

ACHY AFFECTS: FEELING OUR WAY INTO DEEPER DESCRIPTIONS OF SELFHOOD

by

Caitlin Emily (CE) Mackenzie

B.A. in English Literature, Cornerstone University, 2006

M.F.A. in Creative Writing and Literature, Bennington College, 2011

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This dissertation was presented

by

Caitlin Emily (CE) Mackenzie

It was defended on

May 9, 2023

and approved by

Julie Beaulieu, PhD, Teaching Associate Professor of Gender, Sexuality, and Women's Studies

Shalini Puri, PhD, Professor of English

Tyler Bickford, PhD, Professor of English

Stacey Waite, PhD, Susan J. Rosowski Associate Professor and Chair of the Graduate Program
in English

Dissertation Chair: Cory Holding, PhD, Teaching Professor of English

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Caitlin Emily (CE) Mackenzie, PhD

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My dissertation, titled *Achy Affects: Feeling Our Way into Deeper Descriptions of Selfhood*, is grounded in community outreach and positioned at the intersections of health rhetoric, trans and affect studies, and theories of epistemology. I organize my dissertation into four affects (chapters)—shame, shyness, nostalgia, and wonder—to critique the ways capitalism influences our imaginaries and, by proxy, our bodies.

I argue that capitalist logics erase possibilities for complexity to instead insist one is either legible or illegible, productive or passive, normative or pathological, healthy or unhealthy, dysphoric or euphoric, and by so doing require one overcome what hurts for what cures, whether those cures are real or not. My effort is toward de-mobilizing these binaries that structure our social literacies around our bodies, especially as we attempt to describe vulnerable experiences of embodiment. I seek to honor agency within precarity, to hold them at the same time, to express how one does not negate the other.

Inspired by harm reduction, my work at needle exchanges, but also my own queer and trans body, in these pages I ask a set of questions: how do capitalist logics make communities of people—specifically queer, trans, and drug using—spectacles of embodiment for the purpose of productive futures? How is language involved in this process? How might affect give attention to bodies (and being) without exploiting those bodies for totalized meaning? Finally, how can we cultivate alternatives to how we think about and describe embodiment?

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Achy Affects: Feeling Our Way into Deeper Descriptions of Selfhood

*“Our feelings are our most genuine paths to knowledge. They are chaotic, sometimes painful, sometimes contradictory, but they come from deep within us.”*¹

—Audre Lorde

*“I do not believe the story of my scholarship is separate from the story of my life or the body I live.”*²

—Stacey Waite

dis•claimer // noun // a statement of denial, especially of responsibility; an act of repudiating or renouncing one’s claims

Disclaimer: In these pages I resist conclusions and linearities to instead follow the ephemera of affect, of feelings, into the impossible responsibilities of language. *When in doubt*, one of my past poetry mentors tells me, *describe the world*. He was trying to protect me from the lure of closure and claims. His advice (as I recursively return to it) asks for a kind of quiet, an attention that is both embodied but expands beyond the parameters of skin. His advice centers materiality and calls for care, a leave-no-trace poetics. He had me read Rainer Maria Rilke, promised me elegies do more than memorialize, that they invoke feeling and collapse time.

¹ Audre Lorde, *Conversations with Audre Lorde*, (Jackson, MS: University of Mississippi Press, 2004), 91.

² Stacey Waite, *Teaching Queer: Radical Possibilities for Knowing and Writing* (Pittsburgh, PA: University of Pittsburgh Press, 2017), 15.

Describing the world entangles us in hermeneutics and translations, fraught processes pocked with human error. But the err is unavoidable. Leave no trace means we move carefully through our landscapes—not perfectly, but with the least amount of harm. When I spent two weeks backpacking in Denali National Park, in order to receive a permit I first took a four-hour class on bears, backcountry, and unpredictable weather. There is no trail system in Denali—just high brush and glacial streams. “Walk side by side with your partner” the rangers told me, so as to minimize any inadvertent trail making. My partner at the time was M., my then husband. Those two weeks I was attuned to everything: the wolves howling, of course, and branches snapping. The bear prints by the tent in the morning, the interminable rain, the constant buzz of mosquitoes. But also my body. It became just a body in the backcountry. Just movement, muscle, and preservation. I was all sinew and synapse, on the cusp of a collapsing marriage. My body was meaningless and I was grateful for how little it held.

I read Rilke in our tent while the tundra sun, mid August, refused to set. My mentor turned me toward the elegies but Rilke’s letters pack smaller, and I was already at low thresholds for the elegiac. Jeans rolled up and propped under my head, I re-read his most famous counsel to the young poet: “live the questions.”³ I love this line. Every time I return to it I reabsorb its stun and verity. I did not want divorce, did not want to peel myself from the known and familiar. One hundred yards upwind, M. hid our bear canister—stuffed with food, chapstick, toothpaste, and anything else with an inch of scent—under some dense scrub. He would stack our pot and pan on top of the canister as a warning call. If an animal got into our gear, the clatter would signal precarity and possible imminence, some heavy force lumbering its way to us. I lay awake listening for that clang, straining my ears against the scrim of silence. I did not want divorce, but I’m gay. And trans nonbinary. And my ex is, well, neither. So while these inchoate severities

³ Rainer Maria Rilke, *Letters to a Young Poet*, trans. M.D. Herter Norton (New York: Norton, 1934), 27.

brimmed often, pressed against skin, they did not breach. Instead, I endured a long, uncertain ache—restless, desiring, and unsure—to which Rilke’s calm counsel was at once implosion and balm. To live the questions was to leave behind what I knew. And what I knew, I loved. I loved M. and the life we created in our small Pacific Northwest attic apartment. But in the silence of interior Alaska, I heard Rilke. Even a decade later, though I now (somewhat) more easily identify as queer, I still ache with the thought of *not knowing*. As in, *how did I not know* such an intimate part of myself and how did this illiteracy spread as pain, through me but also through M. and beyond. Even a decade later, I still move further into myself, still find myself a mess in process. Out of this private pain—my embodied illiteracy and its material detritus—a public possibility emerged. I wonder, what if we heed Rilke? What if living the questions was a politic, or an aesthetic, or the way we honored our bodies and desires?

Achy Affects is an experiment and exploration. Invested not in static claims or tidy revelations, interested not in demystifying the mess or “finding the gaps” in current thought and theory, I heed Audre Lorde: there are no new ideas. But there are new ways of making them felt.⁴ I ally with Cameron Awkward-Rich, who privileges process to honor the everyday, and in so doing makes futurity a horizon of hope.⁵ I pursue the nostalgic logics of Hil Malatino, who theorizes faux-emo, early-aughts, punk-pop music.⁶ Meaning, we can do theory anywhere, not just in elite spaces or with elite objects. I hold close the potential utopias of José Esteban Muñoz, that we protect our futures the moment we unengineer them, stripping those demands made by our culture of punctuating capital. Finally, I venerate the advice of my mentor, so I might describe rather than argue, pay witness rather than stake claim. This is harder said than done.

⁴ Audre Lorde, *Sister Outsider* (New York: Ten Speed Press, 1984), 114.

⁵ Cameron Awkward-Rich, “Trans, Feminism: *Or*, Reading like a Depressed Transsexual,” *Signs: Journal of Women in Culture and Society* 42, no. 4 (Summer 2017): 824.

⁶ Hil Malatino, *Trans Care* (Minneapolis, MN: University of Minnesota Press, 2020).

The vibrations of our social worlds—the infinite stream of fleeting and fleeing emotions forming our weird, idiosyncratic environs—make our written translations near impossible. As soon as we grasp what we mean, what we mean evades. We rewrite and we revise. We retrace our steps and try a new approach; perhaps a route with less scree and scramble but more switchbacks. We find the trail has changed; we find the trail has not changed. This is not a dire contradiction, but it might require more attention, and a willingness to forego telos and surrender to process. We may name this undertaking a poetics, or leave-no-trace, or life inside the questions. Rebecca Lindenberg says simply “poetry [is] how thought feels.”⁷ And while these lines of prose are definitively not poetry, I believe poetics has much to offer in how we practice attention, how we forge interior lives, how we recommit to wonder, how we lose ourselves in language and, by so doing, lose our anxious grip on punctuation. I explain more soon why I so adamantly resist ends, but for now I’ll say the whole of this project is about how thought feels, and how language intercedes to nurture this amazing relationship.

Another disclaimer. This project surfaces directly out of ache itself. The ache of blurred boundaries and fuzzy genres, of following a feeling rather than a rule, of ignoring academic convention in order to finish a program slowly exhausting my nerve. I believe it is not only possible but vital that the labor of a book project be born from love and wonder, with the sustained desire to stay within the ordinary, the everyday. Because this is where we live our lives. Simone Weil says that attention is bound up in desire, not the will.⁸ When, in pursuit of a graduate degree in English, I moved from the Willamette Valley to the Steel City, I found myself caught in such willful labor: the university gave terms by which to navigate our own thoughts and ideas. It was useful. But after awhile, *use* became less useful than *feel*. After years in

⁷ Rebecca Lindenberg, *Love, An Index* (San Francisco: McSweeney’s, 2012), 49.

⁸ Simone Weil, *Gravity and Grace* (New York: Routledge, 1947), 171.

seminars, after comps and exams, I found myself in a new kind of ache, longing for some quiet path out of theory, even as I still believed in its possibility. I returned to poetics, to how thought feels, to feeling, and to the conviction that it need not be one or the other, theory or life lived, but a collapsing of this false dilemma into many potentialities. “I sensed the possibility of the integration of feeling/knowledge,” writes Barbara Christian. “There is, of course, much to be learned from exploring how we know what we know, how we read what we read, and exploration which, of necessity, can have no end.”⁹ I understand this non-teleological necessity as felt criticality, a renewing commitment to life within the questions.

When not slogging my heavy pack through the bristled tundra of Alaska’s interiors, I lived in Eugene, Oregon, trekking across the much tamer wildflower meadows of the Cascades every weekend and drinking craft brews in the valley during the week. On Monday nights I joined an outreach crew in parking an old RV—stocked with sterile needles, cookers and cottons, condoms, hot coffee, tampons, Narcan kits, and day-old baked goods—at the edges of downtown on Blair Street. We parked on this dead-end next to the railroad tracks, setting up tables and unloading supplies, while clients gathered. Often the train thrashed past and I found myself trying to yell over the metal scream of tracks, *have you exchanged needles with us before?!* Collecting used needles and offering packs of 27 and 29-gauged sterile syringes to new and returning participants, we formed relationships and watched relationships form with people using drugs in our community. Sometimes our participants stayed to chat, other times not. But they each left with sterile equipment, a cup of coffee, some bagels, and whatever else we had on hand. The scene at needle exchange was one of motion, of energy and dispersion, community and care. Our primary goal was to collect used needles and offer sterile equipment in return. And like most

⁹ Barbara Christian, “The Race for Theory,” *Feminist Studies* 14, no. 1 (Spring 1988): 72 and 73.

needle exchanges across the country, ours was a huge force for stymying the spread of HIV and Hep C in the region.

I received hours of training before doing exchange—in STI testing, administering Naloxone, and in-take forms. But what stuck with me the most was our training in language. And, in fact, that training came to inform my politics, my social world, my investments in process, and how I came to define rhetoric: what we say has direct impact on the material reality of people. Our language forms and informs our world. As an example: the more we say “clean” the more we reinscribe drug use as dirty. The more we celebrate sobriety (something we were explicitly trained not to do) the more we reinforce recovery and rehab as the only logical responses to drug use. Here’s another example.

In 2017 the sheriff of Butler County, Ohio refused to provide life-saving Naloxone (aka Narcan, an FDA-approved nasal spray that immediately reverses an overdose) to his police force and emergency teams, explaining “all we’re doing is reviving them, we’re not curing them.”¹⁰ Coded in medical telos, “cure” signals a normative expectation of health, that one linearly progresses toward a more acceptable future. Butler County suffers more than five hundred overdoses each year and yet their sheriff suggests *recovery supersedes material lives*—that it is actually better to be dead than alive and using. The sound is familiar and the echo is eugenic: this sheriff added his voice to hundreds of years of marking the body as the site of profit. Lorde has already warned us. Ours is “a society where the good is defined in terms of profit rather than in terms of human need.” If she is right, and of course she is, then ours is a society that steepes our lives, our very bodies, in capital.¹¹

These pages are very much a response this, to the ways the climate of constant capital

¹⁰ Corky Siemaszko, “Ohio Sheriff Says His Officers Won’t Carry Narcan,” *NBC News*, July 7, 2017.

¹¹ Lorde, *Sister Outsider*, 114.

influences our imaginaries and, by proxy, our bodies. While recognizing the multiple ways we might define and identify the kinetic tides of capital, as I use it here I am describing a social world saturated by consumption, commodification, and profit—an illegible but enriched network of synaptic exchanges charged by soluble possibility. Power shifts along the grid, lighting up spaces while rendering others dark. There is movement, devastation, joy, obliteration. Lauren Berlant may call this “slow death.”¹² Rewarded for dreaming and desiring the good life, we strain toward what is promised: a crossed threshold, into consummate arrival. Our best selves lay just ahead, if only we work hard enough toward overcoming the pain of brokenness.

This is a trap.

At exchange, even as I witnessed our bodies exhausted by the compulsory demands of capital—that one pursue recovery at all costs—so also did I see people living dynamic, vibrant lives marked by care and connection. If traditional healthcare has privileged the cured condition, then harm reduction—the practice that grounded our work at exchange—dismisses this telos (that there should be some defined end state) to instead take up the temporal uncertainties of the moment. It is exploration without end. Harm reduction recognizes that all of human experience hums within the mess of questions, that we may or may not arrive at scripted destinations or punctuations but we deserve unconditional care regardless.

Inspired by harm reduction, by my time doing needle exchange, but also by my own queer and trans body, in these pages I linger in a knitted set of questions: how can we, given the divergent and convergent landscapes we find ourselves in, cultivate alternatives to how we think about embodiment? How do capitalist logics make communities of people—specifically queer, trans, and drug using—spectacles of embodiment for the purpose of productive futures? How is

¹² Lauren Berlant, “Slow Death,” *Critical Inquiry* 33 (2007): 780.

language involved in this process? And how does affect, how do feelings, give attention to bodies (and being) without exploiting those bodies for totalized meaning? I have been so complicit in this violence, demanding my own body answer all the questions brought against it. And the questions *are* important. These pages are about figuring out how to live in them rather than punctuate them. Capital wants outcome. Rilke calls us to resist. So, while moving through the narrative topography of my own life—one riven with failure—I look toward affect to first demonstrate how capitalist logics erase possibilities for contradicting expression (expression of both body and word) and instead insist one is either legible or illegible, productive or passive, normative or pathological, healthy or unhealthy, dysphoric or euphoric. My effort is toward demobilizing these binaries that structure our social literacies around our bodies, especially as we attempt to talk about vulnerable experiences of embodiment. But I'm not interested in argument as form. Instead I take up story, poetry, and feeling. Affect pivots our attention from static analytics toward inky motions and messy sensations. It offers a way through knowledge that releases the call toward mastery and dominance. I'm trying to protect the body, all it's been through. I'm trying to protect it from logics and languages of capital—our ways of thinking and speaking that double down on production and optimization.

In that way, these pages are all about questions and little about answers. Sometimes the questions recycle into old-new versions of themselves, like Rilke says. Sometimes they spin out. But this also is a kind of relationship with language, this re-application and these returns. Maggie Nelson names this *pleasure*, “the pleasure of ordinary devotion.” She writes that “one may have to undergo the same realizations, write the same notes in the margin, return to the same themes in one's work, relearn the same emotional truths, write the same book over and over again—not because one is stupid or obstinate or incapable of change, but because such revisitations

constitute a life.”¹³ While Nelson describes desire, the pleasure of attention, she also acknowledges ache in the return, that there is pain in relearning a hard lesson. As I spent hours in high alpine wildflower meadows, boiling water over a camp stove to steep cheap tea while on the brink of a public divorce, I witnessed myself failing. We are told to master ourselves; and yet my own illiteracy about my body—how did I not know who I was and what I desired—hummed in me. Because while this is the story of needle exchange, it is the story of my queer and trans self failing through desire, through knowledge, through the body. At its root, harm reduction refuses constructions of success and cures to instead meet people in their moment of need. It offers unconditional care without requesting one work toward recovery, toward anything. That is, it recognizes us as always in process. In this way, among many ways, harm reduction saves lives, saved my life.

By tracing the narrative treads of my own body, I intentionally protect bodies (including my own) from coercion, from being made objects of theoretical study. I follow after myself through the dense brush of Alaska’s tundra, fold back to witness myself as a child quietly creating but also hiding, converge through my shameful divorce, my coming out, my time spent passing out needles in the streets of Eugene, my top surgery, my adolescent mixtapes, and all my reckonings that could be called failure. Failure—what breaks me but lets me move on. It is not linear but like Nelson writes, a series of returns. The folding and returning creates density, texture, and makes knowledge a thing of multiples. How we know ourselves and how we do not know ourselves, this is only part of the ache. With a world insisting we manage and master our own being, there’s *no space* to live the questions. These pages are about the *feeling* of no space and the *feeling* of making space.

¹³ Maggie Nelson, *The Argonauts* (Minneapolis, MN: Graywolf Press, 2015), 112.

And this brings us to ache, to why ache might actually alleviate some problems, might be the balm we need to discuss deeper pain. Because they are not synonymous, ache and pain, but rather ache arrives in multiples, is not merely acute but chronic and drawn out. Ache is an ongoing, everyday vibration animated by both the ordinary triggers of being alive and being human, but spurred also by the systemic harms we are made to endure. Ache also announces discomfort—something tired, off, or amiss in the body. Sometimes a low burn or an uncertain pull, and other times a tenderness, like when my hips ache from carrying my pack, rubbed raw across the bridges of bone. Ache is also bound up in time. We ache as we age. In my twenties I can run a 5k hungover and wrung out. And sober in my near forties, I quietly, carefully stretch my hamstrings to release the muscles in my calves, my glutes, my lower back. The ache of my adolescence carries over into the present moment as I literally write through old, reoccurring melancholies. So ache persists. However, in similar and extracted ways, ache is not just physical but deeply emotional. We ache for home. We ache for our lover's attention. We ache for a parent who has only devastated us. We ache for explanation. And it is these kinds of aches I'm interested in. While ache signals something amiss or lost, it can also indicate growth, as in growing pains. I ached as I lost my partner, as I gave up my partner so I could come out. The ache was humid and heavy and held its weight for years.

“Achy,” in this way, is not the same as “bad” or “ugly.” Achy hurts, of course. But there is also pining, desire, nerve. Ache calls out in longing, even as it may also quietly brood. Ache bleats but also hums; it exhausts but also rebuilds. Lonely and shared, ache is many things. And for this reason I turn toward it. Ache attenuates the notion there are only positive and negative feelings. For as long as we organize feelings into positives and negatives, we will insist on

recovery and control, achievements and defeats. Because the reality is, even when we stumble into a blissed moment, we might find it still stings. The temporal panic that surrounds happiness is only outdone by the bewilderment of how we managed to find our way into such a moment to begin with. Happy can hurt. Out of a commitment to positive and negative feelings, we naturalize a binaried concept of socialized emotion: we try to overcome what's negative, convert shame to pride, coerce grief into closure. Instead, ache dwells within emotional enmeshment, that we feel multiple sensations or needs at once, and the multiplicity can often make for an opaque understanding of the self. That said, and for those reasons, ache might actually help us live the questions. I entered into the acute pain of divorce unresolved on whether I was doing the right thing. Breaking myself down in order to survive, I pulled the threads of my known self to privilege an inchoate feeling. Happiness, truth, and flourishing—these intoxicating promises did not await me on the other side. There is no other side; I stood on the rim of nothingness that bore everything.

I admit to deep suspicions of such intoxicating promises, whether they surface in story or theory. Which is not to say I am critical of what is warm, joyous, wondering, loving, crushing, desiring, even happy. Let us hold our happy moments as much as possible. Rather, I suspect the impulse toward meritocratic culminations—that we overcome the bad to bask in the good—is a bad sell, a total lemon. For one, it neglects how infused ache is with wonder. It also silos us into a taxed binary: regressed or progressing, failing or succeeding. How might we instead spot hegemonic eddies while also capturing the profound currents of living a life shaped by systemic harm, white logic, moral panics, but also fevering beauty, loving connection, and creative ferment? This is what Gary Bowen might call an integrated whole: “It is not a thing in balance, as implied by dichotomies of male/female, gay/straight, and black/white so prevalent in the white

way of thinking; but a complete and complex thing which includes an entire rainbow of possibilities—not just the opposite ends of a spectrum.”¹⁴ The binary is whiteness. For this reason I am invested in social epistemologies, their origins and their influences. So much critical energy falls onto us (our actions, behaviors, bodies) rather than on systems of thought, how we came to think the way we do and how we might cultivate other ways to wonder.

I am trying to pull us, myself included, away from what seems inevitable in a landscape predicated on telos—an authentic self made compulsory against the backdrop of pain. Cameron Awkward-Rich gives us a place to start. “What would it mean to do minoritarian studies without being driven by the desire to rehabilitate the subjects/objects of our knowledge? What kind of theories would we produce if we noticed pain and, rather than automatically seeking out its source in order to alleviate it, or mining it for resources for perverse or resistant pleasures, we instead took it as a fact of being embodied that is not necessarily loaded with moral weight?”¹⁵ Awkward-Rich calls for theory that refuses to exploit and instead witnesses ache as particular and everyday, as part of embodiment. He asks us to pay attention without demands for payoff.

Christian Wiman stands also at the abyss, also on the rim of nothing that bears and beholds everything. This feeling of peering into, being pulled open, of peaceful chaos, this feeling is ache. Wiman writes often of wounds, as they manifest in the form of a rare cancer he was diagnosed with in his young adulthood and which he still carries, but also as unrelenting existential attention. Quintessential to both his lyricism and his prose, Wiman declines the elixir, not out of obstinance, but because cure is illusory. “There are wounds we won’t get over. There are things that happen to us that, no matter how hard we try to forget, no matter with what fortitude we face them, what mix of religion and therapy we swallow, what finished and durable

¹⁴ Leslie Feinberg, *Trans Liberation: Beyond Pink or Blue* (Boston: Beacon Press, 1999), 65.

¹⁵ Awkward-Rich, “Trans, Feminism,” 824.

forms of art we turn them into, are going to go on happening inside of us for as long as our brains are alive.”¹⁶ Wiman eschews romanticism; his body won’t allow it. “For those of us who have gone to war with our own minds there is yet hope for what Freud called ‘normal unhappiness,’ wherein we might remember the dead without being haunted by them, give to our lives a coherence that is not ‘closure,’ and learn to live with our memories, our families, and ourselves amid a truce that is not peace.”¹⁷ *A truce that is not peace*—if this isn’t a lyric for my queer body surviving failure, I don’t know what is. If this isn’t a lyric for everyone living in the fallout of themselves, I don’t know what is.

I once had the opportunity to interview Wiman. For a few years, I had been reviewing his books for different publications. We would sometimes chat at conferences or after lectures. But when I finally formally interviewed him I had just spent the better part of that year reading his poems into my friend’s voicemail. She was enduring an unbearable tragedy, her grief so overwhelming she couldn’t manage the strength to talk by phone. But she still needed to hear from me; and because I was getting divorced I too needed to leave pieces of my own ruin in her inbox. So, I would choose a page from *Once in the West* and recite it into her voicemail. She would call back, and I would let it ring so she could do the same. After months of our epistolary and elegiac messages, I interviewed Wiman and asked what art—meaning poetics or aesthetics or maybe just wonder—could ever do to assuage the psychic wounds we carry. He said, “I suppose I do believe that the greatest art consoles a wound that it creates, that art can give you the capacity to endure and respond to the pain it forces you to feel.”¹⁸ Art does not alleviate but tunes our attention. The aches, the “wounds,” are mundane and everyday. For Wiman, the

¹⁶ Christian Wiman, *Ambition and Survival: Becoming a Poet* (Port Townsend, WA: 2007), 57.

¹⁷ *Ibid.*

¹⁸ Christian Wiman, “The Rumpus Interview with Christian Wiman,” interview by Caitlin Mackenzie, *The Rumpus*, October 7, 2014. www.therumpus.net/2014/10/07/the-rumpus-interview-with-christian-wiman/

mundane can be beautiful and it can be overwhelming. It can be a mixtape or a song on repeat. It is both cut and survival, an intoxicating abyss but also the daily tread. A truce that is not peace.

Achy Affects is experimental, the watershed of four decades of thoughts, feelings, and memories into the cramped bind of these pages. Will it make sense as it leaves the body to inhabit the external world? I have no idea. It's a question. Perhaps this is a plea to be patient as I wander through feeling, knowledge, care, bodies, gender, failure, sensitivity, street advocacy, books of poetry, and as I stumble through ideas of what it might mean to think, feel, and be against the currents of capital. My years of harm reduction work, my liminal trans body, my travels through high alpine meadows but also through grief and shame, have me here. My writing makes and unmakes me. I don't yet know how to say this, how there is humanity in seeing one another as in process, how this might shelter us in a society where the good is defined in terms of profit rather than human need.¹⁹ I know the connections are there as opaque as they are; and that this is also ache, to simultaneously know and not know, to chase.

I'm also messy with my artifacts. They are beloved items—dusty trails, worn mixtapes, novels with busted bindings, scraps of poetry, old youtube clips, my body as I make and unmake it, the unpunctuated story of coming out and getting divorced and working exchange. This is intentional. We can do theory in everyday ways, in the everyday. Indeed, we do not require spectacles of wonder in order to think wildly. We do not need the bodies of queer and trans people, for example, in order to think and talk about being trans. And I adamantly, vehemently, with my whole being believe we need writing that is accessible and relatable.

Shame, shyness, nostalgia, and wonder—these are my achy affects. I trace them along the stories of my own life, writing auto-theoretically because I am not some objective outsider but

¹⁹ Lorde, *Sister Outsider*, 55.

part of a community, moving in and out of belonging. I take as fact that our lives are saturated by the pain of capital and we are exhausted by its expectations on our bodies. That while capital pins us to make us profitable, we are also always creatures of wonder. We imagine, create, retreat, and work. We love and break up and make terrible decisions, decisions that don't define us but do make us. So often we cast struggle as singular, and therefore surmountable, a mess to wipe clean. But my body betrays this narrative at every turn. My body is the site of ongoing uncertainty, in process and aching over that truth. And within this specific ache, I recognize those myths—that knowing all of ourselves makes a morality, that overcoming pain is compulsory and therefore possible, and that the good human is the legible human—I recognize that these myths fail us. When Audre Lorde says there are no new ideas, only new ways of making them felt, she is saying that *thought feels*, of ideas being lived, which means through the sensations of the skin into the quotidian blink of the day. “For there are no new ideas. There are only new ways of making them felt—of examining what those ideas feel like being lived on Sunday morning at 7 A.M., after brunch, during wild love, making war, giving birth, mourning our dead—while we suffer the old longings, battle the old warnings and fears of being silent and impotent and alone, while we taste new possibilities and strengths.”²⁰ We continue to suffer our past even as we sense the bloom of new desire within us, those wounds we take with us.

So I write about achy affects because they surface from exposure. These four feelings are embodied but external, personal but social. Just as they evade and give us ache in their abandon, they also provide shelter, help us grow, not necessarily up, but maybe horizontally or tactically.²¹ An achy hermeneutics enables us to pull knowledge from systems rather than exploit the individual body to construct social meaning. Because we shift our analytical focus away from the

²⁰ Ibid., 114.

²¹ See Kathryn Bond Stockton, *The Queer Child: Or Growing Sideways in the Twentieth Century* (Durham, NC: Duke University Press, 2009).

body, even as the body is *feeling*, and toward the social worlds that enact feeling, we resituate the scene of accountability. We invite interruption, stalling the freighted force of knowledge pressed into us by healthcare or carceral systems, by organized or social medias. We meet our imaginations with a bit more breathing space. My interest specifically in these achy affects is exactly this relationship to knowledge—how they muddle but also intensify our way of knowing ourselves through the world.

Much has been said about feelings, and for a very long time. One of feeling's earliest theorizers was Aristotle, who organized emotion through opposites. Anger opposes calm; love opposes hate.²² This heuristic haunts us still, primarily because language is made meaningful (or one of the dominant ways it is made meaningful is) through its converse associations. But this model of antithesis overexposes difference for the sake of legibility. Eric Shouse cogently distinguishes feeling, emotion, and affect in marking feeling as personal, emotion as the external display of feeling, and affect as non-conscious sensation or intensity.²³ While honoring these differences, I am interested in their moments of contact, how they converge to express (inadequately but no less importantly) the intellect and the body in relationship. That is, to feel is both intellectual and embodied. As in, poetry is how thought feels. Feelings inspire thinking; knowledge inspires moods. Less intrigued by a cause-and-effect relationship, I am more inspired by this ongoing collapse itself—and what we find within the mess of broken dichotomies. I write within feelings *and* affect to privilege the material, to center the life being lived within our questions, and to insist on that life as infinitely unknowable, yet no less and protected.

In this way, care describes our achy actions, how we respond to pain, how we recognize others despite the haze of difference, how we protect ourselves so we can continue the work of

²² Aristotle, *The Rhetoric of Aristotle, A Translation*, ed. John Edwin Sandys (Cambridge: The University Press, 1909).

²³ Eric Shouse, "Feeling, Emotion, Affect," *M/C Journal* 8, no. 6 (2005).

protecting one another, how we insulate desire even in the face of impossibility. Hil Malatino writes about an “ethics of care . . . that circulates among a beloved community that enables both political resistance and intracommunal survival and resilience. It moves us beyond (sometimes troublingly neoliberal) understandings of ‘self-care’ and into a terrain shaped by the recognition that caring, in the context of structural marginalization and systemic violence, must always be collective.”²⁴ I lay similar stakes. To care is to give attention; and to be attentive is to be deeply attuned to our affective currents and the communities within which those currents move. It is what Hil Malatino calls maintenance work so that trans and queer people “can get about the work of living.”²⁵ What could be more important than opening up ways for one another to get about the work of living? With felt attention, there’s no authentic, contained goal in sight, just the motions of the body existing and having that be enough and worthy of everything.

Like so many young, shy butches before me, I read *Stone Butch Blues* by Leslie Feinberg and saw myself in language, in literature, for the first time. Notoriously difficult to track down, I found this out-of-print lescult classic sitting on a shelf at Smith Family used bookstore in Eugene. I had just come out and was in my first relationship after the divorce. That to say, I held all my feelings just under the skin. *Stone Butch Blues* is a fictional yet autobiographical narrative following Jess Goldberg, a working-class, gender non-conforming, queer butch trying to make their way in the world. They suffer police violence, work the factory line, find community, unionize, pursue long-term relationships, start taking T, have top surgery, stop taking T, and experience heartache.

At first, so attuned to Jess’ familiar feelings of shyness, shame, and desire, I overlook the

²⁴ Hil Malatino, “Tough Breaks: Trans Rage and the Cultivation of Resilience,” *Hypatia* 34, no. 1 (2019): 131.

²⁵ Malatino, *Trans Care*, 41.

quandary of gender that moves the narrative along. Only after I finish the book do I then begin to read discourse around it too, how Jess comes to *symbolize things*. I want to use a common reading of *Stone Butch Blues* to think about this allegory problem, and to show how we might resist demands that gender be a fundamental part of the self, even as we feel it as a fundamental part of ourselves, to instead disassemble such singular, teleological constructions of the body, not just for the sake of theory but for our lived lives. When Jay Prosser writes that “the point of every narrative”²⁶ is to return home, he summons Odysseus to endorse narrative as best suited for describing the feeling and gestures of transition. He goes on to clarify home as mythic, a place we make up or create, a place unreachable without “sweet imagination.”²⁷ Home is not, therefore, a place of return or domesticity, but rather a sense of secure belonging. Prosser uses Feinberg’s *Stone Butch Blues* to analyze the trajectories of transition when home is a moving target. And while he takes up the affect of shame to think through Feinberg’s stone butch, he stabilizes the goal of the body as getting home, wherever that might be.

For many trans people, belonging and security are not just embodied desires, but methods of survival. I am not interested in pulling out epistemologies of non-binary embodiment at the cost of others. This is not a question of what opaque or illegible genderedness can reveal to us about being gendered beings. We are all fighting for our genders. We all have a right to our gender. Rather, I want to work the question of genre that Prosser raises to think about why and where we lay our stakes, what we call urgent and what we spotlight.

Jess, the stone butch in *Stone Butch*, is often read as a contradiction because they begin to transition with testosterone and top surgery to only then interrupt their transition by halting hormone therapy. The question of *why* is most urgent for Prosser. It is this urgency I want to

²⁶ Jay Prosser, *Second Skins: The Body Narratives of Transsexuality* (New York: Columbia University Press, 1998), 205.

²⁷ *Ibid.*

challenge, because we are meant to take it as compulsory. This urgency exists because Jess disrupts the narrative linearity we've come to expect of transition; instead, they delay *telos* for feeling, revealing to us what ache is central to being stone. Is it gender? Trauma? Surveillance? Almost always the figure of a stone butch—the top who refuses to be touched—is interpolated through dysphoria and sexual assault. They, the stone butch, are held back by shame and thus unable to arrive at full sexual, social connection with another. Prosser writes, “Shame is a profound grappling with the self’s location in the world—the feeling of being out of place, of not being at home in a given situation, combined with the desire to be home.”²⁸ Shame must then be overcome and home sought out. One must find and feel congruence at all costs. This aspirational model of thinking is so compulsory we forget to stop and consider whether it is even possible, the harm it may inflict, and why it is so mandated. But the stone butch, contrary to their title, is deeply feeling. Speaking out of my own experience, I can confidently say that feelings *make* the stone butch. While critics such as Prosser attribute stoniness to trauma, the resistance or refusal of vulnerability, and while this might be true in some cases or at some level, we should not neglect how the pain of living without privacy, of life overexposed, creates our stone lives. Jess explains, “I clamped my emotions like a tourniquet. I had no privacy here, no space anywhere in the world where it was safe to grieve.”²⁹ In literal terms, the clamped tourniquet cuts off one’s lifeblood in order to grant one’s survival. Grief, however, still storms the body.

This common reading of *Stone Butch Blues* tracks the trans masc body to the point where we shed Jess for the meaning and metaphors Jess carries. The urgency of Prosser’s why—why does Jess stop HRT—presumes we should know ourselves before we even feel ourselves. But sometimes we only gain deeper literacies of our own bodies, drives, and desires by plunging into

²⁸ Ibid., 179.

²⁹ Leslie Feinberg, *Stone Butch Blues* (Los Angeles: Alyson Books, 1993), 157.

the unknown and recalibrating along the way. If we read Jess' decision to stop HRT as *reversal* rather than revision, we reinscribe linearity and aspiration to the body. What if instead of asking *why* we asked *how*, how does Jess navigate the brutal, gendering world? My turn toward affect—on behalf of Jess and my own self—is to bring us back to materiality, to take up the sensations of the skin and remind us that all of this is deeply felt.

While many trans people experience uneasy, incongruent, or achy relationships to their bodies, this is not the whole of it. Emma Heaney describes the “narrative of entrapment” as “the assumption that trans women’s very existence *means something* outside itself, something about the gender of a putatively cis general subject, imposes a representational disjuncture between trans self-knowledge and trans *meaning*.”³⁰ The narrative of entrapment produces figures and allegories rather than agency and authors. It’s what we see happening with Jess. Heaney is also pressing back against cured states, aspirational templates. “The diagnostic insistence that trans people are uniquely defined by alienation from the body denies the challenge to cis understanding of sex that is posed by trans people who claim the right to determine the sexed and gendered meanings of their own bodies, with or without medical services.”³¹ Because trans folks are often perceived as alienated from or by our bodies, we are coerced into aspirational narratives and consummate rhetorics. We are called on to produce ourselves, to make ourselves readable, to explain ourselves, to overcome the real and imagined pain of embodiment for an authentic and authenticated destination that is the body. Under this mythos, we are trapped by entrapment itself. Indeed, undoing the knot of this kind of thought is its own strain. There is comfort in security and angst in what’s uncertain. Even as we dislocate failure from success to nuance a

³⁰ Emma Heaney, *The New Woman: Literary Modernism, Queer Theory, and the Transfeminine Allegory* (Evanston, IL: Northwestern University Press, 2017), 6.

³¹ *Ibid.*, 15.

more liminal and revised sense of self, we might find ourselves alone in such a difficult project.

Writer, artist, and user of drugs, I. Thaca, has already said as much:

I do not buy into the idea that eventually I will hit some “bottom.” Using does not have to entail despair, misery, and heartache. . . . I’m so alone in believing that [using] is a choice that can be consistent with a happy and successful life. That is the hardest part about being a user: not internalizing the belief that I am a piece of shit and trying to live a life of satisfaction and dignity that everyone tells me is impossible.³²

Epistemological opposites not only limit us to fixed movement—say between estranged or home, dysphoric or euphoric, clean or using—but this binaried relay makes knowledge commodifiable. For example, capital exploits the feeling of euphoria to market it as outcome, as the desired state and cured condition to dysphoria. But this neglects relapse, returns, and revisions. It neglects the ongoing ache that is my trans body moving through joy and grief simultaneously. It neglects the significance of relapse in recovery. This entrenched way of thinking about our bodies promotes narrow yet dominant narratives of the self. Colleen Derkatch writes, “what it means in contemporary Western culture to be ‘well’ is predicated on the entanglement of seemingly opposed logics that together create an essentially closed rhetorical system where wellness is always a moving target.”³³ If health, wellness, euphoria, fitness, happiness, if these all exist as ideals sinking further into an impossible vanishing point, then we are forever failing. But what might happen if we readjust our focus, away from vanishing points to attend to process? I’m joining Malatino to issue against what he calls “teleological modes of gendered becoming.”³⁴ Or just teleological modes of becoming. These modes posit a promised land that is the body itself. But in so doing overexpose and exploit that body.

“Be patient toward all that is unsolved in your heart and try to love the questions

³² I. Thaca, “One Junky’s Odyssey,” *Harm Reduction Communication* 5 (Fall 1997): 30.

³³ Colleen Derkatch, “The Self-Generating Language of Wellness and Natural Health,” *Rhetoric of Health and Medicine* 1, nos. 1–2 (2018): 134.

³⁴ Hil Malatino, *Queer Embodiment: Monstrosity, Medical Violence, and Intersex Experience* (Lincoln, NE: University of Nebraska Press, 2019), 8.

themselves.” When Rilke goes on to advise the poet to live the questions, to live everything, he also offers this consolation: “perhaps you will then gradually, without noticing it, live along some distant day into the answer.”³⁵ Rilke doesn’t guarantee any outcomes, intimating the inherent faith this project requires, but he offers the distant day as a reminder of more. Perhaps that’s key, the answer is (frustratingly, beautifully) non-aspirational. The answer is the non-answer. Rilke urges his poet to *love* the unresolved, which implies a gentle presence with uncertainty, a relinquishment to the vulnerable moment.

Why does the significance of the singular body loom so brightly in the social imaginary, in how we do theory or make policy? There are many ways to answer this question. One might be that our vulnerabilities have been curated over centuries of exploitation; it is our response to a medical regime that made health compulsory in order to capitulate to capitalism, wherein the body equals profit. Under the (ongoing) practice of imperialism, the history of healthcare in the U.S. is steeped in logics of “discovery,” often at the cost of non-consenting patients. Throughout these chapters, I will describe the relationship between capital and U.S. wellness culture, broadly conceived and articulated, but I’ll start here with the foundations in U.S. healthcare specifically, looking at the ways capital and medicine make singular bodies the site of knowledge extraction, out of which we get the necessitated telos, the confusion around Jess’ HRT reversal, the demands for recovery, and much more.

In defining capital as saturation, in that it saturates our social worlds to stir profits through any means possible, we include the means of our bodies too. This is the violent and extant legacy of the U.S., how it established itself as a world power and how it continues to drive

³⁵ Rilke, *Letters to a Young Poet*, 27.

our lives into profitable ends. Lauren Berlant called this slow death,³⁶ what it feels like to be rewarded for dreaming the good life, but also how this ephemeral feeling drops quickly into a mundane, everyday ache. We ache because the good life is a vanishing point. The ache is always there—it’s what we miss out on, the possibilities that slip on by, our small everyday failures. We live in (endure) the feeling that we must always do and be better. There is a reason why this is so.

I want to start by giving a brief genealogy of this relationship between capital and the singular body, nurtured as it is by the idea of optimization, to then move toward delinking care from compulsory health, and to finally offer methods that give space to the body altogether. In the end, I hope to write into these new methods to avoid remarginalizing the marginalized, a common fallout when we discuss vulnerability and embodiment, even as our good intentions are rooted in care. Our leave-no-trace poetics and harm reductionist methodologies, our imperfect imprints, are calls for care we return to and relearn. Care is felt attention, but also careful, deliberate, sensitive, tending, even cautious. Care listens but also leads, collecting around vulnerability to strengthen and empower. And yet, healthcare often severs these descriptions of care from its spaces and methods.

“It was the taking charge of life,” writes Michel Foucault famously, “that gave power access even to the body.”³⁷ Foucault names this political intervention *biopower*, an “indispensable element in the development of capitalism”³⁸ that commissions and justifies government or institutional control over our bodies, urging them into labor, urging them into profit, and calling this normal. “A normalizing society is the historical outcome of a technology

³⁶ Berlant, “Slow Death,” 780.

³⁷ Foucault, *The History of Sexuality: Volume 1, An Introduction*, trans. Robert Hurley. New York: Vintage Books, 1978), 143.

³⁸ *Ibid.*, 141.

of power centered on life,” writes Foucault.³⁹ Power operates taxonomically in the normalizing society by imposing category on the broader social imaginary; the body is measured and appraised, qualified and hierarchized.⁴⁰

Foucault also argued that one’s behavior and body became fixed identities through cultural shifts in imagination: in the nineteenth and twentieth centuries, we became our behaviors.⁴¹ Meaning, categories were created in order to manage and regulate these behaviors. Gay sex, for example, was no longer registered ephemerally, as a temporal act steeped in feeling, but was compounded into identity: sex became homosexuality. Foucault argues that these moves produce cultures of policing founded in binaried regulations—“normal” authorizes deviance, “healthy” informs pathology. While these moves occurred within the walls of the clinic, where the body exudes knowledge (is coerced into doing so), they quickly found circulation in everyday notions of being and becoming.

Michael Hardt and Antonio Negri extend Foucault’s conceptualization of biopower to argue that these everyday identity notions are driven by capitalism. According to Hardt and Negri, disciplinary systems were once performed through social institutions, such as school, religion, healthcare, and law, generating sanctioned ways of thinking and knowing the body, and likewise, scripting deviance from convention.⁴² However, as national markets transformed into globalized systems of trade and relationships, as capitalism saturated Western life, power moved from the public institution to the private individual, “distributed throughout the brains and bodies of the citizens.”⁴³ This to say, social life became regulated from its interior around the same time

³⁹ Ibid., 144.

⁴⁰ Ibid.

⁴¹ Foucault, *The History of Sexuality*.

⁴² Michael Hardt and Antonio Negri, “Biopolitical Production,” in *Biopolitics: A Reader*, eds. Timothy Campbell and Adam Sitze (Durham, NC: Duke University Press, 2013), 154.

⁴³ Ibid.

our behaviors and bodies became contained identifiers. “The behaviors of social integration and exclusion proper to rule are thus increasingly interiorized within the subjects themselves.”⁴⁴

According to Hardt and Negri, capital, in diffuse but no less powerful ways, coerces us into self-governance, that it is our responsibility to be and become healthy. It is us who fails to make it so. This optics of autonomy obliges us toward desired outcomes, toward healthy, (re)productive futures, and organizes otherness into categories of sickness, failure, or dissidence.

When knowledge is located within the individual body (when pathology is located within the individual body) rather than within complex systems of power, we risk overexposing singular behavior or injury, forcing a world of meaning onto the shoulders of one person. Health analytics, shored up by capital, moralize self-improvement through the everyday language of wellness: natural child birth, clean eating, normal BMI. We find ourselves acclimated to language that scripts authentic (or natural) classifications of being. “Healthy,” “productive,” and “authentic” become conflated descriptions of selfhood, established by a healthcare system that—historically but also as a site of knowledge production—is grounded in eugenics.

The eugenic origins of U.S. healthcare still animate our visions of health and the body today. Taxonomy as the principle heuristic, foundations of care in the U.S. are based on category and legibility, the colonial drive to own and make known, to script the flesh as identity. The better body, then, is a rhetorical and material convention based in historical eugenics but sustained through liberal notions of wellness. If we can always be healthier then we are incited toward its interminable creation. But in reality, we find ourselves in the daily tread, a liminal space wherein our best self is an impossible acquisition and our proximity to it both buoys and deflates us. Jasbir Puar explains that our bodies are catalogued “in relation to their success or failure in terms of health, wealth, progressive productivity, upward mobility, enhanced

⁴⁴ Ibid.

capacity.”⁴⁵ As big pharma expands its range of curatives it also expands its range of illness in order to market its products. The more that can be deemed ill, the more that can be made better. The more that can be optimized, the more that can be sold.

Health discourse in our culture replicates this tired practice of embedding responsibility within the individual body. This stems from writing a body as deviant or deviating and seeking to control that excess. It is biopolitical. But it is also rhetorical. Under the auspices of the medical-therapeutic industry and scientific objectivity that claims neutrality and positivism, paternal decisions are enacted across bodies for the sake of community “betterment.” Nikolas Rose has much to say on this, naming biopolitics an ethics in which health is not just made compulsory, but codified through rhetoric.⁴⁶ Those who deviate, those who do not protect productive futures, are written off as irresponsible citizens. That label, that *language*, (mobilized through varying affective registers such as shame or anxiety) allows for all kinds of governance, intervention, and regulation.

As evidence of such, Siobhan Somerville charts eugenic rhetoric through early sexology to explain how important it became (primarily for governing bodies) that we think in terms of these contained identities and purified futures⁴⁷ to reify a white, straight ideal. “The notions of heterosexuality and homosexuality emerged in the United States through (and not merely parallel to) a discourse saturated with assumptions about the racialization of bodies.”⁴⁸ By focusing specifically on discourse, Somerville brings attention to the recursivity of both bodies and languages, that “the particular meanings of socially constructed identities gain currency through

⁴⁵ Jasbir Puar, *Right to Maim: Debility, Capacity, Disability* (Durham, NC: Duke University Press, 2017), 16.

⁴⁶ Nikolas Rose, *The Politics of Life Itself: Biomedicine, Power, and Subjectivity in the Twenty-First Century* (Princeton, NJ: Princeton University Press, 2007).

⁴⁷ Siobhan B. Somerville, *Queering the Color Line: Race and the Invention of Homosexuality in American Culture* (Durham, NC: Duke University Press, 2000), 30. See also Kyla Schuller, *The Biopolitics of Feeling: Race, Sex, and Science in the Nineteenth Century* (Durham, NC: Duke University Press, 2017).

⁴⁸ Somerville, *Queering the Color Line*, 4.

repetition, resistance, and appropriation.”⁴⁹ This recursion, as it repeats itself and repeats difference, allocates embodiment on a spectrum of legibility. The subject, then, reappears through differentiation. What makes us different, makes us. When Dean Spade wants top surgery, his only option requires, of course, medical and therapeutic intervention. He must first secure low-cost counseling, wherein he is forced to provide normalized (aspirational) accounts of his trans experience in order to be approved for a double mastectomy. As he explains, he must want to “fully” transition before he can start any “alteration.”⁵⁰ While “fully” implies a teleological demarcation, an end goal, “alteration” implies removal from an original. By understanding gender transition and expression under the aegis of the medical institution, Spade argues, we come to view gender as disorder in need of a coherent fix. Situating his experience within Foucault’s notion of the will to knowledge, as a lens through which to analyze the medical-therapeutic industry’s regulation of and treatments for trans patients, especially as it has historically sought to reinforce normalized gender categories, Spade draws on his own story to illuminate the material implications of trying to navigate a clinic that will both help and harm him.

But he resists and through his resistance, Spade demonstrates the need for language unconsumed with category. He scrutinizes the passing imperative to analyze how authority is given, as default, to the medical-therapeutic community, which only serves to reinforce false concepts such as “real” and “legitimate.” Spade’s storytelling exposes the prerogatives of successful transition as defined by a binary, questioning what it may mean to allow people agency over their own gender descriptions.

What does it mean to be trans? What does it mean to be queer? Or, as C. Riley Snorton

⁴⁹ Ibid., 14.

⁵⁰ Dean Spade, “Mutilating Gender,” *The Transgender Studies Reader: Volume 1*, eds. Susan Stryker and Stephen Whittle (New York: Routledge, 2006), 315.

asks, “What does it mean to have a body that has been made into a grammar for whole worlds of meaning?”⁵¹ Snorton argues that origins of U.S. healthcare emerge from the imperialist desire to make legible, to make the flesh an identity, and to contain and civilize what is in excess.⁵² He traces the ways gender and race have been printed on and through one another within U.S. history, thereby extending Somerville’s analysis to argue that, “One might consider that race is a history of theory that functions to express what is un/thinkable across complex temporalities. In each formulation, history becomes less a program for examining change over time and more an examination of disruptions in linear time.”⁵³ The linear narrative is the legible narrative, and therefore comes to dominant our understanding of health—from rock bottoms to years sober, from sick to cure, from closets to parades. Health and selfhood converge. Those who deviate, *those who are constructed as deviating*, are organized into welfare, into categories of risk, and not trusted to determine their own futures (because those futures may not produce labor).

“Risk,” as well as “crisis” and “epidemic,” exemplify the kind of rhetoric used to fortify this linear way of thinking about our bodies. Explaining new health emergencies, including opioid use, novel viruses, even childhood obesity, this language relies on those aspirational narratives described by Heaney to signal an unsteady future and justify intervention (marked as prevention) in the present. “Risk” in particular organizes us through concepts of time (what might occur) and embodiment (what might occur on or to the flesh). Nikolas Rose writes, “Risk here denotes a family of ways of thinking and acting, involving calculations about probable futures in the present followed by interventions into the present in order to control that potential

⁵¹ C. Riley Snorton, *Black on Both Sides: A Racial History of Trans Identity* (Minneapolis: University of Minnesota Press, 2017), 53.

⁵² *Ibid.*, 11.

⁵³ *Ibid.*, 8.

future.”⁵⁴ But future casting along the lines of bodies—that some are risky or at risk—makes those bodies the site of essential and extractable meaning as well as intrusive intervention methods. Rose elucidates this tight imbrication between rhetoric and knowledge, that language not only reports on the body but, under the aegis of the medical-therapeutic industry, determines the limits of the body. “Risk groups” or “risky behavior,” “risk factors” or “risk analysis”—risk is an efficacious method toward identifying, calculating, and cataloging human health.

Similarly, under the umbrella of risk rhetorics we find its kin: “crisis” and “epidemic.” While “risk” facilitates the taxonomical organization of healthcare, “crisis”—as a rhetorical strategy—necessitates intervention through urgency and alarm. Signaling a risk that comes too close and threatens one’s healthy standing, iterations of “crisis” maintain systems of capital, labor, and structural oppression through time. Jih-Fei Cheng et al. explain, “By definition, crisis is exception. A crisis necessarily involves a diagnosis: in the sharp decline of individual and/or group health, presumably in a singular time, and perhaps a place or places. It is occasion for judgment, and opportunity to render power. Yet a crisis is not meant to last.”⁵⁵ “Crisis” calls us to protect the future, the word invoking and evoking, through its temporal signifier (inherently, the word “crisis” indicates a nowness that is also terminal), our response to an event. For example, the word “crisis” is doing a lot of work to manage public response to systemic events, such as AIDS in the 80s and 90s, the opioid epidemic, and even COVID now.

While a crisis event also shores up risk analyses to justify acts of surveillance, intervention methods are enacted under the guise of elite knowledge. Who are we to argue with experts? Because we see a crisis as acute, as something that rose up in a flash, as exigent and therefore impending, it is therefore much more difficult to see it as the natural effect of systemic

⁵⁴ Nikolas Rose, “The Politics of Life Itself,” *Theory, Culture, & Society* 18, no. 6 (2001): 7.

⁵⁵ Jih-Fei Cheng, Alexandra Juhasz, and Nishant Shahani, eds., *AIDS and the Distribution of Crises* (Durham, NC: Duke University Press, 2020), 1.

dysfunction. On top of this, it has us fixated on an end. By focusing on the temporal interferences of crisis, how its “feverishness” distracts us “from institutional neglect and false narratives of progress,”⁵⁶ Cheng et al. encourage us to also demote linearity and reject the body as the location of conjecture. It’s an adjustment of focus, from the singular body toward systems of intervention, and it gives us our agency and voice, even as an expert shares our space.

Crisis rhetoric forges intentional political paths through our collective social imaginary. While pharmaceutical companies have debilitated our bodies for profits and when the body is always on the precipice of illness, language emerges across medical, political, and social discourse as hermeneutic, a way of interpreting the body. “Crisis” and “risk” mobilize, inciting panic and igniting movement. The delineation of a healthy society as active and productive (and, of course, reproductive) is facilitated through logics of minority—“at-risk” populations, vulnerable communities, marginalized peoples. The emphasis, then, is always the individual, not the system. Early eugenics told us that the singular body is a source of knowledge and profit. We are in a struggle to break down and complicate this entrenched line of thought. Liz Montegary even suggests we have turned the lens inward, that self-surveillance became normalized and naturalized, especially in effort to “privatize the labor of optimizing reproductive futures while obscuring the political, economic, and ecological forces constituting population health.”⁵⁷ There can be deep pain in this, in holding ourselves accountable to others’ ideals and expectations. We’re never quite enough.

Foucault, Hardt and Negri, and Rose’s ideas on biopower and its rhetorical economies culminate in Giorgio Agamben definition of “bare life,” a condition of exclusion and detainment in which we are ostracized from political and communal relationships (that which we might say

⁵⁶ Ibid., 2.

⁵⁷ Liz Montegary, “Health Families, Secure Bodies,” *Gay and Lesbian Quarterly* 26, no. 1 (2020): 144.

makes us feel most human). Agamben's logics of "bare," while meant to expose the violence enacted against others when we create categories and stratifications of life, replicates a binaried heuristic in which margins are always set opposite to a powerful center.⁵⁸ This heuristic helpfully illuminates how power moves through and dominates vulnerable communities, but it also circumscribes a center that retains its hegemonic status. "Constructs like the *center* and *periphery* reveal that tendency to want to make the world less complex by organizing it according to one principle, to fix it through an idea, which is really an ideal."⁵⁹ This all to say, traditional conceits of biopower or biopolitics, while immensely helpful, often fall into the simplistic notion that some have power and others do not. We end up re-marginalizing marginality when focused so solely on telos, on fix, when our language on human life and vulnerability lacks depth, and in a desire for legibility or reconciliation with otherness, resists the complexity that makes our communities vibrant and full of possibility.

"What seems to have vanished from this description is the life in bare life," writes Alexander Weheliye, in that it "leaves no room for alternate forms of life that elude the law's violent embrace."⁶⁰ Elaborating Gilles Deleuze and Félix Guattari's definition of assemblage—a multiplicity of which the multiples cannot always be known or named⁶¹—Weheliye instead evinces our world as a vibrating matrix of social, capital, and political enmeshment. Most importantly, this enmeshed matrix means we are, always and in some way, out of our depths; it is impossible to understand and delineate all the links, all the patterns and synapses that surge between social issues, political spaces. As much as we might yearn for collated data points and

⁵⁸ See Giorgio Agamben, "The Politicization of Life," in *Biopolitics: A Reader*, eds. Timothy Campbell and Adam Sitze (Durham, NC: Duke University Press, 2013), 145–51. See also Giorgio Agamben, "Biopolitics and the Rights of Man," in *Biopolitics: A Reader*, eds. Timothy Campbell and Adam Sitze (Durham, NC: Duke University Press, 2013), 152–60.

⁵⁹ Christian, "The Race for Theory," 75, emphasis original.

⁶⁰ Alexander G. Weheliye, *Habeas Viscus: Racializing Assemblages, Biopolitics, and Black Feminist Theories of the Human* (Durham, NC: Duke University Press, 2013), 131.

⁶¹ Gilles Deleuze and Félix Guattari, *A Thousand Plateaus* (Minneapolis: University of Minnesota Press, 1987), 4.

compartmentalized case studies, the reality is much more complex. Writing our way through this reality is a whole other challenge, but one we might take up regardless of the odds of failure. Because we join Weheliye to restore humanity to the human, by insisting on life shaped beyond struggle, “also by revelry, possibility, the wildness”⁶² as Kevin Quashie has said.

While conventional ideas of being marginalized are organized against a center, it is possible to consider broader landscapes, deeper descriptive language, multiplicities of meaning that not only put the life back in bare life, but make that life resistant to category and classification. Rather than exhort meaning from people and their bodies, Weheliye calls for insurgent refusals of “the institutions that yoke the flesh to political violence in the modus of deviance.”⁶³ We might be dictated to examine our own bodies to mark its successes and failures, but what mostly emerges are feelings: anxiety, shame, caution, pride, eagerness, anger, fear, vulnerability.

Here’s where affect can help. With its rejection of “knowing, naming, and thus stabilizing” identity, Jasbir Puar ascribes to affect an anti-imperialist epistemology that protects the future from the hands of capital. “Opening up to the fantastical wonders of futurity, therefore, is the most powerful of political and critical strategies,” she writes, “whether it is through assemblage or something as yet unknown, perhaps even forever unknowable.”⁶⁴ As allies of the unknown, we approach the body—the site of ongoing biopolitical invasion—without want. We seek not to classify the body, nor locate it on a schematics of prescribed health and determined futures, but instead practice dailyness, offer resources without debt, forgo opinion, and relinquish our attraction to expertise and cred. And this is only part of the move away from a maxed-out

⁶² Kevin Quashie, *The Sovereignty of Quiet: Beyond Resistance in Black Culture* (New Brunswick, NJ: Rutgers University Press, 2012), 45.

⁶³ Weheliye, *Habeas Viscus*, 130.

⁶⁴ Jasbir Puar, *Terrorist Assemblages: Homonationalism in Queer Times* (Durham, NC: Duke University Press, 2017), 225.

method.

Even as we resist an industry's hands on our bodies we also rely upon their networks of care. We need care. We need, at times, the kind of care that optimizes, makes better, cures. Optimization offers very real sources of survival. So if we're not destroying the clinic and we cannot escape capital, what then are we doing? Well, we're attempting to describe the world without holding it hostage to singular descriptions. We're attempting to honor the question the body finds itself in. The language we use matters. So how might we move from healthcare as elite and objective to a leave-no-trace, harm reduction model?

Applications of affect not only illuminate new possibilities of desiring and un/knowing, but a reckoning with feeling inspires more dynamic expressions of bodies and selves. Our embodied beings move through knowledges, distorting meaning *as* they are distorted by it. In this way, we are still agents in world making even as the world makes us. Affect also nurtures our dreaming, is our most genuine path to knowledge as Lorde said. It gives space for us to linger in alternative descriptions of health, embodiment, and the pain of capitalism. It enables us to pull knowledge from networks and systems, exposing the places power hides, rather than exploit the individual body to construct social meaning. Most importantly, my focus on affect over argument grants me permission to dwell in a truce that is not peace. I am allowed my failures, my fears standing at the rim of the abyss, my freedom to write into cramped corners.

This work—these pages, my achy days of putting together a life, my political and social mores—means taking on multiples, moving through mixed genres while focused on a central intention: to divest from the body as the producer of social meaning. To divest from ways of knowing that replenish false opposites: authentic or inauthentic, healthy or pathological. As a rhetoric student, I've come to define that nebulous word as meaning the ways language forms

and informs our shared and singular imaginations around a cultural issue. Affect is how it feels to live within that issue. So, if we're thinking through embodiment (our feelings, our senses, our sensitivities), but also what we know about those feelings, we will find ourselves in translation. Because it is language that makes the map, that follows the trigger of feeling through the body, through our ways of knowing, and out into the world. To describe the world is to become irreparably infatuated with language, despite the many ways it lets us down.

Positioned at the intersections of health rhetoric, trans and affect studies, and theories of epistemology, *Achy Affects: Feeling Our Way into Deeper Descriptions of Selfhood* explores the ways capitalist logics limn our bodies as producers of meaning, profit, and futures. Organized into four feelings (chapters)—shame, shyness, nostalgia, and wonder—I begin with what contains, shame, and move toward that which swells opens: wonder. So much work has already been done on shame and stigma,⁶⁵ across disciplines and with varying intentions. I'm not hoping to replicate that work. I'm not trying to redeem or criticize shame, to argue for whether it has useful or subversive possibilities. Instead, in the first chapter, titled, "The Spectacle of Shame: Resisting Cure in Crisis," I look at what it does, and very specifically at the site of the body (including my body), how it contains and represses. For me, shame represses physical possibilities—both the shape my body takes and the desire it follows. But shame also, no less significantly, represses the epistemological, my own literacy of myself and my imaginative possibilities.

This chapter follows my work doing needle exchange in Oregon, while also tracing

⁶⁵ See Sara Ahmed, *The Cultural Politics of Emotion* (New York: Routledge, 2015); Eve Kosofsky Sedgwick, *Touching Feeling: Affect, Pedagogy, Performativity* (Durham, NC: Duke University Press, 2003); Erving Goffman, *Stigma: Notes on the Management of Spoiled Identity* (New York: Touchstone, 1986); and Deborah Gould, *Moving Politics: Emotion and ACT UP's Fight Against AIDS* (Chicago: University of Chicago Press, 2009).

current research on shame in clinical and community spaces. I look at shame as a force, at how it is used to sustain dominant narratives of health and direct people into preordained treatments. But this chapter is also about my own shame. By braiding my story into the way shame has been politically mobilized to control the narrative on drugs (and those who use them), I do not mean to compare experiences. While I have personal connections with addiction, it is not my story to tell. Instead, I hope to show what I have learned about shame through myself and what I am continuing to learn from others at the scene of needle exchange and non-profit outreach, how shame constrains us to prevailing rhetorics of success and achievement, and how it has been politically mobilized to control and racialize the narrative on drug use. I do not enter these spaces to extract data; but rather, I try to always put care first and welcome what is unknown, refusing to draft arguments when descriptive opacity better serves the moment and the person. And I imagine my friends and colleagues—the outreach teams, exchange clients, my queer family—as experts. They are their own scholars, not objects of study.

So while shame is epistemological containment, shyness is possibility. Often, shame and shyness are conflated.⁶⁶ But I want to show in my second chapter, titled “Painfully Shy: Trans Feeling and Quiet Refusals,” how this very conflation is why we need to do affect studies when we talk about the body: feelings may look similar, but they do wildly different things. With shyness, I will press for its usefulness in surviving capital—in moments and murmurs, not as overthrow.

Just as the addicted subject must be en route to recovery—a trope of overcoming that reinscribes the American Dream through embodiment—so are trans folks coerced into this same rhetorical paradigm. The trans subject is situated on a path toward the cured state; but rather than

⁶⁶ For example, Eve Sedgwick argues that for those whose most accessible affect is shame, they are often “the ones called (a related word) shy.” Sedgwick, *Touching Feeling*, 63.

sobriety serving as the telos, it's the fully gendered self. In Chapter 2, I use shyness to challenge the way trans folks are compelled into aspirational narratives, and how these narratives operate according to the logics of capital, that we must be on our way to our best selves. Harm reduction has something to say here—that gendered becoming has no destination. In this way, I am interested in shyness as an affective hermeneutic, in what it can teach us—not about the self or shy person necessarily—but about navigating the demands of a capitalist ecosystem, especially as those demands look like calls for self optimization, mastery, sociality, and judgment. As a sensitive practice of attention that resists the cacophony of capital, shyness hushes the spectacle made around our bodies and allows us to be in the process of ourselves.

I then in Chapter 3, titled “Nostalgic Potential: The Mixtape is an Archive, and the Archive is a Feeling Thing,” move deeper into the interiors to explore nostalgia as a space of reclamation and agency. Nostalgia was first defined as homesickness in the seventeenth century, and was then later reframed as mental illness, as a melancholic attachment to a past (or lost) time. Today, we are stymied in these old tropes and intimidated by political conservatism's current appropriation of this affect. But I believe there are other possibilities in this feeling, even an urgency to reclaiming nostalgia, that we should be serious about extending its potentialities beyond the realm of psychology and politics, to analyze its potential as a resource for survival and identity. I press beyond traditional conceits of nostalgia to argue that we go back not to (or not only to) retrieve a lost object or return to a lost time, but for the relief in *returning*. I ask, what if nostalgia is not the desire to go back and stay, but to revisit and revel, to re/enact some form of present change? In that way, this achy affect is not reinstating what's lost, but the feeling of moving back and what that feeling opens, and specifically how it deepens our own sense of agency, literacy, and possibility.

I braid this chapter with my own narrative of trans becoming, how in order to move into future selves, I needed to go back. I frame this through an analysis of my favorite music as a teenager, and how knowledge of the self moves sideways, backwards, and doubles over itself. Finally, I hope to show how this deeply interior feeling can swell into something powerful. By being empowered by nostalgia, to speak on behalf of a younger self or to gain narrative authority over a past that claimed us, we learn more about ourselves in our returns, by exploring our own archives to study the past self and retroactively recognize and give voice. This locates and nurtures our agency, and we feel more is possible for ourselves. It is this feeling of agency I privilege, beginning with an analysis of nostalgia and then delving deeper in with the final chapter.

Chapter 4, titled “Wonder Drug: Needle Exchange as a Site of Care, Connection, and Renewal,” is grounded in my work at Prevention Point Pittsburgh as I assisted with their needle exchange during the final year of my doctoral program. My aim in this chapter specifically is to rethink precarity within the vibrant space of needle exchange by analyzing *wonder* as an overlooked affect. Because, as we will see in the first chapter, mainstream knowledge on the U.S. opioid epidemic often employs rhetorics of spectacle, insists on compulsory recovery, and reinforces the racialization of addiction, thereby reducing the participant to a marginalized subject marked only by pain. Instead, as inspired by Kevin Quashie, who writes, “consciousness is not only shaped by struggle but also by revelry, possibility, the wildness of the inner life,” I turn to the political potentiality of wonder as the feeling of world-making, being in community, being seen, and having agency. In a non-traditional sense, this final chapter is a methods chapter in that I issue a call to embrace what we do not know, for centering complexity as the object of analysis, rather than subjects or participants.

In this chapter I labor toward re-narrating the scene of precarity, writing through my own sense of disorientation and estrangement as I try to bridge the affective distance between a graduate program and outreach. Rather than “study” this program, Prevention Point, in a traditional sense of the word, I attend to the ways wonder nourishes the relationship between our physical bodies and embodied literacy. That is, what we *feel* and what we *know about that feeling*, and how this brings us collectively together in unmastered moments of care. If wonder is horizontal, unconsumed with contained meanings and fixed ends, and capitalism is fully consumed with acquisition, domination, and profit, then wonder and capital are not only in opposition, but they forge discrete epistemological paths.

Finally, I bring *Achy Affects* into a non-teleological close by exploring wonder so that we might put life back into bare life. Because even as my body collates shame, even as I hurt, even as I find quiet shelter under the rainfly, I am also stunned with wonder. It is the stun and wonder that makes this life survivable, even desirable. My conclusion, in honoring the whole of the project, thus makes a return back to ache, and how we might attenuate the tired binaries that hold our imaginations hostage: we either hurt or we don't; we are oppressed or we oppress; we have agency or it is withheld. Ache allows us to, instead, claim it all, to not just describe the world, but to describe *our* world as we encounter it through our skin, interpret it through the broken poetics, and to live the questions while working toward a future with less harm.

I am a harm reduction advocate and a fully funded yet exhausted graduate student. I am a stone butch with top surgery scars on my chest. I am a divorcee and happily married. I am a Baptist college alum and a writer, drummer, runner, lover of the wild outdoors, even the glacial plains of interior Alaska. I have always been the authentic version of myself, even in crisis, even

in delay and despair, even as I work toward other meaningful articulations of my being, expressions of feeling. I am rewriting and renewing the same sentences. There's no spoiler here; these chapters offer a simple suggestion: that we see ourselves and one another as already whole, pressed on all sides with possibility, longing toward those horizons formed by our own dreams and desires.

1. The Spectacle of Shame: Resisting Cure in Crisis

*“I didn’t yearn for anything but privacy because it is an embarrassment to be a wound in public.”*⁶⁷
—Billy-Ray Belcourt

I should have known.

Sixteen days in Alaskan backcountry brought us as close as we ever would or could be—two animals curled into the empty space of one another. The sun skimmed the rim of the horizon, only to refuse its drop and then rise back into August’s sky. When making dinner we sat on our bear canisters facing one another, each vigil to our own horizons, scanning for predators. M. and I were careful not to lean into dinner’s line of smoke and steam. The fibers on our clothes could hold the scent, could call out to animals miles away, even hours later. So we cooked one hundred yards downwind from camp. And one hundred yards in the other direction, he hid our bear canisters under a fir tree. Midway through our trip we were walking along a high ridgeline of loose scree. M. and I moved slow, cautious, used trekking poles to stabilize ourselves. We even crawled, feeling the ground give way hundreds of feet below to the sharp glacial stream. But after finally coming off the ridgeline into a green, flat valley, we stumbled upon a wolf den harboring pups. We had to turn back. The return across the dangerous scree, the lost destination, the regression—we were devastated.

⁶⁷ Billy-Ray Belcourt, *A History of My Brief Body* (Columbus, OH: Two Dollar Radio, 2020), 40.

When M. and I moved to Oregon six months into our marriage, I was so immediately infatuated with the alpine wildflowers, the volcanic obsidian rock fields, the clear streams and dense smell of moss, ferns unfolding as early as February, and the quiet calm of the natural world doing its own thing. My first summer in Oregon I knew I wanted even more wild—more remote, more remove. So the following spring we used our tax returns to book flights to Anchorage. *More wild*. I name this now as desire, as yearning that breaks open into more yearning. A fractal felt in the skin, but also as a state of dreaming that does not exhaust itself.

After weeks in Denali backcountry—what was meant to be a vacation but turned into sixteen days of hyper vigilance, literal bushwacking, and sore bodies—M. and I returned to Oregon thinner and with avid appetites. We decided to celebrate our safe return with a homemade meal of salmon, roasted vegetables, garlic couscous, and cheap pinot grigio poured generously into coffee mugs. It was then, finally, after feeling secured by two weeks of surviving in the backcountry with M. and warmed by the two-dollar wine, that I came out to him. Folding into myself under the weight of shame, I told him I was gay, that I had known for awhile, but that this knowing was diaphanous and delicate—a thin feeling. “Queer desires become an injury to the family,” writes Sara Ahmed. “In this way, shame is related to melancholia, and the queer subject takes on the ‘badness’ as its own, by feeling bad about ‘failing’ loved others.”⁶⁸ M. and I could weather loose scree, wolf packs, and backtracks. We were a team, but it was not enough and I was failing him. *I should have known* became shame’s echo.

In so many ways, shame studies has given us affect studies. We are drawn to this inflamed affect because, in all its awkward pain, shame is bright, a blinding exposure. It hurts in its hot flush of deviance. Shame fills space, unseen but permeating every crack and fissure.

⁶⁸ Sara Ahmed, *The Cultural Politics of Emotion* (New York: Routledge, 2015), 107.

While materializing from the depths of us, shame spreads through the self and into our relationships. It is deeply personal yet explosively social, as Ahmed indicates. All are reasons for why scholars and writers have studied shame; the moral weight of it ties each of us to one another in coalescing conditions of vulnerability, insecurity, and need. Shame has drawn our attention deeper into feeling as a political analytic, as a way to think differently about the multivalent ecosystem in which we live. “The very physicality of shame—how it works on and through bodies—means that shame also involves the de-forming and re-forming of bodily and social spaces,”⁶⁹ writes Ahmed. Shame makes us, destroys us.

Shame also reveals a cultural attachment to the “spectacular truth of bodies,”⁷⁰ wherein we look to the skin for meaning, especially if that meaning emerges as pathological, excessive, or abnormal, all qualifiers made possible through the mediation of difference. In many ways, shame is a dominant method for categorizing the body, and for telling it where to go. Eve Sedgwick describes shame as semiotic rupture, in that it “floods into being as a moment, a disruptive moment,” as “a form of communication.”⁷¹ So what does shame want to communicate? What knowledge does it hope to offer? “It generates and legitimates the place of identity—the question of identity—at the origin of the impulse to the performative, but does so without giving that identity-space the standing of an essence.”⁷² Shame communicates who we are, disclosing our worth, forming a sense of ourselves. However, just as shame forms an identity, it also diminishes future possibilities of the self. “In interrupting identification, shame, too, makes identity,” Sedgwick writes.⁷³ Shame traps us in our pained narratives. And not only

⁶⁹ Ibid., 103.

⁷⁰ David Rubin, *Intersex Matters: Biomedical Embodiment, Gender Regulation, and Transnational Activism* (Albany, NY: SUNY Press, 2017), 64.

⁷¹ Eve Kosofsky Sedgwick, *Touching Feeling: Affect, Pedagogy, Performativity* (Durham, NC: Duke University Press, 2003), 36.

⁷² Ibid., 64.

⁷³ Ibid., 36.

does shame trap us, inhibiting the breadth of our imaginations—who and how we know ourselves *to be*—it also insists the only way through shame, through failure, is to master it.

Each semester I show my gender studies class footage of ACT UP activists marching to the White House in 1996 with the ashes of their loved ones in urns, boxes, and plastic bags. They rush the fence, arms linked, weeping while climbing up the fence to throw the ashes over and onto the White House lawn. All the while they chant *shame, shame, shame*. I tell my class why this is so important—how these activists reshaped their shame into anger and pride, revising the script to pull shame out of the singular body and reseat it within institutional neglect and social prejudice. I explain how there is power in this transfer and how this made ACT UP effective in their activism. Deborah Gould writes, “ACT UP also transformed the object and subject of shame. ACT UP inverted gay shame by asserting that the (in)actions of the government and other institutions responsible for the AIDS crisis were shameful.”⁷⁴ Gould names this scripted flip an *affective pedagogy*—a teaching moment brimming with feeling.

When I introduce ACT UP to my first-year writing students, I’m eager for them to experience the movement through feeling as well as intellect. I want them to feel the group’s desperation and grief, but also their joy and humor. These multiples are important to me. Even more so when, as a class, we pivot to discuss language, how ACT UP’s rhetorical manipulations transformed our imaginations around the 1980s and 90s AIDS crisis. *Neglect* became *murder*. We discuss this power in language, that through such rhetorical revisions, we witness how our words transform the way we think, what we feel, and maybe even inspire material change.

By embracing the multiples we find ourselves at the convergence of language, knowledge, and the feeling body. Such convergence brings me to the brink of expressive

⁷⁴ Deborah Gould, *Moving Politics: Emotion and ACT UP’s Fight Against AIDS* (Chicago: University of Chicago Press, 2009), 249–50.

impossibility. How do I write about knowledge as felt, or the imagination as flourishing through the skin? This nearness to impossibility, however, “should be seen not only as dire or a state of crisis, but, rather, as a radical invitation to fantasize and dream otherwise.”⁷⁵ I hold to this invitation, even as it means standing in crisis. I hold to it to argue that knowledge, language, and the feeling body are deeply involved in one another. These finite fibers convene to forge an infinite felt self. But even as I stand in crisis, I also recognize this urgent space as creative. It is where I wish to linger, with my attention specifically on shame to argue that feeling can inhibit or inhabit knowledge, and that language, rhetoric, helps facilitate this relationship. *I should have known* is both creed and feel, a thought strumming deep in the low chords of my small body.

Queer desires become an injury to the family. My mom’s email arrived without a subject line, just one sentence of content: “when a marriage breaks up it affects more than just you.” I wanted to tell her how deeply I understood this, thinking of the only time I saw M. weep, kneeling on the floor, begging for a different truth, one I couldn’t give. M. and I were together for five years. The weeks leading up to our divorce were punishing, shot open with wild grieving. Loss rattled my sense of being, dissolving me into something more negation than pulse. Unbraiding my marriage while trying to cultivate the new self seemed impossible. Harvest and sow, simultaneously.

I was thirty when I came out—first to friends, then acquaintances, finally family—and the language I used was equivocal and apologetic. I was accounting for my failure. Everyone, from my boss at the small publishing company where I was a copyeditor to my mom back in Detroit, wanted to know why I was getting a divorce, leaving behind a kind, supportive partner.

⁷⁵ Reina Gossett, Eric A. Stanley, and Johanna Burton, eds. *Trap Door: Trans Cultural Production and the Politics of Visibility* (Cambridge, MA: MIT Press, 2017), xx.

Coming out was not a sure step across the threshold of a closet. There was no closet. In those months of breaking down and breaking up, I could not separate shame from liberation. I could not access myself without destroying myself. Ahmed describes shame as exposure, the witness of failure. We are seen, but only because we falter. It is the failure that renders attention. *I should have known*. These four words returned to me over and over as I lived inside the endless ache of failing. So, in that way, I extend Ahmed's definition to argue that not only does failure expose us, but shame is tied to knowledge. We are expected to know ourselves. We are ashamed when, for whatever reason, this is impossible . . . or perhaps just too painful.

Shame, with its internal electricities and external vibrations, repeats (or reinforces) dominant narratives of the self steeped in difference and therefore tied to static binaries: successful or failing, healthy or sick, pathological or normative, respectable or disruptive, married or divorced, self-made or floundering. I am less interested in rehabilitating the aches into arrival, or questioning whether we should embrace or diffuse shame. Rather, I would like to see how our ways of knowing—ourselves and our social landscapes—might be coerced into these binaried logics and how we might escape it for other imaginary possibilities, wherein we might reclaim ourselves as our own agents. Maggie Nelson warns us simply that, “It’s the binary of normative/transgressive that’s unsustainable.”⁷⁶ She also says, “I wanted to live in a world in which the antidote to shame is not honor but honesty.”⁷⁷ Meaning, it’s not about reversal, not *just* about converting shame into pride, not just about overcoming failure, but instead about the vulnerability in renewal, in allowing our desires to surface, even if that surfacing brings about pain, as revision usually does.

⁷⁶ Maggie Nelson, *The Argonauts* (Minneapolis, MN: Graywolf Press, 2015), 74.

⁷⁷ *Ibid.*, 32.

During the divorce I sought ways to keep busy so I signed up to volunteer with a local organization in Eugene, Oregon called the HIV Alliance. Every Monday I helped at needle exchanges (NEX) and on Wednesdays I ran the STI testing site. I trained for several days before becoming an outreach worker, learning how to administer Naloxone, how Hep C lives outside the body for up to six weeks, how detergent bottles make useful sharps containers. But most importantly, I learned our most formidable opponent to care was not (or not solely) lack of funding, bad legal policies, or the Eugene Police, but stigma. In our small Willamette Valley community (like most communities), stigma around drug use prohibited people from reaching out and trusting our local health services. Rather than attend NEX and reveal you use drugs, you might instead stay home, share a needle. Stigma, by repeating the tired scripts on drug use from both popular media as well as medical and legal policy (not to mention our country's history of criminalization), tells people who use drugs they are stunted, delayed, stalled out, wasting away, and not worthy of care. Stigma also normalizes the racialization of drug use by making a spectacle out of addiction (more on this later). Stigma also privileges only the end goals, such as rehab, and forecloses the possibilities of seeing ourselves as in process, as moving through the mess of life, making the cessation of use the only legitimate option for one's relationship to drugs.

Erving Goffman famously defined stigma as theory, an “ideology to explain” inferiority, account for danger, and rationalize “hate based on differences.”⁷⁸ This very definition of stigma describes a method of knowing, a curation of beliefs centering the body. This isn't a surprise. The uses of shame in the clinic are historically and epistemologically entrenched.⁷⁹ Issued through pathologizing logics that set up the patient to either succeed or fail, shame indicates

⁷⁸ Erving Goffman. *Stigma: Notes on the Management of Spoiled Identity* (New York: Touchstone, 1986), 5.

⁷⁹ See Michel Foucault, *The Birth of the Clinic: An Archaeology of Medical Perception* (New York: Vintage, 1973).

one's progress toward (or recession from) the healthy state. Because stigma, as it circulates within the medical-therapeutic industry, is the rhetorical echo of judgment on human behavior, its social function is to discern and describe failure. Whether it's BMI or injection sites, the medical industry looks to the skin for signs of deviance. Stigma, then, translates meaning through intelligibility and respectability; and pathology is reauthorized as a legitimate field of study, through which the category of "health" is reinforced as both an imperative, a goal we must relentlessly work toward, but also an ever-changing expectation. We remember that Colleen Derkatch writes, "what it means in contemporary Western culture to be 'well' is predicated on the entanglement of seemingly opposed logics that together create an essentially closed rhetorical system where wellness is always a moving target."⁸⁰ Jasbir Puar describes a similar phenomena, a process of being "evaluated in relation to success or failure in terms of health, wealth, progressive productivity, upward mobility, enhanced capacity"⁸¹ that situates the body near its own possibilities (what it can or should be) while simultaneously naming that body as failing. We can always be better.

We can also know better, *one who knows better* administering opinion and judgment under the aegis of objective expertise. We call this paternalism, the state performing the role of a scolding parent to facilitate better behavior. Shame organizes bodies, makes them feel small;^[SEP] and to feel small is to feel infantilized, reprimanded, and dismissed, the one *who knows better* putting you in your place while taking control. "Small" also conjures up the body as contained, even unseen and unremarkable. So when I say shame organizes the body, I mean that shame also regulates, categorizes, and manages that body.

Of course, our healthcare teams literally know more, having trained for years to provide

⁸⁰ Colleen Derkatch. "The Self-Generating Language of Wellness and Natural Health," *Rhetoric of Health and Medicine* 1, nos. 1–2 (2018): 134

⁸¹ Jasbir Puar, *Right to Maim: Debility, Capacity, Disability* (Durham, NC: Duke University Press, 2017), 16.

informed care; but as an industry, healthcare has authorized its knowledge as elite, impartial, and non-negotiable. Under the weight of its authority our felt selves diminish, those who know better describing to us who we are by how we present. In our most vulnerable conditions and within the clinical site of needed care, who are we to resist given diagnoses or care plans? Healthcare is a corrective not collaborative institution; so we need not go far to see how shame dictates bodies within its clinical spaces. We (most likely) need not go beyond our own lives, remembering a moment when a health professional told us to do better or dismissed our aches and claims altogether. So while we feel shame within the walls of the clinic, we internalize it and hold ourselves responsible for what ails us.

Shame is thus a mobilizing force, extremely useful in sustaining dominant narratives of normative health and directing patients into preordained treatments. From trans people forced to drop weight to receive top surgery to those using drugs who are forced to sober up in order to access Hep C meds, vulnerability is exploited—compressed into the flushed feeling of shame—to motivate one toward desired ends. In both scenarios, the medical professional offers an immutable objective while rescinding his own responsibility for care. Drop weight, get clean, and then one can receive the services they so desperately need. At the very expense of our bodies, in order to influence us in our decisions over our bodies, agency is revoked under the auspice of agency given. As an affective pedagogy, shame teaches us social codes; and we learn that to veer from those codes is to cause disruption and deviance. We hold that learning within our skin, *I should have known* becomes an echo of *you should know better*.

The objectives of our Eugene needle exchange were multiple but also followed national and international definitions of harm reduction: to provide care and services without coercion,

judgment, or demand.⁸² That intervention has more to do with creating communities through trust than the cessation of drug use. That people who use drugs are their own agents in reducing harmful practices and deserve a voice in forming the policies meant to serve them. And that we should meet one another where we are—in the process, in the middle of things—to form the foundations of a trusting community. But process is uncomfortable, and by nature of itself, unfinished, a rough space to make camp.

At Alliance we offered free and anonymous HIV, Hep C, and STI tests to our community. A quick swab of the mouth and then participants had a twenty-minute wait for results, many of whom paced the waiting room. They swung from one end to the other, pivoted, and back again. Working the front desk, I smiled weakly, trying to validate without also giving too much attention. But their itch ricocheted around that cramped space, summoning anxiety in the rest of the waiting bodies. Twenty minutes to wait for a test result is too long, and I felt it too. The swab soaked in its pool while participants paced or shifted in their seats. As time spooled out, there was nothing I could do. One night a man arrived during testing hours to ask for a single sterile syringe. “They come in packs of ten,” I said, handing him the crinkly, rubberbanded bundle. He declined, tearing one from the rest, saying he only wanted one, that this was his last hit. I pushed back some, encouraging him to just take the pack and share the rest but relented when he again insisted on just the single needle. He stayed for the whole shift, to chat and be around people, to drink Folgers and hang out, talking through his ache and fever despite flirting with line of withdrawal. He promised he was “better than this,” that this one needle was his last. He made the waiting room look at its shoes with his anxious chatter, the heat he generated through his articulations and gesticulations of shame.

⁸² “Principles of Harm Reduction,” National Harm Reduction Coalition, accessed November 24, 2021, www.harmreduction.org/about-us/principles-of-harm-reduction/

“One is something in experiencing shame, though one may or may not have secure hypotheses about what,” writes Sedgwick. “It is the place where the question of identity arises most originally and most relationally.”⁸³ Shame in/forms one’s idea of self, summoned in public moments to tell us exactly who we are—fuck ups and failures who should know better, do better. And while shame can travel through any social space, I am specifically interested in witnessing as shame attaches itself to the skin, collating and interpreting the meaning of everything from liver enzyme numbers to bruised injection sites. We remember Butler County’s sheriff who refused to provide Naloxone to his emergency teams because while Naloxone saves lives, it doesn’t “cure” those lives. His rhetoric demonstrates the fatal implications of living within a culture of capital. Socially distressed around bodies that do not display futural projections of health, we’ve been taught to name then pathologize the non-productive.

While recognizing the many ways we might describe capitalism, as I defined it in the introduction and as I use it here, I am describing a social world organized through productivity and driven toward profit. Rewarded for desiring the good life, we never arrive yet keep working toward what is promised. Within this everyday ache wrought by the endless possibility of optimization, we sense ourselves as failing, flailing, what Lauren Berlant calls “slow death.”⁸⁴ We could call this failing many things (again, the multiples): death by a thousand shameful cuts, the exhaustion of erasure, the exhaustion of over-exposure, being a wound in public.⁸⁵ As we describe this capital ecosystem in its many iterations, a dominant design also emerges: we sense our survival is contingent on labor and secured through the victory of overcoming failure, because a culture of capital cannot compute *process without teleology* (a middle without end). In thinking of the man with his singular syringe, I think of how we learn apology and hold it in our

⁸³ Sedgwick, *Touching Feeling*, 51.

⁸⁴ Lauren Berlant, “Slow Death,” *Critical Inquiry* 33 (2007): 754–80.

⁸⁵ Belcourt, *A History of My Brief Body*, 40.

bodies, offer it as atonement. This is the story of the body under the coercive forces of wellness culture, U.S. healthcare writ large, and capitalist logics, the body as both vehicle and victim to the American Dream.

When I was training to work NEX, my first lesson was rhetorical: what we say has direct impact on our clients' lives. If a participant excitedly shared their sobriety with us, we were trained not to celebrate alongside them. We could ask how they were feeling but could not congratulate or affirm their sobriety because that celebration was a punctuation mark. It endorsed outcomes and reinforced cultural expectations of recovery. If the participant relapses (and statistically most do) they may remember that shared celebratory moment and resist assistance later if needed, fearing to disappoint in a culture that is only disappointed with drug use.

Similarly, we were trained to challenge the fraught weight of words like “clean” and “addict,” how even subtly these recursive iterations crystallize a broader social understanding of drug use—that it is dirty and anti-social, passive and nonproductive. This language not only reinforces these stereotypes on drug use, but it summons stigma and inhibits people from seeking support. While focused on the temporal exchange between ourselves and our participants—that what we say in the moment matters—we were also actively protecting a future of ongoing relationships, services, and care. We protected futures *even as* we refused to describe those futures. Meaning, we did not enforce recovery or rehab. But what we established rhetorically and materially in the moment conferred ongoing (futural) stability. Our participants can always return to us without explanation or expectation.

More than 120 people die in the U.S. each day from an opioid overdose and 100,000 died

in 2021 alone;⁸⁶ but because of a national imaginary forged by capitalist logics, those deaths get justified as expected outcomes of non-productivity. The language we circulate—across national and local media, as well as through policy legislature—shames and codes communities as pathological against ongoing recursions of the productive subject. The term “cure” affirms positive outcomes and profitable futures, for example, forcing those who use drugs to submit to recovery models in order to access life-saving resources and services (e.g., needle exchange and anti-craving medications).

Specifically, these logics of capital—ways of thinking influenced by the structure and demands of the market—naturalize our attachments to linear health and cured states while also replenishing the ongoing legacy of the War on Drugs. So what if we reject the compulsion toward cure and recovery? What if we defuse the spectacle that current health rhetorics collate around our bodies? Harm reduction is already doing this work in the streets, mitigating the inflammation of shame to insist on other ways of being together, seeing each other, caring for each other. But I also believe we can translate these ideas beyond street outreach, beyond the primary care office, and into our own felt selves.

As participants came from all over the city to our street exchange in Eugene, as we learned about their lives but never their names, I began to recognize how the broader social construction of health wreaks havoc on the material realities of everyone, but especially those who use drugs. The move away from the elite knowledge of the medical industry to instead turn toward process, toward messy convergences of feeling and expression will be a difficult project. But I heed Dean Spade when he says we need to be about “practice and process rather than

⁸⁶ “Drug Overdose Deaths in the U.S. Top 100,000 Annually,” Centers for Disease Control and Prevention, accessed November 17, 2021, www.cdc.gov/nchs/pressroom/nchs_press_releases/2021/20211117.htm

arrival at a singular point of ‘liberation.’”⁸⁷ With this in mind, harm reduction—the work we did in downtown Eugene, the practice of providing services for people who use drugs without demands, coercion, or expectation—is not the singular point of liberation, but it does help us imagine ourselves as in process, as fuck-ups struck down by wonder, desire, and the longing to live into impossible futures. It offers us a way to dispose of shame rather than reform it into palatable feelings or performances.

For those who do not or cannot perform the “mythos of neoliberal, entrepreneurial self-making,”⁸⁸ as Hil Malatino writes, shame holds us to account for all of our unknowns, as if the unknown was pathological instead of beautiful and creative. Within the feeling of shame we are called toward mastery, *you should have known* or *you should know better* ringing in our ears. This makes my story even as I work against it. Malatino argues that while we are expected to be self-made, to be those individuals projecting the image of boot-strapping achievers, this mythos contradicts the reality of what it means to make—all that excess spilling out from the creative process. How do we care for ourselves in the midst of the demand for polished end products? How can we transform *I should have known* into *I didn’t need to know*?

Someone once told me “delay is avoidance.” And while this feels true on the surface, I press on it and think about my days of delay and the circuits of shame. Closeted and married, I wasn’t waiting and stalling. I was living within the pain of uncertainty. I was setting up my tent, unrolling my mat, and starting campfires. I was unbuckling the hip belt of my pack to safely cross glacial rivers, trading my bulky hiking boots for cheap tennis shoes. Life still happens in

⁸⁷ Dean Spade, *Normal Life: Administrative Violence, Critical Trans Politics, and the Limits of Law* (Durham, NC: Duke University Press, 2015), 2. Also see Spade’s “Mutilating Gender,” *The Transgender Studies Reader: Volume I*, eds. Susan Stryker and Stephen Whittle, 315–32 (New York: Routledge, 2006).

⁸⁸ Hil Malatino, *Trans Care* (Minneapolis: University of Minnesota Press, 2020), 2.

the stuck moments, those in which cold current whorled around my bare ankles.

Delayed. Stalling. Waiting. Even the language of time pathologizes us, compels us to think of ourselves as stuck when, in fact, we are always moving. We are in transit, in an orbit slow enough to confuse us into believing in anchors. I think of galaxies, gravitationally bound yet infinite in their sprawl. The Milky Way has a mass four million times that of our sun. Most galaxies are punctured by black holes, literal infinity machines. There is so much unknown, so much expanding out from us, or through us.

For Christmas one year, after consulting with the Eugene Astrological Society, I bought M. a telescope. M. and I moved from the flat, gray plains of West Michigan to the rolling green valley of central Oregon six months into our marriage. He was returning to school to earn a BA in astrophysics. I used to tell people that writers and scientists make good partners because of the distinctions in imaginary desires and obsessions. I no longer hold to this tired dichotomy, but it is true that M. views the world differently than me. The telescope now mostly sits in the corner of his tiny studio apartment, offers less opportunity because he lives too close to campus and therefore too far under its light pollution.

Our breakup commenced at the beginning of a summer; M. was moving to Nicaragua for three months to homestead a farm, then coming back to Eugene, to the tiny studio, to start a life unpartnered. The weeks leading up to his departure were mostly consumed with distraction—one can only tolerate so much unraveling—and that weekend in June was no different: I booked a Amtrak trip up to Seattle for a solo weekend and he packed our car with his telescope and camping equipment for two nights at Pine Mountain, a mountain east of Bend, Oregon in the high desert. Because the desolate geography affords unfiltered star-gazing, the university set up their observatory on its peak.

When Amtrak announced an indefinite delay of my train, the Cascades Starlight rail, I walked home, to a living room covered in our shared outdoor detritus: stove, sleeping bags, and the tent in which we spent sixteen sleepless nights in Alaska's backcountry. The familiarity of the scene, and knowing it was one of our last weekends as a couple, devastated the emotional equilibrium I cautiously tended to each day. I abandoned my Seattle plans and we drove to Pine Mountain together in quiet.

While he toured the observatory I set up the tent, made a campfire, and coaxed its inchoate flames into something lasting. When M. returned we fell into our familiar pattern of fire-poking and beer drinking, talking and laughing about new life ahead, who we'd date and if we'd like the same women. Often our campfire chats dissolved into tipsy universe ponderings. Looking at the stars, M. would explain how we can both *see* our galaxy while also being *in* our galaxy. It has mostly to do with how small we are. Because galaxies are spindles, tight but expanding with arms that reach out indefinitely, we exist on its body while able to also gaze up to its body. We are so small, so contained. Talking to M. was both informing and confounding; my questions spurring more questions. And it was the beauty of this that destroyed us.

It's impossible to imagine how life could have unfolded if only I made different decisions. But I wonder how I would have come out if it weren't for M. His love for me, for who I was (and was becoming) helped me embrace who I was (and was becoming). A love so fidelitious it relinquishes. A love so understanding of change it relinquishes. It brings to the surface how complicated we are, synaptic bundles of feeling confined within our small bodies, yet interminable in our aches and desires—the unknown orbiting inside our skin. And if this is the case, how do we come to understand who we are? How do I stand firmly on the foundation of myself while needing to destroy that foundation in order to endure? How do we know the self

from the subjective place of the self? How are we immersed within a galaxy that we can also see in Eastern Oregon sky? How to not feel ashamed while also feeling so small? I have to think this magic happens when we attend to ourselves as enough and in process, alive in our skins, attentive to a moment that need not bare the weight of all that comes after. But even this is a guess.

Our knowledge on drug use has been both manipulated and overexposed by the War on Drugs and the opioid epidemic. Through the rhetorics and regulations of U.S. federal policy,⁸⁹ we've come to understand drug use as criminal or disordered behavior and taught to privilege recovery as the only corrective response to use. Under a false optics of care, capitalism trains us to think in terms of product and productivity, an outcome or happy ending. It is better to be dead than alive and using because we assume drug use renders a failed life, an unproductive life. But this narrative is coerced. At exchange I witnessed motion and multitudes—people living dynamic, vibrant lives. Friendships and humor, chatter and connection.

When Puar describes the process of being “evaluated in relation to success or failure in terms of health, wealth, progressive productivity, upward mobility, enhanced capacity,”⁹⁰ she describes the pathology of *stuck*. If the body must be the site of ever-expanding potentiality, then drug use can only be understood as one's willful choice to stall, retreat, even impede. Derrida once asked, what is it that we hold against the user of drugs? “He cuts himself off from the world, in exile from reality, far from objective reality and the real life of the city and the

⁸⁹ U.S. drug prohibition laws have a very long history of promoting and naturalizing zero tolerance, from the Rockefeller drug laws of the 1970s that established minimum 15-year sentences for possession to habitual offender laws (three-strike legislation). For more information see “Guide to U.S. Drug Laws,” American Addiction Centers, accessed October 18, 2022, www.recovery.org/addiction/us-drug-laws/

⁹⁰ Puar, *Right to Maim*, 16.

community; that he escapes into a world of simulacrum and fiction.”⁹¹ Meaning, pathology moves beyond the substance itself; it is the perceived prioritization of and retreat into the interiors, into pleasure or solitude or secrecy, that threatens entrenched notions of wellbeing.

Whether through national policy, mainstream media, or the medical industry, we hear the same drama on drug use rescripted: choosing drugs over family and work, the person who uses is described as selfish and stalled out, waiting around for a fix, stuck in a habit. Derrida explains this plainly in that it is “always nonwork that is stigmatized.”⁹² But in what ways have we invited the person who uses drugs back into our communities? Or perhaps, more to the point, how have we made an effort to see them as already existing, vibrant members of our community? This invitation and intentional shift in our imagination not only benefits people who use drugs, but those of us called on to do better and work harder. Which is to say, all of us. This invitation smothers the flare of shame to ask us to be gentle in our expectations of what process involves: missteps, relapses, joys, and setbacks.

Under the contract of capital, we come to understand time through signposts: educational achievement, vocational stability, property attainment, and familial growth, often in this order. These signposts script pathology from normativity to impose a linear or right way of moving through life—one issues another, while straying from the path indicates deviance or disorder, or regression, relapse. That is, one either works toward healthy futures or stalls out. Elizabeth Freeman argues that the body is the figure through which linear time appears. She calls this chrononormative, “the use of time to organize individual human bodies toward maximum productivity.”⁹³ As long as we clarify ourselves *and* our future, and as long as those clarifications

⁹¹ Jacques, Derrida, “The Rhetoric of Drugs,” *Differences* 5, no. 1 (1993): 25.

⁹² *Ibid.*

⁹³ Elizabeth Freeman, *Time Binds: Queer Temporalities, Queer Histories* (Durham, NC: Duke University Press, 2010), 3.

endorse and ensure capital gain, we're doing the right thing, making the respectable choice, *being good*. We can extrapolate "good" to mean many things, including healthy, sober, and responsible. But "good" unequivocally means productive, that we are working and working toward profitable futures. Under the duress of constant capital, we become good beings through the aisles of the market, through the accumulation of unused sick days. Time is money, after all.

Like many families across the U.S., mine has not gone untouched by addiction and overdose. Nor have I. But this is not that story, but instead how I came to understand the way shame manipulates us, clinches our imaginative spirit so that our relationship to the self is taut and contained, rather than expansive and wandering, wondering. Ahmed describes shame as a state of being psychically against one's self, that because shame locates badness within the body, in order to expel the badness, I have to "expel myself from myself."⁹⁴ What ontological violence. But violence we no less feel absolutely compelled to comply with, because the reality is that we live within a saturation of capital that exploits shame for profit.

As we now enter late capitalism, as profits now circulate through data collections, influencer networks, and digital labor, some are left behind; some are still surviving in the slow collapse of the steel or coal economies in, say, U.S. Appalachia. It is not a coincidence that this is the origin of the U.S. opioid epidemic. Purdue Pharma pushed OxyContin hard in labor communities because those regions were replete with chronic pain sufferers. One of OxyContin's first TV ads promised itself as the drug that "gets you back to work." This was just a few years before David Harvey famously pointed out that in late capitalism we define sickness solely as "the inability to work," echoing Derrida's diagnosis of addiction.⁹⁵

⁹⁴ Ahmed, *Cultural Politics*, 103–4.

⁹⁵ David Harvey, *Spaces of Hope* (Edinburgh, UK: Edinburgh University Press: 2000), 106.

While the U.S. has witnessed (and produced) drug epidemics before, nothing quite parallels the magnitude of the opioid crisis in terms of overdose numbers, the initial explosive rate of prescriptions, and new articulations of addiction. Indeed, the crack epidemic of the 1980s in many ways cannot be compared to the current opioid crisis, and not just concerning scale, but also in terms of state response, cultural discourse and imagination, and public intervention. The crack epidemic unleashed in the 1980s was politically premeditated and rhetorically and violently enacted against communities of color to dominate, suppress, and incarcerate. The government controlled the affective and moral narrative, incarcerating thousands and brutally policing mostly inner-city streets, whether drugs were present or not. The opioid crisis, however, originates not from the organized motions of the U.S. federal government (though is, of course, later regulated by it) but from the pages of a marketing proposal.

In the late 1980s Purdue Pharma was just another small, privately owned pharmaceutical company. Located in Stamford, Connecticut and run by the wealthy Sackler family, Purdue specialized in laxatives, earwax removal, and an opiate pain reliever for cancer patients called MS Contin. When in the 1990s MS Contin neared the end of its patent, threatening the profitability and material future of Purdue, the company began to brainstorm its next product, one that could be marketed toward chronic pain, one containing the highest concentration of oxycondone to ever hit the market. Relieving pain for up to 12 hours (as opposed to four to six hours in other over-the-counter narcotics), Purdue branded OxyContin as the drug that helps one regain control over life. *It gets you back to work.*

In 1996, Purdue introduced OxyContin to the public through a major marketing blitz that employed everything from peppy TV ads to all-expense paid vacations for busy primary care

physicians.⁹⁶ Purdue supplemented its marketing campaign with substantial research into prescription trends, including enormous data collations and analyses of which doctors prescribed the most opioids and where. From OxyContin's debut, Purdue claimed the risk of addiction as less than 1 percent, a number pulled out of context from a dated medical article.⁹⁷ And because OxyContin is a twelve-hour continuous ("Contin" means continuous) release, it was marketed as difficult if not impossible to abuse. But research, including even the internal studies done at Purdue, proved otherwise. Once crushed, Purdue's team found (then concealed) that 68 percent of the oxycodone could be extracted at once.⁹⁸ And with physicians writing 30, 60, and even 90-day scripts, dependence quickly formed. Within four years of OxyContin's debut, sales at Purdue grew by over 1 billion dollars and the drug became the most frequently prescribed opioid in the U.S.⁹⁹ The consequences have been devastating. The rise in overdoses and overdose-related deaths skyrocketed simultaneous to OxyContin's expanding prescription coverage. After years of lawsuits, investigations, and public protesting, in 2007 three executives from Purdue Pharma (none of whom are part of the Sackler family) pled guilty to federal criminal charges of misleading both physicians and the public about the drug's addictive qualities. In 2010 Purdue reformulated OxyContin to make it more difficult to crush, snort, and inject, driving thousands of withdrawing opioid users toward the cheaper, always available alternative: heroin. In 2010 there were 21,088 deaths from opioid overdoses. By 2017, that number more than doubles.¹⁰⁰ Since the

⁹⁶ These were deemed "conferences," but always took place in warm, tourist destinations. See Art Van Zee, "The Promotion and Marketing of OxyContin: Commercial Triumph, Public Health Tragedy," *American Journal of Public Health* 99, no. 2 (February 2009): 222.

⁹⁷ *Ibid.*, 223.

⁹⁸ *Ibid.*

⁹⁹ *Ibid.*, 221.

¹⁰⁰ "Overdose Death Rates," National Institute on Drug Abuse, accessed January 2020, www.drugabuse.gov/drug-topics/trends-statistics/overdose-death-rates.

release of OxyContin, half a million have died from an opioid overdose.¹⁰¹

Rather than expose the systems at play—the legacy of the War on Drugs, inhumane drug policies, the profiteering by Big Pharma—national rhetoric around opioid use took up the spectacle, turned from imbricated systems to single subjects to ask what is being threatened by the epidemic? Who is at risk? And what will we all lose? Again and again, the answer came back coded in whiteness, inspired by capital’s dictation of time, and mobilized through shame.

Because drug use has been historically and systematically criminalized in the U.S., because the opioid epidemic statistically affected white and rural communities early on, and because white patients are more likely to be prescribed pain relief, the racialization of opioid use can be mapped through new efforts to circumscribe addiction as an epidemic overtaking suburbs, a disease in need of care, not penalization. Which is not to say we reject the notion that addiction has disease properties. Indeed, this reconceptualization has helped dilute the idea of drug use as willful deviance. But we still want to work this a little. Because, on working it we find that drug use continues to be heavily racialized, despite our new shifts and pivots. This isn’t for a lack of drive to reinscribe addiction away from shame, but because the language we’ve been given has yet to divest from the body as the producer of meaning and futures.

Since the early days of Oxy, “The New Face of Addiction” has been a consistently popular headline, tacitly conjuring an earlier, “familiar” face of addiction. Of course, this new face is rhetorically and visually coded as young, white, and wealthy—the face representing productive futures. Public health and rhetoric scholars alike have argued how “The New Face of Addiction” directs our collective understanding of opioid use through the imagery of spectacle,

¹⁰¹ “Opioid Data Analysis and Resources,” Center for Disease Control and Prevention, accessed March 2020, <https://www.cdc.gov/drugoverdose/data/analysis.html>.

stratifying white drug use from non-white,¹⁰² and that these headlines help create “a form of narcotic apartheid”¹⁰³ by rearticulating social, legal, and political narratives that sustain white drug use as a surprise, which reinforces non-white drug use as expected.

Across local and national news coverage alike, opioid use has been declared an epidemic, a crisis breaching into wealthy suburbs, “good” schools, and happy families. The racialization of drug use is and has historically been a government strategy to privilege private wealth, ensure political legacies, and control capital through mass incarceration of black, brown, Indigenous, and queer communities. The spectacle of white drug use, then, does many things simultaneously: it safeguards white drug users from the War on Drugs legacy; it legitimates a police state that occurs within recovery models and through morally scripted public health initiatives; and it normalizes the demand for protected futures over present need.

“Construction of white drug scares, just like those centered on people of color, are about policing boundaries and shoring up cultural expectations based on race and class. Poor, rural methamphetamine users [in this case] violate white expectations of productive, rational citizens fitting with the neoliberal requirements of whiteness.”¹⁰⁴ White drug use must then be scripted as the shocking violation of expectation in order to protect penal institutions and sustain harsh drug policies. Discourse on addiction thus uses the shame of stalled time—stuck, delayed, waiting—to insist on the wealth and health of the body, maintain the specter of whiteness, and make recovery compulsory.

“Stuck,” as a rhetorical device, implies that what is lost or idling can be redeemed. We

¹⁰² Julie Netherland and Helena B. Hansen, “The War on Drugs that Wasn’t: Wasted Whiteness, ‘Dirty Doctors,’ and Race in Media Coverage of Prescription Opioid Misuse,” *Culture, Medicine, and Psychiatry* 40 (2016): 664–86. See also Jeffrey Chaichana Peterson, Aline Gubrium, and Alice Fiddian-Green, “Meth Mouth, White Trash, and the Pseudo-Racialization of Methamphetamine Use in the U.S.,” *Health Communication* 34, no. 10 (2018): 1173–82. And see Travis Linnemann and Tyler Wall, “‘This is Your Face on Meth’: The Punitive Spectacle of ‘White Trash’ in the Rural War on Drugs,” *Theoretical Criminology* 17, no. 3 (2013): 315–34.

¹⁰³ Netherland and Hansen, “The War on Drugs that Wasn’t,” 666.

¹⁰⁴ *Ibid.*, 668.

can save one who is stuck because, as the story goes, as the white victim of Big Pharma, they were pulled deep into a disease they were never meant to know. But by moving addiction from the prison cell to the public clinic, we've only traversed institutional terrain, substituting one racist space for another and stabilizing legacies of drug criminalization along the way.

Expressions of time—compounded by optimization and advancement rhetorics in medical language—reify people who use drugs as abject, as defective and defecting from the path of financial and emotional prosperity. By constraining people to discourses of stuckness, their full humanness is not yet revoked but always possible under recovery. Once the subject takes up the recovery process, a productive future returns to view.

Recovery thus emerges as the singular model for addressing white drug use and reviving our notions of the healthy, productive citizen. “Rather than simple casting out or disparaging of white opioid users, we see instead attempts to reclaim and restore (through medicalization of their drug use) these white bodies,”¹⁰⁵ argue Netherland and Hansen. Though stuck discourse is still undeniably degrading, it generates more sympathy by employing rhetorics of loss and grief—lost jobs, estranged families, and abandoned futures—to allocate these stories as compelling, these lives as worth protecting through engineered futures.

Jules Gill-Peterson notes this discursive pattern circulating through, and therefore constructing, our notions of trans childhood as well, that “the new face of transgender” applies a plasticity meant to reinforce whiteness. “The discourse of plasticity has prescribed one narrow form of futurity through whiteness for trans children, while simultaneously denying any future at all to those who are structurally barred from its highly managed shelter.”¹⁰⁶ By establishing (negligible) flexibility within our discourse, imaginations, and interventions for white drug users,

¹⁰⁵ Ibid., 669.

¹⁰⁶ Jules Gill-Peterson, *Histories of the Transgender Child* (Minneapolis: University of Minnesota Press, 2018), 197.

white patients, white trans kids, we make claims on only chosen futures.

Among the local, national, and international reports on the U.S. opioid epidemic that span from the late 1990s to the present, I want to look at one from a popular news source that aired in 2010. Titled “The New Face of Heroin Addiction,” ABC News broadcast *20/20* profiled heroin use among white, mostly middle-class teenagers in suburban Minneapolis.¹⁰⁷ I chose this piece because of its mainstream popularity, its broad and expansive circulation through middle America, but also because of its air date. At this moment in the epidemic, Purdue Pharma had pled guilty to criminally misleading the public about OxyContin’s addictive properties and was therefore reformulating the drug to make it harder to crush, snort, and inject. Likewise, physicians pulled back on prescriptions after witnessing widespread script diversion. This swift bottoming out of the opioid market led many to turn toward heroin, which was widely available and even more affordable than pills. This is where *20/20* picks up the story, noting that rates of heroin use doubled from 2007 to 2010. “Even more surprising” than these numbers, correspondent Christopher Cuomo notes, “may be the face of the new addicts. Tonight you are going to meet kids from families you never thought could fall victim to drugs, families who did everything right.” The story then goes on to profile two white youths: Ashley and Justin.

Sitting in a bright dining room with Ashley, Cuomo argues, “This is not supposed to happen to you: too smart, too many people who love you, too much money [here Cuomo gesticulates to underscore their suburban setting] and potential.” The story then cuts to early home videos in which Ashley is seen as a toddler playing with toys, as a young girl in rollerblades, then as a college student holding a beer. Youth, whiteness, wealth, and traditional

¹⁰⁷ ABC News, “The New Face of Heroin Addiction,” (2010), YouTube Video, 8:31. https://www.youtube.com/watch?v=cskq_zGVSZs.

family convene to limn Ashley with lost innocence. In voiceover, Cuomo explains how Ashley, like so many college students, experimented with drugs and alcohol in college before developing a dependence on opioids. The trajectory is described as linear—moving from point A, innocence, to point B, tragedy. In a later scene, Ashley guides Cuomo through her parents’ house and into the basement where she lives. “This is your soot?” he asks, noting the black residue (from tar heroin) on doorways and light fixtures. The coerced spectacle of white drug use registers affectively as surprise, threat, and discomfort as cameras track the material residues of the drug, framing addiction as dirt and deviance in the wealthy home. “This is not supposed to happen to you” implies that addiction is meant to happen to someone.

This profile (like many addiction narratives) focuses on youth, emphasizing early potential in athletics and academics. The innocence of childhood and white adolescence sharpens the threat of drug use. And by situating these stories in suburbs, marking the space as unusual, the viewer is compelled to imagine borders and the threat of breach. Indeed, the perceived trajectory of drug use—from urban centers to suburban and rural peripheries—appears again and again across media. In the opening scene from this *20/20* piece, Cuomo takes on a shocked affect to inform viewers that drugs are moving from the inner city into wealthier neighborhoods. During this specific voiceover, we get clips of dark Minneapolis nights, police cars, and EMS sirens.

Cuomo reports on heroin “ravaging” Ashley, inside and out, “changing her voice, damaging her skin.” This attention to the body is articulated again later when we are introduced to Justin, also from Minneapolis but now living in Portland, Maine, who is “on the road to nowhere.” “The once bright-faced boy who loved the outdoors and planned to follow in his father’s footsteps in the family pipe-fitting business, Justin is now a ghost of his former self.”

This ghost, this boy thinning into specter, represents the braided relationship between capital and respectability. As a direct result of lost income and vocation, Justin's future fades from legibility while his status as productive citizen becomes increasingly incoherent. "When did you stop being like everyone else's ideal kid?" Cuomo asks. Cameras then follow Justin as he waits for his supplier to call back. Hours alone in the dark, he is shown as idling, waiting for his fix, wasting time.

Time is constructed in particular ways within Ashley and Justin's stories. For Ashley, "She soon dropped out of college, quit her job, and began the life of a fulltime junkie." Conveyed as causal and linear, Ashley's divergence from her predicted future reinscribes capital time—that we either participate productively in political life or we stall out. "Fulltime" here summons capital's expectations, that labor makes the responsible subject, that drug use only indicates deviation from the workforce and from legible embodiment (since that embodiment is clarified through labor). This stalled, stuck time discourse engages the presumed linearity of pathology, that one declines steadily into addiction or recovers from it. But while addicted (though, we should say, while actively in use), the subject remains stuck, like Justin and Ashley.

Throughout the feature, *20/20* reproduces the pathological stuck narrative we see throughout media coverage of the opioid epidemic: Justin, a user of drugs, did not go to college, has not held a job, has abandoned his family and future vocation. The attention to age also reappears. Justin and Ashley are in their early twenties, headed toward that time in life socially constructed around vocational development, marriage, and family making, each an imperative mechanism within capital's reproduction of subject hood. To be "stuck" in early adulthood implies that one occupies space without producing or participating in growth. Within capital time, subjects must be mobile, invested in straight trajectories with legible outcomes—careers,

property ownership, reproduction. Justin, as this feature frames him, failed at each. The affective register of this *20/20* piece attempts to pathologize the feverish magnitude of the epidemic through the stuckness of drug use. And in this piece, with scant effort toward deep description, the shame of drug use relegates these two humans to mere allegories of opioid addiction.

If shame spotlights one's deviation from the prescribed path, then it also forecloses our ability to think *beyond*, to envision drug use beyond pathology and as part of an intricate social landscape, wherein lives are still lived, relationships are still fostered. Instead, shame arrests our imaginative muscles, constraining us to dominant narratives of the healthy body and healthy being. The person who uses drugs, under this regime of wellness and optimization, is exploited to mark the risks of deviation, what is withheld and lost as one idles in addiction.

In the U.S. fifteen states ban syringe services programs (SSPs) while half of the country operates under some form of limited access—legislation is ambiguous or SSPs are restricted to designated (usually urban) areas or counties. For example, under Pennsylvania law it is illegal to run a syringe program outside of Allegheny and Philadelphia counties, which operate through city exemption. National drug paraphernalia laws, coupled with intense public scrutiny of exchanges, inhibit most people from reliably accessing sterile syringes and equipment (cookers, cotton, alcohol swabs, and more). Likewise, anti-craving medications such as methadone and suboxone can be heavily monitored. Distributed daily at clinics often ostracized to the outskirts of city borders, for those taking methadone, for those who may arrive late to work because of a drive across town to their clinic, one missed dose can result in full suspension from the program. Often those on methadone or suboxone are not even considered fully sober, and thus disallowed from sharing at NA meetings. The violence of addiction pathology, whether threaded through

criminal or medical discourse, manifests clearly in local, state, and national government response to drug use, the opioid crisis specifically. Despite these many hurdles—the medical gatekeeping, astringent program regulations, national policy—the single user of drugs is still deemed the one responsible to not only explain addiction but to carry the weight of the opioid crisis on their shoulders.

During my time at the Alliance I was required to ask, before distributing any packs of sterile needles or supplies, whether our participant wished for information on recovery. “Are you interested in learning about recovery today?” This question was enforced by funding and went on to organize our data. By tracking the using patterns of our participants, and by gesturing toward recovery, we appeased donors, who wanted to know their donations endorsed and produced positive results. But I hated it, hated asking our clients if they wanted information on rehab, if they shared used needles in the past week, when their last STI and HIV tests were. I just wanted to pass out needles without reminding our clients of public expectation. They don’t owe me anything. But this is part of our work, the contradictions, that even as we fight stigma we work within the systems still producing it.

These binds are also part of embracing complexity, part of how we navigate a dense matrix of need and desire, care and boundary. “Harm reduction discourse serves an alternative ethics to the ethics of both criminal justice and the medical discourse underlying public health approaches,”¹⁰⁸ writes Susan Shaw. But she also renders caution. “At the same time, harm reduction practices are used to navigate a neoliberal political rationality that relocates responsibility for health to individuals without addressing structural constraints.”¹⁰⁹ Harm reduction is not perfect, but it is a practice of looking its imperfections directly in the eye.

¹⁰⁸ Susan Shaw, *Governing How We Care: Contesting Community and Defining Difference in U.S. Health Programs* (Philadelphia: Temple University Press, 2012), 140.

¹⁰⁹ *Ibid.*

If capital time requires the rhetoric of stuck to shame, to racialize and oppress, what then are our options for creating, sharing, and amplifying alternative narratives? How do we think about the person using drugs, not as stuck, but as living and moving and being? Not only are people who use drugs routinely stigmatized through policy and discourse, but they are held captive to this imaginary that marks opioid use as wasted potential and squandered futures. Stories of perseverance, underwritten by the neoliberal appeal to advancement, re-establish meritocracy within the confines of the body, marking difference and demanding legible participation in capital constructions of social good. We need to move beyond mastery as the site of world-making to envisage an assemblage of experiences, affects, needs, and possibilities that are not contingent on coherency, that do not make demands of futures.

Without a doubt, opioid use has devastated communities across the U.S. (and beyond, of course), causing harm within individual and social bodies alike. It *does* disrupt families, lead toward economic duress, and inhibit possibilities for material flourishing. However, compulsory recovery discourse, motivated through pathologizing logics, offers only one way of understanding and reporting on opioid use. The harm of drug use is rhetorically overexposed in order to conceal the sources of intentional violence encouraged through capitalism and its influence on the imaginaries of its people. Under this coercion, we are trained to understand drug use through racialized dichotomies, to classify into diseased or criminal parts, to see as spectacle. We should desire a radical imaginative upheaval, not only to serve people who use drugs in their material needs, but to undermine the racialization of all drug use, to unsettle our deeply embedded cultural attachments to health, and to reject shame as a hermeneutic of the body.

During my years at the Alliance we had an HIV outbreak in a neighboring county. At that

time I was told anyone could receive free testing or a starter pack of needles, that they didn't need to meet any requirements or fill out any forms. Often these prerequisites would drive some people away. Men would come in for anonymous testing only to learn they first had to disclose certain criteria: they had sex with men, used drugs intravenously, or shared a needle. The questions were meant to direct and manage our funding, but I watched as some people, stung by the implications of shame, turned around and walked defeatedly out the door. During the HIV outbreak, however, we broke with protocol. We gave people fast, free tests and sterile equipment without question and almost immediately these actions stymied the spread in our and neighboring counties. By suspending our attention on protocol (funding and forms) to attend to the acute present moment, by privileging material need over positivist perspectives, and by changing systemic behavior rather than require change in individual behavior, we protected one another, even into an unknown future.

Human lives happen within polyvalence, within a humming hive of feelings and needs, isolation and relationships. When Alexander Weheliye defines polyvalence he describes the expressions we give to “previously nonexistent realities, thoughts, bodies, affects, spaces, actions, ideas, and so on.”¹¹⁰ Polyvalence as a biomedical term also refers to antibodies, to the body's fight against pathogens, to the scene of multiple adaptations and life finding its way, even in the grittiest moments. The state invades the body under the guise of care, but its true aim is capital—production and profitable futures. By analyzing and challenging the language that makes this possible, which means not only exposing the pathogen but tracing its mutation under the skin, we might begin to attenuate our investment in health analytics and our attachments to the body as the site of knowledge. The project is endless, but that's the point. This work refuses

¹¹⁰ Alexander Weheliye, *Habeas Viscus: Racializing Assemblages, Biopolitics, and Black Feminist Theories of the Human* (Durham, NC: Duke University Press, 2014), 46.

predictions on the future and turns instead toward process, the acute care for now, for this moment.

I believe capital wants to stake claims in futures by coercing us into scripted notions of productivity and labor. *But also*, José Esteban Muñoz’s futures consist of aesthetic desires that give life to our current aches and hungers.¹¹¹ In that way, the future stokes desire, but that desire can be manipulated by capital (slow death) or attuned by the aesthetic (utopia). The multiples. Within the opioid epidemic in particular, the temporal nature of drug use, addiction, and recovery is buried under the logics of productivity. Crucial to our work in downtown Eugene was the refusal to place recovery over current need. Meaning, it was more important to see a participant in the moment, to offer some burnt coffee and sterile needles and equipment, than it was to demand recovery, even if recovery was still our hope. Studies have shown that people who use syringe exchange program are five times more likely than those who don’t to enter treatment.¹¹² They are three times more likely to stop using drugs altogether.¹¹³ By instead insisting on present care, we allow what is on the horizon (our futures) to illuminate our world without demarcating prescribed paths. By caring for the moment, participants will return for more services, despite relapse. They will begin to associate care with respect, attention, and desire, rather than expectation. Hopefully, over time, this work silences shame and diminishes our internalized pressure to perform health and optimism. Instead, we can hold precarity and vulnerability alongside possibility.

¹¹¹ José Esteban Muñoz, *Cruising Utopia: The Then and There of Queer Futurity* (New York: New York University Press, 2009).

¹¹² “Summary of Information on the Safety and Effectiveness of Syringe Services Programs (SSPs),” Centers for Disease Control and Prevention, last modified May 23, 2019, www.cdc.gov/ssp/syringe-services-programs-summary.html.

¹¹³ *Ibid.*

Recently I was re-reading Gloria Anzaldúa’s essay on the mestiza consciousness for a lesson plan, preparing to lead students through a discussion on ways of thinking that resist mastery and adapt to uncertainty. I’ve read it many times and in many spaces, but it was on this last read I noticed her attention to shame. “Our vulnerability exposes us to shame,”¹¹⁴ she writes. I often think about the difficulty of vulnerability, how it requires an openness to the world, even as the world hurts and harm us. In navigating these pains, I could tamp myself down, protect myself from the pain, from the narratives that want to reinforce my failures and delays. But, in the end, my narrative is always only partially mine. I may never find myself a full agent, capable of saying I now know better. But I can work to diminish harm, in moments, in fits and starts. Or, as Anzaldúa recently reminded me: “The mestiza consciousness—and though it is a source of intense pain, its energy comes from continual creative motion that keeps breaking down the unitary aspect of each new paradigm.”¹¹⁵ By breaking down the unitary, we allow the multiples to surface, which means more than just gaining access to specific knowledges. This intense pain but creative energy is to feel yourself take up space in the world and as an agent in worldmaking.

Erin Rand similarly outlines a hopeful plan for revising shame into an attentive nascence, one that participates in collective queer worldmaking. “The depth and power of shame as a shaping element of queerness make it especially ripe for reinscription” and its “potential resides precisely in its uncertainty . . . all possibility.”¹¹⁶ Reinscription, as in revision. Because Rand resists the temptation of reversal, of undoing shame through pride alone, and instead harnesses uncertainty, she breaks us open toward wonder, toward imaginary innovation and renovation. She makes the unknown space, however uncomfortable, a space of creativity. We don’t

¹¹⁴ Gloria Anzaldúa, *Borderlands* (San Francisco: Aunt Lute Books, 1999), 110.

¹¹⁵ *Ibid.*, 102.

¹¹⁶ Erin J. Rand, *Reclaiming Queer: Activist and Academic Rhetorics of Resistance* (Tuscaloosa, AL: The University of Alabama Press, 2014), 138–39.

necessarily overcome the pain, or even fully transform it. “Reinscription” does not imply comprehensive transformation but the slow reworking of the body—a singular body, a social body, a body of text.

At times, I am so done with shame, with thinking and writing about it, with living in its shadows. And in other moments, I’ve barely scratched the surface of shame and the way it inflects our epistemological and emotional selves. “I didn’t yearn for anything but privacy because it is an embarrassment to be a wound in public.”¹¹⁷ I keep returning to this poetic line by Billy-Ray Belcourt. When I say that I want to explore the contradictions of the body—that it is both private and public, that it both offers meaning but has been violently made the producer of meaning—I think about how impossible these tensions seem. But there is also the effort to embrace tension, the intense pain, for the purpose of creative criticality, for de-mobilizing the dominant narratives that structure our literacies around the body. We may find ourselves in a state of crisis, but we take up the radical invitation to dream otherwise.

I should have known. When I say these four words return to me over and over, that I live inside their endless ache, I’m talking about rhetoric’s recursivity, an echo of language that replenishes some fortified idea of my failed self. And while I’ve often thought of these four words as entrenching a path, compounding a trail into its own dust and wear, I remember to look up, to scan the horizon and let its light orient me. I remember the Denali rangers telling M. and I to walk side-by-side. There’s no trail system in the park, so backpackers are asked to walk next to one another instead of single file to avoid striking a path where there should only be wild. Such a small shift in practice protects the landscape’s delicate ecosystem.

“Our vows didn’t say anything about staying married,” M. explained, “just that we would

¹¹⁷ Belcourt, *A History of My Brief Body*, 40.

stand by one another through all of life's changes." This is what rhetoric can do—it stabilizes meaning even as it modifies meaning. Revision rather than punctuation, creativity over optimization. This is the renewal of a promise through upheaval. This is a commitment to process. This is desire, the skin's fractal that allows us to feel ourselves as possible even in the ruins. It is a way through shame.

It's been ten years since coming out over our salmon dinner, five years since M. walked me down the aisle when I married my wife. I texted him recently to tell him I think I'm also trans. He responded with a bitmoji waving the pink and blue flag. One of my best friends now, I still balk and hesitate about sending him the text. I don't want to come out again. I don't want to go through my list of people again, explaining myself. Explaining my body. Explaining my long delay. None of it alleviates the failure. I resist the process even as I know—from pained experience—to immerse myself in its mess. Rilke writes:

We alone
fly past all things, fugitive as the wind.
And all things conspire to keep silent about us, half
out of shame perhaps, half as unutterable hope.¹¹⁸

A different translation of his elegy offers "secret hope" in that last line, but I like "unutterable" better, as it suggests the undecipherable, what cannot be tidied into language. Rilke encourages us to embrace the unknown, welcome failure, and in those acts loosen our demands on certainty. My life brings heat-waves of shame because of my reiterating failed attempts to know the world and my place in it. Only through feeling have I come to realize that the world (and my queer tenancy) does not require transcription—with its elite knowledges and mastered lines—but messy translation. In a significant pivot, *secret* can become *the unutterable*.

¹¹⁸ Rainer Maria Rilke, "Second Elegy," *Duino Elegies and The Sonnets to Orpheus*, trans. Stephen Mitchell (New York: Vintage, 2009), 13.

2. Painfully Shy: Trans Feeling and Quiet Refusals

*“He thought about the difference
between outside and inside.
Inside is mine, he thought.”*¹¹⁹
—Geryon

Geryon is a shy boy. “Everything about him” is red,¹²⁰ including his small wings that he binds under a leather jacket. But he never flies. Zipping the jacket to his throat, Geryon is cautious and withholding, a diffident animal with mythological roots going back more than a millennium as the beast once slain by Herakles to fulfill the tenth labor. However, in *Autobiography of Red* Anne Carson transports Geryon to modern-day suburbia, reviving him into a creature of complexity, interiority, and queer desire. “Everything about him was red” implies otherness, summons blush and flushed cheeks—shame. Carson’s Geryon is a young boy-monster, but also an artist writing his autobiography and living with his single mom and an abusive brother. In Carson’s rendering, Geryon is a tender soul misunderstood by his world and quiet in his desires. He is not killed by Herakles but forced to confront his red alterity under the scope of riven romance and failure. Herakles is Geryon’s first love, and he breaks Geryon’s heart.

Carson herself describes *Autobiography of Red*, this novel-in-verse, this poetic hybrid, as

¹¹⁹ Anne Carson, *The Autobiography of Red: A Novel in Verse* (New York: Vintage, 1998), 29.

¹²⁰ *Ibid.*, 7.

a buried box of song lyrics, lectures, and scraps of meat. “You can of course keep shaking the box,” writes Carson. “Here. Shake.”¹²¹ A shaken box disassembles while it also collates, bits broken into new patterns or sifting into smaller fragments of the whole. But the whole is never lost. Rather, the more one shakes the box, the more abundant the possibilities, colliding in collaged disorder. An assemblage. Of course, with *Red*, the pages are static but Carson aggregates different genres and forms—poetry, story, archive, even pedagogy. These diverse forms signal our need for multiples. In the introduction, for example, Carson begins with a lesson in discourse: “What is an adjective? Nouns name the world. Verbs activate the names. Adjectives come from somewhere else. . . . These small imported mechanisms are in charge of attaching everything in the world to its place in particularity. They are the latches of being.”² We need the multiples, the particulars, the box of scrap meat. We need these scraps to move beyond the names and nouns, to evince life as more than just explained, but felt.

Geryon is a shy boy whose quiet registers we see in moments large and small, such as when he arrives to his first day of school: he is “focusing hard on his feet and steps. . . . He could feel his eyes leaning out of his skull.”¹²² As a boy, school children running around him, “He stood on his small red shadow and thought what to do next.”¹²³ And after he meets Herakles as a teen, he responds coyly to his mother asking after this new boy: “He was seated at the kitchen table / with his camera in front of his face adjusting the focus. He did not answer. / He had recently relinquished speech.”¹²⁴ Or when Herakles criticizes his artwork: “*All your designs are about captivity*. . . . Geryon watched the top of Herakles’ head / and felt his limits returning.

¹²¹ Ibid., 4.

¹²² Ibid., 23.

¹²³ Ibid., 24.

¹²⁴ Ibid., 40.

Nothing to say. Nothing.”¹²⁵ He is not fully seen or heard by Herakles. Rather, he is overexposed under the hot spotlight of wrongful attention. Herakles sees only Geryon’s difference; and in urging him to overcome the pain of that difference, Herakles pathologizes Geryon’s handling of his pain, how he expresses and holds it.

For Geryon, his shy approach to Herakles, to his work, his family, though read as passivity, is actually engagement, even full enrapture. Shy is how Geryon focuses and how he makes art. Shy is as much a sensation (eyes leaning, limits returning) as a strategy (the wondering and relinquishment). To endure the vigilant, taxonomical world, as we all must, shy not only helps him navigate that world and evade its spotlights, but to also feel himself an agent of his own meaning and making. Shy mediates the felt borders between inside and outside. When outside is brutal, even poignantly brutal as a breakup can be, we protect the inside at all costs. When we learn that outside wants to crush us, inside invites us to sink in and seek respite. When outside wants to commodify us, inside shelters us in wonder, where we make our own meaning and our own worlds. *Inside is mine.*¹²⁶

Geryon is writing his autobiography (Geryon is “red,” thus the *Autobiography of Red*) in which he both revels in and struggles against the flawed uses of language. As a boy he obsesses over words, their etymological origins, hermeneutical prospects, platonic ideals. He wants to know everything, to get it right: “The word *each* blew towards him and came apart on the wind. Geryon had always / had this trouble: a word like *each*, / when he stared at it, would dissemble itself into separate letters and go.”¹²⁷ Words trouble us because they simultaneously hold and lose meaning; if language makes us, then language can also unmake us. “Each” is not a noun, adjective, or verb, but more transitory, an adverb or pronoun. It offers everything and nothing.

¹²⁵ Ibid., 55–56.

¹²⁶ Ibid., 7.

¹²⁷ Ibid., 26.

One cannot blame young Geryon for his dogmatic approach to the slippage of language, how he longs to press the unknown into linguistic bits of sense, how he confronts (and avoids) his otherness with encyclopedic austerity. He tries to understand his world, and his red place in it, intellectually. But Geryon is still a mess by the end of *Red*, all fucked up from heartache, his autobiography still unspooling itself. As readers, such narrative irresolution might discomfort us, but we know, deep down, that this is the truth of it. This is actually how life is lived and felt. Resolution is less important, for Carson and ostensibly for all of us, than process—how Geryon gets by, through what means, and why he so often chooses the path of interiority and introspection.

I'm interested in the affect of shyness for what it might teach us—not about the self or shy person necessarily—but about process, how to refuse resolute rhetorics in a world named by nouns. I want to protect Geryon, but also those of us with our wings bound under leather jackets. I want to show how shy gives us space to express ourselves without having to explain ourselves, that we might make our designs about captivity if we so wish. And when confronted on it, we might find peace in having nothing to say. Nothing.

I'm interested because as a shy person, I was taught to regret and repent of my shyness. I was encouraged to master it, to overcome it for the sake of propriety. This was moralism cloaked in the rhetoric of disclosure, that to share is to invest in communal wellbeing. But shyness is integral to my sense of self; shy is a deep feeling in which I am burrowed, but also a move I make. I will first define shy contextually before outlining its histories of pathology; and then I explore shyness as a practice, how it might clear alternative paths for navigating the demands of a capitalist ecosystem, especially as those demands look like calls for self-optimization, mastery, sociality, aspiration, and judgment, and especially at the scene of trans need.

In many ways, this chapter will practice shyness as I forgo hard arguments to favor storytelling and description. My descriptions, of course, rise out of the particularity of my own experience and embodiment, but this is an inescapable limitation, and is indicative of emotion anyways, that our affects are our own, shivering sensations under our singular skin, even as they are also transmitted and social. My descriptions might fail, so tied up as they are in the nuances of my own body. But failure can be celebrated as an invitation toward *more*. And of course, in this way, is not failure at all. Finally, similar to the other chapters, I braid my own story of shy into this analysis, hoping to show how shy, as punctured feeling and as gentle fight, provides refuge.

We start with an important preface: shy is many things and resists universal catalogization. Rather, our vocal registers and emotional offerings are gendered, classed, and racialized. Boys can be shy and quiet; their interiorities are read as introspection and tenderness, while shy girls are withholding, cold, aloof. And this is, of course, solely a Western take, an American take, on shy. Who can speak up and when? Who is expected to participate and when? How do we mold our intonations, and for who? When do we consider talking as participation and when do we interpret it as interruption, distraction, or killjoy? Who is too loud and who is too quiet? When does silence equal death and when does silence protect life? These questions are important ones, as they expose the stratifications of shy into social and politicized manipulations of the body. They, taken together, reveal the need for multiples, for a shaken box, one that honors feeling as much as language, presence as much as praxis. With that said, how then do I proceed to define shy? With calculated particularity.

Shy is to go unscripted in a world demanding we explain ourselves. This is because to *be* shy is to *feel* shy. Shy is to occupy a body often, if not always, inundated and overwhelmed by

the vibrations of our social planet—to absorb these tremors through our porous skin. We might feel pressed, breaking through seams and into the very edge of ourselves, or just plainly soaked to the bone. We might feel exposed or invisible, seen too deeply and yet never enough. We might index this as anxious, but not always. Because sometimes shyness feels like desire, like having a crush and reveling privately in want without resolution. It might also feel like wonder, to marvel, to withhold and let a moment stun in silence. To feel shy is to feel deeply—sensitive, attuned, and aware. Vigilant and curious, replenished by privacy, shy gives us rest in our interior worlds, especially as our exterior lives are so marked by disclosure, identification, and determination. Shyness is inherently attuned to process, to lingering and long pauses, to wait and witness as we withhold our perspectives.

Shy is both felt and made. What if by outlining shy as a form of felt creative charge, we expand its political, social, and aesthetic possibilities? What if shy is both internal and external, an interior site of sensitivity, a place that hums anxiously but expressively, and also a temporally inflected response to the motions and forces of an overbearing societal vibration? Shyness is not static. Just as it restrains, it engages. Just as it opts out, it listens in. “Painfully” and “shy” are so often locked together we forget how pain helps us, how it triggers receptors and elicits the nerves to alert of incoming harms. In this way, shyness is particularly active and attuned, a learned practice of averting danger. It is reading the room—the sensations of others taken through the skin. The wallflower engages through seeing and feeling rather than language. While our shyness is often interpreted as removal, us quiet kids are actually in the thick of it.

For these reasons, shyness breaks space in our political moment in which queer folks are thrown under the hot spotlights of sensationalized attention. Shyness—through pause, diversion, withholding, but also witness, listening, and holding—inspires ways of describing our felt queer

lives other than by thresholds (those damn closets) or arrival. To be clear, I'm testifying for shy as only one of those multiples, one scrap of meat, one path among many, as a way to thwart "single-note portraits of oppression and traumatization" and to blunt the power of dominant, spectacled narratives, those that rely on "celebratory tokenization and hypervisibility."¹²⁸ It is difficult to walk this line between seeing (bearing witness) and exposing; but part of this difficulty might have us practicing shy as a way to walk the line, to help us realize ourselves as both agents, moving and making according to our wills, but also subjects—forced, coerced, and cajoled into narratives not our own. Meaning, we can do trans studies without a telos. Indeed, this chapter is a call to do so.

While readers of *Autobiography of Red* are told Geryon is a monster, we never know if it's true, whether those tucked wings and red skin are literal or an allegory, an embodied projection of shame and alterity. But not knowing the "truth" of Geryon's body is irrelevant to the poetics at hand, because it is precisely this doubt that makes Geryon. He's a wallflower; despite all his body says and reveals about him, it is not the scene of his full meaning.

Once Geryon had gone
with his fourth-grade class to view a pair of beluga whales newly captured
from the upper rapids of the Churchill River.
Afterwards at night he would lie on his bed with his eyes open thinking of
the whales afloat
in the moonless tank where their tails touched the wall—as alive as he was
on their side
of the terrible slopes of time.¹²⁹

Geryon takes in a whole world of meaning, his small body soaking into a singular moment as he pays witness to these beautiful animals, these captive belugas both full of life yet entrapped in dense tanks. Geryon is in pain. Some of his pain is heartache and trauma; but his sensitivity and

¹²⁸ Hil Malatino, *Side Affects: On Being Trans and Feeling Bad* (Minneapolis: University of Minnesota Press, 2022), 1.

¹²⁹ Carson, *Autobiography of Red*, 90.

shyness are also an ongoing response to alterity. Little Geryon, standing under the enormity of the whales but separated by a glass plane, recognizes himself in the reflection—he is just as naked, captive, and surveilled, with time slipping away. He is just as alive but trapped. Vibrant but exposed.

What options exist for young Geryon? And for us? Are we only heard (which is to say, legible) when we overcome and transform our alterities to adopt the narrative of mastery? Are we only doing well (whatever that means) when we are perceived as on our way to our best, most authentic selves? Are we only responsible citizens when we disclose our interiorities? As we saw in the first chapter, capital calls us into aspirational discourse, into narratives of overcoming, heroic tales of victory and survival, the body made over and the self made better by its failure. We are told, in inundating and constant ways, that meaning emerges from what we can say we've conquered. But this narrative is taxed.

When, at the end of *Autobiography of Red*, Geryon finally strips his jacket and flies, one might easily misinterpret the scene as the moment of proverbial liberation, that Geryon has overcome his heartache, or that he has transcended the queerness of his body to exploit its utility. However, this reading would be cursory. Just prior to flight, Geryon has terrible sex with his ex, Herakles—that kind of relapsed hookup that leaves one stung with regret, what Geryon himself calls degrading.¹³⁰ Our boy is still a fuckup. So, it's not that Geryon has to accept himself to find freedom. And it is not that Geryon has to prove his ability to fly. Instead, alone and adrift, Geryon describes himself flying as just a “black speck raking his way” as “a memory of our beauty.”¹³¹ A small being against the fiery backdrop of an unstable world, flying is not liberation. It is just a moment in time, one that convenes a temporal relationship between his body and his

¹³⁰ Ibid., 144.

¹³¹ Ibid., 145.

life. A black speck, Geryon pierces a moment that contains nothing and everything. He is nothing and everything.

My own red autobiography is not new. I take comfort in this, how ordinary it all is, my short hair and skinned knees. I was a twelve-year-old tagalong wearing my brother's threadbare tees with converse sneakers and baggy shorts. He and his friends designated me lookout whenever they smashed a mailbox, and they let me follow them down to the swimming hole, where we threw big bits of white bread to the bluegills. The boys would strip their shirts and jump into the warm water in jean shorts, jostling and pushing one another under the amber surface. I waited on the muddy shore, because as much as I wanted to join, my parents had forbidden such shirtless swimming earlier in the summer. I learned difference early. I learned difference as ache and want. Jules Gill-Peterson writes, "being trans in a cis culture means that too many first encounters with oneself come through the shame of exposure."¹³² Our encounters with ourselves, or our literacy of the self, is perilous, inscribed early on and in reiteration by external opinion and expectation.

I learned, then, not to ask, to just lift my cotton shirt over my head while shooting baskets in the privacy of my backyard, where I built and inhabited a whole world of my own imagining. This is what I was doing when a classmate stopped over unannounced, a colorful birthday invitation clasped in her hand. Topless, with the basketball nested under an arm akimbo, I burned hot with a shame I could not translate. I felt how the cusp of adolescence made my body strange, volatile, othered, even as I did not yet understand why. We remember what Sara Ahmed said of shame, that its "very physicality—how it works on and through bodies—means that shame also

¹³² Jules Gill-Peterson, "Feeling Like a Bad Trans Object," *Post 45* (December 2019). <https://post45.org/2019/12/feeling-like-a-bad-trans-object/>.

involves the de-forming and re-forming of bodily and social spaces.”¹³³ As a child, I felt the ways my body informed and deformed my environment, how meaning stuck to the smallness of me, how I was giving the world something to read—my small, boychild body as discourse. Indeed, is the shy person not often denigrated as *hard to read*? Once my body became the site of discourse, buzzing under oversized T-shirts, it became estranged from me, its narrative not fully mine. I was always a quiet child, but then shyness grew into something more than the scene of the conscientious. Shy developed in me and I developed in shy as a way to wander quietly and safely through a world demanding coherence.

The shy person is not only criticized as *hard to read* but *painfully shy*, as one who’s tender and troubled orientation to their social worlds also destabilizes those social worlds by refusing the traditions of inscription. “Nothing to say. Nothing.”¹³⁴ The rhetorical marriage of “painful” to “shy” is so common, so casually uttered, that we might neglect to inquire what “pain” denotes. If to be shy is to be in or cause pain, what then is the source of this pain? And why do we find it painful to be in the presence of shyness? I suspect the pain in “painfully shy” emerges from our social training around shyness, and our discomfort with uncertainty, the unscribed, the unresolved. As we saw with dominant depictions of drug use, pathology expands beyond the substance itself. It is not the drug but the user’s retreat into the interiors, their privileging of pleasure or solitude or secrecy, that renders them a social threat. Derrida asks what is it that we hold against the user of drugs? “He cuts himself off from the world, in exile from reality, far from objective reality and the real life of the city and the community; that he

¹³³ Sara Ahmed, *The Cultural Politics of Emotion* (New York: Routledge, 2015), 103.

¹³⁴ Carson, *Autobiography of Red*, 55–56.

escapes into a world of simulacrum and fiction.”¹³⁵ We might also be describing a wallflower.

In order to inspire alternative visions and practices for shyness, those that imagine beyond a history of medicalized pathology and cultural disavowal, we’ll first need to examine those histories to understand, in short, why shy is painful. As we explored in the last chapter, by nature of living within inescapable capitalism, our felt relationship to time is manipulated through narratives of optimization and aspiration. To be a good citizen is to secure a productive future and to protect that future through healthy choices and happy attitudes. The addicted subject must be en route to recovery, must articulate his trajectory as linear, as proceeding from rock bottom toward cure, toward clean. This performance is public and discursive—an external articulation of overcoming internal addiction, through which one gains legible status for care. But this trope of overcoming reinscribes the American Dream through the body; it insists hard work secures peace and prosperity as the body becomes “healthier” and more authentically itself. It pathologizes private (interior) effort and desire by naming illegible any other narrative than the aspirational.

The dominant narrative forced on trans folks mobilizes this same rhetorical construct. While we may be slowly spurning the language of disorder (and only is this true in privileged spaces), the trans subject is still situated on a path toward the cured state. But rather than sobriety serving as the telos, it is the fully gendered self—euphoria as a static destination achieved through labor and medical assistance. Malatino writes, “The future is always better than the present, a site of promise, deliverance; transition is framed as a period of trial and potential duress that is rewarded with the experience of harmony, good feeling, corporeal comfort.”¹³⁶

¹³⁵ Jacques Derrida, “The Rhetorics of Drugs,” in *High Culture: Reflections on Addiction and Modernity*, eds. Anna Alexander and Mark S. Roberts (Albany, NY: State University of New York Press, 2002), 25.

¹³⁶ Hil Malatino, “Future Fatigue: Trans Intimacies and Trans Presents (or How to Survive the Interregnum),” *Transgender Studies Quarterly* 6, no. 4 (November 2019): 640.

While neither Malatino nor I are trying to undermine euphoric possibility—our euphoric moments help us survive and give us joy—I *am* trying to pivot from a narrative of mastery and destinations to instead linger in process, in creative potentiality, in adjectives and assemblages. Part of being in process is to come up empty-handed, to regress, to mess up, to stall in mediocrity and the everyday pathos of being alive and having a body. This where we live most of our lives, in the messy slippage of a day, and yet it is what we find most often pathologized.

Shy rarely receives its own indexical entry (our first clue of its marginality), so often is it conflated with other affects, folded into dominant emotions such as shame and anxiety. Eve Sedgwick, for example, diagnoses shyness in those who find themselves ensnared also in shame: “Some of the infants, children, and adults in whom shame remains the most available mediator of identity are the ones called (a related word) shy.”¹³⁷ For Sedgwick, we are meant to understand shyness as a response to shame: shame hushes us, scolds us into quiet corners, sealing us into painful circuits of exposure and withdrawal. But by conflating shy and shame, not only is shyness reduced to a behavioral response, it conceals the inverse dynamic, the reality that one is unrelentingly shamed for being shy.

As we explored in the last chapter, good citizenship is defined through social and economic participation in public exchange. If drug use is an anti-social habit, then shyness is the condition of putting the self before our social networks, of privileging interiority over shared discourse. But as we already know, it is not drug use that creates anti-social behavior; it is the pathologization of addiction that creates social estrangement between drug users and non users. Methadone clinics are literally relegated to the outskirts of town, forcing folks to take multiple bus lines, to miss work. This to say, the user is not the estranging force, but the one estranged.

¹³⁷ Eve Kosofsky Sedgwick, *Touching Feeling: Affect, Pedagogy, Performativity* (Durham, NC: Duke University Press, 2003), 63.

Similarly, shame doesn't inflame shyness; shyness is established as a shameful mode of being.

The pathologization of shyness through the past century, according to Christopher Lane, led to its current standing in the *DSM* as acute social anxiety.¹³⁸ He argues we've "narrowed healthy behavior so dramatically" that any emotional blemish or hiccup is medically classified as aberration in need of intervention. The result, or "sad consequence," writes Lane, is the "perhaps unrecoverable loss of emotional range."¹³⁹ I would add that such ongoing pathologization of shy originates, at least partly, from another form of anxiety altogether—cultural discomfort around uncertainty, compounded by capital's investments in a normalizing society (see Introduction). "Shy people unsettle others because they unsettle the tacit conventions of social life,"¹⁴⁰ offers Joe Moran. It is uncomfortable, even painful, to not know and to linger in uncertainty. We therefore ask the quiet person to disclose themselves, to put us at ease. But this presumes and fortifies an essentialist take on how and why we are in relationship, that knowledge (of ourselves, of one another) emerges singularly from discourse, that we might *know* someone by their spoken divulgences, and that *knowing* someone takes precedence over other relational modes (seeing, holding, witnessing, attending). I believe we are trained into these habits, that our discomfort around opacity is not innate, but cultivated in order to spur forward what Michel Foucault famously deemed the will to know, that motor of a capitalist state.

"Perhaps some element of shyness, as our modern-day sociobiologists suggest, makes evolutionary sense. But surely its most human quality is that it often makes no sense at all."¹⁴¹ Though we believe that to be human is to be a sense-making animal, we find ourselves all tied up in the mythos of this claim, the word "each" blowing into pieces. What makes us human is

¹³⁸ Christopher Lane, *Shyness: How Normal Behavior Became a Sickness* (New Haven, CT: Yale University Press, 2008), 4.

¹³⁹ *Ibid.*, 8.

¹⁴⁰ Joe Moran, *Shrinking Violets: The Secret Life of Shyness* (New Haven, CT: Yale University Press, 2017), 4.

¹⁴¹ *Ibid.*, 13.

partially our lack of sense-making, but then also our unrelenting desire, nonetheless, to clamor toward knowledge. While our imaginations are attracted to or incited by wonder and desire, we are often also coerced into Foucault's will to knowledge. He argued that it is the will to know, capital's insistence on epistemological mastery, that has deepened our investment in social category.¹⁴² Christian Wiman outlines the same conundrum when he writes that, "Just as we plant the flag of faith on a mountain of doctrine and dogma it has taken every ounce of our intellect to climb, our vision becomes a 'view,' which is already clouding over, and is in any event cluttered with the trash of others who have fought their way to this same spot. Nowhere to go now but down."¹⁴³ As capital forms and deforms our imaginary spirit, it culminates in the notion that all knowledge is ours for the taking, that we should all be *knowers* rather than *learners*. We have been trained under a relentless call to produce and achieve, to accumulate and grow.¹⁴⁴ But such demands stigmatize process and pathologize not knowing. And nothing inhibits us in our daily lives quite like stigma, as anyone working syringe exchange or doing drugs will tell you. If we are asked to navigate complexity by diminishing (rather than sustaining) complexity, then we internalize shame as our failure to do so. This training starts early.

I've occupied a shy body for nearly four decades now. As a child I was often asked to "make my shy face." I'd bow my head but look upward, performing what I was told about shyness—it is demure, infantile, and pained. But the adults thought it was cute, this obliged offering of interior feeling. I never grew out of shyness, just further into its sensitive registers to deflect, like Geryon, wrongful attention. Shy's pathology has as much to do with age as it does

¹⁴² Foucault, *The History of Sexuality: Volume 1, An Introduction*, trans. Robert Hurley. New York: Vintage Books, 1978), 77.

¹⁴³ Christian Wiman, *My Bright Abyss: Meditation of a Modern Believer* (New York: Farrar, Straus, and Giroux, 2013), 89.

¹⁴⁴ D.M. Keeling, "Of Turning and Tropes," *Review of Communication* 16, no. 4 (2016): 318.

disclosure. As the child ages and is expected to outgrow their shyness (and other childish behaviors), we hem “painful” into shy to account for this aberration, for this grown human still refusing legibility, this child still under the surface.

One first learns their shyness through the rhetoric of adults, cloaked as an explanation or apology. “She’s so shy around strangers,” I heard repeatedly as I tucked myself behind the legs of parents. When I was young, they indulged such dodging and blushing; but as I got older, they pushed me by my shoulders, said “don’t be rude.” Kathryn Bond Stockton tells us there are ways of growing that are not growing up.¹⁴⁵ The queer child, she writes, disrupts common conceits of development, that it is linear and progressive, to instead grow sideways. For Stockton, the queer child is not just the gay child, but one whose “unruly contours of growing” defy preordained paths into adulthood.¹⁴⁶ The shy child is assumed to outgrow their shyness, because as adults we must nurture our social and therefore economic worlds. We are required to participate, to create families and foster domestic spaces that allow others to gather. “Where do our stories come from?” asks Jill Stauffer in her book on loneliness. Of course, from our sense of self and moving through this world, she responds. But our stories also come “from what other people say to us, from the values and truths produced by whatever cultures surrounds us, and from unspoken affective interactions between persons living alongside one another.”¹⁴⁷ Stauffer, in these simple lines, demonstrates how language creates structures of power through which feelings are transmitted. Latches of being—language makes our worlds. To be told you are shy as a child is to be taught that your being, your sense of self, is a composite of behaviors, behaviors untolerated past adolescence. Adulthood requires sociality and participation, the labor of

¹⁴⁵ Kathryn Bond Stockton, *The Queer Child, or Growing Sideways in the Twentieth Century* (Durham, NC: Duke University Press, 2009), 11.

¹⁴⁶ *Ibid.*, 13.

¹⁴⁷ Jill Stauffer, *Ethical Loneliness: The Injustice of Not Being Heard* (New York: Columbia University Press, 2018), 10.

disclosure, education, and community-building. Shyness threatens each.

If we failed to grow up into gregariousness and instead we grew sideways into quiet uncertainty, then shyness continues to signal failure. We failed to fulfill our roles as social nurturer, as movers and shakers, to instead exile ourselves within the self, plastered against a wall while life happens, stalling or stalled out. Derrida's words echo against those walls: we recognize the wallflower or the user of drugs, the shy kid or shy adult, the quiet trans masc patient recovering alone in a hospital bed, as a threat because "he cuts himself off from the world, in exile."¹⁴⁸ Condemned for not aspiring toward our best, healthiest, most authentic (most gendered) self, we are scripted into liminality; we are *not yet*. This space of *not yet* makes living the questions a punishment. But illimitable energies, desires, motions, vitalities, pleasures, and connections convene to shape us, Stockton argues, so even as we develop we also falter. We are as much ourselves in the faltering. By embracing the shaken scraps we might abandon the telos of re/productive (capital) time to instead linger in the delays and deferrals, to shelter as the queer child shelters.

When Dean Spade wants top surgery without expressing name change or pronoun shifts, without a history of hormone replacement therapy, he finds himself forcibly delayed, evidence that time is never on our side, even when we're actively trying to unstick ourselves. Attempting to secure low-cost counseling (therapist letters are still required for mastectomies), for example, Spade must design aspirational accounts of his transgender experience, that he desires to advance from one gender to another, the one aspired. "In order to obtain the medical intervention I am

¹⁴⁸ Derrida, "The Rhetorics Drugs," 25.

seeking, I need to prove my membership in the category ‘transsexual.’”¹⁴⁹ As he explains, he must claim a desire to “fully” transition before he can start any “alteration.” While “fully” implies a teleological end goal, one anchored in coherence, “alteration” implies a pivot away from an original. Pressured to legitimize binary gender categories, Spade is withheld from the care he needs because our medical industries center only teleological notions of the body. His providers require discursive proof that he occupies a disjunctive, dysphoric state, and wishes to overcome those negative feelings for the positive. “In order to be deemed real, I need to want to pass as male all the time, and not feel ambivalent about this.”¹⁵⁰ Spade’s own voice (both assured and uncertain) will never provide sufficient proof of his self. More than a decade after Spade, I occupied the same place.

Propped on an exam table, “mommy-makeover” pamphlets on the walls, I dangled my feet and sunk into a thin paper vest, what my wife called my shepherd shirt. It opened in the front and had enough excess that I could pull the paper around my chest like a robe, concealing what I inevitably had to share. “So, tell me about your ideas on gender,” the doctor asked. He was earnest. The question came after a series of others about my family’s health, my exercise habits, whether I did recreational drugs. I knew to anticipate this question. Whereas others might have memorized and practiced their measured responses, I instead sat there silent, witnessed the minutes mount, unable to find my way outside of my own honesty—I had no fucking clue.

The exam room was stark and small. My surgeon sat on a stool at my feet waiting, my wife in the corner attentive. Uncertainty brimmed through the loose scree of language as I balked my way through a few unrehearsed lines about fluidity. As I felt illegibility rising and overtaking the small room, I offered some small stones he could hold: “I’m nonbinary. Trans nonbinary. I

¹⁴⁹ Dean Spade, “Mutilating Gender,” *The Transgender Studies Reader: Volume 1*, eds. Susan Stryker and Stephen Whittle (New York: Routledge, 2006), 317.

¹⁵⁰ *Ibid.*, 322.

have a therapist.” Though I apologized for such an acute lack of coherence, I wished my quiet said enough, said “I’m aching for something else.” Said, “can you help me.” Said, “can you help me, not diagnose me, not expect me to feel better.” I thought of all those times working exchange when I gathered boxes of ultra-fine needles and dropped them into a black bag with cookers, ties, and cottons. In two minutes time, we marked the participant’s needs on a half-slip of paper, gathered the items from a shelf, put them in a bag, and handed them off. It’s possible to do healthcare without explanation. It’s possible to provide care ex nihilo. No explanation needed.

My doctor kindly pivoted to ask me what I wanted my chest to look like, but we again fell into similar rhetorical hiccups, as I’ve never considered the multiple ways one might sculpt a masc chest. I also had little practice talking about such vulnerable parts of my body. When the PA arrived late, he caught her up and I witnessed what language does, how he compressed our conversation into cogent bits. Of course he did; she was taking notes. “Discussed treatment options for surgical intervention for circum periareolar mastectomy with possible liposuction bilaterally for gender affirming surgical intervention. Photos taken today. Informed consent reviewed.” Our exchange fractured into medical codes and insurance claims—all that falter was left as detritus.

Hil Malatino opens *Trans Care* in the scene after his top surgery, alongside friends who rallied and sent meals during the long weeks of recovery. He describes his care web and his effort to “unlearn the shame that has been attached to asking for, offering, and accepting help when we’ve been full-body soaked and steeped in the mythos of neoliberal, entrepreneurial self-making.”¹⁵¹ For Malatino, care and shame not only rub up against capitalism, but are, in some ways, informed by it (see the previous chapter, of course). Mastery over the self is not only

¹⁵¹ Hil Malatino, *Trans Care* (Minneapolis: University of Minnesota Press, 2020), 2.

expected in late capitalism, but it generates the newest forms of profit.¹⁵² Just as we cannot escape the saturation of capital, we cannot evade the force of “self-making.” It permeates our ontological narratives; it insists that we exist to overcome and that by (or through) overcoming we are made. Trans feeling has been easily co-opted into this machinery of mastering and self-making, as we are encouraged to think of ourselves and our bodies as *not quite there yet*. But by understanding gender transition and expression under the aegis of capitalism and medicine, we come to view gender as disorder in need of a coherent fix, convincing alteration, and gregarious polish. This is what Spade was getting after.

Conventional addiction narratives insist on similar aspirational scripts. Rather than allow people who use drugs to write their own stories, rehab programs require the troped story of hitting rock bottoms and overcoming the impossible. “Their work is, in essence, semiotic work,”¹⁵³ writes Summerson Carr. Participants learn how to talk about themselves, addiction, and recovery as a way to move through (or succeed in) recovery programs. They learn the language quickly, learn to align themselves linearly within this procession of disclosure and confession in order to be seen as authentic participants. Carr argues that this attention to language and narrative, especially rendered by therapists and certified health workers (i.e., gatekeepers who grant access to crucial services and resources), stems from addiction conceived as “a disease of denial—which afflicts the ability to read and render inner states in words.”¹⁵⁴ The person who uses drugs, then, Carr argues, is understood as already and always divorced from their true sense of self. And it is recovery—from disease and/or criminal behavior—that sends them on their way to their authentic selves. “One discovers,” she writes, “that drug

¹⁵² Social media influencing is an example of how money is acquired through branded narratives of the self-made.

¹⁵³ Summerson E. Carr, *Scripting Addiction: The Politics of Therapeutic Talk and American Sobriety* (Princeton, NJ: Princeton University Press, 2010), 3.

¹⁵⁴ *Ibid.*, 11.

rehabilitation commonly revolves around rehabilitating the drug user's relationship with language. Following linear plotlines that proceed from a denoted dirty past to an anticipated clean future . . . recovery narratives . . . are the most highly valued signs of professional efficacy."¹⁵⁵ This teleological trajectory, codified through "linear plotlines," squeezes knowledge into dogma, into a certainty one must achieve and articulate. Again, we must know ourselves. Again we must explain ourselves, lest we languish in denial, lost and confused.

This gregarious form of discourse continues to dominate our collective imaginaries on what it must mean to be queer, but especially trans—that we must be in motion toward something *more* authentic. When my doctor asked about my ideas of gender, when I offer notes about therapy and pronouns, I'm playing the system back, reading the script to ensure my access to surgery. I continue to wonder if this makes me complicit. I worry it does. But it's an effort to access what I need and to avoid wrongful attention. While historically, "euphoria" circulated through medical-therapeutic spaces as a diagnostic method—patients were perceived healthy through the visage of happiness and effortless embodiment¹⁵⁶—the word has evolved to more generally describe physiological bliss. And, of course, in the contemporary Western imagination, "euphoria" now intimates a gendered telos, the finish line for which our hurt bodies long. "The future is always better than the present,"¹⁵⁷ explains Malatino. Rewarded for desiring and dreaming the good life, we're coaxed toward the promises evinced by Malatino: our best selves, our best bodies beam on the horizon, if only we can first gather the strength to overcome our own ruins and riven bits.

While not critical of euphoria in its material possibilities, I am suspect of it how might be

¹⁵⁵ Ibid.

¹⁵⁶ Christopher Milnes, *A History of Euphoria: The Perception and Misperception of Health and Well-Being* (New York: Routledge, 2019), 8.

¹⁵⁷ Hil Malatino, "Future Fatigue," 640.

used (or is already being used) against trans people. Under the aegis of the medical industry and further compounded by capital, euphoria gets exploited and marketed as outcome, as the desired state and cured condition to dysphoria. Emma Heaney warns us that aspirational narratives of gender, those that tell us being trans *must mean* something,¹⁵⁸ coerce us into believing we must overcome dysphoria in a heroic effort to attain the consummate self. This narrative produces allegories rather than agency; this narrative endorses cured states rather than the mess of ongoing lives. Paisley Currah asks, “Are transsexual people born in the wrong body, or is it the wrong body narrative imposed by a medical establishment and legal architecture intent on maintaining the rigid border between male and female, even as they develop diagnoses and criteria that would allow one to move morphologically and/or legally from one gender to another?”¹⁵⁹

Because us trans folks are often perceived as alienated from or by our bodies, because we might need medical and therapeutic assistance to assuage some felt discontinuities, the “wrong body narrative” games us into overcorrection, into the myth of the mastered body. Such linear and consummative concepts of the self, what Malatino calls “teleological modes of gendered becoming,”¹⁶⁰ neglect process to insist aches are only overcome, never held. We remember how Colleen Derkatch writes, “what it means in contemporary Western culture to be ‘well’ is predicated on the entanglement of seemingly opposed logics [euphoric and dysphoric, perhaps] that together create an essentially closed rhetorical system where wellness is always a moving target.”¹⁶¹ While this is its own issue, these opposed logics, I aim to also bring criticality to the “semiotic work,” as explained by Carr, demanded from queer people.

¹⁵⁸ Emma Heaney, *The New Woman: Literary Modernism, Queer Theory, and the Trans Feminine Allegory* (Chicago: Northwestern University Press, 2017), 6.

¹⁵⁹ Paisley Currah, “Transgender Rights without a Theory of Gender?” *Tusla Law Review* 52, no. 3 (2017): 443.

¹⁶⁰ Hil Malatino, *Queer Embodiment: Monstrosity, Medical Violence, and Intersex Experience* (Lincoln, NE: University of Nebraska Press, 2019), 9.

¹⁶¹ Colleen Derkatch, “The Self-Generating Language of Wellness and Natural Health,” *Rhetoric of Health and Medicine* 1, nos. 1–2 (2018): 134.

Though this aspiration model has been articulated over and over again, I want to be very clear that many trans folks *do* align with its affective and rhetorical registers. For some trans folks, linearity ensures surviving and thriving. This is precisely my point; there can be no singular trans experience. We are a messy assemblage. One might classify my top surgery as just such a pitch toward authenticity. Without a doubt, I underwent such an intense procedure with the notion of *feeling better*, of adjustment or attunement, of being able to stand up straight. I am just interested in other expressions as well, those that maybe move sideways or inwards, how we might bend *authentic* away from straight lines and arrivals. Or, another way to think about this: rather than optimization, rather than making the self better, what if *process* was part of how we thought about transition, trans feeling, and trans being? Within this frame, the telos of trans is not the authentic self. Instead, the telos is a creative current in which we are always, authentically, swimming. Part of being in process, however, means we inhabit feeling not just language. We sink into inchoate sensations rather than the contours of argument.

The anesthesiologist didn't have me count down from ten. Instead she said, "you're going to feel lightheaded." As soon as I was gone I was back, in bed in the post-op recovery room, my doctor's hand on my shoulder. "We need to admit you," he said, as well as some other things about air in my chest, a lacerated lung, but probably no reason to worry. My memories of top surgery are hazy from drugs and trauma, but I hold the moments, rolling them around outside of linear time: the nurses playfully ragging each other, my doctor studying x-rays in the corner, my throat sore from the breathing tube, and my feeble attempt to thank the post-op staff. I was grateful for the warm blanket and ice water, for their care under such duress of vulnerability. But also the nurses confessed confusion around "the language." The nurse who inserted my IV told

me she's afraid of being reported for using the "wrong words." She told me they have her watch instructional videos. She asked me why some patients don't want nipples. "Even real guys have nipples." She used the wrong pronouns, vacillating wildly between "she" and "he" because while the former comes naturally to her—my small body and feminine cheekbones—the latter is her perception of my aspired destination.

My surgeon's practice was just weeks old when I went to see him. Located in wealthy suburbs outside of Pittsburgh, PA, it meant this surgery unit had very little experience with top surgeries; so my body brought us together into this room of novelty (for them) and fatigue (for me). As I recovered from anesthetics and waited for an overnight bed in the hospital, the post-op room filled with a strange energy. I was silent in its middle, the reason we were all there, why many of the nurses stayed beyond shift hours to clock out. We waited on x-rays, on whether my lung would collapse or hold out. The nurses chatted as if I could not hear them; and with my throat sore from the breathing tube, plus the balm of morphine, I slipped into the presumed silence and took up a shy vigil. I witnessed their connections among one another, their collegial familiarity. One nurse's little girl came running into the room, surprising her mom at the end of the day with a bear hug. But as I waited, I saw also their few attempts to use my pronouns, how strange "they" was in their mouths, how they abandoned discomfort for the ease of "she/her." I was ghost, specter, the first-person dreamer who moves into scenes unnoticed. Flush from the heat of surgery and morphine, I was overwhelmed with gratitude for their care, even as they also, simultaneously, demonstrated carelessness.

My surgeon, all even-keeled kindness, good with pronouns but also with nerves, comforted my wife when he told her about my lung and the laceration, how I was on oxygen and needed to stay overnight. He stayed late and arrived early the next morning. He told me the team

was still learning; and I remembered how just a couple weeks earlier I taught my college composition class the importance of process—in our writing but also as a social practice. If we allow others' their mess (if we allow ourselves our mess), then we also make space for growth—intellectual, political, and writerly growth. It is a kind of tending. It is tender. But then, I hedge. “Sometimes it’s not about the journey,” I told them. “Sometimes we need people to just get to the fucking destination.” As much as I resist these destinations, I still recognize their necessity and protections. So this is not about pitting the present against the future, but instead how our focus on the present makes the future possible. Just as we don’t force recovery information on our needle exchange participants, tending only to immediate need, we protect our ongoing relationships with those participants. They are more likely to return to exchange and more likely to enter recovery facilities when *we do not* insist on either.¹⁶² Just as we do not need to be in recovery in order to recognize ourselves as full, feeling agents in our lives, we do not need a formed ideology in order to live our lives. We don’t need to explain ourselves in order to describe ourselves. We don’t need to know the future in order to work toward it.

Finally admitted to the hospital and helped into a bed, my nursing team—Dani, Cathy, Ginny—oversaw my overnight hours, refilling my IV and dropping off pain pills. Just as the same pronoun deadlock occurs, they also disclosed their anxieties around “the language,” of how to talk about gender, of doing it wrong during the kinetic moment of care. They were, quite literally, afraid of being reported. The provision of care was not, then, unilateral, nurse to patient. We quietly passed it back and forth, through delicately threaded conversation. While I maybe would not have preferred this responsibility, I understood it. So rather than explain the language,

¹⁶² Studies have shown that people who use syringe exchange program are five times more likely than those who don’t to enter treatment. They are three times more likely to stop using drugs altogether. See “Summary of Information on the Safety and Effectiveness of Syringe Services Programs (SSPs),” Centers for Disease Control and Prevention, last modified May 23, 2019, www.cdc.gov/ssp/syringe-services-programs-summary.html.

rather than explain another's desire to forgo nipples, or the grammatical allowances of non-binary pronouns, I told them about my mom, a NICU nurse who did twelve-hour shifts for thirty years.

So many feelings circulated through those lost hours, feelings that persuaded me into shy registers of gratitude but also unease, feelings that extended beyond the line of my skin and into clinical spaces. I didn't report anyone for their misgenderings or inappropriate questions about nipple placement, not in a move to protect this surgical team from legal or institutional conflict, but to protect myself, to stay present with myself, and create some connection across difference in the space of care. I'm not saying it was the best decision. It is just the one I made, with all my privilege and vulnerability, protection and dispossession. Me with my bandaged chest and the anxious nurse, we both share a discomfort with language and its failures, what it might do to us. Exposure goes both ways.

The morning I was discharged, my doctor came in to make sure my lungs expanded without leaks. Stethoscope dangling from his ears, when he saw the tattoo of Ferdinand the Bull on my right bicep he excitedly said, "Ferdinand! That's my daughter's favorite book!" Ferdinand, the shy bull who prefers wonder and wildflowers, admits, "I like it better here where I can just sit quietly and smell the flowers." Ferdinand is a quiet, gentle creature, but when stung by a bee responds wildly to the pain, causing others to mistake him as a fierce, fighting bull. The others are wrong, and Ferdinand is forced to take on their error.

I got my tattoo just weeks before surgery, to honor this shy bull but also as homage to Elliott Smith, my favorite musician who also inked Ferdinand on his right bicep in shy solidarity. When I was in the tattoo shop, lying on my stomach with my arm slung back, I followed the slow pulse of orange and purple fish as they swam circles in a large tank behind my tattoo artist.

For the first time I didn't feel pain from the needle, but comfort. My artist admitted the fish are there to calm her clients, but went on to argue the pain of a tattoo is mostly mental. I always balk at this kind of sentiment, that pain can be manipulated by our psychic willpower, that we are responsible for what we feel despite the needle charging ink into our skin. I still balk. But I also appreciate the opportunity to feel and enjoy pain at the same time, that one does not extinguish another.

Even as I do it here, to myself, positioning the trans person within the clinic is an overdone trope. Of course the clinic is an acutely affective space for us. Of course we also rely on the services of the clinic for our ongoingness, to get about the work of living. Of course it is the clinic that authorized and continues to authorize dominant narratives of trans experience. I do not wish to replicate that harm, to reinforce the trans person as a medical document, but to dream forward into other ways of telling the body, ways that ache, slip, and evade. C. Riley Snorton and Emma Heaney urge us to think of queerness and embodiment beyond allegories for transition and transgression.¹⁶³ These tropes are both overdone and they relegate the trans person to a theoretical object (perhaps a “bad trans object,” as Jules Gill-Peterson articulates it¹⁶⁴). These tropes also make us, as David Rubin explains, revealers of “spectacular truth”¹⁶⁵ rather than beings living within mundane complexity.

So while we want to give voice and representation, we do not want to overexpose. We deserve privacy as well as a generosity of attention. Trans representations, for example, “do not simply re-present an already existing reality but are also doors into making new futures

¹⁶³ See Heaney, *The New Woman*; and Riley C. Snorton, *Black on Both Sides: A Racial History of Trans Identity* (Minneapolis: University of Minnesota Press, 2017).

¹⁶⁴ Gill-Peterson, “Bad Trans Object.”

¹⁶⁵ David A. Rubin, *Intersex Matters: Biomedical Embodiment, Gender Regulation, and Transnational Activism* (Albany, NY: SUNY Press, 2017), 64.

possible.”¹⁶⁶ While representation can expose, so too can it overexpose and overwrite. So when we say trans women of color suffer violence at higher rates than other queer people (and other trans people), we continue to stitch violence into the dominant narrative of being trans and being a woman of color. The statistics are sadly accurate of course, but they also fail to offer more than the coldness of contained numbers. Life scraped from bare life is just *bare*.¹⁶⁷ In fact, we might start by acknowledging the impossibility of *full* representation, and then wish not to annihilate impossibility but hold it. And perhaps in so doing we release our attachment to *full* to instead invest in work that widens and deepens, withholds and wonders—more stories, more description, and more feeling, but also more contradiction, more tension, more quiet.

In thinking of the body, then, in thinking of being trans, we might take up what Jeanne Vaccaro describes as “felt matters,” as ways of thinking without “succumbing to additive logics.”¹⁶⁸ Instead, we might “map transgender embodiment as a set of relations among movement, speed, expansion, and excess.” I would also bring in shyness to join Vaccaro in prioritizing a “theory of embodiment that does not seek totality or coherence of self.”¹⁶⁹ My transness is not dissent even as I see it interpreted as so. My body just *is*, quietly ongoing. Rather, my shyness dissents, refusing (when possible) public demand and shielding my body from speculation or scrutinization.

Not only do our shy stories subvert medical and cultural demands for arrival, the American dream inscribed on the body, but we dilute the spectacle put on trans people. Quiet stories of life lived, of being alive and trans, allow us to detail more than just the scenes of

¹⁶⁶ Reina Gossett, Eric A. Stanley, and Johanna Burton, eds., *Trap Door: Trans Cultural Production and the Politics of Visibility* (Cambridge, MA: MIT Press, 2017) xviii.

¹⁶⁷ See Alexander G. Weheliye, *Habeas Viscus: Racializing Assemblages, Biopolitics, and Black Feminist Theories of the Human* (Durham, NC: Duke University Press, 2013).

¹⁶⁸ Jeanne Vaccaro, “Felt Matters,” *Women & Performance: A Journal of Feminist Theory* 20, no. 3 (November 2010): 255.

¹⁶⁹ *Ibid.*, 256.

clinics, to instead broaden and deepen the descriptive contours of trans life so that we might account for the breadth of wonder, nerve, desire, joy, disappointment, fatigue, pain, and love we experience as (trans) people. For me, shy is me fumbling through a faltered expression of gender, an unintelligible feeling that both drives my desire and stymies it. My sense of my body is so confused and unstable that feeling, rather than knowing, offers more ways to wander and wonder through it. My body knows. *Our bodies know*. But our bodies also inhabit diaphanous states of dreaming, confusion, and speculation. This too is knowledge.

As trans people, we rely on the clinic. It helps us thrive even as it tears us down. It is not all one thing, no monolith but multiplicities of care, concern, indifference, harm, connection, and dissolution, all circulating in a held space. Of course, the solution is not to destroy the clinic. We need care. Instead, how might we de-authorize the body as the site of totalized meaning (even as that singular body reaches out in need)? In quiet and stillness, a shy take offers other ways of coming out, other ways of thinking about and expressing our bodies. Spade states what should be obvious but is buried under the teleologies of wellness culture: that trans persons are committed to gender self-determination, however that manifests, however much that changes, regardless of how muddled the experience might actually be.¹⁷⁰ We are all in process. Shy allows us to be, gives us the space to not know ourselves, to thrive in the questions and the uncertainty that makes us uncomfortable *and* creative.

Kevin Quashie argues a similar take. We often equate liberation with megaphones and marches. While, of course, being loud importantly disrupts capital's equilibrium and calls for immediate attention and redress (e.g., silence = death), there are also a multitude of ways to protest. Quashie argues this explicit point in his important text, *The Sovereignty of Quiet*:

The quiet subject is a subject who surrenders, a subject whose consciousness is not only

¹⁷⁰ Spade, "Mutilating Gender," 316.

shaped by struggle but also by revelry, possibility, the wildness of the inner life. Quietness is not a performance of a withholding; instead, it is an expressiveness that is not necessarily legible, at least not in a world that privileges public expressiveness. Neither is quiet about resistance. It is surrender, a giving into, a falling into self. The outer world cannot be avoided or ignored, but one does not only have to yield to its vagaries. One can be quiet.¹⁷¹

While shy and quiet are not synonyms, of course, I extend Quashie's ideas to propose that shyness, even in its affective aches, provides ways of living within capitalism that escape explanatory labor. Because, for Quashie, quiet is about attention; quiet allows humans to be subjects more than "emblems."¹⁷² Because, for Quashie, even as marginalized subjects who suffer both quotidian and institutional violence, our whole lives are not oriented toward "fighting the social world."¹⁷³ In this way, this particular affect gives us a mode of expression that breaks open more modes of expression. Shy makes part of an assemblage. It is not always the right move, but it is often an underrated move.

I am trans. I *know* this only because I *feel* this. I am not on my way anywhere but always myself, and on my way to myself. The future still beckons, but my future need not be poked with production or perfection. Our futures do not need to be the site of the best self, just the site of the self, still living and maybe even thriving. Cameron Awkward-Rich gives us a way to do this without relying on capital's conceit of productive futurity: "At the same time, transness, at minimum, is the insistence on the human capacity for once unimaginable change. . . . I had to cultivate—actively cultivate—a kind of wide-eyed optimism about what the future, and the future of my own body, could entail. I had to believe that feeling, intense feeling, was not only

¹⁷¹ Kevin Quashie, *The Sovereignty of Quiet: Beyond Resistance in Black Culture* (New Brunswick, NJ: Rutgers University Press, 2012), 45.

¹⁷² *Ibid.*, 7.

¹⁷³ *Ibid.*, 9.

important but also potentially life- and world-changing.”¹⁷⁴

I initially hesitate at “wide-eyed optimism,” especially as a potential mode for daily living, so trained am I to be suspicious and critical. There’s a trend in queer/trans theory to resist optimism and reject futurity because it’s just too hetero, too normative. While I empathize with these criticisms, I stand with Awkward-Rich in that we cannot forfeit our queer futures. Our younger and current selves depend on us reaching new days. Awkward-Rich imagines a future and a body as a way *to feel himself* beyond mere survival. The goal is to exist into futures *we* have had a hand in making. In so doing, shyness (as just one possibility) insulates us from expectations and demands. We might refuse to inscribe our futures, to make risky decisions in the present because of gut feeling and need—without explanation or apology—then see how it plays out.

In order to receive top surgery I sit in cold rooms, show my chest to strangers, answer questions about time and dysphoria (how long have I felt my “wrong body”?), questions about transitions (will I take hormones? why or why not?), and affirm that yes, I have a mental health professional who can verify my story and “recommend” me for the procedure. Doctors request before photos. They are building their portfolios from skin, reproducing visual allegories about trans experience. What is inside is outside. I long for privacy, to be taken at my word, for my quiet desire to cast louder than medical lexicons. Malatino writes, “So often, we must rely on relationships with people and institutions that interpret us as subhuman, or at the very least misrecognize us so profoundly that the ‘I’ conjured in interaction barely resembles the ‘I’ we understand ourselves to be.”¹⁷⁵ In this way (though of course not in all ways), dysphoria is an outside force, not some internal, buried feeling. Though we feel it as both.

¹⁷⁴ Cameron Awkward-Rich, “I Wish I Knew How it Would Feel to be Free.” *The Paris Review*, June 11 2020. www.theparisreview.org/blog/2020/06/11/i-wish-i-knew-how-it-would-feel-to-be-free/

¹⁷⁵ Hil Malatino, “Tough Breaks: Trans Rage and the Cultivation of Resilience,” *Hypatia* 34, no. 1 (2019): 125.

After endless chest x-rays and a hospital discharge, I returned home and curled into my mastectomy pillow for days. My wife helped me shower and replaced my bandages, walked our dog and felt my chest for air pockets. While the physical pain was minimal, much less than expected, the emotional pain was devastating—I careened into a depression that took months from which to slowly emerge. Later, I learned post-op depression is common, and its impact is greater the longer one’s under. Often, this trauma is compounded by the expectations of gender-affirming care: that we come out the other side euphoric and closer to how we dream ourselves to be. In the midst of this grief and fatigue, I received an insurance claim refusing to cover my (pre-authorized) procedure. My double mastectomy was denied. When I called my insurance company, they clarified that I was covered for a breast reduction, not the bilateral mastectomy, which is how the hospital coded the procedure. The cost was over 16 thousand dollars. “Did you have a double mastectomy or a breast reduction,” the rep asked me. Wanting to avoid these impossible charges, I deflected and demurred, claimed ignorance around the semantics of medical coding and terminology. “Well, do you still have tissue left in your breasts?” she asked. Narrowing in, language coming for the contours of my body, I answered truthfully “yes” (since almost all surgeons leave tissue behind for realistic countering). To which she followed up, “can you fill a bra?”

This conversation repeated itself many times over the next few months as I fought for my case to go back to claims, desperately explaining that the issue stems simply from a wrong code, a couple numbers out of order. I worried about my medical documents, covered with the language of trans care: “gender dysphoria” and “mastectomy,” “identifies as ...” and “no HRT.” I worried a 16 thousand dollar decision would come down to evidence produced by the most vulnerable part of my body—my bruised chest. I worried a decision would be made from the

literal shape of my skin, but also from how I identified and described that single piece of my body. Shy was the feeling of exposure, of turning away from “can you fill a bra.” Shy was my kept voice, my emotional restraint, so I could end those calls without giving anything away, breaking into sobs as soon as I hung up. Shy was strategy, the deflection of requests for clarity, the expression of captivity and “nothing to say. Nothing.”

Shy, as a form of expression, gives us an alternative to what Emma Heaney calls aspirational discourse and the “narrative of entrapment,” this assumption that trans existence *means something* and we must therefore comply with only linear storytelling that limns an outcome.¹⁷⁶ If the entrapment narrative insists on allegories rather than authors, shy allows us to describe the trans experience as we experience it on any given day, as both pain and pleasure, witness and refusal, as quotidian as walking through the farmer’s market and feeling the sun on our chest. Or, we forsake description altogether, giving way to uncertainty and making that uncertainty felt, shared. My estranged relationship to my body arouses ache, a deep suffering of incongruence and estrangement, but also desire, longing, and ongoingness. Shy licenses new possibilities for self-expression; I can describe myself without explaining myself. I can determine my own gendered meanings of my body through the privacy afforded by stalled moments and muddled murmurs. Shyness helps us survive the feeling (and realities) of surveillance as we stand with our backs safely against the wall. Shyness affirms us even as we flutter around in confusion, that we are right when our intuition tells us to wait, to withhold. Shy approaches the body in wonder not demand. Shy lives the question, offering a way through slow

¹⁷⁶ Heaney, *The New Woman*, 6.

deaths and cruel optimisms.¹⁷⁷ Shy is not a stable space to inhabit, but mumbled wonder and roving refuge.

As one who loves language, loves poetry, studies rhetoric, I regularly choose no words. It is both caution and patience. I will wait, and in the meanwhile hold close the words of T. Fleischmann: “I would like to be unscribed by language, like an unscribed piece of paper. . . . It’s taken a lot of resistance, that I want to leave my gender and my sex life unscribed—that it took me years to consider the fact that I did not have to name my gender or sexuality at all.” They go on to say also, “The unscribed . . . is a site of change.”¹⁷⁸ We might describe the site of change as a creative moment, the process of revision and reworking that summons ideas, not explanations.

As a child, Geryon feared the long hallways of his elementary school. Intimidated by their immensity (“a hundred thousand miles / of thunder tunnels and indoor neon sky slammed open by giants”), he relies on his older brother to hold his hand and walk him to his kindergarten classroom. But when his brother refuses one day— “*Stupid*, said Geryon’s brother / and left him”—Geryon faces the task alone.¹⁷⁹

He did not gesticulate.^[SEP]
He did not knock on the glass. He waited. Small, red, and upright he waited,
gripping his new bookbag tight^[SEP]
in one hand and touching a lucky penny inside his coat pocket with the other,
while the first snow of winter^[SEP]
floated down on his eyelashes and covered the branches around him and silenced
all trace of the world.¹⁸⁰

This is how Geryon moves through the world; however timorous and tremulous, he does not gesticulate or make a scene. He waits, holding luck in one hand and knowledge in the other. To

¹⁷⁷ See Lauren Berlant, *Cruel Optimism* (Durham: Duke University Press, 2011); “Slow Death.” *Critical Inquiry* 33, (Summer 2007): 754–80.

¹⁷⁸ T. Fleischmann, *Time is a Thing My Body Moves Through* (Minneapolis: Coffee House Press, 2019), 67.

¹⁷⁹ Carson, *Autobiography of Red*, 24.

¹⁸⁰ *Ibid.*, 25

“deny the existence of red is to deny the existence of mystery.”¹⁸¹ But it is also to deny the existence of the queer body and its feelings, its inflamed insecurities and quiet delay, and its sensorial way of knowing.

Geryon’s autobiography is a live work of translation undergoing constant revision. “This is when Geryon liked to plan / his autobiography, in that blurred state / between awake and asleep when too many intake valves are open in the soul.”¹⁸² He tries, fails, and tries again to express the shifting eros and ethos of his inner life. However, the project is not dire in its continuities, because revelation and conclusion are not compulsory to his art-making. Geryon writes his autobiography as he lives it. We all do. The revisions help us make sense of our own mess even as we stay muddled in it. This is the conundrum of language—even as we use it we misuse it. Just as we describe we take away. We rewrite the same sentences, relearn the same truths, and this, Maggie Nelson reminds us, is “ordinary pleasure.”¹⁸³

Even if our shy registers do not reform others’—our families’ or our doctors’—notions of trans selfhood, even if all we can do is enter the fray of the aspirational and mumble our way through the in-takes, even if “I don’t know” fills a room with difficult energy, we might still find respite in these murmurs. We withhold the “I” that will go unrecognized. We craft a story of our own making, whether it is actually “ours” or not, to endure what harms us, as I did on the phone with insurance reps. Because all the while, this conservation of selfhood and reservoir of energy means we focus on what matters—writing our autobiography in the blurred states and reveling in the wildness of our interior lives. Inside is ours.

My shyness is a kind refusal to participate in mastery, in accumulation, in rhetorical economies. It is a feeling I have and a move I make to navigate my worlds—whether under the

¹⁸¹ Ibid., 46.

¹⁸² Ibid., 60.

¹⁸³ Maggie Nelson, *The Argonauts* (Minneapolis, MN: Graywolf Press, 2015), 112.

canopy of Douglas firs, trekking across a wildflower ridgeline, or in the waiting room of my doctor's office. The discomfort in having to name something that cannot be named, or loses itself in the naming, can be relieved in foregoing or postponing the ritual altogether. While shy still privileges some inscription, this form of language-making occurs alongside or emerges from acute sensitivities, attention and care, and an eye toward process. Holding back has not dimmed the vibrancy of my life, but contrary, has let me soak in it with a greater appreciation for its complexity. Like Geryon, I am a fuckup, riddled with mistakes, heart broken by believing in good when there was only danger. Like Geryon, I am most at rest, not when I try to make up for the mistakes or pain, but when I write my autobiography in the blurred states.

I'm still recovering from top surgery, exploring options for revision because some tissue remains, the areolas have widened, and my chest is asymmetrical, though I am told (primarily by my wife and doctor) that these blemishes are negligible. But the body is known for its perfect symmetry and my nuances of difference are hard to accept. I'm still processing the post-op depression, working out the gendered questions the procedure summoned. I am deeper into the pain of my body's uncertainty, and yet at the same time relieved of (some of) its repressive hold. Trans lives happen inside the clinic, but those hours are modest compared to the many spent in our apartments mincing garlic, at work stocking boxes, in bed with our partners, on the street walking our dogs, at the bar with friends, alone on single-track, switchbacking trails. Our lives are happening everywhere. So, as Carson would say, *here, shake*.

Six weeks after top surgery, my doctor cleared me for light cardio exercise. That same afternoon I laced my running shoes and, for the first time since childhood, pulled a t-shirt over a bare chest. I started slow, lightly jogging down to the park and its familiar trails; but not even a half-mile in, I caught my toe on a root and pitched shoulder-first into the ground. As I stood up

to scan my body for injury, stunned and disoriented, I placed my skinned palms to my chest and exhaled. And then kept going. I've been running for a decade, having first picked it up when I came out as gay and was getting divorced in my late twenties, desperate for the serotonin. Years later, in my late thirties, when I first began to reckon with my trans feelings, I ran an ultra marathon—thirty-one miles and six thousand feet of elevation gain in Pennsylvania's Laurel Highlands. But between these two timestamps are innumerable training runs—pained and grinding, easy and fluid, and those on the brink of forgotten. Taken together, they forge an unfinished whole. I return faithfully to this sport because it gives me a way into myself. As a quotidian expression of embodiment, running allows me, even if for an hour at a time, to fully inhabit my body without requiring it do more than move. No grand argument is being made; rather, running is just steady motion, the quiet flex and release of muscles.

For me, running is a shy practice; it teaches me how to resist finish lines as the sole source of pleasure. Rather, it sets me into a flow state, charging toward a challenge that constantly renews and evades. While I feel strong on some runs, others offer only suffering and exhaustion, side cramps and tight IT bands. Even as I become “a better runner,” I only define “better” as more adaptable and understanding, more inside the process. So while running offers me the material possibility of euphoria—the tightened abs and flatter chest—this is only one piece of how I experience my body. Running is also the escape from articulation, the flee from inscription. Instead, I am moving, making, being. I tune into my body—what it says when it hurts or what it needs when it weakens—and make ongoing adjustments, to stretch longer or frontload hydration. Even on bad runs, I practice failure until that word loses its freight, becomes falter becomes process. Running reminds me that desire is temporal, not an arrived destination. It is often, even, a goddamn grind. Indeed, a common mantra runners take up is, *run the mile*

you're in. Meaning, do not fixate on what you have left to achieve but on your needs and ability in the very moment—more water, a gel, a quick stretch. You may just find such limited focus carries you further than you imagined, into unknown or new landscapes, beyond your own understanding of yourself and your possibilities.

Descriptions and translations of trans life must work toward re-narrating the scene of pain, marginalization, and precarity to account for more. Alongside Kevin Quashie, we seek to protect those “whose consciousness is not only shaped by struggle but also by revelry, possibility, the wildness of the inner life.”¹⁸⁴ Because even as I feel pain in my body, I also find joy in the way it moves over a technical trail. We can, and should, honor our desire for coherence and euphoria, but at the same time also build resistance against those external demands for the same. While we long to feel good in our skin, we are justified in our aches and pain too.

After decades of embodied unease, running allays my shame as I relearn myself. I experience this reinvention as sensation not intellect. In this way, my body *feels possible*, this ability to live into the edges of my skin, to break toward horizons with an acute sense of imagination. I know myself while not knowing myself. I am alive in the question. I am alive in the question that is my body. I take on pain without overcoming it, lingering in the quiet space of possibility and renewing desire. I am just a speck raking my way against an immense sky.

¹⁸⁴ Quashie, *Sovereignty of Quiet*, 45.

3. Nostalgic Potential: The Mixtape is an Archive, and the Archive is a Feeling Thing

*“Gotten bitten fingernails and a head full of the past
And everybody’s gone at last...
Don’t get upset about it, no, not anymore
There’s nothing wrong that wasn’t wrong before.”*¹⁸⁵
—Elliott Smith

Located just south of downtown Eugene, Oregon, House of Records is a literal one-story house with sloping wood floors and crowded with shelves of used and new vinyl. To walk through is to gently shift and pivot: indie in the once dining room, classics in the living room, hip hop in the hallways. I was thirty, a broke barista pulling espresso shots for minimum wage, going through a divorce and blowing my tip money on records. One rainy day I lingered in the store’s indie section, flipping through vinyl sleeves until my fingers softened from the films of dust. I worked my way into Elliott Smith’s catalog, lined up under the east-facing window. Just arrived to this new decade, yet arrested by student loan debt, a divorce, and vocational uncertainty, I stood holding *Either/Or* and was seized by nostalgia, flush with the feelings of my adolescent self. It had been over a decade since I listened to Smith’s music, since I sat in my childhood bedroom with headphones on, neck bent over a notebook, replaying *Either/Or*, looping it front to back. “Speed Trials,” “Between the Bars,” “Angeles,” “Say Yes”—some of the best songs in his entire catalog appear on this album, and yet I had forgotten about Smith and the quiet magnitude

¹⁸⁵ Elliott Smith, “No Name Number 5,” track 6 on *Either/Or*, Kill Rock Stars Records, 1997.

of his voice, his music slipping away into an archival ether. Spending the last of my cash, I walked home in the rain with *Either/Or* under my jacket, wondering what it would feel like to return to this important artifact, wondering what such a synaptic charge of memory might summon.

It's right there in the word: *algia* translates to "pain" and *nostros* to "return home." Nostalgia, then, is to return to the pain of home. Or, there is pain in returning home. Or, simply home is pain. In all senses, nostalgia is return and this return hurts. When a Swiss medical student, Johannes Hofer, first coined "nostalgia" in 1688, he described a homesickness that manifested through the skin—as fervored heartbeats or hot fevers—and constructed an illness that always, in some degree, signaled home, toward *nostros*.¹⁸⁶ We cannot cleave home from nostalgia. Home makes the feeling, and makes it painful. It comes as no surprise then that the same name reappears over and over again in the genealogy of nostalgia studies: Odysseus. Symbolizing the long journey back, the struggle and hustle it requires to navigate toward home, Odysseus gives us the conventional conceits of nostalgia: home awaits, home is worth the pain of getting back to, home offers respite, familiarity, family. But I want to trouble this entrenched idea of nostalgia, because I am suspicious that its conventionality in homelands and home families continues to reinforce simplistic narratives that overly politicize this achy affect and diminish its vibrant potentialities for queer returns. More on that soon, but first.

We start with the simple acknowledgement that home is complicated. For many, home fails to protect us or provide respite, and is instead a site of pain and obligation, a sore, overworked muscle chronic in its injury. Yet, this pain is not always the same as violence, but

¹⁸⁶ Krystine Irene Batcho, "Nostalgia: The Bittersweet History of a Psychological Concept," *History of Psychology* 16 no. 3 (2013): 166.

more complex and formative. I left home forever at 18, by which I mean I left my small house on Anita Street in Detroit and have yet to return and cross its threshold. Despite this estrangement, home still lives in me, as memory but also through relationships, scent and sound, even dreams, as my subconscious tries to reconcile such abrupt abdication, such fast abandonment of the only space I ever knew. Home is pain, and still a pull exists. Ann Cvetkovich gives us an important intervention on home, one with which I closely identify, and one that better nuances the desire to feel, think, and touch backwards:

I don't want to naturalize or romanticize home, especially since I consider dislocation to have been a productive force in shaping me. I have found other ways of being at home or in the body besides "going home," especially because I know there is not always a home to return to. But I sometimes feel the need to touch the land of my childhood in order to remember myself in myself. I'm not recalling a lost paradise; I'm acknowledging the troubled history that led to my departure as part of figuring out what it means to go back.¹⁸⁷

What then does it mean to *long* for return, knowing that return might deposit us directly into pain? Why do we "*feel* the need," as Cvetkovich writes? Why would we bring this upon ourselves if there were not more to this achy affect than mere solipsistic pleasure or political claim, the two reigning interpretations we have of nostalgia? What does it mean to "remember myself in myself"? We return because we feel the need; and I believe that need is worth our attention and care. While we can never go back, not literally, we find other routes of return, through feeling, music, and language. It is archival, this playful presence, but also renewal, the re-making of an old want into agential energy. We are empowered.

I join Cvetkovich to reckon with why we might feel the need to go back, specifically arguing that a form of creative literacy ("figuring it out") opens in our returns. For me, this is why nostalgia is an important affect to reckon with. Throughout my writing, I've worked to honor agency in precarity, to hold them at the same time, to express that one does not negate the

¹⁸⁷ Ann Cvetkovich, *Depression: A Public Feeling* (Durham, NC: Duke University Press, 2012), 71.

other. In nourishing our nostalgic desires we come to see there is more to know about the self, that we are the makers of that knowledge, and we always have been. Returning to Elliott Smith's music in Eugene, while coming out and enduring one of the more painful years of my life, was my nostalgic impulse, a feeling, but also an intention, an act of archival survival. While I did not know this when I bought *Either/Or* at House of Records, I'd soon learn that the nostalgic attention I gave his music was, simultaneously, nostalgic attention I gave myself. I turned back and saw a fourteen-year-old kid who needed help. Even more devastating, this kid also turned to see me at thirty, and that I needed help too. I was, at the time, grieving through the process of coming out, confronting the new truths of myself. Elliott was both part of the confrontation—he re-animated unfinished desire—and yet also balm to its pain. The replay, the loop of the tape, is not terminal but a möbius strip: trace what's outside and find yourself in the interiors, in an infinite spin. The nostalgic motion of Elliott stirred up the knowledge I needed—that queer and trans desire can live in music, in the sensorial body, not just in knowledge. I listened to *Either/Or*, to "Between the Bars," and felt this kid's unfinished longings rise to the very surface of my skin. What was kept in the interiors at age fourteen found its way out.

Maggie Nelson's gentle advice on returns is, in many ways, advice on one's literacy of the self.

Sometimes one has to know something many times over. . . . One may have to undergo the same realizations, write the same notes in the margins, return to the same themes in one's work, relearn the same emotional truths, write the same book over and over again—not because one is stupid or obstinate or incapable of change, but because such revisitations constitute a life.¹⁸⁸

Nelson calls this return a pleasure, the comfort in curling into the coils of the interior self, to feel the ache, to play the same sad song over and over, but most importantly, to learn, to lean into a literacy that never culminates. Who hasn't replayed the same sad old songs, found relief in

¹⁸⁸ Maggie Nelson, *The Argonauts* (Minneapolis: Graywolf Press, 2015), 112.

hitting repeat, in the echo? “It is tempting,” writes Cvetkovich, “of course, to suggest that ‘cure’ or ‘healing’ or ‘recovery’ comes from finding or returning home.”¹⁸⁹ But, as we have already explored in depth, cure is overly imposed. Again we remember recovery as a singular, linear model fails us when not also braided within the realities of return, mess, regress, repress, and failure. Nostalgia encourages us to take ownership of those limits and returns, of how we know and describe ourselves; but it also flips the traditional script of mastered time—that we must move further into our authentic selves, and therefore farther away from some specious version of an old self—to instead embrace the past in its present inflammations. Our archives formed us, and they continue to form us, puncturing our personal literacies to affirm us in our changes. Our archives reveal how we make ourselves—despite external forces saying otherwise, coercing suppression—and therefore how we will continue to make ourselves, ensuring our futures are solely ours.

In this chapter I am interested in the potential of nostalgia, because I believe it is possible to feel nostalgic for a place and time that hurts. And that this reveals how we go back, not to retrieve a lost object or return to a lost time, but for the relief, even pleasure, in *returning*. What if nostalgia is not the desire to go back and stay, but to revisit and revel? What if nostalgia is not about destinations (the past, the home, the family) but about the feeling of return in and of itself? That is, nostalgia is not reinstatement of what’s lost, but the feeling of moving back and what that feeling opens, and specifically how it deepens our own sense of agency, literacy, and possibility. We are empowered by nostalgia, to speak on behalf of a younger self or to gain narrative authority over a past that claimed us. We learn more about ourselves by going back, by entering our archives to study the past self and retroactively fulfill our need for recognition or voice. Taken together—this agency and literacy—we find (and feel) there are more ways of

¹⁸⁹ Cvetkovich, *Depression*, 152.

understanding and describing our lives. Just as we are makers of our past selves, through our nostalgic and archival attentions, so also are we makers of our future selves.

But before we explore any of that, we'll honor nostalgia by investing in our own series of returns, in nostalgia's history, its legacy as pathological, its right-wing appropriations, but also why escapism—which is often conflated with nostalgia—is disparaged, and why we are taught to mistrust this affect. These returns will then open toward archives as a way to explore the importance of going, feeling back. This chapter will also follow my own nostalgia pangs, as I return to the music of my youth, to Elliott Smith, not only to revel a bit in the pleasure of returns, but to also make sense of that troubled time, and to thereby demonstrate how knowledge can move backwards, how nostalgia is, in that way, a form of growth, but growth that need not affirm external expectations for linearity. This chapter is therefore for anyone who has struggled to put into language their queer longings, and has felt those longings drag out in time. It is for those who experience literacy as embodied, and experience both the pain and desire this reality bears. It is for those who are committed to learning and relearning themselves, even if that means coming out late, maintaining our youthful attachments, and insisting the same damn song begin every new playlist.

“Between the Bars,” the most known track on Elliott Smith’s *Either/Or*, is presumably about leaving the past self, even as this is always impossible. “People you’ve been before that you / don’t want around anymore.”¹⁹⁰ If this isn’t a trans lyric, I don’t know what is. “Between the Bars” is my favorite song, and has been since I was fourteen. Our favorite songs make so many playlists, circulate at the end of so many days. We eagerly share them—a gesture of intimacy, a way of pointing inward as we point outward. They become part of us, art as

¹⁹⁰ Elliott Smith, “Between the Bars,” track 4 on *Either/Or*, Kill Rock Stars Records, 1997.

ontological accessory, and so we take them everywhere, lease them out, inhabit them, return to them again and again. This is what the best art does—it evades capture, breaks toward horizons, repeats and renews in different spaces. Which is also how I might describe being trans masc—in the process of myself, full of nerve but also wonder. Renewing.

I listened to Smith a lot as a teen, hidden in my childhood attic bedroom, surrounded by tapes of his, but also my sketchpads, notebooks, walkman. Fresh to high school, I was a sinewy kid in headphones, wearing his tapes thin, walking the halls in my own world with Elliott's voice the quiet voices of sadness, longing, and feeling. In the late 90s, I did not know I was queer. Even as I felt the unyielding ache, even as I felt the pain of difference, I could not articulate my humming desires into language; I could only sense their untuned vibrations. Not only did his music give me a way into such inchoate pain—a delicate space to sit with the unnamed grief—but it brought respite when that pain became too acute. Elliott's sadboy sound, both tender and brooding, helped me express my embryonic trans self through projection: I couldn't make sense of myself, couldn't come out, but I could look to this shy, shaggy-hair boy singing about exclusion, rejection, and isolation, and see my own outlines.

Nostalgia vibrates with possibilities of reclamation. Indeed, I would say there's an urgency to reclaiming nostalgia, that we should be serious about extending its potentialities beyond the realm of psychology and politics. It is a resource for survival. Why do we "*feel* the need," as Cvetkovich writes, to go back? Why are we are driven into our own archives, especially when those archives hold dark chapters, bad objects, cruel feelings?

The past is not a welcoming space. Indeed, it may be a scene of total impossibility and hostility. As I write this, *Roe v. Wade* was overturned and I watch as dozens of bills targeting

trans youth proliferate through the marbled halls of congressional buildings. “Groomers” has reentered the discourse on queer culture, calling back to the lavender scare and gay panic of previous decades. Indeed, Florida won’t say gay and white supremacists organized riots at pride festivals across the country this past summer. The present is already so violently regressive that we justifiably distrust the past even more. For many to most of us, we cannot go backwards without terror. But I echo Cvetkovich and start with this question—on why we return—to undermine a cornerstone assumption of nostalgia: that it is a literal desire to go back, that back is better. That to go back is to make something great . . . again. To dilute this toxic conceit of nostalgia, I will look a bit at nostalgia’s history as a medical diagnosis turned psychological disorder, and as a political opportunity, but then also the critical interventions made by Badia Ahad-Legardy to redefine this important affect away from medicine and politics.

Johannes Hofer, a seventeenth-century medical student, classified nostalgia in 1688 to name an epidemic roiling through the ranks of the Swiss military: homesickness brought about by occupying and fighting in foreign lands and landscapes. The diagnosis was medical, with manifested physical symptoms requiring intervention. Such possible symptoms included fever, heart palpitations, insomnia, weakness, and loss of appetite.¹⁹¹ Framed as the longing for home, nostalgia signified one’s patriotism and was considered honorable, even if also infirmed. Homesick soldiers were read as loyal to the nation, to the family, and to their homelands. But, at the same time, as an embodied medical ailment, this made treatment compulsory and cure a prescribed destination. Cure was home. Doctors especially pressed this prescription if such sad feelings interfered with military performance, which they were said to do.¹⁹²

¹⁹¹ Batcho, “Nostalgia,” 166.

¹⁹² *Ibid.*

Hofer's symptoms—loss of appetite, racing heart, lack of sleep—sound like anxiety and a response to trauma. It seems Hofer failed to consider the brutalities of war on a troop's psyche. Or, if he did, such nuances were buried under rigid diagnostic practices that privileged simplified explanations and singular interventions focused primarily on the external. Though, this began to change later when psychoanalysis established greater authority within the scientific-medical fields in the nineteenth and twentieth centuries. During this time, nostalgia moved from the physical to mental, and thus from the spatial (home) to symbol (the past). Nostalgia was, in this way, linked to melancholia, indicative of pathological attachments to a lost object, and relegated to disorder. One suffering the psychological plight of nostalgia was seen as obstinately clinging to a lost childhood, for example. They couldn't let go; they obsessed over loss and were infatuated with the greener pastures of the past. Consequently, such psychological framing meant one *suffered* from nostalgia, that one was in psychic distress as they confronted the irreversibility of time.¹⁹³

Nostalgia is still often regarded as an experience of a singular subject, as it was in its earlier iterations as a medical and psychological disorder; but today nostalgia has also expanded into the public square. This conceptual shift from physical to mental, spatial to symbol, made nostalgia vulnerable to today's right-wing political appropriation and mobilization. With a new focus on lost time, this idea of nostalgia has been retooled for the purpose of political gain. Calling on aggrieved crowds donning red hats and decrying some supposed lost greatness, U.S. conservative politicians (but also pundits, extremists, organized militia) promise ridiculous returns based on faux histories—before green energy destroyed coal industries, before trans kids played sports, before the global demand to demilitarize our police, before award-winning documentaries on glacier calving deepened our understanding of the dire climate situation.

¹⁹³ Ibid., 168.

Lauren Berlant criticizes nostalgia for this complicity in right-wing populism, specifically in Reagan Republicanism¹⁹⁴ (and, of course, reproduced later in today's current iteration of the GOP), arguing that nostalgia engenders nationalism by manipulating the citizen's supposed desire for a singular cultural identity. Herein, nostalgia is exploited affectively by stimulating anxiety around unknown futures, by linking current crises to cultural change, by framing the past with honor and the present with conspiracy. Indeed, one can identify nostalgia's active role in Brexit, in Trump's rise to power and the organized establishment of his base, in the growth of Christian nationalism, in current U.S. supreme court decision-making (Justice Thomas has implored us to reconsider contraception and gay marriage rights with the overturning of *Roe v. Wade*), in censoring critical race theory throughout U.S. public schools, and more.

Sara Ahmed extends Berlant's argument even further to follow nostalgia through "promissory forms of happiness" and into the market.¹⁹⁵ The promise of the good life, of happiness and prosperity, sits on an ever-receding horizon, toward which we anxiously and relentlessly labor. This labor energizes the economy, even if (or all the while) diluting our own affective agency. Ahmed links happiness and nostalgia by defining the latter as "affective conversion . . . an affective state that registers the presence of a happy object that is no longer or that imagines something as being happy insofar as it is no longer."¹⁹⁶ But she also argues that the compulsion toward happiness, even if that compulsion sends us backward, is not innate but curated. Happiness keeps capital in circulation. Ahmed also importantly names a persistent undercurrent to the politicization and marketization of nostalgia: whiteness. "The nostalgic vision of whiteness is at once an image of racial likeness or sameness. In mourning the loss of

¹⁹⁴ Lauren Berlant, *The Queen of America Goes to Washington City: Essays on Sex and Citizenship* (Durham, NC: Duke University Press, 1997), 3.

¹⁹⁵ Sara Ahmed, *The Promise of Happiness* (Durham, NC: Duke University Press, 2010), 160.

¹⁹⁶ *Ibid.*, 241.

such a world, migration enters the narrative as an unhappiness cause.”¹⁹⁷ In this way, difference is always made the site of unease.

I do not disagree with Berlant and Ahmed. They’re both right; the past is co-opted by conservatives to expand political power on the pretense that progress is somehow dangerous (this danger is based on futurity’s feeling of uncertainty). But rather than center nostalgia as the object of critique, I argue instead that these entries are not nostalgia but political suppression and violence, the retention of power at the cost of lives, the environment, our world. This is attachment to retainment, not renewal. This weaponizes nostalgia for the purpose of fear-mongering and othering, with the goal of maintaining traditional (white) structures and legacies of power.

We can observe the political territorialization of nostalgia the moment we scrutinize *who* is allowed to feel nostalgic and when. We don’t have to press long to see nostalgia is for the party, not the person, that nostalgia is praised in the polis and criticized in singularity. The legacy of psychoanalytic pathology lives on for the individual: for those not invested in right-wing reversion, our individual attempts to refigure or reimagine (or even just play in) nostalgia are quickly denigrated as solipsistic or narcissistic, the ultimate indulgence in escapism. We are condemned as opting out of the realities of the world for the selfish purpose of comfort or (even more nefarious) pleasure.

One might hear in these criticisms the echoes of Derrida from previous chapters. Our cultural discomfort around escapism is seen in his words on the user of drugs, how “he cuts himself off from the world, in exile from reality, far from objective reality and the real life of the

¹⁹⁷ Ibid., 121–22.

city and the community; that he escapes into a world of simulacrum and fiction.”¹⁹⁸ In Derrida’s mind, but also widely embraced by the broader social imagination around U.S. drug use, escapism is the root of addiction’s pathology. It’s selfish and interior. In seventeenth century Switzerland, Hofer intimates a similar condition with nostalgia, that it prohibits one from immersing themselves in the present moment and place.¹⁹⁹ Badia Ahad-Legardy, who informs much of my understanding of escapism, nostalgia, and the racialization of affect, writes: “This early proscription of nostalgia corresponds to contemporary critiques that argue that nostalgia possesses no productive or political purchase because it fosters escapism rather than an active engagement or reckoning with either the past or present.”²⁰⁰ Ahad-Legardy questions singular condemnations of nostalgia by exposing the historical undertones of escape and escapism. She reveals these condemnations as rooted in racism, defending the drive to escape as also the drive towards another kind of world and world-making. She reminds us of a simple yet essential truth: escape can secure survival.

Drapetomania—a disease of the mind that encouraged enslaved peoples to flee—was coined by Dr. Samuel Cartwright in 1851 to pathologize, penalize, and criminalize enslaved folks daring to escape their brutal conditions in Antebellum America. By diagnosing this will and drive toward freedom as disease, Cartwright upheld an argument for systemic slavery while also naturalizing white logic through the production of scientific knowledge.²⁰¹ Drapetomania illustrates medical science’s relentless and rooted commitment to racialized thinking, to upholding white supremacist regimes of violence and control through its discourse on health,

¹⁹⁸ Jacques Derrida, “The Rhetorics of Drugs,” in *High Culture: Reflections on Addiction and Modernity*, eds. Anna Alexander and Mark S. Roberts (Albany, NY: State University of New York Press, 2002), 25.

¹⁹⁹ Badia Ahad-Legardy, *Afro-Nostalgia: Feeling Good in Contemporary Black Culture* (Urbana, IL: University of Illinois Press, 2021), 11.

²⁰⁰ *Ibid.*

²⁰¹ *Ibid.*, 103–4.

bodies, pathologies, mental illness, and more. Ahad-Legardy's arguments reveal how at once one can be both invalidated and erased while also shaped into pathology, coerced into a grammar of meaning.²⁰² She explains how concepts like drapetomania excluded black folks from accounts of nostalgia and instead stratified their desires and behavior through aberration. Doctors scripted the need to flee as illness rather than part of the human condition: "The slave psyche emerges as a point of fascination only to highlight the extent of black peoples' perceived inferiority and, by extension, to normalize white psychic life."²⁰³ On top of this, the perception that enslaved folks could not experience nostalgia stems from racist incredulity (how could one long for their West African homelands) and the violent refusal to see one's interiority as deeply infinite, unknowable, and untouchable.

Escapism has been linked to pathology, and pathology has been a solvent source for authenticating racism under the aegis of scientific imperialism. If we're trained to question our desire to escape, to feel ashamed of our need to flee or disengage, then we're trained away from ourselves, trained to doubt the intricate workings of our interiorities, to doubt our intuitions and look toward institutional authority. Sigmund Freud famously cleaved mourning from melancholia when defining the latter as a pathological attachment to a lost object (a person, lover, or a sense of the self).²⁰⁴ By returning over and over to the object, he argued, we refuse to process the loss and instead obsess in the interiors, press the bruise. When my poetry mentor told me elegies do more than memorialize, he insinuated beyond melancholia, beyond static homage or fixed memories, some item forgotten in a closet. But Freud made pain surmountable; he made

²⁰² C. Riley Snorton, *Black on Both Sides: A Racial History of Trans Identity* (Minneapolis: University of Minnesota Press, 2017), 53.

²⁰³ Ahad-Legardy, *Afro-Nostalgia*, 16.

²⁰⁴ Sigmund Freud, "Mourning and Melancholia," in *Collected Papers*, trans. Alix Strachey and Joan Riviere, 152–70 (London: Hogarth Press, 1950).

overcoming our aches compulsory and all other versions of lingering and holding a kind of pathology, the failure to let go.

Contemporary rhetoric on nostalgia is quick to criticize and claim nostalgia as a white feeling.²⁰⁵ But of course, in so doing, names a feeling as white and excludes alternatives discourses and analyses of this complex affect. William Kurlinkus, who is also influenced by Ahad-Legardy's work, writes, "Without exploration of nostalgia's diversity, white longing becomes normalized, other 'normals' are kept aberrant, and the majority's rule in this rhetoric (their nostalgic crux-hood) vanishes."²⁰⁶ This legacy continues; we are still apt to think pathologically of nostalgia, that it is too saccharine or too regressive. We've since struggled to free ourselves from these taut descriptions, internalizing nostalgia as unhealthy or solipsistic, political and manipulative. It's no wonder why we're cautious with nostalgia, hesitant to look too close, wary of a pleasure that might also bring pain, wary to be thought of as navel-gazing, an inward wallflower seeking their escape.

But what if we want or need to opt out? What if, in so doing, we also long to feel our escape as generative, maybe even pleasurable? Cvetkovich's work on depression influences some of my own thinking on public feelings, especially in her privileging of impasse over progress. She quotes Lynda Barry at one point in writing, "We don't create a fantasy world to escape reality, we create it to be able to stay."²⁰⁷ Staying requires endurance, strategies for rest, resilience in the face of relentlessness. In order to stay, we sometimes need to escape. Despite its seeming contradiction, the ability to escape, the will to escape, is of the same desiring drive to stay, to see to our survival. Sometimes this is by whatever means possible.

²⁰⁵ See the comments from Ahmed above.

²⁰⁶ William C. Kurlinkus, "Nostalgic Design: Making Memories in the Rhetoric Classroom," *Rhetoric Society Quarterly* 51 no. 5 (2021): 424.

²⁰⁷ Cvetkovich, *Depression*, 205.

There is a weariness, a threadbare, hung-over affect to Elliott Smith's music, a tenor of trying to get through the day. "So sick and tired of all these pictures of me,"²⁰⁸ sings Elliott with fatigue, how he longs to escape a world that won't recognize him for who he is. Trapped within his repeating anxieties, he sings of "speed-trials while standing in place." Elliott was notoriously pained by spotlight. Interviews are difficult to watch, as he shifts awkwardly from the attention. He was also known for perfectionism, restarting songs on stage until he got them perfect. When he plays his cover of "Jealous Guy" on the Jon Brion Show, he shyly asks, "are you ready?" To which Brion laughs and replies, "By the looks of things no, but I'm going to force you to play it."²⁰⁹ Elliott wears all brown, blinks sleepy eyes, and murmurs quietly. He starts the song over because he messes up, twice. He mumbles an apology. He mumbles an explanation. He hesitates and balks. But when he finally gets into the song, his voice is clear and striking. It takes up space. "I was dreaming of the past. And my heart was beating fast."²¹⁰ This quiet pivot from falter to song is everything. Elliott summons out of himself a feeling that is at once singular (it is his) and collective (shared, borrowed from John Lennon and brought to this audience, which now includes me and whoever else finds the clip on YouTube). I fall into it. Despite all the strain, witnessing Elliott sing is listening to beauty find its way through the imperceptible. This is desire, what we long to do, to cleanly translate a feeling. And yet this work so often evades us. Desire as slippage—this is being trans and closeted in the 90s when you not only lack the language but the imagination for something else. "No one broke your heart. You broke your own

²⁰⁸ Elliott Smith, "Pictures of Me," track 5 on *Either/Or*, Kill Rock Stars Records, 1997.

²⁰⁹ Junk Bond Trader, "Elliott Smith – Lennon, Jealous Guy cover [Live on the Jon Brion Show]," YouTube Video, 4:40, January 18, 2013, <https://www.youtube.com/watch?v=zunr2TmKZf8>

²¹⁰ *Ibid.*

because you can't finish what you start," Smith sings in "Alameda."²¹¹ It would take me years to finish what I started. Even then, the end was just another beginning, another return to the same lesson, the same lines, the möbius strip wrung and released.

As a teen I obsessively kept journals, writing and sketching to stay busy through the school day, then late at night when home alone. In those years, the first few of the new millennium, I wrote constantly, relentlessly digging into the soft pages of spiral bound notebooks. Headphones on, I often worked in my brother's room, a practice I got in the habit of doing since he left home the previous summer, days after my dad also abruptly split to leave our family for another. The house was unmoving, my mom working, at her boyfriends', or sleeping into the afternoon, an apparition of care. I woke myself each morning and poured cereal into a bowl; I showered and walked to school in the dark. When I came home I would make dinner, watch TV, and do my homework. And then I'd write late into the night, with headphones and minimal light, crowded into the feeling of alone. The batteries were always dying in my walkman, so I steeped myself in its elegy to ask who will see this hurt kid, alone and writing, and just generally being a good fucking kid. My journals became an endless archive—poems and verses and sketches to catalog a day, but also a calling out without echo.

I also found myself drawing the same portrait over and over in the margins: shaggy hair covering vacant eyes, messenger bag slung around slouched shoulders, dark turtle neck, and bulky headphones—a 90s boy. I drew them anonymous and androgynous, even writing next to the reiterating figures, "Who is this guy I keep drawing?" Looking back, I laugh at the earnestness of a question I've now answered, an answer into which I painfully grew. He's the boy I wanted to be, the boy I was. He was me. My quiet work, sitting alone with a notebook and headphones, listening to my favorite albums on repeat, ceded me the space to collapse inward.

²¹¹ Elliott Smith, "Alameda," track 2 on *Either/Or*, Kill Rock Stars Records, 1997.

All those boys, these boys who look like Elliott Smith . . . I was drawing (and redrawing) a feeling, outlining a vision of desire that I could not yet articulate through language: the boy I dreamed of being.

As we explored in earlier chapters, capitalism invests in linear constructs of time to enforce designated outcomes: profit, reproduction, progress, but also health and happiness. Anything less gets scripted into obstinate delay. We are only meant to look forward, with the exception of regret. But even a remorseful backward gaze serves to reinforce a “better” future, the rock bottom a foil to brighter days. We are trained into linear time, what Elizabeth Freeman calls chrononormativity,²¹² the notion we grow up, get educated, secure jobs, reproduce. We are trained to conflate development with economic productivity. In the first chapter we explored the concept of “stuck” in the context of addiction, that those not *moving on* with their lives are somehow idling away their days, forfeiting their standing as a “productive member of society.” The pathology of stuck reinforces capitalist conceits of time, making it only possible to see the human, to see humanity, in terms of development. How can we not internalize ourselves as failures if we’re not “moving up” or “moving on”?

We remember again Kathryn Bond Stockton’s words on the queer child, that “There are ways of growing that are not growing up. The ‘gay’ child’s fascinating asynchronicities, its required self-ghosting measures, its appearance only after its death, and its frequent fallback onto metaphors (as a way to grasp itself) indicate we need new words for growth.”²¹³ Stockton’s request for language around growing and growth is foremost rhetorical—we literally need to

²¹² Elizabeth Freeman *Time Binds: Queer Temporalities, Queer Histories* (Durham, NC: Duke University Press, 2010), 3.

²¹³ Kathryn Bond Stockton, *The Queer Child: Or Growing Sideways in the Twentieth Century* (Durham, NC: Duke University Press, 2009), 11.

curate and circulate new language—but also imaginative. She wants us to understand the queer child (or perhaps just the child) beyond linear conceits of development, that there are other ways of growing. Growth can move sideways, or it can linger, drag. Or it can even move backwards, doubling over itself. Jack Halberstam invites us into imaginative habits that resist mastery. He calls this “knowledge from below,”²¹⁴ knowledge that is more concerned with unsettling (the killjoy) than resolving. Unsettling mimics the work of the archive, digging into the past as recon or as rescue, to illuminate ways of dragging time so that we might honor our feelings and allow ourselves to dream in a past knowledge that is, in this very moment, renewing itself. It allows us our agency without requiring mastery. And if we can imagine it this way, going back and folding over itself, we can start to imagine growth in terms outside of linearity: as a fractal, or as an assemblage, as dense and tactile and complex. As archive. We return to the same books and lessons. We write the same lines, poems, essays. We replay the same sad songs.

I’m not an archivist, in profession or in theory. My archival pursuits are mostly me sitting on the floor, leafing through old journals and washed-out photos from disposable cameras. So many others can and will do better work explaining the life, function, and potential of the archive (see Saidiya Hartman, among others, for example).²¹⁵ But if we’re going to talk about nostalgia, it seems impossible, if not plainly undesired, to extricate the archive from the work we’re trying to do. Freud wrote that while mourning allows us to move on after the loss of an object, melancholia hampers our emotional growth as we dwell, solipsistic and obstinate, in stubborn attachment to that object. I don’t take issue with the distinction between melancholy and

²¹⁴ Jack Halberstam, *The Art of Queer Failure* (Durham, NC: Duke University Press, 2011), 2.

²¹⁵ See, for example, Heather Love, *Feeling Backward: Loss and the Politics of Queer History* (Cambridge, MA: Harvard University Press, 2009); Saidiya Hartman, “Venus in Two Acts,” *Small Axe* 12, no. 2 (June 2008): 1–14; Arondekar Anjali, Ann Cvetkovich, Christina B. Hanhardt, Regina Kunzel, Tavia Nyong’o, Juana María Rodríguez, Susan Stryker, Daniel Marshall, Kevin P. Murphy, and Zeb Tortorici, “Queering Archives: A Roundtable Discussion,” *Radical History Review* 122 (May 2015): 211–31; Amy L. Stone and Jaime Cantrell, eds., *Out of the Closet, Into the Archives: Researching Sexual Histories* (Albany, NY: SUNY Press, 2016); Ann Cvetkovich, *An Archive of Feelings: Trauma, Sexuality, and Lesbian Public Cultures* (Durham, NC: Duke University Press, 2003).

mourning as much as the pathologization of the former. If we are *meant to move on*, then we are coerced into an elegy without consent. Ahmed challenges Freud to recuperate melancholia in queer terms. She installs an ethic in attachment and signals archive, writing that “Keeping the past alive, even as that which has been lost, is ethical: the object is not severed from history, or encrypted, but can acquire new meanings and possibilities in the present.”²¹⁶

Ahmed offers a significant contribution to the genealogy of nostalgia in that, for her, loss is not just transferred between the external and internal, because “for the object to be lost, *it must already have existed within the subject*.”²¹⁷ She describes a “withness” that impresses our bodies upon one other in “a dynamic process of perpetual resurfacing.”²¹⁸ We shape one another. Maintaining our attachments to the lost loved one is a way of grieving in which we keep impressions of the other “alive” even though they’re gone. There is an epistemological function to loss in that how we respond “requires us to rethink what it means to live with death.”²¹⁹ I therefore extend this argument to claim that in maintaining our attachments to a lost self, we keep ourselves alive.

For Ahmed, living alongside death takes on heightened meaning for trans and queers folks, for people of color, for those who live lives in constant proximity to loss (material death but also emotional, gendered, psychic loss), and for whom a regenerating attachment to loss can actually create a sense of possibility and community.²²⁰ Traditional mourning serves only closure and sentimentality; it closes like an urn, putting to rest. But when mourning is diffuse, a climate in which one lives,²²¹ the feeling of such total immersion creates a problem for language and

²¹⁶ Sara Ahmed, *The Cultural Politics of Emotion* (Abingdon, UK: Routledge, 2004), 159.

²¹⁷ *Ibid.*, 160, emphasis original.

²¹⁸ *Ibid.*

²¹⁹ *Ibid.*, 159.

²²⁰ *Ibid.*, 161.

²²¹ See Christine Sharpe, *In the Wake: On Blackness and Being* (Durham, NC: Duke University Press, 2016). In this profound text, Sharpe describes mourning as a climate. Meaning, we are totally saturated by systemic violence,

legibility—it is difficult to describe our reoccurring aches when we are pressed on all sides for diagnosis and resolution. Archives, however, grapple with this very urgency to name the lost without giving closure, to drag out the contained knowledge of the past to insist on uncontained futures. For each of us and our personal archives, by taking up Ahmed’s vision we give ourselves permission to mourn melancholically, to obsess over what hurts us until we might finally give that hurt a name. But only if we so wish (see previous chapter).

Archives immerse us in a state of both interminability and temporality—the present imbued with the past and braced against the future. Meaning, we call bullshit on Freud. Freud’s demand that one mourn every loss outlines those losses as unconnected. But this is not the reality of our enmeshed, assembled lives. New pain triggers the memories and even the physical manifestations of old pain. While Freud might argue that mourning would properly dispose us of these re-triggering events, we now know to resist such expectations, as these expectations are rooted in fraudulent conceptions of emotions, our bodies, our social lives. Instead we honor what’s lost while, simultaneously, resisting memorialization. If queer, trans, drug using, and bi-poc folks live within a climate of violence—both the tiny cuts and the systemic injuries—then the demand to mourn is, implicitly, a demand to see our losses as random or arbitrary, not the result of medical systems of catalog and control. There’s a reason why I didn’t have the language for being queer and trans as a youth.

I am especially interested in how nostalgia takes us into our archives to offer more creative ways of knowing ourselves and our pasts, through which we might gently protect our futures. I join Kurlinkus and Ahad-Legardy to participate in an exploration of nostalgia’s

grief, and losing; and the systems (capitalism, for example) that create this ongoing endurance of mourning are inescapable. Sharpe argues that continual and reiterating loss for black communities means living under occupation wherein “individual lives are always swept up in the wake” (8). Sharpe writes that wake work troubles conventional notions of loss precisely because of seeing loss in its interminability (19). The object is always lost and being lost, engendering a “total climate” (a witness) of living in and with death (21).

diversity, its potential for feeling into the illimitable landscape of the self. We are always renewing; this is not only beautiful but it affirms us as powerful agents, worldmakers, makers of our worlds. Specifically, I want to extend Kurlinkus and Ahad-Legardy's work to focus on agency found in our archives. As in, how can practicing nostalgia not only soothe us as we experience vulnerability and otherness as queer people, but how also does it reveal our agency to ourselves? How does it nourish our relationship to empowerment and possibility? How is this felt in the body? And how does it deepen our own literacies of ourselves?

Winter in Eugene, Oregon is mild and melancholic: lifted gray skies, bright green ferns bent over in respite, but also the foothills on the north and south ends of town as reminders of more wild; it doesn't take one long to reach higher ground and its rushing waterfalls, hot springs, clear rivers, and snow fall. It's why I moved from the Midwest in my late twenties. Some small thing ached in me, hinted I might need all that green to endure something dark.

Coming out later in life (I have been told over and over again thirty is late) disassembled my sense of being, my identity. I was more negation than pulse, more pain than euphoria. Dissolving my known self while trying to cultivate the new self seemed impossible. The only thing that brought me peace at that time was Smith's music. In those wrought weeks of separation, when my ex was at home packing up his stuff, I would walk for hours around Eugene listening to Elliott's entire catalog, finding endurance through the familiar feelings of solitude and worry. "Tired of being down, I got no fight."²²² His songs made the liminal space between one life and another tolerable. This is not to say his art (or, any art, really) saved my life, but it sustained my survival, gave me an echo within which to hide. I walked the neighborhoods of my mossy town, a town just two hours south of where Smith grew up, with a raincoat to my throat and earbuds in

²²² Elliott Smith, "Twilight," track 9 on *Basement on a Hill*, ANTI- Records, 2004.

my ears, following pavement the color of rain and trying to keep the fear at bay. Knowing if I did, then I might exist into a future I had some hand in making.

I walked a lot as a teen too, with curated mixtapes comprised of Elliott, The Smiths, Bright Eyes, Modest Mouse, and Splender. I ambled barefoot through my suburban Detroit neighborhood alone at night to feel, counter-intuitive as it seems, less vulnerable, which is what I felt all day at school and home—vulnerable, that though I was invisible, a specter against slammed lockers, I was also a flame of difference. I buried myself under hoodies and stayed quiet in class. I avoided my mom’s resentments and my stepfather’s alcoholic diatribes. I learned to walk the eggshells. So at night I would take to the sidewalks to take up space in the world without being noticed, without others privy to my crushed, queer feelings. No one ever noticed I wasn’t home and I said “it’s ok” more than I heard my own name.

“Don’t get upset about it, no, not anymore / there’s nothing wrong that wasn’t wrong before,” Elliott sings in “No Name No. 5.”²²³ Many of Elliott’s songs are left untitled, a sign not of indifference or indecision, but the refusal of definitives. “Between the Bars” confirms as much. “The potential you’ll be that you’ll never see”²²⁴ tells us we are already our full selves, even as so much remains unknown. This is Rilke, living the questions and taking on the pain of it. We are who we are, but we are also on our way to ourselves, always in process. We are between the bars. The past self is maybe haunting, inescapable, but the pain of that truth can do more than just burn.

My adolescent desire to feel Elliott was my desire to be Elliott, to cross those gendered boundaries in the obvious embodied way, to be the boy. But also, my longing traces the lines of affect; I followed feeling, Elliott’s shyness, his sensitivities, and his deep sadness. I tracked him

²²³ Smith, “No Name No. 5,” *Either/Or*.

²²⁴ Smith, “Between the Bars,” *Either/Or*.

into familiar spaces of alienation and isolation, where the interior brings respite, where we can as Elliott sings, “forget all about the pressure of days,”²²⁵ where we can drive away those images of ourselves that are stuck in our heads. We can imagine “otherwise.” It is not just to be the boy, then, but to be allowed all the feelings and movements of that boy, to feel my body crawl inside of that desire and grow.

Nostalgia is pleasurable. It literally, somatically feels good to remember: whether we’re with college friends laughing about unforgettable house parties or with our partners poring over details from the first date. These are intentional memory punctures, collectively embarked upon and relationally spurred into warm feeling. But memory also moves without mandate, surfacing without notice. And this feels good too, the unsolicited recovery of something once lost (this may also feel bad too, of course, depending on what is recovered). There is a stun to nostalgia in this, when we are not looking for our histories but those histories surface in our daily lives nonetheless—a long lost song, a found letter, a buoyant memory. Nostalgia is sensory and sensational. While much of what we feel is immediately siphoned into our intellects—conceptualized and clarified, classified into discrete emotions—nostalgia flits away. Think of how quickly a smell transports us, sometimes to an unknown past, our synapses fired but our recall dragging. Think of how our favorite songs from adolescence still warm us, how our bodies so intimately know the sonic progression. Our senses are tied to memory; our bodies hold them. What we hear, smell, taste—our bodies catalog events *through* the sensory feeling of that event. Our bodies were built to remember, and to remember through sensation, as somatic retrieval. Why are we *not* talking more about nostalgia in affect studies? But this is not all this achy affect can do; it brings the body and imagination into deeper unification.

²²⁵ Ibid.

The pleasure in nostalgia, though so often thought as basking in better times, expands far beyond “good” memories. We tell a story to reframe it with humor, rather than anxiety and stress. We tell a story to reframe it with anger, rather than confusion and capitulation. Nostalgia is as much about imagination as it is feeling. This makes it something we can nurture. “Nostalgia isn’t only something that happens to us; it’s also a universally available tool people deploy to resist over-innovation and capitalist burnout,” Kurlinkus argues, “here, nostalgia becomes the power to imagine otherwise.”²²⁶ Against the relentless call to produce, nostalgia justifies our need to pause.

While Kurlinkus’ “otherwise” offers few details or directives for our imaginary spirits, he indicates an excess of opportunity for us—as writers, artists, dreamers—to creatively rethink ourselves. This has tangible outcomes in how we participate in world-making. For example, nostalgia can help us resist the gentrification and whitewashing of physical neighborhoods as well as our legacies and histories. Sarah Schulman’s *Gentrification of the Mind* is a call for remembering things *as they were*, without amnesia or reduction.²²⁷ Again, Kurlinkus writes, “Nostalgia’s uncontained temporality, its critique of the present on behalf of the past in hopes of making better futures, is definitionally a training ground for world building.”²²⁸ The pause inherent to nostalgia, the “impasse,” stuckness, or lingering of nostalgia serves us temporal

²²⁶ Kurlinkus, “Nostalgic Design,” 428.

²²⁷ See Sarah Schulman, *Gentrification of the Mind* (Berkeley, CA: University of California Press, 2012). Schulman emphasizes consciousness preservation as antidote for neoliberal gentrification of minoritized experience. “As we become conscious about the gentrified mind, the value of accountability must return to our vocabulary and become our greatest tactic for change. . . For in the end, all of this self-deception and replacing, this prioritizing and marginalizing, this smoothing over and pushing out, all of this profoundly affects how we think” (52). Schulman is therefore concerned not only about physical gentrification, in urban spaces and university buildings, but about the epistemological repercussions of this gentrification. She urges accountability, as it is always “in the interest of justice” and will protect minds, memories, and bodies from the commodification and control of neoliberal institutions (ibid).

²²⁸ Kurlinkus, “Nostalgic Design,” 436.

agency, wherein we creatively mine the past, not to re-make it but to re-make what's ahead, to potentially interrupt a future being forced upon us.

Ahad-Legardy insists our interruptions need not be polite, but instead creative and reclaiming: we're "not to relive the past as it 'once was' but rather to reframe"²²⁹ it, she says. This is how we approach impossibility. We cannot escape the systems within which we are embedded. But we can disrupt or scramble those systems, rescripting its narrative code. We cannot change our pasts, but we can return with intention of better knowing ourselves, of giving ourselves voice, of tracing our felt needs. Nostalgia is an act of sensorial archiving, as we attune ourselves—through feeling and sense—to those past voices, projects, and artifacts that can be unburied for the purpose of renewal, or for the even more simple purpose of awe. We go into our archives to witness ourselves as strong when, at the time, we felt only ruined by our weaknesses, to turn toward some version of the self that still moves within us, that still requires some attention.

Backward care for forward endurance, archive is linked to futurity while informed by the past. As Derrida once wrote, "There would indeed be no archive desire without radical finitude, without the possibility of a forgetfulness."²³⁰ The drive to archive, according to Derrida, emerges from our death drive, our will to be and our will to be remembered. But beyond our desire for legacy, we do more than preserve the past through archival work; we also disrupt the present. Archival work, even if it means opening old journals or uncovering old mixtapes, is the work of rupture: both an epistemological and aesthetic labor in which we trouble conventional notions of loss.²³¹ This is a witness of loss, that we sense our object not as gone, but as always in a state of

²²⁹ Ahad-Legardy, *Afro-Nostalgia*, 33.

²³⁰ Jacques Derrida, *Archive Fever: A Freudian Impression*, trans. Eric Prenowitz (Chicago, IL: University of Chicago Press, 1998), 19.

²³¹ Saidiya Hartman, *Lose Your Mother: A Journey along the Atlantic Slave Route* (New York: Farrar, Straus, and

losing. It makes the archive porous, where we bend memory, releasing ourselves from the pressures of “working through” the past. In the first chapters we explored discursive strategies for surviving both a drug-phobic and transphobic world, that being shy offers one way to dodge, divert, and redirect, that we can mobilize our own agency as storytellers (and human beings) to, in essence, talk our way around shit. Nostalgia is another function of the alternative take. It is, for example, how we might meet our trans childhood with kindness, not only regret.

Nostalgia, then, meets us in the question of how we might describe vulnerability, especially the vulnerable body, without also at the same time constraining one to precarity. How do we talk about what’s difficult, the grit, without relying on spectacle, or what hurts without relying on pathology? While nostalgia describes the achy pleasure in return, the archive offers the material space in which our artifacts affirm us as creative, agential beings. We do the work in order to feel—to feel the pain of loss when numbness beckons us into burnout; to feel the pleasure of a beloved’s memory; to feel angry or outraged; to collage and curate and then, maybe, to feel some sense of control. It is this feeling of agency I want to continue exploring into our next chapter on wonder. But it has seedlings in nostalgia.

While innumerable pressures—the psychoanalytic legacies of Freud, neoliberal calls for optimization, even crucial issues like the climate crisis—have us constantly looking forward, we can still look back, for an array of purposes and pleasures. Trans folks, for example, are often encouraged to look forward, but when and if they must approach the past to do so through narratives of incredulity (look how obviously queer I was with that bowl cut and tucked flannel!), narratives of crossed thresholds (the “liberation” in coming out), and siloed accounts of disjointed desire (the unfulfilled longing for the right adolescence).

Giroux, 2007), 19.

This is not to say those washed-out polaroids of fourteen-year-old me don't scream gender confusion. Oh they do. While looking back brings up the pain of difference and my inability to advocate for myself—the proverbial eggshells and a disappeared family—I see also my self-ghosting measures and nascent agency, the inked pages from my torn-up sketchpad, my brother's hand-me-down hoodies, mixtapes that gave me community. It wasn't much, but I worked with what I had, and it took me into new futures. “Growing memories and the ability to access memory is a skill that allows access to eternity,”²³² writes Joy Harjo.

After college, inexplicably, I didn't listen to Elliott Smith for more than a decade. Maybe I was distracted by the influx of indie music in the early Aughts—Bon Iver, Sufjan Stevens, Death Cab for Cutie, more shaggy hair boys—or maybe life overtook me in the way it does in one's early twenties. While not sure what prompted my hiatus with his music, my return to it is much more detectable, when I was thirty, far from my Midwest homeland and thumbing through the Smith vinyl collection at House of Records. I bought *Either/Or*, walked home with it under my raincoat, and immediately put needle to black and listened to its whirr, hum, then the first strum of a C chord. My return to Smith's music was of course nostalgic, a pleasure also pocked with ache as I remembered being a teen. But as I receded into memories, I fell back into that unformed adolescence, my nascent trans childhood calling back to me. I returned to my stuck teen self, when I would walk my neighborhood listening to his music, trying to put distance between myself and home, trying to imagine a future that felt intoxicating, not scripted.

Cameron Awkward-Rich writes, “I had to cultivate—actively cultivate—a kind of wide-eyed optimism about what the future, and the future of my own body, could entail. I had to believe that feeling, intense feeling, was not only important but also potentially life- and world-

²³² Joy Harjo, *Poet Warrior* (New York: Norton, 2021), 13.

changing. That with care and time and resources, my desire for ‘something better’ could materialize.”²³³ He’s describing adolescent dreaming, how he learned to lean into futurity with hope, and how there was no other way than wide-eyed. Because we cannot forfeit the future. My young self depends on it, just as they depended on me reaching adulthood (a milestone I was sure I’d never see) and finding joy, feeling widely, desiring deeply. Both selves need one another. Because both selves are the same self, collapsing into one another to inspire endless possibility.

I am particularly invested in understanding pain beyond spectacle, which means an investment in agency and assemblages, in seeing ourselves as complex creatures who are both ensnared in systems and free of those systems, who live on despite constant loss and losing. I am interested in how this shows up as archival creation and attachment. There is, after all this, a political potential to nostalgia, wherein we speak beyond the demanded scripts of marginality that make us legible to others. Nostalgia allows us to insist our pain not be normalized. Or categorized. Or, worst of all, elegized. It helps us see loss not necessarily in isolation, but in its multiples.

Framing nostalgia as an archival enterprise shows us just how useful nostalgia can be in narrative reclamation, in feeling our agency as essential. A nostalgic narrative form, for example, prompts alternative ways to explain ourselves, describe our needs, to speak with self-given authority, nurture our agency, or even just play the system. A nostalgic narrative form refuses to cast the past through only regret. It also locates authority in the ordinary, not in the elite. We do not, say, need the credentials presumed by scientific research, or its emphasis on futures, to construct the story of ourselves. Rather, nostalgia provides a different set of discursive

²³³ Cameron Awkward-Rich, “I Wish I Knew How It Would Feel to Be Free,” *The Paris Review*, June 11, 2020, <https://www.theparisreview.org/blog/2020/06/11/i-wish-i-knew-how-it-would-feel-to-be-free/>

opportunities. We can manipulate language, withhold it, fabulate it.²³⁴ We do not have to follow the same scripted move, from rock bottoms to second chances. Instead, we can stay with the body itself, we can stay with the body and its desire for scent and song. We can use poetics, scraps of journal entries, or historical archives to go back and renew voice. Nostalgia may actually help us attenuate Freud's pathologization of melancholia by shoring up the political and aesthetic (as well as personal) potentialities of attachment (and re-attachment). We can bend time away from colonial and capital constructions of linearity. But, more than anything, we can give ourselves permission to be weird, queer, fabulous, and feeling as we think about how time inflects on us, and how we inflect on time. We can describe the world as it is to queer communities: painful, if not immediately dangerous. But this cannot be the whole of it. We also experience beauty and how beauty does not erase the reality of our losses, mournings, or melancholies. It's not one or the other, but an enmeshment, embracing ourselves as in pain and more than our pain. We are always more.

By allowing ourselves to be nostalgic, to talk openly about the past with purposes other than explanation, by listening to that song that immediately pulls us back to a contained memory, we feel ourselves as we were then. So often when I speak of my early twenties—the decade I understand as the repressed fallout of my pained teen years—I find myself leaning on discourse that explains, that makes sense of a withheld self, that arcs from closet to freedom, illegible to legible. But in my own nostalgic dreaming, I can go back and remember, even in my stunted, scared, stalled years I was still vibrantly living, listening to my headphones and drawing in my

²³⁴ See Tavia Nyong'o, *Afro-Fabulations: The Queer Drama of Black Life* (New York: New York University Press, 2018). He insists on a porous archive, one that resembles the non-neutrality of time, one that confronts the complex problem of how the archive names and insists on containing while also being defined by its ephemerality. Nyong'o bends memory, releasing us from the pressures of either "working through" or "escaping" the past. Rather, he insists on disjunction, through which we strike illegibilities across the surfaces of expectation and by which we foil "any effort to cohere the narrative of the past into a single, stable, and linear story." Nyong'o encourages us to tease out the rewards of fabulated archiving to spawn alternative temporalities, all the while envisaging "new genres of the human out of the fabulous, formless darkness of an anti-black world" (26).

notebooks and full of futural wonder. Nostalgia breaks the linearity demanded of me. I'm not a more evolved or better person now, now that I'm out and have gained a deeper literacy of who I am and what I want. This is an especially plaguing idea of how we've come to understand being trans: that *before* equals pain, dysphoria, and incongruence. Rather, I'm still myself, but with more of a sense of how to protect my ongoingness: writing poems and traversing long ridgelines, but also feeling my way into bodily autonomy by living the questions. By writing myself into those questions.

When Elliott Smith died in 2003, I sat in my car in my college parking lot, stunned and disoriented. This person, who I never knew but whose art carried me safely through my impossible high school years, was gone. He couldn't make it. How could I then? What horrible confirmation, that such interior pain, with which I had so resonated, does end in tragedy. I could not access Elliott the way I can now: bootleg footage from small shows he played, clips from pained interviews, even renderings of his Ferdinand tattoo—they're now all available online, artifacts that, when gathered, give us some of Elliott but not everything. The archive can never give everything. His death was ruled inconclusive despite the two non-hesitating knife wounds to the chest. I was halfway through college when he died, still drawing my boys. I had left home while my family broke into separate parts—my brother playing Nintendo in a grey apartment in California, my dad on a Michigan shoreline, my mom curled endlessly into herself. So much distance between all our same skins

I leaned into books and music, tried to make friends, but always felt myself estranged and on the cusp. I saw Elliott's future as my own; we were the same boys on the same path, I thought. I could not name my pain then in the way I can now—the pain of suppressing an urgent, surfacing thing. But equally, I could not name the desire as queer—a projection of wanting to be

him, of hair in my eyes, t-shirt tight across my broad chest, baggy cargo pants and black airwalks. My need to be the quiet moody guy was a trans desire. In the only moments when this feeling breached, all I could do was burrow into my music and wait. Specter of potential.

There's a reason why music is so often a courier of nostalgia. Music affects our senses, stores our memories through vibrations and chords, licks and tones. While I'm not sure music, poetry, or art at large can save the world, I do think our attentions on *saving*, as opposed to nurturing or retreating or witnessing, misguide the conversation on aesthetic possibility. It's not whether a poem or song can mend the deeply riven truths of our world. They do, of course, expose those truths. But whether we might know ourselves—and care for ourselves—better through whatever moves us.

It's not lost on me that my favorite album by Elliott Smith, *Either/Or*, also a nod to Søren Kierkegaard's first work of the same name,²³⁵ portends a binary. For Kierkegaard, aesthetics and ethics are oppositional forces: subjective art (*either*) counters an objective good (*or*), feeling counters logic. The question, for Kierkegaard (but presumably also for Elliott) is not which side you choose—art or ethic—but why you choose what you do, and what it means for who you become. If I have to choose then I choose art. I choose beauty, desire, seduction, drama—the “either” in *either/or*. But I also don't buy into the coercion of this choice. And, as it turns out, neither does Kierkegaard. In fact, this was his whole point. It took me many years of reading and *returning* to this text to realize this, that the either/or construction is a fallacy, a rhetorical technique used to persuade one into believing that only two options (among an invisible many) exist, and only one is correct. This is also called the false dilemma. Once we make visible those

²³⁵ Søren Kierkegaard, *Either/Or*, trans. David F. Swenson and Lillian Marvin Swenson (Garden City, NY: Doubleday, 1959).

invisible choices, we open ourselves toward more potentiality, through which we become more creative thinkers, knowers, and feelers. Kierkegaard makes an argument for a beautiful ethics. Or ethical beauty. He proves the dissolution of the binary can forge infinite possibility.

Elliott in my headphones, singing about his poison arms, sheltered me as I suffered through high school hidden under bulky clothes, trying to take up the least amount of space possible. Protection but also projection; Elliott helped me envision a future outside of East Michigan, outside of my own skin, through the kind of affective connection that happens with our favorite music. Because I could *feel* Elliott's music, I felt beyond my own scope of possibility. I am *either*. My body is either. My gender is either, how I long for Elliott's fashion, for that slouched shyness he exudes on the album cover. *Either* intimates the non-committal, occurs in the moment before we make a decision. *Either* opens casually toward options, not out of a will to withhold, but out of a resistance to prematurely answer any question of the self.

Being trans nonbinary has required a serious relinquishment on answers and dis-attachment from the entrenched idea that we must know all of ourselves. And it has me joining Kierkegaard to reject the false dichotomy of two choices. This is a decision I am constantly making and re-making, like a vow one renews in the quotidian motions of everyday life. Or like a song one constantly returns to or puts on another playlist. I do not, of course, reject binaried gender. We are all fighting for our gender (some much more than others) and we all have a right to our gender. Rather, nonbinary emerges as one of the many possibilities from the either/or ruins.

The final track on *Either/Or* is Elliott's popular love song, "Say Yes." It opens simply, quietly: "I'm in love with the world / through the eyes of a girl."²³⁶ Is this not how desire often feels, waking us to a buzzing world, our senses brimming with wonder? Desire motors us

²³⁶ Elliott Smith, "Say Yes," track 12 on *Either/Or*, Kill Rock Stars Records, 1997.

forward, through the mundane, so that when we're sitting in a dark living room on a gray day, when the world shrinks down to the size of an apartment, we still sense our own futurity. We are still wide-eyed in our optimisms.

“Say Yes” is not definitive about its futures. Indeed, for the whole track we are waiting on an answer, on whether the girl in the song sticks around. “It’s always been wait and see.” The album culminates in this two-minute piece of music. All his wandering through streets, bars, parades, the sleepwalking and waking up in unknown places, “Say Yes” does not present a tidy ending to *Either/Or*. And why should it? This was not Elliott’s way. Instead, the song underscores an either/or moment: a choice is made (the girl) but the future remains mystified (will she stay), clouded by the density of that question. There is an unease, a pain even, to this kind of “wait and see,” wherein Elliott articulates an unavoidable truth of being alive and having a body: there is so much we don’t yet know about ourselves, including what the future holds. He describes this as a happy day followed by all “that gets fucked up,”²³⁷ making you “pay” for good moments. Collapsing happiness into melancholia, Elliott makes them one.

Elliott Smith was a lyrical musician. He not only wrote beautiful songs, he created an archive of music that quietly vibrates in deep feeling. In poetry’s long tradition, the lyrical genre dates back to the ancient Greeks to describe short poems marked by emotion and imagery; lyrics are moved forward by the sense of wonder and feeling. “One definition of the lyric might be that it is a method of searching for something that can’t be found,” writes Fanny Howe. “It is an air that blows and buoys and settles. It says ‘Not this, not this’ instead of ‘I have it.’”²³⁸ The lyrical, in this way, is a radical alternative to the Greek epic, to Odysseus’ search for home.

I am *not this, not this*. My trans body says *not this, not this*.

²³⁷ Ibid.

²³⁸ Fanny Howe, *The Wedding Dress: Meditations on Word and Life* (Berkeley, CA: University of California Press, 2003), 21.

When I first heard Elliott's music I was on the brink of some emotional abyss, alone with my headphones in an empty house. Elliott's songs, as they circle around ambiguous ache—a constant pain that cannot be made legible—became crucial to my own sense of waywardness as I navigated high school, shopped at the mall with friends, hid my body in the locker room. This then repeated itself a decade later. When I returned to his music at thirty and living in Eugene, amidst a painful divorce and an even more painful coming out, I remembered these unfinished adolescent feelings. Through the complex chord riffs, the minor keys of the piano, and his lonesome lyrics, an old feeling began to hum again. I brought *Either/Or* home from House of Records and a buried imagination began to awaken. It was a return to Elliott's sound, to a nostalgic state of wonder, that nurtured the awakening. Which is one way to say, nostalgia advocates for a future, even if and while that future changes shape.

It wasn't just that my return to this sadboy music offered a safe place to mourn, and therefore, a way further into my attachment to pain, what we might call sulking. That wasn't why I went to Elliott's catalog of waltzes and ballads as an adult. It was recovered agency, the feeling of first falling in love with this music when I was fourteen, of claiming a tiny space for myself through these albums. That return to adolescent agency helped me suspect I could survive the unraveling of my adult life—of coming out, breaking up with a partner, losing family. Against all odds, I was an agent of myself then, to whom I could return to nurture that boychild as they needed to be nurtured.

Smith's music tells the story of struggle without cure. Because that is the reality of quotidian pain—there is often no fix. So instead, Smith gives us temporal attentions (wait and see), helping us to release our needs for teleological ends. Smith gives us the right to ache without requiring recovery from that pain. We can be both sad and happy, stunned in wonder or

fatigued by nerve. We don't have to choose.

I wish as a teen I was privileged to some cloudy horizons. I wish I could go back and imbue the unknown with desire, not dread. But returns are not possible, at least not through the ligaments of linear time. But by putting *Either/Or* back into my headphones, by returning to the words and measures in these twelve songs, I do feel a way back. Elliott helps me remember I am always myself, even as I am figuring it out and in process. This is the founding principle of existentialism, the home field of Kierkegaard, that we exist *within* our becoming. We never get to the end of ourselves.

This all to say, as a kid I was full of pain but also alive in wonder. This is still true. And it's true that separating pain from wonder is impossible, at least for melancholic me. In these chapters I've attempted to more deeply describe pain so that we can move beyond the spectacle—the trans person in dysphoric despair, for example. And specifically with queer and trans people, our backwards return are often only supposed to conjure despair, never pleasure. My return to sweet Elliott is a trans nostalgic move that says yes pain, but also more than pain: the delight in stealing my brother's baggy sweaters, in the many minutes it took to download a song off Napster, in drawing endless portraits of the same aching boy. Each of these is an iteration of wonder; as in, I wonder what can be, I wonder what's next, I wonder what's possible.

4. Wonder Drug: Needle Exchange as a Site of Care, Connection, and Renewal

*“Standing up for one’s self doesn’t have to be triumphant, but can be, simply, the work of reveling in flowers or blue sky—the daily practice of understanding what you love and why.”*²³⁹
—Kevin Quashie

Chelsea and I cranked battery operated fans and downed bottles of water, complained about the heat and chatted with participants while filling their orders—sterile needles, Naloxone, crack pipes and meth bowls. In between bursts of people seeking safer drug use supplies, Chelsea explained Prevention Point Pittsburgh’s (PPP) community advocate program, lamenting how busy they are, how much growth PPP has witnessed in the last few years. We gave out 100 percent more supplies in 2021 than 2020, and 2020 saw it’s own growth spurt, building 40 percent on the year before.²⁴⁰ “There’s so little time to dream about more,” they said. The community advocate program consists of eight members who receive a monthly stipend for disseminating Naloxone (the FDA-approved drug that reverses opioid overdose) throughout their communities. They reach places the mobile PPP van cannot. For some, the work perfectly hems into the ebb and flow of their daily lives. “We’re all operating on different time and space continuums,” Chelsea loves to say. For other members, they are eager to do more. Handing out

²³⁹ Kevin Quashie, *The Sovereignty of Quiet: Beyond Resistance in Black Culture* (New Brunswick, NJ: Rutgers University Press, 2012), 72.

²⁴⁰ COVID compounded problems—transportation, safe supply access, work, general levels of anxiety—for those with addiction.

ten boxes of Naloxone isn't enough. And there's more work to do. But it first has to be dreamt—as Chelsea said—then designed, organized, financed, implemented, and managed. The needs are innumerable and time is scarce. The more our programming expands, the more we need to expand. The more we learn, the more we need to learn. This structural problem seems insurmountable, that there is not even time to *dream about more*.

Even as I actively write and think against the dominant narratives on drug use, I find in these moments—me sweating in the back of a van, stocking needles, and listening to Chelsea—the compulsion toward cohesion and conclusion. I want my work—my writing and research—to reach out and capture what it feels like to be in the van (cohesion). I also want to help; and having the answers feels like the best way to help (conclusion). I am desperate for telos, as I suspect many of us are. This chapter is about the affective experience of resisting that telos. And it is why this chapter, my final chapter, became about methods.

I was awarded a summer fellowship for a project in which I proposed to work with PPP and study the affective possibilities of wonder in community public health programming on addiction and harm reduction. But the day Roe is overturned is my second day in the Prevention Point van, our mobile site that we drive from neighborhood to neighborhood. I was in Homewood with Chelsea and it was one of the hottest days yet, with participants waiting in long lines and under direct sun for water and supplies. As I rolled chore-boy, used for filtering crack, in my hands, as I put pipes and bowls into brown sandwich bags, I reflected on my proposal, flipped it around in my head, pressed on its theoretical semantics, and reckoned with how estranged it was from the reality of the moment I actually occupied. Gathering supplies—pipes, needles, safer use equipment, condoms, Naloxone—into green plastic bags, I thought about Roe as a reckoning and how *reckoning*, as a word, is kin to recognition. To realize. To see. But

reckoning is also a literacy event,²⁴¹ a crossed threshold of understanding. We can't go back. We can't unknow. To reckon with an event is to recognize and re-recognize how little we understand.

Eve Tuck and K. Wayne Yang hold me accountable; they help me think about method and challenge me to resist metaphor to stay within the work. In their piece, “Decolonization is Not a Metaphor,” they write, “He can only make his identity as a settler by making the land produce, and produce excessively, because ‘civilization’ is defined as production in excess of the ‘natural’ world (i.e., in excess of the sustainable production already present in the indigenous world).”²⁴² Part of the insistence on production is to not only stimulate wealth and expansion (though clearly that), but to fantasize toward “easier paths to reconciliation” between settler and indigenous communities.²⁴³ But, they argue, solidarity should be unsettling (wordplay intended).

Indeed, our fixation on fix distracts us from the work at hand. The slip into metaphor “turns decolonization into an empty signifier to be filled by any track towards liberation. In reality, the tracks walk all over land/people.”²⁴⁴ Trans theorists argue along similar lines, that theory reshapes the trans person into allegory,²⁴⁵ relegating one's lived experience to exoticized accounts of marginalization. Overexposed yet not seen—this has been the method I've moved against throughout the whole of my project, human beings made into spectacle for the sake of telos and what that telos conjures: knowledge extraction. How do we write while refusing this extraction, while refusing finality? How do we work toward liberation while refusing finality? Tuck and Yang argue that freedom is possible, and that while this possibility can be elaborated

²⁴¹ Linda Adler-Kassner and Elizabeth Wardle, eds, *Naming What We Know: Threshold Concepts of Writing Studies*. (Logan, UT: Utah State University Press, 2015).

²⁴² Eve Tuck and K. Wayne Yang, “Decolonization is Not a Metaphor,” *Decolonization: Indigeneity, Education, and Society* 1, no. 1 (2021): 6.

²⁴³ *Ibid.*, 4.

²⁴⁴ *Ibid.*, 7.

²⁴⁵ See Emma Heaney, *The New Woman: Literary Modernism, Queer Theory, and the Trans Feminine Allegory* (Evanston, IL: Northwestern University Press, 2018).

on through thought and theory, it cannot only be this. It is also particular and felt.²⁴⁶

This chapter is grounded in a form of autotheoretical narrative, captured in fits and starts while assisting Prevention Point Pittsburgh with their needle exchange program but elaborated on as I returned from shifts and let myself linger in uneasy feelings and untidy thought. Maia Szalavitz, in offering one of the best definitions of harm reduction I've seen, describes this work as non-teleological, a fractal always evolving, breaching boundaries and disciplines. I quote her at length from her seminal book, *Undoing Drugs: The Untold Story of Harm Reduction and the Future of Addiction*:

At its core, harm reduction is a movement for the human rights of people who use drugs. However, those rights are impinged upon from every angle—by everything from racist laws and stereotypes that drive criminalization to stigmatizing, punitive, and incompetent “treatment.” This meant that its ideas needed to be disseminated and understood across multiple disciplines and policy areas.²⁴⁷

I understand my work and writing as participating in this dissemination, one hot hour in a van at a time. While so much grinding advocacy and diligent scholarship on the U.S. opioid epidemic is being done in the public health and social work sectors, I offer just a small additional piece to this growing assemblage; I integrate affect studies to encourage a deeper approach to addiction, one that resists capitalistic constructions of the body that demand “productive,” profitable futures. My aim in this chapter is to rethink precarity within the vibrant space of needle exchange by analyzing *wonder* as an overlooked affect and as a possible method for resisting telos, attenuating spectacle, and overturning binaried concepts of power (that is, we either have it or we don't). A methodology of wonder circumvents these issues to instead venerate the subject, honor their agency, and say, *I see you* without attending to a fix. Wonder also gives us a frame for embracing what we do not know, for making complexity the object of analysis, rather than the

²⁴⁶ Tuck and Yang, “Decolonization is Not a Metaphor,” 20.

²⁴⁷ Maia Szalavitz, *Undoing Drugs: The Untold Story of Harm Reduction and the Future of Addiction* (New York: Hachette, 2021), 157.

human being. Which is to say, wonder unsettles while it also renews; and I long to find a way to write into this idea.

All this comes together to demonstrate why a methods chapter made itself necessary, and why it arrived at the end of my dissertation and in the final year of my program: I believe wonder offers a way of being in the world and studying the world that refuses mastery, refuses dominant epistemologies that operate under an agenda of production. Whether in the graduate seminar (produce new ideas) or within our own skins (produce better health marks), we feel ourselves relentlessly invited into a kind of *making* that must establish an end, the research paper or portrait of health. Wonder instead stands with us in the myriad of crises, accepting the future as unknown but worth working toward.

This chapter is also about exploring possibility through forms that hold themselves accountable to the settler need for ease and the capitalist desire for outcome. As a white graduate student, I recognize (reckon with) myself as especially prone to these influences. In Vlad Glaveanu's summative text on wonder, he writes, "How does wondering help us engage with the possible? By making us aware of the fact that our experience of the world is one among many, and that the perspectives we develop in this world are exactly that—perspectives—not ultimate and singular truths."²⁴⁸ Glaveanu defines possibility against limitations, that the latter makes the former viable. When we reckon with our limits, we usher in manifold new ways of thinking. The finite forging the infinite. In a sense, Glaveanu both highlights *and* constrains the significance of first-person form, a form I adopt and explain more below.

I then outline my unease with prevalent methods of theorizing about marginality in the context of crisis, how capital and theory convene, and how it leads us into methods that demand

²⁴⁸ Vlad P. Glaveanu, *Wonder: The Extraordinary Power of an Ordinary Experience* (Bloomsbury, UK: Bloomsbury Academic 2020), 4–5.

telos and methods that generate spectacle around a single subject. I then briefly trace wonder through its philosophical history, from Descartes to Sara Ahmed, parsing out its possibilities and limitations. This leads me into wonder as a methodological form that stays within the questions, resists the punctuating argument, recesses our theoretical labor to help us instead write affectively about the complex spaces we occupy as researchers, academics, thinkers. Finally, I braid this chapter with stories and descriptions from my work with Prevention Point Pittsburgh to, as Glaveanu explains, illustrate a perspective that is not singular or ultimate, just one of many.

I want to be very clear about who I am and how I came into this work. I hope to accomplish this via descriptive storytelling throughout, but I also want to be forthright here at the beginning, to locate myself in context. While I have personal, familiar (familial) experiences with addiction, I do not have the lived experience of attending exchange as a participant, of needing supplies such as needles or Naloxone. I don't know life on the other side of the van. Instead, I came to this work while living in Oregon, working as a freelance writer. I was vocationally adrift, engaged in temporary writing gigs, and longing for more meaning. When I reached out to an organization called HIV Alliance in Eugene, I planned to volunteer with their HIV/STI testing team, partnering mostly with queer clients seeking health resources. And I did do that, but I also started staffing the needle exchange on Monday nights. We drove an old RV to the outskirts of town, set up a table of needles and supplies, and provided burnt folgers coffee in a large carafe. I fell immediately in love with work, totally smitten by the simplicity of meeting needs without condition.

I worked at the Alliance for two years before leaving Oregon to attend graduate school in Pittsburgh. I planned to study contemporary poetics and queer theory; but after my first year, I

ached for those days in the RV and quickly pivoted into health humanities, researching the rhetorics of addiction and crisis in the U.S. public imagination. I also, in a liminal and semi-private way, came out as transmasculine at this time. This reckoning brought me to the current iteration of my dissertation, in which I combine storytelling with theory to more broadly describe how, in this dense climate of capitalism, our bodies are coerced relentlessly into explanatory labor.

I hope to, in this chapter specifically but also throughout the whole of my dissertation project, honor the reality of my subjectivity while not centering only my experience, to also describe (with depth, humility, and ownership of my limits) the community within which I am involved. This form allows me to—as Catherine Racine explains in her book on mental health, wonder, and autoethnography—expose how the “ongoing dominance of ‘scientific legitimacy’ is entrenched in a positivist, *quantifying*, *reductive* worldview, despite the emergence of a good number of ideologies challenging its current authority.”²⁴⁹ This change in form and perspective, Racine says, shifts “the researcher’s role from the ‘privileged possessor of expert knowledge’ to a collaborator and community member allied with her subject.”²⁵⁰ This is important to me, not just for the purpose of attenuating dominant methods of scholarship, but because a central tenet in harm reduction is recognizing the user of drugs, not the advocate, as the expert.

Joining Racine, I make my writing a practice for bridging life and theory, to prevent their stratification into parts. Which is another way of saying, I don’t see, or believe, life and theory to be naturally distinct from one another. Like many, this genre manifests in and is made possible through the writings of Audre Lorde, Patricia Williams, Gloria Anzaldúa, Christina Sharpe, Saidiya Hartman, Sara Ahmed, and Maggie Nelson among others. I found in these writers the

²⁴⁹ Catherine A. Racine, *Beyond Clinical Dehumanisation towards the Other in Community Mental Health Care: Levinas, Wonder, and Autoethnography* (London: Taylor and Francis, 2021), 54. Emphasis original.

²⁵⁰ *Ibid.*, 57.

shared desire to focus on life itself, and how it feels in all its confusion, beauty, and pain. “I do not believe the story of my scholarship is separate from the story of my life or the body I live,”²⁵¹ writes Stacey Waite.

This is also about accountability. Lorde, in calling back to Paolo Freire, reminds us that the “true focus of revolutionary change is never merely the oppressive situations which we seek to escape, but that piece of the oppressor which is planted deep within each of us.”²⁵² Ann Cvetkovich uses the term “academic memoir” and argues that such a genre, motivated by deconstructive principles, might “expose the material conditions and subject positions that underlie intellectual production.”²⁵³ She goes on to also say that this kind of writing “tries to be honest about the ways that activism can sometimes stall out in the routines of daily life, rather than offering revolution as a prescription for change. . . . It suggests that when asking big questions about what gives meaning to our lives, or how art or politics can promote social justice or save the planet, ordinary routines can be a resource.”²⁵⁴ I practice a genre of accountability to first describe the world, but to also own the reality that I can only describe the world as I see and participate in it. This requires vigilance of my complicity within the systems I seek to criticize.

So much is everyday and ordinary, bit by bit. So much is work. So much is just what we can do in a given moment, fraught as it is with the fallout of our own energies and emotions. So we remember to endure, to care for one another and maintain those reservoirs of compassion and desire through the gentle ache of wonder. As in: I wonder how far gentleness might go? But also anger and killjoy. I wonder how to express the impossible, if there’s a small seed of beauty in trying. I wonder if we’ve said *all* of it, and it’s now time to get working.

²⁵¹ Stacey Waite, *Teaching Queer: Radical Possibilities for Knowing and Writing* (Pittsburgh, PA: University of Pittsburgh Press, 2017), 15.

²⁵² Audre Lorde, *Sister Outsider* (New York: Ten Speed Press, 1984), 123.

²⁵³ Ann Cvetkovich, *Depression: A Public Feeling* (Durham, NC: Duke University Press, 2012), 81.

²⁵⁴ *Ibid.*

My last summer in Oregon we experienced a particularly brutal wildfire season, wherein the winds shifted and dumped black smoke into the valley for days. The Columbia Gorge had ignited during Labor Day weekend after a fifteen-year-old boy and his friends set off fireworks during a burn ban. Many hikers, myself included, were able to evacuate before the Gorge was swiftly overtaken, but the Eagle Creek Fire went on to burn for months, through winter and smoldered even into May, resulting in 50,000 acres of decimation. The teen was fined 36 million for damages,²⁵⁵ an impossible amount allocated to acquiesce public outrage. I've thought often of the fallout of those days, when the valley was pressed under a cloud of cindered smoke, when at exchange we passed out needles wearing N95 masks to protect ourselves from the fire's fibers while participants, many unhoused, had to suffer through the haze, how public health officials said "the most vulnerable should stay indoors at all times." I think about how consequences travel. I think about the public outrage, its force and attention, that though it was one boy who threw the firecracker, fossil fuel producers and their U.S. congressional accomplices have been throwing a whole a damn pyrotechnics show for decades. And I think, this is often how it goes. One body blamed, a boy made into a spectacle and gratuitously punished while a community of vulnerable humans quietly suffered. But the systems that assembled and enacted this kinetic moment?

Liz Montegary might call this a "manufactured crisis,"²⁵⁶ when legal authorities provide an optics of care under duress while, at the same time, diverting our attention to a singular subject and therefore away from systemic harm. We locate crisis (and accountability) in the

²⁵⁵ Laurel Wamsley, "Judge Orders Boy Who Started Oregon Wildfire to Pay \$36 Million in Restitution," *National Public Radio*, May 22, 2018, www.npr.org/sections/thetwo-way/2018/05/22/613374984/judge-orders-boy-who-started-oregon-wildfire-to-pay-36-million-in-restitution

²⁵⁶ Liz Montegary, "Healthy Families, Secure Bodies," *Gay and Lesbian Quarterly* 26, no. 1 (2020): 142.

physical body rather than the governing body. Montegary quotes Lauren Berlant to argue that such work “organize[s] the reproduction of life in ways that allow political crises to be cast as conditions of specific bodies and their competence at maintaining health or other conditions of social belonging.”²⁵⁷ Early eugenics told us that the singular body is the source of meaning (and money). The healthcare system has yet to fully divest from this thought, still looking toward behavior and quite literally the skin to make knowledge, to define health.

The manufactured crisis does address a real crisis, but through a method that focuses on human, not systemic, behavior. This has been blatant in the response to the opioid crisis. Undeniably, opioids can harm individual persons (though even this depends on dose) and wider communities (and this depends on public health policy). But this harm is overexposed in order to conceal ongoing, intentional, and saturated harm wrought by systems and institutions—health, legal, and government—and their influence on the social imaginaries of the people. While Purdue Pharma and the Sackler family have paid out billions in retribution for their production and false marketing of OxyContin, studies have shown that the public still blames individual users in addition to doctors and pharmaceutical companies.²⁵⁸ “Simply put, it appears that heroin users are more believed to be responsible for their poor choices whereas those addicted to prescription pills are more likely to be seen as victims to the practices of prescribing doctors,”²⁵⁹ argue one such study. “Given the different levels of attributions among these two drugs, it begs the question of whether the public views these problems as separate and distinct rather than

²⁵⁷ Ibid., 143. See also Lauren Berlant, “Slow Death,” *Critical Inquiry* 33 (Summer 2007): 754–80.

²⁵⁸ Colleen L. Barry, et al., “Understanding Americans’ View on Opioid Pain Reliever Abuse,” *Addiction* 111, no. 1 (2016): 85–93. See also, Amy K. Cook and Henry H. Brownstein, “Public Opinion and Public Policy: Heroin and Other Opioids,” *Criminal Justice Policy Review* 30, no. 8 (2019): 1163–85. See also Diana Sun et al., “Public Opinion about America’s Opioid Crisis: Severity, Sources, and Solutions in Context,” *Deviant Behavior* (2022), <https://doi.org/10.1080/01639625.2022.2071656>

²⁵⁹ Cook and Brownstein, “Public Opinion,” 1174.

related.”²⁶⁰ They’re related.

The manufactured crisis—and the energy it gathers—circulates not only through the intra-connected networks of media, policy, and community, but in our writing and even our works of activism. Trans studies, as an academic discipline but also an ongoing social issue receiving intense media and legal attention, suffers a similar struggle. “Trans bodies only seem to become valuable as a warning to others, that is, only once they are made remarkable, in danger, or taken,” argues Elizabeth Steinbock. This goes on to generate “a constant crisis mode of fear and hopelessness, rather than addressing the underlying structural problem of social stigma.”²⁶¹ By invoking “crisis” one signals a form of time—the quick and urgent invasion of a threatening pathogen—but also designates a population as “those at risk” (*the spectacle*) and mandates the significance of solution (*the telos*): the user of drugs must get clean.

The focus on the singular—the trans “body” or the person with addiction—diminishes our imaginary spirit, our scope for collective complicity (but also collective suffering), our ability to see issues as related, not separate. Take, for example, those harsher judgments on heroin use versus prescription painkillers. In an attempt to get at the root of the problem, the user of drugs takes on the full meaning of crisis. The drug they choose to use, powder or pill, is imbued with classist and racialized perceptions of addiction. Because the U.S. has a long and ongoing legacy of criminalizing drug use, because the opioid epidemic statistically affects white and often rural communities, and because white patients are more likely to be prescribed pain relief, the racialization of opioid use can be traced through methodological efforts to locate the crisis of addiction in the singular despite the multiplicity of factors (as we explored in more depth in chapter 1).

²⁶⁰ Ibid.

²⁶¹ Elizabeth Steinbock, “Framing Stigma in Trans* Mediascapes: How Does it Feel to Be a Problem?” *The Spectator* 37, no. 2 (Fall 2017): 49.

I'm actually very empathetic to our pull into singularity. I find it much easier to understand the singular; it stays within frame. Throwing myself into a broader, more compounded and complex state of imagining, one that looks toward collective and institutional accountability and feels but cannot see or name all the gaps, requires major reception of unknown. And it just makes for much more difficult writing. This all to say, I am relentlessly coerced into ways of thinking and writing that adopt these forms.

When I first left my harm reduction work in Oregon to pursue my doctorate in Pennsylvania, I worried I'd be leaving behind practice for theory. As I began my research into the rhetorics of drug use and addiction—as coursework spilled into exams and into a dissertation—I found myself immersed in biopolitics and biocapital, biocitizenship and biolegitimacy, encumbered with Foucault and Agamben. As much as I love my research, I also longed for those days driving around in an old RV, passing out syringes and condoms in the streets of Eugene. The site of the exchange—the RV, a coffee table with day-old baked goods, pop-up canvases that rarely kept us dry in rain or warm in winter—lingered in my imagination but also, quite simply, kept buzzing in my heart. I missed it. I missed the tangibles, reaching across a table to pass out packets of sterile syringes and engage in those small conversations made in the space of a minute. I wasn't sure how to adapt to the move, from the rainforest of the Central Cascades to the humid hum of Pittsburgh, from Blair Street exchange to a cathedral of learning.

In one of my first seminars as a PhD student, in a class on activism and rhetoric, our professor assigned a text by D. M. Keeling criticizing the pressures applied to graduate students and young scholars to produce new work for the sake of professionalization and advancement. She argues that these pressures manifest in specific ways through our methods and forms:

“Scholars are perpetually preparing for the next turn, commenting on the next turn, declaring the next turn, and in each iteration, contributing to an entanglement of turns that are used in the production of further publications and disciplinary histories.”²⁶² Keeling aptly describes how scholarship is linked to the creation of productive and profitable futures through the vanishing point of newness. Indeed, the humanities face their own existential crisis, in which an uncertain horizon foments a productive present—publish or perish, right? “There is no point in trying to hold out the university against its professionalization,” argue Fred Moten and Stefano Harney. “They are the same.”²⁶³ Grad students sense this urgency early.

While I will not spend time here describing the ways capital has formed and informed the university, it’s worth noting that those ways are innumerable and constantly felt. We labor and create product. We protect our futures by our performances in the present. We optimize ourselves. We work within slow death while accruing debt. The academy quite explicitly trains students to become knowledgeable, neoliberal subjects marked by positivity and productivity. D.K. Seitz explains this as training that “valorizes students who can ‘connect’ across multiple spheres, ‘reflect’ on past learning and future goals, and ‘project’ short- and long-term career plans, functioning as self-managing, initiative-taking, bits of human capital.”²⁶⁴ Such methods do not train us to accept the discomfort or disappointment of not knowing; instead, we are urged toward mastery, of ourselves and the subject. This is why Fred Moten insists on cacophony, to dispel the illusion of harmony (what Tuck and Yang might call “settling”).²⁶⁵ As we come to expect and require newness, telos, and harmony as indicative of success, we walk up to that fine

²⁶² D. M. Keeling, “Of Turning and Tropes,” *Review of Communication Studies* 16, no. 4 (2016): 317–18.

²⁶³ Fred Moten and Stefano Harney, *The Undercommons: Fugitive Planning and Black Study* (New York: Minor Compositions, 2013), 31.

²⁶⁴ D. K. Seitz, “‘It’s Not About You’: Disappointment as Queer Pedagogy in Community-Engaged Service-Learning.” *Journal of Homosexuality* (2018), <https://doi.org/10.1080/00918369.2018.1528078>

²⁶⁵ Moten and Harney, *The Undercommons*, 7.

line of instituting an ethics around knowing, wherein failure becomes not just epistemological failure, but moral breakdown.

These methods are responsible for theory that capitalizes on the exigency of marginalized bodies and provides security and prestige within the institution, turning complex issues, peoples' bodies, ongoing crises, and the longterm, everyday work of radicalizing and transformative practices such as decolonization (or harm reduction) into mere metaphors and allegory. While metaphor helpfully brings vibrance and visuality to how we might understand an issue or method, while it works as a heuristic through analogy, it must be more. Otherwise, it falls back onto spectacle, rendering our communities into objects of knowledge, knowledge for the taking.

My interest in pursuing a doctoral degree was, in part, to allocate five years to research and writing—to study, in the very primal definition of that word. But when I came to Pittsburgh, it felt urgent to condense theory into an exclusive intention: to find the gaps or prove something new. This pressure only intensified with each new milestone, especially as those milestones turned into exams and defenses, and especially as I entered the classroom to teach. At first subconsciously but then much more intentionally, I began to wonder what harm reduction might look like in my writing, teaching, and research.²⁶⁶ What if, I thought, my work as a grad student and TA is not about doing things different or better, but just about enacting less harm?

Four years later, here I am, unsettled about the rifting estrangement between the university and the lived experiences of people who live proximal to that university. Which is not to say there is not breach, especially between the two scenes described in this chapter. The boundaries are always porous. So, to be very clear, people in the university are using drugs, struggling with addiction and stigma. This is not about the difference among people, but

²⁶⁶ I wrote a piece for *Rhetoric of Health and Medicine* on this. See CE Mackenzie, "Harm Reduction as Pedagogical Praxis: Confronting Capitalism in the University Classroom," *Rhetoric of Health and Medicine* 4, no. 4 (January 2022), <http://medicalrhetoric.com/journal/4-4/mackenzie/>

difference of scenes and motions, and the sensations formed. What this feels like is disorientation: disoriented about what I should be seeing and reporting back, what my “research” was and what it was going to “do” or “say” or even study. Disoriented but committed to how I might tip “study” into something less passive, more engaged, more daily, with the focus on form, not object. It is that state of disorientation I want to honor, this state of my project proposal flipping over, revealing itself as anemic and naive, yet open to possibility. “Rather, the very orientation of wonder, with its open faces and open bodies, involves a reorientation of one’s relation to the world,”²⁶⁷ writes Sara Ahmed. It is also in this uncomfortable state in which I best learn, reckoning with my own assumptions and open to correction, attunement, renewal.

So if I’m looking to part with such methodological alliances to the university’s preoccupation with professionalization, if I hope to refuse capital’s insistence on outcome and product and its influence on our imaginations, if I wish to ease our approach to crisis, how do I still honor wonder while resisting these pulls? Again, I think it has to do with the punctuation, whether we decide to drive forward into argument or linger in feeling, narrative, and relationship. I, admittedly, in trying to write a dissertation, have performed the former. Because, as Keeling says, argument can be produced faster. But in coming into my final chapter, my final year in the program, and (most importantly) my work with Prevention Point Pittsburgh, I am uncomfortable with the rush toward ends. Indeed, this whole project has rejected telos and has tried to show how coerced conclusions, determined ends, bring all kinds of harm to our bodies and selves.

We return to Cameron Awkward-Rich’s question I offered in the introduction, “What would it mean to do minoritarian studies without being driven by the desire to rehabilitate the subjects/objects of our knowledge? What kind of theories would we produce if we noticed pain and, rather than automatically seeking out its source in order to alleviate it . . . if we instead took

²⁶⁷ Sara Ahmed, *The Cultural Politics of Emotion* (London: Routledge, 2015), 183.

it as a fact of being embodied.”²⁶⁸ I am drawn to his question as he suggests we embrace rather than discard impossibility to foster new ways of doing theory, ways that refuse to reinscribe the marginalized. Because even the most pained subjects are made not only by their pain—they are beautifully formed by their wonder, their imaginations, and their desire. Awkward-Rich shelters this beauty by affirming ache as everyday. And “everyday” is not meant to minimize pain, especially the kind of pain wrought my systemic injustice. Instead, the everyday is Christina Sharpe’s wake work.²⁶⁹ It asks us how this kind of ache might reveal some of what it means to live within, respond to, maybe even resist the humidity of capital and its taxonomizing social world.

And also. Awkward-Rich asks quite pointedly, what would it mean not to rehabilitate. What would it mean not to insist on or find comfort in rehab?

So this chapter is about methods—how we do our work, how we form our approach, how we understand our intention and how that goes on to shape our writing. But it is also about futures, which is to say, the *why* of our work. How do we work toward creating better worlds while withholding telos? How do we approach difference without making that difference exotic, a spectacle, without requiring it to speak its explanation? I understand these questions as questions about desire, not outcome, about the reveling, as Quashie says, that gives us life, inspires us on and restores us, over and over again.

Tying an origin to wonder is an impossible task. According to Plato, and as spoken through Socrates, “wonder is the feeling of a philosopher, and philosophy begins in wonder.”²⁷⁰

²⁶⁸ Cameron Awkward-Rich, “Trans, Feminism: *Or*, Reading like a Depressed Transsexual,” *Signs: Journal of Women in Culture and Society* 42, no. 4 (Summer 2017): 824.

²⁶⁹ See Christine Sharpe, *In the Wake: On Blackness and Being* (Durham, NC: Duke University Press, 2016).

²⁷⁰ Plato, *Theaetetus*, ed. Benjamin Jowett (New York: Scribner, 1990).

Which is not to say that wonder begins with Plato, but that wonder begins in each of us. Centuries later, René Descartes will write, “I regard wonder as the first of all the passions. It has no opposite.”²⁷¹ I love this. I love wonder as the ember and spark, a primal element without comparison. Free from an opposite, wonder refuses the easy bisection of affect (e.g., positive vs. negative feelings). Luce Irigaray understood this to mean that wonder is prior to judgment and therefore exempt from hierarchy.²⁷² This is a take on wonder I also adopt, that wonder precedes knowledge even as it excites imagination; but Irigaray then extends the idea into an extremely problematic defense of the difference of sexes, that wonder has us approach the Other with curiosity and that by embracing the essential differences between sexes we might facilitate gendered equity. Here within we have a return to the spectacle, in which our relationship to another reduces to them down to their illegibilities. “This concept of wonder is dangerous,” writes Iris Marion Young. “It would not be difficult to use it to imagine the other person as exotic.”²⁷³ Heeding Young, we will refuse wonder as exotic, but instead come to see this feeling, even in its moments of awe, as everyday.

Maggie McClure studies wonder as qualitative methodology in data research—a field far outside my own—as “a counterpart” to methods invested in classification and representation, those analyses that “make things stand still and separate out.”²⁷⁴ She goes on to explain the problem in such thinking is that “it is obsessed with sameness and the establishment of fixed, hierarchical relations among entities. It can only conceive of difference in terms of opposition between already stabilized entities, rather than addressing the manifold movements of difference

²⁷¹ René Descartes, *The Philosophical Writings of Descartes, Vol 1* (Cambridge, MA: Cambridge University Press, 1985), 350.

²⁷² Luce Irigaray, *An Ethics of Sexual Difference*, trans. Carolyn Burke and Gillian Gill (Ithaca, NY: Cornell University Press, 1993).

²⁷³ Iris Marion Young, *Intersecting Voices: Dilemmas of Gender, Political Philosophy, and Policy* (Princeton: Princeton University Press, 1997), 56. See also Marguerite La Caze, “The Encounter between Wonder and Generosity,” *Hypatia* 17, no. 3 (2002), 10.

²⁷⁴ Maggie McClure, “The Wonder of Data,” *Cultural Studies Critical Methodologies* 13, no. 4 (2013): 228.

. . . and therefore cannot open onto the new or the unanticipated.” McClure manages to hold onto difference without cleaving it into opposites, wherein one contrasts another. Taking her definition of wonder²⁷⁵ from Lorraine Daston and Katherine Park’s consummate, historical treatise on the affect, *Wonders and the Order of Nature*,²⁷⁶ wonder, she writes, is “preeminently material: it insists in bodies as well as minds . . . It is a cognitive passion, ‘as much about knowing as about feeling’ . . . a passion [that] registered the line between the known and the unknown.”²⁷⁷ That line is ecstatic, the moment of uncomfortable yet exciting recognition of limitation (how little I know) and possibility (how much to learn). Indeed, Sara Ahmed says wonder is what brought her to feminism, because of its inherent vitalities and renewing essence, that it is life chosen within the question mark.

Like McClure, Ahmed insists on centering wonder within materiality. Arguing this affect is too often overly intellectualized, made sublime when it is also felt and embodied, she writes, “Wonder is a passion that motivates the desire to keep looking; it keeps alive the possibility of freshness, and vitality of a living that can live as if for the first time.”²⁷⁸ So wonder is both about the ecstatic body, its felt presence in the world, but also the ways in which it nourishes the relationship between our physical bodies and embodied literacy. That is, what we *feel* and what we *know about that feeling*. Though this gives wonder a renewable status, for some, it causes hesitation. Glaveanu, for example, takes up after Hannah Arendt to inquire whether we might find in a wonder a form of paralysis:

²⁷⁵ Ibid.

²⁷⁶ Lorraine Daston and Katherine Park, *Wonders and the Order of Nature 1150–1750* (Princeton, NJ: Princeton University Press, 2001).

²⁷⁷ McClure, “The Wonder of Data,” 228.

²⁷⁸ Ahmed, *The Cultural Politics of Emotion*, 180. See also Fabiane Ramos and Laura Roberts, “Wonder as Feminist Pedagogy: Disrupting Feminist Complicity with Coloniality,” *Feminist Review* 128 (2021): 36. They explain how Ahmed has influenced their understanding of wonder as pedagogy, how it moves away from colonial logics of capture and binaries to instead privilege “learning that disrupts taken-for-granted truisms and knowing as possession (of the ‘known’) in favor of knowledge as a relationship that is multiple, dynamic, and never complete.”

Does it lead to some kind of knowledge or keep us in a perpetual state of not knowing? And what about the oftentimes uncomfortable feeling we are left with when wondering without ever getting to know? If wonder is not meant to solve problems but, on the contrary, to keep them open, then it risks being, within the Western scientific and philosophical tradition, “progressively relegated to something like a temporary irritant: a discomfort not to be endured, but rather to be cured—or at least tranquilized.” Arendt warned, in this context, about the wonderer becoming disconnected from his or her social and political reality and, gradually, incapable of forming opinions or making decisions.²⁷⁹

I do empathize with these anxieties. To get about our work, we need to have some confidence in and knowledge of what we’re doing. But I also parse out a difference between the desire to know and the will to know. Michel Foucault tells us that Western thought has instituted a never-ending demand for truth²⁸⁰ that creates systems of power maintained through the notion that knowledge is containable, an acquisition. This creates a will to know that privileges mastery over discomfort. But *a desire* to know understands knowledge as felt and fluid. This is a renewing sense of knowledge in which we always look to learn more, because we yearn to. Maggie Nelson said we return to the same lessons, relearn them, rewrite them; and Audre Lorde said there are no new ideas, just new ways of making them felt.²⁸¹

That to say, I do not face the “perpetual state of not knowing” with anxiety. “The wonderer” described by Glaveanu and Arendt, the one ostensibly disconnected from reality, signifies wonder as a liminal state of dreaminess rather than felt criticality. This fear of paralysis, of being unable to make decisions or form opinions emerges from distrust of anti-social bodies and behavior—the non-productive member of society. It is a fear of inwardness and interiority, of taking or wasting one’s time. This fear is what Tuck and Yang spoke toward, that we will have to, at some point, enter into the uneasy feeling of non-reconciliation to see what we might

²⁷⁹ Glaveanu, *Wonder*, 3.

²⁸⁰ Michel Foucault, *The History of Sexuality: Volume I, An Introduction*, trans. Robert Hurley (New York: Vintage Books, 1978), 77.

²⁸¹ Maggie Nelson, *The Argonauts* (Minneapolis, MN: Graywolf Press, 2015), 112. And Lorde, *Sister Outsider*, 114.

experience without conclusions, opinions, or judgments leading the way. This theoretical work might actually parallel some of the practical work of harm reduction.

Prevention Point Pittsburgh was founded in 1995 by James Crow and Caroline Acker—two local AIDS activists—along with a handful of volunteers. In the late 1980s and early 90s, despite their illegality, needle exchanges were sprouting in major U.S. cities, such as New York, Chicago, and Philadelphia, due in large part to HIV activist groups like ACT UP. Prevention Point established their program in the Hill District to also combat the spread of HIV, operating underground when police presence and surveillance became too intense. Not until 2002, when the Allegheny County Board of Health finally declared HIV and Hepatitis C a public health emergency, did PPP gain legal rights to run its program. This board decision made syringe exchanges legal within county lines,²⁸² which remains true today—only Allegheny and Philadelphia counties can legally operate exchanges because of Pennsylvania’s state-wide ban. Many sites operate in similar environments across the U.S. This forces residents outside of county lines, or even across state-lines, to drive long distances or take public transit in order to access sterile equipment. For those without easy access to transportation, they rely on organizations like NEXT Distro, an online and mail-based distributor. Or they re-use their equipment or pay for needles online or at the pharmacy, facing stigma and scrutiny.

Pittsburgh’s location at the intersection of the rust belt and Appalachia makes it indivisible from the origins of the U.S. opioid epidemic, like many other areas suffering the slow collapse of steel and coal industries. Purdue Pharma pushed OxyContin hard in these labor

²⁸² My history of Prevention Point Pittsburgh comes from conversations within the organization. But you can also find more information in the University of Pittsburgh Library System archives. See, Prevention Point Pittsburgh Records, “Guide to the Prevention Point Pittsburgh Records, 1996–2004,” Heinz History Center, Pittsburgh, PA, <https://historicpittsburgh.org/islandora/object/pitt:US-QQS-794/viewer>

communities, since those were replete with chronic pain sufferers. As jobs were lost and people were in pain, some of whom were growing dependent on their meds, Pittsburgh found itself situated at the beginning of an epidemic.

What began with a weekly needle exchange in the Hill District grew into five sites throughout the week, each in a different neighborhood,²⁸³ each now offering more than just sterile syringes, but also facilitating case management assistance, drug treatment assistance, risk reduction counseling, overdose prevention, and free HIV and Hep C testing. And the organization is active in overturning PA's state ban on exchange. Today, participants can attend any or all of our sites to find sterile syringes, smoking equipment (pipes, choro, filters), injection works (cottons, alcohol pads, cookers), safer snorting kits, condoms and hygiene items, Naloxone, and more. They arrive to either our physical site, which is in the Allies for Health building in East Liberty and consists of a waiting area with few exam rooms, or to our van door at our mobile sites. They first check in with a PPP member working "books." The books person walks our participants through a short in-take on what they need, checking off boxes on a short form. The form gets passed down to me, or someone else working the bags, to fill. I look over the small sheet of paper to note what's checked off, what our participant asked for. Once I fill their order, I walk it out to the waiting room, calling out their code—our participants are always anonymous—or pass it out the back door of the van. Some days we have time to linger with each participant, and other days the line is long and we need to move fast. Still, little relationships bloom in those few moments of describing need and offering service.

The first time I worked the PPP van, it was June and already Pittsburgh brimmed with humidity. I crossed the liberty bridge, snaked through dense traffic and arrived to the Carrick church parking lot right at noon. Fox, one of PPP's outreach specialists, gave me a two-minute

²⁸³ PPP operates sites in East Liberty, the Hill District, Carrick, Homewood, and the North Side.

run-down on how the van works while participants knocked on the door and he called back, “give me another minute.” We quickly synched into a rhythm, as he greeted participants and wrote down their supplies, sliding the order forms down to me, while I tried my best to move fluidly, organizing smoking equipment from injection works. I quickly memorized where each of our different gauged needles were stored, linking their names and size: 28 gauged, also called halves, also called 50s, because they’re the only 50 cc syringe we have; 27 gauge also called pogos, our biggest syringe; but also beestings, ultrafines, and blues.

The site was moving smoothly enough in the first half hour, until I mistake our sandwich bag of chore for a participants order. Chore, or choreboy, used as a filter, is a coarse copper-scoring pad that we pull apart, cut into pieces, and hand roll into balls. It is tedious labor to fill a bag and just like that, it was gone. I tried not to obsess and over-apologize, despite my need to, despite the childlike heat of shame, of getting in the way. So I started cutting new chore, rolling it into balls and dropping them into a new bag. In every lull, I rolled a few pieces and thought of all the ways my small fuckup was negligible: we can make more, chore is cheap, and, as Fox said, though with some traces of frustration in his voice, I made someone’s day with my mistake. But I still felt terrible, pained by wanting to help but making it worse, but also aware that my emotional fragility need not take up space in the van. So I kept rolling, cutting, sweating. Do is first, learn is second.

While Plato, Descartes, and Irigaray give me some initial footholds into wonder, I mostly want to build on Ahmed’s insightful descriptions to broaden this affect’s genealogy into non-elite spaces of living life. Indeed, I want to think about this affect as privileging us to non-teleological and auto-renewing forms of imagination, that it nurtures agency in a world that relentlessly works to strip us of agency as *felt*, as something we feel in our bodies and souls, and lived,

something we enact with intention in our communities.

Some of our participants drive all the way up from West Virginia. This has become a common scene since last year, when West Virginia essentially banned all syringe programs. In 2021 Senate Bill 334 passed the state legislature, requiring all operating exchanges to apply to the Office for Health Facility and Licensure and Certification to stay open. Exchanges first need the support of the county commission *and* the county sheriff. And even if they receive both, they must offer services outside of exchange, such as HIV testing, as well as a 1:1 for exchange and photo identification. Meaning, *non-anonymous* participants must bring needles to receive needles, and those needles must be traceable. So, our West Virginian participants justifiably had huge orders, as they were bringing supplies back for their friends and family. But it was closing time and Fox and I had to ride the line between care and boundary, which in the end are the same: maintaining a boundary is an act of care in that it, over lengths of time and reiterations, enacts stability. “I’ll be here on Thanksgiving,” I hear Fox say again and again.

This unconditionality and stability is crucial to establishing trust and long-time relationship. If for some reason we had to move sites or we no-showed, we’d immediately lose participants. The PPP van rolls into the same parking lots at the same time every week, regardless of heat index or the national holiday. Ensuring the correct needles are in each participants’ bag, this is also part of building trust. Harm reduction is, at its core, about consistency and unconditionality. In this way, the practice of harm reduction is simple in its terms: rather than insist on recovery or cures, rather than demand determined futures, harm reduction meets people in their moment of need. Harm reduction offers care without requesting one work toward recovery in order to access resources and services. Harm reduction links non-judgment with non-coercive healthcare, describing drug use as multi-faceted and located on a

continuum.²⁸⁴ If traditional healthcare has privileged the cured condition, then harm reduction dismisses the telos of capital time (that there should be some product, some end state) to instead take up the temporal uncertainties of the moment. What does this look like in the van? The protection of return over recovery, every time. This is a methodology of wonder.

On a busy Thursday after the July fourth holiday, Fox and I gave out 12,620 syringes at the Carrick mobile site. “That’s got to be a PPP record,” he said. Despite the long lines of people waiting, Fox was kind and took his time with each participant. He walked them through what an overdose looks like, how to rake your knuckles against someone’s sternum to see if they’re non-responsive. “If you call 911, don’t say it’s an overdose. Just say they’re unresponsive,” he offered, wise to the fact that despite the Good Samaritan Laws in Pittsburgh, cops will still show.²⁸⁵

While Fox smoked during a rare break in activity, he told me the Allegheny Health Network (AHN) received a \$5 million SAMHSA grant a few years ago. SAMHSA operates within the U.S. Department of Health and Human Services to address issues of mental health and substance use in our communities. They delineate their opioid relief goals as “combating” the crisis through the “expansion of prevention, treatment, and recovery support services.”²⁸⁶ I don’t know much about SAMHSA, but I interpret these goals as emphasizing outcome, privileging treatment (sobriety) over reduced harm. Fox told me that the money goes to AHN, but they don’t know how to organize, allocate, or mobilize it. “None of those doctors or grad students have

²⁸⁴ National Harm Reduction Coalition, “Harm Reduction Principles: National Harm Reduction Coalition,” August 31, 2020, www.harmreduction.org/about-us/principles-of-harm-reduction.

²⁸⁵ A new report from the CDC shows that fatal overdoses increased 44 percent among Black people in 2020 (this is twice what white populations experienced). There is justifiable resistance against calling for help during an overdose, and it makes sense that people of color would be even more skeptical or fearful in calling for help. See Mbabazi Kariisa, et al., “Vital Signs: Drug Overdose Deaths, by Selected Sociodemographic and Social Determinants of Health Characteristics—25 States and the District of Columbia, 2019–2020,” *Morbidity and Mortality Weekly Report* 71, no. 29 (July 22, 2022): 940–47.

²⁸⁶ SAMHSA Strategic Plan FY2019–2023, *SAMHSA*, U.S. Department of Health and Human Services, April 11, 2022, www.samhsa.gov/about-us/strategic-plan-fy2019-fy2023

experience at street level,” he said, leaning his body half out of the van to ash into the parking lot. Fox didn’t go into more detail but explained that these kinds of hierarchies are unavoidable, always falling into place regardless of an organization’s status or size—administrators make the good money and make the important decisions. When I asked about how those without harm reduction experience get access to such crucial positions of authority, Fox responded flatly: “education.”

Fox and I were talking about knowledge, how, depending on the lens and frame, some forms of knowledge are valued over others, how the higher education line items on a resume elevate one into secure positions of regulation and supervision. But, as Fox noted, this is education, not knowledge. (I write this aware I am the person with education, but not knowledge). I see, from working the van, how well-equipped Fox is to help our participants. When they don’t like the brand of beestings we have available (31-gauged needles used mostly on hands or feet), he advises them on how best to find and utilize a new spot of injection. He makes them laugh when he pulls the loop of his suspenders around his bicep into a tourniquet. He tells them that despite what the doctors say, *you can* still use while getting treated for Hep C—“the doctors are lying to you.”

Similar to our other achy affects, wonder is both felt and doing. It feels like awe, yes, but it also feels overwhelmed, uncertain, desiring, crushing, exciting, elusive. And as a practice, as a thing to seek out and do, wonder is inherently a question. As in, *I wonder*. . . Therefore, wonder is the feeling of living the questions. Wonder is an active openness, a position of embracing and inviting uncertainty, the slow or cold take, the run-on sentence or poetic line-break. I’m trying to move further into my discomfort: I am a non-expert who loves both the practice and feel of harm reduction. While I want to share this or share in this, I don’t want to co-opt it. I’m trying to

reckon (reckon: the ongoing renewal of recognition, one that disturbs or contaminates what is engrained and entrenched) with my position as a writer from the university who moves into a community that is both familiar and not mine. I own that I am the grad student Fox criticizes. Owning it allows me to wonder how might we attenuate the distance, share the knowledge, respect expertise outside the confines of the traditional and conventional.

This past Spring I walked my dog down to the presbyterian churchyard a few blocks away from home, one of her favorite neighborhood spots—bustling with bunnies and squirrels, a quiet place to visit and romp with other dogs. On this day, it was just us though. The sun was out, warm, but the temperature snuck only just above freezing. I listened to music and took slow breaths—I was weathering another depressive season. I encounter these seasons often, many in a year, every year of my life. It makes more sense to say I exist within these seasons rather than they exist within me. But I'm splitting hairs. It was Spring, I was sad, but my dog needed a walk.

As I took slow breaths, listening to Elliott Smith sing about rose parades, I felt movement. Within the sadness, also a gentle strum. Despite the depression, I was not numb or trapped. But nor was the strum full or forward leaning, just the smallest kind of vibration, the dimmest kind of vibrance. For years I have tried to train myself away from fixing the depression. While I work toward management—sobriety, running, therapy, family, meds, writing—I resist the pull into telos, that one day I will “feel better,” and on that day, I will move into the rest of my life. It takes constant vigilance to keep this idea at bay, to refocus on a more temporal kind of care and presence. So I slow tuned into this moment in the churchyard with my dog. I thought *I am here* in all my threadbare energy. To survive, even thrive despite our pain (pain from being alive but from the ongoing ruts of systemic erasure and harm) we must be able to say *I am here*.

It is a small phrase that insists on existence, that says: I take up space, I participate in world-making. *I am here* exists on its own, establishes its own agency. We are its makers. (Though there is profound beauty when someone responds with *I see you*.)

The feeling of wonder is not just the feeling of awe, of being captivated by a wild landscape, or the sun falling under the ocean's rim at twilight. It changes, evades, resists capture. It is chase and out-of-breath desire. We might be energized by a song stumbled upon on the radio or by changing the tire on our car. We might be galvanized by caffeine as we muster toward the start of the day, or beer as we linger in the kitchen with friends. But no matter, all of this is taking up space in the world, saying *I am here*. There is a vibrancy in making this so.

José Esteban Muñoz has said all the things I want to about being a queer human in this present moment, such as how one's futural longings can be protected in the immediate, that we might better serve our present lives by unengineering the future. Rather than demarcate what's ahead, before we even step on the path, we instead privilege the desires and longings that get us to the trailheads. While one of our goals at PPP is to help participants work toward recovery, it is not the primary goal, which is to reduce harm and overdose, and to abate stigma and disease in our community. Indeed, it might not even be that we're working toward a future absent addiction, but a future absent all the violence surrounding addiction. This kind of temporality, writes Muñoz, is ecstatic and horizontal, "a path and movement to a greater openness to the world."²⁸⁷

Here Muñoz intimates both feeling (ecstatic) and method (movement toward openness). He re-envision time as paradoxically unbounded *and* constricted; within the finite, a constant (infinite) regeneration hums along. Whereas linear time, as explored in the first chapter,

²⁸⁷ José Esteban Muñoz, *Cruising Utopia: The Then and There of Queer Futurity* (New York: New York University Press, 2009), 25.

legitimizes itself through demands for productivity—“become a productive member of society” for example—as well as accumulation (a colonialist, imperialist function), there are other arcs and eddies to time, those that might envisage the ecstatic, moving in all directions while desiring a new day. For Muñoz, who is writing specifically about queerness, our utopic futures are, obviously, not quite here and yet an always existing potentiality. While centering desire, Muñoz also argues for the quotidian, that it is the everyday that marks the utopic, seen in “bonds, affiliations, designs, and gestures.”²⁸⁸ Desire streams through the affective and assembled networks within which we spend our quotidian (beautifully quotidian) lives.

Muñoz wants to destabilize our attachments to liberation *while also working toward liberation*. This is why I am calling on him now. This understanding of freedom entails willful immersion in an “ontologically humble state, under a conceptual grid in which we do not claim to always already know.” This, he argues, might “potentially stave off the ossifying effects of neoliberal ideology,”²⁸⁹ that which brings us only allegories of liberation, metaphor. Muñoz has received criticism for daring to name the future a site of potential utopic possibility. But there are some of us who remain wide-eyed in our optimisms, some of us who “actively cultivate” that optimism²⁹⁰ because we refuse to forfeit our lives into the constraints of one-dimensional narratives of precarity, pain, and otherness. We are more; we deserve more.

At the end of an academic program, I could not be more troubled by a word than *liberation*. To me, it promises so much, announces too much telos to make itself possible. What does it mean, then, to curl into an ontologically humble state and from there heed Muñoz? How might wonder become a method for thinking, writing, dreaming through a world in crisis? Again,

²⁸⁸ Muñoz, *Cruising Utopia*, 22.

²⁸⁹ *Ibid.*

²⁹⁰ Cameron Awkward-Rich, “I Wish I Knew How it Would Feel to be Free,” *The Paris Review*, June 11 2020. www.theparisreview.org/blog/2020/06/11/i-wish-i-knew-how-it-would-feel-to-be-free/

McClure: “It is this liminal condition, suspended in a threshold between knowing and unknowing, that prevents wonder from being wholly contained or recuperated as knowledge, and thus affords an opening.”²⁹¹ If we cannot escape the systems in which we are so deeply and forcefully embedded, what do we do? What is liberation when we’re burned out and that word is held hostage in the elite space of the academy, a word with all its possibility boiled off so as to generate theory? I think we start again. We locate knowledge in our feelings, not in our will.

Wonder is a renewing act of intention, “thought of in terms of the affective opening up of the world through the act of wonder, not as a private act, but as an opening up of what is possible through working together.”²⁹² According to Ahmed then, wonder requests vulnerability (opening up), it situates itself publicly, and it is incremental and collaborative (working together). As I roll chore-boy, I think, *liberation is the size of a ball of chore*. It is the ball of chore. It is the smallest bit of stinging copper wool that brings just an inch of less harm into this world. This sounds like I’m romanticizing (or metaphorizing), I know. But I actually meant to intimate the opposite—that the work is tiny, incremental, repeating. This might not be as satisfying as the collapse of some industrial complex, but such is the kind of affective state in which I argue we attune ourselves. And as paradoxical as it may seem, this (for me at least) is a space of wonder, moreso than the mountaintops or wave breaks. Because while wonder is awe, it is also disoriented daily by living within the questions, and understands this unstable state as absolutely crucial to re-learning.

While we can fold awe into our understanding of wonder, I do not wish to relegate this affect to only the exceptionalized scene of the sublime. And while it is true that something in me breaks open in pacific northwest rainforests—the scent of moss, the ferns unfolding their tiny

²⁹¹ McClure, “The Wonder of Data,” 228.

²⁹² Ahmed, *The Cultural Politics of Emotion*, 181.

fists, the centrality of time in douglas firs—this is not only it. These are privileged scenes. “I am moved by wonder, certainly, but from a place of innocence to a place of ambivalence and critique—my innocence is *contaminated* through this process.”²⁹³ There is a connection between what’s happening in the old-growth forest and what wonder can do, broadly speaking, in our everyday lives as writers, activists, advocates, and academics: when wonder expands, so also does our understanding of complexity; as wonder expands, the more we come to understand how little we know—we are contaminated. It is a fractal of feeling that senses our own illiteracies, our own limitations, and then revels in them. But this is also why it hurts. The sense of excitement incited by growth and change (those painful things) keeps us returning.

Another record broken: Chelsea looks over the forms from an August in Homewood, calculates, and tells me we met with 100 participants, nearly 70 in the first half of the shift. This sounds right; the moment I jumped into the van, we started working. I pulled needles out of boxes, lined up the equipment, and immediately began filling orders. For the first hour, Chelsea and I didn’t say a word to one another—we were that busy. Too busy; I got behind on order forms and started confusing them. Someone walked away with a bag full of tampons they didn’t ask for. Chelsea and I laughed at the thought of surprise tampons, but I also hoped that was the extent of it, that I was accurate with their other, way more important, supplies. Each Friday is busier than the last, a trend that only begs the question of how to meet need when were ostensibly at capacity. Not surprisingly, I make more and more mistakes each shift.

The following week in Homewood a participant complained to Chelsea that we forgot the fentanyl testing strips last time. That means *I* forgot the fent strips on that busy August Friday. He was rightly frustrated. “People are dying out here.” I put extra strips in his bag, rechecked his

²⁹³ Bonnie Mann, “Feminist Phenomenology and the Politics of Wonder,” *AVANT: The Journal of the Philosophical-Interdisciplinary Vanguard* 2 (2018): 49. Emphasis mine.

order form twice to ensure it was fully filled this time, and jumped out the back door. We're far too busy for me to do more than just pass the bags out the back, but I couldn't let it go, especially his words. "People are dying out here." I hopped out of the van, walked up to find him chatting with a friend, and interrupted to apologize. "I put extra fentanyl strips in there. You holler at me if I ever get something wrong, ok?" When he put his arm around my shoulder in a gentle side hug, a sense of relief rolled through me, of reconciliation and connection. But I then spent weeks wondering what consequences rippled from such a serious and yet honest mistake. I'll never know. Every week I hear about someone who died. Every week I hear about someone saved from Naloxone.

Throughout my dissertation project and with each affect analysis, I have also attempted to illustrate the ways in which the mundane and quotidian are important sites for doing theory, that the spectacle or spectacular do not need to drive our ideas. This is particularly common and acute in both addiction and trans studies; whether we marvel at the transgressive performance of the "trans body" (see chapter 2) or grimace at the ways heroin has created "a new face" of addiction (see chapter 1), both show just how much we violate embodiment to extract new ideas, and both quite literally, through their rhetorical structures, expose how much we separate the mind and body, intellect and feeling. This is why I've chosen to do affect studies. This is why I find myself compelled to speak on behalf of my own "trans body" (whatever that means), and why harm reduction is my most congruent experience of being in community—because our bodies need not give anything, in terms of how they behave or look or what information they might provide, in order to receive what they so desire and need.

So, despite the seeming paradox at hand, wonder gives us a way into everyday theorizing. And "everyday theorizing" is just another way of saying our felt bodies think themselves through

(and sometimes away from) this precarious world. One of my colleagues at Prevention Point has a sticker on their water bottle that reads, “I won’t intellectualize this moment.” In the spirit of that, I want to narrow into wonder as my form of writing. To resist easy conclusions, to refuse overexposing our subject, wonder can look like many things, but for me it privileges descriptive and narrative emphasis of scenes, systems, and feelings rather than analysis of subject-made-object. It pulls back from conclusion to linger (perhaps uncomfortably) in the middle of things.

Late in summer I arrived in Carrick to find Casey, who usually works the medical van facilitating suboxone, in the exchange van. Because Fox was still testing positive for COVID, Casey stepped in for the afternoon to help cover. Casey has cool vibes and a brindled pup named Feisty Jerry. They live down the street from me, so we’re always running into each other while out with our reactive dogs. “Have you done books in the van before?” they asked. “Does that feel ok?” While I’ve done books before, never in the van. I was only used to the slow roll of Sunday afternoons, when I’d meet with just a handful of participants during my shift. Books in the van is pretty different than our Sunday site. It’s faster, and feels much more ground level, since we’re not in a medical setting but in a minimally shaded parking lot. Working books in the van... I love it. I sat on the cooler in the van door, clipboard in hand, and chatted with so many smiling folks. Who wouldn’t love that? “Hey how’s it going?” A simple question that can open in any direction. I began with small chat about the dailyness of things, the weather, but also about their needs. When they said their day is shit, I asked what we can do, if anything. Sometimes it’s nothing. I answered the questions on what needles we have. “These are the shortest gauge, but should be used only on hands and feet.” I registered new participants, including those recently settled in the city. “We have fentanyl test strips, but just so you know, most of the heroin here

has fent in it.”

I’m comfortable with almost all aspects of doing books in Carrick, except for the Naloxone forms. Each time we give out Narcan, it’s crucial do the paperwork, paperwork that facilitates ongoing research but also gives us new insight into our region’s dope supply—how potent new bags are, what to look for, what bags are created overdose, what has Tranq in it. I scanned the form quickly, but it was long and prolix, and the line of people was growing. “Hey, should I ask all of these, or which of these questions are the most important,” I asked Casey. After a beat, they decided to call Fox, who replied, “Fuck the questions. Make it a conversation.” A classic Fox response, and I adore him for it. But it being my first time slinging Narcan, translating a form of questions into a conversation doesn’t come naturally. The form requires I ask after their using habits: “What drugs have you done in the past month?” But also “Have you helped with an overdose in the past week?” “Is that person ok?” I understood what Fox meant, why he insisted on conversation over punctuated questions. The former puts participants at ease, relieves them from the idea (the reality) that they’re being grilled. Conversations also engender an affective space wherein we feel, through a shared connection, that harm reduction and safer use practice is on all of us, not just the user.

At a different site later in the summer, a beaming couple approached the van door while I was on bags and Chelsea worked books. They laughed together while waiting in line, elbows playfully checking ribs. “We need more Narcan,” they said. “For sure,” Chelsea replied. “Did you have to use some recently?” We easily give out dozens of Narcan kits each week, each kit comprised of two doses. The couple described how they were just walking through a 7-11 parking lot and saw a man in his car, non-responsive. They not only could ID an overdose. They not only had Narcan on them. They not only felt uninhibited to knock on his window, open the

door, and shake him. They not only used their Narcan on him and saved his life. But they noted what bag of dope he had used. They gave this info to us, so that Chelsea could add it to our bag board—a whiteboard with the names and notes of the different strains of dope in our region (e.g., “Stranger Danger,” found in McKeesport, ODs, or “Tom and Jerry,” found in Homewood, racing hearts). Chelsea responds, “I’m so glad you were there. Thanks for taking care of the community.” They say this every single time someone tells us about using Narcan. Every time. Later Chelsea leans over to me, reflecting on this story, and says, “Imagine that, a community that cares for itself without the fucking need for doctors.”

“You can say ‘pass’ on any question or make it up altogether, I don’t care.” I repeat these lines, lines I learned from others working exchange, when I register a new participant to our program. Our new participant forms ask about injection practices, HIV and Hep C status, and length of drug use. The questions are uncomfortable. But the answers are helpful. We want our participants to use more safely, so knowing if they share needles or if they clean their injection sites affects the information and supplies we might provide. But offering an opt-out, saying pass or making up answers (which might skew our data) sustains their privacy, their desire (if they have it) to move quickly and anonymously through our site.

No surprise then, I don’t interview any of our participants in my summer work. I don’t seek any kind of acceptance from the IRB. On the one hand, it should be the voices of participants that drive and form policy decision. It should be their voices we listen to when we want to better understand, not just addiction, but their lives in all its assembled, multivalent, knotted beauty. But also, one of the most important aspects of practicing harm reduction is protecting the unconditionality of our work. Absolutely regardless of a participant’s status, they should have access to the resources they need without condition. They do not have to give us

anything, whether it is a promise toward recovery or a detergent bottle filled with used syringes.

By inviting a participant into an interview, I create conditions. As we remember with Summerson Carr's work, people who use drugs, those in recovery, and those in rehab services, are relentlessly encouraged *to share*.²⁹⁴ Sharing is made compulsory to healthcare access, is consigned to proper recovery, is part of the will to know. One is lauded as a good participant if they are active, vibrant, open members of the community. But we should question ourselves on why we require openness, what we get from that openness that feeds us as researchers or advocates. By inviting a participant to interview, even if they have the option to decline, even if *they want* to interview, I would attenuate the space with reciprocity. Which is not to say we don't create meaningful relationships with our participants. We do; but we don't foster those relationships on mutual give and take.

This has substantially influenced how I went about writing this chapter, what I offer and what I withhold. I long for others to understand the dynamic lives of people who use drugs, especially beyond scripted narratives of powerless addiction. But I long also to protect my participants. They are my priority. They deserve privacy as well as representation and a generosity of attention. They deserve a voice but also the option to opt out, let others educate themselves. This is complex, but also an opportunity to move our writing further into description of affective scenes, not human lives.

While beginning the paperwork on the Naloxone form for a woman re-upping her supply, she told me her friend died that week. "They're dropping like flies," she said, exhausted and deflated. I felt my desire for cohesion rise to the surface; I want to help, to make it better. But we can't. There is no making better a lost life. So I let it go. Instead I looked her in the eyes and said,

²⁹⁴ Summerson E. Carr, *Scripting Addiction: The Politics of Therapeutic Talk and American Sobriety* (Princeton, NJ: Princeton University Press, 2010).

“I’m so sorry.” She started to cry, so I held our silent moment. When it comes to tragedy, rarely do we expect one to meet us in that moment to make sense of it. There’s nothing to say and that’s ok. Instead, the need is to be seen and heard in our pain. I’ve written that pain is quotidian (see chapter 3) by which I don’t mean trivial or inconsequential. I mean it is every day. Christina Sharpe called it a wake.²⁹⁵ Crisis without end. There was nothing else to do than be with that woman, in that very short, shared moment. She lost someone. We lost someone.

Overdose is the leading cause of death for Americans under 50.²⁹⁶ *The* leading cause. A few years ago an Ohio town attempted to pass three-strikes legislature that would disallow EMS from responding to an overdose victim who had already been Narcaned twice.²⁹⁷ While most people (around 88 percent) agree Naloxone is an important part of emergency kits, about half of people also believe it enables ongoing drug use,²⁹⁸ that users will take more risks, bigger doses. But the reality is that getting Narcaned sucks. It sends one into immediate withdrawal. But that’s besides the point. These are human lives. Recently, as a participant was waiting for his ride, he shared with me and Fox that he’s out here getting supplies for his brother despite relentless criticisms from friends and family that all he’s doing is enabling. “But you can’t save someone who’s dead,” he said. The first page in our Prevention Point training packet says, “Harm reduction enables choices, possibilities, and opportunities.” It literally enables life; our work enables life into a future of infinite potential, if only we’d start naming it as such, rather than fixating on determined ends.

²⁹⁵ See Sharpe, *In the Wake*.

²⁹⁶ “Drug Overdose Deaths,” National Center for Health Statistics, Centers for Disease Control and Prevention (2021), www.cdc.gov/nchs/hs/topics/drug-overdose-deaths.htm

²⁹⁷ Esther Honig, “As Opioid Overdoses Bleed City’s Budget, Councilman Proposes Stopping Treatment,” *National Public Radio*, June 29, 2017, www.npr.org/2017/06/29/534916080/ohio-town-struggles-to-afford-life-saving-drug-for-opioid-overdoses

²⁹⁸ Jordan O. Smith, Scott S. Malinowski, and Jordan M. Ballou, “Public Perceptions of Naloxone Use in the Outpatient Setting,” *Mental Health Clinician* 9, no. 4 (2019): 275–79.

I began this dissertation project with a chapter on shame and how its taut feeling constrains us to abject narratives of who we are, what we can become and do; but also, shame constricts our imaginative hope, making horizons a demand, not a desire. I began with my own stories of shame and how “I should have known” became an echo in my life, a creed that renewed itself. But this expectation did little to serve my hope in futures; instead, I became wary of knowledge without punctuation, skeptical of knowledge that takes longer than a few minutes to unspool itself. I was stymied in the narrative of mastery and expertise—that to be a better human, I had to know all of myself, and I had to know best for others too, what they needed and how they needed it. But to live into the edges of life requires mess and mistakes, requires getting it a little wrong but leaning in with feeling nonetheless. Shame kept me from this risk, as I saw only pain in error. And while there is pleasure in failure, I don’t want to say it’s only this. I want to move beyond the binary of feelings altogether, into what I described in the introduction as unmastered moments of care and community, that if wonder is horizontal—refusing fixed ends and lingering in mess—and our culture of capitalism is fully consumed with those ends, then wonder offers a totally different imaginative path, within which we might re-narrate the scene of pain and marginalization.

Harm reduction, in my opinion, offers one of the more thoughtful ways through the quagmire of American life in this moment. We are over-policed, literally and medically. We suffer the physical and mental consequences of a climate crisis, yet affordable healthcare remains out of reach. We are over-entertained and isolated. We are discarded bits of hustle and stress falling into an ever-expanding economic gap. Harm reduction *sees* the systemic relationship between these issues, and while holding out hope for long-term overhauls it practices a dailyness of care that can get us through a pandemic, a crisis, or even just a shit day. Both intensely

temporal—focused on current need and service—but also horizontal, in that it works toward futures with a commitment to safety, community, and trust, harm reduction is similar to how we think about doing our research and our theory without telos, or with delayed or withheld telos. We are, of course, writing and thinking *toward* something, but we let that object evade us so that knowledge drags out in front of us, not for capture but for the experience of dwelling within it. Harm reduction works the problem by staying within it, by not driving toward over-simplified solutions. Harm reduction is not a radical politics, though it can be hard to convince even liberals the importance of our needle exchange. And yet, harm reduction *is* radical because it holds tight to the simple yet astounding belief that our lives have meaning. Full stop, without condition.

I opened this chapter with an epigraph from Kevin Quashie, who writes, “Standing up for one’s self doesn’t have to be triumphant, but can be, simply, the work of reveling in flowers or blue sky—the daily practice of understanding what you love and why.”²⁹⁹ I appreciate how Quashie names reveling as work, but also describes it as simplicity. The project is endless, but that’s the point. This work refuses predictions on the future and turns instead toward the acute service of now, toward care for this moment.

It’s unusual to do the methods chapter last; and to be fully transparent, I never had intentions of incorporating a methods section, much less saving it for the final chapter. But in the midst of this hot summer, when I was reeling from one bad news week to another, when I spent many days on Midwest toll roads, driving back to the homelands because my dad was recovering from open-heart surgery, when I sat in the firefly meadows of Bennington, Vermont, where I did an MFA ten years prior, remembering myself then, trying to will my past self to “lean in, feel everything, lean in and witness” as I wrote in a notebook, when my wife was going through her second trimester, little life blooming, I thought about the felt convergence of the past and future,

²⁹⁹ Quashie, *The Sovereignty of Quiet*, 72.

how we occupy its centrifuge.

I thought about work, as in the labor we give both involuntarily as well as selflessly to make a life, to make a living; and I thought about feeling. I thought about how it feels to exist in upheaval, how it feels when better worlds diminish before our eyes because of bad legislation and biased policy, and how it feels to protect a sense of possibility against this current of crisis. And finally, I thought about how it feels to admit, there are no ideal solutions but we work toward them, inspired by our ideals, nonetheless.

Last Thoughts: Loving the Questions

“Have patience with everything unresolved in your heart and try to love the questions themselves as if they were locked rooms or books written in a very foreign language.”³⁰⁰

—Rainer Maria Rilke

I opened this dissertation in the wilds of interior Alaska, where I held to Rilke as a form of sustainability: *live the questions*. It seeded courage, when I feared what would stir me awake in the night. It nurtured endurance, as I waded through glacial streams, braced against the cold currents. It welcomed blissed wonder, as when I sat on my bear canister in the rain, watching a pack of wolves wake to the day, nudging one another into the shared morning. And it guided me into one of the more painful crises in my young life. Living the questions was both a feeling I held—the breaching of new knowledge into the surfaces of my skin—and a mantra into which I pressed my abraded body. It was both cause of and balm to my pain.

I always hold this trip to Alaska with my ex husband as not only the beginning of the end of our marriage, but an unclean tear between one life and another, in which the internal bleed lasted into unforeseeable futures. In the two weeks lying on my back, looking through the tent’s screen, wondering if I’d see a grizzly staring back down at me, I depended on M. And it was mutual too. When he collapsed on the ground, exasperated by the technical hiking—a kind of hiking we were wildly unprepared for and inexperienced in—I sat next to him, issuing quiet

³⁰⁰ Rainer Maria Rilke, *Letters to a Young Poet*, trans. M.D. Herter Norton (New York: Norton, 1934), 27.

encouragements. I helped him carry on and he helped me push forward. Our time in Alaska was more stressful than I could've ever imagined: we lost our bear spray on the second day and glacial sediment clogged our water filter. We encountered a six-foot moose, staring us down through thick brush while her calf hid behind her tall legs. But we also walked out of the backcountry affirmed in our partnership. M. and I saw one other through the grind of the northern tundra. Yet, it was not enough. It would never be enough.

I staved off our breakup for a full year, even after coming out, to instead recommit to our relationship with the full force of my intellect. I told myself we could make it work, reasoning endlessly through strained days on how this could be so. More than anything, I started with an answer—an answer I preferred—and worked backwards through the equation. I named this labor grief, the mourning of desire for the sake of a relationship. This is being a causality of the will to know. After the break up I promised myself to never again have to talk myself into or through feelings, a promise broken and renewed. I promised to never put an answer first in an ongoing—that is, everyday—commitment to Rilke's advice, *live the questions*.

While there is great relief in giving up on answers, on destinations or arrivals, there is a deep pain to it as well. “To enter this space is to inhabit the ruptural and enraptured disclosure of the commons that fugitive enlightenment enacts, the criminal, matricidal, queer, in the cistern, on the stroll of the stolen life, the life stolen by enlightenment and stolen back, where the commons give refuge, where the refuge gives commons.” What this is all about, our work but also our lives, write Harney and Moten, “is not finishing oneself, not passing, not completing.”³⁰¹ Or, as Jack Halberstam says of our failing, queer selves, it's about “revel[ing] in the detours, twists, and turns through knowing and confusion.” It is a knowledge, he argues, that “does not seek to

³⁰¹ Fred Moten and Stefano Harney, *The Undercommons: Fugitive Planning and Black Study* (New York: Minor Compositions, 2013), 28.

explain but involve.”³⁰² I am a shy, queer kid working through my shame of a divorce, of what it means to not know, overwhelmed often by the many intersecting (colliding) crises within which I currently live. These pages are a direct response to understanding myself through the ebb and flow of feeling, through upheaval but also the long-draws of getting by, of getting about the work of living. These pages are a direct response to resisting telos, as a theoretical and methodological practice, but also as a lived experience of rejecting coerced futures and relinquishing the obligation to explain.

When I arrived in Pittsburgh to begin my doctoral program, moving into a small East End apartment during an August storm, when I mingled and drank beers with new cohort colleagues the week before classes started, when I first attended a Monday morning “Introduction to Graduate Studies” seminar, I understood my research goals as located at the intersections of contemporary poetics and queer forms. And for the first year of coursework, I wrote about Danez Smith and Stacey Waite, Layli Long Soldier and sam sax, all the while homesick for the needle exchange I had been working with in Oregon before the move. Because it was there I first witnessed harm reduction not only as effective community care, but a way of thinking against capitalist definitions of health and carceral regulations of the body. It was at exchange I saw how often we, as people living within varying landscapes of vulnerability, are coerced into determined futures and legible narratives. Once into my doctoral program, I worried over the length of separation from that work. I missed it and felt it as estrangement, that perhaps this was where I needed to be, translating the possibilities of harm reduction to show how—in addition to providing tangible resources and direct care—its principles could transform the very way we think about our individual and collective bodies. My feelings of estrangement, then, were not solely about separation between field and disciplines, but indicative of some other form of

³⁰² Jack Halberstam, *The Queer Art of Failure* (Durham, NC: Duke University Press, 2011), 15.

distance: that in my own life, I was longing to write into the intensity of vulnerability.

I had moved across the country, moved from the scene of a difficult divorce, a messy coming out, to a space where no one knew my past. Seduced by the narrative of overcoming pain for better futures, I stayed quiet in seminars in which we discussed Adrienne Rich's "Compulsory Heterosexuality," those closeted women married to men. I cried at the bus stop on campus. I refused to own my histories, but the labor in sustaining this denial, rather than letting it release itself for what it is, required vigilant restraint. I am who I am; I come from where I come. When I started writing my dissertation, I finally let the tension collapse, risking academic illegibility for creative urgency. Not only did I let my past speak (my pain speak) but I began to hold it again, and in so doing realized pain cannot be undone but reflects the remnants of life lived, a truce that is not peace. Acute pain drains into enduring ache; and it is this relationship to ache that forms me and informs my work. Ache, in its chronic ongoingness, reveals the dense connections and enmeshments of our shared lives, that I cannot, for example, write earnestly about shame without describing and reckoning with its origins under my own skin.

In all this, poetry was never as far away as I thought. "Poetry is not a luxury. It is a vital necessity of our existence," writes Audre Lorde. "It forms the quality of light within which we predicate our hopes and dreams toward survival and change, first made into language, then into idea, then into more tangible action."³⁰³ Lorde does not equivocate: poetry comes from and responds to our material experience in a hostile world. What begins in feeling, we translate to the finite failures of language, through which we form ideas, shape an imagination, and charge into the world to make it, change it, to say *here I am*. Poetry, for Lorde, offers wild opportunities for other ways of knowing, for creative imaginations forged outside conventional conceits. But we must feel and lean into our felt selves. "I speak here of poetry as a revelatory distillation of

³⁰³ Audre Lorde, *Sister Outsider* (New York: Ten Speed Press, 1984), 37.

experience,” she writes, “carved from the rock experiences of our daily lives.”³⁰⁴ Lorde claims feelings as guides, designating them sanctuaries despite the hardness of daily living.³⁰⁵ Her insistence on feelings first, the body and its sensorial intelligence first, is, in my mind, an early iteration of affect theory, one that helps us write about pain as a reality without relegating the human being, an intricate life, to the simple notion of precarity. Poetics, or what we might call felt language without telos, is therefore not peripheral but absolutely embedded into our daily lives, a vital necessity of our existence, that which surfaces when we long to cleanly translate a feeling.

In this project I’ve tried to discuss how pain shapes us yet doesn’t make us, is both systemic *and* personal, how it is felt across multiples spaces, retriggered or unmourned; and in making these descriptions I came to understand this less as pain and more as *ache*. That is, ache more aptly captures what it feels like to survive the hardness and hostility, as Lorde said, of our forward leaning days. As I wrote in the introduction, ache is ongoing, chronic, physical *and* emotional, the sign of something off or exhausted, but also tender, growing, longing. The multiplicity of ache dissolves the notion of positive and negative feelings, a notion that locks us into the narrative of achievement or failure, recovery or addiction, euphoria or dysphoria. The multiplicity of ache allows us to feel unsettled, even as we work toward greater feelings of congruence. A turn toward the affective state of achiness illuminates not only new possibilities of desiring and un/knowning, but invites us into discomfort so that we might cultivate our imaginations more widely and deeply. What does this look like in our scholarship? It means we refuse to exhort meaning from bodies and human lives.

This has been the driving ambition of my project: to not just honor the vibrancy of our

³⁰⁴ Ibid.

³⁰⁵ Ibid.

agency despite the hard crises within which we find ourselves hurting, but to find ways to write into this commitment to the questions. Cameron Awkward-Rich's provocation has carried me through this entire project, and I call on it again now: "What would it mean to do minoritarian studies without being driven by the desire to rehabilitate the subjects/objects of our knowledge? What kind of theories would we produce if we noticed pain and, rather than automatically seeking out its source in order to alleviate it . . . if we instead took it as a fact of being embodied."³⁰⁶ Inspired again and again by this quote, I want to describe pain beyond its acute rips and ruptures. Instead, I offer ache as an alternative way to think about our feelings and states of being, but also as another way to understand what it is like to be othered. Ache better portrays the ongoingness of marginality and how we might, for example, desire both representation and privacy; and that despite this contradiction, our longing for such is not too much ask.

As painful as it was to be misgendered during and after top surgery, as painful as it was to talk to insurance reps about the physical contours of my vulnerable chest, these are the acute cuts in a culture that deeply misunderstands the trans experience. While these acute cuts hurt, they are also the consequences of a cultural landscape structured by the normalized, concealed harms of capitalism, wherein our meaning is what we make or provide, not who we are or what we need. My nurses and reps live within this climate too. They are also influenced by aspirational narratives and meritocratic ideologies. We all are. My focus on this kind of ache is an effort to uncover how we are so persuaded into such imaginations, but to also nuance pain to explain that within ache is possibility: we have more descriptive opportunity to express ourselves; we relinquish the expectations (our own and others') for a painfree life; we creatively curate new narratives of selfhood, and therefore new futurities of informed hope. All of which nurtures our

³⁰⁶ Cameron Awkward-Rich, "Trans, Feminism: *Or*, Reading like a Depressed Transsexual," *Signs: Journal of Women in Culture and Society* 42, no. 4 (Summer 2017): 824.

sense of agency and world-making. Ache is a way to recognize (to reckon with) the impossible and the complex. And to then go about describing it.

As I wrote these pages over the last two years, I found myself increasingly intimidated by the project at hand—how to braid rhetorics with theories of epistemology, how to write about the body without again centering the body, how to describe knowledge as a feeling. In an effort to meet this intimidation, I decided to venture into a liminal space in which I might never know settled encampment. This was a challenge considering not only academic conventions, but what also was happening around me.

I wrote this dissertation in 2021 and 2022 when we were stymied in the hold of COVID. Roe was overturned. Russia enacted war against Ukraine. The U.S. Supreme Court ruled to limit the EPA's authority in curbing climate change. Florida still can't say gay. Gun violence rages. We are overwhelmed and burned out, despondent and angry. I say all this not to make the claim that life is more acutely in crisis *now* than it ever has been (though it seems possible), but that crises continue to drive our world forward, watershedding into uncertain horizons and forming anxious futures. As I wrote this dissertation, I could not let go the question, how can our work in the academy literally, tangibly address these crises, in a way that is felt, not just thought? How can we write about the quiet hum of hope when hope feels impossible? How to envision and work toward a better future, as cliché as that sounds, while thoughtfully resisting all the ways “better” elicits harm and futures are held captive to predetermined demands of productivity? These questions went on to form this manuscript.

In chapter one I showed how shame is politically and publicly manipulated to coerce people into corrective forms of healthcare—by overexposing our decisions, behaviors, and bodies for the sake of policy and argument—and also how this coercion goes on to inform one's

sense of self. We hold *we should know better* in our bodies as the internalized echo of the external demand for legibility and productivity. But for all of us who ache in shame, for those of us who might also quote Billy-Ray Belcourt—“I didn’t yearn for anything but privacy / because it is an embarrassment to be a wound in public”³⁰⁷—we are also far more than our bruises. As I worked needle exchange in Oregon I was witness to the acute ways in which the historical and social construction of health in the U.S. hurt the material realities of all of us, but especially those who use drugs. Our work there was about silencing shame through care, respect, and an attention on agency rather than expectation. We sought to hold vulnerability and empowerment together, not as opposites. This chapter, then, was not about overcoming shame to transform it into something more palatable, but instead sought to show how possibility—how we think about ourselves and how we might dream ourselves into our own futures—is diminished through corrosive rhetorics that circulate shame for profit and control.

In the second chapter I offered a space to rest, to withhold and resist explanation. Shy is a feeling with which I am endlessly familiar, if not also sometimes stymied by. But shy serves me again and again, as when I moved through the complex, painful landscape of medical assistance as I came out as trans nonbinary. The co-dependent relationship between capitalism and wellness (wellness as a social construct) reinforces distinct categories—using or sober, dysphoric or euphoric. In this chapter I explained how capital exploits the feeling of euphoria to market it as outcome, as the final and finished state of trans personhood, the cured condition to dysphoria. But this idea, suffered far beyond queer and trans experiences, disregards revision and returns. It disregards the ongoing ache of my body experiencing wonder and shame simultaneously. It disregards the significance of relapse in recovery. And it erases a multiplicity of experiences, focused so solely as it is on the singular, and all the singular is meant to tell us.

³⁰⁷ Billy-Ray Belcourt, *A History of My Brief Body* (Columbus, OH: Two Dollar Radio, 2020), 40.

Shyness, then, might give us an alternative path in this existing ecosystem that demands mastery be spoken and explained. I extend this into the third chapter on nostalgia to offer a different set of discursive opportunities—language that we can make, remake, return to, revise, and reclaim. We do not have to follow the demanded scripts, the arc from rock bottom to second chances, from dark closets to public pronouncement. In the third chapter I wanted to show how going back happens for many reasons and in many ways, one of which is to gain deeper literacy of the self, to reckon with a knowledge that never culminates, which we experience when we think on and feel our archives.

Nostalgia makes visible how we are always in a fluid state of becoming, never fully arrived but fully ourselves at all times. By troubling the conventional traditions and definitions of nostalgia, that it can only function for politically nefarious or selfishly solipsistic purposes, I hoped to expose how much is withheld from us under the aegis of paternalism. *You should know better* resurfaces to tell us not to waste time or stall out in old pain or old attachments. But these simplistic notions of nostalgia diminish its vibrant possibilities for *why* we might go back, and how going back and curating our archives according to our own desires might allow a younger self or an old pain to speak its narrative authority. By recognizing ourselves as makers of our pasts we see ourselves as makers of our futures.

I purposely organized my chapters to slow pivot from the feeling of containment (shame) toward the swell of open, lively horizons (wonder). The entirety of my project is my attempt to say, no matter who we are or what kind of crises our specific lives must endure, we have the potentiality of wonder, of visualizing and enacting possibilities for ourselves beyond those scripted for us. I am trying to protect beauty, to insist on the human from every angle. For me, this came down to the physical labor of working exchange, of filling orders for safer drug use

supplies, of the simplicity of unconditional care at Prevention Point Pittsburgh during the final year of my doctoral program. It also became a call for method, that our writing and research still has much to do when it comes to how we study our objects, how we might give light without overexposure.

This fourth chapter confronts the compelling allure of telos, how satisfying it feels to have answers and draw conclusions, to instead offer that our fixation on fix is the problem. I attempt to put into practice what I argue. Writing in autotheoretical narrative style, as I've done for most of this project, I turned my analytical lens from the object—Prevention Point Pittsburgh, but also harm reduction writ large, drug use, addiction, and the language circulating through all of these spaces and issues—to the feelings that surfaced while working in the needle exchange van. Because those feelings exposed difficult a question: how do I write about precarity without overexposing or simplifying human life? Said another way, how do I write while refusing knowledge extraction, while refusing the telos of solutions? I went into this question and lingered, then named that lingering a methodology of wonder.

I attempted to describe each achy affect comprising this project—shame, shyness, nostalgia, wonder—beyond their conventional definitions, those so commonly circulating through our daily lives: that we overcome shame when we harness pride; that we expel shyness for the moral call into sociality; that we spurn nostalgia for the sake of futurity; that we punctuate wonder for its revelatory commodity. Each of these scripts relies on mastery, on mastering the anti-social emotion to reform it into something productive. But in that way, we bisect affects into positive and negative feelings;³⁰⁸ and it is this binaried heuristic that undercuts our agency to

³⁰⁸ For example, affect theorists such as Sianne Ngai and Sara Ahmed, among others, have organized affects into positive and negative parts. See Sianne Ngai, *Ugly Feelings* (Cambridge: Harvard University Press, 2007); and Sara Ahmed, *The Cultural Politics of Emotion* (New York: Routledge, 2015). Aristotle famously defined emotions

insist on arrivals, disallowing dissonance so that we must overcome what hurts.

To think so categorically, and in terms of opposites (sick or healthy, normal or pathological), has done little to stymie the multiple crises within which we find ourselves. It has done even less for serving the acute needs of our communities. The margins held captive to the center, the center manages and regulates the margins. Often in our efforts to destabilize its power, we actually fortify that center by claiming the margins as marginal. The binary reifies these positions, allowing the “marginalized” only static directional options: assimilate toward the center or remain fixed in painful deviance. So how do we write about difference when difference itself operates according to this deeply entrenched binary?

We write about our aches. I come to argue for methodologies that keep us grounded in our work, those that refuse to turn issues into allegories or metaphors. This was not an easy task, considering the slippery abstractions of affect, but the focus on ache began to reveal how we might respond to crisis without being demoralized by crisis. To love the questions is to embrace ache, to embrace the complex reality that we hurt and we sometimes hurt one another. The language we apply towards one another, and the meaning we pull from each others’ bodies, enacts an array of harm. As long as we recycle binaried ideas of how power moves, of how feelings manifest, our lives of relationship and connection will get sealed into locked power grids. As long as our imaginaries are attracted and attached to outcome (as they are so influenced by capital to do), we will see the story of ourselves as only in failure. But once we embrace ache as “a fact of being embodied,”³⁰⁹ we become less motivated by simplistic solutions and therefore less overwhelmed by the problem itself. “It is precisely the recurrent, habitual, and mundane practice of showing up that makes us less and less willing to inhabit a world where we don’t

against their opposites. See, Aristotle, *The Rhetoric of Aristotle, A Translation*, ed. John Edwin Sandys (Cambridge: The University Press, 1909).

³⁰⁹ Awkward-Rich, “Trans, Feminism,” 824.

show up,” writes Hil Malatino. “And where whole systems fail to show up for us.”³¹⁰ As in, what else is this work all about?

This project, then, came to this crux: how do we work toward a better future, when we describe “better” as marked by care, connection, agency, community, and reckoning? How do we work toward this kind of better future when a climate of capital demands “better” as productive, assimilative, positive, settled? We again turn to Rilke, who told us not only to live the questions, but love them:

Try to love the questions themselves. . . . Do not now seek the answers, which cannot be given you because you would not be able to live them. And the point is, to live everything. Live the questions now. Perhaps one day you will then, gradually, without noticing it, live along some distant day into the answer.³¹¹

Though our bodies are deeply *feeling*, I have tried to show how we might also shift our focus away from the body, depleted as they are when exploited to construct social meaning, and toward the social worlds that enact feeling. Similarly, my preoccupation with ache and affect is their relationship to knowledge—how they magnify our way of knowing ourselves through the world. That to say, our bodies know, which makes us the authority of our body’s literacy. We move at whatever pace, in whatever direction, that makes the most sense (“sense” in all definitions of the word) to us.

The on-the-ground task—of policy makers, outreach advocates, teachers and students, artists and writers, of those using drugs and those who love those using drugs, of queer people and those providing care to queer people—is to reject mastery, to refuse the body as the site of meaning, and to relearn our notions of health outside the histories of predetermined (meaning, productive) futurity. Inspired by the scene of syringe exchange and my ongoing work with harm reduction advocacy groups, while also endlessly buzzing in my own embodied experiences of

³¹⁰ Hil Malatino, *Trans Care* (Minneapolis: University of Minnesota Press, 2020), 72.

³¹¹ Rilke, *Letters to a Young Poet*, 27.

being trans and queer, I've come to thread all the pieces, feelings, scenes, connections through the unanswered question. By living *and* loving the questions we evade those outcomes forced on us, the tidy conclusions that constrict us into narratives not of our own making. We embrace the discomfort of returning to and relearning the same truths. It means believing we are always, beautifully ourselves while we on our way to ourselves, no end in sight. Here we are; *we are here.*

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