

# PANDEMIC EXCHANGE

HOW ARTISTS
EXPERIENCE THE COVID-19
CRISIS

PANDEMIC EXCHANGE THEORY ON DEMAND

Theory on Demand #41 **Pandemic Exchange**How Artists Experience the COVID-19 Crisis

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## **QUESTIONS**

- 1. In many countries the authorities were late to acknowledge the severity of the pandemic. How was the situation where you are (can be as local as your city or neighborhood, anything that is important to you) and how did/do you experience it? Can you describe what happened and is happening now?
- 2. COVID-19 measures gravely affected the movement of people and goods. It changed the way many people had to work, and many even lost their jobs or livelihood. What happened in your life? Did you manage to continue working, and if so, how? Were you able to adapt to the new circumstances easily?
- 3. Artists generally don't produce consumer goods or simple, easily marketed products. They work and think along idiosyncratic paths, often creating objects, installations, events, or situations that reflect on or react to the world. At the same time, their work process can also be vulnerable to outside influences, even to the point where it gets blocked. I wonder if the situation around the pandemic inspired or influenced you in specific ways. What have you done or created during the pandemic? Has there been a development in this over the course of the past year?

### Additional question suggested by John Duncan:

4. How real is the COVID-19 threat to you personally?

#### One artist, Dennis de Bel, received different questions:

- Hoe is de situatie waar jij bent sinds de pandemie is begonnen? (What is the situation like where you are since the pandemic started?)
- Wat voor impact heeft de pandemie op jou en je werk gehad? (What impact has the pandemic had on you and your work?)
- Als je nog hebt kunnen werken, wat heb je dan precies gedaan? (If you were still able to work, what exactly did you do?)
- Hoe zie je de nabije toekomst voor jou en je werk? (How do you see the near future for you and your work?)

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#### SACHIKO HAYASHI

I was accused of being a right-wing populist by a couple of my oldest Swedish friends when I criticized Sweden's COVID-19 policy on Facebook. As a person of color with a political view definitely toward the left, I found this incident to be not only outrageous but also unfathomably absurd.

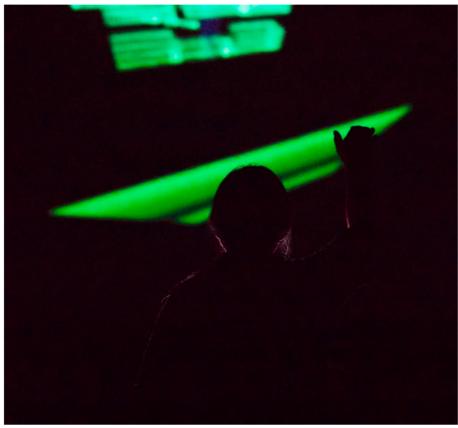


Figure 24: Sachiko Hayashi performing her motion controlled audio-visual work 'Still Untitled' (2018) Photo: Emanuel Schütt.

Sweden, my country of residence, went for natural herd immunity. The choice was made quite early, and whereas the other two countries that made similar decisions in Europe, the Netherlands and the UK, later reversed their strategies, Sweden did not. With a loose recommendation for social distancing, we continued with the strategy to spread the virus naturally, while our government and other institutions in charge presupposed a certain amount of death tolls.

A notable characteristic of the Swedish strategy was also the denial of scientific findings of the novel coronavirus and its disease. In a much similar manner to Trump supporters, they

accepted neither WHO's nor other international institutions' medical consensuses. The only, nonetheless considerable, difference from the U.S. was that the Swedish counterparts didn't come from the right but the left of the political spectrum. This was probably because we currently have a center-left government, but it also made the Swedish circumstance even more unique.

The Swedish COVID-19 strategy has resulted in two disastrous consequences:

- 1. Once the virus spread to the homes of the elderly, the residents there who fell ill during this period were given palliative care by administering morphine instead of proper COVID-19 treatments. This was carried out without consent from the patients or their relatives, some even without any real-life consultations with their doctors. Various decision-making bodies involved in the process all claim that they were following the guidelines from the Ministry of Health and Social Affairs to prevent intensive care units from overcrowding. However, there was no shortage of ICU beds in Sweden at the time this was going on. In fact, the extra facility set up in Stockholm to cope with the demand for more hospital beds and equipment was never used. We simply prioritized other age groups. In my eyes, this was euthanasia of the elderly administered by our society.
- 2. As much of the rest of the world condemned natural herd immunity as a COVID-19 strategy and watched the Swedish experiment with horror, it brought out a detestable nationalism in many Swedes, especially in the left, who felt obliged to defend the decision of their public authorities. With a nasty display of national chauvinism, those who supported the Swedish strategy launched verbal attacks on us others who didn't, bullying some in public by way of ridicule and mockery, and dismissing the opposing opinions simply by labeling the individuals as 'traitors' to a certain political ideology or even to the country itself. The issue grew exceedingly politicized and ultimately transformed into a question of social identity and loyalty. The way the Swedish authorities handled this pandemic became a highly inflammatory and extremely divisive social issue.

Although the pandemic inarguably brought certain inconveniences in my daily life, my feeling of isolation didn't derive from public regulations such as social distancing (we never had any lockdowns). Instead, it originated from the undeniable feeling that because the Swedish condition was so unique, people outside of Sweden won't be able to relate to what we were going through here. That was, and still is, my isolation during the pandemic.

Currently, the political game around the issue of this pandemic continues. As late as the 9th of February this year, the state-funded public broadcaster Sveriges Radio (Sweden's Radio) reported on a certain private Facebook group whose intention was to challenge the 'unscientificness' of the Swedish coronavirus pandemic response. Many of its ca. 200 members are academics, scientists, and concerned parents (i.e., far from the militant and conspiracy-driven Trump supporters). However, the report vilified them as destructionists of Sweden's interests and reputation, whose inclination to secrecy, i.e., their closed Facebook group, as well as their proneness to conducting discussions in English instead of Swedish — an indication there are many foreigners in the group — are worrying tendencies according to our society. The founder

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of the group, a journalist of Irish origin who has worked for human rights organizations for ten years, had to flee Sweden with the help from the Irish embassy, as he feared for his safety due to the escalation of threats fueled by the report. The openness to discuss the topic seems to be still some distance away in this country.

Sadly, the above-mentioned journalist is not the only one to flee Sweden. Several cases have been reported of people who, ostracized at their workplace by their co-workers because of their opinions on the Swedish pandemic strategy, felt they had no choice but to move to another country. These include medical doctors and other medical specialists.

I was accused of being a right-wing populist by a couple of my oldest Swedish friends when I criticized Sweden's COVID-19 policy on Facebook. As a person of color with a political view definitely toward the left, I found this incident to be not only outrageous but also unfathomably absurd. In the end, I unfriended them on Facebook as well as in real life. Needless to say, my story is not an exception.

Total Deaths as of 10.03.2021 (population: 2019):

- Sweden 13,042 (10,23 million)
- Denmark 2,381 (5,806 million)
- Finland 776 (5,518 million)
- Norway 632 (5,328 million)
- Iceland 29 (356,991)<sup>1</sup>

For the last 5-6 years, I've had to cut down the amount of work due to a series of health problems from which I have been suffering. So the pandemic didn't affect me too much in that sense. The change in my life came several years before the pandemic and has continued through it.

In terms of work, I had to cancel three audio-visual performances that would have taken place in Stockholm last year. Regarding other commitments I had, I could either postpone them or have them done over other communication methods such as web meetings, emails, or phone conversations.

Source for deaths: COVID-19 Dashboard by CSSE at John Hopkins University, https://coronavirus.jhu.edu/map.html, Accessed March 2021. Source for population size: Google.

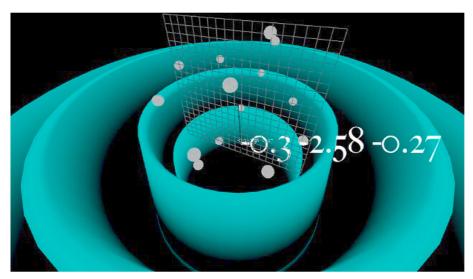


Figure 25: A still from motion controlled audio-visual work 'Still Untitled' using Leap Motion, programmed in Max Jitter (2017-2018).

I've grown to be closely involved with the artist-run not-for-profit art organization in Stockholm I joined with several other members three years ago. For the past two years, I have been one of its internal auditors. Restructuring the organization has taken much of my time. Because of that and my health issues, I have refrained from throwing myself into a new demanding creative project during this pandemic. Instead, I've been focusing on updating my knowledge in various areas, like:

- 2D skills and video editing skills using various mobile/iPad apps instead of relying solely on desktop applications,
- discovering new possibilities of apps that employ the use of machine learning,
- exploring VR using Oculus Quest and Unity, acquiring another MYO armband to equip both arms for interactive audio-visual performance in RL using Max Jitter,
- studies of Kabuki costumes on YouTube for various combinations of colors and forms in movement.

It has also been an incubation time for ideas and thoughts for a new project, which is now in the process of being percolated and distilled.

As I have some underlying conditions, I belong to the group of people vulnerable to COVID-19. However, since I live in the countryside and my partner does our grocery shopping, I did not have too many reasons to worry about the spread of the virus.

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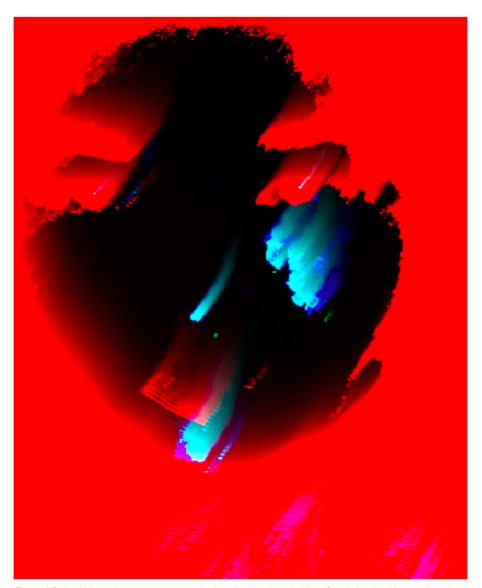


Figure 26: A still from from gesture controlled audio-visual work 'Hard Candy,' using Myo armband, programmed in Max Jitter (2019).

Or so I thought. Then, about a week ago, we received an email from my niece-in-law explaining my brother-in-law had come down with COVID-19 and become hospitalized. He had already spent a week in the hospital with a ventilator.

I know several people who had COVID-19 and got better without any hospitalization. I also know people suffering from lingering symptoms from the virus. But having someone of close

kin suffer severely from it made me feel the danger of the coronavirus as real and more frightening. Despite the arrival of vaccines, I fear the threat is getting closer, and with the new and more dangerous variants of the virus, no one seems to be certain of their safety. Fortunately, after another week in the hospital, the brother-in-law got better. He is now in the process of being dismissed. But as I wait for my turn to get vaccinated, my fear of the virus persists.