DISABILITY STUDIES

INFORMED CREATIVE WRITING:

CARE NOT CURE

A Thesis

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This Thesis for the Master of Arts Degree
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INTRODUCTION

Creative writing can be defined as care work. In defining care work, I must first understand what it is not. Care work cannot be self-help and cannot support a western capitalistic "pull yourself up by the bootstraps" mentality. As a white cisgendered heterosexual American male, I must make sure that my creative writing is informed by disability justice principles and the goals of my project be led by relatability and inclusivity. Creative writing is more exploration than elixir but when the project connects to a community through storytelling, catharsis can be possible. In recognizing my privilege, I might aim to amplify the legacy of seminal disability justice work like Leah Lakshmi Piepzna Samarasinha's "Care Work" rather than to appropriate it. I must express in the most certain of terms that my understanding of my own experiences as a disabled bodymind are insufficient without the scholarship, experience, and theoretical framework that was established through the labor and sacrifice of people more marginalized than me.

My work here is out of gratitude and in an effort to add to and be a part of an already invaluable resource manifest in community. I believe that the process of creative writing that pulls from experiential data, research, and imagination and is then shared publicly can have a healthy communal effect. In this thesis, I consider creative writing as an entry point into a larger discussion about disability studies and disability community as opposed to a conclusion. This is an invitation to a discussion about my experiences primarily with mental health and trauma. The thesis is an examination of process over results that will include two creative chapters and a reflection essay.

Creative writing that is informed by Disability Studies and buttressed by diligent research and scholarly interrogation can be a dialectical process. The dialectic can assist with any impulsive or unconscious leanings towards the “overcoming narrative” so omnipresent in mainstream disabled stories. In having this writing be governed by disability justice principles conflict is inevitable but instructive. In this conflict new ideas and approaches will emerge and be reflective of my greater collective education in the humanities. What it looks like to be a part of something as opposed to what it looks like to be productive. And to be in service to those that have sacrificed and continue to sacrifice more than I ever could.

The creative writing process must rely on an individual imagination but in order for creative writing to be cathartic and thus become care work it must be shared openly in a spirit of community, vulnerability, and humility. Telling stories that are committed to bolstering similarities not differences, while also remaining true to an individual experience, can become othering when the focus shifts to the latter. Disability Studies is the foundation of how my story should best be told. “Nothing about us, without us” through the wide filter of the humanities to which I owe far more than my degrees. In many ways I owe my life to the humanities and my gratitude will be reflected in my effort.

This thesis documents and examines how the process of creative writing—as informed by the field of Disability Studies with the expressed purpose of doing care work—will manifest in a creative nonfiction memoir about the experiences of a disabled body-mind. In using Disability Studies as a lens through which to look at a disabled bodymind’s story as a subject, the process transcended a singular vision, or one person’s particular experiences, and became a collaborate-inclusive effort that is committed to care for the subject of the memoir, the disability/crip community en masse, the burgeoning field of Disability Studies, and all of the research and work and people that came before. This endeavor (both the Master of Art thesis and the creating of the memoir, “becoming blue”) is a part of a greater disabled experiential whole. There is no “blue” without Disability Studies and the humanities. There is no “blue” without the sacrifices of many marginalized people that I will never know.

The project of the thesis and the continued writing of a memoir aim to synthesize one person’s specific experiences as a disabled bodymind with a better understanding of a few fundamental tenets of Disability Studies such as representation, stigmatization, ableism, disability justice, the social model of disability, and Narrative Prosthesis. The memoir, entitled “becoming blue,” is as much a story about my experiences as a disabled bodymind, in the strictest storytelling sense, as it is a narrative that becomes a vehicle for learning and understanding what disability means in more pronounced terms. To define the project as care work it is best understood for what it is not, for what it cannot be, and that is self-help.

“becoming blue” is decidedly ***not*** a self-help book. “becoming blue” is an intimation and recreation of what it looks like to ***not*** be “able” to help yourself and to not be supported by a community that focuses on care.

This thesis will include a literary review noting attributed scholarship, two chapters of what is growing into the creative nonfiction memoir, “becoming blue” and a reflection of the process. The focus, every step of the way, is care. In that spirit this project is best regarded as a collaboration and a culmination. A true exercise in the humanities.

LITERARY REVIEW

I. Overview

In a 1963 interview, acclaimed playwright Arthur Miller said,

> “[we treat] suffering as a mistake, or a sign of weakness, or a sign even of illness, when in fact, possibly the greatest truths we know have come out of people's suffering. That the problem is to not undo suffering, or to wipe it off the face of the earth but to make it inform our lives, instead of trying to cure ourselves of it constantly or avoid it”.

The idea that suffering is an undeniable part of life is neither novel nor Miller’s creation, however, this answer was in response to questions about Miller’s creative process and the suicide of his ex-wife Marilyn Monroe, as well as some of his animosity towards psychoanalysis. His response is instructive for both understanding my thesis’s aims and the creative nonfiction memoir “becoming blue” I am writing. The way Miller uses the word, “cure” in this context carries a greater gravity as it implies an erasure not unlike how suicide and suicidal ideation is implied as a solution to the suffering endured throughout the course of my life.

One of the central themes of my memoir, “becoming blue” is suicide. I first became obsessed with the idea of suicide when I was 8 years old. My compulsion for self-harm, para suicidal behavior and struggles with suicidal ideation have long been presented to me as symptoms of my mental health condition(s). My “disorders.” I have been diagnosed with Schizoaffective Disorder/Bipolar Disorder Type 1/Major Depressive Disorder/General and Social Anxiety Disorder(s)/Agoraphobia and Post Traumatic Stress Disorder. In the memoir I will make no mention of any specific mental health diagnosis in the narrative. I will write about how those symptoms look and feel like in the action and details of my story. I will write about how those symptoms are not solely attributed to my mental health but more so how my environment treated me because of them.

The reasoning behind not specifying any diagnoses by name is in direct response to Disability Studies and my understanding of the medical model of disability. The medical model of disability historically uses specific terms and named diagnoses to medicalize human subjects. The medical model of disability presents diagnoses as problems in need of solutions. Diseases in need of cure. Disorder in need of order. The medical model calculus is similar to how suicidal ideation has manifested throughout my life—as a solution to a problem. Suicide had become prominently situated in my day-to-day decision making as an answer to the questions of what is or what is not, perceived to be, a life worth living. Suicide as a concept, suicidal ideation, suicide attempts, and treatments are all considered and are interwoven throughout the tapestry of "becoming blue."

One of the conflicts of my life, and in my story, is that I had to confront my relationship to suicide and the fact that suicide was often considered to be a ***cure*** for my suffering. And this suffering, I believed, was a result of what would amount to me being a disabled bodymind. Suicide as a solution has even been romanticized so much in our culture that it is a commonplace solution to not only end someone's own suffering but to ease the burden of those that might care for them.

According to a study published by the American Journal of Preventative Medicine from August of 2021, "Results showed that people with disabilities were significantly more likely than those without disabilities to report suicidal ideation (AOR=2.13, 95% CI=1.93, 2.36), suicide planning (AOR=2.66, 95% CI=2.27, 3.11), and suicide attempt (AOR=2.47, 95% CI=2.05, 2.98)." This data coupled with the fact that in just the past 3 months (December-February 2022-

2023) without seeking out such specific content--I have seen 3 visual medium art pieces—the films *Aftersun*, *Decision to Leave*, and *Martin Eden* and the television show *The Last of Us* that have all depicted suicide or assisted suicide as heartbreaking, yet triumphant, acts of compassion and as ostensible ends to suffering. As solutions.

I would argue that such depictions are so romanticized and so commonplace that it is an accepted and, for some people, a noble practice, a noble solution. I believed, for a time, that it was noble, and I romanticized it myself. My love affair with writing began with writing suicide notes, that I would usually end up burning, when I was 12 years old. I did not realize that practice was cathartic and were the seeds of this project, planted 30 years earlier. I would also argue that it is ableist to think suicide is a solution and my struggles in thinking suicide is a solution, or in any way as a cure, are in part due to my own internalized ableism.

The relationship the disability or 'crip' community has with the concept of ***cure*** is fraught and contentious and in no way is it a consensus or monolithic which compounds my personal conflicts. The notion of cure is associated to both erasure and with ableism, internalized and otherwise. And in my own relationship with suicide, I was being ableist in thinking my life was not worth living. Or, that my life would be if I didn't have serious mental, and later, physical health problems. Or, that my life would be if I were "able" to produce on the level that my family, community, and society demanded that I did under capitalism. It was not until I found solace and education and solidarity with the 'crip' community by way of Disability Studies did I start to learn and to believe that my life was worth living.

A not uncommon mantra that is a part of most disabled lives, at some point in our journeys is that "no one understands" or that no one is listening, that our voice is not being heard. I believed this for 4 decades, but I was wrong. I had to learn this. Community and care and even catharsis exists outside of the myopic capitalistic logic that dictated every aspect of my life since I was a young child. Not asking for help is a part of this. Privilege is a part of this. Growing up in an environment that demanded productivity over care is a part of this. Believing that my life was not worth living is a part of this. I needed an education. The humanities and Disability Studies introduced me to one. A pandemic introduced me to one. #DisabilityTwitter introduced me to one. But before anyone could listen to me, before I had anything really to say, I had to listen to other disabled voices.

Disability activist and author Eli Clare and his book *Brilliant Imperfection* proved required reading for me to come to terms with some of these contradictions and ignorance. In *Brilliant Imperfection* he writes about his friend in a way that jolted me, that changed me, that educated me and welcomed me into a club I had no idea had existed:

> "The details of your death haunt me. You had checked yourself in. You were on suicide watch. I imagine your desperation and suffering. I know that racism, transphobia, classism colluded. The nurses and aides didn't follow their own protocols, not bothering to check on you every fifteen minutes. You were alive and sleeping at 5:00 a.m. and dead at 7:00 a.m.; at least that's what the records say. Did despair clog your throat, panic coil in your intestines? In those last moments, what lingered on your tongue? I know about your death as fleetingly as your life" (Clare 64).

That book and that passage changed me emotionally, elementally. It also changed how I understood cure and, more importantly, care. I was 46 years old, and I did not fundamentally know what care was.

I had to start with the basics in Disability Studies and that means the medical model and then the social model. The medical model of disability is largely defined in the reduction of an illness in search of a cure. In "*Disability Theory*" Tobin Seibers writes, "The medical model defines disability as an individual defect lodged in the person, a defect that must be cured or eliminated if the person is to achieve full capacity as a human being" (3). A problem in search of a solution. Creativity, and in this context, creative writing, can be an antithesis to such cure seeking, but the way I was initially approaching this project was more in line with the medical model and I was, ostensibly, seeking erasure, and not seeking catharsis.

Creative writing is in no way to suggest an alternative to professional help, but it is a helpful tool to process, to better understand, and to ultimately share one's experiences. Disabled author and activist Harriet McBryde Johnson writes in her book *Too Late to Die Young*, "Stories are the closest we can come to shared experience" (225). She called it a "survivor tool." There can be catharsis in the process of writing creatively and especially with sharing the work, the ideas, but I needed to better understand different models of disability first.

After all, ideation is a formation of ideas and concepts and when used constructively there can be a catharsis. The preoccupation with ending my life is dominated by the phenomenon of intrusive thoughts which operates in a similar, yet destructive fashion. The stakes are higher, and the connotation is different, but the impulses are very much the same. The healthiest way to challenge these thoughts, for me, is to put them on the page and examine them outside of my head. Therapist after therapist for years have suggested to me to write about my experiences but I was terrified to look at them and I believed that conjuring them would destroy me. I found quite the opposite to be true.

On the page they became validating and reinforced what Philosopher Jiddu Krishnamurti once said, “It is no measure of health to be well adjusted to a profoundly sick society.” What I was feeling was appropriate in the absence of care. In the face of harm. From there I am better capable of differentiating the true from the false. What is harmful and what is destructive versus what is care and constructive? And it was there where Emily Dickinson appeared: “Much Madness is Divinest Sense” became the beating heart of my creative writing in how beautiful madness might look like on the page and outside the confines of my overcrowded mind. I remixed some of Emily Dickinson’s poetry throughout my memoir in a creative homage to what a beautiful ‘mad’ mind is capable of creating and I also used her words to mimic how intrusive thoughts work. My creative writing is mine and a reflection on my experiences, but also, it is a result of all that came before me and influenced me. This revelation changed me and changed my approach and changed this project. It became about the process and not the results. It became about seeking catharsis through creative writing.

Through creative writing stream of consciousness exercises I started to see patterns: I hated my illness therefore I hated myself and to end my suffering due to my illness I must end my life. This was the calculus of suicidal ideation that I had been operating with since I was 8 years old. Obviously, there was something “wrong” with me and absent any “care” the cure was to end my suffering by ending my life. In this writing process I recognized that it was less how I felt, physically, mentally, or emotionally--but how the world met my suffering. Without care. I did not realize it, initially, but the social model of disability would help give this revelation clarity and language. It was in this scholarship, particularly in Tom Shakespeare’s essay on the subject, which I will discuss below, that I started to discern the difference between impairment and disability. Once I better understood this from a theoretical framework it started coming through, organically, in my creative writing. The challenge in the creative writing then became, and remains, to express the causes and conditions of my suicidal ideation not my diagnoses. How to express that without medicalizing myself and reducing my experiences to diagnosis and symptoms.

Considering creative writing this way is intently *not* to think of it as an effort to escape from any inevitable suffering *but* aspires to foster connections through relatability in meaningful ways that "inform our lives" as Miller suggests. And this project also posits suffering as not only universal but less "othering." Examining how suffering works in the most emotional relatable sense through story, independent of impairment, helps to create a thread where one does not necessarily need to be mentally ill or disabled to see how disability is considered.

A. THE SOCIAL MODEL OF DISABILITY

The medical model of disability uses the language of the sick and the language of need and exclusion and is an extension of the dehumanizing language of capitalism in the form of problems, solutions, productive, non-productive, useful, useless. When someone is medicalized, they are often reduced to their diagnosis. Tobin Siebers writes,

> "The medical model defines disability as the property of the individual body that requires medical intervention. The medical model has a biological orientation focusing almost exclusively as embodiment. The social model opposes the medical model by defining disability relative to the social and built environment arguing that disabling environments produce disability in bodies and require interventions at the level of social justice" (Siebers 25).

In being reduced to their illness, disabled people become something that needs to be cured. In addition to the mental health conditions that I previously mentioned I have also been diagnosed with a number of migratory physical comorbidities that have (presumably) resulted from an undiagnosed untreated Lyme disease infection when I was 14 years old. These issues include but are not limited to Degenerative Disc Disease, Rheumatoid Arthritis and Hidradenitis Suppurativa and a few “less severe” conditions like psoriasis and radiculopathy. Of course, there is a lot of overlap with all of these conditions and the main reason why I choose to identify as a disabled bodymind but these lists of impairments can also reduce me to a patient, client, or consumer. All things that I have been referred to over the past 20 years as language has evolved and devolved.

However, being “medicalized” is dehumanizing. And according to the medical model being “medicalized” translates my humanity into a list of problems in need of solutions, and honestly, for most of my life that is what I have felt like. Better understanding the medical model helps me better understand my struggles with suicidal ideation, how we romanticize, reduce, and justify suffering as noble in society, and how my own internalized ableism manifests. How I have hated myself for not being “able” to fit in and follow orders. Orders dictated by capitalism and family, friends, and associations that are governed by the same principles: the principles of production.

Rosemarie Garland-Thomson writes in her article, “Disability and Representation,” “Our society emphatically denies vulnerability, contingency, and mortality” (525). I never felt allowed to be vulnerable, that there was an alternative to my pain and suffering, and that suicidal ideation as spurred on by symptoms of depression, anxiety, paranoia and mania reinforced by a world that suggested my life was not worth living. This absence of care is not only reductive and dehumanizing but being a “problem” finds care in solutions that are, objectively, not care. Solutions that look like numbing with alcohol or drugs. Solutions that look like running away from relationships and society and staying isolated. Solutions that look like institutions. Solutions that look like suicide. To understand the medical model is to personalize it and to move away from it. The social model is the next step of progression in looking at Disability Studies critically.

Disability Studiesresearcher and writer Tom Shakespeare explains in his *The Social Model of Disability* essay, “That an individual impairment differs from the social construction of disability that might surround that impairment” (196). The mere mention of “social construction” can be met with derision or as a rhetorical cop-out, but to personalize it, as I am attempting to do with my creative nonfiction, can give it life and connectivity. In “becoming blue” I write about my experiences being abandoned and assaulted at a military school when I was 12 years old. Both being left there and then being assaulted numerous times while there is framed and justified as results of my “behavior.” The “social construction” is the entire apparatus and culture of how my impairment (the underlying causes and conditions of my “behavior”, my mental illness) was met by society--my family, the school, the other cadets, the community at large. My mental illness, my impairment, was not what was causing me harm. The reaction to it was. An argument can be made that the social construct is capitalism itself and the expectation of productivity from cradle to the grave that accompanies it. When this socially constructed order is met with disorder the disorder is labeled a disruption and marginalized, set aside, and not deemed to have enough societal value. When I was 12 years old, I was the disruption and in my creative writing I aim to recreate and share that experience as viscerally as possible. The social model of disability is more difficult to understand when considering invisible and mental illnesses so it was necessary for me to situate myself in the framework.

The social model is not without criticisms but it helps to center the person that is disabled and understand that the disabled person is not the problem in need of a solution. The impairment, illness, disease, diagnosis, and more importantly the person is not in and of themselves the limitation. Shakespeare argues that society's lack of accommodating disabled people in the way it's constructed, and the attitudes often associated with the construction are the greater limitation. Disability Studies scholar Tobin Siebers continues in *Disability Theory*, "the social model challenges the idea of defective citizenship by situating disability in the environment, not in the body. Disability seen from this point of view requires not individual medical treatment but changes in society" (73).

In "becoming blue" I write from the perspective of a child that suffered through abandonment and abuse and neglect that were not exclusively, but mostly, punitive measures for behavior that was considered abnormal. In these environments, by the people in power, I was treated like a problem that needed a solution. This connection to my struggle with suicidal ideation is very clear, now. It wasn't always. I was raised in an environment, (or more accurately--two separate environments—my family home and military school) that caused me far more harm than offered up any contingency of care although both institutions would likely argue otherwise. Nevertheless, both of these environments reinforced my core belief that I was the problem.

Obviously, these environments and the absence of care most certainly worsened any biological or physiological brain chemistry issues that preexisted any acute damage. The cure, here, undeniably was worse than the condition. The cure, or I would argue the results of an attempted cure, created new challenges such as constant stress, anxiety, what we think of as arrested development or immaturity, and were contributing factors to the complex trauma of an onset of Post Traumatic Stress Disorder itself. It was the environment, and thereby the absence of care, that was more disabling to me than any, later, specific diagnosable impairment. Emily Ladau writes in *Demystifying Disability*, "I can attribute my status as Disabled to an environment that isn't wheelchair accessible, rather to my medical diagnosis" (39). With mental illnesses and other invisible disabilities, the same logic applies to any non-accessible spaces. This can be easier to deny but it is also an opening for wider inclusivity and creativity in understanding what defines accessibly. Care and therefore the absence of care counts.

The social model of disability understands that diagnoses are valid and need professional medical care, but it also acknowledges that the environment--in this case not only the absence of care but actual harm—contributes to how disability is understood and created and treated on a macro level. The lack of understanding, the lack of empathy, the lack of access to appropriate care, and the harm/abuse/neglect are all considerations in understanding the social model apart from the signs, symptoms, diagnosis, and professional treatment of mental illness as a health condition. Learning this was not just an educational revelation to me but a philosophical one. I felt less broken, and as such, I felt implored to write about my experiences in a way that spoke to this epiphany directly. I did not leave military school when I was 13 years old thinking or believing that I was disabled. In fact, I did not come to accept, to own, and to identify as a disabled person for another 30 years no matter how acutely some of my symptoms might have presented. My constant struggle with suicidal ideation, often in the form of intrusive thoughts, is how these symptoms have most succinctly and consistently manifested. And the denial of my symptoms as actual symptoms rather than suggested solutions was a direct result of me believing that I was a problem. The problem. If anything, I left that place believing that asking for help when my symptoms would present would be met with punishment. The more severe my symptoms became the more I feared asking for help.

It is important to note that the year I was dropped off at military school (1987) was the same year that Pennhurst Asylum, or what was called the *Eastern Pennsylvania State Institution for the Feeble-Minded and Epileptic,* was closed. A healthy fear of being left at a place like that and being mistreated and forgotten about was very real and stayed with me for many years.

Suicidal ideation as a symptom of a brain chemistry or biological/genetic issues can be attributed to a diagnosable mental health condition(s) but could be reduced to symptoms and solutions if observed though a strict, outdated medical model (or individual model) of Disability. Suicidal ideation can also be an effect of someone desperately in need of care and not finding it, or worse, finding the opposite,--harm. Seeking care and finding harm in a specific environment such as the home can create a pattern of not being able to properly identify care in a larger environment or out in the community/society as a whole that can be akin to parasuicidal behavior such as seeking drugs, alcohol, sex, gambling, overeating, overshopping and engaging in toxic and abusive relationships and mistaking it as care. Even seeking care in the form of institutions themselves i.e. prisons, rehabs, psychiatric hospitals, homeless shelters, halfway houses etc. seems rational. All of these measures of seeking care are a relatively relatable human experience independent of being disabled or not. Almost everyone can relate to seeking care and being met with harm on some level at some point in their lives. Such a phenomenon could be a bridge for a larger intersectional dialogue about Disability and another way that this project is important. Accessible storytelling is how we relate. The more we relate the less abnormal disability is; the less stigma that will be associated to mental illness and disability in general and the more this work looks and feels like care.

One of the social model's most problematic limitations and a fair critique is that it focuses more on-systems-e.g. the social constructions, than the individuals affected by them. In my case, long before I had the language to articulate it, a medical model of disability understanding of my mental illness allowed for a convenient place to seek black and white solutions for black and white problems. Transcending this instinctive binary way of thinking is most productive when it leads to something approaching the social model without losing sight of the individuals and from there the social model can develop into more dialectical and inclusive and creative frameworks. There are clear parallels between the progression of the disability models and my own personal journey with mental health care and recovery.

The social model of disability can blur necessary treatments for the individual and care can get lost in an abstract criticism of systems and constructs. Working some of these conflicts out through creative writing has been a painful but illuminating process. Translating jargon and theory and models into an effective narrative for an audience is especially challenging but has forced me to better understand the concepts. Avoiding oversimplifications in the storytelling is of paramount importance because it is easy for any nuance to be lost and the story itself would then be less effective and less relatable A fundamental implicit understanding of the social model helps inform the kind of story I want to tell; the way I want to tell it. But it is only a beginning of a process.

I contend, again, that the emphasis of this entire project needs to be on the process as opposed to results. It is about contributing intelligently to an ongoing conversation rather than seeking simple solutions to complex problems. My work here cannot only be defined as a success insofar as how complete it might be but as how authentically it is presented. My story and my disability are neither complete nor convenient so this project should reflect that honestly. Any illusions of magical resolutions are unfair and intellectually dishonest. Understanding the concept of *Narrative Prosthesis* and the problematic commonality in disabled stories with "overcoming tropes" will prove to be essential and buttress the aims of authenticity as well.

B. NARRATIVE PROSTHESIS & "OVERCOMING" TROPES:

There are myriad traps and tropes to be mindful of when writing about disabled people, such as: the magical resolution, feel-good inspiration tales, teaching abled bodied people about perspective in the form of: 'at least you're not as bad as...' the resilient 'pull yourself up by the bootstraps' rugged individual cliches, the disabled outlier as an example or exceptional, and of course overusing metaphor. David Mitchell and Sharon Snyder's work on the idea of *Narrative Prosthesis* is an essential entry point text to understand how to avoid using the disabled experience as a further "othering" experience. For many disabled people, identifying as disabled is a core defining characteristic. It is how many choose to identify in the world, and it is a way of taking ownership and having agency in the face of a society constructed to block them out at nearly every turn.

There is an impulse to write about the disabled individual (or community) as special, different, or abnormal in ways that are exceptional. This framing of the disabled person(s) as exceptional, even or especially when well intentioned, does a disservice to the subject(s). In the case of "becoming blue" the subject is me. I must frame my story in a way that is relatable, yet still my own. My story cannot be another explicit separation from society even though part of the story itself depicts me being dropped off at military school. Threading that creative needle is challenging but when done effectively it can be all the more rewarding. Me being left at a military school as an ostensible treatment or punishment for my mental health i.e. my behavior is one way of marginalizing disabled people *NOT* an exceptional way.

Telling the story of a disabled person that falls into the 'overcoming obstacles' trap undermines the greater challenges that disabled people face as a whole in terms of systems and social constructions, but also denies the reality and the commonality of disability. According to the CDC there are 61 million disabled people living in the U.S. That is 26% or roughly 1 out of every 4. These facts are inconvenient for much of how disability is used in literature and on film or television depicting disabled people as always exceptional and abnormal. The way that I have been treated is not exceptional or abnormal for how disabled people have been treated are continued to be treated it is just specific to my experience. It is only exceptional to a "non-disabled" or able-bodied person. However, nondisabled and disabled people alike are familiar with military school as a threat. Usually, for behavior.

In *Narrative Prosthesis,* Mitchel and Snyder write that disability representation in literature are often represented in one of two ways: "first, as a stock feature of characterization and, second, as an opportunistic metaphorical device" (205). A person's characterization as abnormal or exceptional in some way simply because they have a disability is a most common trope. The inherent conflict and obstacle are the disability itself and not the conflicts and obstacles outside the disability necessary for effective storytelling. This form of storytelling is generally reserved for non-disabled characterization. This formula suggests that nondisabled people get to face conflicts and obstacles that disabled people do or cannot. As if disabled peoples only conflict worth writing about is disability. A person is reduced rather than represented. In “becoming blue” the conflict is the absence of care. Disability, mental illness, institutionalization, and suicidal ideation are all parts of my story but not the central conflict.

The scary villains that are disabled and often disfigured is commonplace and obvious and lazy but a more insidious and perhaps more dangerous rendering of disabled people is of the overcoming, resilient type. A disabled person that exists for the audience's perspective. A disabled person for the audience to pity, compare themselves to, and root for. Disabled people used to engender sympathy from the audience rather than empathy that manifests in a mentality that suggest the audience's life is somehow better because they are not disabled and that they should be grateful they are not in the situation that the disabled character is. This positioning often leads the audience to rooting for the disabled person to overcome their disability. This is true for all disabled people but especially true for mental health disabilities and mental health representation. “Severe” mental health diagnoses are often implied to be punitive sentences and suicide is offered up countless times as a solution. The clearest embodiment of medicalizing characters and the medical model of disability. If disability is a problem in need of a solution, mental health is a problem in need of a solution and that solution is institutionalization or suicide. Results that often get translated as lives not worth living. Being diagnosed with schizoaffective disorder is one of those “oh shit” diagnoses that is widely misunderstood but just as widely stigmatized. As familiar as people are with the threat of being sent to military school, they are with the term “schizo.”

Catherine Prendergast’s *The Unexceptional Schizophrenic* was an important scholarly source in seeking to better understand representation and *Narrative Prosthesis* on a larger scale. In “becoming blue” the diagnosis of schizoaffective disorder or any specific disorder other than P.T.S.D. is never mentioned in the narrative. Only causes and symptoms. Schizoaffective disorder is a complicated diagnosis and the language and terminology around the diagnosis is connotative but while it is among the most stigmatized and misunderstood it can be supremely instructive. Consider, for instance, the way we talk about disability, mental illness, and severe conditions so often with extreme, reductive, binary language.

Societal stigma as contrasted with the growing acceptances and normalizing of *some* mental health diagnoses is important to note here. Depression and anxiety and even P.T.S.D and Bipolar disorder, to a lesser degree, have become more readily acknowledged and accepted. However, schizophrenia and schizoaffective disorder are still designated as severe. In "becoming blue" I make a conscious effort to share experiences that may be considered extreme or severe as normal. I chose to do this because they were/are normal for me. And I express my symptoms with my storytelling by showing as opposed to telling, hopefully, with some English 101 acumen. In being careful with how I use metaphors I lean into the conceptualization of the word disorder in "becoming blue" and contrast mental illness as a disorder against the capitalistic expectations of order echoing Deleuze and Guattaris 'logic of the state'.

Prendergast cites postmodernists Giles Delueze and Felix Guattari's thoughtful and prolific theory regarding schizophrenia and how they use its scattered complexity as metaphor, in many ways to critique capitalism. Prendergast writes, "Cliches are, by definition, metaphors that have become too stable. The appropriation of the schizophrenic by postmodern theory is a cliche, one that posits continually the rhetorical exceptionalism of schizophrenics" (235). There are many bogeymen in "becoming blue" looming, but few cast as long a shadow as sitting across from a psychiatrist and being labeled schizophrenic and having the doors behind me locked forever. This is one of the many lurking dangers of metaphorizing mental illness and/or disability and the human beings whose lives are defined by them. Prendergast expounds on this and posits the binary of the incarcerated or the celebrated in how mental illness (here: schizophrenia) is situated in society. As always exceptional. Prendergast's work does well to introduce a third more balanced and realistic commonality. My writing, my story, is in part--an effort to de-exceptionalize my mental health disorder(s).

It is important to note that Deleuze and Guatari's *Capitalism and Schizophrenia* and their volumes *Anti-Oedipus (1972) and A Thousand Plateaus (1980)* proved to be valuable and insightful in the research for writing *"*becoming blue.*"* The non-linear approach to telling the story in "becoming blue" and the subsuming premise, or theory, that mental illness is perhaps an appropriate response to a deeply sick world dominated by capitalism is partly inspired by Deleuze and Guattari's work. The 'logic of the state' is a thread throughout "becoming blue" and repeatedly summoned by the marching orders, "your left, your left, your left right left." The 'logic of the state' as dictated by capitalism and my experiences as dictated by a socially constructed in-or dis "ability" to follow orders.

By sharing my experience at military school, I aim to express that one of the major conflicts in my life was this expectation of order, or to "behave." This inability to conform and the punishment it was met with was far more harmful than any diagnosed disorder or disorders. The violence I had to endure is not as extreme or exceptional as we might like to believe. That in no way undermines my pain or trauma but hopefully implies that capitalism and order and not following the 'logic of the state' demands penalty, demands reaction, and demands violence. Frederic Jameson's *The Political Unconscious* and the idea of the 'magical resolution' were instructive for my work here as well. I will never not be disabled or mentally ill. I will always be, and identify as, a disabled bodymind. In writing, "becoming blue" there is an urge to wrap up the story in a tidy little bow, to succumb to an unconscious 'magical resolution.' As long as we are governed by a ‘logic of the state’ disabled people are under the threat of violence. And the more marginalized the disabled person the more targeted they are.

Not only does a nonlinear approach to my creative writing help to amplify the effects that trauma and dissociation has on memory and how I relive or reexperience trauma and process emotions, but nonlinearity is antithetical to any ‘magical resolutions’ or ‘overcoming’ tropes. A nonlinear conceit also props up the absurdity and cruelty of a society constructed to pedestalize capital over care. And cure over care.

C. ***CARE WORK* CANON**

In disabled author and activist Alice Wong’s “*Year of the Tiger*” she writes,

“I would argue that disability justice—disability justice the term—it’s simply another term for love. And so is solidarity, access, and access intimacy. Those are just other ways of saying “love.” I would argue that our work for liberation is in itself simply a practice of love, and it’s one of the deepest and most profound practices of love there is….And the creation of this space also is an act of love” (135).

Access is love. Access is care. And for me and my creative writing, access to my story, access to my vulnerability, access to me through my writing about my experiences and sharing my story is about care. It has to be. But first I had to confront and come to terms with the sad truth that I did not understand, fundamentally, what care was. Care, for me, was 100% defined by its absence. Disability justice was defined the same way. I had to seek out and really listen to disabled authors activists, and disabled people that were marginalized not only by disability but by their gender, race, religion, access, and how they have been denied care, and access just because of how they were. And I had to listen to not how they overcame these obstacles but how these socially constructed impediments, and often attitudes, are as essential to disability as are the impairments.

“becoming blue” is not “becoming blue” without the following creative nonfiction texts: Eli Clare’s *Brilliant Imperfection: Grappling with Cure;* Esme Wang’s *The Collected Schizophrenias*; Leah Lakshmi Peipzna-Samarasinha's *Care Work: Dreaming Disability Justice*; and Alice Wong’s edited collection *Disability Visibility: First-Person Stories from the Twenty-First Century.*

These are the four core texts that informed the notion that creative writing is care work and my project would be different without them. Care work is an invitation. And an introduction as well as being a part of an ongoing conversation about Disability Studies as a framework and disability stories as a way to function in the world with access and disability justice at the core. My project would not exist without them. These authors and these stories and these directions care for their readers. The storytelling, the sharing of experiences is moving and beautiful but the care with which each piece holds its reader is astonishing and evidence of how reading stories can be a reciprocal communal affair. The Disability Studies movement from the charity model to the medical model to the social model and beyond is only possible through the work of these authors and activists. There are countless other memoirs, autobiographies, and stories in all forms that speak to and speak about being disabled but these were invaluable and essential for my particular project. They are a part of my journey, and I am forever indebted to them.

Alice Wong’s *Disability Visibility* is an anthology, a collection of stories from disabled authors that has transcended its initial form. It has grown and has been added to and exists on social media in a very real and alive way. It is the single most necessary text in order to conceive of "becoming blue." It is community. It is care. It is care work. *Disability Visibility* is an introduction to people that I wouldn't otherwise have known, and an invitation to a conversation that I did not know I needed to have. That I did not know I was welcome to.

Leah Lakshmi Peipzna-Samarasinha's *Care Work* takes a different approach and is more aligned with disability activism as well as storytelling. In its preface, *Care Work* includes:

10 Principles of Disability Justice by Patty Berne, edited by Aurora Levins Morales and David Langstaff, on behalf of *Sins Invalid:*

1. INTERSECTIONALITY
2. LEADERSHIP OF THOSE MOST IMPACTED
3. ANTI-CAPITALIST POLITIC
4. CROSS MOVEMENT SOLIDARITY
5. RECOGNIZING WHOLENESS
6. SUSTAINABILTY
7. COMMITMENT TO CROSS-DISABILTY SOLIDARITY
8. INTERDEPENDENCE
9. COLLECTIVE ACCESS
10. COLLECTIVE LIBERATION

These principles are guidelines to the writing and the purpose and the rudders of the project if they ever drift too far into the self and become in danger of self-help territory.

The disability community and its history of activism, advocacy and any progress that has been made must be understood in the context of hierarchies and privilege. The same discriminatory and oppressive conditions that exists in every aspect of society exist withing the disabled community. LLPS implores us to come up with our own definitions of Disability Justice as well. In addition to the 10 I have listed here, directly from *Sins Invalid*, one principle that I have adopted, and follow is to do my best to be mindful of who is being left out of the conversation. I believe that the most marginalized among us need their voices heard first and loudest. As a cisgendered heterosexual white American man I must use any and all privileges that I have to elevate more marginalized voices. At every turn. As a disabled bodymind my story and my experience matter but I must never forget that being a part of this community means mutual aid. My story has little value if not used to help benefit my fellow disabled cohort. This is how care work works. This work ceases to be mine once it is shared or perhaps even published. It is a part of something greater. And my work only exists because of the work that has come before mine and in effort to continue the work of disability activism. Of disability pride.

Nothing about us without us.

D. ANTI-CAPITALIST POLITIC ESSENTIAL READINGS

I would be remiss not to mention the following books: *The Communist Manifesto* by Karl Marx and Friedrick Engels and *Freedom is a Constant Struggle* by Angela Davis. This anti-capitalist is entry level but essential, nevertheless.

Capitalism & Disability: Selected Writings by Marta Russell, *Capitalist Realism: Is There No Alternative*? by Mark Fisher and the collective documentary work by Adam Curtis especially his

"Can't get you out of my head" all inspired me to look at my life and consider what everything that I write about might look like without capitalism.

Capitalism is never called out or critiqued explicitly in "becoming blue." My story's very existence is the criticism. The absence of care that defines so much of the story is a critique of capitalism. Capitalism encourages competition and distance as opposed to cooperation and care. These books inform my philosophy and general ideology and are bled out onto every page. This excerpt from *Capitalist Realism* sums up the disposition of "becoming blue" best:

> "Capitalist realism is therefore not a particular type of realism; it is more like realism in itself. As Marx and Engels themselves observed in The Communist Manifesto, "[Capital] has drowned the most heavenly ecstasies of religious fervor, of chivalrous enthusiasm, of philistine sentimentalism, in the icy water of egotistical calculation. It has resolved personal worth into exchange value, and in place of the numberless indefeasible chartered freedoms, has set up that single, unconscionable freedom — Free Trade. In one word, for exploitation, veiled by religious and political illusions, it has substituted naked, shameless, direct, brutal exploitation" (Marx & Engels)." Capitalism is what is left when beliefs have collapsed at the level of ritual or symbolic elaboration, and all that is left is the consumer-spectator, trudging through the ruins and the relics" (4-5).

As someone that identifies as a Disabled bodymind, and as my work in "becoming blue" aims to articulate how the suffering of my life is largely defined by suicidal ideation, and not feeling as if I could ask for help, exploitation explains much. Not being worthy enough to even be exploited by an inhumane system leads directly to an examination of a life that results in believing that my life is not worth living; not worth receiving care. I spent years of my life trying to not be a "useless eater" and find value for myself in my ability to produce. This constant rejection and the complicity of a community/society/family that subscribed to the same socially constructed beliefs reinforced the bleakest of my mental health symptoms: suicidal ideation. "Capitalist Realism" was as instructive a text as I have read lamenting the evil and inhumane philosophy necessary to propagate capitalism infamously encapsulated by Margaret Thatcher when she said, "there is no alternative" to capitalism. The writing of Mark Fisher highlights this fact as he cites Frederic Jameson's quote, "It is easier to imagine the end of the world then it is to imagine the end of capitalism." It was easier to imagine the end of my life than me being "able" to produce and take care of myself in the "bootstrap" delusions of a traditional capitalistic expectation.

At its heart "becoming blue" is about coming to terms and taking ownership of my experiences as a disabled bodymind and my identity. The narrative storytelling impulse is to write something that makes sense. A story that is in order. Creative writing as a tool to make sense or to understand a world that is difficult to process. That approach, seeking an "order" of things, takes society, systems, and capitalism--most of all, off of the hook. Anything outside the traditional societal expectation is marginalized and often deemed unworthy. I can't hold a job, so my life has no value. My life is not worth living. This messaging is far more disabling in general than any of my specific impairments.

"becoming blue" is an indictment of capitalist expectations. You are born, you go to school, you go to more school or learn a trade, or maybe the military, then job, job, career, parent, spouse, car, house, work, work, work, children, retire, and then...die, and if you are disabled and cannot conform to these expectations fuck off, get to the dying sooner or hope for and be grateful to the kindness of strangers. This cynical line of thinking has never been more evident or reinforced than during the Covid-19 pandemic.

"becoming blue" is one square disabled bodymind being forced with relentless violence, both overt and subtle, into the round pegs of capitalism and its inhumane expectations. The above cited books by Davis, Marx and Engels, Russel and Fisher are all party to the indictment. Again, these specific books are entry level anti-capitalist politic, but my work here is entry level care work. I am simply asking to be seen. To be heard. To be considered and my work here is in its infancy. Understanding basic anti-capitalist politic, understanding the fundamentals of the Disability Studies with concepts such as the social model and Narrative Prosthesis are just the beginning. Being mindful of and having an active anti-capitalistic politic as suggested by the 10 Disability Justice principles foster solidarity with the most marginalized members of our society.

The 2 creative chapters that will be included in this thesis, pulled from the memoir, "becoming blue" speak to an awakening of how one disabled bodymind came to believe that their life was worth living. The chapters are raw and vulnerable and uncomfortable and aim to recreate a sense of what it was like to need care and be met by harm, over and over again and how that informed one disabled bodymind's world view. The chapters aim to embody what it feels like for a human being to think that suicide was a solution to their suffering. I hope my work will someday contribute to the already rich canon of care work by disabled creators.

I

I see

I see a boy

I see a boy on

I see a boy on the

I see a boy on the beach

I see a boy on the beach at dusk

I see a boy on the beach at dusk—pink

I see a boy on the beach at dusk—pink naked

I see a boy on the beach at dusk—pink naked and

I see a boy on the beach at dusk—pink naked and armed

I see a boy on the beach at dusk—pink naked and armed with

I see a boy on the beach at dusk—pink naked and armed with a

I see a boy on the beach at dusk—pink naked and armed with a long

I see a boy on the beach at dusk—pink naked and armed with a long clawed

I see a boy on the beach at dusk—pink naked and armed with a long-clawed hammer.

becoming blue

CONTENT WARNING:

SUICIDE, VIOLENCE, ASSAULT, TRAUMA

FIRST CHAPTER:

“hic sunt dracone”

“But it was love’s absence that let me know how much love mattered.”

-bell hooks

---*suicidal*-----*ideation*----*creation*--------------------------------

-then-knowing Finished And

The concrete walls were bleeding grey with teardrop shaped mistakes spread out scattershot and stuck in time. A bleak concentrated coagulation, the opposite of art, in structure and in memory. A dark and thick deep gray slathered over dimpled and pock-marked knots and dents intermittently spaced along the hallway. Something to pass. To not see. When the lights were off it was the blackest place on earth, a cave sans spatial reality. A nowhere.

As welcoming spaces go it was less of an invitation than it was a confrontation. A conclusion. As a memory the walls signify something else. The aesthetic was dreary and intentional but ironic. Everything at Carson Long Military Institute was supposed to be clean. Shiny and dust free and tidy and perfect and ready for surprise inspection but the walls were dirty and cynical and true.

I remember those walls.

They were incapable of lying.

Concrete and closing in. Large square bricks stacked 2 over 1 over 3 over 2 over 3 over 1. Bricks meant for foundations and not to be exposed, yet here, painted over and over again. Hidden but not quite. There was always a can of gray paint in the corner of the hallway with a well-worn crusted thick wiry brush set astride and set under a green rusting metal fold up chair. The brush was stuck to the lid. As if it was a part of it.

I would see these walls later. I would see these walls in other places.

An institutional continuity.

A life-long sentence desperate for punctuation.

plunge, every at, World a hit And

As words like triggered and trauma become more and more opaque and common, and validation is conjured in the immediacy of our current finger snapping confirmation-bias drunk society--nuance gets lost to our instant gratification poisoned information seeking impulses. In the shadows of today's depreciating trauma parlance porn, horror becomes more and more benign--an unhorror, and shame and self-awareness drown in a sea of likes and follows. But that doesn't make anything any less real. Does it. It doesn't make care anymore accessible either. Instead of embracing a wounded populous and welcoming the suffering into the warm folds of empathy we've normalized a collective dystopian disposition. Everyone has trauma and no one seems to care.

The name trauma that was once reserved for the noble--from WWI shell-shock trench literature through post 9/11 American media first responder worship— has morphed into the ordinary and jumped the proverbial shark of social media grievance culture into an ocean where more people have been traumatized than not. Trauma, as we live and breathe, is trending.

Especially now in a post 2020 world.

Call your health care provider, if you are fortunate enough to have one, and ask for a trauma-informed care specialist (whether you need one or not) so you can see what that process looks like. Wild, wild shit you will find, as "awareness" has become the new "thoughts and prayers." And access, but a dream. Making that call and waiting in that line is as good a meditation on care as any. Procuring a trauma informed care counselor, quite frankly, might be impossible and if you don’t have a health care provider--you already know enough about impossible things.

“your left, your left, your left right left”

“your left, your left, your left right left”

I fear that we are in danger of being perpetually stuck in 2020.

When we needed care the most we were met by chaos, and harm, and politics, and the most marginalized among us---the poor, elderly, immunocompromised, of whom were disproportionately BIPOC people and LGBQT communities who are always the last and least considered—were met with violence.

It is violent to deny people care.

It was violent to deny me care when I needed it most. When I was a child.

It was violent to deny me care after being a victim of violence. Violence for violence.

I fear that we will be stuck in 2020 forever because I was stuck in 1987 for 30 plus years.

It's kind of how trauma works.

Yet, it works in other ways too.

-down and, down dropped I And

On a late October morning in 1987, 4 boys attacked me in a communal shower. I was 12 years old. This was a few weeks after my little sister’s 3rd birthday. Right before Halloween. I used to wonder what my relationship would have been like with her if I didn’t become someone else on that shower floor that day lying in my own blood and those boys’ piss. My relationship with most people, with the world. Maybe I needed to go through that to become who I am today. I would not recommend it though. And many of the people that I did become between then and now would disagree.

I don’t know who three of those boys were. Were they boys, cadets, men, monsters? I don’t know if I can call them boys. I couldn’t see their faces. I don’t remember their faces. The one I knew, whose face I did remember, vaguely, left the following June, like we all did, for the summer, and I never saw him again. The other three became everyone.

And they were everywhere. Forever.

I didn’t make a lot of eye contact after.

broke, Reason in Plank a then And

Military school is the threat.

It is the place parents have been threatening to send kids with behavioral issues to since it was no longer legal to drop human inconveniences off at warehouses for the feeble minded and diagnosed idiots. Pennhurst type places. Places that we know about but don’t really speak of in any non-abstract terms. Punishments and threats, not bricks and mortar and beds with hospital corners and certainly not children. Not human children with wants and needs and fears and desires. Not super-sensitive shy momma's boys that were slow to develop in the impossible fog of what so called “normal” people think “normal” is. Not emotional hemophiliacs that were thrown to a pack of salivating wolves trapped in the cages of their own bellyfired abandonment issues.

Cue in somebody, somewhere saying something about hurt people hurting people.

Not ALL military schools, I guess, can technically be the worst place on earth--but for me and for Carson Long in 1987 it is hard to think of anything or anywhere worse. It can always be worse, as *they* say, and boy will they say that, but even that buck must stop somewhere. Somewhere has to be the worst place. Carson Long begs consideration.

The Carson Long Military Institute brochure declared dead center in blue and red ham-fisted font “Send to us your boy and we will return to you a man!” with pictures of boys playing dress up in blue and gray uniforms marching in order and saluting flags and carrying rifles and with “eyes right!” It is sociopathic cosplay and a different kind of threat but a threat, nevertheless, and honestly, kind of wild to even think exists as concept.

Imagine being left there. Imagine being assaulted there. Repeatedly. And imagine them calling it something else.

Hazing.

What the brochure didn’t say was that your borderline-pubescent, clinically depressed, perpetually anxious 12-year-old son will change all right. But not into a man. Send to us your boy--afraid of his own shadow and already struggling with suicidal ideation and irretrievably lost, caught in the cogs of an unspeakable seismic grief machine called family—and if he survives, we will return to you an irreparably damaged unman. A fucking ghost of a boy. If he survives. If he returned. He will be damaged. I was damaged. I did not know what disability was then. I believed for a long-time disability was wheelchairs, walkers, hearing aids and defined by paperwork. Defined by weakness. Not human beings not being allowed to participate in society. Not human beings desperate for care and being met with harm. Being met with violence. Being met with by unbelieving and shrugs and the “suck it up, keep it moving, nothing to see here, it could be worse”--ification of society.

“Your left, your left, your left right left.”

“Your left, your left, your left right left.”

Damaged is as arrested development does. And complex. Grief, on the other hand, is simple. Grief is trauma but socially accepted and not called as such and reduced to a live, laugh, love like toxic positive list of stages. The worst feelings a person can suffer through are reduced to a grocery list of inevitabilities. Acceptance, denial, get over it. My older sister had run away from home two years before I was left at Carson Long. She was 15 and I was 10 and I loved her more than anything else in the world. She was my big sister, and she was gone. I did not handle it well. I was depressed and withdrawn and passive aggressive and confused and scared and heartbroken and I would either overreact or not react at all. What I was, what I became more than anything else, was inconvenient and made people feel uncomfortable and my very existence was a reminder that there was a larger problem at home as to why my sister left in the first place.

-here, solitary, Wrecked

Before she left, I was already pretty awkward and anxious. I bit my nails and chewed on pencils and pen caps and was constantly stirring and bouncy and terrified of being on display. I had trouble being around people, I had trouble being. I was born with mental health issues, “behavioral issues” if you like, that are easy to see in hindsight and with confirmation biases and a lot more information, but now, I can see the inclinations, the tendencies, the genetic component was there. But mostly I was also just a clammy little red cheeked child with a bit of a lisp and bucked teeth and an oversized head that was scared all the time. For some earned reasons and some imagined. The only way I figured out how to avoid being on display, and the irrational terror of being humiliated, was to be seen on my own terms. To perform. To act. A shell game of contorting personality. Look over here at me doing this ridiculous thing so you won't see me. So, you won't see me, simply just being. Being the truly ridiculous thing that I know I was--me. Just simply, being. Honestly, it was only standard class clown shit though. I wasn't bad. I was weird. And when she left, I became something worse. Sad and weird. And my own kind of gone. A different kind of gone than she was but gone still and neither of us ever came back. Not to the way it was or to how it ever could have been. My punishment for being sad and weird and heartbroken and grief stricken was that I wouldn't see my sister again for 16 years (save for one afternoon in the middle) and I was dropped off at a military school where I was violently assaulted.

More than once.

Frying pan fire shit.

Race, strange some, Silence and ,I And

I missed my sisters, then, now. Not a day of my life have I not. I have trouble still--being around people. And they have families and lives now apart from history and trauma. Not that they weren't harmed or affected, but I am the one that stayed stuck. I am somewhere in the middle of all of that and expected to perform. To act. Being professionally messy is my role. It makes everyone else feel better about their shit. And not just my sisters.

But back then, in that military school, those first few weeks I missed them like it was the end of the world. I was about as homesick as a boy could be, but homesick for a place that never really existed, in hindsight. I was homesick for care. Grief is simple. Someone or something that matters is there and then they are not. Damage is complex. It's the reckoning with it all.

It's the fucking gray, gray walls closing in.

I can't drive a car. Or climb a ladder. Or hold a job that needs me to be around people consistently and reliably. I have never been in a romantic relationship for more than two years. I have never lived in the same place for longer than two years. I can't really go into a room with people already in there, not as myself. Not sober. And neither acting okay nor being drunk is sustainable. The only ways I was ever really "able" to pass through polite society. Was with masks. I don't know how to have relationships. Not with lovers or friends or family or jobs or reality, really. Only animals and children and strangers in bars and the 'mad' peeps in psychiatric hospitals and homeless shelters and soup kitchens. We folks have a short-hand. I am them. A nodding knowing, I would argue, that is insight. Experience. We share that. I love those people. They are how I learned, am learning, to love myself. Part of how and why I stopped wanting to kill myself. And believing my life was worth living. Unconditional, unreasonable, empathetic kings and queens. My partial hospitalization processing crews. You amazing bastards. I love you.

But those fucking walls, man. They are everywhere.

And the things that I can't do...

And the place I can't go...

And the person I can't be...

Is behind them.

My sisters are behind them.

“your left, your left, your left right left.”

“your left, your left, your left right left.”

There were many “incidents” at Carson Long but two that are impossible to shake. One I remember vividly. The shock of it. The incongruousness of it. The way the spotlight from the hallway bounced off the iron bars of the brig door and filtered in bright wide rays forcing me to squint. The brig light was dimmer and flickering and 15 feet above my head. Light fighting lesser light. I remember every detail, every sound, every humiliating violation of my body and the sad weak muffled cries I tried to belt out as what little bit of pride I had evaporated. I remember every punk ass kid in that brig. I remember you Captain C. walking in and walking right back out as I laid there down on that smooth but cracked uneven slate floor right beside the foosball table screaming for help. I remember you Captain C. walking right back out. And I remember you the next day in Pre-Algebra telling the rest of the class how brilliant and neat I was. And how I should be put up for honor cadet and a promotion. I remember those kids’ names and their ranks and what they were wearing. I remember what they called me while I screamed for help, “pussy” “faggot” “retard!”

I had been called retarded before.

I remember everything going back to normal the next day and one of my roommates, C.T.J, a big Black kid that was way too old for the 8th grade from Mount Vernon that introduced me to E.P.M.D. and Public Enemy and how he told me, the whitest kid on the planet, that white people can't be trusted, especially in groups, and that I needed to start fighting back or they would destroy me.

I didn't. Not right away and then I did, and I never stopped. Being tough became my greatest and longest performance. A part of my mess. My bullshit.

Carson Long left the violence out of the brochure, but they knew, people knew, parents knew, the townsfolk knew. Everybody knew. As you read this, you know. That is why it is a threat. And that is why they get away with it. That is why they hire the least competent and most cruel military wannabes as house masters and teachers and give them ill earned ranks of Lieutenant and Captain and Major. Power to people that have earned it the least. An American legacy. This is how systems work in this world. Angry white men almost always. People charged with safety, but hell bent on harm. And they knew too. And they knew the kids couldn't tell the very people that abandoned them there that they were being harmed. They knew the parent or parents wouldn't believe them either out of guilt-spiked denialism or because they thought the children deserved it. Or they believed that becoming a man was supposed to be this way. Becoming a man was to be earned somehow through abandonment and violence and through learning how to march in step. How to suck it up. How to keep it moving.

How to endure capitalism. The great lording cruelty that gives permission to the violence.

How to put everything in its right place no matter the cost.

How to learn to create order from disorder.

Ear, an but, Being And

I was a boy that was told that I didn't know how to behave. That's how these things get justified. That's why I started believing I deserved it. Because they were kind of right. I didn't know how to behave. How could I? How could anyone?

Anxiety is not fear, not really. Paranoia is not fear, either. It is intuition and experience. A knowing, that only abandoned and abused children can know. That disabled people can know. The knowledge that the people charged with protecting you will harm you. Eventually. Inevitably. Or leave you. And never come back. And those people, ultimately, will become everyone. Everyone and everything become a threat. This isn't fear. This is experience.

Gray, gray walls, everywhere, closing in. The smell of shoeshine black and belt buckle brass lacquer. Trumpets and pins flags and the click clack clop of footsteps buzzing in your ear, always, as "your left your left your left right left" but take the form of other things, disguised things. Until all the world's buzzing sounds the same. How these sounds, how these sensory experiences all start to sound like messages. They are called triggers, but they might sound like my own voice, before it got deep, after it got deep, two entirely different people's voices, yet the same, ridiculous me, in my ear closer than close, louder and louder telling me to kill myself. Or it's my stepfathers. Or Captain C.'s or my high school ex-girlfriend's. Or that note that I got on that paper I wrote for English 101. "*Awkward"* in scribbly red ink on the margins translated as "kill kill, kill kill, kill yourself." Voices. Intrusive. Thoughts. Gray gray walls. The world is building a case against you.

And I push those walls away. Outstretched overmatched ridiculous me.

Right there in front of everyone and always. While they are talking about sports, or culture, or the neighbors. I am not there, I am in front of them, but not really there. Only a pile of the wreckage of a kind of me set before you, on fire inside and drowning, and being really, really bad at being a person; at being normal; at being productive: just struggling to be alive to be me. Right there in front of you. Talking about sports, and culture, and the neighbors. Like it's a lie. Reinforcing what the voices say. It is all my fault. I deserve this. I deserved everything. I don't know how to behave. I don't know how to be. I don't want to be here; I should kill myself.

I think of the Carson Long Military Institute basement floor communal shower every time I see gray concrete. Not every time, but every time I think I won't think about it anymore or that I have moved past it or gotten over it or am doing really well.

Then. Fucking then.

When I have recovered and all this CBT, DBT, 10, 000 hours of counseling has paid off. Then smack. Gray walls. Gray approximate. Gray almost. Gray everything. Gray everywhere. And I think of me lying in the middle of the showers as four boys attacked me, pissed on me and tore me to shreds, in ways that I cannot remember and in ways that I cannot understand. I do remember blinking rapidly as if to shake it all off as if that was all I had control over. My eyelids. I remember staring through the black-red blood film in my eyes at the dimming exit sign barely glowing red hanging just over the shower stall entrance. And I was screaming in blinks. Powerless and numb and confused. I couldn't feel anything. I was floating and everything was blurry. I could smell the piss though. Not then, but now. I don't remember then. I could also see a version of what was happening from above. That is how it is situated in my mind now. Over and through into the foggy steam where 4 naked boys, no two were wearing towels, who were much larger than I was, having their way with me. And me on the floor with what seemed like water shooting out from the walls like hoses. And steam. It was not real. Not from above. I remember running away, past a row of sinks and shitters and that brig door and those walls, that green metal chair, that can of pain and out into the cold October morning naked and bruised and bleeding and scared. I remember feeling wanted while I was being chased, important.

Loved, even.

I needed the gray walls to be closer to the exit sign because it was closer to the front door and closer to an escape. Closer. Closing. Closer. I could feel the walls' rough texture as a guide in my mind, an escort towards the door. Like a drunk fumbling for a light switch I knew the walls would take me where I needed to go if I followed them until there was no more wall. Where they ended, I would be free. I could escape. It was late October of 1987, and I was 12 years old. I was violently attacked in the communal shower room by 4 boys and I couldn't see them. Not then. Not now, not exactly.

This was never spoken of again.

Bell, a were Heavens the all As

I was dropped off at Carson Long at the end of August by my mother and stepfather only 7 or 8 weeks earlier. Before the assault in the shower. For the first four weeks I cried myself to sleep every night and would smush my face into the bed and I would wrap the pillows around my ears in an effort to mute reality.

I was beaten on almost every day those first four weeks by most of the members of my platoon in what is generally referred to as "hazing." I cried a lot. This made me easy. I missed my sisters and my home and my bed. So, I cried and each time made me more and more of a "pussy." I had been beaten before. I knew violence but not like this. This kind of violence was classified as an unwritten disciplinary action and not technically against the rules. "Hazing." The rules being whatever was printed in the blue book of general orders and our official honor code: "Don't steal, don't cheat, don't tell on another cadet unless they are in danger." But what is danger, really, when you don't matter?

Casual, routine, predictable violence so much so it's hard to classify as violence--boys will be boys no harm no foul keep it moving nothing to see here--not that violent of a violence.

It is not real violence and no one can be held accountable or even, guilty when everyone is complicit. This threat was consensual. It is the perfect model. The subtle downplaying and dehumanization was embedded in the agreement. My parents told me for years that I wanted to go there, that it was my decision, (a decision I would have had to make when I was 11, a year after my sister left) and they would not hear, ever, about how bad it was. Even the lesser "incidents." I was exaggerating. But all of this was a part of the agreement.

If you don't want whatever happens to you at a military school don't get sent there in the first place. It was my fault. The fact that it was just a giant holding cell for maladjusted youths decorated in polyester and wool uniforms and brass accoutrements that were marched around on display on weekends was beside the point. No matter how real it was, it wasn't. It couldn't be. The only thing that mattered was restoring order. Something, something, sausage being made. Carson Long was an absurd place and infected by such casual and relentless violence that no one believed it was as real or as bad as it was even when it was happening right in front of everyone. Even though, damaged me was the literal result and undeniable. No matter what kind of uniform you stuffed me in.

But there are days that I still don't believe it. I think if I ever admitted how bad it was, I could never be around my family again. And they were all that I had. So, it stopped being real.

On campus there was an “infirmary” which was located just a minute’s walk from each of the cadet’s buildings and run by a kindly older woman that knew her role in the proceedings. In keeping things in-house. “On site” as it were. I was “infirm” 3 times while I was a cadet, twice as a result of being assaulted and once from being purposefully exposed to poison ivy. The poison ivy got into my lungs and even that didn’t warrant a trip to the hospital. A graduate level in “sucking it up” and in being a man. A philosophy that would later become the bane of my disabled bodymind experience. My internalized ableism. “Suck it up” “it's not that bad” “it could be worse.”

toll to began—Space Then

Or look at how resilient I am. How brave. How strong.

I ‘came to’ in the infirmary bed after the shower “incident”, after attempting to run away, after being caught, like coming out of an alcoholic blackout. The nurse’s delicate hands and reassuring voice provided a version of comfort offering up a blanket of cognitive dissonance and a masterclass of deflection.

“There is no need to tell anyone about this. We’ll take care of it.

YOU won’t get in any trouble” she said, “I promise you.”

Soothingly.

“ME? The fuck?”

again, lead of Boots same those With

You cannot accurately recreate the sensation or depict what it is like to be attacked. Not in therapy and not on a page. The thuds and the stings and the muted yelps-- the echoes and the electric reverberations and the fear and the floating (the disassociation) and sometimes the very lack of sound or vision is so visceral and so intimate and indescribable that rehashing it will not give the "incident (s)" proper justice. It is like being inside of something. Enclosed in an utter absorption or in the delusion of escape. Screaming but not being heard. Forgetting how to scream. All swallow. Acts of intense intimate violence are so fundamentally irrational that they don't seem real and when they approach real in memory there is the risk of triggering, of reminding, of causing unnecessary harm to yourself, again in the reliving of it, or in making yourself feel weak and when sharing to an audience in harming them, in triggering them:

YOU.

Soul my across creak And

You matter too.

Admitting these things are real makes you feel weak in the way that dying from Covid is because you had preexisting conditions. You know it's not true, but you know how the world is—the arc of moral justice is long, but it bends towards justifying cruelty and violence and the absence of care. It is capitalist, patriarchal, white supremacist poison soup brain. And for men, for white men, disabled or not, it is "get over it" or "let it go." Or a bunch of punk ass cadets in a makeshift brig screaming and punching and kicking you by the foosball table calling you a "pussy" because you were homesick.

It is not weakness, as I kind of sort of believe now, it is vulnerability and vulnerability is heathy but, in your mind, it dissolves into a perception of weakness, and that remains a part of the cause. The why. The fault. The justification of it all. The impulse to make sense of it. The impulse to place blame. The find fault. To spend a life becoming someone, the kind of person that deserves it. The kind of person that seeks justification in alcohol, sex, drugs, gambling, and other vices to live up to the punishment. It wasn't the abandonment or the violence it was because I didn't know how to act, and it wasn't that bad, I am just weak, and I need to stop playing the victim or it's not that bad because other people had it worse or people straight up telling you it didn't happen at all.

This is all scrambling through my head, and I think you just asked me what movie did I want to watch? Or do I think the sixers will win a championship with Joel Embiid? Or what did Jaques Lacan say about capitalism?

I want to watch *The Banshees of Inisherin*, again.

Yes. The sixers will win with Embiid.

And “It is easier to imagine the end of the world then it is to imagine the end of capitalism.”

I'm sorry.

I'm always sorry.

My last two romantic relationships ended because I wouldn't get help for my undiagnosed untreated trauma in the first one and the last one because I talked about my disability too much.

I am arguably one of the loneliest people on the face of the planet. Especially since the pandemic started. People close to me think it is because I don't like people.

They are wrong.

I love most people. You’re all so curious and weird and unpredictable and funny and creative and kind when you're being yourselves. When you're allowed to be. Even most of the people that have hurt me. I know someone fucked them up along the way. I love people. That is why I am so disappointed and scared and angry all of the time. But also, why I can’t be around them.

I don’t want to hurt them. I don’t want them to hurt me.

Anymore.

That’s why I don’t have children and I don’t drive.

I'm sorry.

Part of me wants to apologize to you right now for reading this.

Box a lift them heard I then And

On my third day at Carson Long there was a pseudo social gathering in a literal cell called “the brig” in the basement of the building across from my barracks. One of the cadets playing foosball made an off-color joke about someone else's mother that I thought was offensive and cruel and caught me off guard. I was supremely naïve in addition to being an emotional landslide of a boy. Cruelty surprised me, still does, even after all this everything. The rest of the boys laughed and high-fived in a spirit of solidarity and started making fun of everyone else's moms: “Your mamma is so fat, etc.” Harmless juvenile banter but it also caught me off guard. On guard was an apt way to describe me then, now. Always, still. On guard. The knowledge and comfortability they all had with each other freaked me out. They were so comfortable there. Or so I thought.

Out of nowhere, I started crying. The jokes made me think about my mother. I missed her already, only three days in. I couldn’t see her role in any of this, I didn't blame her for anything then, yet. It was the father that left and the stepfather that dominated, dictated everything. They were why I was here. Never her. She fought back tears when she said goodbye to me, and her face was all that I could see as someone said, “your mamma was so fat...”

And I couldn’t stop crying. I had no idea how bad this was going to be for me.

I could see all the boys stop mid-action and stare at me in disbelief as I cried. I couldn’t be that much of a “pussy”, could I?

I could be. I was. According to their metrics and that language. I found out right then, at that exact moment, as the tears turned into something more how weak I truly was. As the tears became sweat. The sadness turned into fear and the fear was becoming something different, still fear but different. Bigger than fear. Anticipation. The next thing I knew, two boys had me pinned down and another, one of my bunkmates G.H., was punching my thighs sideways fisted, pounding awkwardly and unathletically but possessed. Each connection was sending charlie-horse shockwaves through my entire body. It was electric. He wanted to hurt me, like I deserved it, like vengeance. And he did. He hurt me. It hurt.

And I deserved it. I had to. It wouldn’t happen otherwise. But why? Why me? What did I do, really?

There are sensitive parts of the inner thigh and top of your leg that when smashed repeatedly become more and more tender and each blow feels like it is penetrating and striking nerves dead on. I started convulsing and was enveloped a now even greater, existential fear and started screaming mutedly into someone’s grimy baby-fat thick palms.

“Your left your left your left right left.”

“Your left your left your left right left.”

And then something broke inside my brain and I felt nothing even as G.H. was still pounding away.

-numb going was mind My

I kind of levitated.

I could see all of this happening from a distance. From above.

Or that is how the memory is now situated in my mind. This wasn’t the first time I had experienced this type of disassociation. This spectator perspective. And it would not be the last.

I lost my breath and in the convulsing the back of my head struck the floor and the smack popped so disarmingly—the action stopped. There was palpable panic, an ensuing huddle and plotting. Some, a few, scurried like mice in the light as I just lay there concussed. Some, a few stayed. G.H. stayed.

And smiled. I remember that.

When I was especially anxious, I would talk super-fast and slur my words as if my mouth couldn’t keep up with my brain. I had a bit of lisp and stutter and speech impediment when I was really young. It was why I was called retarded or “re-re” for short. In my home. Why I kind of believed it. Before I knew better about that word. It still happens on occasion, my speech troubles, but when I am really excited about something. The sixers winning a championship with Embid or Lacan or the *Banshees of Inisheran*. Not everything is mania. Or trauma response. Or bad.

I do love things.

But G.H. smiled and I could see myself laying there mumbling unintelligibly something resembling “stopf pleath stopf pleath helpfh, helpfh!” That last part is what sentenced me to even more torture and what gave me my reputation. A name, a narc. In asking for help I became a snitch. The most significant utterance of my life.

“helpfh!”

Once I started to move and they could see I wasn't in too bad of shape the few that stayed responded with what could charitably be described as the opposite of help.

Asking for help is becoming a man 101. Worse than crying even.

Thought I till—beating—beating Kept

I was not human to them. I was not human to these boys, this world. Weird sad weak puny little mama’s boy and now a ‘narc.’ But they weren’t the people that sent me here. What was I to those people? The people that sent me here. I mustn't a been human to them either. Or anyone.

The house officer “Captain C.” came by to check in on the activities and to see how us boys were getting along. It was remarkable how me lying in the corner bruised and crying and concussed and drunk-like as the boys rushing from me and started pretending to be horsing around was utterly unremarkable to him. I can still see his detached hungover ill shaven face.

Captain C.

I asked him for help.

It sounded like “Helpfth!!!”

He did not help me.

And don’t believe I asked for help ever since.

-- Drum a like, Service A

Two months after the brig incident I was violently assaulted in the shower by 4 boys.

My body was still developing and in addition to the constant fear of violence and the incessant pinballing around my head -- I discovered that I hated being naked in front of a crowd. And we had to be naked in crowds a lot. I didn’t mind so much in the day but my body was being weird in the mornings. I was experiencing intermittent erections and all manners of the weird natural adjustments human bodies make when hitting puberty and usually when I would first wake up. Weird puberty is not an unusual thing and not even that unusual in that specific place, but I was terrified of getting one of those confusing morning erections that had just started happening and taking it into a shower room with me. I was more afraid of that than anything. I was the youngest kid there and had not even started growing pubic hair yet. I was shy and embarrassed and insecure, so I snuck into the showers earlier than everyone else.

4 boys came into the shower stall behind me quietly, stealthily, they snuck in on me as if this was planned and started turning on all the showerheads. Hot as they could be. I turned off my water and tried to leave immediately. My head was down the whole time, and my eyes were barely open. It was the closest I could be to invisible. They wouldn't let me leave and blamed me for using up all of the hot water and made fun of my body and then everything else was a blur.

I did run.

They did chase me.

I never wanted to die more than I did that day.

And being chased felt like something.

It felt like care.

Seated, were all they when And

I remember waking up in the tiny infirmary bed covered in soft heavy blankets. I remember having to explain why I was skateboarding in the middle of the night to that nurse. Or she was explaining it to me. It was the afternoon; I think of that same morning’s day. I don’t know how to skateboard. I am too anxious.

It was late October, and my head was spinning in dizzy flashbacks of blood and panic and piss all to the sound of “reveille” and “your left your left your left right left” echoing in my head. It was business as usual outside. Were they marching for dinner? I had never been drunk so never hungover but have been since--this, then, in that infirmary bed was how that felt.

Disorienting and nauseous and an anvil to the chest of guilt or shame wondering what happened last night. What did I do?

No one ever spoke of that morning. Not until I casually dropped it in a therapist's lap at minute 44 of a 45-minute session some 30 years after it happened. Or maybe in a drunken blacked out alcoholic rage screaming at someone that didn't deserve it. Screaming drunk at someone that wants to love me that they, "don't understand!" Me screaming around it not about it.

--through breaking was Sense That

I remember the nurse leaving my room. I remember grabbing a bottle of aspirin out of the old timey white and red trim doors that framed a heavy glass and wood cabinet and swallowed it whole. I remember stuffing what seemed like hundreds of aspirins past the gag reflex and powdery concentrate that was dissolving into chalk. I remember stuffing my fingers into my own sick that was fighting to come back up. I remember running to the bathroom but was wobbly and sore and stumbled and my stomach exploded throwing most of the sick back out all over the toilet seat and floor. The nurse never said anything about it. She just cleaned it up and locked the cabinet.

I had never wanted anything more than to die right then.

You kill an ability to experience joy after you try to kill yourself.

And there is a special kind of humility that accompanies failing to.

One more thing I can't do right.

This was the first time that I tried to commit suicide.

It would not be the last.

Seemed it till – treading – treading Kept

The first floor, the basement floor, entrance to my building was a three-step drop turn around under the red rust brick and aluminum framed welcoming aperture to the Carson Long Military Institute's C-Company Barracks foyer. A traffic jam of adolescence and anger when the trumpet blew as the cadets ran through it to formation. The space was remarkably unremarkable most of the time. Just and entrance or an exit

All of the walls were coated in wide swaths of that grey paint caked over the remedial masonry that defined confinement. It was an implied prison. The gray is deliberate. And resonate. A dimming of reality and later of memory. Even our day uniforms were gray and called as such. The "grays" as opposed to the dress "blues" we costumed around in on the weekend when they would, literally, parade us down in front of the townspeople like carnivalesque sideshows.

"Your left, your left, your left, right, left"...look at us, look at us. look at us, look away. An entertainment to validate our existence. It is never less than incredible to consider that parents willingly leave their children in a place like this, or how the neighboring townsfolk openly celebrated such a caravan of the misbegotten. I guess the pomp was persuasive. But people knew what was going on.

I remember the grey walls. The concrete. The exit.

I remember the black metal beds and tucked hospital corners and my black footlocker with silver aluminum trim. One black comb. 3 bars of white soap. One green toothbrush. White towels rolled not folded. 3 of them. My name, carefully, embroidered into my 5 tight white pairs of underwear on the elastic band and 5 white tee shirts threaded into the collar. Sean Kristian Guckert sewn in by my mother.

She cared.

She had to.

But most of all I remember her standing in the doorway. Fighting back tears. Saying goodbye.

And then...

Leaving.

fro and to Mourners And

Don't ever let anyone tell you that your trauma is not trauma.

Brain, my in, Funeral a felt I

(340)

I felt a Funeral, in my Brain,
And Mourners to and fro
Kept treading - treading - till it seemed
That Sense was breaking through -

And when they all were seated,
A Service, like a Drum -
Kept beating - beating - till I thought
My mind was going numb -

And then I heard them lift a Box
And creak across my Soul
With those same Boots of Lead, again,
Then Space - began to toll,

As all the Heavens were a Bell,

And Being, but an Ear,

And I, and Silence, some strange Race,

Wrecked, solitary, here -

And then a Plank in Reason, broke,

And I dropped down, and down -

And hit a World, at every plunge,

And Finished knowing - then -

--EMILY DICKINSON

LAST CHAPTER:
FUCK GOOD WILL HUNTING

You ever get one of those earworm songs stuck in your head? You know that incessant replay that you can't crowbar loose no matter how hard you try. The way it seems to get worse the more you try. Like real ridiculous hiccup shit where the more tricks you throw at it--the more you focus on it. And sometimes it is a song you hate, the absolute worst song in the world you can think of. Over and over and over again. Unironic Tubtumping level nonsense. "I get knocked down, then I get up again." But sometimes it is a song that you kind of used to like or maybe even loved at some point, but it got played out to the point of a cringe inducing post nostalgia. But mostly it is a song that you can't quite make out.

That is what emotions are like for me. That is what life can feel like for me. Trying to rid an onslaught of sensory stimuli whilst simultaneously trying to hum along to go along and fit in and not be disruptive or take anything too seriously or too personally. But the world is sending you messages you just can't shake. You do your best to adjust and adapt and accept and nod your head subserviently. In agreement. Keep it moving. Everything is fine. Nothing to see here. But this becomes performance, this becomes a reflex. This is not real, this is not you. This is not helpful. Yet, still, this is a necessity even at the best of times. This cope, this act becomes a Pavlovian dance that takes you out of the now. This is what complex trauma can look like for *some. For me. The subtle debilitating power of revictimization. In your ear. In your face. You are there but not really there. A ghost. Present but lost in the sound.*

You are reduced to behavior. To a disorder. You are overwhelmed by the impulse to open yourself up and empty all that you are, all that pains you, until finally, you acquiesce because you've remembered that it is only a song. And you are the only one that can hear it. A secret. You understand you mustn't react at all. You are not the spaz they said you were on that playground all those years ago, so you go with the flow. You choose to enjoy the song and maybe sing along, maybe dance, maybe smile, and maybe just maybe live a life worth living for a moment and find some peace in the sound. In the secret. You are synced up and you have stopped fighting the intrusions.

You understand this is kind of what life is, and that is okay, so you just go with it.

Just go with it.

Just go with it.

Just go with the flow.

But the flow is not acceptance. It is denial.

You understand you can't tell anyone that this is kind of what life is. You understand that the sound will dissolve into some scattered grace of background noise, eventually. It has to. But not now. Not yet. You understand you cannot live like this forever. No one can. Because it's not real. Your feelings aren't real. Your experiences aren't real.

You are not real.

You understand this. And you understand what will happen if you tell anyone. So, you dance. You just have to go with it. The flow. The order. The march.

"your left, your left, your left right left."

But then, of course, the song stops just as you have found your rhythm, a rhythm, any rhythm. Real or perceived. The song stops or changes. Or it skips and shuffles and fades into a cacophony of illegible sounds from another room. Until this becomes all rooms. This becomes the world. And this interminable, insufferable racket shifts and folds into the familiar cadence of defeat that has followed you for years. The soundtrack of suicidal ideation barking at your heels as you dig into the flow.

"your left, your left, your left right left"

"your left, your left, your left right left"

This noise is accompanied by distant wanes of a just off-key morning blare of reveille.

"Kill kill, kill kill, kill kill yourself."

"Kill kill, kill kill, kill kill yourself."

You understand that you can never tell anyone about this.

Because this,

this is not real.

1978

The heat was impossible. East coast August grimy, gooey asphalt swelter. The aesthetic of my memory generally correlates to that specific era of American film. 1978 was baggy and filthy. Buttons and bangles and beads and polyester and *Phil-a-del-phi-a-at-tee-tude.* Martin Scorsese and Hal Ashby and American white male auteur dominated cinematography is how the images are projected onto the walls of my mind. An added layer between the screen and me. Choices that scream ‘this is independent’ and ‘outside the system’ and real but not really. A biased compartmentalization of memory. It was the 70s and I was not quite Philly, Philly adjacent, and everything was “*Rocky,*” related, and my memories are of that texture and of that time and of that place. The Philadelphia skyline was never quite fully out of view and my mind’s recollection is a dorm room wall collage of not quite black and white snapshots that were also not quite color. A deliberate desaturation. Gritty for the sake of it. White poverty. Not too poor to be ungrateful, or desperate, or to have the weather dictate everything. And everything was not quite something. Not not something.

An almost.

The humidity on the day in question was wavy and thick. Sticky, flickering. A palpable mug you had to trudge through, and the periphery was bending and twisty heat distortion. It was the last day of summer or the first day of school for my sister. It was something else entirely for me. I walked with her to the gate entrance of her school that boxed in a playground where it seemed as if thousands of children of all ages were playing, running laughing, screaming. I remember tracing my fingers along the aluminum webbing of the fence and watching my shadow swell and shrink and melt into one with hers. She had to be 3 feet taller than I was. She was so big. And then she hugged me and said goodbye and handed me off to our mother. This was not trauma.

Not quite.

But I screamed and fought and wouldn’t let her go. I had my first full blown meltdown and was creating my first and oldest memory. Me, being left. Me, not being “able” to handle a situation the “right” way. I remember her that day and how she looked. Embarrassed and scared. Of me. Of my behavior. I remember her that day. It was very cinematic. Very “*Kramer vs Kramer”* very “*Ordinary People*.” But it was real, and I remember her that day well.

I remember her.

Leaving.

-dangerous straightaway you’re--Demur

In late August of 1978, I was 3 years old.

My elder, and at the time only, sister Kristy was 8. Kristy, born Kristina (with a deliberate K) was named after her godmother--my aunt Tina. My mother’s elder sister. Kristy babysat me that summer and we were inseparable. She went back to school and then, on her first day, I had a complete emotional and nervous breakdown. At least, that’s what it looks like now, in my memory. It was categorically, *not* a trauma even in the loosest sense of the ubiquitous word today, but a disruption. An interruption to an order of things that in hindsight has taken on greater significance than what, then, could be dismissed as a simple separation anxiety.

However, in the folds of memory and in the hidden spaces of confirmation bias—a disruption feels like trauma. When Christmas decorations and birthday cards and children laughing contorts joy into fear and forces guilt to hold happiness's hand. Every celebration and ceremony become a survivor's remorse of sorts. No happiness is unpunished or unaccompanied by a time, a place, a smell, an image that triggers a feeling of being abandoned. The happier I am supposed to feel the more guilt--the more shame--the more ostracized I feel. Rationality can kick rocks. Joy itself triggers a pang reflex of jagged gut pain. Swallowing shards of yourself as you try to speak.

Damn joy.

Imagine being afraid of joy.

Of kindness.

Of love.

My name, on that day, was Sean Kristian (with a deliberate K to match the letters of Kristina) Lavery. My name would change to Sean Kristian Guckert when my mother remarried, and my stepfather adopted us. Most people have called me Guck for 40 years.

I remember the oddity and othering of having to explain to my fellow first graders that yesterday I had a last name that was this, Lavery, but today, my name is now this other thing, Guckert. There was another Sean in the class who got to keep Sean--as these things go, he was more popular, less awkward, and liked, and I had to go by Guckert which then, naturally, became Guck.

And I fucking hated it.

I hate it still.

“Guck!” is a sound that I have heard thousands and thousands of times and every time it makes me wince. A sound that I have never fully believed, or trusted.

“Guck!”

It is ugly. But it was also hard and rugged and a monosyllabic thump of a handle suggestive of a person that I was utterly not. But a person that I would learn to hide behind.

GUCK

“Guck!” also had another purpose, however. “Guck!” was like a director calling “action!” It was its own becoming. And a skin hard to shed.

-sane are you and-Assent

We--me, Kristy and our mother--lived in a small 2-bedroom apartment above a hair salon on Fairview Avenue. Living above a hair salon is not unlike living above a restaurant in that the stench never fully subsides and changes, elementally, how you process the olfactory signals of the world that give you a sense of place. When I think of Fairview Avenue, I think of the incessant stink of nail polish remover and burnt hair. When I smell burnt hair or nail polish remover, I think of Fairview Avenue. I dated a woman once that worked in a hair salon and every time I entered her workplace I was flooded with a charge of electricity that worked like a déjà vu but longer.

And painful. This reaction has followed me and struck me unprepared thousands of times in the most benign and usual of situations.

And I think about my big sister, the most important person in the world.

Leaving.

Always leaving.

I think about my mother.

Leaving.

Always leaving.

Fairview Avenue is located in Upper Darby, Pennsylvania—3 minutes west of West Philadelphia and runs perpendicular to Route 3, or West Chester Pike. The stretch of cement we lived on, between our apartment and West Chester Pike, was a quarter mile at most. Caddy corner to our apartment was a firehouse lost in the still life painting reverence of my longing for a different perspective. The firemen played with dozens of children in the middle of the street and all of the adult moms and hairdressers gossiped and flirted and smoked cigarettes out in front of the salon and it was the hub of civilization and the only place that ever mattered.

I think.

But it wasn't really like that. The street was busy and unsafe as Fairview and West Chester Pike shared an intersection and cars clogged up the block constantly in futile attempts to manipulate shortcuts and instead of children laughing there were horns honking and the frequent and proximal shrieking of the sirens from the firehouse would drown out the triviality of sibling angst and peaceful small talk. And we were there because we were poor, and my sister babysat me because our mother was waiting tables at the restaurant a few blocks over.

But I think we were happy. We were together. And in between cities and in between fathers and in between what might have been and what would inevitably be, I think of that time and place fondly.

I think we were happy.

My mother and biological father were Philly through and through but me and Kristy were born in D.C. He was military and we were stationed there in some capacity, but he left us when I was only a few months old, so —D.C. other than a place on a birth certificate, has no meaning to me. But every time it comes up, the literal words—Washington D.C. remind me of someone else.

Leaving.

I have also been told that she, my mother, left my father because we were unsafe around him but that depends on who you ask and when you ask them and in what stage of denial the given players are at any given time. I, for better and worse, have no recollection of the reality.

What I do know to be true is that he was gone. That he left us, and he never came back.

That was the first life lesson and core belief that I had. An emotional constant; a lesson in human relationship impermanence. When people leave, they might not come back and the greater the role in your life, the greater the expectation of care, the increased likelihood is of them leaving, and never coming back.

Every relationship that I have ever had has been governed by this fear and I have hurt people and hurt myself because of it. And the closer the person was to me the more that I have hurt them. The more “difficult” I was. The more “emotionally unavailable” I was. An emotionally dysfunctional conundrum that I have only ever been able to reconcile with through numbing, running, or attempting to end my life. A solution to the problem of me. I would be hard pressed to remember anyone ever asking me what I needed. And I certainly never offered up anything resembling, “I need help.” Just reactions and results.

And overreactions reduced as dramas. Not an inability to live, laugh, love L-O-fucking-L

When my sister left for school that day, I had a breakdown, and this event became my first memory. My most formative in the recounting of a life. In the retelling.

Or was it?

Was this evidence, a behavioral precursor or a cognitive retrofitting of memory to support a narrative and to give order to disorder. Was this intuition? Paranoia? How could I know, then, what would be?

--prevail, all as, this In

1985

The heat was less impossible in June of 1985 and the aesthetic was in sync with the technicolor vibe of the time. Pastel and neon and collars and painted over. Even the promise of punk rock was evaporating into a bubbly keyboard cream of America’s morning coffee. Reagan and MTV positioned as opposites but all strains of the same pop culture capitalistic mission. Nostalgia and distraction. We hid under desks at school, not from mass shooters but from communists, and I hid under the bed at home and all the adults spoke of how wonderful everything was. What a time to be alive and conditioned to die slowly and obediently to capital.

There was no firehouse or hair salon, and we were 4 miles more west of West Philadelphia in a dry (bar-free) town called Broomall and it was a hyper-delusional dermographia that wasn't even cul de saccy enough to be considered suburbia. It was running on the final fumes of white flight into the illusions of safety and the pocket lint of wealth. We could still see the Philadelphia skyline but there were less and less nonwhite people, less single parents, less traffic, less food stamps, less public transportation, and less of a sense of place. A manufacturing of community where middle class and the yesterpoor could feel a part of the dream. And they deserved it and would not allow for disruption. It was a 10-minute drive from our old apartment but might as well have been on the other side of the world.

It was here that I hated. A constant reminder of what wasn't and who wasn't there. Where I learned how to be not me. And not present. And how to deny, deny, deny reality.

The place where I came home one day to a sister gone and where everyone changed the channel.

But me.

Majority the 'Tis

2014

Robin Williams completed suicide by hanging himself on August 11, 2014.

16 years earlier, on March 2, 1998, Mr. Williams won an Academy Award for best supporting actor for the 1997 film "G*ood Will Hunting."*

I watched the film when I was 22 years old.

In the climactic, implied catharsis of the film, "*Good Will Hunting,"* the protagonist, Will Hunting as played by Matt Damon, finally opens up to his bedraggled and bearded court assigned therapist Sean played by Robin Williams. The two reluctantly embrace, echoing the cathartic climax of 1980's aforementioned (and far superior---if I do say so myself) "*Ordinary People."* Sean repeatedly tells him, "It's not your fault, it's not your fault, it's not your fault." All the years of abuse, and abandonment, and neglect was not his fault and this core belief evaporates on screen before us. Will Hunting, presumably, believes him, for the first time, and you can feel the toxic masculinity and defense mechanisms that have been built up over 20-plus years being shredded into a billion pieces. The tearjerking scene is undeniably visceral as Will lets his guard down and collapses into Sean's loving, totally professional, bearhug.

The scene is poignant and powerful and beautifully acted out and feels authentic and empathetic and works in the way cinema and drama is intended. It is literally gripping. A young man that suffered long and hard from abuse and abandonment and neglect comes to terms with his innocence and his arrested development and accepts a hug and with it sheds his long-protected vulnerability. The scene is incredibly paced and well written and probably won Mr. Williams his Oscar. (Matt Damon and Ben Affleck also won an academy award for this screenplay.)

But it is also utter movie bullshit.

It took me 16 years after seeing the film to start to open up to mental health professionals about my biological father leaving me when I was a baby, and the complicated and tumultuous relationship that I had/have with my stepfather. In an irrational way I used the suffering of the very fictional Will Hunting as my very real perspective. What happened to me wasn't as bad as what happened to him, which unconsciously just meant what happened to me wasn't as bad as what happened to other people. Anyone, really, as "it could be worse" goes. One of the great laws of capitalism. "it could be worse."

What happened to my mother, or to my sister, or to anyone was worse than wat happened to me. And this was not speculative in my mind, this is what I was told a thousand times implicitly when called, "ungrateful" or explicitly, when my mother once said, "you don't know what it's like to be beat on!" So, what happened to me wasn't that bad. It wasn't real. This logic supported the intrusive thoughts and core beliefs I struggle with about what I deserved. What I deserve. What was my fault and what wasn't. And what I deserved was to be punished for...for, my behavior. For my health. For not being "able" to do things. For not being "normal". For not behaving. For being me.

Unconsciously I believe I set out to become the person that deserved to be harmed. Tor rationalize it. To make sure it was my fault.

In chunks and fits and starts over 10 years in therapy I started sharing about what it felt like to be abandoned and what it felt like to be harmed. What it felt like to seek care to need care and to be rejected. What it felt like to try and convince myself that I deserved it. The harm not the care. Robin Williams' suicide was a turning point for me. As was my dear friend Marisa's.

It could be worse morphed into if they couldn't fight it what chance did I have.

I was 44 years old when I first talked to a therapist about military school. How it felt to have been left there. What happened to me there. How I never fully left, or how it never fully left me.

I haven't yet talked openly and honestly about how my sister running away made me feel then.

Now. Still. They are just as facts and events on a timeline. I have not allowed myself to believe, to accept, that my sister running away from home and not seeing her for years and years and everything that came with it, was a trauma.

I do believe, and have accepted, and have been receiving professional treatment for what happened to me at military school as trauma. Traumas. We still have a lot of work to do.

I loved "*Good Will Hunting."* But I don't believe a word of it now, and I resent its simplicity and neatly tied bow. For years--I wanted it to be real.

And now, after Mr. Williams' suicide, it has a different tone and effect on me.

I can't help but think how the subsequent events affect the memory and experience of the earlier. How my memory of sitting in a theater and being genuinely moved by the film in 1997 is altered now by my own experiences with mental health care and therapy and Robin Williams' suicide. I think about how most of the events of my life are just a jumbled pile of lists and events and memories that are all scattered in the otherwise empty courtroom of my mind presented by an invisible prosecutor as an insurmountable mountain of evidence against me. It is my fucking fault. How can it not be? And the papers are all swirling and shuffling and reshuffling and sharp and slicing and indicting. And the dates are all the same. A jumbled here, now. This happened then this happened and then this happened "your left, your left your left right left"

"your left, your left your left right left."

but no, it is all happening now.

In the swirl.

In the march.

--Madness starkness the-sense Much

1985

It was the end of June.

A couple of weeks after my 10th birthday my sister, Kristy, did not come home. She never came home again. I met with counselors and a detective and someone from something called "tough love" and a social worker that I had been instructed to tell "everything was okay." My mother told me to tell her that no one harmed me and that my sister, Kristy, was never harmed and my younger sister, Elizabeth, who was not even 1 year old yet was not in danger of being harmed. I remember the word harm seeming foreign and antiseptic. It was not a part of the everyday language I was accustomed to. Harm, harms, harming, harmed. The word struck me stranger than what my mother was actually asking me to do.

Which was to lie.

Harm, was I being harmed? What constituted harm? My mother told me to tell the social worker that Kristy wanted to do her own thing and did not want to listen but that she was never harmed. Harm. Later my mother would tell me, tell everyone, that going to military school was my choice. When I was 11. My mother told me to tell the social worker that my sister smoked cigarettes and she was always late and rude and was “difficult.” Because I didn't know that she smoked cigarettes---then the other things I also didn’t know must be true, even though I never saw her be late or rude or be “difficult”. Just be 15. And I saw her be 14 and 13 and 12 and so on. What else didn’t I know? I did not know what harm meant. Not really. Harmed, harmed, harmed? And I did not know what care was.

So, I lied. Nothing to see here.

-Eye discerning a To

The social worker never asked me about harm. She did ask me about how I felt, and if I was okay, and if I was scared. I told her Kristy would come back and everything would be okay. That she wouldn’t leave me there alone. The social worker said I wasn’t alone and that I had my mother, and stepfather whom she insisted was my father-father because he adopted me and gave me his name, and that I wasn’t alone. That I had my little baby sister. That I wasn’t being left. She said something about a better place which I had only ever heard before in reference to someone dying. A better place. Was she dead? What do you mean she is in a better place. Was she dying? I never saw the social worker, or counselor, or detective again. And my sister never came home again. And my stepfather was really nice to me after she left, for a while.

I liked that.

What people can be capable of when they want to.

When they need to.

A better place.

I found out later that my sister was living with my aunt Tina and uncle Jimmy now and their children, my cousins Christine, Denise, Jimmy, and Danielle. And that was their choice. And I did not see my aunt or uncle or cousins or grandfather or my godparents or my other uncles or aunts or cousins again. For many, many, years. The people, the family, the community that had so dominated and populated my life for my first 10 years were all gone, in an instant, and it was a choice. Kristy's choice. Their choice. And I was not allowed to see them or speak to them.

And I didn't.

Between 1985 and 2001 I saw Kristy twice. Once, a few months after she ran away--at my bus stop after school and a second time, while I was in a drug and alcohol rehab institution in 1995.

Seeking care.

A better place.

1978

A three-year-old boy running his fingers along the steel webbing of the playground fence marveling at the wild intricacies of the dancing shadows escorting his innocence unbeknownst, out into the ether, as he escorted his sister to her first day back at school, into a new realm. Watching the shadows as they swell and shrink like waves on the steaming black August asphalt. He looks up at his big sister with wide eyes and hope and pure, pure love not knowing what was to come. How could he? He wants to remember this moment forever. How he loved and needed her so.

What did he know? What could he know? What does he know, now?

Divinest

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iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii”

Is Madness

JUST NOW

I remember the denim square record player she left me. The vinyl holy triumvirate of *Grease*, *Saturday Night Fever*, and *Beauty and the Beat.* The uncoolest collection of late 70's early 80's pop culture relics a 10-year-old boy could possibly possess. The VHS copy of *The Outsiders* she gave me as a gift.

She was 15 when she left, and she was left with little choice. I know she cared but I was left all the same. And on my way to here. The ghosted. The ghost. Ghosting. Forever. Never quite there. A 10-year-old haunting this adult's bodymind. Broken, busted, and always on my way. Forever.

Never quite there, am I?Stuck in the folds.

But I know she cared.

She still does.

And I know that all of this didn't just happen to me.

But it did happen.

And it did happen to me.

I know that and I know none of what has happened to me is her fault.

None of it.

I know that.

It not being my fault still needs some convincing. Everything not being my fault still needs some convincing.

Anything, not being my fault, still needs some convincing, but I am getting there.

-Much

And what if I am/was, EXACTLY, the right amount of fucked up? And what if that is okay?

(620)

Much Madness is divinest Sense -

To a discerning Eye -

Much Sense - the starkest Madness -

'Tis the Majority

In this, as all, prevail -

Assent - and you are sane -

Demur - you're straightway dangerous -

And handled with a Chain -

-Emily Dickinson

"I can only note that the past is beautiful because one never realises an emotion at the time, it expands later, and thus we don't have complete emotions about the present, only about the past."

--Virginia Woolf

foreword
(march!)

“The most common form of despair is not being who you are.”

— Søren Kierkegaard

A Boy and his Paint

I see a boy on the beach at dusk

-- pink naked and armed with a long claw hammer.

5 inches of splintered wood stabbed into a fist of black rubber.

3 feet four inches of boy

The boy sets the hammer down.

Disappears.

Returns.

He is carrying a can of blue paint

Gentle and soft on his belly as if pregnant

He protects and clasps his baby with blunt stubs of locked fingers.

The boy sets the paint down.

Disappears.

Returns.

He is carrying a sand-colored canvass sack of long white dining candles.

He spills and scatters the candles into an amuck of an outstretched endless everything

The boy hammers each candle into the sand.

One by one.

The candles stand crooked and proud and unlit at the genesis of a world before words

The boy wonders

The boy does not know how to spell S.O.S.

The boy does not know what a lighthouse is.

But he builds.

The boy is pale and gaunt and hungry and raw.

Nearly translucent as the night changes its mind.

The boy is pure intuition and ignorance trembling into something older in what remains of the day.

The last day.

The first day.

The boy walks into the ocean seeking peace.

Disappears.

Returns.

Digs seeking the same.

The boy digs for something that seems like a paintbrush in the ever-fine sand grains of earth.

The boy settles for a jagged crusted shell and scoops a jagged crusted shells worth of paint from the can.

And another scoop

And another.

The boy heaps sloshes of paint into the sea

painting each incoming wave like a shadow boxer

Into a mirror only he can see

The boy heaves paint with desperate and determined haymakers

A different kind of grace

Force.

The boy embraces each crash anew.

Almost lovingly.

The boy wonders

The boy does not know what a suicide note is.

The boy does not know what suicide is.

The boy does not know how the weather works.

How the tides work.

But to the boy these ideas splash into splash over splash before him and they work the way they are supposed to work without definition

Without explanation.

But to the boy it is all sound.

All glorious and wonder-full

And to the boy this is what freedom sounds like.

The boy paints.

The boy adds more and more paint to each stroke in ceremony

The beautiful mess that life might be

The boy and the sea are of one motion now.

In sync

The boy believes there is enough paint to turn the night black ocean back to blue.

Back to morning.

Like the day sky.

Like safety.

The boy pours what is left in the paint can over his head

The boy dives into the wonder

To be with the sea.

To swim to the day.

The boy disappears.

The boy does not know how to ask for help.

The boy has yet to return.

It is in this space.

Between the disappears and returns of an aforementioned messy beautiful where the boy is free

Where the boy is being

Where the boy is,

simply,

allowed to be

A boy

Between the disappears and returns

Between what is being

And what is becoming,

What is....

becoming blue

REFLECTION ESSAY

At the 2014 National Book Awards acclaimed author Ursula K Le Guin said, “We live in capitalism, its power seems inescapable – but then, so did the divine right of kings. Any human power can be resisted and changed by human beings. Resistance and change often begin in art. Very often in our art, the art of words.”

In *Year of the Tiger*, disabled activist and author Alice Wong writes, “My disdain for the white disabled people who so badly wanted to be “allies” with disabled people of color, who never understood Stacey’s politics or disability justice and never supported her work while she was alive, ignited a flame in me. As someone close to her but not within her trusted innermost circle, I wrote a remembrance, “Loving Stacey Park Milbern,” that very day, because I wanted the public to recenter its attention on Stacey’s actual words and work. This was my small way of honoring her while telling these so-called good allies to back the fuck off” (Wong 311-312).

How do I write, using the ‘art of words’ in the spirit of ‘resistance and change’ as Le Guin suggests but also, as a middle-aged, American, cisgendered, heterosexual, white (disabled) man know when to--back the fuck off?

And should I even write about my mental health and disability?

I am writing a creative nonfiction memoir entitled “becoming blue” about my experiences with mental health issues, trauma, and coming to terms with my identity as a disabled bodymind. I am writing this through the lens and filter of Disability Studies focusing on the fundamental concepts of the social model of disability, Narrative Prothesis and Disability

Justice. My aims for "becoming blue" and my thesis about how Disability Studies informed the project is for my work to be considered, to be defined, as care work.

But how? And keeping in mind Alice Wong's quote and the very idea that care work is a concept better realized by Leah Lakshmi Piepzna-Samarasinha in her book entitled *Care Work* that is defined through "Disability Justice" and that was, "coined by the Black, brown, queer and trans members of the original Disability Justice Collective, founded in 2005 by Patty Berne, Mia Mingus, Leroy Moore, Eli Clare, and Sebastian Margert" (Piepzna-Samarasinha 15).

I believe that there is a place for my story and in sharing my experiences, but I must understand that this movement is not mine. I can only hope to contribute and support Disability Justice in what amounts to creative mutual aid. And in order for this work to be a part of a larger conversation about Disability, trauma, and mental health and for it to be considered care work it must be done with humility and in acknowledgment of the people and the voices that came before, are still working, and that, ultimately, made my work possible. I have my experiences--my story, but what is required of me is that I offer up access to my vulnerability in the most authentic way that I can.

With my words.

The first time I thought about killing myself, I was 8 years old. The first time I tried to kill myself, I was 12. Over the next 25 years I made 6 more attempts at ending my life and engaged in all manners of para-suicidal behaviors. I have lost track of how many times I have been hospitalized. My last suicide attempt, in 2012, was a year before I went back to college and started to study and take writing seriously. This is not a coincidence. 2012 was also when I started talking openly and honestly with mental health professionals about my feelings, my symptoms, and my experiences. Learning how to read and write critically and slowly, very slowly, opening up to the mental health recovery process helped me find out some truths about my mental health, my trauma, and myself. One of the most important lessons that I learned is that I believed that my life was not worth living.

Reconciling with the core belief that my life was not worth living is at the heart of my memoir. I have learned that suicidal ideation is partly due to my mental health. It is a very real symptom and obsession that I needed to, and still do, address with mental health professionals and medication. But it is also a result of how the "world"--in what we see as society, systems, family, environments, friends, family, and institutions-- met my behavior. My behavior was always, on some level, deemed abnormal. My behavior, and therefore me, was met by the absence of care and often, too often, with punishment or with harm. With apathy, with neglect, with denial, and with violence.

The greatest revelation of my work in the pursuit of articulating how it feels to believe that my life was not worth living—was that I was not alone. Is--that I am not alone. That the feeling that my life was not worth living on a deeply personal level was only a modicum of what marginalized people have felt like for centuries on a collective level. And the more marginalized the person, or community was because of their race, gender, sexuality, religion, or disability etc.--the more the "world" was sending them the message that their lives were not worth living.

In this illuminating space, I had to both acknowledge that I was disabled as much by my environment as I was by my impairments, but more importantly, in this space, I had to recognize my privilege. I would not dare interpret my personal revelations into such a galling perspective to insinuate that I understand or pretend to know what it is like to be historically and systemically marginalized, but I can use it to better understand that my writing can be done in the spirit of empathy. And in solidarity. And as being governed by Disability Justice principles where the most marginalized among us need to be heard first. I can use my work, my writing, my voice to support and amplify those voices whenever I can. It is imperative. But I also must remember when to "back the fuck off!"

Coming to terms with a life-long struggle with suicidal ideation and the core belief that my life was not worth living is difficult to communicate artfully. Each chapter in "becoming blue" will share, in my best efforts, an incident or series of incidents that will deliver a message those events were signaling to me. And each chapter will be informed by a Disability Studies concept that is not cited explicitly. In the first chapter, "Hic sunt dracones (Latin for *Here be dragons*)" I am (trying to) recreate the sense of cognitive dissonance that the walls are closing in on me constantly and how post-trauma those walls are reminders of both the traumatic event and a means to an escape, or of blocking out memories. "Hic sunt dracones" also frames the revictimization process that we often refer to as "being triggered" in the form of something as ubiquitous, inescapable and seemingly simple as walls. More overtly, "Hic sunt dracones" quite literally embodies how the social model works in that military school (from the abandonment to the violence) was more disabling than any symptoms of my mental health as presented in "abnormal behavior" that, allegedly, landed me there in the first place. The refrain of "your left your left your left right left" throughout "becoming blue" are marching orders situated as intrusive thoughts and reminder that under capitalism anything thought as unproductive is out of order, abnormal, and disposable.

The last chapter, "Fuck *Good Will Hunting*" speaks to how trauma affects memory and confirmation bias and how events that happened later in life can inform the memory of preceding events. Complex trauma can force you to absorb information all at once and confuse messages and be in constant hyper state of fight, flight, or freeze while paranoia and anxiety seek reinforcing information—that my life is not worth living. References to the film *Good Will Hunting* are informed by the concept of Narrative Prosthesis and critiquing cultural and societal overcoming tropes in the realm of 'magical resolutions' and 'bootstrap mentality.' *"Fuck Good Will Hunting"* also serves as a reminder that there is a human being here, me, writing this story and giving the reader access to my vulnerability is not easy. Recalling and reliving these experiences was not easy and sharing them is a plea to be heard and for empathy. I was a young sensitive, kind and shy momma's boy with mental health issues who was abandoned, neglected, beaten, and violated repeatedly and was denied care by the people that he most needed it from when he most needed it. Any questions as to how and why this project should be considered care work should be directed here. This project is me reclaiming my humanity and my identity and my worth.

It is me telling you that my life is worth living.

It is me telling myself that my life is worth living.

I found the rhetorical bridge I needed to connect those last 2 statements with *Invention as a Social A*ct by Karen Burke LeFevre. LeFevre's writing had an incredible impact and was the catalyst that helped connect some disparate philosophical dots concerning approach and reconcile some contradictions inherent in writing "becoming blue." How to write about the self but have it not be about the self. How to write in a way that is not a boy screaming that "no one understands" and getting lost in trying to convince the reader and the world. How to effectively communicate ideas through narrative in a way that satisfies both creative writing born in the humanities and influenced by lived in experiences that are more often served by the social sciences. How to tell a story about change as it is changing. How to tell a story worth telling about lives worth living when those lives and stories have historically been relegated to the inspirational or worse, “self-help” bins of our collective consciousness.

How can a story effectively embody a real person's experience in real time and process it as they are processing it? How does the story become them? How best does a story relate to its reader? Karen Burke LeFevre suggests:

“A view of invention as a social act, then, is compatible with prominent classical and contemporary theoretical perspectives. In summary, to think of invention as a social act is to regard it in the following ways:

- as actively creating as well as finding or remembering that which is the substance of discourse.
- as involving a variety of social relationships with real and imaginary others with individuals as well as social collectives
- as a dialectical process in which individuals interact with socio-culture in a unique way to generate something
- as an act that generally is initiated by inventors and brought to completion by an audience often extending over time through a series of social transactions and texts

In contrast to the accent a Platonic view places on the atomistic synthetic inventor, a social perspective stresses the dialectical relationship of the individual with society and culture” (LeFevre 46-47).

LeFevre’s work here serves as a comprehensive framework for me to make sure “becoming blue” does not become a “self-help” book, or worse--a vanity project at odds with the principles of Disability Justice. The notion that an act—writing “becoming blue”-will be initiated by the author but then “brought to completion by an audience often extending over time through a series of social transactions and texts” (LeFevre) supports the suggestion that this work is not a result but a commentary on the creative process (of both the self and the book) and it serves as an invitation. The beginning of something. The beginning of a dialectical discourse about disability that is being delivered in the form of “becoming blue.”

And another thing:

On *Capitalist Realism*, *The Unexceptional Schizophrenic,* Bassey Ikpi, Esme Wang, ‘logic of the state, and Emily Dickinson

Author Mark Fisher (who committed suicide in 2017) wrote in his book *Capitalist Realism: Is There No Alternative?* that: “Mental health, in fact, is a paradigm case of how capitalist realism operates. Capitalist realism insists on treating mental health as if it were a natural fact, like weather (but, then again, weather is no longer a natural fact so much as a political-economic effect). In the 1960s and 1970s, radical theory and politics (Laing, Foucault, Deleuze and Guattari, etc.) coalesced around extreme mental conditions such as schizophrenia, arguing, for instance, that madness was not a natural, but a political, category” (19). Madness is, in fact, a political category and so is being a disabled bodymind. I choose to move forward through life acting accordingly and suggesting, perhaps, that madness is the appropriate response to this inhumane world dominated by capitalism. Maybe, I am the, EXACT, right amount of fucked up for what I have seen and what I have been through.

In Catherine Prendergast's essay, *The Unexceptional Schizophrenic: A Post-Modern Introduction* she suggests that, "The public seemingly only desires the stable schizophrenic, easy to incarcerate, or easy to celebrate as the occasion requires. The public does not want to allow for fluctuation between states, and even less for a possibility that both states exist at once" (239). In this article she also introduced to me to the work of Ken Steele and his *New York City Voices: A Consumer Journal for Mental Health,* a publication curated by a person with schizophrenia (Steele) that shares the wealth of experiences of people with mental health issues not only the exceptionally good or exceptionally bad ones.

Bassey Ikpi's *I'm Telling the Truth but I'm Lying* and Esme Wang's *The Collected Schizophrenias* are both memoirs that named their author's illnesses and described their symptoms in instructive, empathetic, and affecting ways that were matter of fact and only part of their stories not the only part. I came to their work early in this process and they have inspired me to do the best that I can in representing our mad community with authenticity and in solidarity.

The nonlinear approach that I employed for "becoming blue" was informed by Gilles Deleuze and Félix Guattari in *Anti-Oedipus: Capitalism and Schizophrenia* and what I interpreted as 'logic of the state.' "Your left, your left, your left right left" are marching commands and a directive to make sense out of what shouldn't make sense and put something in order that is natural out of said order. For me, the 'logic of the state' was that I was only as valuable as I was productive. And I was only as productive as I was exploitable. And I was not even "able" enough to be exploited and cast aside as disposable when I was very young. Reversing that in the face of the demands of capitalism is the challenge of my life. Taking ownership and agency of my mental health and of my disability is about identity and "becoming blue" is a protest against the messages the "world" was sending to me.

Emily Dickinson: "Much Madness is Divinest Sense" is not only correct, and not only apropos, but her poetry is the height of what we mad folks can do with "the art of words."

Thank you.

And one last thing:

I hope my life and my work can someday live up to the honor of paying tribute to all the disabled activists, authors, academics that have paved the way.

For me.

Offering this work is the least that I can do, and I hope it earns the title of Care Work.

In conclusion, words from Leah Lakshmi Piepzna-Samarasinha's *The Future is Disabled* that I must always be mindful of when approaching Care Work and Disability Justice, "The erasure of the intellectual and activist labor of disability justice activists—particularly disabled BIPOC women and nonbinary people and/or femmes—makes me want to scream. But it also has giant implications for whether the shit works or not. If you don't do mutual aid / collective care knowing that we invented the term "collective care," because we wanted something radically different than the charity model that was excluding and killing us—something where disabled people could lead and provide and cocreate care, where what care looks like is fundamentally different—you are not only being ableist; you will lose. Our disabled strategies are fundamentally different, and they work better" (60).

“But in the end, stories are about one person saying to another: This is the way it feels to me. Can you understand what I’m saying? Does it feel this way to you?”

— Kazuo Ishiguro

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If you need help, ask. I did.

Pennsylvania Suicide Hotlines - Suicide.org! Pennsylvania Suicide Hotlines, Pennsylvania Suicide Hotlines, Pennsylvania Suicide Hotlines, Pennsylvania Suicide Hotlines!

Lifeline (988lifeline.org)

Association Between Disability and Suicide-Related Outcomes Among U.S. Adults - American Journal of Preventive Medicine (ajpmonline.org)