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Transcript

(References included below)

Travis Chi Wing Lau (TL): My poetry is often about doubt and about questioning. And it always reminds me of that quotation from Eavan Boland: “My poetry begins for me where certainty ends.” And I think that’s such an important crystallization of what I found poetry to do, which is to imagine radically and not necessarily have an outcome or an end product.”

[Music throughout introduction: Ascending, bright, twinkly, uplifting, electronic]

Emilia Nielsen (EN): This is *On Being III*, a show about creativity, disability and identity. I’m your host Emilia Nielsen.

Today’s guest is Travis Chi Wing Lau, Assistant Professor of English at Kenyon College. His research and teaching focus on eighteenth- and nineteenth-century British literature and culture, health humanities, and disability studies. Alongside his scholarship, Lau frequently writes for venues of public scholarship like *Synopsis: A Journal of Health Humanities*, *Public Books*, *Lapham’s Quarterly*, and *The Los Angeles Review of Books*. His poetry has appeared in *Wordgathering*, *Glass*, *South Carolina Review*, *Foglifter*, and *Hypertext*, as well as in three chapbooks: *The Bone Setter* from Damaged Goods Press, *Paring* from Finishing Line Press, and *Vagaries*, forthcoming from Fork Tine Press.

I sat down with Travis to talk about the arhythmic, unpredictable nature of chronic pain, the importance of thinking through pain relationally in order to build crip kinship, and how writing poetry offers a space for uncertainty, doubt, and radical imagination.

[Music fades]

EN: So I’m curious off the top—this is a question that I often have for folks that are, I guess like myself, working in post secondary institutions, colleges and universities—but I’m always curious about how the professor or the instructor describes their day job. So I know a bit about what I presume that you do. And I know how spread thin we can be across teaching and research and service duties, as well as how those various duties can connect or disconnect from creative practice. But I was curious, how would you describe, I guess, this notion of day job? Or is it a kind of a term that resonates for you at all?

TL: Hmm. I mean, I think the interesting thing about that question is that I feel like among colleagues and mentors, I have been told to think of it as a day job. But I think I've said this a lot in public, and I still stand by this: to do the job that we do ethically, there really is no downtime. And that's one of the most troubling things about academia where we do get to set our own schedules, we do get to work at our own pace. But at the end of the day, the more work that we take on, the more stuff we want to do to help others, particularly students, it ends up becoming a very totalizing job. So for me, actually, the word "day job" doesn't quite resonate, because I feel like in some ways, I'm always working. And this is partially a practice of mine to sort of take seriously what gets to be counted as labour and what does not, there's so much that you and I do that does not get counted in a tenure review, or does not have sort of visible markers that show up on a CV, but it's still labour.

EN: Oh, absolutely. Yeah. Oh, yeah, absolutely. I enthusiastically agree. That's tricky though, you know, especially if you're negotiating chronic illness, chronic pain, disability, as well as trying to serve students that are also negotiating that reality. How have you managed or maybe that's the wrong word...how have you negotiated this as of late or especially during the pandemic, where it seems to me that labour concerns are at an all-time high. And like you said, a lot of the labour that we might do for students as instructors or professors, is strangely invisible. You know, it happens in Zoom meetings, it happens via email. In the moments that we've been able to be in person, it happens in office conversations or maybe sidebars in the hallway. How are you doing all of this? I'm listening and learning.

TL: Sure. So I have two ways I might respond to that question. The first being that I entered my job in the midst of the pandemic. I started my job Fall of 2020. And I didn't set foot once on my campus. I work at Kenyon College, which is a small liberal arts college that has a very strongly residential experience. But like many other institutions, we were virtual for a while. So I spent the first year essentially teaching all remotely and I found that the work became extremely totalizing because I was spending upwards of six to seven hours a day in front of a computer, which to most people would seem like a dream I get to work in my own office, this exact room, and have everything in front of me. But I actually found it incredibly exhausting because it was a kind of labour that didn't pay anything back, to use a kind of capitalistic turn of phrase, right? That I didn't get to be in the classroom and share space with my students. And I felt really exhausted by that rather than energized. Now I'm back in person, and I'm getting a lot of the benefits of being in the classroom. But something that I've been thinking about, especially in light of the way that you phrased your question about how we are navigating this alongside our students...the thing that has become really apparent to me in the pandemic is how much grace we as instructors give our students that we often don't give ourselves. For instance, I tell my students that all of the deadlines on my syllabus are contingent and changeable, right? That you don't need to think about it as a be all, end all. But it's something that is flexible. But at the end of the day, I find myself pushing up against some of the structures of the semester, of the limitations of my institution that may not be very fluent in issues of disability, and accommodation. I think about how often the accommodation question gets referred to students, but never for faculty. And that's something that I've been putting a lot of pressure on here at

Kenyon because I really think so many disabled faculty members are afraid to identify publicly because of the consequences.

[Music: Quick, light, percussion, descending keyboard, minor tones]

EN: I'm so glad to hear that, you know, that's becoming a conversation that you're initiating or entering into at Kenyon because it is so important, right? I mean, I teach and do research and provide service at an institution that has certainly a legacy of social justice education. And I did walk into my job in 2018, to an institution that already had a disability caucus within the Faculty Union. But finding accommodations that are not only equitable, but just for faculty members is the next challenge. And as faculty members, we are also kind of living with the consequences of an institution that really is ableist in its orientation, for the most part, despite having—like we also have at York University—an amazing critical Disability Studies graduate program. It's always this funny kind of mismatch, right though...the Crip bodies in an ableist institution...and faculty and students are certainly both navigating that. So then what does creative practice do? You know, to enter that into the conversation? You're a poet, I'm a poet. I think we probably believe that poetry does something and trying to quantify that, mmmm, is probably not the goal. But how does the poetry for you connect to your teaching and research and service? Some people might think, "Oh, creative stuff, unless you're in a, I don't know, a visual arts program, it doesn't seem like it fits." I know from your writing that you disagree, right? The creative practice as a poet is doing something. So let me...let me hear in your own words, what you surmise that it's doing, I guess.

TL: Yeah, so for a really long time, I thought about them as really separate endeavours. In graduate school, I remember peers of mine, colleagues of mine, mentors of mine would say, "Well, you came here to be a quote unquote literary critic or scholar, you do that creative work elsewhere, unless you are going to do a project on poetry and poetics or you're getting a PhD in creative writing." So I felt I was a kind of closet poet for a long time, afraid to sort of allow that work to come out because in some ways, it was not the work I was supposed to do. But I actually turned to poetry as a way of freeing myself from some of the really odd academic conventions of academic writing, particularly the kind of argument-driven way of writing that is about circumventing, subverting, or refuting other people's claims, and sort of articulating our own. And there's a certain kind of certainty and antagonism that I really found exhausting. And also just not the way that I think. I tend to be somebody who really likes to be in dialogue with lots of people simultaneously. So for me, I actually turned to poetry because I wanted to think about a mode of speculation or thinking that didn't have to have certainty and end products, it didn't have to be teleological, so to speak. So my poetry is often about doubt and about questioning. And it always reminds me of that quotation by Eavan Boland: "My poetry begins for me where certainty ends." And I think that's such an important crystallization of what I found poetry to do, which is to imagine radically and not necessarily have an outcome or an end product. Which for us in academia, in the publish or perish model, we do not have space for that. And it is really telling how for so many of my colleagues, their creative work is something that they do on the side in relation to their day job, because it's not being recognized by the institution. I'm very grateful that both at the University of Texas where I was a postdoc, and at

Kenyon, they are valued as part of the tenure process. And I think this is something really remarkable to me, to be understood and valued by my colleagues and department as a scholar/poet—those things can coexist. But I know for many of us, that's not the case. And I'm taking very seriously the question you're posing about, what does the creative process and creative practice do in a situation where it's not valued? I think it's a constant reminder that we're more than simply one thing as an academic, right? I'm really troubled by the ways in which even early career academics are funneled down certain paths. For instance, I was thinking...I was at a workshop about your first academic monograph. And immediately the advice was, this is going to shape you as X, Y, and Z scholar. And it was troubling to me because there wasn't room for contingency, for space, for even change, or changing one's mind about something. And that's something that I find that my poetic practice always reminds me that stuff can change. I can experiment with a form that I didn't really love at first, or I might read someone and realize that's the kind of project I want to do.

[Music: High-pitched, happy, reverberating electronic percussion and keyboard]

EN: Oh, that's so encouraging. I mean, one thing I know about poetic thinking or even just thinking about poetics or even the word “poesis,” you know “to make,” is that it can't be parcelled out separately from other ways of thinking and doing. And especially if your poetry is infused or in conversation or dialogue with other thoughts, ideas, theorists, it just isn't easy to compartmentalize. But that uncertainty can be such a driver, such a kind of a vehicle, a generative vehicle, to different creative insights, no matter in the genre that you're writing in. And if I understand you've been working on a book on immunity. Especially...that's got to be an interesting time right now to be talking about the historical trajectory of immunity and vaccines and...and anything else you want to share with us about that project?

TL: Sure. So I realized that I had a commitment to this project, if only because...it's a set of conversations I feel like we need to have now and there's a certain urgency that makes me want to see this project through. But I have to say, because of the nature of being an early-career academic, the precarity and insecurity has pushed that project further and further down than I had expected. So I'm only just now beginning to really move toward finishing the manuscript, which as you've described, is about the history of the anti-vaccination movements in Britain. I am really, really interested in thinking about our present moment through that lens, particularly because I've been so troubled by a kind of discourse surrounding vaccination as it being a kind of unprecedented or new thing. I'll hear among colleagues, among friends, many of them academics, who have said, “Oh, wow, I don't think I've ever seen anti-vaccination get this bad.” And I'm always struck by the argument for novelty, which, whenever we do this, whenever we say, “Oh, this seems new,” there's usually a historical precedent. And I'm realizing now, just how much the discourse surrounding vaccine resistance or refusal has a long historical trajectory, particularly around the intervention I want to make, which is around disability and thinking about particularly the anti-autism of anti-vaccination as having a much longer 18th and 19th century history surrounding the possibility of vaccination rendering people incapable of exercising their reason, right? It's a similar anxiety about cognitive function, and about futurity, right? If children are going to be marred in their capacity to use their reason, they're not going to develop into

proper citizens and proper *productive* citizens. And to me, that seems to be very resonant with a lot of the discourse now, which essentially is anti-autistic, such that you have parents who are saying, "I'd rather my child die of a contagious disease than have something like autism," which is seen as the foreclosure of that child's future. And I'm very, very disturbed by that but also invested in pushing back against this kind of cultural amnesia that we have in the West about this much longer history where we've had these debates since vaccination's inception.

[Music: Fast-paced keyboards sounds ascending and descending, slow melodic wind instrument]

EN: Absolutely. Oh, I mean, I'm excited about this project. In some ways, you know, when things take longer, dare I say, or follow a different path, you know, sometimes they land exactly when and where they're supposed to. Because as you say, we do need this reminder that this conversation about anti-vaccination is a so much longer historical movement. I have the pleasure to work with a couple of historians of medicine. And again, they remind us that this is not new, even if we might believe it is. But especially putting this particular lens around ableism and anti-autism rhetoric is so troubling. I mean, primarily because of recent iterations, where the actual science itself was faulty and retracted and that part of the conversation still has to be, you know, people have to be reminded of. But the idea that protecting someone against a life...this ableist rhetoric, right, that I would rather not live than be disabled, is paired against this misunderstanding of what vaccinations will do or could do, right, and that kind of the protective, collective care notion. So I'm just gonna keep on encouraging you to do the work on that book. I mean, at the pace that feels right for you, because...yeah, I mean, honestly these are conversations I have with with students who are likewise troubled by the rhetoric, and don't often know where to go...to go for evidence in terms of when this rhetoric has come up in the past, or in a transnational context or really how to adequately argue against. So you've been working on that, plus two poetry chapbooks that are out. I've definitely lost track of time when I looked at *Paring* and said, "Oh that just came out." And then I went "2020, that was two years ago," and before that, *The Bone Setter*, but you're also working on another project on the history of chronic pain, so are you someone that keeps multiple projects going at once; is this part of your process?

TL: I've always been that way. And I wonder if that is partially my neurodivergence speaking, or just the way that I tend to work, which is... I've never been the kind of person that enjoys deep dives, because I feel like it closes me off from possibilities, like cross-pollination across projects. So I like to have multiple projects in motion, where they're all feeding one another. And it just so happens that the projects that I'm moving into, are directly in conversation, precisely this second project that I've very tentatively begun thinking about, regarding the histories of chronic pain and its relationship to the opioid epidemic. In some ways, this project is doing the same move that the first project is in thinking about how the opioid epidemic has a much longer ideological and cultural history. So that project is speaking to this book of poems that if I ever sort of find the fortitude to begin working on, as a collection, is a book of poems that's trying to think about chronic pain and relationality. I think something that I've been really moved to do in recent years has been to think about chronic pain, not just in terms of individual and subjective experience,

which is incredibly valuable. In fact, a chapbook that hopefully, crossing my fingers, will come out soon, is about subjective experiences of chronic pain. But I've been really moved lately to think about chronic pain as a relational experience, not just within a single singular individual but with collectives, with caregivers, with people who may in fact actually be hostile to one's pain. And I think that is a byproduct of thinking through the histories of chronic pain, that are never purely about individuals, but about individuals' navigation through institutions, through collective spaces, through populations. And in some ways, it makes a lot of sense that I couldn't write a book of poems yet until I sort of did this research to enhance my understanding of it because I feel like I was trained very much in the illness memoir, or disability narrative as subjective experience aspect of this kind of work. But now that I've been challenged a little bit to think about the ethics of care, or more relational ways of understanding pain, my poetics have changed as well. Who am I in dialogue with? Whose story am I telling? Is it only my own? And is it something that I want to share with the world that is simply my subjective experience? I feel like I've done that. And now I feel like I have more work to do to truly be in dialogue with other people who might be in pain, or something that my scholarship is really invested in, finding crip kinship with the past.

EN: Mmm-hmm. I think there's so much promise in thinking about pain as relational because, of course, it's formed at its most basic sense, in relationship to others through translation. I mean, I do not need to tell you, I'm sure...any person that's sat in the clinical space of a doctor, they're told, you know, "Rate your pain one to 10." It's this approximation of "Tell me where it hurts and how it hurts and how much it hurts based on this abstract scale, which I am going to try to use, then, to adequately treat, diagnose—not cure, but something like that—your pain," and it can never be felt by the person that's doing the assessment. So we have language and we have imperfect language and descriptions. And within families, as I often say to students, one of the lessons really coming out of like Arthur Kleinman's work around illness narratives, is that we have knowledges that become so specific, they can be reduced down to our family unit. You know, if your mother says "Oh I have one of *those* headaches," you know, it's not *this* kind of headache, or it's not a migraine or it's not a tension headache, it's one of *those* headaches. And I would never know as a clinician or a doctor what *those* headaches mean, but families create places of translation almost, that indicate severity. And I love the promise of that idea. Because I think it's actually imaginative. It kind of shows our imaginative capabilities to not standardize our experience exactly. But it also poses this problem about how does that story reach others? And so I'm kind of putting you on the spot right now, we weren't going to necessarily dig deep into the chronic pain aspect. But what have you uncovered around the either...the history part, and yes, the current opioid epidemic is not the first place whereby pain has been, I guess, situated as a collective problem. But also maybe the stories we tell, if there's been anything that's been kind of salient for you, around the telling, the translating of pain: personal experience that's also collective. It's not just one person's experience. And I'm wondering about where pain stories meet other pain stories, and where they diverge.

TL: Mmm-hmm. I'll try to answer it both theoretically and historically. So my instinct here is to think a little bit about my resistance to a very dominant theory of pain articulated by a cultural critic and theorist: Elaine Scarry. *The Body In Pain*, was written in 1985. And I never really

realized just how much my thinking about pain would be situated in relation to Scarry's. But I was always really uncomfortable with Scarry's argument, essentially, that pain cannot be translated across individuals; that there's this chasm of difference between the person in pain and the person witnessing them such that pain—and these are Scarry's words—annihilates, or destroys language. And for me, I found that theory to be troubling because it just didn't match up with that any of the experiences of people in pain that I knew, in fact, people that I knew who live with chronic pain, were effusive people, that had plenty of stories to tell, that had language for very particular and minute things. Versus Scarry's argument, which is that we are reduced to these kinds of primordial cries or metaphors that get us away from the truth of pain. And from a disability justice standpoint, my response usually is, "Maybe we've just been really bad at attending to narratives of pain by people." And the larger question that I left that book thinking about, particularly, once we take a more intersectional approach than Scarry does is: whose pain gets to be taken seriously? I'm thinking about the much longer legacy of people of colour, particularly Black folks, whose pain is either readily used to further their own oppression, or just completely ignored. And I think for me, this is where history really gives us a lot more insight than a sort of generalized transhistorical theory of pain that says, "Pain is always going to be destructive," of language at least. And I think a lot of my historical research has been trying to recover forms of language and historical representations of pain that don't always fall into this destructive or violent quality. I'm really struck by the ways in which many people who speak about pain spoke about it in spiritual terms, which we've kind of lost over time. I have been really interested in the moment right around the 1830s when anaesthesia gets invented and is used in medical settings, how much that transformed our understanding of pain from this kind of deeply holistic, spiritual experience that has a bearing on one's soul, to this kind of secular understanding of pain that says "It's simply something that can be medicated away, or annihilated entirely." And I think that shift medically to making pain random or even something easily eliminated has had profound impacts on the way we think about pain now: why be in pain at all? Health should be pain-free. And that has some really, really disturbing social and cultural effects on us.

[Music: Uplifting choral voices, punctuated melodic string instrument, peppy electronic clapping sounds]

EN: Oh absolutely. Oh, I love where you're going with this I... So I'm, I'm thinking about duration, you know. I bet you have also had conversations with your students where the words chronic and acute get thrown around and you're like "That's about duration, not severity," right? You can be chronically ill and have severe experiences and you can be chronically ill and have a period of non-severity. But acute is about that time right that is supposed to be short lived, this predictable course. The ordinariness, dare I say, or the chronic nature of pain where it comes back and comes back does not relent, it becomes something you live with, because there is no other solution. There's no other solution, but to live with, seems to me would require a completely different vocabulary. It's not an annihilation of the self, it's a different aspect of the self? How would you describe that kind of quality of chronic pain, no matter how severe it is, but that ongoingness, the actual chronicity part, I suppose.

TL: I love this question. And I think you're getting very much at the heart of the influences on my thinking, both in Disability and Crip Theory, as well as Queer Theory. I've been really interested in thinking about temporality, particularly queer time and crip time, where chronicity here does not align with the typically standardized—or to use the words we've used before—normalized visions of what medicine should do right: diagnosis, treatment and cure. That sort of standard trajectory gets thrown out the window, the moment that we have something like chronicity, which follows its own path that may be recursive, or may take its own meandering path towards something like recovery, or not recover at all. I've been really struck by the temporal dynamics of chronic pain, such that we need to think about it in terms of its arhythmic quality. And I love that models of time put forth by Queer and Crip Theories have prompted us to think about how the anachronistic or even arhythmic qualities of chronic pain can help us better think about the ways we've standardized the temporality of illness and disability more broadly. And this, I think, returns us to a point we've made earlier, which is that, again, it's a failure of attending to models of pain that don't have a readily predictable path. If it is circular, or if it is a kind of oscillation between extreme severity and not so severe at all. One, that shouldn't mean we should have any less commitment to their care, which is unfortunately how medicine goes right, they see certain people as lost causes if they can't be cured, or drains on resources, right? This is where capitalism and medicine intersect in very disturbing ways. But I think your question really is at the heart of this project, which is the moment we start to think about chronic pain as a problem of temporality, what do we do with our vocabulary and our understanding here of selfhood, which you've really kind of pointed me to. Thinking about it not as simply an annihilation of self, but maybe a more crip figure of a kind of intertwining between that self and pain such that they're not so separable in the ways that Scarry might believe. And that's, for me, I think, an opportunity for imagining, and in my poetic work, kind of what I try to do and imagining what that pained self or painful self might look like beyond the kinds of stereotypes, or—and these are Susan Sontag's words from *Illnesses As Metaphor*—“the punitive and sentimental fantasies,” that get attributed to pain.

EN: Yeah, absolutely. It's hard, I think, for some people to imagine—I know it's not impossible for crip or disabled people to imagine—but, not in simplistic terms, that there can be something generative of living with pain. But that lives with pain, lives with suffering, are worth living. And they *are* different from lives that are free from, ostensibly, pain or suffering. And unless you've been in that skin, that body, it is hard to translate, but it opens oneself to other ways of understanding and seeing the world. It is a kind of portal, I guess. I kind of like that idea. Because there is a channel of information that's available if you avail yourself to it. And so, I want to ask you about this word, “cripistemology.” I think many people have heard of epistemology. I know certainly, when I'm in conversation with students, they're like, “Oh, no, not that word again! Don't ask me about ontology! Don't ask me about epistemology!” And this often will come, you know, in a Strategies of Research Methods Course. I say “No, no, no, like, you know, this stuff. It's not *out there*. It's actually *in here*; you're already living through questions of ontologies and epistemologies.” How would you maybe reassure one of my undergraduate students when they first heard “cripistemology” that it isn't overly complicated, it actually...it's real; there's something very tangible in this word. Or how do you use it? Do you use it as a concept, theory, practice, way of life? All of the above? None of the above?

TL: I mean, I think in an ideal...in an ideal world, yes, I would think about it as being *lived* as much as it is *thought*. But I think if I were to describe simply what cripistemology is, if epistemology is the way we know what we know, cripistemology says, “Well, how do we know what we know about disability? And how does disability shape how we know things?” So I think it has two major interventions, the first being, understanding disability lived experience as worthy of knowledge-making such that it is not lesser knowledge or a kind of niche subjugated knowledge that is beside more official ways of knowing. So that's the first thing. The second thing is that it forces us to reevaluate our ways of knowing the world around us, each other, as in some ways always already ableist, right? What are the presumed ways that we even use the word like “self” or “human” that actually have a lot of ableist baggage, but is presumed to be apolitical and universal? That is also what cripistemology does.

EN: Oh yeah, that's wonderful. Those are great interventions. And I can definitely, I can definitely see my students nodding along. I mean, I love that idea too, right? Worthy of theorizing, worthy of knowledge, not lesser than, generative, but also intervening, right, in these questions, these questions about normalcy, normality, the human, etc. And I think we'll keep on just writing to and for cripistemology, right? The conversation isn't over for sure, especially when I get the chance to talk to folks like yourself. So you've published widely as a poet, but there's something so precious, I believe about the book, right, the chapbook, with the beautiful art and the editing and the care and being in community with other people, because no chapbook is produced by one person, usually, at least you have a printer or other kind of supports there. So your first chapbook, if I have this correct, 2018, *The Bone Setter*. And you have this second book that I'm holding up here, *Paring*. And a forthcoming chapbook. Are those books in conversation with each other as well, as well as you know, these other fields of knowledge or scholars, or poets or theorists? Are they talking to each other in some kind of delightful way, would you say?

TL: My answer, and I don't want this to sound glib at all, is of course they are! The 2018 chapbook is really a chaplet and by chaplet, I mean, it's actually a six poem sequence, about seeking chiropractic care for my scoliosis-related disabilities. And they're written as a set of movements through that experience, where I'm thinking a lot about what it means to navigate medicine, and also navigate treatment for something that actually resists the diagnostic categories that would merit treatment or violent intervention, and by that I mean surgical intervention to my back. So my second book *Paring* was an attempt to respond to everything the first chaplet didn't do, which is think about facets of pain that are not always negative. So I wanted to think a lot about pleasure and joy. And for me *Paring* was an opportunity to think about this concept-metaphor of the paring knife—p-a-r-i-n-g, just for clarity—of this image of the fruit. And part of the way that I was imagining it is, over time, as we as individuals grow, we have to pare away parts of ourselves in order to allow certain forms of growth to happen. But, I try to remind myself too, that when you pare that away, that was also a protective layer that protected you. And this could be ideology, this could be history, this could be trauma. I wanted to think about this simultaneously creative and violent act of paring something away in order to grow. And in that book, I think a lot about my other facets of my identity, as a Chinese American man,

as a gay man, thinking about how pleasure, sexuality, sensation—these are things that are not reduced to one thing, just because I'm in chronic pain. Everything that my first chaplet wanted to take very seriously, which is what happens when I'm under the clinical gaze, versus what are my more subjective experiences of pain that don't align with that kind of medicalization? So now that you've asked this question, I really, I do think about those books as very much in conversation with one another. This third, fingers crossed, book that might come out is actually a collection-long response to Elaine Scarry. And if I've explored in the first and second book subjective experience, I wanted to think about theory in this third one.

EN: Mmm-hmm. Wonderful. So *Paring* I would love to ask you to read something. I am not just totally putting you on the spot. We suggested that this would be something that could happen in advance. I'm so curious about what you might choose given this conversation around pleasure, pain, and peeling back layers of oneself, whether it's needed or not, I guess.

TL: Yeah, I mean, whenever I revisit this collection, there's one poem that always stands out as the kind of soul of the collection. And this is the poem "Pithy," where I'm experimenting with a form I used to absolutely despise, which is the enumerated list. I found them to be a kind of tedious form at first where it felt like I was sort of pummeling the reader with a series of itemized things that I was always uncomfortable with, and I couldn't quite place why. So I decided to double-down and really think about what it was that so discomfited me about it. And I found that I really loved the form because there was something about its sequential nature that I could undo, in a kind of crip way. So this is an enumerated list poem, and this is "Pithy."

[Music throughout poem: slow, repeating low tones, intensifying and lengthening, dark and expansive]

All day, all night the body intervenes.—Virginia Woolf

1. I shrug off my messenger onto the floor and forget to kiss you when I walk through the door.

Pith: the pain has its steel hoop around my lumbar.

2. I catch myself tottering—a deformation of my walk.

Pith: a family resemblance: the curvature progresses faster than any other before me. I am not yet thirty.

3. I take a tumble after I miss the curb.

Pith: had you not caught me by the arm, I would have finally broken my first bone.

4. I switch positions before I even alight.

Pith: I never thought pain would claim intimacy for its own.

5. I crack three different places. It annoys you. It worries you.

Pith: they said it would make my knuckles bigger, but it is one of my most futile of pleasures.

6. I submerge myself in an epsom bath.

Pith: smelling like eucalyptus and lavender is the closest to relief because you can fool at least one of your senses.

7. I lay against you as we watch the ship go into warp.

Pith: I laid this way while doing homework all through high school, and my case silently went from light to moderate.

8. I cannot form sentences. Non-sequitur, organic hesitancy.

Pith: I would never wish upon anyone a life in the thickness of fog. The shame of being lost in it.

9. I can't make it up the stairs while cradling the box.

Pith: I hate admitting that I will have to depend on you more and more. That you will have to lie to me that it's okay.

10. I am cold and distant.

Pith: pain is subterranean, a geography to which you will forever be foreign. To be present is to also be far away.

11. I will myself to take deeper breaths. You think something is wrong.

Pith: the shallowest part of me is my breath. Some days feel breathless in all the wrong ways.

12. I look perpetually exhausted.

Pith: pain redefines what labor means.

13. I look unhappy.

Pith: joy so often feels remote, but you are teaching me that it never left me.

14. I wish it were otherwise.

Pith: magical thinking can really be cruel optimism.

15. I choose not to operate.

Pith: why should a boy ever have to choose between a life in motion or recumbence?

[Music: Ascending, bright, twinkly, uplifting, electronic]

EN: That was Travis Chi Wing Lau, reading his poem “Pithy” from his 2020 collection *Paring*, published by Finishing Line Press. You can find more of Travis’s work at Travisclau.com, and follow him on twitter [@Travisclau](https://twitter.com/Travisclau).

On Being III is researched, recorded and produced on the traditional, unceded and treaty lands of Indigenous peoples across what is now contemporary Canada where each of us on the show is grateful to live and work.

This show is produced by Emily Blyth and Coco Nielsen, and executive produced by me—Emilia Nielsen.

Prince Shima creates all of the music you hear in our show. You can find him on bandcamp at PrinceShima

If you liked this episode, check out more at EmiliaNielsen.com or wherever you listen to podcasts.

If you'd like to get in touch with us, please write to OnBeingIllPodcast@Gmail.com. We'd love to hear from you.

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Until next time, let's create, converse, and crip the system together!

[Music rises in crescendo then fades out]

[End of transcript]

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