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Gender, Trauma and Disability: Gallery Reflection
March 2022

Examining Norman Klenicki's virtual exhibit, *Experience, Integration, Expression: The Work of Norman Klenick*i, for our class has been especially enriching in exploring the intersections of disability studies, mental health, and creative expression as a form of healing work. Building upon my prior Gallery Reflections, I felt especially drawn to the section titled "Depression," and the ways in which Klenicki used art to capture the hopeless, desperate feelings evoked by depressive episodes and long-term depression as well as the section, Mania that focused on the manifestations of mania that came with his diagnosis of bipolar disorder.

In Western medicine, when diagnosed with a mental illness, oftentimes the treatment is very clinical. Psychiatric medicine is prescribed, and some form of therapy is recommended. For more serious situations, both inpatient and outpatient programs are the solution. The goal is to get the patient to a point where they are functioning members of society again, and able to participate in capitalist production and not necessarily to work towards healing inner traumas or explore feelings in a non-clinical manner. I personally have found some success in typical psychiatric care for my diagnoses of complex Post Traumatic Stress Disorder, Borderline Personality Disorder, and obsessive-compulsive disorder, and have been on various types of medication and participated in many types of therapy including Dialectical Behavioral Therapy (DBT), Cognitive Behavioral Therapy (CBT), and Eye Movement Desensitization and Reprocessing Therapy (EMDR). Although I cannot deny the benefits of research-based, Western approaches to coping with mental illness, these solutions are not as foolproof as experts would like individuals to believe. I have found a lot of healing in more unconventional approaches including through art, community, and exploring generational traumas.

Within his artwork, Klenicki explores similar unconventional modes of coping with and healing from mental illness. Although he is prescribed medication for his bipolar disorder, he also

uses his art as a method of release and exploration in regard to mental health. Each of the sections of the exhibit intentionally prioritizes a different aspect of his struggles and although his art maintains similarities throughout, it is very clear that each topic provokes varying emotional responses and reflections.

The section titled Depression features pieces that feel heavy and include primarily darker color palettes, with the inclusion of bursts of red and orange that invoke feelings of anger that are associated with the trials of depressive episodes. He uses the contrast of light versus dark in his work to express the fluidity and range of such feelings and the struggles he must reach lighter parts of himself. Although abstract, many of the paintings feature figures and body parts such as a pair of hands or faces to solidify Klenicki as the subject of the piece.

The section Mania highlights some of the tensions that occur using art and creative expression as a form of coping. The pieces in this section are much more stimulating and showcase a range of colors and forms. Although putting some of the rage and energy Klenicki experienced onto a canvas may have helped as an outlet for the chaos happening within his mind, the pieces also captured the desires he felt to slow down and be able to calm his mind.

Despite the usage of art in some clinical settings through certified art therapists, oftentimes creation is not seen as a key aspect of coping or healing. Norman Klenicki and his work that explores the turbulence of his bipolar disorder, as well as the effects of his intergenerational trauma serves as a marker of the power of expression and having an outlet. Not only does this work allow for release for the artist himself, but it also creates an archive of works that allow other people struggling with mental illness to see their own struggles in and find some sense of community.

Western medicine's hyper-focus on diagnostic boxes and medication is directly tied to capitalism and the pharmaceutical industry. Other forms of healing being centered through mental health treatment and prioritized in conjunction with more typical treatment plans would be highly beneficial, especially for those with more extreme mental illnesses. Acknowledgment of the effects

of intergenerational trauma, especially in populations affected by genocide and colonialism is another key component of creating mental health care that is focused more on long-term healing and community building rather than short term care that is solution focused and aims to “fix” the symptoms of mental illness.