



Scopes, Specula, the Speculative: Histories of Medical Experimentation and Looking in African American Art and Fiction

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This article traces a speculative and critical engagement with histories of health care disparity and medical exploitation shared across fictions by Ralph Ellison and Toni Morrison, and the artwork of Ellen Gallagher. It argues that insistent returns to racialized experimentation and scientific modes of looking form a significant interrogation of a wider set of US promises and attritions. Specifically, it asks how postwar African American culture takes up scopic questions to address dominant accounts of progress and the modern, both via reference to visual orders and technologies, and via formal choices regarding iteration, perspective and scale.

INTRODUCTION: “AN EXPERIMENT OF UNUSUAL OPPORTUNITY”

In Ellen Gallagher’s artwork *An Experiment of Unusual Opportunity* (2008), a disturbing, darkly shaded, difficult-to-read image confronts viewers. The painting is large, roughly the height of a tall adult human, and filled by an octopus-like textured mass, the edges of which are hard to distinguish, and which resists any easy representational interpretation. This contributes to a confusion over scale as well as over how to identify what we see; does a strange, huge creature of the deep loom over and toward us or are we looking at a microscopic yet magnified slide specimen? Some parts of the canvas suggest caul-like organic webbing, or an explosion of cells or lesions, adding to the visceral, alienating effect. Gallagher gives us a referent with her choice of title, however, thus offering a narrative means of approaching this disintegrating, or proliferating, fleshy mass and its murky backdrop. For *An Experiment* is one of several of

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Gallagher's twenty-first-century works that invoke the infamous Tuskegee syphilis experiment performed on hundreds of impoverished Black men in Alabama between 1932 and 1972. In 1932, Dr. Taliaferro Clark, chief of the US Public Health Service venereal disease division, described the high prevalence of syphilis in Macon County, Alabama as a "ready-made situation" and believed that it offered an "unusual opportunity" for observation.¹ Gallagher's title picks up on this phrase from Clark's correspondence, now in the National Archive, and thus links her painting to the historical experiment. The suffering involved, and the medical and scientific perspectives that meant that the experiment ran on long after the discovery of an effective treatment for syphilis, recur in and prompt Gallagher's artistic imagination. That is, Gallagher returns to Tuskegee repeatedly, drawing from it some of the most potent visual tropes that are recognizable across her output of the last twenty years.

The overwhelming image presented in *An Experiment* provides a generative starting point for this enquiry, bringing together scopic questions of perception, scale and visual fields; concerns with racialized medical atrocity; and, in a broader frame, exclusionary accounts of scientific advancement and modernity. My article proposes that in Gallagher's work medical trials involving Black people become a site for interrogating American metanarratives of "progress," which are ultimately bound into the logics of colonialism and capital. Fictions by Ralph Ellison and Toni Morrison similarly respond to past medical racism in a way that unravels the entanglement of US modernity, visual orders and white supremacy. In what follows, I will examine the relation between medical science and histories and questions of looking, in particular as taken up in postwar African American art and writing engaged with speculative and science fiction modes. Judith Wilson observes that while a confrontation with her materials and process is central to Gallagher's art, so too are "socio-culturally 'thick' references," a density of allusion and intertext that Wilson likens to the literary.² Gallagher's referential artwork and the novels under consideration share recurring concerns with racialized medical encounters and a scientific gaze. Through this, they shape an imaginative, critical

¹ Letter from Taliaferro Clark to fellow doctor M. M. Davis, 29 Oct. 1932, cited in Allan M. Brandt, "Racism and Research: The Case of the Tuskegee Syphilis Study," in Judith Walzer Leavitt and Ronald L. Numbers, eds., *Sickness and Health in America: Readings in the History of Medicine and Public Health* (Madison: University of Wisconsin Press, 1997), 392–404, 394 n. 21. Brandt's chapter gives a helpful account of the assumptions and deceptions involved in the Tuskegee study and some of the ethical questions neglected by the Department of Health, Education and Welfare's investigation in 1972.

² Judith Wilson, "Sniffing Elephant Bones: The Poetics of Race in the Art of Ellen Gallagher," *Callaloo*, 19, 2 (1996), 337–39, 338.

intervention to expose the structures and damages that underwrite US scripts of aspiration and futurity.

There are at least two senses of experimentation to recognize: the experimental, often fantastical nature of Gallagher's art and speculative aspects in the fiction, and, at the same time, a preoccupation with the grim history of experimenting on bodies and persons perceived to matter less in order to reinforce the life opportunities of those seen to matter more. These considerations will be developed first through connections between the history of race and medicine in the US and my chosen literary texts. Then, turning to Gallagher's artwork, I will pursue two angles: (1) linking what she calls the "insistences" of her art to forms of wear or "racial weathering" and historical engagement, and (2) identifying significant invocations of technologies of looking and a scientific optic, including vis-à-vis Gallagher's formal choices relating to observation, categorization and scale.

Regarding my focus here, discourses of medical innovation and progress all too often correspond with wider alignments that have reserved modernity and the future for the white-dominant West. In his work on racialized time, Michael Hanchard locates the West's "idea of African and African-derived peoples as the antithesis of modernity" as underpinning colonial conceptions of advancement and backwardness, and, looking at the racially stratified US, "unequal temporal access to institutions, goods, services, resources, power, and knowledge," including health care.³ Afrofuturist criticism both tracks related power structures and explores Black futures projected in the face of their historic foreclosure. For example, Alondra Nelson observes how "Blackness gets constructed as always oppositional to technologically driven chronicles of progress."⁴ Kodwo Eshun, in turn, probes how, in the millennial era of the "futures industry," the powerful "draw power from the futures they endorse, thereby condemning the disempowered to live in the past." He advocates for recovery of "the histories of counter-futures," including via Black

³ Michael Hanchard, "Afro-modernity: Temporality, Politics and the African Diaspora," *Public Culture*, 11, 1 (1999), 245–68, 247, 253. Hanchard writes, "To be black in the United States meant that one had to wait for nearly everything. Legalized segregation, the maintenance of separate and largely unequal institutions, meant that blacks ... received health care, education, police protection, transportation ... only *after* those same services were provided for whites ... [This] represented an imposed disjunctive time structure within which U.S. African-Americans were made to live." *Ibid.*, 263.

⁴ Looking at discourses of Blackness and technology following the late 1990s digital boom, Nelson sees continuity with old racial ideologies. Alondra Nelson, "Introduction: Future Texts," *Social Text*, 20, 2 (2002), 1–15, 1. Broadly speaking, Afrofuturism, a term coined in the 1990s and achieving new prominence more recently, raises questions about to whom the realm of the future has belonged, and is associated with various popular and art forms that project Black futures in the face of their historic circumscription.

speculative cultural production that might expose such dynamics.⁵ Gallagher both responds to Afrofuturist frameworks and is an iconic reference point within them. Meanwhile, Black literary engagements with science fiction and associated genres have often sought to dismantle discourses that have positioned people of colour as foils in the presentation of technological and scientific advancement. If, as Lisa Yaszek outlines, “science fiction storytelling as a whole tended to revolve around futures that were implicitly – and sometimes explicitly – racist ones,” then a redefinition is underway, more alert both to alternative and critical futurisms and to the hierarchical assumptions built into “science.”⁶

Gallagher, Ellison and Morrison each find a stimulating point of contact in the post-World War II years. These coincided with the US sci-fi heyday spanning the mid-twentieth century, and present an era of notable American aspiration, expanding consumerism, and ideas of technological and scientific possibility. Some of Gallagher’s work invokes US science fiction films of the 1950s and tropes of the genre; many of her paintings present strange, fantastical worlds and unfamiliar life forms. But in addition, as we will see, the layers, revisions and repetitions of her pieces work to unpick the scripts and material realities that have circumscribed Black futures. Ellison and Morrison, too, feature science fiction intertexts or gestures in novels looking at a mid-twentieth-century US, and medical encounters, riven by racial hierarchy. Their fiction tackles the white authority figure of the doctor, the objectification of non-consenting Black test subjects, and, more loosely, a dangerous imperative of Western knowledge advancement that is hard to uncouple from a backdrop of eugenics. In Ellison and Morrison’s writing, we also find a revisitation of the association between medical or biological experiment and very early examples of the science fiction genre. A brief consideration of the history of medicine and race in the US will provide a stepping-off point for such analysis to come.

Twenty-first-century scholarship such as Harriet Washington’s *Medical Apartheid* (2006) and Alondra Nelson’s *Body and Soul* (2011) has drawn fresh attention to the historic discriminatory relation between the US medical establishment and African Americans, including a long record of exploitative experimentation.⁷ With a more recent focus, Arline Geronimus has formulated the concept of “racial weathering” to capture health gaps

⁵ Kodwo Eshun, “Further Considerations in Afrofuturism,” *New Centennial Review*, 3, 2 (2003), 287–302, 291, 301.

⁶ Lisa Yaszek, “Afrofuturism, Science Fiction, and the History of the Future,” *Socialism and Democracy*, 20, 3 (2006), at <http://sdonline.org/42/afrofuturism-science-fiction-and-the-history-of-the-future>. See also Mark Bould, “The Ships Landed Long Ago: Afrofuturism and Black SF,” *Science Fiction Studies*, 34, 2 (2007), 177–86.

⁷ The collection *Useful Bodies* brings an international range: Jordan Goodman, Anthony McGillott and Lara Marks, eds., *Useful Bodies: Humans in the Service of Medical Science in the Twentieth Century* (Baltimore: Johns Hopkins University Press, 2003). Specifically

caused by additional stressors for Black people in a white-dominant society. We should note ongoing patterns of later diagnosis and poorer outcome for many diseases and, for example, starkly higher rates of infant and maternal mortality. Washington writes, “researchers who exploit African Americans were the norm for much of our nation’s history, when black patients were commonly regarded as fit subjects for non-consensual, non-therapeutic research,” pointing to a record of “locating hospitals [in] areas where black [people] furnished bodies for experimentation and dissection.”⁸ In work focussed on the 1970s health initiatives of the Black Panther Party, Nelson identifies how “the activists and the communities with which they worked confronted the paradox of profound healthcare neglect and disparate biomedical inclusion: poor blacks were ... overexposed to the worst jeopardies of medical practice and bioscientific research.”⁹ These histories reflect a categorization of life recognized more broadly in theories of biopolitics and necropolitics; the definition of some groups as expendable in purportedly future-oriented experimentation sharpens our sense of the Black bodies that service a temporality and teleology of modern progress.

Within this picture, the Tuskegee syphilis experiment is a specific and important touchstone for Gallagher, but it also sits in the background of Ellison’s novel *Invisible Man* (1952). The exploration of the protagonist’s experiences at college echoes Ellison’s own time studying at Tuskegee from 1933 to 1936.¹⁰ References to the campus as a seat of Black southern learning and self-improvement, to student hardship, to the Founder (meaning Booker T. Washington), and so on, all link the early sections of the novel to a recognizable Tuskegee; that is, to an educational institution imbricated, like the US Public Health Service, with the Tuskegee syphilis study. The medical assumptions recalled by this backdrop, and the associated codes surrounding Black sexuality satirized in the novel’s local Trueblood episode, thus foreshadow the protagonist’s later treatment in the factory hospital, to which I will shortly turn.

Two different historical points of reference undergird Morrison’s approach to medical mistreatment, exploitation and suffering. Exploring the intersection

on Tuskegee see also Brandt; and Susan M. Reverby, ed., *Tuskegee’s Truths: Rethinking the Tuskegee Syphilis Study* (Chapel Hill: University of North Carolina Press, 2000).

⁸ Arline T. Geronimus, *Weathering: The Extraordinary Stress of Ordinary Life on the Body in an Unjust Society* (London: Virago, 2023). Harriet Washington, *Medical Apartheid: The Dark History of Medical Experimentation on Black Americans from Colonial Times to the Present* (New York: Anchor Books/Random House, 2006), 13, 10.

⁹ Alondra Nelson, *Body and Soul: The Black Panther Party and the Fight against Medical Discrimination* (Minneapolis and London: University of Minnesota Press, 2011), xii–xiii.

¹⁰ See Arnold Rampersad, “Ralph Ellison at Tuskegee,” *Journal of Blacks in Higher Education*, 56 (2007), 59–67, on Ellison’s time at the institute. The syphilis experiment began in 1932, the year before Ellison arrived.

of gender and race in creating categories of dismissal, Morrison predominantly draws on the figure of Dr. J. Marion Sims in a story of post-World War II abuse in her novel *Home* (2012). The earlier extensive surgical experimentation of Sims on unanaesthetized enslaved women in Montgomery, Alabama in the 1840s and 1850s in order to find a technique for mending vesicovaginal fistula following childbirth is now notorious. His elevation as the “father of gynaecology” and his devising of the precursor to the modern speculum are echoed and undercut in both *Home* and *The Bluest Eye* (1970). These novels by Morrison unfold Black women’s experiences of reproductive health in a medical context as at best objectifying and at worst a denial of life.¹¹ A more recent individual in this long history, cervical cancer patient Henrietta Lacks, was the unwitting “donor” of the significant HeLa immortal cell line after a sample was taken without her knowledge in Baltimore, Maryland in 1951. Without being told of the consequences, earlier radiation treatment had rendered Lacks infertile and she died of her illness the same year, with neither her nor her family aware of her medical legacy. Fleshed out by Rebecca Skloot’s account, stories like that of Lacks and her descendants reveal enduring injustice and ethical failings.¹² Lacks’s mid-century experiences provide a second context for what happens to the character of Cee in *Home*, while the many advances based on the use of her cell line offer vivid illustration of an extractive and profitable model of science. Drawing on the thought of Hannah Arendt and Frantz Fanon while looking at the case of Lacks, Priscilla Wald cites “the history of institutional racism in which the absence of informed consent of research subjects from oppressed populations was a manifestation of their exclusion from (and of the unstable definition of) human being and ‘humanity.’”¹³ Wald also brings attention to the ongoing commercial uses of the HeLa cell line, an aspect that, in combination with a rhetoric of future benefit for others or for scientific knowledge, helps further delineate the connection between the uneven futures exposed by Afrofuturism, capitalist growth and a biopolitics of race and medicine.

A final historical example that propels the imaginative work here is the experimentation at Holmesburg Prison, the largest of Philadelphia’s county jails, where male prisoners participated in innumerable cosmetic-product,

¹¹ Sims was much celebrated and in 1876 elected president of the American Medical Association.

¹² Rebecca Skloot, *The Immortal Life of Henrietta Lacks* (New York: Random House, 2010). See also Priscilla Wald, “Cells, Genes, and Stories: HeLa’s Journey from Labs to Literature,” in Keith Wailoo, Alondra Nelson and Catherine Lee, eds., *Genetics and the Unsettled Past: The Collision of DNA, Race, and History* (New Brunswick, NJ: Rutgers University Press, 2012), 247–65; and Lisa H. Weasel, “Feminist Intersections in Science: Race, Gender and Sexuality through the Microscope,” *Hypatia*, 19, 1 (2004), 183–93.

¹³ Wald, 262.

medical and military trials, including ones involving psychotropic drugs, radiation and chemical agents, from the 1950s to the 1970s. I propose that Gallagher's artwork invokes the Holmesburg skin tests in its visual language as well as, more explicitly and repeatedly, the suffering at Tuskegee. Although the Holmesburg programme drew on prisoners from across racial categories as test subjects, as Allen Hornblum indicates in his study *Acres of Skin*, by 1955 African Americans were disproportionately represented in the justice system (that year at Holmesburg "their portion of the prison population was climbing toward 50 percent"), and disadvantaged prisoners were more likely to end up in the more dangerous trials.¹⁴ Inmates participated for financial reward, fully informed consent was typically lacking and, under the leadership of prominent dermatologist Albert Kligman, existing regulations were repeatedly circumvented in a highly profitable enterprise. If Clark thought the prevalence of syphilis in rural Alabama in 1932 offered an "unusual opportunity," Kligman reflected that on his first visit he similarly envisioned the Holmesburg prison population, captive and in many respects controllable, as constituting an ideal research field of "acres of skin."¹⁵

"OPTIC WHITE": MEDICAL ENCOUNTERS IN FICTION

Turning now to close discussion of literary representations, I explore the affordances of a layering of medical encounters in three multi-stranded novels, something that also allows fresh comparison of fiction by the prominent figures of Ellison and Morrison. Writing on Afrofuturism and Black science fiction, Yaszek examines how Ellison "uses science fictional motifs to aggressively critique American institutions and practices that erase black people and their history from the future imaginary."¹⁶ While typically categorized in other ways, recently there has been expanding consideration of *Invisible Man* as science-fictional. Ellison himself draws attention to this genre angle in his introduction to the 1989 reissue of the novel, noting that "a piece of science fiction is the last thing I expected to write."¹⁷ Yaszek's sense of Ellison's use of sci-fi motifs to critique American institutions and dominant

¹⁴ Allen Hornblum, *Acres of Skin: Experiments at Holmesburg Prison* (New York: Routledge, 1998), 16. Despite the new Nuremberg Code, Hornblum makes a case for how, "Over the next two decades, the number of American medical research programs that relied on prisoners as subjects rapidly expanded as zealous doctors and researchers, grant-seeking universities, and a burgeoning pharmaceutical industry raced for a greater market share ... prison inmates ... would become the raw materials for postwar profit-making and academic advancement." *Ibid.*, xvi.

¹⁵ *Ibid.*, 37. Looking back, in 1966 Kligman volunteered, "All I saw before me were acres of skin. It was like a farmer seeing a fertile field for the first time." *Ibid.*, 37.

¹⁶ Yaszek, "Afrofuturism." ¹⁷ Quoted in *ibid.*

temporal politics can be extended to Morrison's novel of the 1950s *Home*. Like Gallagher, both writers illuminate the connection between a stacked logic of progress and scientific experimentation that renders some disposable along racial lines.¹⁸ When Morrison calls up historic medical cases it is to address associated discourses of authority, science, advancement and looking. These concerns mean that the perhaps unexpected genre descriptor of science fiction becomes productive in relation to her work.

In *Invisible Man*, one of the foremost episodes identifiable as prototypical of African American science fiction features the narrator's awakening in the northern factory hospital following a workplace accident at Liberty Paints. Disoriented and trapped in some kind of glass and metal box, hooked up to nodes that administer electric shocks, the protagonist not only is subjected to unnecessary, painful treatment, but is denied a voice and agency as he lies listening to a group of doctors debate a range of experimental "cures":

"You see! My little gadget will solve everything!" he exploded. "I don't know," another voice said. "I think I still prefer surgery. And in this case especially, with this, uh ... background ... I believe it a mistake to assume that solutions – cures, that is – that apply in, uh ... primitive instances, are, uh ... equally effective when more advanced conditions are in question. Suppose it were a New Englander with a Harvard background?" ... I listened with growing uneasiness to the conversation fuzzing away to a whisper.¹⁹

Here the powerless Black patient gives the doctors an ideal opportunity to try out purportedly future-oriented procedures without endangering the white population. Their discussion is premised on a polarity or scale of the "more advanced" and the "primitive," assumptions about race and less-than-humaneness that allow them to talk and act with impunity. They increase the electrical charge delivered to the narrator with little regard for consequence and imply that their invented "cures" are all for the greater good. Their seeking of "the results of a pre-frontal lobotomy" without surgery and subsequent jest about "castration" echo all too clearly with historic racialized abuses.²⁰

On being discharged after his objectifying, distressing experiences, Ellison's protagonist is told his problem is that he is not yet ready for life and work in the industrialized North, something for which his employers judge his "back-

¹⁸ Whereas some writers have explicitly centred the Tuskegee experiment in their work, Ellison and Morrison invoke and reimagine such histories in a less immediate way. Three examples of the more direct approach are included in the collection *Tuskegee's Truths*, ed. by Reverby, which features David Feldshuh's play *Miss Ever's Boys* and poems by Sadiq Bey and Essex Hemphill. Colson Whitehead's 2016 novel *The Underground Railroad* presents a more recent creative engagement with Tuskegee and historic medical abuse.

¹⁹ Ralph Ellison, *Invisible Man* (London: Penguin Books, 1952), 192–93.

²⁰ Ibid.

ground” has not “prepared” him.²¹ As he is condemned to needing to catch up, like the rest of his race, this scene of medical treatment encapsulates the way the protagonist is acted upon in US society more broadly and illustrates strains of satire and social critique within Black speculative and science fiction. Yaszek writes of the invisible man’s various ventures and involvements: “In each case his dreams of self-realization are thwarted because he is treated as little more than a blank slate upon which institutional authority projects its own vision of the future.”²² As he is declared unprepared for employment in modern industry, the hospital episode forms part of a pattern of the narrator finding himself put on hold, deprioritized or sacrificed for metanarratives of progress. In line with Hanchard’s work on racialized temporal disparities, such structures of advancement and lag are anticipated when, on learning of the slogan for “Optic White” paint, he is reminded, “If you’re white, you’re right,” a saying that continues, if you’re brown stick around, and concludes, if you’re Black, *step back*.²³ Such racial supremacism is explored elsewhere in the novel to dismantle different elements of American modernity. Here, the particular play on “Optic White” and the immobilization, and arrangement for spectacle, of Ellison’s character in a glass box anticipates my developing engagement with racialized scopic regimes.

In *The Bluest Eye* more than any other novel Morrison centralizes beauty ideals, a dominant gaze and racism. Pursuing the thread of optics, it is telling that young protagonist Pecola’s shattering of self is captured by her being able to see only through “the eyes of other people.”²⁴ The engagement with medical encounters comes when we are given moving insight into the otherwise rather unsympathetic character of Pecola’s mother, Pauline Breedlove, through a rare first-person recollection of the birth of her daughter. Unlike her home-birther older brother, Pecola is born in a desegregated Ohio hospital in the early 1930s. Pauline’s own self-image and aspirations are shaped by Hollywood movies, but in the memory of childbirth and prejudice within an institutional setting she incisively identifies and resists her exclusion from (white) humanity:

I went to the hospital when my time come ... The old [doctor] was learning the young ones about babies ... When he got to me he said now these here women you don’t have any trouble with. They deliver right away and with no pain. Just like horses. The young

²¹ Ibid., 201.

²² Yaszek, “Afrofuturism.” On Ellison and Afrofuturism see also Lisa Yaszek, “An Afrofuturist Reading of Ralph Ellison’s *Invisible Man*,” *Rethinking History*, 9, 2–3 (2005), 297–313.

²³ Ellison, 178. The paint slogan is “If It’s Optic White, It’s the Right White.” Ibid., 178.

²⁴ Toni Morrison, *The Bluest Eye* (London: Picador, 1994), 35. The narrative inhabits Pecola’s interior experience of encountering the “total absence of human recognition – the glazed separateness” as a young, dark-skinned, impoverished Black girl. Ibid., 36.

*ones smiled a little. They looked at my stomach and between my legs. They never said nothing to me. Only one looked at me. Looked at my face, I mean. I looked right back at him. He dropped his eyes and turned red. He knewed, I reckon, that maybe I weren't no horse foaling ... I moaned something awful ... I had to let them people know having a baby was more than a bowel movement. I hurt just like them white women.*²⁵

Pauline's accurate grasp of the doctors' lack of recognition of her subjectivity, capacity for suffering and common humanity, and of their use of her in an instructional context, resonates with Ellison's earlier fictional depiction. Morrison's deployment of shifting narrative perspectives, here presenting Pauline's interior consciousness in italics when she is usually viewed from the outside in the novel, draws attention to the partiality of the dominant view. This works to counter the authority of the senior white male doctor as he teaches the next generation of medics, and it aligns the novel's readers with Pauline's ordeal. Pauline highlights the multiple sets of eyes viewing and categorizing her in group terms ("these here women ... like horses"), but she also gets to the heart of the doctors' not addressing her, nor meeting her gaze (avoiding "my face"), as being part of their dismissal.²⁶ In response, she makes a point of her feelings being as highly developed as those of the white women on the ward, with the "hurt" she vocalizes anticipating the issues of pain and racialized bodies taken up in Gallagher's artwork.

In her later novel *Home*, Morrison again revisits the history of medical use of African Americans, loosely drawing on the nineteenth-century surgery practised on enslaved women by J. Marion Sims. Morrison attempts to "take the scab off the 50s" in *Home* and part of this project involves exposing ongoing unethical medical experimentation.²⁷ She explains,

I was interested in the 1950s because we associate it with the postwar Doris Day decade, when it really wasn't like that ... It was the time of the McCarthy hearings and a lot of medical apartheid, the license of [eugenics practitioners] preying on black women, the syphilis trials on black men ... Emmett Till was murdered in 1955. There were a lot of moments like that.²⁸

Specifically, the earlier explorations of Sims and subsequent reproductive racism reverberate in the near fatal harm to Morrison's protagonist Cee,

²⁵ *Ibid.*, 97.

²⁶ See also Giselle Anatol on the medical students in this scene being "re-taught a lesson they already know ... that Black people's bodies are hardier, and more dispensable, than white ones." Giselle Liza Anatol, "Getting to the Root of US Healthcare Injustices through Morrison's Root Workers," *MELUS*, 46, 4 (2021), 186–207, 189.

²⁷ Toni Morrison, interview with Emma Brockes, *The Guardian*, 13 April 2012, at www.theguardian.com/books/2012/apr/13/toni-morrison-home-son-love.

²⁸ Toni Morrison, "Toni Morrison on *Home*," interview with Lisa Shea, *Elle*, 7 May 2012, at www.elle.com/culture/books/interviews/a14216/toni-morrison-on-home-655249.

who serves as the guinea pig for the gynaecological innovations of her southern employer, Dr. Beauregard Scott. Arriving to start a new job in the home surgery of Dr. Beau outside Atlanta, Cee is given this explanation of his work and her role as assistant by the doctor's wife: "He is more than a doctor; he is a scientist and conducts very important experiments. His inventions help people. He's no Dr. Frankenstein ... Just do what he says the way he wants and you'll be fine."²⁹ I will return later to the self-reflexive reference to Mary Shelley's novel *Frankenstein* (1818), an early touchstone of the science fiction genre. The initial positioning of Dr. Beau as a "scientist" performing "very important experiments," along with his bookshelves housing twentieth-century eugenicist works, foreshadows the danger, suffering and damage that ensue.³⁰ For Cee puts her trust in the doctor and it is later disclosed that as well as assisting him in his medical work – in effect working as a nurse – she has become a subject of his investigations. Dr. Beau's habit of "helping" impoverished women in particular inevitably recalls medical trials that targeted either the institutionalized or those on the social margins with the least power and opportunity of redress.³¹

As Cee becomes dangerously ill, it is the other Black employee, housekeeper Sarah, who intervenes to end her medical abuse. Sarah's perspective also spells out for readers the doctor's fixation and the invasion of Cee's anaesthetized body, purportedly in the name of science: "She knew he gave shots, had his patients drink medicines he made up himself, and occasionally performed abortions on society ladies ... What she didn't know was when he got so interested in wombs in general, constructing instruments to see farther and farther into them. Improving the speculum."³² Sarah notices Cee's "loss of weight, her fatigue, and how long her periods were lasting" and facilitates her rescue by her brother Frank.³³ The framing of Dr. Beau's harmful experiments as attempts to *see* further inside Cee reinforces a relation between the medical gaze and the racialized disposability of some bodies and lives. Dr. Beau's efforts to improve the speculum reference Sims as the acclaimed inventor of the instrument, but also here cannot be separated from the cost to Cee and other victims of this

²⁹ Toni Morrison, *Home* (London: Chatto & Windus, 2012), 60.

³⁰ Cee looks at Dr. Beau's "crowded bookshelves" and lists as "medical books" H. J. Muller's *Out of the Night: A Biologist's View of the Future* (1935), Madison Grant's *The Passing of the Great Race: Or, The Racial Basis of European History* (1916) and L. C. Dunn and Theodosius Dobzhansky's *Heredity, Race and Society* (1946). *Ibid.*, 65. With a focus on eugenics, James Fitz Gerald writes, "the doctor's library connects the dots between Progressive-Era genetic optimization and its postwar descendants." James Fitz Gerald, "Loving Mean: Racialized Medicine and the Rise of Postwar Eugenics in Toni Morrison's *Home*," *MELUS*, 36, 3 (2021), 140–58, 150.

³¹ See Morrison, *Home*, 64–65.

³² *Ibid.*, 112–13.

³³ *Ibid.*, 113.

self-aggrandizing, unethical and unchecked work.³⁴ This example belongs to a wider pattern of health injustice and abuse for Black women; the intrusive procedures undergone by Cee are entirely nontherapeutic, as she is not unwell until they take place and, although she survives the near-fatal infection, she is devastated to discover later that she is subsequently unable to have children. With a focus on continuities in reproductive racism, James Fitz Gerald understands “Cee’s involuntary sterilization as emblematic of mid-century eugenic practices that exposed black Americans, often women, to nonconsensual and nontherapeutic health interventions” and argues that *Home* “challeng[es] assumptions about eugenics as an exception or aberration in the otherwise progressive, forward march of medical science.”³⁵ Morrison’s exploration of exploitation in service of a fascination with wombs reinforces how health discrimination has often operated in the areas of sex and reproduction (sexually-transmitted-disease trials, sterilizations, maternal mortality, and so on) and has been shaped by racist myths about degeneracy, hypersexuality and hyperfecundity. The license to use marginalized women’s bodies for research, as illustrated by Dr. Beau, recalls Sims’s surgical trials in the era of slavery. Yet it also echoes the use of cells removed from Lacks’s cervix without her knowledge, the untreated syphilis sufferers of Tuskegee, and the “joke” about castration at the factory hospital in Ellison’s novel.

The imaginative and critical revisitation of medical mistreatment is developed further in *Home* through the introduction of Cee’s brother, Frank, fleeing from detention in a hospital for the mentally ill. Frank’s situation as a veteran of the Korean War, drifting and volatile on his return to civilian life, also provides an intertextual echo of the unhinged yet farsighted former servicemen who run out of control in the Golden Day episode of *Invisible Man* and gestures toward imperialistic US campaigns overseas. After a prefatory scene from the siblings’ southern childhood, *Home* opens in Seattle as Frank, bent on rescuing Cee, plans and executes his flight, “a barefoot escapee from the nuthouse,” as he puts it:³⁶

Fake a deep rhythmic snore ... Most important, the eyelids should not move and there must be a regular heartbeat and limp hands. At 2:00 a.m. when they checked to determine if he needed another immobilizing shot they would see the patient on the second floor in Room 17, sunk in a morphine sleep. If convinced, they might skip the shot and loosen his cuffs, so his hands could enjoy some blood.³⁷

³⁴ See Jean Wyatt on the parallels between Sims and Dr. Beau. Jean Wyatt, *Love and Narrative Form in Toni Morrison’s Later Novels* (Athens: University of Georgia Press, 2017), 157–58.

³⁵ Fitz Gerald, 141–42. See Washington, 202–4, on the so-called Mississippi appendectomy; and Fitz Gerald, 145, on the postwar escalation of sterilizations in “federally funded programs that targeted poorer women of color.” ³⁶ Morrison, *Home*, 11. ³⁷ *Ibid.*, 7.

Frank's position, bound and monitored on a bed, bears resemblance to the glass box treatment of Ellison's protagonist. Aside from his physical restraint, and control via sedation, once free and receiving shelter in the neighbouring Black community, he learns that he is "lucky": "They sell a lot of bodies out of there ... To the medical school."³⁸ While Cee's story involves a gendered discourse of investigation aiming to bring female bodies and reproductive functions within the sights and control of "science," Frank's experience extends the picture of a racialized medical order. A history of medical training on the corpses of those deemed mad or criminal here intersects with Black experiences of health and other institutions. Termed "the patient on the second floor in Room 17," Frank is both under surveillance and stripped of individuality and rights. The disturbing logic of what medical professionals do in the novel is summed up when the local preacher wryly explains that "doctors need to work on the dead poor so they can help the live rich."³⁹ Frank, though, succeeds in taking Cee for life-saving treatment from a community of female elders in their hometown, a group unanimous in their contempt for "the medical industry."⁴⁰ *Home*, *The Bluest Eye* and *Invisible Man* each examine definitions of the Black body and person as something to be used, looked at and looked into, often as a test subject or specimen, and draw out the associated power relations within racialized medical regimes. Here, however, damaging classificatory and clinical acts of seeing are met with those who counterfeit under surveillance (Frank), look right back (Pauline) and survive and grow (Cee), with multiple interior narrative perspectives refracting and undercutting such reductive views.

Across the selected writing of Ellison and Morrison, we find connections to and invocations of science fiction in the engagement with medical experimentation and institutions. Shared preoccupations with the decades of the mid-twentieth century draw on contemporary eugenics, racial violence and postwar scripts of modernity, but they also align with the heyday of the popular genre in the US. Meanwhile, use of interior and multiperspectival narrative modes works to pluralize viewpoints and centralize Black experiences in order to disrupt dominant discourses of America and progress. Indeed, the introduction of Dr. Beau as "no Dr. Frankenstein" in *Home* is quickly belied as Morrison implies an association between his eugenicist reading matter, his medical innovations and the recent past of Nazi abuses in

³⁸ Ibid., 12.

³⁹ Ibid., 12.

⁴⁰ Ibid., 122. *Home* to some extent perpetuates a rather straightforward opposition of Western medicine, representative of white male authority and associated with modernity, and African American folk wisdom and healing, associated with "nature" and tradition. This polarity is accompanied, though, by a layered, contextualizing history of biopolitics and Black medical disadvantage.

Europe and beyond. We are directed toward a science in which the racialized logic of Western forward movement and advancements in knowledge is taken to its furthest point, and thus uncovered, in that the unfit – those considered “backwards” and less than human – are to be used up, if not eradicated, in its service. *Home*’s brief, self-reflexive reference to Dr. Frankenstein and Mary Shelley’s 1818 novel *Frankenstein; or, The Modern Prometheus* implies the transgression of “natural,” religious, social and ethical boundaries by ambitious doctors and new science fiction technologies. Furthermore, bearing in mind that Victor Frankenstein harvests some of the body parts for his assembled creature from “the dissecting room,” *Home* also suggests a longer history of speculative modes critically addressing power relations and potentially exploring the stories of the marginalized.⁴¹ If the fiction examined here makes visible the perspectives of those experimented upon, then we will next see how the apparatus of defining and erasing is taken up in the parallel critical and counterfuture thrust of a range of artwork by Gallagher.

INSISTENCES IN GALLAGHER’S ART

What Gallagher names “the insistences” of her art offer an angle onto both its medical referentiality and an aesthetics of dense repetition combined with mutability. In interview, she discusses “the artificial schism between figuration and abstraction,” seeing her own work as taking up a historically informed dynamic encompassing the two.⁴² Elsewhere, Gallagher has been examined as bringing historical referents into the modernist “grid” (for example, vis-à-vis Rosalind Krauss).⁴³ Understanding this artistic approach helps us to consider the spectrum of her many works that tackle the promise of medical advancement and past abuses. This engagement with the medical is achieved via their titles (*An Experiment*), incorporation of archival text, trails of related symbols, or more overt representational depiction of health professionals and instruments. Such aspects are usually just one element in the wider scheme of the works in which they appear; for example, we find the iterative featuring and revision of a detail with historical and cultural

⁴¹ Mary Shelley, *Frankenstein; or, The Modern Prometheus*, 1831 ed., Project Gutenberg, at www.gutenberg.org/cache/epub/42324/pg42324-images.html. At the time, medical dissection relied on the cadavers of those deemed criminal.

⁴² Lyra Kilston and Quinn Latimer, “Ellen Gallagher: Creating the World She Longs For,” *Modern Painters*, 21, 2 (2009), 12.

⁴³ For more on this topic see Eleanor Heartney, “Ellen Gallagher: Mapping the Unmentionable,” in Eleanor Heartney et al., *After the Revolution: Women Who Transformed Contemporary Art* (Munich: Prestel, 2007), 252–73.

significance within a large-scale, multifaceted piece.⁴⁴ In Gallagher's monumental, grid-based "yellow paintings" from the first decade of the twenty-first century, nurses join a diverse cast of recurrent figures reproduced and reworked from her "archive" of mid-twentieth-century Black magazines.⁴⁵ Here, fantastical elements, as well as multiplicity and repetition, are intended to work against limited interpretations. Emphasizing process, whimsy and slipperiness, Gallagher warns of "a kind of one-to-one reading of the signs." Indeed, her approach to the politics of race is tied into the "mutability and moodiness to the signs" and, in form and method, "what insistences are made."⁴⁶

My concerns align Gallagher's iterative modes, and her investment in use of materials – like plasticine and penmanship paper – that will degrade, with the concept of "racial weathering" as found within recent discourses of race and health. To account for health disparities in the US, Arline Geronimus formulates the "weathering" hypothesis, which proposes that Black people experience early health attrition as a consequence of the cumulative impact of repeated experience with social or economic adversity and political marginalization.⁴⁷ Such "weathering" allows for understanding of a long temporality of damage and the incremental effects of racial orders, spotlighting social and structural factors. According to Geronimus et al., "The stress inherent in

⁴⁴ A multimedia artist of Cape Verdean and Irish American heritage, Gallagher creates artwork that addresses Black diasporic pasts involving slave ship crossings, ecological concerns, consumerism and US beauty ideals, thus spotlighting the delimiting modernity of the dominant social order. At the same time, her highly worked, often surreal pieces also make their own disruptive claims to an archive and futurity.

⁴⁵ The so-called yellow paintings, each consisting of over three hundred smaller images, make use of print material from lifestyle publications such as *Ebony*, *Our World* and *Black Stars* from the 1940s, 1950s and 1960s, magazines that Gallagher has collected and calls her "archive." Here she employs ink and cut-and-paste methods to create visual and written puns, making indirect commentary on mid-twentieth-century American aspirations. The nurse figure, with menacing cutout eyes, occurs at least five times in the yellow painting *Afrylic* (2004).

⁴⁶ PBS.org interview, Sept. 2005, republished by *Art21* as "'eXelento' and 'Deluxe,'" Nov. 2011, at <https://art21.org/read/ellen-gallagher-exelento-and-deluxe>. Gallagher comments, "people get overwhelmed by the super-signs of race ... What I think is more repeated than that, in the work, is a kind of mutability and moodiness to the signs," and that is where the political can be taken up. *Ibid.*

⁴⁷ Arline T. Geronimus, Margaret Hicken, Danya Keene and John Bound, "'Weathering' and Age Patterns of Allostatic Load Scores among Blacks and Whites in the United States," *Research and Practice: American Journal of Public Health*, 96, 5 (2006), 826–33, 826. Geronimus's weathering hypothesis is backed up by subsequent research examining allostatic load scores, seeking to understand "early health deterioration in Black people in the US, as measured across biological indicators of repeated exposure and adaptation to stressors." Geronimus et al., 826.

living in a race-conscious society that stigmatizes and disadvantages” some groups “may cause disproportionate physiological deterioration, such that a Black individual may show the morbidity and mortality typical of a White individual who is significantly older.”⁴⁸ This difference runs across all age groups and is not accounted for by the factor of different poverty rates. The everyday toll taken on working, ailing and ageing Black bodies finds representational space in Gallagher’s art, while “racial weathering” in the sense of wear and cumulative stress loads is also catalyzing when thinking of her labour-intensive, iterative formal methods. In the following, I will examine the critical valences of Gallagher’s *DeLuxe* grid work (Figure 1), giving close attention to a selection of the prints within it in terms of “what insistences are made.”

Gallagher has several times explained how her preoccupation with the figure – or sign – of the nurse is informed by a fascination with Eunice Rivers. As an African American nurse involved in the Tuskegee syphilis experiment, Rivers’s role was partly to obtain and maintain the test subjects’ trust. As already discussed, these men were not told of their participation in the experiment to track the long-term effects of syphilis, or offered any treatment for the disease, even after the cure of penicillin was known. For Gallagher, Rivers’s medical career, commitment and pride symbolize aspiration and social mobility. At the same time, her defense of a programme that allowed prolonged suffering and further spread of disease, and assumed the expendability of Black life in the service of (white) scientific learning, makes her a complex, complicit figure. This tension informs the ambivalent and sinister aspects of many of the nurses in Gallagher’s art, although, as the discussion below unfolds, a destabilizing element of humour or surreal play is also often present.⁴⁹

DeLuxe (2004–5), which consists of a grid of sixty individually framed, collaged prints, foregrounds nurse images by reworking advertisements for practical nursing courses. These are drawn from Gallagher’s archive of mid-century lifestyle publications such as *Ebony* and *Black Stars*. Recalling Rivers, these promotions advanced a desirable image of professionalism (always featuring a crisp white uniform), respectable femininity, steady income and affordable at-home training. In the grid works, the nursing advertisements shape a cumulative picture of potential self-improvement, success and contribution. At the same

⁴⁸ Geronimus et al., 826, 830.

⁴⁹ Further associations are revealed by interview reference to the popular 1970s television show with an African American female lead, *Nurse Julia*: “The nurse could refer to Julia the nurse and the sort of idealized professional woman of the ’60s. That’s Dianne Carroll as Julia, and to think of Julia as sort of doubling as Eunice Rivers just kind of cracks me up.” Interview, PBS.org, Sept. 2005, republished by *Art21*, Nov. 2011, “Ellen Gallagher: Characters, Myths and Stories,” at <https://art21.org/read/ellen-gallagher-characters-myths-and-stories>.



Figure 1. *DeLuxe*, 2004–5, Ellen Gallagher. Tate, purchased 2006. © Ellen Gallagher. Photograph: Tate.

time, adjacent material sourced from the same magazines touts cures for physical ailments such as corns, headaches, nervous stomachs, bad backs and so on. This both draws attention to the wear on, and pains of, the labouring, implicitly Black, body, and suggests a link between well-being and commodity, between economic buying power (that is, wealth) and good health. The appeal of the training advertisements' promissory images is undercut by awareness of health inequality and the entanglement of medical institutions in wider narratives of progress and profit. The mix of historical referents, via Rivers of Tuskegee and promotions peddling health cures and career paths to “uplift,” ensures that the nurse accrues a dense set of meanings, which speak to Gallagher's critical take on capitalist modernity.

Of the sixty units in *DeLuxe*, five make explicit visual or textual reference to nursing opportunities or the Tuskegee experiment, while others include advertising material relating to remedies for problems such as a “delayed period,” bad skin, weight gain and piles. Excisions from and additions to the nursing advertisement reproductions undermine messages of gaining prestige, respect or financial security that were targeted at a Black, female readership for whom most formal training and career development were beyond reach. A playful defamiliarization operates in the print headlined “Fill out the coupon above and I will rush to you.” The full page is taken up by a promotion for a home-learning course and the main illustration of an efficient-looking nurse, pen and paper in hand, is dominated by an inked-in pair of oversized,

pointed and high-heeled black boots. These are incongruous with the nurse's practical look and more than anything else suggest witch's boots.⁵⁰ The print "Make Negro a Day and More!" shows a smiling uniformed woman at the top left as well as collaged Black hairstyles and surreal invading inked-in jellyfish. In a further advertisement within *DeLuxe* (taglined "Enjoy steady pay every day as a nurse") (Figure 2), course completion is described as a "symbol of success," the business's name has been amended to the "Vanishing School of Nursing," and in the fine print the word "free" has been left visible while the words around it have been obliterated.⁵¹ The page's coupon has been doctored to introduce the promotion of drugs to relieve pain, with this space being filled with white pills in relief and its caption reading "Mail coupon today for PAIN." The pairing of an aspirational nurse image with claims of pain relief or cure for common complaints extends the engagement with discourses of well-being, capital and exploited bodies. Although modified in different ways, Gallagher's practical nursing course promotions help to make each other legible across artworks, pointing to an alluring yet bankrupt promise. The peddling of cheap remedies in the magazines, and Gallagher's recycling and repeated adaptation of such print matter in her art, resonate with a context of circumscribed lives and weathering bodies. There is both the suggestion of quackery and a summoning up of the health disparity and economic bind of those who feel the painful effects of manual and domestic labour, those who can afford neither time off nor a doctor's care when unwell. This, along with Gallagher's nonprogressive mode of iteration and return, speaks eloquently, and with subversive visual impact, to the stresses and health attritions of racial weathering.

The attention to suffering bodies finds a parallel in the recollection of a lifetime of toil and commonplace pain by Black women elders in Morrison's *The Bluest Eye*. As a child, Cholly, Pecola's father, overhears his Aunt Jimmy's friends find a way to share and deal with such a physical toll: "They ... clucked their tongues in fond remembrance of pains they had endured – childbirth, rheumatism, croup, sprains, backaches ... All the bruises they had collected from moving about the earth – harvesting, cleaning, hoisting, pitching, stooping, kneeling, picking – always with young ones underfoot."⁵² In relation to the small, plasticine relief work *Esirn Coaler* (2007), Gallagher explains, the presentation of an assortment of words with health associations

⁵⁰ Other modifications include the whitening out of much of the fine print to leave just odd words such as "opportunity" and "independence," and assembled phrases ("But the important thing is to get FREE FREE FREE"), which mock the promises of the original text.

⁵¹ The eerie effect of the main pictorial representation is heightened when we notice that the smiling nurse is holding a second miniature version of herself, like a homunculus, in her gesturing hand.

⁵² Morrison, *Bluest Eye*, 107.



Figure 2. Detail from *DeLuxe*, 2004-5, Ellen Gallagher. Tate, purchased 2006. © Ellen Gallagher. Photo: D. James Dee.

creates an “endless litany of ailments [that] suddenly come into sharp focus as the pains ... of people working. Toiling at work that required them to use their bodies as machines.”⁵³ A sense of bodies weathered and used up is

⁵³ Email from Ellen Gallagher to Tate curator Rachel Taylor, 5 Oct. 2007, Tate Gallery Records. Quoted by Alice Sanger, commentary for *Esirn Coaler* on the Tate website, Dec. 2009, at www.tate.org.uk/art/artworks/gallagher-esirn-coaler-t12508. *Esirn Coaler* features the line “The following is copied from an experiment of unusual opportunity,” thus

pressed here, echoing the women in *The Bluest Eye* “constant in the recitative of pain” and correlating with the callousness exhibited toward the pain felt by both Pauline in childbirth and the invisible man while undergoing experimental treatment.⁵⁴ Gallagher’s insistent invocation, via reworked magazine advertisements, of a marked and suffering Black body in service to dominant society and its future visions, like the fiction, functions to show medics and medical science not as remedial but as constitutive of this order.

The grid unit “Super Strut Afros” extends and varies Gallagher’s artistic response in *DeLuxe* with the superimposition of an illustration and bold red modern type taken from a 1970s advertisement for wigs for men onto a “vintage news report on the Tuskegee experiment.”⁵⁵ The contrast between the promissory marketing of a reinvented Black male image, suggesting style-setting, youth and attractive masculinity, and the use of, and damage done to, the men of Macon County, Alabama is stark. The faint, small-print backdrop of “Super Strut Afros,” a report about survivor Charles Wesley Pollard, recalls unrecognized suffering and African American lives seen as disposable.⁵⁶ Gallagher thus overlays and juxtaposes discourses that either cast Black men as cool, up-to-date consumers, or render them diseased and “backwards,” part of a sacrificial group whose pain matters less. This overlaying captures tensions within the 1970s moment, when the story of Tuskegee was breaking in the national media and legal action saw depositions from survivors such as Pollard. The print’s palimpsest of fading paper, devastating text and a configuration of smiling faces turned toward the viewer also directs us on to the ensuing consideration of acts, technologies and signs of looking.

Gallagher’s grid works vary, yet, as *DeLuxe* demonstrates, they combine what the artist terms “mutability” and “insistences.” Repeated emphasis on historic medical abuses and the toll on and pains of Black bodies – via fragments of text, surreal nurse figures, and advertisement layouts and modifications – parallels the enquiry into racialized health injustice, suffering and experimental use in the fiction of Ellison and Morrison. This thematic focus, but also formal recurrence and slippery revision, suggests the falsehood

anticipating the 2008 work in its Tuskegee reference. Gallagher describes Coaler as a fictional character devised to function as “a witness to the abolition of pain.” *Ibid.*

⁵⁴ Morrison, *Bluest Eye*, 107.

⁵⁵ Heartney, “Ellen Gallagher,” 265.

⁵⁶ Up close it becomes clear that the Tuskegee-related text has also been modified to occasionally feature words in a larger font, words such as “opportunity,” “spirochetes travel” and “Quick Cure.” Opportunity once more echoes the phrase “an experiment of unusual opportunity,” while the magnification of the scientific term “spirochete” references the spread of syphilis, the spirochete being a spiral-shaped type of bacteria linked to syphilis and other conditions.

of proliferating aspirational promotions and the felt force of cumulative health deterioration or racial weathering.

TECHNOLOGIES OF LOOKING AND THE ARTWORK AS “MEMORYSCOPE”

In *Home*, Dr. Beau’s invention of instruments to facilitate seeing into the female body links racialized medical abuse not only with sight but also with the tools, technologies and frames through which we look. Similarly, as the following analysis explores, Gallagher’s art features scopes, scales and self-conscious references to learnt visual schemes that can be connected to its engagement with histories of experimentation. In this final section, I first return to critical enquiry that has spotlighted biomedical exploitation to aid in my understanding of the invocation of scientific optics within Gallagher’s art, as subject but also via aesthetic mode. I concentrate on her Watery Ecstatic series, including *Bird in Hand*, and then adopt Ross Gibson’s term “memoryscopes” to limn the activating possibilities of artworks and literature themselves. According to Gibson, through “the historically informed imagination,” such “memoryscopes” focus the vestiges and forces of the past in a dynamic, speculative way, animating them in the present.⁵⁷ That is, works of fiction and art – as memoryscopes – combine creative and aesthetic potentialities with a form of historical “forensics.” This process offers a further means of conceptualizing Gallagher’s inventive, compelling returns to racist experiments and her dramatization of scopic questions.

Jason Glenn’s scholarship offers both a long-range historical overview of medical experimentation that has rested on the dehumanization of particular groups, and an approach informed by accounts, such as Michel Foucault’s, of the development of the “clinical gaze.”⁵⁸ Like Washington, Glenn points out how test subjects were often institutionalized; those in prison, asylums and mental hospitals, and sometimes the enslaved, have been “deemed legitimately exploitable persons for research.”⁵⁹ Significantly, his intervention arises from

⁵⁷ Ross Gibson, *Memoryscopes: Remnants Forensics Aesthetics* (Crawley: University of Western Australia, 2015), 19.

⁵⁸ Glenn draws on Foucault’s charting of the rise of the “bio-power” of the state and expert knowledge that distinguished a “normal” body from a pathological one in *The Birth of the Clinic* (1973). For Foucault, “Man” becomes an object of specialized study in the early nineteenth century in the West, leading to “the development of the ‘clinical gaze’ – a new mode of perception based on the reconceptualization of ‘Man’ as a purely biological being.” Jason Glenn, “Dehumanization, the Symbolic Gaze, and the Production of Biomedical Knowledge” in Jason Ambrose and Sabine Broeck, eds., *Black Knowledges/Black Struggles: Essays in Critical Epistemology* (Liverpool: Liverpool University Press, 2015), 112–44, 114.

⁵⁹ *Ibid.*, 113–14.

the (de)construction of the detached observer or biomedical investigator in particular. Glenn delineates the production of “the impersonal detachment of the biomedical investigator from the persons whom they studied” and “a dehumanized body of biomedical knowledge,” able to recognize biological imperatives but rarely social and structural determinants of health.⁶⁰ Drawing on Sylvia Wynter, he argues for the emergence of a certain *genre* of man – correlating with “the ‘impoverished’ bio-centric conception of what it means to be human” – which allows the use of dehumanized persons in this way.⁶¹ This frame brings heightened awareness of what is entailed in Gallagher’s reference and recourse to scientific optics. Glenn also examines the activities of the Public Health Service beyond US borders and is alert to neocolonial dynamics, posing the production of biomedical knowledge in the twentieth century as an inseparable part of “US colonial and military endeavors.”⁶² The linking of these racialized and global structures of power and histories of biomedical research by Glenn further contextualizes artistic engagements with past medical abuse, as well as specifically bringing to the fore the significance of the dispassionate, uninvolved doctor or researcher and associated scopic regimes.

Gallagher’s *Watery Ecstatic* series (2001–present) suggests alternative worlds and revisits science fiction tropes via a fantastic marine imaginary, while also addressing scientific orders and optics. Gallagher’s preoccupation with aquatic environments and organisms in the series draws on the realm of Drexciya, a mythical Black aquatopia, inhabited by the mutated descendants of those who went overboard during the Middle Passage across the Atlantic from Africa, and invented by a group of Detroit techno musicians in the 1990s. While the artist’s interest in this speculative narrative of survival and diasporan adaptation is well charted, less often considered is the influence of marine biology and natural-history illustration on her aesthetic in these works. Indeed, her detailed watercolours of strange-looking marine life (fish, seaweeds, crustaceans, jellyfish) show the influence of her time drawing specimens for the Sea Association.⁶³ Significantly for my focus on visual formations, despite the otherworldliness of the paintings, they are delicately observed and

⁶⁰ *Ibid.*, 115–16.

⁶¹ *Ibid.*, 113.

⁶² *Ibid.*, 130. Glenn’s history includes the deliberate infection of nearly 1,500 prisoners, orphans, soldiers and people with disabilities with STDs by the US Public Health Service in the 1940s in Guatemala. He observes a twentieth-century focus of resources on causes, vaccines and treatments for the diseases that “most drastically affected American war efforts and international shipping commerce.” For example, there were initiatives to tackle the fact “that syphilis and gonorrhoea were sidelining thousands of US soldiers” during World War II. *Ibid.*, 130–33.

⁶³ As a student, during a semester aboard an oceanographic research vessel, Gallagher began “researching the migratory patterns of pteropods, collecting and documenting the specimens

appear to be naturalistically precise. These characteristics, along with the catalogue-like extent of the series, suggest what exhibition notes call a kind of alternative “natural history project.”⁶⁴ Such an undertaking critically invokes practices of collecting, categorizing and labelling that simultaneously advanced science in earlier periods and were (and are) inextricable from colonial and “modern” projects. Gallagher’s visual world here captures a menagerie of marine life, with its representational mode returning us to the detached scientific observing gaze and an optical power that has enacted violence against its subjects elsewhere.⁶⁵

One particular Watery Ecstatic artwork deepens the engagement with scopical enquiry, linking instruments for looking back to racial schemes. The standout piece *Bird in Hand* (2006) (Figure 3) offers a rich seascape via a monumental canvas that unites Gallagher’s aquatic world with motifs of a damaging modern order and details that call up disturbing medical histories. The work measures 238 by 307 centimetres, with a highly layered and encrusted surface. It is dominated by a pirate figure, whose body is emerging from and melding with the roots, kelp fronds and marine organisms that surround him. The proliferating mass of his Afro is made up of cell-like nodules that incorporate more modified magazine material. Among other things, these miniature collaged details contain fragments of advertisements for hair and skin products and two streamlined, modern trains, which implicate a culture of technology and consumption, reflecting a society shaped around progress for some, not all. The bubbles closest to the pirate figure’s face are larger

under a microscope.” Freud Museum London, webpage for the summer 2005 exhibition Ichthyosaurus, at www.freud.org.uk/exhibitions/ellen-gallagher-ichthyosaurus.

⁶⁴ Carol Armstrong, “Ellen Gallagher: Mythopoetics and Materials,” in *AxME* (London: Tate, 2013), 22–31, 23.

⁶⁵ According to Karen Alexander, “Gallagher’s fascination with marine biology ... has given her a discourse for her taxonomic art.” Karen Alexander, “A Challenge to History: Ellen Gallagher’s Coral Cities,” in *Coral Cities* (London: Tate Publishing, 2007), 71–78, 72–73. Intersecting with these concerns and the Watery Ecstatic series, when Gallagher devised a 2005 site-specific exhibition in the Freud Museum, London, she placed specimen jars in amongst Freud’s collections as well as showing her own new work. These interventions were intended to make visitors aware of Freud’s formative interests, including research at the marine zoology laboratory in Trieste. According to the museum website, “Gallagher’s two [film] projections ... reflected collecting and categorisation as both an illuminating and constricting methodology ... that often resulted in a kind of captivity for both the subject and the observer.” While not part of a medical discourse specifically, the “methodology” of collecting and fixing, the optical technology of specimens held behind glass, relates nonetheless to scientific observation and modern forms of knowing, Freud Museum London, Ichthyosaurus webpage. See also Suzanna Chan, “Astonishing Marine Living: Ellen Gallagher’s *Ichthyosaurus* at the Freud Museum,” in Griselda Pollock, ed., *Visual Politics of Psychoanalysis: Art and the Image in Post-traumatic Cultures* (London: I. B. Tauris, 2013), 102–15.



Figure 3. *Bird in Hand*, 2006, Ellen Gallagher. Tate, presented anonymously 2007. © Ellen Gallagher. Photo: Mike Bruce.

and appear against a black background, with the density of images and of the dark tones decreasing as the hair spreads out, increasingly looking jellyfish-like. In the larger nodules we find headlines and bits of promotional text.⁶⁶ Partially blacked-out inset images show corsets, hair models and jewellery. These, like the text, suggest a commercialization of particular beauty ideals, an elevation of certain visions of success, and the false promises of US culture and society in general. While not a grid work, Gallagher's recapitulation here of a large-scale scheme with telling details contained within myriad smaller units demands a zooming in and out, and enables the unfolding of multiple concerns and historical and cultural references. An openness or mutability can also be identified in the way *Bird* could depict a shape-shifting pirate trickster, a prosthetically enhanced cyborg figure, a revised Captain Ahab, an adapting Drexciyan slave ship survivor, a Cape Verdean maroon or all of these at once.

Commenting on her relation to the Drexciya myth, Gallagher cites both "ideas of regeneration" and the weight of "black bodies cannibalised by a

⁶⁶ Sometimes just single letters have been left visible (for example, "o" and "e" in keeping with other works) or isolated fragments can be distinguished: "Sex Education," "money," "Glamour," "Frederick of Hollywood."

racial capitalism and its scientific jaws.”⁶⁷ Certainly *Bird in Hand* introduces images of a dominant modernity that is entangled with racial hierarchy, including biopolitical mechanisms stacked against Black health and survival. Significantly, some of the Afro details reveal Black body parts, such as hands, being examined through magnifying glasses (Figure 4). In the framework I have established, these atomized hands work once again to recall suffering and an objectifying, detached medical optic. As Glenn rehearses, “the new ‘clinical gaze’ necessitated new objects of focus that could be opened, explored, and experimented upon to understand the biological laws that dictated how they worked and to discern the normal object from the pathological one.”⁶⁸ This trajectory can be extended in the mid-twentieth century to a profitable biomedical research industry and what Gallagher calls “racial capitalism and its scientific jaws.” In a set of paired, almost adjacent, cell images, two Black hands are observed, the magnifying glasses showing skin marked by boils, lesions or scars. Here, body parts are viewed in isolation, subject to scrutiny through the glass implement but also through the rim of the individual bubble that contains and frames the small image within the larger artwork. The examination of damaged skin directs us back specifically to the raft of experiments on prisoners under dermatologist Kligman at Holmesburg Prison, as introduced earlier. Alongside this, the decision to include the particular object of a magnifying glass insists that we recognize tools and technologies for looking: lenses, slides or jars for holding specimens, instruments for seeing into.⁶⁹ It once more invokes the scopic power that immobilized Ellison’s invisible man in a glass box, that in *The Bluest Eye* rendered Pauline less than human during her hospital labour, and that sought access to the recesses of Cee’s body in *Home*.

Gallagher’s address to a clinical and scientific gaze, figured explicitly through the magnifying glasses, aids comprehension of the way in which her work thematically engages such racialized medical encounters. It also offers a

⁶⁷ Robin D. G. Kelley, “Confounding Myths,” in *AxME*, 8–20, 18.

⁶⁸ Glenn, 115.

⁶⁹ *Bone-Brite* (2009) goes further in representing a medical imaging instrument. This painting depicts a male radiographer operating an X-ray machine and a patient, whose skeletal structure shows up bright white, as in an X-ray image. After their discovery early in the twentieth century, X-rays were quickly harnessed as a new technology for seeing into the body for medical purposes. Gallagher’s *Bone-Brite* thus brings together advancement in techniques for imaging, examining and reading the body, with the figure of a brown-skinned medic. On “the rich visual culture that is an integral part of medical practice itself: scans, x-rays, clinical charts and diagrams” see this discussion of “the art–medicine nexus”: Ludmilla Jordanova, “Medicine and the Visual Arts,” in Victoria Bates, Alan Bleakley and Sam Goodman, eds., *Medicine, Health and the Arts: Approaches to the Medical Humanities* (Abingdon and New York: Routledge, 2014), 41–63, 44.



Figure 4. Detail from *Bird in Hand*, 2006, Ellen Gallagher. Tate, presented anonymously 2007. © Ellen Gallagher. Photograph: Tate.

prompt for recognizing how the use of scale in her visual fields – drawing the eye to repeated microscopic detail within bigger works or confusing scale in a potentially estranging way – might be a formal confrontation with technologies and habitual modes of looking. In *Bird in Hand*, viewers are brought to awareness of their act of peering in and “reading” small features, with a reflexivity about the optics and possible politics involved in such engagement. The rims of the Afro cells are built up in relief from cut and pasted paper layers and silver paint, adding a sense of depth or even of looking through apertures, which itself summons up apparatus for magnification or seeing into.⁷⁰ Once we are up close, the obliterations to redact some nodule details serve to undercut the aspirational magazine images, and the modified text captions

⁷⁰ Alan Rice also notes the hands and engagement with a “scopophilic gaze.” Alan Rice, *Creating Memorials, Building Identities: The Politics of Memory in the Black Atlantic* (Liverpool: Liverpool University Press, 2010), 198.

sometimes bring ironical juxtaposition and playfulness. For example, where in one image just the letters “AI” have been left legible, due to typographical spacing the eye skips to read the word “PAIN,” recalling the grid work *DeLuxe*, which features pain remedy advertisements within a wider frame of health injustice signalled via reference to Tuskegee. *Bird* returns us to insistences, and a magazine archive, that critically invoke dominant white and material US culture, and concomitantly damaging scripts of advancement and modernity. Yet it also engages with lenses – in terms of direct representation of magnifying glasses and formal choices of relief cells or apertures, which contain within small details for observation – summoning up a medical optic and its supporting, shaping technology.

The suggestion of examination, magnification and the microscopic returns us to the painting *An Experiment of Unusual Opportunity*. This image, with which I began, is looming, textured and dark. It continues to resist easy interpretation in narrative, representational and scalar terms. This remains the case even after we recognize the source of Gallagher’s title, a title that calls up a professional medical view of a rare, relished opportunity for observation and learning. *An Experiment* is made up of inked and painted thin paper strips, inlaid like parquetry, and some lighter areas of this layering reveal faint text, taken from doctors’ reports from the Tuskegee trial. Yet, for the most part, these are illegible, with the chief overall effect of the work being an impression of menace and disorientation. Of the octopus-like mass that fills the canvas, we are left to speculate: enlarged slide specimen? Monstrous life-size creature of the deep? Decaying organic matter? This unnerving difficulty of categorization perhaps speaks to a reaction of distress at the suffering of those infected with syphilis or at the implied horrors of unchecked experimentation and licensed exploitation, but such responses are also related to the way the image estranges a sense of scale. Gallagher offers here not a combination of the miniature and the monumental, as in her grids or *Bird in Hand*, but a scale that further disrupts our learnt practices of viewing. If the Tuskegee scientists were “myopic” – Kate Forde describes them as “morally myopic doctors who viewed the patients in their care not as sick people but as clinical material”⁷¹ – then in this work (and others) Gallagher frustrates, imposes and demands a refocussing. She encourages a confrontation, both stark and subtle, with modes of seeing and the very premise of “unusual opportunity.”

In moving toward a conclusion, I find facility in Gibson’s proposition of the potential of art and literature for dynamic remembrance and creative

⁷¹ Kate Forde, review of the exhibition *An Experiment of Unusual Opportunity – Everybody’s Got a Little Light under the Door* at South London Gallery, *Frieze*, 124 (1 June 2009), at <https://frieze.com/article/ellen-gallagher-o>.

animation of history in the present. Looking at “vestige work” in a context of incompleteness, discontinuity and “aftermath-culture” (in his case, post-colonial Australia), Gibson reflects, “I think of the work one can do with a memoryscope as a process that is simultaneously aesthetic and forensic.”⁷² The “memoryscope” or artwork operates to focus the past via a historically informed starting point or method, but also imaginative speculation. This process not so much restores a past as activates it in the now. Such understanding is incisive in capturing what emerges from Gallagher’s inventive, multi-modal, deep-running turn to historic racialized medical abuse and the structures and scripts that enabled it. Gibson values creative processes in which “historical dynamism can be identified and dramatized aesthetically in ways that activate clues found in archives, artefacts, landscapes,” clues ready for “an imaginatively forensic treatment.”⁷³ Not only does this resonate with Gallagher’s insistent, evolving use of her own print matter archive; her cast of mobile, recurrent figures, phrases and signs; and the fictionalized, perspectivist revisitation of past medical experimentation by Ellison and Morrison. The term “memoryscope” calls back the scopic also. It reminds us of the self-reflexive incorporation of powerful technologies of looking in the works considered, but also potentially opens up a different relation to scopes. This relation is not one tied up with the dehumanization of those on the margins and deemed expendable; rather, its speculative and critical reenvisioning allows us to keep seeing, feeling and examining anew.

My starting point has been a dense historical referentiality found in literary texts and artworks – in terms of Sims, Tuskegee, Rivers, Holmesburg and so on – that functions to highlight and interrogate the place of the medical and scientific in wider projects or narratives of progress. In novels by Ellison and Morrison historic medical discrimination and exploitation are invoked to speak to America’s racist orders and enduring pasts, including preoccupations with the particular “modern” moment of the postwar decades. Gallagher’s work, too, layers, juxtaposes and repeats health-related referents in a way that rewards the kind of attention given here, drawing out lines of connection between aspiration, scientific advancement, worn and suffering Black bodies, and a biopolitics underpinned by both racial supremacy and capitalist imperatives. Just as Nelson sums up that “minority groups were underserved by the medical establishment and overexposed to that establishment’s racial research,” so my material probes a dynamic both of temporal delay or disparity, and of servicing the enhanced futures of others.⁷⁴ The telling historical points of reference are not reached for in a straightforward or linear manner, though; rather, multifaceted fictions reveal complex entanglements

⁷² Gibson, *Memoryscopes*, 13, vi.

⁷³ *Ibid.*, vi.

⁷⁴ Nelson, *Body and Soul*, xiii.

of prejudice, institutions and experience, and artworks resistant to easy readings require us to trace insistences, attritions and forms of critique emerging from playful, surreal modifications and formal combinations that begin to unravel dominant scripts. These examples share an engagement with science-fictional modes and intertexts as they revisit the past and future as previously told, but, more broadly, they also work via “forensic” and imaginative capacities, backing Gibson’s case for memoryscopes that such “historically informed speculations are vital because they vault over silence, denial and absence.”⁷⁵

The part played by acts of, and technologies for, looking has been especially central to my approach to the taking up of historical health disparity and medical abuse. Within a wider field of visual politics and race, the harm done by dominant beauty ideals in *The Bluest Eye*, or the narrator’s conscription within various spectacles for the entertainment and elevation of white people in *Invisible Man*, might come to mind first. Nonetheless, this enquiry’s focus on scientific optics that dehumanize and, in a medical and research context, categorize some as disposable helps locate various such visual regimes as mutually constitutive. Further, as Afrofuturism has clarified the definition of Black people as foils to modernity and future-oriented temporalities, here critical purchase is found in fictional narratives involving a medical gaze that sees “unusual opportunity,” or in artistic palimpsests that overlay the promissory images of the US with figures or textual fragments that recall both racial weathering and the optical frames that have enabled devastating experimentation. I have not only identified scopic concerns in thematic engagements, but also in formal choices, including in the use of multiple, complicating narrative perspectives, and in a newly shaped understanding of Gallagher’s deployments of scale, detail and the aesthetics of scientific observation. If Eshun calls for “futurisms [that] adjust the temporal logics that condemned black [people] to prehistory,” the works brought together here offer potent responses to such uneven futures and, even more compellingly, imaginative and critical activations of refocused pasts.⁷⁶

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⁷⁵ Gibson, 24.

⁷⁶ Eshun, “Further Considerations in Afrofuturism,” 297.

contemporary African American fiction and visual art. The author is indebted to Dr. Arya Thampuran for her transformative research on Black health and literature, in this instance especially her deployment of the frame of “racial weathering.” I thank her and other friends and colleagues for both the shared dialogue and their support. Acknowledgements and thanks are also due to Ellen Gallagher and the Tate for permission to reproduce the artworks included here.