Share my anger and frustration for the
'parenthesis'

Create what I could not find (other, more
critical voices, cancer representations that
were not deadly pitiful neither pink and
happy)

Activate - Critique (deconstruct) biomedical
and pink ribbon heterosexist/ableist culture.

Train/practice somatic and kinesthetic
practices to question social issues. (explore
concerns)

unexpected

(affective arousal) — Unguiling, pleasuring,
arousing, fearing (detaching,
com/posing cancer(s)- Made cancer plastic.

Contaminations and changes

Resonances and reverberations.

Interludes vi.: In the making of new cancer-relations



Figure 35 entrance of Hospital de Sant Pau, Barcelona



Figure 36 Poster for an oncogrrrls laboratory in Mexico, 2018

Jornada, Cáncer de mama y corporalidades disidentes



Ca La Dona 9/11/13

15h. Proyección de "Pink Ribbon Inc."
16,45h. Taller de Cuerpos con Oncogrrrls
18,30h. Mesa de Debate

Proyección del corto **(Paréntesis)**.
Júlia Ojuel.
Lectura crítica: releendo los números sobre el
cáncer de mama.

Ana Porroche.
Otro género de violencia: el eslogan 'súmate al rosa'.

Ainhoa Irueta.
Vivencia de la disciplina corporal impuesta a través
del cáncer de mama.

Marisa Paituví, Carol Vallverdú y Caro Novella.
Resistencia desde el lenguaje del cuerpo.
Presentación del proyecto Oncogrrrls.

Ca la Dona: www.caladona.org • C/Ripoll, 25 • 934 12 71 61

Marimachos Cancerosas: marimachoscancerosas@gmail.com

Oncogrrrls: oncogrrrls@gmail.com

Ca la Dona es un espacio feminista no mixto. Jornadas abiertas a mujeres, lesbianas y trans. Accesos adaptados y posibilidad de abrir un espacio infantil y de traducción a LSE si lo solicitas..

Figure 37 Poster of a conference on cancer and dissident corporealities. 2014

Jornadas OncoPoéticas: cáncer, feminismos y creación artística

18 Noviembre // Pantera Rossa, Zaragoza

La enfermedad como ensayo creativo

— PROGRAMA —

Mañana

11:30 Inauguración de las jornadas y bienvenida

12:00 Presentación del fanzine "Cuentos de nos.otras"
por Melanie Aliaga y nos.otras

12:30 Taller de collage

Tarde

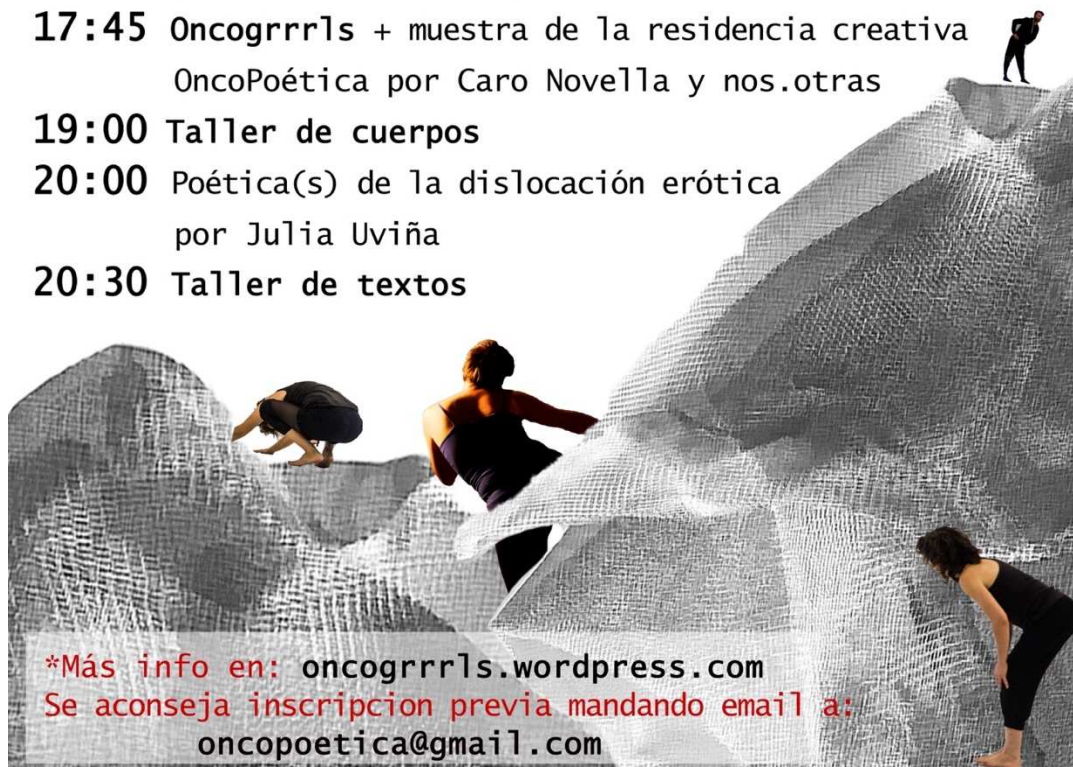
17:00 Narrativas disidentes sobre el cáncer en el arte
y en la literatura por Caterina Riba

17:45 Oncogrrrrls + muestra de la residencia creativa
OncoPoética por Caro Novella y nos.otras

19:00 Taller de cuerpos

20:00 Poética(s) de la dislocación erótica
por Julia Uviña

20:30 Taller de textos



*Más info en: oncogrrrrls.wordpress.com

Se aconseja inscripción previa mandando email a:
oncopoetica@gmail.com

Figure 38 Poster for the conference on Cancer and Feminist art. Zaragoza 2017

CHAPTER 6 –Modes and Practices: holding, arousing and posing

In this afterword I collected some *behind the scenes* tips and techniques for creating processes of joint inquiry and community-engaged performance making for cancer justice. These are some practical propositions emerging from doing this kind of work (mostly from oncogrrrls). Take them as potential guides. Test them, Share them. Discard them. Make more of them.

A note of caution: these tools and tips make sense in relation to the goal of igniting transformation of cancer relations, that is, they make sense in aiming towards on.co-creation, aiming to engage emergent and coalitional attentions for changing cancer relations with.in a particular ecology, they are not ‘universal’ or directly ‘generalizable’ tools. If you decide to take them, you will have to work through the goals of your process, and adjust accordingly.

I.I.Holding-Arousing-Posing, Stages In Making

I’ve come to think of three phases in the arch of performance/change-making. Each of them with different aims, and specific kinds of practices. Briefly: 1. practices for *holding* are those that address holding the process as on.co-creation. A series of techniques to set up premises for the group process. More specifically, *holding* is a process of creating a container including, broadly, the defining of community agreements for the practice, including sets of expectations and limitations; the setting up of the material conditions, defining times, places and, resources; and fine-tuning the questions and issues that we will jointly interrogate. 2. Practices for *arousing* are those that aim to generate newness through exploration of the issue/concern. *Arousing* is a phase of generation of material emerging from the exploratory inquiry, animating and unsettling issues. *Arousing* entails the crafting of exploratory scores and the exploratory practice, and 3. Practices for *posing* are those that aim to edit and share the material that has emerged in the process. *Posing* entails practices for returning new knowledges, and for collecting the emergent material and editing it into the final piece.

These three stages could easily be flattened as a production arc following linear temporalities (one thing after the other). While this is often the case, practices for holding, arousing, and

posing also co-exist and feed from each other along the process. While these stages group the kind of practices by their goal in the process, they do not qualify how to practice. The ‘how’ is prompted by the principles I introduced earlier (in chapter 2): Score inquiry! Co-create! Start in the body! as well as by the specific material conditions of each creative process and group. Rehearsing *on.co-creation* asks to hold joint creative process to put situated cancer relations in variation. Each creative process will have a unique arch, with its own rhythm, intensities and temporalities. Nevertheless, each of these stages need to be attended with the same care: holding is as important as arousing as posing is. It follows some details on how to design practices that, in each stage aim for jointly creating cancer relation e po cancer relations.

I. HOLDING

Holding is about establishing the relational agreements that will sustain the process as a co-creation, and that will establish which are the edges of your group’s co-creative practice: the initial inquiry that will work as a through line for the research process, the material conditions, and some tips for co-creation. commitment and a vision of what it means for the group to ‘do something about it, and do it together.’

Only go where/when you are invited. The process draws on the need and the energy of the individuals/group. The art(ists) frame/hold and acompaña [acts as a companion to] the process into a performance piece. Let the individuals- and their affinity groups- be the ones excited in doing something with you. It is their need for changing that will foster ownership and personal investment in the project, and not the other way around. If you also have a need to change, look for allies who might share this need with you so you can unite forces. Invitation might take time, particularly with the challenges of transdisciplinary and emergent work. Your project needs to be readable/recognizable for you to be invited, and most surely, it will need to be politically aligned (for instance, in setting up the oncogrrrls project, addressing this kind of emergent work to support groups or health institutions aiming to smooth the discomfort was difficult at the beginning. – it still is. Or for instance, Quimera Rosa’s *trans*plant* project was invited to UC Davis through/by a faculty member who aligns with transfeminist and community science values).

Ask for everyone to be present on the first day. If only. The original meeting will set the ground of the work, and everyone will have the change to shape the process by setting their boundaries, edges, commitments, and shared questions. Be strict, if someone does not join this first meeting, they will have difficulties (it might even not be possible for them) to be part of a co-creating practice. I learnt this one the hard way, in the making of Parentesis in Barcelona. The only person who missed the first day kept framing the experience as an integrative dance project, as in “dancers integrate people living with cancer”, missing the activist core of the practice.

Share and clarify individual and group limits, expectations and responsibilities at the beginning. Ask about and share expectations about the project: What do you envision, imagine, would love to be doing? What is your relationship to art-making? To dancing and performance? Which kind of final sharing do you imagine? What do you hope to get through this process? Why are you here? Ask about potential limitations: which are your schedules, time availabilities? Where and how do you imagine meeting? Would you feel comfortable with documentation? How would you like to document the process? What could make you leave the process? Take this opportunity to clarify shared responsibilities as well as expectations about ownership of potential ‘deliverables’ (such as collective credits in documentation and final performance pieces). For instance, in Zaragoza 2017 we decided that the performance and fanzine would be signed as an oncogrrrls piece, yet, the following conference, would not be labeled as an ‘oncogrrrls’ project, but as promoted by the local group..

Adjust the process to the individuals so they can enter and exit as needed, and still feel a full member of the production. As a particularity of working with people who have medical (as well as family and life management) concerns, the creation process must have built-in techniques for adjusting to individual daily life needs and routines, instead of the other way around. Adjusting might mean to: collectively decide on the best times for practice, schedule around the individual time/space limitations, and design the creative process with independent building blocks that allow to continue the process with whoever is present that day. Working with non-accumulative scores allows that at the end of the creative process everyone will have practiced some, and will be able to contribute to the final piece. This practice prevents losing people throughout long, exclusionary processes. For instance, in Mexico, we created weekly capsules of

practices, that we named ‘probetas’ [test Tubes] that could be practiced independently from each other. Or, for instance in the rehearsal with Quimera Rosa, on “Trans*plant”, the workshop run as an ‘open lab’, with independent daily practices that would allow participants to manage their multiple commitments.

Welcome everyone in, yet, invite out anyone who cannot ‘hold’ the group. In these processes, mutual support and being present for each other in the experience is of the outmost importance. This is a transformative space in which many vulnerabilities may emerge; make sure that everyone who joins a group can stay engaged with the process and with everybody else in the group with care*full attention. If that is not the case, serenely, invite them out. The process requires that everyone involved is aware of the risks of opening up cancer relations, and committed to mutual support when fragilities arise. For instance, let go of individuals who are more interested in taking their own pictures than in the experience and the safety of their other partners, or individuals who cannot be fully present and engaged in readiness to support others.

Distribute intelligences and nurture networks. Take some time to know and explore what each individual can and want to bring in. Give space for individuals to step in. Value equally each of these assets. Each group will have different production capacities and more or less strong networks. Contribute as possible in the whole production process, yet aim for the distribution of tasks and roles among all the members of the group. Sharing is key in distributing intelligences. This will offer opportunities for spreading engagement and distributed ownership of the project, will reinforce the project in unexpected ways, and will also give you time to attend to the process. Synchronizing the efforts within already existing networks of support will make the project disseminate and grow stronger. It might also reinforce these network fueling energies into existing affective ecologies. Growing networks is also one of the aims of the project. Find the connections, connect to the existing networks. Help grow them. Nurture

Craft a group question. How?

The process of crafting a question varies from group to group and in a continuum that goes from opening and intuitive listening to using more direct repertoire questions.

1. Start with a potluck (make this first day required).
 2. Listen to what bothers. It might be a shared cancer discomforts or a discomfort that emerges in the process, and needs to be dealt with.
 3. Make impossible questions, such as: *What would you ask cancer?* In this case, while I ask for ‘how’ questions, I work with what the group proposes.
 4. Attend to all that is shared. Let it soak. Pull *unusual* questions and images such as: ‘I bet my nipple to grow’, or ‘until when will I fear the cancer ghost to return?’
 5. Switch scales and listen for a larger underlying issue(s) in a question. For instance, the question ‘until when will I fear the cancer ghost to return?’ [hasta cuando el fantasma?] could be extrapolated to a more general: the emotional effects of not knowing, or “uncertainty.”
 6. Imbricate; avoid dividing concerns into ‘box/categories’ and aim for practices and relations. For instance, after a conversation on the many things that bother from the experience, instead of classifying the conversation into a typology of issues pertaining to either the body/ society/ health system/ or family, we crafted a ‘how’ does my body questions from ‘waiting’ , or ‘interfering’ or ‘covering’. Actions will be easier to score from.
- You might be asking, how long will this take? I cover it all in one initial pot-luck meeting.

II. AROUSING

What follows are some of my tips to design scores for opening up cancer relations. The aim of arousing practices is to keep asking: how else can *this* or *that* be? Exploratory scores are propositions that do not look for one only answer but that serve as a platform for sustained and ongoing discovery. This section is about how to create the arousing/animating scores for joint discovery that are particular to the group or the issue at stake. It follows a step to step approach to arousing.

Pick an issue apart. Break down the questions posed by the group into its multiple explorable components. An issue can be split in many ways. For example: in the Mexican laboratory we

split the inquiry *how does the silence of cancer mold my/our bodies?* Into a series of explorations that engaged elements of the question such as silence, shaping, making/unmaking bodies. Breaking an issue into its components might also mean to open an issue through its many material dimensions: space, time, shape, distance, kind of touch, (. .).

Choose a mechanism to tinker the issue with. this mechanism will set parameters for your exploratory proposition. Design a proposition (score) that tinkers and opens up room for gaps and differentials. Some mechanisms I have used to design scores:

- **Inversion-** instead of attending to what we already know about an issue, flip the issue around, and generate practices for exploring the ‘inverse issue.’ For instance, if the issue is ‘uncertainty’, flip from ‘uncertainty’ to ‘making-knowing’ and propose different kinds of practices for *knowing*, such as exploring a room blindfolded, or invite the participants to become a ‘black hole’ and extend their sensorium. If what bothers is ‘cancer silences’, explore sound exercises and kinds of sounding and make collaborative sounding poems. If the question is ‘why me’, make more permeable ‘self’ boundaries through touch-based exercises, or through the implosion score.
- **Go deeper:** if the question that bothers is 'silences', read Audre Lorde section on silence or perhaps, stay silent for an impossible length of time.
- **Amplify:** Make more of what bothers, make it larger, stronger, longer, louder. If what bothers is how our bodies are crossed by the social, explore movement exercises to create interferences. If the issue is the ways in which ‘cancer silences mold our body’, make molds. Also, amplify the sound, the speed, the duration, the sequence.
- **Diffract**, disconnect. These can be attentional scores that require to notice and attend at the same time to multiple and impossible combinations, or for instance while guiding the practice, share instructions that make ‘no sense’, such as: smell your memories, listen to the sunlight in your cells or transit skin membranes.
- **Contrast-** juxtapose.
- **Slow Down**, to the extreme, and carefully attend. For instance, if you are asking about ‘waiting’, do a *mushido* exercise such as, “open your hand over five minutes”
- **Mirror.**
- **Insist:** Design practices that keep asking, How else?

Sometimes you might have a plan for the day, however, scores might also emerge as a response to a ‘situation’. Scores, as (well as) concepts, emerge from the ongoingness of the practice. Improvise scores on the go with a combination of the above (or your own) and keep in mind the principle of: **scoring inquiry!**

Search in your bag of tools, and pick up a practice: refer to your old dance class notebooks, ask your collaborators, attend a drawing workshops, follow a technique youtube channel. Look in a book of performance scores. Refer to your yoga class, or to that breathing technique you enjoy. Engage in a new practice. Or make something up. What matters in choosing a practice is that it can address some quality of the issue at stake, while insisting in the exploring of ‘how else?’

Share/ (Write down) your score. If you want to share your scores, make sure that each constraint/parameter offered by the score is clear.

In-Practice. Let each individual do their own exploration, and hone curiosity with prompts such as: notice what you notice, attend to before and after, observe how your body has been made different, how did this experience relates to [the original question], how this practice makes you think/feel/sense [the original question]. Continue asking questions. Open up possibilities for reimagining. Keep opening what a score can do in relation to the what a score can do. For instance, in Mexico, we practiced a molding score. Despite Lia proposed the score with a history of what it meant for her, during the practice, we honed the attention to each individual experience by asking question such as, notice how your body engages with the plaster, or attend to your skin and notice your skin making stories.

In-practice. Allow enough time for everyone to engage in all kinds of roles.

Let your scores go: put them into practice, facilitate them, partake in them, and allow for the scores to mutate as necessary. Avoid turning the score into a policing technique, the point is to create situated exploration, scores most probably will change and re-form as needed by the group/conditions.

Attend carefully to what emerges. Sense when *something* is being animated. *Things* presencing might be a subtle shift in the mood of the group, or the room; perhaps someone’s excitement, tensions and frictions around an issue, the tightness of layered fears, the felt-sense of unspoken presences, the thickness of an absence, a tingly touch of contagious pleasure, the anticipatory excitement of an unexpected coincidence. Attend to the subtle qualities of this unique animation

in the room and notice/make differences. Spend time sensing the differences made. Let the experience inform your making/knowing. Let *it* exist. Avoid covering it up with explanations, suffocating it with projections, or moving away from it too fast. *Make yourself different.*

Document. Take notes, draw, document, audio and visually record. Keep track of these moments, and the practice that aroused them. These are potential scores for your final pieces.

III. POSING

Practices for posing aim for a sharing that keeps democratizing what emerges. Posing happens in the spacetime of rehearsal within the group, after the practices, and it also happens in the posing of a final performance piece, opening to publics.

Open up a space of return. At the end of the practice, find ways of sharing what has happened. This can be an oral pop-corn, a drawing exercise or even a 2 minutes moving enactment of what happened by each participant. Circle-up. Collect thoughts, images, textures, moods in a pop-corn mode of open sharing. There are many ways of offering returns: dancing the day, making a visual sketch of what happened, returning the movement in a paper, free writing and sharing a few words.. you name it. Facilitate additional spaces (how else) instead of resolutory. Avoid explaining, classifying or making hierarchies. The sharing does not need to make ‘coherent sense’ either, it is “just” a practice to keep the group-knowledge building up, and to “pose” what happened, making room for it all, and also noticing the things that mattered the most.

Stress the individual experience in the sharing and avoid any ‘universal claim’ such as: when one does this, this happens, so this means that X is this way). Particularly if the return is ‘verbal/oral’, make sure to avoid making universals such as “ this practice makes us /anyone/ oneself think of-. Instead ask that everyone contributes from their own experience and transform the sharing into, my experience has been, this practice made me think of , This practice resonated with what I do/imagine/experience... Situate the practices within your experience and let everyone do their own.

Com-Posing Many. In the final stage of making a performance, or sharing your exploration with a larger public, aim to continue *posing inquiry, not resolution*. These are some tips on how to pick scores for your final piece:

Group edit. Collect practices:

Make a joint selection of the practices that aroused more intense, diverse, deep, surprising, or joyful responses. Let the editing process be a joint collecting of practices, and let everyone in the group name the ones they found more significant throughout the exploration.

Sit in a circle:

Wait for everyone to be there before making any selection. Keep everybody ‘in’. Make space for everyone’s proposition. For instance, in the making of the final performance on “my disease is an artistic creation” with Quimera Rosa, for the final performance we collected a series of actions inspired by the practices proposed throughout the laboratory.

Shape the mood and the arch of punctuation: Organize the selected scores and practices accordingly. The conversation emerging might shape the ‘tone/mood’ for the piece. For instance, in Barcelona, in the making of (*parenthesis*) we decided the order of the scores moving from practices that had opened up conversations on medicalized objectification of bodies and resistance to scores that brought up conversations on resilience and transformation. Or, in the case of Trans*plant, the final performance included documentation of Quimera Rosa’ entire process and the process during our rehearsal, and a series of simultaneous performative actions leading towards a culminating life hpv-treatment with the light-based- treatment we had designed through the diy/diwo (Do it yourself/ do it with others) protocol.

Consider as well the arch of punctuation²³⁰, I mean, decide if the piece will end up with a clear end (period), with a semi-colon, or perhaps a series of (. . .). In oncogrrrls I generally prefer to pose an open question. Sometimes it takes the form of a lingering breath and a poem (as in Resistencias Sonoras, 2015), sometimes it takes the form of an inviting proliferation . . . (as in Vademecum Poetico, 2016), sometimes it takes the form of a jarring sound on black screen (as in

²³⁰ I take this thinking of choreographic sequencing as punctuation from performance maker (Name)

Parenthesis 2013), sometimes it takes the form of an ongoing open score and the turning on the lights (as in *Cuentos de nos.otras*, 2017)

Take notes of the conversation and draw a ‘board’ or ‘map’ for the actions that might be a route/guide for your final performance. See for instance

Go over setting details: make joint decisions on the final setting for the performance and material components of the final piece (clothing, sound, lighting). For instance, in Zaragoza, despite we had been invited to perform in a cultural institution, we decided to finally perform in a space where feminist local activist groups meet.

Craft a final piece with exploratory scores.

Your scores are already charged with multiple meanings. You don’t need to explain them. Or narrate, or make them ‘make sense’. Allow the final piece to continue being an exploration for the audience. For instance, in Zaragoza, in the making of ‘cuentos de nos.otras’ [tales of us.others] after doing an investigation on uncertainty for over a week, the final live performance was a series of scores that summoned an uncertain feel for the audience.

IV. MODULATING

Modulating requires tuning into the process sensing the needs of the group and adjusting the practices, rhythms and intensities in response. Modulating is about being responsive to the group and the process to shape, accompany, fuel and sustain the arc of the process in its needs and goals. The arc of the rehearsal as a process of change and differentiation that occurs throughout the process is in relation to the different kinds of holding, arousing and posing practices. This practice is not only about having a bag of tools/scores to play with. One needs to *tune into*, and *modulate* the energies and modes of attention/production required in each kind of and part of the creative process.

How to know which kind of practice is required?

This question has particular answers, different with each process, which requires to be aware of multiple layers of production at the same time, and it depends on the particularities of the group ‘in-the-making’ (in process of transformation) and the constraints of the ‘making-of’ the piece²³¹.

In the making of the piece, some layers and questions to consider are:

Timespace constraints and preferences: when is the festival/performance deadline? Which time of day is better to shoot on a public space? If you want to perform in that CSOA/community art space, when is the space available and how will you adjust your use of the space adjust to the ongoing meetings and cultural events going on?

People constraints and preferences: Can everyone who wants to be in the final piece meet? Which are people’s availabilities throughout the process and how can you adjust the process to those? Is everyone on the same spacetime continuum? (for instance, in the making of *Vademecum Poetico*, I was the one travelling across cities bringing questions, scores and practices from group to group).

Your feeling for co-creation, at any stages of inquiry/facilitation/editing *inquiry/facilitation/*: Are you feeling overworked and need people to ‘step in’? do you notice ‘enough’ shared intention? Do you sense anyone aiming to ‘impose’ meaning or get it ‘right’? Does the sense of shared inquiry flow? Is everyone who wanted to be present, present in the editing/decision-making moments? Do you notice some ‘collaborators’ less involved in changing? Are you taking too much space or guiding/knowing too much? Does everyone share the same expectations of involvement? Is the initial question fully embraced within the group? Is anybody taking too much space?

Your feeling for ‘stickiness/stuckness’: is there any (cancer relations) issue bothering the group? unresolved? That could use some more practices for ‘how else?’ is there anything that needs to

²³¹ I am adjusting the words from the editors of the compilation *Putting Rehearsals to the test*, who speak of ‘rehearsal as oscillating between ‘the making of’ and the notion of rehearsal as something ‘in-the-making’

be addressed? Do you notice any unaddressed differences that are causing frictions in the group? Is the group solid enough to support emotional turbulence? Which are the expectations and commitments of the members for vulnerability and jumping into the ‘not-known’? Are these commitments known by everyone? Agreed upon? What is everyone’s commitment to ‘being undone’? Do you know where are they in relation to their expectations of the project? Have you talked about this?

Your feeling for readiness and ‘enough’. In oncogrrrls we have always had outside/major deadlines marking the end of the process. As oncogrrrls insists in the need of making a public performance- closing the process as a performative intervention into more-or-less public spaces as a condition of obligation, I have mostly modulated practices for posing according to this deadlines and the expected needs of editing for the piece. Some questions in this regard have been: is the group comfortable in the space of performing? Do we need to ‘hold’ the space within us? How much time do we need to pick/clarify scores? Is everyone who wants to be involved in ? Do we want/need to set stage/dress rehearsal?

These processes of making intertwine and push/pull each other at times, sometimes running on similar timespace lines, and sometimes not. This makes that transformational-connective practices (in-the-making) align or mis-align with performance pressures (the making-of), making holding/arousing and posing, not a lineal timespace process: sometimes you might need to *arouse* when editing (as in the case of the race chapter), or step back from arousing because the group is not held enough (as it happened in Madrid, in the multicities laboratory), or “pose” through an emotional turmoil (as it happened in the final performance in Mexico), or sneakily *arouse* (as in the case of the mold/molding chapter)

For instance, as we have seen in chapter 3, on scoring race, the timeline of the ‘making of’ the piece was running out (as we were in an editing stage for live performance the following day). However, the group/pro ‘in-the-making’ required to open-up one more instance of emergent/arousing exploration, so the structural-internal conflict could be addressed as a transformational practice. In this case, we ‘re-aroused’ the exploration to bring the issue into performance.

On another occasion, in the multicities laboratory (2016), arousing practices did not sit well with some members of the last group in Madrid, who responded with resistances to be ‘off-center’, to engage repeatedly with a painful memory, or to imploding instead of ‘healing’. A brief reflection, that deserves more space (perhaps a future chapter on this process?), is that there was something ‘off’ in the alignments within the ‘making of’ the piece *Poetic Vademecum* (2016) and the group ‘in-the-making’. Perhaps a lack of holding, perhaps too much pressure to pose the process. A not-enough holding, that’s for sure. We could work out some of these resistances by using the final performance as a space of psycho-magic dealing with the pains of the process.

In Mexico (2015), some tensions arouse within the group the day before the final shooting. There was no time to address these conflicts, and they seemed less ‘cancer-related’ and more pre-existing inter-personal issues. These tensions affected the atmosphere of the day of the final shooting, and the final ‘editing’ of the piece, in that very few people took the process of editing ‘on’. Gladly, the group was solid enough and the process was advanced enough that we could continue with the making of the piece until the end.

tune into and be responsive to the energy of the group/process.

Tune into the energy in the room/of the group/the process and assess: is it flowing, is it charged, is it low, is it disperse, is there a flowing exchange, can it carry on-continue, is it blooming? is it exhausted, can it be re/activated? Are there stagnant blocks? Is it ‘enough’ - Listen carefully, ask questions, check in with the group. Assessing the energies, together with your sense/judgement of where the process is and needs, will give you clues of which score/exercise use (how much of your own energy will it take to activate/arouse a certain issue? Is it now the right moment? do you need a posing or an arousing practice? Are you finding resistances or pulls toward different kinds of practices? What are these responses letting you know about the individuals and the process? Is the day over, are there still forces and excitement to continue, have we generated ‘enough’ material for the day?

Modulate

Modulating is not only about scores and tools. It is about excitabilities and the practice of affecting moods and intensities through exploratory art-making practices. Modulating is a practice that requires skills that go beyond knowing specific scores and tools. Modulating requires close listening, tuning into the energy of the group and assessing the needs of the process, and it is about creating experiences that alter modes and densities of attention, proposing structures that hold the process while adjusting to the individual and group needs at the same time. Attend to the group and to yourself. Attend to the level and kinds of attention within the group and suggest practices to sustain or create new modes attention and energetic intensities.

Shifting modes of attention between, for instance: soft gazing within the space, internal tracing/somatic, diffracted and focused. Soft gazing is a mode of attention that relaxes the visual focus and notices the field of experience as a diffused whole. An internal tracing/somatic mode is one that minutely attends to the tissues and structures within the body. Practices for a diffracted attention are those that split attention into many specific events at the same time, or that create micro-events of attention that blur/diffract the contours of ‘a whole sensed body’. A practice of this kind, for instance, could be offering a guided exploration that asks to attend to “what is going on in your ears, in the sole of your feet, at the far end of your vision, and in the memories of your skin”- or perhaps creating a constant flux of inside/outside imagination inputs. A focused attention would be honing the attention into one specific area of experience, for instance. Shifts in modes of attention can also be created by facilitating exploratory sessions that crisscross practices activating different motor and sensory systems. For instance, shifting between practices of blinded exploration, moving/dancing, drawing.

You might need training in modes of attending - expand your own range of modalities. Attend to attention. Attend to your own trainings, and to subtle changings. Attention shifts are subtle, yet noticeable when they happen.

Check-in, readjust, let go

Constantly check in with the group, reassess, be flexible with your plans. You might have arrived with one agenda of scores and practices for the day, yet, be ready to let it go in response to what is present in the group or what emerges during the practice.

V. Frictions and tensions

This last section is a bit of a ramp. I might need to change the tone and the way to address the issues, but I wanted to bring attention to some of the limiting constraints for on.co-creation that I have run into, particularly as in working within the limiting constraints of funding agencies, research institutions and the pull of individual recognition within the Arts.

On shared inquiry

Note for Artists/facilitators: Co-investigation in on.co-creation means to launch into a process with full openness towards not-knowing. It means being very present, extreme listening, giving all the energy in the moment. Being ready to contribute your practices and entering the process with minimal pre-fixed ideas of who the group is, or what is that matters to ‘make a piece’ about. Avoid jumping ahead with your own artistic visions or choreographies and meanings. Share your concerns and questions, as one more voice. Jump into your own transformation of cancer relations.

Note for Funding agencies: Embrace not-knowing in advance as a transformational promise of success. This might affect your funding assessment tools, particularly in asking for projects to fix questions and transformational goals beforehand. Include flexibility in evaluating/measuring indicators. Perhaps even open up a process of shared defining of these indicators with the group, as they might be different for each project you will be supporting.

Note for researchers: This is not the space to do research *about* the ‘diagnosed’ subjects while you remain ‘untouched’. This research is a space to undo yourself in co-creating *within them*.

On funding and distributing support structures

Note for Artists/facilitators: Find the balance between economic institutional support and autonomous self-management [gestion autónoma] that better fits the group/project. Money and production issues might involve not only pragmatic but also relational (ethical) questions. Run these questions through the group as much as possible, and set the parameters of sharing the resources as early as possible to avoid unequal economic burden.

For instance, in Spain, during the oncogrrrls multicities laboratory we decided to sustain the process with small economic contributions among the whole group, to cover for travel and small material expenses, instead of organizing an external funding campaign that would have taken an energy toll in all of us. This decision impacted on the possibility of documenting the process. On the other end, in Zaragoza 2017 the local group decided to apply for institutional funds. We opted for hiring professionals from within our affinity groups to document the process, and spending the budget in shared lodging and materials, as well as a stipend for artist/facilitators and the local producer. This economic distribution created a division that was felt in the different kinds of implications within the group. For instance, individuals acting as ‘technicians’ kept themselves at a distance, not fully getting involved in a personal transforming through the project, while the non-paid participants kept themselves at a distance from engaging in some of the production tasks. Institutional funding support, in this case, facilitated the documentation and production of the process, yet challenged engagement and shared responsibility over the process.

Note for Funding agencies: Let the group choose how they want to distribute the funding according to their aims and goals, as the economic flow will impact the possible relationalities within the group. Offer support from the start and aim to reduce the burden of conditional or partial support. Reconsider your assessment indicators accordingly. Perhaps, instead of assessing the value of your support by number of audience impact, include reflections on distribution on local structures and networks, or even, consider open indicators that each group can decide upon. There are groups making specific proposals on how to do this. Refer to: (ADD)

On expertise and knowledge making

Note for Artists/facilitators: Be aware of differentials in assumed and/or perceived expertise and how this might affect the process. Is the group taking initiative or are they letting you be a kind of only valid guide-as a kind of a ‘teacher’? Alter the conditions of the creation during the process, if necessary, to distribute the value of knowledge. Particularly, as an artist facilitator - which sets you up in a position of leadership and knowledge holder, be well aware that co-creation might need you to ‘not-know’ (and stepping out) so a space opens for everybody to stepping in and taking as much space/responsibility as the process would benefit from. In considering your position as a knowledge holder, consider that many other structural forces will

be at play (in relation to gender, race, ability, age, citizenship, etc.). Examine how your knowing might be preventing the group's ability to inquiry and to engage in co-creation.

For instance, in Zaragoza, after a few days of shared facilitation with Kevin, we decided for him to be absent one day. While he stayed working in one-on one craniosacral sessions with Patri, the rest of the group met as usual. The session that followed felt less expert-guided. His absence opened a vague space where everyone took on more responsibilities in collectively organizing the daily tasks. That day also opened an opportunity to explore the influence of gendered structures in knowledge making.

The community might not exist, will develop through the art-making process. (you included)

For artists/activist: on.co-creation creates community. Be aware that positioning yourself in either side of the artist vs. community order, might make folks feel patronized, infantilized or even abused. This is not 'integrative dance' or 'integrative performance'. "*You ain't trying to integrate nobody*". For instance, in the multicities laboratory, some local groups were extremely reluctant to collaborate with 'non diagnosed' artists or to collaborate with 'artists' from outside, in the reluctance to be placed in a position of 'group to be integrated' by the artist. On the other extreme, in the making of Parentesis in Barcelona, an artist who continuously framed the project as integrative dance ended up with whom we ended up having strong dis-encounters at the moment of crediting the piece as a collective endeavor.

For funding agencies: Review your calls for funding, and avoid demanding a clear identification of the community. Ask, instead, whose are the artists' networks, who has invited them or how will the artist reach out, and which kind of allies will the artist hope to engage with throughout the process.

For researchers: Be mindful that setting up fix parameters for 'a community' to be researched (on/with) is leaving out opportunities for intra-relational knowledge making and coalitional change. Besides, you are running the risk of coopting the experiences of others in the name of 'knowledge'.

Interlude vii. onco-creating



Figure 39 Preparing the shooting at the gardens of Xochimilco, Mexico, in the making of 'sounding resistances'. From left to right: Kani, Rox, Ana, Mafe, Libe, Caro, Lia



Figure 40 Rehearsing at CSO La Redonda, Granada. performers from left to right: Marta, Maria, Caro, Carol, La Calva, Victoria



Figure 41 Group circle, devolution in rehearsal. At centro Cuauhtémoc, in Mexico City. From left to right: Anna, Lili, Mariola, Mafe, Rox

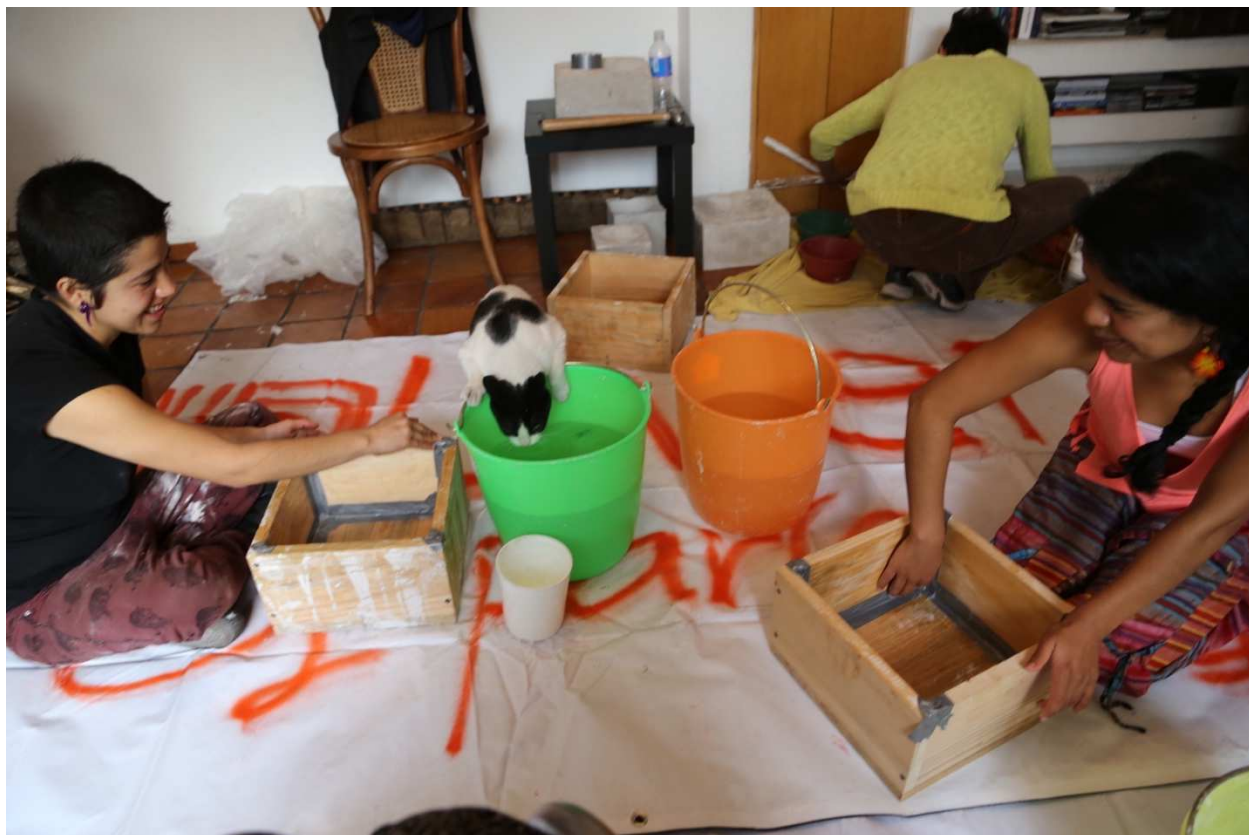


Figure 42 making molds. From left to right Rox, cat, Mariola, Líber

CONCLUSION

How might we open up, rather than foreclose what is possible to feel, notice, imagine and know in moving biomedical understandings of the cancer body somewhere else? What would happen if we treat cancer as an art inquiry instead of a biomedical certainty? How (else) might we open the kinds of bodies, coalitions and practices of care and justice possible if we stay in the uncertainties of the not-yet-knowing and unbecomings granted by oncological transits?

Rehearsing on.co-creation resists the lure of restitution narratives that isolate and flatten cancer as an individual-natural disease, leading to stigmatizing, unrooted, ahistorical, fragile, ‘de-worlded’ and disconnected descriptions of what cancer is based on (non-innocent) biomedical and corporate practice and research. Rehearsing on.co-creation brings the tools and practices of attention from movement, improvisation and art-making in relation with the attentional practices of social justice and transfeminist coalitional movements to *move the onco-body somewhere (else) and attend to what emerges*. This study brings emergent and coalitional and structural attention to insist in opening up new kinds of cancer/bodies possible. Rehearsing on.co-creation enacts a mode of survival art-making and adaptable justice, mining the potential for/in emergence and coalition in the oncological transits by *doing something about it and doing it together*.

First, my own (on.co-creating with biomedical phenomena) bodily transformations boosted studio practices of somatic attuning, and retrained my sensorium. Minute attention to bodily experiments emerged as a survival strategy of surprise within fixing narratives of cure and containment. And *transbodying* processes and mutant alliances overflow the confines of any orienting device (parenthetical metaphors, pink ribbons, beauty standards, family expectations, sexual orientations, . . .). Cancer and the political possibilities of not-knowing, and recognizing each other in the vulnerability of being *messy* (non-bodies, in transit, unknowable..) emerge as deep lessons for nurturing coexistence in not-knowing (and not trying to know). A gift from improvisation to live within the ‘split’.

Moving away from attempts at universal knowing, each question, situated in context, offers a line-through for the inquiry and an anchor to hold the cancer rehearsal as a transformative practice.

What are we waiting for? launched the first possible oncogrrrls residency, and my first attempt to coalesce and modulate somato-political modes of attention in art-making. This residency manifested the importance of 1. staying in the somatic experimentation (particularly when doing work with people trained in activist/discursive modes of engaging politics) 2. Posing performance as rehearsal (and posing confusion as generative of emergence). In this orbit, the concept of arousal as a mode of doing politics emerged from the thick practices of aiming to unsettle, animate and entangle cancer relations.

How do the silences of cancer mold our body? brought the opportunity to re-center politics as material inquiry in the experience. This chapter also invites a reflection on the different modes of producing bodies and politics happening at the same time. I noticed my own inclinations toward materialist/situated modes that imbricate the bodily doings. This laboratory also made visible *transposition* as a practice for enabling multiple curiosities.

What about race? offered a challenge and an opportunity to explore how to examine non-innocent political structures that divide us when we are in positions of unmarked advantage? keeping the exploration relevant and situated within the group and staying in the physicalizing of the exploratory practice allowed us to hold difficult conversations and manifest uneven distributions of structural support without resistances or fleeing away. I gathered many key methodological lessons in this rehearsal, such as: oncogrrrls might need to score inquiry from unfelt pains to keep exploring the bundles of health and politics that make cancer relations, mutual healing might be uncomfortable, physicalizing unsensitized cancer relations might need peripheral and situated ways of engaging.

As a Practice as Research, this study is also an exploration into *how* to make cancer relations otherwise through art-making. An interrogation of principles and practices into art and politics through the oncogrrrls laboratories. This study proposes a ‘cut’ into the lessons learned, so far,

into *rehearsing on.co-creations*. Chapter 2 introduces some key principles of rehearsal as method through vignettes of oncogrrrls practice: co-create! Stay in the body! Score inquiry! The principles crystalize (past and future) theories of change and transformation through oncogrrrls practice. Chapter 5 takes on the challenge of aiming to measure change and evaluating the doings of oncogrrrls. Taking on some theories of change proposed by social and medical sciences, as well as by the humanities and the arts, this chapter is one more irresolvable attempt at fixing knowledges (bodies, politics, care, coalitions) and proposes as a question, can we engage across differences through incommensurability? Chapter 6 introduces some specific techniques and tips from the practice that attend to the mechanisms of how rehearsing on.co-creation operates in ‘holding’ (creating containers), ‘arousing’ (generating material), and ‘posing’ (editing/forming) creative (transformative) processes.

As a Practice as Research the many lessons emerging do so through principles and practical approaches to on.co-creation as political art-making as well as through raising? figures and concepts. These tools emerge as conceptual and dramaturgical techniques. For instance, the notion of *transbodying* emerges as a somatopolitical technique for coalitional dissidence in the exposure of human variations. And *transposing and cosensing* emerge as situated variants for rehearsing material alliances: *transposing* emerges as a dramaturgical principle to rehearse on.co-creation with oncogrrrls (as a form of socially-engaged performance aiming at the making of new onco-relations), and *cosensing* as dramaturgical principle in working with more-than-human coalitions. In the making of conceptual tools and frames the notions of *holding*, *arousing* and *posing* also come forward as dramaturgical conceptual guides for transformative processes. These conceptual practices sometimes extend into other fields of knowledge, speaking with/across relations. Many more conceptual figures emerge in the processes of making new cancer relations: *molding*, *arachnid senses*, *chemo-caro-combo*... in a playful multiplication of material concepts to account for the variabilities happening in rehearsal, nothing more.

Rehearsing on.co-creation is a creative study on cancer justice in a coproductive (symbiotic?) relation with.in the arts and (biomedical) sciences. What improvisation practices in art-making and practice as research (as a methodology of Performance Studies) offers to cancer is the permission to play; the turning of discomfort into curiosity and the validation of *what else* as a

reality-making question. The orientation to exploration and the insistence in multiplication, and the possibility to stay in ‘just’ noticing what you notice, and the trust that ‘something will emerge’. What feminist science offers to this study on cancer variability is the insistence on the practices for making situated material phenomena, the clarity of perverse universal, deterministic, flat, inert bodies, and the persistence on natureculture imbrication and kin-making. What (transfeminist) social justice offers to rehearsal and cancer is the training on togetherness and structural vision, an (anticapitalistic) orientation to abundance, distribution, and mutual care. Cancer trains in exposure and messiness, in difference and alienation, in radical uncertainty and in noticing the force of live through the fear of death. What cancer offers is an extra-ordinary clarity into biomedical and cultural fictions of containment and the potentiality of deep intersectionality in the profound undoing of the fiction of the self -the biomedical, the artist, the normative, the gendered, the racialized, the One self. Might rehearsing on.co-creation be a tool to notice that we all have cancer while creating just practices for mutual care.

I am moved to pose this conclusion as an invitation to *how else*. An invitation to insist in the peripheral (and other kinds of) attention that we might need to make cancer a bit less about the self, and a bit more about ecologies of nurturing togetherness. An invitation to create spaces of *co-sensing*, and noticing what emerges. A bit less structured, a bit less oriented to completion, a bit posing in relation. *How else?* is an abundance-oriented question towards imagining more possibilities for care and coalitional art making in cancer justice. *How else? Where more? With whom more?*

onco-drag

Inspired by Preciado’s *Testo Junkie* I notice my desire to move from oncogrrrls to onco-drag. It comes from realizing that while the grrrls invites gender rage and lineages of art/punk/feminism that bring some people ‘in’ (mostly women who feel at rage), I also notice the edge of the feminine operating in limiting the ‘kind’ of people who feel called in and the strain on the coalitional potentiality of cancer. While oncogrrrls has called in women and queer individuals, it

has remained, so far, in the realms of racially unmarked, non-migrant, housed, non-carceral and medicalized individuals.

As I write and talk about the project I also notice the pulls of recognition and my own resistances to set possibilities. From editors, critics and curators I sense the force of individualization of the project as a ‘cure for ‘feminized’ individuals. While sometimes in resistance to biomedical or gendered cooptation, it still does not seem to do the work of entangling cancer relations as a matter of coalitional justice, or opening the jar of ‘the self/subject’ into ecological modes that also undo the pull of the human? How do I open oncogrrrls to a process of cancer dissidence that centers the coalitional potentiality of the transit/rehearsal, aiming to do work that insists in crafting relational, mutant, and just modes of undoing ‘extractivist cancer-health/norms’ while co-creating forms of nurturing care?

I wonder if *onco-drag* would do the trick. Dragging ‘onco’ away from the fiction of individualized human experience, and into noticing the materialcultures pulled by the practices of (self) defense and wars on cancer. Drag-king/queen reveals gender normative fictions and (re)makes them from the experimentation in shared spaces. As the possibility that improvisation and bodily experimentation with cancer softens some of the normative biomedical and cultural grasps on cancer, I imagine the idea of opening individual cancer relations into a practice of ‘onco-drag’. Or perhaps it is about staying here on.co-creations as cancer justice. I just miss the dissident quality in the naming.

Cosense, we are already silkworms

This is a project I've been doing for the last three years, thinking and living and being with silkworms. Since 2019 I have been raising silkworms, learning with their movement and silk-making practices, and opening their lessons to artistic collaborations with friends, artists, writers. This project is figuring itself out in the *sensing with others*. This project has already had some manifestations, pre-covid, then it stopped. Too much dying and too little co/sensing. Yet, as dissertation takes form, I am excited to continue exploring. There are some meditations, some visuals, some practices and some intentions to continue playing with others, and textures of weaving together as a form of mutual care while staying in dying.

Co-sensing, we are already silkworms emerges in relation with Annie Sprinkle and Beth Stephen's project the *Ecosexuals* and with Quimera Rosa's project *trans*plant, my disease is an artistic creation*. The shared timespaces in rehearsal become an impulse to move cancer in relation to soil, water and more-than-human on.co-creations. This project has been in residencies in Mexico - with a group of artists-scholars working in 'Direct Action & Art Clinic' convened at the Hemi Encuentro 2019 by the hemispheric institute of performance and politics-; in Northampton- trying shared choreographies at the School for Contemporary Dance & Thought with choreographers and audiences-; in Bourges France, within a group of artists and thinkers for more-than-human speculations convened in the pollinACTIONS ecology within the rencontres-bandits-mages in 2020; and in zoomland, with a group of artists, thinkers, healers writing speculative science fiction with medicine plants. For a window into some of its 'doings', see the appendixes to this dissertation.

This project, raw and formless, aims to continue doing something about 'it' with others. The 'it' is in formation as I/we learn from silkworms and humans. It has something to do with learning with "bombix mori" (the Latin name that entomology gives to this insect species) also called *white seductress* about how to live in sync, in inventing new forms of silk-making together, in transforming within precarious structures, and gathering what we need to face extinction. It aims to address death and transformation, to make ceremony, undo the human, most probably work to find some sort of radical softness, an openness to being messy and together in the undoing of structures of colonization and racialization that cross unmarked bodies. Some questions emerging: What else do we need to let go of? Which protective skins? Which promises of growth? Which seductions?

Transfeminismos y Salud. A call to the alliances in mutual care and justice

Inspired by the work in *transfeminismos, Epistemes, fricciones y flujos*, taking some of the lessons of this study and prompted by the horror of this year of bundling health and politics through isolation, we propose a compilation of textual offerings for doing transfeminist ‘health’. A co-edited book that is on-the-making, with an expected launch date of December 2021 with the editorial Txalaparta. An invitation to re-engage with many of those friends doing collective justice work in Spain, through a lenses of mutual and collective care. An intervention bringing the coalitional force of somatopolitical dissidence in book form. See the table of contents of what’s coming.

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17. Interview with Dani Demilia, radical tenderness and de-inmunization practices as healing
18. Timeline of transfeminist health . Gender Hacker

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