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DYSFUNCTION

By

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Thesis

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Table of Contents

Image List.....	2
Abstract.....	3
Introduction.....	4
Background.....	6
Empathy.....	7
Artistic Background.....	9
Expanded Research.....	12
Thesis Work.....	14
Influences and Critical Theories.....	22
Conclusion.....	24
Bibliography.....	25

Image List:

1. *Obsession*, Video Stills, 17 mins approximately, latex, tweezers, sound, 2012
2. Maya Lin, *River Line*, Systematic Landscapes, 2006
3. *Wound #2*, acrylic, wax, fiber, ink on board, 2009
4. *the skin had been picked raw, section #8*, acrylic, graphite, found objects, manipulated wallpaper on panel, 2011
5. *Interior objects*, found objects, acrylic, 2012
6. *Seeing White Noise*, video, splinter, tweezers, resin, manipulated found objects, 2012
7. *A Room of His Own*, video, blood oranges, door structure, door, peephole, 2012
8. *Manifestation* (detail), manipulated found wallpaper, acrylic, graphite on panel, 2011
9. *they all functioned at once*, light switches, panels, board, light, electrical component, 2012
10. Rachel Whiteread, *Untitled floor (Thirty-Six)*, (Detail), Cast aluminum, 36 tiles each, 1 1/8 x 160 1/4 x 160 1/4 inches each, 2002

dysfunction

Chairperson: Professor Kevin Bell

dysfunction examines how we perceive normalcy and in turn, differentiate those who are abnormal through visual metaphors of the interior structures and features of the home. My thesis exhibition explores psychological disorders through installation, painting, drawing, sculpture and performance. The viewer's interaction with the installation, which references an individual's domestic and very personal spaces, allows a physical awareness and appreciation of another's personality and psychological characteristics. This is done in order to create a more in-depth understanding or empathy of abnormal psychology and various mental states, such as intense anxiety or anger, which exist within all of us.

dysfunction

Introduction:

From Timothy Findley's *Pilgrim*:

*There are some whose experience of life is so far removed from our own that we call them mad...in order to relieve ourselves of taking responsibility for their place in the human community.*¹

These lines reflect how we perceive psychological and societal normalcy and in turn, differentiate those who are abnormal. The definition of normal behavior, both public and private, is different the world over, indicating that such concepts are not fixed and are to some extent determined by each society. Certain mental states are not always considered to be disorders in various cultures. Oftentimes, people that western society labels "sick" are thought to be closer to god, to truth in the unknown, to magic. For example, a shaman in one culture, like the Hmong, whose trances link him to the divine, may be considered as having epilepsy and schizophrenia in a western culture. Some societies express "respect for the mentally deranged and...consider them privy to a seer's wisdom."² Images and paintings of saints often resulted from studies of patients in institutions, as these people seemed to have a touch of otherworldliness.

The word abnormal describes behavioral, emotional, or cognitive dysfunctions that are unexpected in their cultural context and associated with personal distress or substantial impairment in functioning.³ Within a culture, the level of emotional or behavioral functioning also varies within each individual. From a person's perception to cultural beliefs, the line between normal and "insane"

¹ Findley, Timothy, *Pilgrim* (New York: Perennial Harper Collins Publishers, 1999), 261 – 266.

² Arnheim, Rudolf, "The Art of Psychotics." *Art Psychotherapy* (Vol. 4): 113 – 120.

³ American Psychiatric Association, DSM-IV-TR (Diagnostic and Statistical Manual of Mental Disorders, 4th edition), 1994.

can be considered to exist on a continuum. A continuum is a rating scale, such as a personality or behavioral test that shows the extent of a characteristic.

*The most common objective personality test is the MMPI-2, a 567 true/false test that is a good measure of dysfunction within personality. It is less useful as a measure of healthy or positive personality traits, because its design was based on helping a professional to find a psychiatric diagnostic label that best suited an individual.*⁴

We are all capable of a range of emotional and behavioral traits, some which might be considered “insane” or close to it. As individuals, we all hold our particularized experiences as an understanding of the world, how we interact within it and finally, as what we view as our own personal normal. Psychological states and conditions occur for a variety of reasons both internal and external, and include biological, psychological and social factors. This has been coined the Biopsychosocial Model in psychology.⁵ These three are the same factors in both the growth of an individual, as well as in the development of a mental illness.

We all experience psychological distress to some degree. Creating empathy and understanding of psychological disorders is one of the main aspects of my artistic research. My current body of work explores psychological disorders through visual metaphors in order to elicit sensory experiences with the viewer. This is done in order to create a more in-depth understanding or empathy of abnormal psychology and various mental states, such as intense anxiety or anger that exist within all of us. For example, the common experience of being nervous or anxious about an upcoming event is a less severe manifestation of Generalized Anxiety Disorder, which is characterized by feelings of worry that are out of proportion to the event, which exist as a day-to-day

⁴ Jane Framingham, PH.D., *Types of Psychological Testing*, <http://psychcentral.com/lib/2011/types-of-psychological-testing/all/1/> (May 5, 2012).

⁵ *Abnormal Psychology, Sixth Edition*, ed. Whitebourne Halgin, (The United States of America: The McGraw-Hill Companies, Inc., 2010), 10

experience.⁶ While the disorder lasts longer (at least six months), it is often comorbid with other conditions, meaning that it occurs simultaneously with symptoms of other disorders (such as depression) within the same individual.⁷

Background:

Genetically speaking, my family, on both parental sides, has a history of chemical imbalances and destructive psychosis that has led to much hardship, and occasionally loss. In addition to my family, I have many friends who experience hardship firsthand, meaning they live with disorders on a daily basis. Two of my close friends died as a result of a person with a mental illness who was not treated. I am attracted to the type of personality and character results from such personal struggle which comes from maneuvering and coping with an illness. It seems that many of those that I am close to, whether friends or family live with some sort of psychological disorder. This perhaps may be a part of the society that we live in. Depression, anxiety, suicide, posttraumatic stress disorder, and manias have become aspects of my normal in my community of relatives and friends. This specific vein of history in my family, friends, and myself, influences my disposition, my perspective on mental health, and my art.

There are many disorders listed in the Diagnostic and Statistical Manual of Mental Disorders (DSM), such as bipolar, obsessive-compulsive, and posttraumatic stress. Each psychological disorder, or fracture as I call it, manifests itself through the individual in a distinctive way. I am interested in how the person was “splintered” (how their disorder manifested). I want to know how they dealt with the idea of being sick and how they live with the disorder every day, which comes

⁶ Abid.154

⁷ Abid. 39

down to the physical effects, the history of medications used and their life stories. All of these aspects vary in different ways. My work addresses various issues and manifestations surrounding mental distress, as well as the desire to understand myself.

Numerous artists, from Edvard Munch to Henry Darger, who many believed to have disorders, funneled their “psychosis” into their work. In a way I do this for my own self-medication, which I was advised to do from a therapist at an early age. However, using the category of mental disorders brings with it a history of pain, struggle, personal development, and constant change. But I want to speak beyond only my own issues. I want to foster a greater awareness in our culture of the many shades and sides of mental health through my work. Awareness that I am using delicate subject matter to many is always at the forefront of what I am doing.

Empathy:

Understanding and accepting disorders in others is often challenging, and requires compassion. Empathy is the understanding of what another is experiencing. The term empathy was coined during the 18th century as being “happy for others’ happiness and ‘uneasy at their misery.’” Various studies using neurological brain scans that look for pain processing note that an unconscious mimicry happens via facial expressions which create a learned experience.⁸ It is stressed in psychology that empathy is a needed state for many, facilitating greater understanding and awareness of others and ourselves while simultaneously creating a more tolerant society. This is happening through the “person-first” language which is imperative in the treatment of those we see as “other.” Instead of calling someone who has an illness “crazy” or “bipolar,” the person-first language

⁸ Lydia Lyle Gibson, “Mirrored Emotion: A basic human impulse affecting the course of history, culture, and personal connections, empathy is also a neurological fact—and one that’s increasingly understood,” *University of Chicago Magazine*. (April 6, vol. 98, Issue 4): 35.

emphasizes using vernacular that distinguishes an individual from an illness, for example, “a person with bipolar disorder.” Other treatments that push for empathy include imagery, videos and sounds of another’s pain.

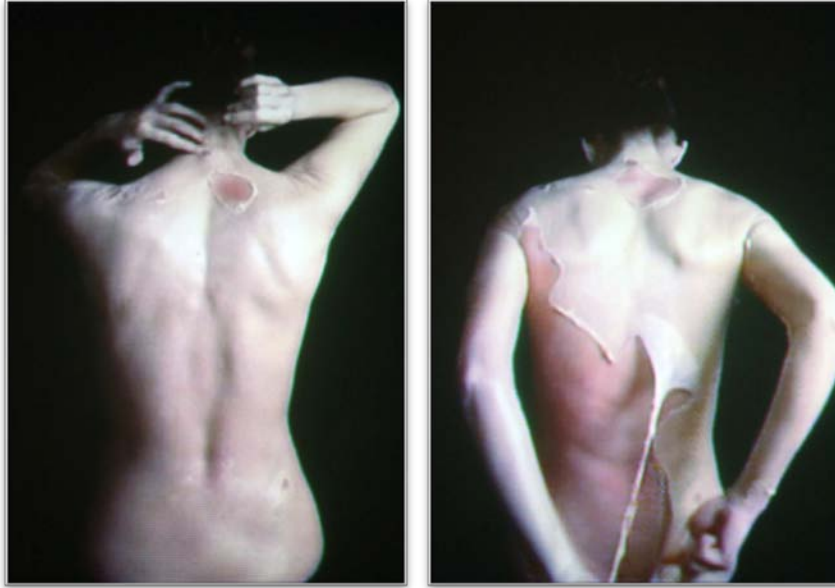
“...although other people may misunderstand us, we always understand ourselves because we were the source of meaning in the first place.”⁹

In one of my video performance pieces entitled, *Obsession*, I work within the realm of compulsions, specifically dermatillomania, which is an obsession with picking and oftentimes consuming ones skin. Though this performance borders on the horrific (it feels unbelievable and disgusting as the sound reverberates while the skin is picked off of the body), so do the experiences of those who live with a disorder. In this piece, which was my eighth performance (I too became obsessed), I cover myself with latex, pick and rip it off with tweezers until is gone. The physical pain that I put myself through in this performance can be seen as masochistic. However, I want to show the extremes of this obsession. In no way can I ever show the full extent of any disorder, but this video provides an approximation, through which viewers can relate to and perhaps partially experience dermatillomania. From an anonymous journal of a person who lives with dermatillomania:

“This afternoon I picked myself raw: face, chest, behind the ears and back. I just couldn’t stop. When I brushed my hair, my scalp hurt so badly; the bristles drove into and reopened the cuts. Everything was red so I stayed in front of the mirror perusing and hoping the next layer was clean.”¹⁰

⁹ “Discourse, power and the subject,” ed. Stuart Hall, *Representation: Cultural Representations and Signifying Practices*. (London: Sage Publications, 1997), 42 – 74.

¹⁰ “Dermatillomania,” Anonymous Journal, (December 2009): 17.



Obsession, Video Stills, 17 minutes 47 seconds, latex, tweezers, sound, 2012

Dave Hickey, from *Enter the Dragon: On the Vernacular of Beauty*, quotes Baudelaire as saying “the beautiful is always strange,”¹¹ by which he means, that it is always strangely familiar. It can be said that going through various mental states and conditions is universal in the human race. This in turn allows us to be capable of understanding others at a deep and profound level.

Artistic Background:

Though I am invested in drawing and painting, my work has become pan-discipline. In my art practice, the idea dictates the material. As issues inherent to abnormal psychology are so multifaceted, I felt my work begin to reflect this reality, in both process and materials. I also find it essential to understand the disorder as much as possible and experiment with the best way to present it, hence the necessity of incorporating performance and video.

¹¹ “Discourse, power and the subject,” ed. Stuart Hall, *Representation: Cultural Representations and Signifying Practices*. (London: Sage Publications, 1997), 42 – 74.

Before arriving at metaphors which utilize qualities of the interior of homes, I examined other ways of expressing similar ideas, and explored possibilities within geological formations and rocks. I was interested in the connection between the geology of landscape and the human condition, as physical growth and decay are factors that affect both. Rocks, like the human body, are formed, develop, and erode over time. However, this area did not readily create connections with my viewers, as these pieces seemed cold observations.

In 2009 my studio research revolved around natural repeating forms found in stretch marks, wounds, strata (layers in rock formations), and other fissures and fractures that are caused by both internal and external forces through the use of painting and low relief sculpture. These ‘forces’ often result in the formation of wounds which can create scarring. The various processes form layers of history in both memory and the tangible realms which can clearly be seen in the formation of human and geological landscapes. These show not only growth and age, but also violent action, ripping open the body/landscape, exposing layers that are not always readily seen. Often the landscape is referenced as a human body; for example, when an area has been ripped apart by deforestation, it is often referred to in terms of rape. Just as the black ashes of a forest fire carpet the ground, so do the scabs of a skinned knee. I researched how these “forms” were inflicted, how they healed and of course, how we view them. Throughout this time of creation, I referenced such artists as Matthew Richie and Maya Lin who used the natural forms found in the landscape.



Maya Lin, *River Line*, Systematic Landscapes, 2006

12



Wound #2, acrylic, wax, fiber, ink on board, 2009

After my initial research, however, these similar ‘breaks’ became merely repeating, abstract structures and representations, devoid of the actual complex human experience I wanted to convey. While there were successful aspects of my

initial MFA work, there were facets that were not working for me: lack of figure and humanity, the high level of abstraction and repetitiveness and direct empathy with the viewer. I discovered that there are themes that are consistent within and vital to my work: the human experience, fractures, healing, perception, psychological states, and the figure. The veins that connected my interests and my initial research were the perceptions and psychological aspects of the fractures inside the psyche.

¹² Maya Lin, *River Line*, Systematic Landscapes, 2006.

Expanded Research:

My work involves many disciplines including painting, video, and installation, with painting and drawing as the most vital to my formal processes. All of these combine to create a rich, multifaceted experience for the viewer, immersing them fully in the installation. I attempt to visually represent and understand psychological manifestations while creating an engaging, relatable experience. My research therefore expands outside of visual practice and into other areas of inquiry. Psychiatric literature, interviews and stories, such as Kay Redfield Jamison's autobiography of living with Bipolar disorder, An Unquiet Mind are among the sources I reference in my research. This specific autobiography allowed me to see another's perspective on what it is like to deal with day to day characteristics of an illness and the phases one goes through in order to survive and live in what we see as "normal".

Readings such as Charlotte Perkins Gilman's *The Yellow Wallpaper* have been influential for me, resonating strongly within my life. *The Yellow Wallpaper* is a short story written during the late-1800s of a woman's journey into what was then called madness/female hysteria (which today would probably be categorized as Postpartum Depression). In this short story, the female character, who is locked up in a room to recover from childbirth, begins to identify with patterns of the peeling wallpaper. She starts to see a woman crawling within the pattern. Eventually, she separates herself from reality to become the woman inside of the patterns. The wallpaper functions as a metaphor or symbol for the woman's illness.

The front pattern does move—and no wonder! The woman behind shakes it! Sometimes I think there are a great many women behind, and sometimes only one, and she crawls around fast, and her crawling shakes it all over. Then in the very bright spots she keeps still, and in the

*very shady spots she just takes hold of the bars and shakes them hard. And she is all the time trying to climb through. But nobody could climb through that pattern—it strangles so.*¹³

Influenced by this reading, I chose to use work with wallpaper patterns. Initially I created my own “yellow wallpaper”, entitled *the skin had been picked raw*, via layering of found papers, which I peeled, working with different layers within which I drew and painted numerous images of myself peeling and picking inside of the wallpaper. Originally it was a large assemblage piece; however it was cut down into eight smaller pieces, and placed throughout the gallery almost as portraits.



the skin had been picked raw, section #8, acrylic, graphite, found objects, manipulated wallpaper on panel, 2011

I also utilized fruit as a main source of imagery for the wallpaper patterns, as almost every type has a mythological or symbolic association. For example, the pomegranate is associated with the divine. Fruit has been used throughout visual history (especially painting) as decoration, and because it has visceral, skin-like qualities that allow it to indicate the beautiful, timeless process of growth and decay. It also lends to itself to metaphors of life, death and virility. For example, the golden apple of discord, stolen by Eris from the Greek god Hera, which ultimately caused the Trojan

¹³ Gilman, Charlotte Perkins, "The Yellow Wall-paper. A Story," *The New England Magazine* (Volume 11 Issue 5, January 1892).

War, was a symbol for destructive beauty. Many cultures view specific fruits as originating from the Garden of Eden, such as the pear, fig, and orange.

In order to create wallpaper patterns that functioned as metaphors for specific illnesses, I referenced many friends and family members with disorders who directly influenced my work during this process. For example, one female that I was working with lives with Bipolar I, rapid cycling which, in addition to other aspects such as mania and depression, often causes over sexualized actions and promiscuity. She lived in the Middle East for many years and was adopted from an Asian country. The woman is very exotic and sexual. Therefore, I selected a fig for the fruit that would represent her because the fig originates from the Middle East and is often viewed as a symbol for female genitalia as it is very pink and fleshy. Since this female also has a tendency to self-mutilate, she allowed me to use her personal knives to mutilate the figs. These were just a few of the aspects of her disorder. Though I continue incorporate the stories that people who live with disorders give me, I make my work ambiguous so that it is easier for the viewer to relate to.

Thesis Work:

Utilizing the story of *The Yellow Wallpaper* and its use of depression and anxiety as a base for my interests, I pivot to my own artistic work. I chose the home and its spaces as a central organizing theme, as it is familiar and universally recognized in our culture to serve as metaphors for individuals and their mental states. Metaphors allow my viewer to experience the sometimes difficult and uncomfortable nature of a disorder from another and less charged perspective. Home is a particularly rich metaphor; it contains ideas of public vs. private and holds dynamics that we all understand and relate. I take features of home life, such as wall hooks, plumbing or light switches, and manipulate

them in such a way, whether turning them upside down so they are no longer functioning or adding elements that look like skin, so that they become physical indicators for a specific disorder.

Features of the interior of a home are common in numerous cultures. Panels, faucets, paint, and the like are all manufactured and created to fit a specific standard in building code; the design may vary, but their function does not. By manipulating the function of the basic household object or feature, I subvert the normalcy it represents. For example, most people have a pair of tweezers for personal grooming. Placing 30 tweezers onto a shelf shows an infatuation or obsession that is beyond what is normally considered reasonable and acceptable. They stand as a symbol or metaphor for disorder.

Aspects of the interior of a home are easily relatable in many cultures. Homes are highly personal and can tell stories of the people that inhabit them: from dirty dishes stacked in the sink to a perfectly arranged centerpiece, rooms and features in a room all have identity. Personal spaces can stand as a symbol for functioning chaos on a very personal and psychological level while having universal implications. For example, a closet can indicate an idea of keeping something hidden or closed off to something existing behind the apparent calm and order of the exterior. How we organize and decorate our home interiors, from simple to elaborate, can signify who we are and how we live.

The space that I chose to install my thesis exhibition is a historic building, near the train tracks, called the Brunswick Building. It has uneven floors, slanted walls and a layout that does not have a regular, rectangular shape. This building has been converted into a gallery and houses many artists' studios. I specifically chose two rooms in the building (one of which is a gallery space) as they complement my work which utilizes older, found object materials and building elements. I

have intentionally worked with the architecture and space of the building where I created my installation, in order to make it appear that anything which was added, did not seem out of place, that it was a part of the original architecture. For example, three large windows, painted white, hang precariously on a ledge above the audience, while a faux entrance way was created against the rear brick wall, which houses a video of another room. In the separate space, a dark, heavy door seems to almost fall towards the viewer, but is in fact built into the wall, while found, manipulated videos and sound of wolves and vultures are projected onto a resin screen within the door, creating the effect of anxiety, of the outside world. All of these facets worked directly with the style of the building, its odd shape and quirky features.

Around the gallery, I added ready-made aspects of the interior, such as the dresser, mirror and chair, to act as signifiers of a private domicile. All of the pieces installed in the gallery space were



painted white which allowed them to blend in with the installation. The ready-mades function as not only features of home life and specific rooms, but also as signifiers of the veneer of normalcy that we want to present as our exterior. However, these also act as a tension against the underlying psychological issues that are the reality.

Interior objects,
found objects, acrylic, 2012

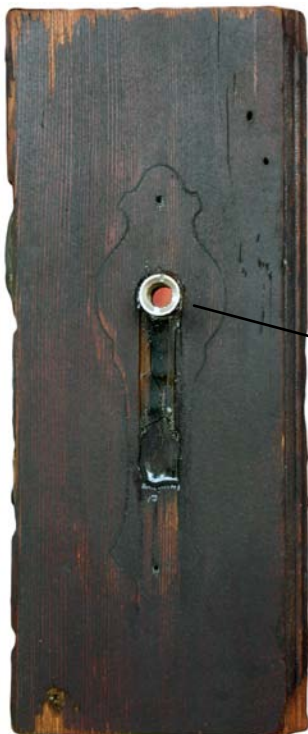
Going into another's space can often be seen as venturing into someone else's private world, indicating a level of intimacy. I create aspects of these private spaces that allow my viewer to walk in

and see familiar markers of the home, but with clues that hint that beneath the veneer of the ordinary, something is amiss. Interacting in a personal space is both a very psychological and physical experience that creates interesting views of the awareness and appreciation of another's personality characteristics.¹⁴ Many of the pieces, such as *A Room of His Own*, displayed in the faux doorway at the end of the first room of the gallery, or any of the eight sections of *the skin had been picked raw*, which have been framed to look like artwork for the home, have normal, superficial aspects which disguise the strange and create tension. For example, the color palette that was chosen for this thesis gallery installation and series borders on simple, unadorned, and monotonous, as most of the colors are pale creams, whites, and dark browns. These colors were chosen for the aspect of "normalcy" that they present. White is the basic color of new homes, presentations, hospitals, of cleanliness, and purity. It is the "white" that we want to present as our exterior. Everyone generally wants to be viewed as normal; however, when the viewer looks inside to the interior of the pieces, they see vivid color. These colors become layers for the personality and the self. When the viewer walks into the gallery, things will seem very clean, pure, and typical. However, upon examining more closely and peering into peepholes to view the layers of vibrant colors in the closed spaces, they are allowed to see into the interior of the person, inside their "normal" shell.

I experiment with different ways of portraying psychological states using interior features of homes. My work pushes ideas of the absurd and dysfunction that occur from anxious or obsessive traits, while addressing and manipulating interior structural spaces. For example, who hasn't had a splinter in their hand or a piece of lint in their eye? When this happens, the desire to get the object out of the body takes precedence over everything else. That little annoyance becomes the most

¹⁴ Gaston Bachelard, *The Poetics of Space: The Classical Look At How We Experience Intimate Places*, (Boston: Beacon Press, 1969).

important aspect of the moment, and the tunnel vision that can happen causes everything else to blur into white noise. In my thesis show piece entitled *Seeing White Noise*, the viewer must look through a peephole embedded into an old, wooden door keyhole to watch someone take out a splinter that has gone into a palm, creating such a tunnel vision. If the viewer can understand the almost “mad” desire to take out the annoyance, one can understand a minutia of what it is to live with psychological disorders leading to states of anxiety. Imagine what it is like to always have that splinter, that white noise...to continuously deal with a disorder.



Seeing White Noise, video, sound, splinter, tweezers, resin, manipulated found objects, 2012



Specific elements of the home also have metaphorical potential. Doors and pieces of doors are used throughout my thesis exhibition. The door as metaphor has multiple meanings, from entry ports, such as the opening or closing of the unconscious mind, to fears or anxieties, as well as to references of the human form via the scale. Closed doors keep people out. They become symbols for spaces we do not see. Closed doors also keep people safe, keep people closed off. In my piece *A*

Room of His Own, this is doubly a nod to Virginia Woolf (writer of *A Room of One's Own*) who suffered from deep depression and possible Bipolar Disorder that ultimately ended in suicide, as well as to the idea that hysteria and anxiety were female issues. By putting a male into the room, it implies that disorders can afflict anyone. The door has been altered to imply malfunction. A two-part door is turned upside down and the pieces are stacked so they open in opposing directions. Whoever wants to get in or out must go to great lengths and assume an awkward stance in doing so. The viewer is allowed to look into the room through, again, a peephole. She or he is allowed to see an aspect of the interior of this person, to see inside the frustration (a video performance of the repetitive removal of blood orange peels and smashing the oranges at random) while remaining removed from the experience. This specific piece references intermittent explosive disorder, which is found more often in men and is characterized by “extreme rage without provocation,” and physical symptoms such as heart palpitations and hearing echoes.¹⁵ Blood oranges are used as they reference the human dermis with its many layers as well as the idea of interior versus exterior. When the peels are removed or the blood orange is smashed, its’ interior which houses the bright, fleshy fruit is revealed, showing what really lies beneath. This stands as a metaphor for the human condition.

¹⁵ *Abnormal Psychology, Sixth Edition*, ed. Whitebourne Halgin, (The United States of America: The McGraw-Hill Companies, Inc., 2010), 449.



A Room of His Own, video, sound, blood oranges, manipulated found objects, 2012



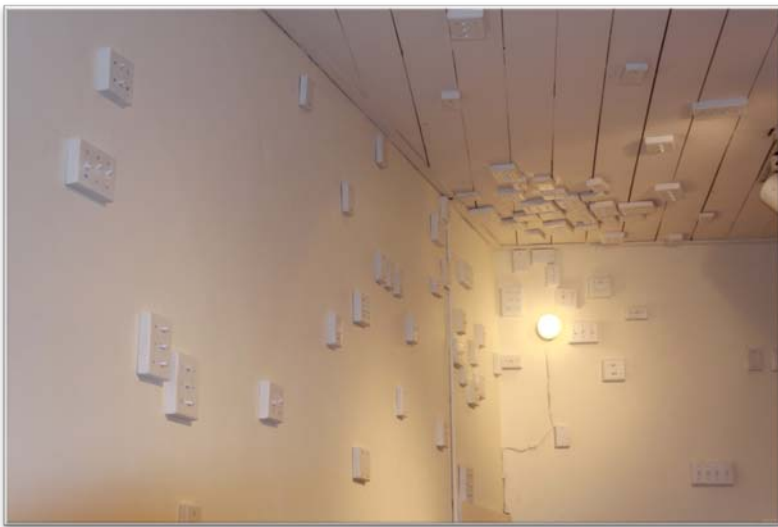
The exterior does not always signify what lies beneath, as we all want to be perceived as normal; however, there are usually cracks in the façade which indicate abnormality as in my assemblage and drawing piece *Manifestation*. What we see on the surface shows an aspect of the underlying reality. I try to directly involve my viewer to experience a facet of the psychological

fracture others live daily. I use objects and images that occupy time, place and space in order to connect with the viewers' automatic, physical response. This connection creates an understanding of psychological fractures.



Manifestation (detail), manipulated found wallpaper, acrylic, graphite on panel, 2011

For example in my thesis show installation piece, ...*they all functioned at once* utilizes approximately 150 light switches and panels painted white and placed in varying arrangements on the walls, ceiling and floor. The viewer becomes involved with touching the pieces, as the switches are made to be flipped, eliciting sensory satisfaction. This creates an automatic, physical connection. Light switches are found in homes; however, in this case there is an overabundance. This serves to replicate the experience of attributes of high functioning, Obsessive-Compulsive Disorder (OCD) and mania, which often, depending on the type of compulsion are comorbid. Furthermore, one can associate light with brain functionality and sensory satisfaction. In order to turn on a single light, all of the switches must be used. Oftentimes, those with OCD create specific patterns of actions in order to function, which can take up time and create anxiety. I want this piece to elicit feelings of anxiety and obsessive-compulsive action from my audience. In this way, putting the viewer in the place of another, they may be able to understand an aspect of a person who lives with this type of functioning.



they all functioned at once, light switches, panels, board, light, electrical component, 2012

Many other elements in my work serve as metaphors for varying conditions, such as a water faucet turned upside down or manipulated layers of peeling wallpaper with drawings embedded throughout all of the layers. These elements illustrate the history of not only a place, but also the

person who had inhabited it. This is emblematic of an individual's personal architecture, their private domicile, their functioning chaos.

Influences and Critical Theories:

Rachel Whiteread is an artist who works with the forms and space of buildings. She manipulates and fuses together familiar objects such as old mattresses or light switches, utilizing the spaces that are not noticed like the negative space underneath dining tables and chairs, creating intricate, almost psychological relationships and boundaries. Her works reference the human body and presence via created absence.¹⁶ Whiteread examines integral structures that are woven into our daily lives, yet ones that we are possibly unaware of: the space inside of a bed, underneath a table, above a floor. All of these can tell the history of the people and events that have occupied that space.



Rachel Whiteread, *Untitled floor (Thirty-Six)*, (Detail) Cast aluminum, 36 tiles each, 1 1/8 x 160 1/4 x 160 1/4 inches each, 2002

17

Many artists focus on ideas that are rooted in the psychological. I am particularly interested in Janine Antoni, who works within the area of abnormal psychology. The artist engages in

¹⁶ Mullins, Charlotte. *Rachel Whiteread*. London: Tate Publishing, 2004.

¹⁷ Rachel Whiteread, *Untitled floor (Thirty-Six)*, (Detail), 2002.

performance activities, such as anxiety rituals and habits. These pieces investigate ideas such as feminine grooming and consumption habits that become obsessive processes in the quest for idealized beauty. Oftentimes, these beautification habits, which can be seen as normal, lead to obsessions with weight, and anorexic or bulimic behaviors. Though theories themselves, these disorders have roots in the desire to control oneself, when there is lack of control elsewhere. Antoni's activities and performances usually result in some type of physical artwork that may or may not be permanent.¹⁸ For example, Antoni's piece 1993 piece, *Loving Care*, shows the artist mopping the floor of a gallery with hair dye, her hair as the mop. This illustrates the intensity and destruction of body dysmorphia.

*I mopped the floor with my hair...The reason I'm so interested in taking my body to those extreme places is that that's a place where I learn, where I feel most in my body. I'm really interested in the repetition, the discipline, and what happens to me psychologically when I put my body to that extreme place.*¹⁹

In the same vein as Antoni, I have explored theoretical discussions surrounding the field of psychology, specifically psychopathology, which is another term for abnormal psychology. There are many reasons to view something as abnormal: biologically, psychologically, and socially. Foucault states that it is the experts who create discourse. The experts in this case being medical and healthcare professionals. The medical field is ever developing and as this is the case, views of what is considered normal and abnormal are constantly changing. Therefore, the experts do not agree the world over. This lends itself to the concept that perhaps disorders are created ultimately by a culture's perception of what is not normal. Reality is culturally constructed; it is dependent on time and place. In this time, it is easy to manipulate our reality, to create synthetic emotions that we consider normal. Alcoholism and depression rates (to name a few) are extremely high in the United

¹⁸ Arthur Danto, *Art on The Edge and Over: Searching for Art's Meaning in Contemporary Society 1970s-1990s*, ed. Thomas McEvelley and Linda Weintraub, (Connecticut: Art Insights, Inc., 1996).

¹⁹ http://www.marthagarzon.com/contemporary_art/2011/01/janine-antoni-loving-care-lick-and-lather/, (March 27, 2012).

States and lesser elsewhere. This perhaps may be a part of the society that we live in. Depression, anxiety, suicide, posttraumatic stress disorder, and manias have become aspects of my normal in my community of relatives and friends. This specific vein of history influences my disposition, my perspective on mental health, and my art.

Conclusion:

In conclusion, Foucault states:

...if you are not like everybody else, then you are abnormal, if you are abnormal, then you are sick. These three categories, not being like everybody else, not being normal and being sick are in fact very different but have been reduced to the same thing”²⁰

My work suggests that within everyone lies the capacity for varying degrees of abnormality which in turn allow for the comprehension of others who do indeed suffer from psychological fractures. Empathy is a needed attribute in the fast-paced society that worships perfection. In this exhibition the recurrent use of familiar household objects and performance asks the viewer to examine their own, personal behaviors. In doing so, the viewer can possibly relate to others with psychological disorders allowing for much needed acceptance and understanding.

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²⁰ Michel Foucault, “Je suis un artificier”. In Roger-Pol Droit” *Michel Foucault, entretiens*. (Interview conducted in 1975. This passage trans. Clare O’Farrell 2004). (Paris: Odile Jacob): 95.

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