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Knowledge

Tala Khanmalek, Heidi Andrea Restrepo Rhodes

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A Decolonial Feminist Epistemology of the Bed

A Compendium Incomplete of Sick and Disabled
Queer Brown Femme Bodies of Knowledge

TALA KHANMALEK AND HEIDI ANDREA RESTREPO RHODES

Abstract: This compendium takes up a series of concepts as a means to think them newly from the contemporary time and place of “the bed,” where the bed is a temporal and geographical (non)location central to sick and disabled queer (SDQ) bodies and life. Excerpted from a larger project-in-progress, this article, in part, proceeds from Lugones’s 1987 essay “Playfulness, ‘World’-Travelling, and Loving Perception.” It strives toward articulating a decolonial feminist epistemology that is informed by queer of color, sick and disabled phenomenology and material life. We are compelled by what we might name as the work of queering and the work of sickening: methods for cultivating non-normative relationships to our bodies, our desire, our health, and to each other. In the spirit of Lugones’s notion of playfulness, we consider queer play as a methodology of ever-unfolding liveliness that also takes seriously and honors the gravity of queer chronic illness life. This, we propose, affirms a politics and poetics of illness that is antithetical to coloniality’s hold on the body as only of value while productive and profiting for itself and for another. A growing archive of SDQ thought and cultural material, this compendium is not necessarily intended to be read in a linear fashion. That is part of its SDQ disruption of heteropatriarchal, racist, and ableist grammars; a central component of SDQ temporalities; and an emphatic reminder that despite and because of the ways we are bound to and by illness, we make possible diverse forms of life otherwise.

Keywords: chronic illness, decoloniality, epistemology, queer theory

INTRODUCTION

Following the compelling and experimental work in “A Glossary of Haunting” by Eve Tuck and C. Ree, as well as Laura Hershey’s “Translating the Crip,” this is a compendium, incomplete: a specification of terms rethought from the position of “bedlife” as two sick and disabled queer femmes of color.¹ We articulate, in a mix of first- and third-person narrative, our decolonial, feminist methodologies for multiplying our signs of existence inside the limita-

tions we contend with on our mobility and ability to participate politically in the normatively rendered version of political participation as specifically public.² It is therefore an auto-theoretical articulation of how we multiply our signs of existence inside and against the limitations placed on what counts as a legitimate living of political life. It is, like Gloria E. Anzaldúa's notion of "autohistoria-teoría," an epistemology that emerges out of our distinct lived experiences, which suture and move beyond false dichotomies between the personal and political, the private and public.³ For us, such binaried discourses fall apart in the face of bedlife, including the binary of self and other as distinct in their individuated conceptualizations. Here "auto-theory" is a theory of, by, and about the self, rendered through the self, but not contained to a notion of self that is embedded in the ontological constraints of liberal individualism. When the compendium entries enter into the first person, we use the singular "I" while not identifying which of us is speaking—an experiment in what it is to say together.

A compendium is a systematic collection of things, often to survey a field of knowledge; a catalogue of information pertaining to a body of knowledge—for instance, a bestiary or a survey of herbs with medicinal purpose. Here we offer a cataloguing of information pertaining to our sick and disabled queer of color femme bodies, which we view as bodies of knowledge, such that we know our bodies have knowledge to offer, and our bodies are sites of knowledge's manifestations. We mark its incomplete status as one due to our ever-unfolding vocabularies and frameworks for thinking our experiential knowledge and "world"-building as sick and disabled queer (SDQ) beings. Through this writing, we honor the long legacy of feminist writing that has sought to foreground the body's phenomenological claims as political. We write within the networks of many, many diverse sick and disabled feminist thinkers, artists, and activists who continue to insist—against the machinations of capitalist devastation of our planetary body, our collective bodies, and individual bodies—that our bodies matter. As Hershey's poem specifies:

When I say *disability*, I mean all the brilliant ways we get
through the planned fractures of the world.⁴

María Lugones wrote her article "Playfulness, 'World'-Travelling, and Loving Perception" in 1987, in the dawn of Third Wave Feminism, in which feminist theories of color moved into the foreground to challenge the white, liberal universalisms claimed by the dominant frameworks of the Second Wave.⁵ Thirty years later, the growing body of literature countering the claims of settler colonial knowledge, or turning away from it altogether, has offered

us a wide range of tools for refusing to submit to the “societal deathwish” that organizes material life toward the eradication of our existence and against our survival, which was, on some level, never meant to be, even as bodies of color continue to be necessary to the maintenance of the bio-necropolitical order and its extraction of resources and labor for symbolic and material profit.⁶

The politicization of “the body” and its multiplicities—bodies’ knowledges, histories (of idea and materiality), and geographies—as a vital site for feminist praxis remains crucial to contemporary forms of resistance and decolonial world-building projects. The body remains crucial to healing and disability justice scholarship and activist practice even as both have unsettled the idea of a bounded and whole body. At the same time, radical critique of color has questioned the prioritization of the body as that which has been imposed on colonized peoples at the intersections of Christianity, colonization, and capitalism and their converging onto-epistemological and material violence. We hold this tension as we hold the tension between the immense possibility and the at-times-unbearable violence that we have known inside of and as sick and disabled queer brown femme bodies.

This compendium seeks to take up a series of concepts to think them newly from the contemporary time and place of “the bed” as a temporal and geographical (non)location central to SDQ bodies and life. Excerpted from a larger project-in-progress, this compendium, in part, proceeds from Lugones’s 1987 essay “Toward a Decolonial Feminist Methodology,” to enact an epistemology informed by queer of color sick and disabled phenomenology and material life. We are compelled by what we might name as the work of queering and the work of sickening: methods for cultivating non-normative relationships to our bodies, our desire, our health, and to each other.

Leah Lakshmi Piepzna-Samarasinha wrote *Care Work: Dreaming Disability Justice* from her “big sick-and-disabled femme of color bed cave.”⁷ “I wasn’t alone in this,” she asserts, “I did so alongside many other sick and disabled writers making culture. Writing from bed is a time-honored disabled way of being an activist and cultural worker.”⁸ This compendium was written from a similar “decolonial, queer, disabled bed space of wild disabled femme of color dreams.”⁹ Here we lift up the bed as not only a visionary site of political organizing but also a site of building community within and against the push to dispose of each other. The lived experience of bedlife has been our point of connection and profoundly shaped the ways we work together. We write as comrades-in-bed to affirm and advance our interdependence. We thus foreground the fact that we are members of each other’s “care webs” who necessarily risk vulnerability in an effort to cultivate belonging between us.¹⁰

Lugones’s notions of “playfulness,” “world’-travelling,” and “loving percep-

tion” are rich for elaboration and expansion of the methods and methodologies with which we articulate a decolonial epistemology of the bed and the multitude of worlds made possible in and by the bed—as concept, as a material place, and as a somatechnology or a tool of the somatechnic, conducive to multiple modes of relation in the space-time of bedlife.¹¹ We write as a “world”-travelling experiment and practice of de-isolation and disalienation in the context of chronic illness issues through which we often find ourselves contending with isolation to what is understood as the “private sphere” of the home. We also write our entries to each other, foregrounding not only the relational contingency on which any of these terms are constituted, but the healing potential in imagining forms of loving that exceed the body and its material limitations when rendered immobile through illness-as-disability. We practice a loving that is set ablaze by diverse epistemologies of the bed, as they intersect with who we are as a queer Latinx femme and a queer Iranian femme, knowledges which have been crucial to our survival and thriving. This loving is our ongoing complicated interlacing of ourselves with others across the constellatory network of SDQ beds and bodies across the country and globe. This, for us, is an act of imaginative “world”-making, intimacy, healing, and of revolutionary praxis. We embrace stillness and rest as much as action and participation, and our ethics contravene the notion that the two are mutually exclusive. A sense of the playful, of what is *at play* and *in play* in an anti-capitalist and decolonial sense of playfulness with which we meet each other’s ramshackle bodies also means that despite what is difficult, we make room for abiding laughter, shared delight, and tinkering for its own sake.

Rarely do we see each other in person, although we lived in close proximity for a time. Despite the problems of accessibility that often prevent us from meeting face to face, we have forged a bond based on what Mia Mingus calls “access intimacy.”¹² We have cultivated a friendship through the phone, care packages, emails, and dreams. This co-authored compendium is first and foremost a result of that friendship, which uplifts our respective, yet deeply intertwined, bedlives. What shapes our feminist praxis also provides the groundwork for disrupting hegemonic modes of knowledge production. A growing archive of SDQ thought and cultural material, this compendium will remain ever-partial and unfinished. It is not intended to be read in a linear fashion. For us, that is part of its SDQ disruption of heteropatriarchal, racist, and ableist grammars; a central component of SDQ temporalities; and an emphatic reminder that despite and because of the ways we are bound to and by illness, we make possible diverse forms of life otherwise.

A

Apocalypse: Every catastrophe is a gathering of femmes. We cook and clean in the aftermath. We fix, fuck, and forage. We stay. We set up systems. We stick together, therefore we survive. In the “ongoing disaster” of colonialism, slavery, and empire, living in the always already apocalyptic present depends on us.¹³ Did you think the future wouldn’t require femme labor? The future is only possible because femmes plan for it even as we disrupt chronology. For centuries we have navigated a toxic landscape, sifting through “imperial debris.”¹⁴ And we have carried on—slowly, sustainably, surely. And we have failed. And we will fail again. But we’ll be there, “hanging out” and most definitely talking shit.¹⁵

A

Archipelago: Millions of island beds across a globe. Cots, couches, cribs, bunks, pallets, platforms. According to the CDC, in the United States, about six out of ten people contend with at least one chronic physical illness or disease.¹⁶ I don’t know how many live bedbound, and to what degree—days at a time? Weeks at a time? Months? How many know the calendar of bedlife?

B

BedLife: Bedlife is a concept that names the time-space continuum in which chronic illness existence is extended through the temporally anomalous (non)locale of the SDQ bed. It is a concept that refuses to submit to the persistent notion under neoliberal productivity timescales that to be bedbound by chronic illness or disability is a form of social death and bare life. Rather, it is life lived otherwise. It is to claim that even if one is confined to the bed 100 percent of the time, however difficult it may be, there is a world happening there, there is life. That the mobility of the body toward its entry into what is hegemonically considered public space does not define how we can know or act as political beings. While we struggle with isolation, we are not atomistic or alone. Bedlife is a harnessing of the so-called “private sphere” of the bed toward our survival, our recuperation, our connection with other SDQ bodies across the planet, and our haptic entanglements, wrenching the bed from its able-bodied and heteronormatively operative condition as a site meant only for sleep and sex.

Bedlife as a concept might include an object-oriented ontology of the bed, to consider how the bed holds us (and is not the hold), offers us sanctuary,

or respite from the over-stimulation of the hypersensory city. How the bed speaks to us, says, “Here, rest.” How it is an abundant wilderness on its own accord. A scattered terrain of pill bottles and kleenex, journals and writing utensils, snacks and books, helter-skelter pillows and technologies for social media, all make up the topography of the bed housing the uncontained rawness of the sick body, its fevers and undulations in pain, its insomnias and REM-cycles, its orgasms and hungers, its companions animal, human, and otherwise. How the bed becomes the vessel from which a certain kind of “world”-travelling is made possible. Bedlife also refuses to see chronically sick or disabled forms of existence as lacking in agency—as bodies who have been merely confined to the bed: the bed is not our end. Rather, it conveys some of the ways that we take the bed up as means to continuing life in often unrecognizable modes and schemes, which in turn very much produce material life inside and far beyond the space of the home. In this sense, to be bedbound is far from being futureless. It exceeds the total grasp of the ableist ethos.

Bedlife is an ever-unfolding concept that began to gain hold in the along of two different online forums for sick and disabled queers, collectively consisting of over 1,600 members (with some overlap between the two).¹⁷ It names how from the spacetime of the bed we have established active networks of care, knowledge-building, peer support, and practices of sociality. Many of us organize from bed, write from bed, love each other across thousands of miles from bed, and live a whole lot of life from it in the face of inadequate systems of medicine and care, which have often failed to support us in thriving how we might otherwise want to thrive. I think of these networks as a constellation of entanglements—we may appear separate but are far from it.

We live barely nine miles from each other, yet our physical limitations mean we’ve seen each other face to face once in the last year, despite desires for it to be otherwise. I am interested in how quantum feminism can facilitate other notions of “world”-travelling through bedlife’s collapse of spacetime. Somehow, you and I find each other—your face is here before me.

In the 2019 Brooklyn Museum exhibition “Nobody Promised You Tomorrow: Art 50 Years After Stonewall,” a piece of a bed is unassumingly placed among other brighter and more eye-grabbing art installations, but it pulls at me the most strongly as I meander through this stunning exhibit featuring queer artists and commemorating the 1969 riots at the Stonewall Inn, a crucial moment in queer liberation efforts. Created by Constantina Zavitsanos, and titled *I think We’re Alone Now (Host)*, 2016 (2008–16), the conceptual sculpture is constructed of a full mattress topper, set in a wooden frame, and molded by “eight years sleep with many.” Placed in the section of the exhibit titled Desire, it is accompanied by this object label description:

The residue of sleep, sex, and rest suffuse Constantina Zavitsanos's minimalist and poetic sculpture. Constructed from a used mattress topper, the work holds traces and permanent imprints of varying forms of togetherness shared by Zavitsanos and others over the course of eight years. By coupling ideas of being alone with another person and multiple meanings of hosting, the title evokes dependent and hospitable forms of "getting together" and "getting away" to consider the nature of intimacy.¹⁸

Not mentioned in the sculpture's display is Zavitsanos's status as a disabled artist, though many queers in the disability justice and arts community will recognize their name and understand that a framework of feminist care and dependency ethics permeates the work, as does the framework of illness-as-disability, in articulating the bed as a site of desire, intimacy, and horizon for the sick/disabled queer body, indeed bringing a multitude of meanings to the notion of the artist in bed as "host." I am compelled to reflect on what it means as a sick body to be host to chronically present viruses and bacteria and other complexes of illness, these uninvited guests that feed on my insides and limit my reach to an outside that is considered being *in* the world, that render me a body assumed to be outside the world, because I am bound to the inside of the home. And hosting as a kind of hospitality and invitation to the other to enter into our home and bed spaces, for a party or a stay.

Further, the themes of this exhibit's section on desire evoke the linkages between intimacy and future-making, collapsing the space between queer desire for each other and one another's bodies, and the particularly queer politics of desire for a world unbound by oppressive structures and the limitations of imposed binaries. What it is to *want*—in all its senses—suggests there is a relevant kind of intimacy between what we are denied by a heterosexist and cis-sexist society as sick and disabled queers, and how we desire each other and other possible worlds. (To want for nothing must be a kind of dwindling; to want is a way of knowing we are alive.) As the end of the section placard states, "Looking toward tomorrow, these artists offer glimpses into other ways of being and remind us that, in the words of theorist José Esteban Muñoz, 'queerness is always in the horizon.'"¹⁹

B

Blur: (See also **Chronic**, and **Isolation**). I've been in a debilitating flare of my symptoms for the last eight days. Mostly bedbound, with minimal contact with "the outside world." In the brain fog of this flare, I feel as though

I lose time. I swear I checked the clock half an hour ago, but somehow it is three hours later. I sleep if I can, inordinate amounts, it seems. The days and hours begin to blur together against the backdrop of a bleary pain and overwhelming fatigue. Tired doesn't begin to describe it. And it isn't a pain that makes much sense on the pain scale doctors use. It is just everywhere, so dull it throbs, and so sharp it winces. I try to move my blood and stretch my legs by walking a few feet to the apartment window, to fresh air, and drinking in all the motion of the city, its blur of bodies, colors, and noises, on the street below, a composition against the stillness inside, which is never a stillness at all, but muscles searching to release tension, to dis-inflame; and the teeming universe in my blood, its creatures oblivious to day or night, but in their own pace no doubt. We say, "the world is passing us by," which is to say, it is blurring outside while I am blurring in here. The body itself begins to blur and in moments, I fear my own disappearance. The blur of time and space, body and self, the solidity of our beats and forms disintegrating in cycles far greater beclouded than the phases of the moon. In moments, all I am, and all there is, is the blur.

But is it that our rhythms and forms disintegrate in the face of illness's de-bilitations, or that we submit to release the fiction that we ever were a single being to begin with? How does chronic illness force a confrontation with our attachment to be a one? What if chronic illness, despite its material terrorizing of the body and psyche, opens us to a richness of being otherwise? What if inside the falling together of days over days, and nights over nights, "the point is the blur, the celebration of mass, the play of *mas*, as a phenomenon of indistinctness, of indiscretion, the blood, the blues, the bruise"?²⁰

C

Chronic: Always is the time of chronic. Not persistent (or forever), but always. There's a difference. I didn't learn about crip time from disability studies scholarship. I lived in and always with crip fam.²¹ This is how we navigate chronic conditions: slowly, together, steeped in time. This is how I worked out the Bogg's question, "What time is it on the clock of the world?"²² I visualized the clock and we were always there. In 3,000 years of human history. We were always there, studying the mechanics of chronicity, learning to sustain every moment. This is how I knew that you would text me when the world ends. Because while chronic means pain in the ongoing repetitions of then and now, it always already means possibility. And I knew that the possibility of us surviving was timeless.

Dreamwork/Dreams/Dreaming: Remember when I dreamt you were distressed? What a terrible night it had been for you. How did I know, and how was it that something in you reached out to tell me while I slept a continent away? There was also that time you dreamt of me, how inside your dream we were clandestinely meeting and loving each other, to fight the suffocations of a violent order. Some otherworldly entry into the subterfuge work against the conditions of five hundred years of subjugation, of separations—of self from self, and loving flesh from loving flesh? Is this what we call a flight of fant'sy?²³ As in, the sleeplife soaring of our imaginaries that will leak out into our sense of possibility, where fantasy is not the unreal, but that which is seeded in a dream?

We met in the Dark Sciences workshop²⁴ in the collaboratively oceanic dreamwork fold of QTBIPOC liberation mapping—a rare site/sight for academia to be/hold. For me, dreamwork foregrounds how our “irrational” bodies, our bodies disinclined to cooperate, our unruly bodies, can create and know in the subcutaneous and submarine. Dreamwork reconfigures what it is to know, turning past, present, and future, the grip of settler colonial and capitalist temporality, in and over upon itself, tearing its fabric. Dreamwork feels like a refusal of positivist knowledge production, a tapping into what exceeds the body, a process both of envisioning and revisioning.

The rate at which I dream and awaken knowing things about others tells me we are not such separate entities as we have been led to believe. It tells me, too, that the body's limits are a kind of fiction that has been imposed. There is so much more to the story.

Isolation (or Recognition): Reject the simple equation of bedlife with resistance. Even as bedlife refuses social, political, and physical death, it is not without a struggle. “As a chronically ill woman, I’ve paid a very high cost, in isolation and poverty and stress, for the cult of self-sufficiency,” Aurora Levins Morales told me.²⁵ “Disabled people are framed as burdens on society, because productivity and contribution are framed in the narrowest, profit driven sense. The reality is that society is a burden on the disabled. The resources that should be guaranteeing the well-being of every individual have been siphoned into offshore bank accounts to maintain the 1% in useless luxury. During many years in which my writing was fueling the activism of others, I lived

in severe isolation, alone in my bed.”²⁶ How can bedlife be the grounds for a limitless relationality, solidarity, and community while reproducing aspects of medical and moral containment? Bedlife is isolating, not in and of itself, but because of the public-private dichotomy, because of the barriers that prevent us from visiting each other, because there’s no profit in technologies that foster a fulfilling bedlife. In April 1953 Frida Kahlo was offered her first solo show in México at the Galería de Arte Contemporáneo. She arrived by ambulance. They carried her on a stretcher into the gallery, where her decorated four-poster bed awaited. Mia Mingus distinguishes Kahlo as “descriptively” (rather than “politically”) disabled.²⁷ Although Kahlo didn’t self-identify as disabled, she was no stranger to the perilous possibilities of isolation. Like Mingus, I found Kahlo at a young age and recognized my own lived experience in her paintings. “She was a necessary reflection of parts of me when I felt so alone, cut-off, isolated and like a freak,” Mingus explains, “Her paintings were some of the only visual images of disabled women of color that I had, period.”²⁸ Mingus also highlights the fact that identifying as a politically disabled woman of color is a risk and often leads to “*more* isolation, more stigma, more annoyance.”²⁹ Living bedlife, then, calls for a profound recognition of complexity and therefore a different kind of care. Through mutual recognition, bedlife becomes sanctuary, canvas, and dancehall. “Crip emotional intelligence is understanding isolation,” states Piepzna-Samarasinha, and its many contradictions.³⁰ Crip emotional intelligence “is understanding that beds are worlds.”³¹

L

Love: Okra rolls from Thelewala restaurant. Handmade envelopes to fit a SheaMoisture face mask. Texting “how are you doing today?” and “is there anything I can offer from afar?” A playlist for queers on the road. Rescheduling. Not giving up on scheduling. At least 96 emails. Affirmations like, “that is a lot.” Color coordinated care packages. Poems that uplift the ways we bend spacetime to reach each other.³² Lakshmi says, “making space accessible as a form of love is a disabled femme of color weapon.”³³ I couldn’t agree more. Dear friend: Your love is persistence in living. Your love refuses closure. Your love “reveals plurality” and opens portals.³⁴ Your love claims the “brokenbeautiful” as a site for freedom beyond able-bodied supremacy.³⁵ Your love shifts paradigms. Your love works with plants. Your love creates the condition of possibility for making the world anew. In the absence of official records, your love remembers.

Memory: 1. Affliction is diasporic too. 2. In her book *Medicine Stories*, queer Puerto Rican Jewish writer Aurora Levíns Morales reminds us that imperial history invades and conquers the identities and histories of the subjugated, aiming to substitute memories of the colonized, beginning with a “replacement origin myth” that explains and justifies the structural forms of violence put in place by colonial powers. Foregrounding history-as-medicine, or “medicinal” histories, strives “to re-establish the connections between people and their histories, to reveal the mechanisms of power, the steps by which their current condition of oppression was achieved through a series of decisions made by real people to dispossess them; but also to reveal the multiplicity, creativity and persistence of resistance among the oppressed.”³⁶ Further, Levíns Morales takes up languages of trauma to consider the collective historical trauma informing arrangements of power and our relationships to history. The substitution of memories is accompanied by a kind of collective, political gaslighting and assertion that our historical memories of political and social abuses are false memories that we are dredging up and creating from the deep abyss of collective unconscious: a kind of ontological and epistemic violence coloniality harnesses in perpetuity to maintain its hold on our sense of who we were and are, and what we know about who we have become. To trace the genealogy of histories we have inherited to our present political, socio-economic, and corporeal conditions is to insist that our subjugated histories are relevant to the work of healing and social transformation. Memory-work is medicinal in this sense, allowing us to attend to the crisis of our individual bodies and the body politic.

Memory-as-medicine and medicinal history also intervenes in the rhetoric of neoliberalism’s hyper-responsibilization of the individual. It means that while we might concede to the notion that fibromyalgia is believed by many to be rooted in trauma’s lingering effects on the nervous system, we cannot accept an assessment of that trauma that is merely psychogenic. Rather, it requires a consideration of the sociogenic as well as the historical and inter-generational traumas that converge as the conditions of possibility for the series of symptoms presenting themselves in the confluence that has been named by western medicine as fibromyalgia. It means that epigenetics are as important as genetics in considering our susceptibility to particular medical conditions and our vulnerability to others: the cells in our bodies remember the subjugating violences our ancestors survived. Historical memory is written into our DNA. It means that chronic Lyme Disease cannot be viewed

merely as an unfortunate and possibly negligent encounter of an individual with nature's quiet menaces. (Did you *check* for ticks? Did you stay out of tall grasses? Did you wear bug repellent?) Rather, it is an epidemic (with over 300,000 cases in the United States alone) that we cannot properly address as separate from its potential roots as a military experiment in insect-based biological weaponry.³⁷ It means, in the words of the hip-hop group The Coup, "every cancer is a homicide,"³⁸ which is to say, there are mechanisms of power in place, and steps by which illness is one of many effects resulting from a series of decisions made by real people, to dispossess us of our bodies. 3. We inherit the general fuckeries of the pharmaceutical industrial complex and its use of global southern populations as its guinea pigs for securing capitalist endeavor and scientific knowledge. I think about how as a child, my mother and her siblings were given oral supplements of DDT in Colombia in the 1950s as the US produced and exported large quantities of the chemical to developing countries through USAID and the UN, for purposes of fighting polio. While the research on genotoxicity and mutagenic effects is apparently inconclusive, it has been shown to have teratogenic effects, or to impact fetal development. What might that mean for my autoimmune issues today? What historical and present-day flows of knowledge, science, and medical technology evidence the deep intimacy of political economies between the US and Colombia—another kind of "world"-travelling? I want to consider the diasporic routes of affliction-as-illness chronically mobilized in the body, and how we can understand *that* as a mechanism of subjugation of bodies of color.

M

Medicine: 1. I want to ask for now, what is queer medicine? If queerness-as-otherness is, in a way, to be always already anti-capitalist and not-white, not able-bodied, how can queerness be a modality through which we reconceptualize what we conceive of as medicine, how medicine is made and practiced, how its knowledges and memory are built over time? If sick and queer are historically overlapping or entangled in their meaning and the material realities that shape them, what is queer medicine? I don't think it is merely about reconfiguring the relationship between Medicine and Big Pharma, though yes, let us also do this as decolonial labor for something more just. Doctors and corporations cannot be Aesculapian hero-gods. I think it has to also be an embrace of healing work that understands the inseparability of body and world, of political economy and blood, of the entanglements of chronicity that cannot sustain an attachment to the telos of cure. Queer medicine reaches for remedy not as curative, but as transformative.

2. From Morales I learned that stories can be medicinal. Fictional stories, forgotten ones. Those relegated to folklore. Stories of things broken that take on new forms. Stories of things broken that stay broken. According to Morales, stories can make whole. But the “politics of integrity” that she calls for doesn’t presuppose the kind of wholeness associated with colonial conceptions of personhood, agency, and the body.³⁹ What Morales means by whole is something closer to a knot, a disordered configuration that reveals the ways in which the personal is entangled with the political and I am entangled with you, water, waste. The first time Aurora and I met she gifted me sea glass. Once these shards of broken bottles cut flesh. Once these shards of broken bottles were ugly, garbage, and categorized as pollution. Years of tumbling smoothed sharp edges and made them again. There is beauty in the weathered waste products of modernity. This means me. I am beautiful. I have been weathered. I have been tumbling and tumbling for generations. Tumbling sounds like telling for a reason. The medicine, I learned, is not in the story itself but in the telling, the retelling, and the “not-telling.”⁴⁰ I promise you: there is a language that seeps into the letter and spoils everything. The report that disappeared your ancestry. The report that misspelled Mina’s name. The passport. The fingerprint. The patient and prisoner ID. The patented seeds. Even the pattern of parallel lines in barcodes. When I say *medicine*, I mean prescription pills as well as stories that jeopardize the prescribed language of doctors. When I say *medicine*, I mean lines of flight.⁴¹

P

Playfulness: Lugones writes, “Playfulness is, in part, an openness to being a fool, which is a combination of not worrying about competence, not being self-important, not taking norms as sacred and finding ambiguity and double edges a source of wisdom and delight.”⁴² A capitalist ethos, particularly under the Protestant work ethic of late liberalism’s valuations of hyper-productivity, frames play and playfulness as apathy, laziness, lack of maturity and responsibility. But the *not worrying* about competence, and not taking too seriously self-importance and hegemonically sacred norms is neither apathy nor laziness, and is not, we contend, a marker of immaturity.

Playfulness, as an openness to being a fool, evokes the eponymous card of the Tarot’s major arcana suite, a symbol of openness to the unknown, and of natality in the Arendtian sense—of the unexpected and the possible inherent to every new beginning, every new day, every sense of the horizon.⁴³ Perhaps we could say, in a twist on Shakespeare, *play is the thing*.⁴⁴ Which is to say, an ever-unfolding liveliness that is not without gravity but takes the gravity of

queer chronic illness life very seriously, honoring it through play and playfulness. This, we propose, is a politics and poetics of illness that is antithetical to coloniality's hold on the body as only of value while productive and profiting for itself and for another. Queer play also thrives at the intersections of the bed as a theatre of erotic and sexual desire, a *playing with* that is both encounter and experimentation in questioning what else is possible. It is to play with and within the confines of a capitalist, ableist, anti-queer milieu, as in to mess with and toy with the system's stability. It is a tampering with the excisions and expectations that normative society aims at the sick queer body, as well as a "mucking about," as in to idle; waste time; loiter—all while carrying on and cutting up in the latitudes of our rowdy stillness, (the geography of the bed, the expansive reaches of our freedom, the expansive reaches of our freedom in the geography of and between our beds). In all these senses, we suggest that Lugones's notion of playfulness contains within it a route to a range of diversions from the systemic and systematic violence we bear, an array of deviations, departures, and pleasures *away from*. Further, through playfulness, we imagine a potential for re-creation, as we endeavor to vacate, to engender joy in the forced "vacation" from worklife that is brought on by illness-as-debility, and to evacuate as a strategic abandonment of the world-as-factory; all as we seek to cultivate the necessary respite and intermission that allows us to continue the labor of collectively building our worlds otherwise and anew.

R

Reclination: In her book *Inclinations: A Critique of Rectitude* (2016), Italian feminist philosopher Adriana Cavarero traverses a wide range of western philosophy and literature to excavate the history of the idea of *homo erectus* or "upright man" as a physiological and moral figure, against which the inclined body and subject are posed as a particularly female, queer, and pathological declivity. The oblique postural geometry of the inclined as one indicative of deviant propensities, and non-human or no-longer-human status, challenges the individualistic ontological model of modernity centered around an egocentric verticality. Rectitude, as moral and physiological prescription and orthopedic, as well as a foundational premise for law, is a measure (rule, in double meaning) by which the ideal western man-as-subject is considered *straight and true*, proper and good, rational, and inviolable—subject to right. Indeed, etymologically, rectitude, right, rule, and straightness all share a root. The inclined subject, she proposes, is a relational one who deviates from the straight and reaches toward the *other* in an ethics of altruism that is not an altruism of self-sacrifice—to which patriarchy relegates the figure of the

mother, first and foremost—but one which refuses the plumb-ruled geometry of self, inaugurated by Kant as autonomous, sovereign, and solipsistic. The inclined subject is one that, following Lévinas, reaches out, in relational responsibility, breaking moral and physical perpendicularity with its oblique stretch. As she writes, “it bends and dispossesses the I.”⁴⁵

Inclinations is a compelling work, but it strikes me that for Cavarero the oblique body she foregrounds is one that tends toward the acute-angle of postural geometry. One that reaches forward or travels downward. An important figuration in feminist consideration of our ethical leanings and formations of self, no doubt. What could perhaps be seen as a complementary figure, bringing a more explicitly queer and illness or disability framework to the critique of rectitude, would be the oblique body in *reclination*. The recumbent body as an obtuse-angle of postural geometry of the queer sick body and self, which also necessarily challenges the strictures of egocentric verticality in the norms that shape *homo erectus* and indicate his moral certitude.

The queer sick body in reclination is the obtusely angled body or the horizontal body in bed (or against the couch, or under a blanket in a lounge chair outside, or in convalescence in the hospital in that stark furniture that passes for a bed, or could be made into one). Where the subject of rectitude is tied to the vertical axis, succeeding or failing in his metaphysical and material-world endeavors toward the *good*, based on the degree to which he submits to or *declines* his inclinations—the reclined subject harnesses the horizontal axis, the plane of the bed, always already a symbol of queer, disabled failure, but one which intimately knows the fleshly secrets that abound in recumbent life. The theater of modern philosophy and its protagonist of the I are here overshadowed by the staging of the sick/disabled queer reclined in bed. As Cavarero notes, the etymology of *queer* stems from “the German *quer* (oblique, transverse, diagonal).”⁴⁶ Further, “in Greek, *kline* means bed,”⁴⁷ which is derived from *klino*, to cause to lean, from which the term *clinic* is also derived. Strikingly, it seems the history of ideas concerning queer and sick subjectivity, both as conditions of moral declension veering from the geometry of verticality and rectitude and its ontological model, are intimately intertwined. The queer body is always already relegated to the position of sick (physically, morally). The sick body, to the position of queer, the failed performance of properly gendered heteronorms in the service of the nuclear family in the service of capital, insofar as the sick body is in a diversified capacity for work both in the home and the factory of every workplace.

The queer sick body in reclination challenges the ontology of rectitude in at least two important ways. First, as the body that insists on resting, against and in spite of neoliberal and protestant ethic work and productivity man-

dates (see also Rest, following). Second, it may also be that the queer sick body in reclinacy is a body that is perhaps in a state of fucking, whether alone or with others, for pleasure (as medicine, and pleasure for its own sake), and as such also challenges the moral righteousness of rectitude by its oblique, obtuse position freed for that purpose, against and in spite of both social and economic imperatives for labor productivity and heteronormative reproduction. Cavarero notes the threat erotic inclination toward another poses to the equilibrium of philosophy's subject by way of its undoing as one given to self-rule⁴⁸—we could say erotic inclination, and *love*, impose a series of heteronormies in relation, transgressing the secularized monotheism of divine rule, which requires that we expunge the pleasures of the flesh in the horizontal plane of the world, in order to align ourselves in the vertical unity between “man” and God, or later “man” and Rational Mind, or Self. But inclination, for her, is a generative formation of the world, symbolized in the cosmogenic function of atoms,

which otherwise fall through a vacuum with inexorable, rectilinear motion—touch, thus subjecting their movement to a tiny swerve . . . the atom's straight motion then experiences an inclination and assumes an oblique, and symptomatically life-bearing [*creatrice*], direction. . . . Inclination is at the same time relation and generation.⁴⁹

The sick queer body in reclinacy is at the same time relation and *regeneration*. A gathering up under depleted forces, the fatigue of how the body carries being in the world, or is otherwise wracked by viruses, bacteria, growths, “imbalances,” histories of trauma and survival, and undiagnosed confluences permeating our anatomies and immunities. We might conceive of this regeneration in the post-atomic “collision that is also a connection, conjunction that is also a creation,”⁵⁰ a state of obliquity that is a replenishing of the conditions of possibility for the constellatory nature of ourselves against atomistic isolation. A regeneration of our molecular geometry and its parameters of the bond, which is to say, the relation.

If for Cavarero the inclined subject is one form of obliquity in axial tilt—she who moves toward the other and away from the self of western modernity, the reclined subject is its inverse, in a manner of speaking. They are the *dis-inclined* subject who moves away from the self of western modernity, and not necessarily *toward* the other in the moment of its recline, but not necessarily *away* from the other in the rectilinear fashion of self-into-self. Operative against both the straight as compulsory verticality of the healthy or mobile body in equilibrium, which may be appropriated for its exchange-value, and the straight as compulsory heteronormativity, reclinacy here is another kind

of ethical leaning, an obliquity that embraces the crookedness of our bodies sprawled in pain, and the crooked thrashing of our queer desire and its multitude of slippery slopes.

R

Rest: The Brooklyn-based project “Rest for Resistance” centers rest as crucial to healing work (it is so much work to heal!), bridging the vital importance of psychological and social support; and of individual and collective wellness for marginalized communities, including “Black, Indigenous, Latinx, Pacific Islander, Asian, Middle Eastern, and multiracial persons” and “LGBTQIA+ . . . trans & queer people of color, as well as other stigmatized groups such as sex workers, immigrants, persons with physical and/or mental disabilities, and those living at the intersections of all of the above.”⁵¹ Published by QTPOC Mental Health, a community justice initiative, the *Rest for Resistance Zine* features writing and photography that foreground rest as a deeply political activity. Juhee Kwon’s piece “We Are Not Machines” reminds us that “we’re more complicated than a simple input (x) à output (y) kind of linear function”—questioning the correlations between overworking one’s self and how “success” is measured through whether and how we’ve maximized our productivity at the expense of our physical and mental health.⁵²

The exhibit “Black Power Naps” by multi-media artists and activists niv Acosta and (Fannie) Sosa (January 9–31, 2019, Performance Space New York) constructed an installation of a comfortable, restful space where people of color could show up to simply rest, reclaiming laziness and idleness as deeply political expressions of power.

To quote the project’s mission statement:

Departing from historical records that show that deliberate fragmentation of restorative sleep patterns were used to subjugate and extract labor from enslaved people, we have realized that this extraction has not stopped, it has only morphed.

A state of constant fatigue is still used to break our will. This “sleep gap” shows that there are front lines in our bedrooms as well as the streets: deficit of sleep and lack of free time for some is the building block of the “free world.” After learning who benefits most from restful sleep and down time, we are creating interactive surfaces for a playful approach to investigate and practice deliberate energetic repair.

As Afro Latinx artists, we believe that reparation must come from the institution under many shapes, one of them being the redistribution of rest, relaxation, and down times.⁵³

The poignancy of this installation's architecture rendered available specifically for *downtime* for people of color inside the "city that never sleeps" is also not lost on me. If what we as chronically sick queer non-black femmes of color are calling "bedlife" is the insistence that bedboundedness is not death-boundedness but an onto-epistemological set of differences that make possible practices of world-building, then this exhibit highlights how life is made possible in and by the bed. How the distribution of bedtimes, and time in bed, is a racially configured violence in a political economy and national spirit founded on anti-blackness and slavery. Of black life *in the wake*, and black life *awake*.⁵⁴ How "quality sleep is really only given to rich, white people" and how the hustle has been glorified through US-American individualism that ignores the racist conditions on which our notions of independence and dependency have been constituted, while white institutions economize on the struggle of people of color. The connections between chronic violence, chronic illnesses that disproportionately affect black people and people of color, and the structuring of work's chronicity (the long work day, lack of vacation, non-stop of emotional labor of contending with racism), must be attended to. Black Power Naps takes this up, noting too, how rest's threat to the order of things is a vital part of liberatory endeavor: "It's really the white man's worst nightmare to have a fully rested Negro who is fully self-possessed, to literally have the legendary clapback which we all need, and in order to do that, we need rest."⁵⁵

Rest is a cultivated absence, the choreography of the body's collapse. A wrench in Capitalism's driving of laboring bodies like robot machines of endless supply. Rest, like poetry, is not escape or luxury or relinquishing political life or accountability to the world.⁵⁶ Can rest be a reorientation toward modes of being that refuse the infinite sourcing of extraction? We view rest as political indeed, an evasion of what Jasbir Puar has called "liberal eugenics of lifestyle programming" to which we are subject in its intensifications of neoliberal marketization of everything in existence.⁵⁷ Under this neo-eugenic programming, every action and interaction, every word spoken, every expression of the body, every minute of every day, *should* be geared toward symbolic and material profit. This is how we are told to measure our value, whether or not we've lived up to the "well-born" as a constant and perpetual bootstraps birthing of ourselves into a wellness that is meant to function only and precisely for the grind of capitalism's wheel in ever-expanding profit. Rest refuses the totalizing hold of this economy on the body that is struggling to flourish in its own fleshly ruins wrought by the vicissitudes of capital's legacy—of total depletion, toxicity, and annihilative violence. Rest is preservation of individual and collective selves for a radical and undisciplined wellness; and destruction of industry as a compulsory

and natural law. Rest is the reclined and purposeful disinclination to capital's insistence on our orientation toward the incline. Not limited to the bed and its reclinations, rest is also playfulness, the reach for pleasure and expressions of want outside and away from the commodification of our bodies as perpetual and simultaneously configured labor, product, and marketplace.

T

Tired: Mina traveled the world. Her longest journey began in 1982 when she left Iran on foot. She planned for a quick trip across the border but she broke her leg on the way and the *ghachaghchi* fled with her papers. That's how she ended up going from Turkey to Greece instead of straight to the United States as promised. She went to Thailand, Malaysia, and the Philippines. Then to Hawai'i, California, and finally to Texas. She was so tired when she made it to Maman's house. Even though Mina hadn't seen her daughter in years, she couldn't stand hugging for long. The metal screws in her leg bone stung, shooting pain up the scars of several botched surgeries. Maman and Mina stayed awake even as they grew more tired. They learned to work on very little sleep, to keep going, never lie in bed. There were no sick days or just plain tired days. Only the willpower to move for survival. Here I am, the descendant of tired world travelers, bedridden out of necessity.

T

Travelling: For Lugones, travelling is a kind of "necessarily acquired flexibility" between social worlds, compulsory in order to survive, but also constituting something enormously valuable to women of color living and loving.⁵⁸ But how do we think of travelling of different kinds from the position of immobility in being bedbound? How do we redefine the itinerant, the overlaps between work and wandering, the long *durée* journeys of healing across a lifetime and the daily evental place to place circuits between febrile restlessness and lethargy, the body visibly still but meandering through its conjunctured states of pleasure and pain? You and I, we say, "across the river" (see also Water, following) with the Hudson between us, to name distance, and water, and how it is that our sick femme of color bodies travel to each other while staying in our beds during flares of pain, fevers, and fatigue. (Did you ever glimpse Hades?) We are constantly fording the river to find ourselves together. Forging a path across a boundless distance—those days when just creaking our bones to the kitchen sink feels like a feat. This is one way we live, and one way we love, and one way we remind each other that we still exist

when the unbearable gravity of bare life magnifies our isolation (for the bed can also be an attenuated world.) “Across the river” as a kind of travelling, extends my geographies to yours. Perhaps *river* is just another word for a winding and watery road that carries me to you.

W

Water: Between us a 315-mile river flows two ways. Carries people from one place to another. Holds memories and millions of toxins. Never stays still. Our first conversation involved water—the ocean, tears, and tap in little plastic cups. Water connects us across artificial boundaries. Like Miracle Fish in the palm of the hand, the massive oceans inside of us each beckon the other to swim,⁵⁹ which is to say, in the proportions of our salt and our grief we will find our buoyancy.

TALA KHANMALEK is an assistant professor of Women and Gender Studies at California State University, Fullerton (CSUF). She earned her PhD in Ethnic Studies at UC Berkeley with a designated emphasis in women, gender and sexuality; was a visiting scholar at UC Santa Cruz’s Science and Justice Research Center; and taught in the Liberal Studies Department at California State University, Los Angeles. Prior to joining the CSUF faculty she was a jointly appointed postdoctoral research associate in the American Studies and Gender and Sexuality Studies Programs at Princeton University.

HEIDI ANDREA RESTREPO RHODES is a doctoral candidate in political theory at the Graduate Center, City University of New York (CUNY). Her dissertation focuses on questions of temporality, epistemology, state violence, settler colonial futurity, and futures otherwise in the Colombian political landscape. She is also a poet whose first collection, *The Inheritance of Haunting* (, University of Notre Dame Press, 2019), takes on the work of memory and mourning, bearing witness to inter-generational and collective inheritances of post-colonial trauma and historical violence.

NOTES

1. Eve Tuck and C. Ree, “Exemplar Chapter 33: A Glossary of Haunting,” in *Handbook of Autoethnography*, ed. Stacey Holman Jones, Tony E. Adams, and Carolyn Ellis, 639–658 (London: Left Coast Press, 2013); and Laura Hershey, “Translating the Crip,” poets.org, <https://www.poets.org/poetsorg/poem/translating-crip>.

2. By “multiplying our signs of existence” we invoke a methodological and ethico-political imperative that drives our creative and scholarly work under the grip of the

coloniality of power, which tends toward diminishing our signs of existence in their diverse quantities and qualities. See Michel Foucault, "The Masked Philosopher," in *Ethics: Subjectivity and Truth (The Essential Works of Michel Foucault, 1954-1984*, vol. 1), ed. Paul Rabinow, Robert Hurley, et al., 321-28 (New York: New Press, 1997 [1980]). Further, on "the coloniality of power," see Sylvia Wynter, "Unsettling the Coloniality of Being/Power/Truth/Freedom: Towards the Human, After Man, Its Overrepresentation—An Argument," *CR: The New Centennial Review* 3 (2003): 257-337.

3. Gloria E. Anzaldúa, "Now let us shift . . . the path of conocimiento . . . inner work, public acts," in *This Bridge We Call Home: Radical Visions for Transformation*, ed. Gloria E. Anzaldúa and AnaLouise Keating (New York: Routledge, 2002), 578.
4. Hershey, "Translating the Crip."
5. María Lugones, "Playfulness, 'World'-Travelling, and Loving Perception," *Hypatia* 2, no. 2 (Summer 1987): 3-19.
6. Audre Lorde, *Sister Outsider: Essays and Speeches* (Berkeley, CA: Crossing Press, 1984), 146.
7. Leah Lakshmi Piepzna-Samarasinha, *Care Work: Dreaming Disability Justice* (Vancouver: Arsenal Pulp Press, 2018), 15; María Lugones, "Toward a Decolonial Feminism," *Hypatia* 25, no. 4 (2010): 742-59.
8. Piepzna-Samarasinha, *Care Work*, 15.
9. Piepzna-Samarasinha, *Care Work*, 9.
10. Piepzna-Samarasinha, *Care Work*, 25.
11. Following the 2003 Macquarie University Conference on body modification, Susan Stryker and her colleagues coined the term *somatechnics* to foreground the interwoven and co-constitutive relation between *soma* and *techné*, or the body as a social construct and the material and ideological-discursive techniques in and through which the trans/formation of corporealities is achieved. While the term has mostly been deployed in critical Transgender Studies, we are interested in how it can be meaningful to think bedlife and the various somatechnics of the queer, chronically sick body. See Nikki Sullivan, "Somatechnics," *Transgender Studies Quarterly* 1, no. 1-2 (2014): 187-90.
12. Mia Mingus, "Access Intimacy: The Missing Link," Leaving Evidence, <https://leavingevidence.wordpress.com/2011/05/05/access-intimacy-the-missing-link/>.
13. Christina Sharpe, *In the Wake: On Blackness and Being* (Durham, NC: Duke University Press, 2016), 5.
14. Ann Laura Stoler, *Imperial Debris: On Ruins and Ruination* (Durham, NC: Duke University Press, 2013).
15. María Lugones, *Pilgrimages/Peregrinajes: Theorizing Coalition Against Multiple Oppressions* (Lanham, MD: Rowman and Littlefield, 2003), 207-37.
16. See Centers for Disease Control and Prevention (CDC), *Chronic Diseases in America*, <https://www.cdc.gov/chronicdisease/resources/infographic/chronic-diseases>

.htm. Notably, this document published by the CDC focuses primarily on what it deems the “key lifestyle risks” that lead to chronic disease, suggesting that practices such as “eating well” and leading “healthy and active lives” will significantly improve the nation’s collective well-being. Part of (neo)liberal coloniality, the dominant discourse on health suggests that primarily by “healthy choices” can we prevent the onset of chronic conditions. But in line with, and informed by, the environmental justice and disability justice movements, as well as from personal experience, it is our contention that there is a gross and systematic neglect by national institutions and the medical industrial complex of other more key factors, including environmental racism and the psychological violence some communities bear more heavily under the pressures of capitalism and the carceral state.

17. As Piepzna-Samarasinha notes in *Care Work*, Billie Rain, a disabled, Mizrahi, genderqueer writer and organizer, started the SDQ Facebook group in 2010 (2018: 60–63); and in 2012 an off-shoot forum for “SDQ—People of Color and Mixed Race” was founded. Both spaces have been vital sites for “collective disabled intelligence” (61), particularly for those who have been “isolated, homebound or had limited energy or ability to travel physically to an in-person meeting” (60). Facilitative of knowledge and resource sharing, organizing and strategy building, peer counseling, and cultivating an extended community of hundreds of people across the country, both groups have offered a sustained virtual presence of political and social community that has, for hundreds of chronically sick queers, redefined the boundaries of bedlife.

18. Constantina Zavitsanos, *I Think We’re Alone Now (Host)*, 2016 (2008–16), mattress topper, wooden frame, and eight years sleep with many, in “Nobody Promised You Tomorrow: Art 50 Years After Stonewall,” 2019, Brooklyn Museum, Brooklyn, New York.

19. Wall Text for section titled Desire, “Nobody Promised You Tomorrow: Art 50 Years After Stonewall,” 2019, Brooklyn Museum, Brooklyn, New York.

20. Fred Moten, *Black and Blur* (Durham, NC: Duke University Press, 2017), 244.

21. “Crip” is a term reclaimed by disabled people from the historically pejorative “cripple” and refers all-inclusively to physically and mentally divergent experiences of disability and illness.

22. James and Grace Lee Boggs, *Revolution and Evolution in the Twentieth Century* (New York: Month Review Press, 1974).

23. This spelling of “fantasy” plays with the double meaning between “flight of fantasy” and “flight of fancy”—the space between dreaming, radical speculative work of queer futurities, and what Stefano Harney and Fred Moten have called “Fantasy in the Hold.” See Stefano Harney and Fred Moten, “Fantasy in the Hold,” in *The Undercommons: Fugitive Planning and Black Study* (Wivenhoe, UK: Minor Compositions, 2013), 85–99.

24. Alexis Pauline Gumbs, Marcelitte Failla, Racquel Gilford, and Tala Khanmalek, “Dark Sciences: Collective Dreaming for Transformative Change” (presented at National Women’s Studies Association Conference, Baltimore, MD, November 2017).

25. Tala Khanmalek, “A Revolution Capable of Healing Our Wounds: An Interview with Aurora Levíns Morales,” *nineteen sixty nine: an ethnic studies journal* 2, no. 1 (2013): 2.

26. Khanmalek, “A Revolution,” 3.

27. Mia Mingus, “Reflecting on Frida Kahlo’s Birthday and the Importance of Recognizing Ourselves for (in) Each Other,” *Leaving Evidence* (blog), July 6, 2010, <https://leavingevidence.wordpress.com/tag/frida-kahlo/>.

28. Mingus, “Reflecting on Frida Kahlo’s Birthday.”

29. Mingus, “Reflecting on Frida Kahlo’s Birthday.”

30. Piepzna-Samarasinha, *Care Work*, 71.

31. Piepzna-Samarasinha, *Care Work*, 72.

32. Heidi Andrea Restrepo Rhodes, “across the river,” *Nat. Brut*, Folio 11, *Beyond Resilience*, edited by Kay Ulanday Barrett (2018), <https://www.natbrut.com/heidi-andrea-restrepo-rhodes>.

33. Piepzna-Samarasinha, *Care Work*, 78.

34. Lugones, “Playfulness,” 3.

35. Alexis Pauline Gumbs coined the term “brokenbeautiful” and founded a press by the same name: <https://brokenbeautiful.wordpress.com/>.

36. Aurora Levíns Morales, *Medicine Stories: History, Culture, and the Politics of Integrity* (Cambridge, MA: South End Press, 1998), 24.

37. For this history see Kris Newby, *Bitten: The Secret History of Lyme Disease and Biological Weapons* (New York: Harper Collins, 2019).

38. The Coup, “Everythang,” *Party Music* album. 75 Ark 75050, 2001, Compact Disc.

39. Morales, *Medicine Stories*.

40. M. NourbeSe Philip, *Zong!* (Middletown: Wesleyan University Press, 2008).

41. The final two sentences of this entry are modeled after Hershey’s poem. See Hershey, “Translating the Crip.”

42. Lugones, “Playfulness,” 17.

43. Hannah Arendt, *The Human Condition* (Chicago: University of Chicago Press, 1958).

44. As Hamlet ends his famous soliloquy, “More relative than this—the play’s the thing wherein I’ll catch the conscience of the king” (William Shakespeare, *Hamlet* [2.2.416–417]), c. 1600, in *The Oxford Shakespeare: The Complete Works, 2nd Edition*, edited by Stanley Wells et al. (Oxford: Oxford University Press, 2005), 681–718.

45. Adriana Cavarero, *Inclinations: A Critique of Rectitude* (Palo Alto: Stanford University Press, 2016) 7.

46. Cavarero, *Inclinations*, 63.
47. Cavarero, *Inclinations*, 3.
48. Cavarero, *Inclinations*, 30.
49. Cavarero, *Inclinations*, 95.
50. Cavarero, *Inclinations*, 95.
51. Rest for Resistance, QTPOC Mental Health, <https://restforresistance.com/>.
52. Juhee Kwon, “We Are Not Machines,” in *Rest for Resistance Zine*, ed. Dom Chatterjee, Kofi Opam, and OAO, (QTPOC Mental Health, 2017), 4–5.
53. niv Acosta and Fanny Sosa, Black Power Naps, <https://blackpowernaps.black/>.
54. Black life “in the wake” references Christina Sharpe’s notion of the wake as the total climate of anti-blackness in the afterlives of slavery. Through the brilliance of Acosta and Sosa’s *Black Power Naps*, we also read the chronic lack of sleep for black people—the over-extension of working hours as waking hours—as another manifestation of slavery’s wake. See Christina Sharpe, *In the Wake: On Blackness and Being* (Durham, NC: Duke University Press, 2016).
55. niv Acosta, quoted in Michael Love, “If You’re Black, Rest Is Power,” *Paper Magazine*, <http://www.papermag.com/black-power-naps-2626998633.html>.
56. See Audre Lorde, “Poetry Is Not a Luxury,” in *Sister Outsider: Essays and Speeches* (Berkeley, CA: Crossing Press, 1984), 37–39.
57. See Jasbir K. Puar, “Coda: The Cost of Getting Better: Suicide, Sensation, Switchpoints,” *GLQ: A Journal of Lesbian and Gay Studies*, 18, no. 1 (2012): 149–58.
58. Lugones, “Playfulness,” 3.
59. See Ada Limón, “Miracle Fish,” in *Bright Dead Things* (Minneapolis: Milkweed Editions, 2015), 21.