
–Rumi
FOR ALL WE CARE

Reconsidering Self-Care
In the 1980s, as she struggled with cancer, Audre Lorde asserted that caring for herself was “an act of political warfare.” Since then, self-care has become a popular buzzword in activist circles. The rhetoric of self-care has moved from specific to universal, from defiant to prescriptive. When we talk about self-care today, are we talking about the same thing Lorde was? It’s time to reexamine this concept.

But what could be wrong with care? And why, of all things, pick on self-care?

For one thing, because it has become a sacred cow. It’s painful to hear people speak sanctimoniously about anything, but especially about the most important things. Pious unanimity implies a dark side: in the shadow of every church, a den of iniquity. It creates an other, drawing a line through as well as between us.

Self and care—in that order—are universally acknowledged values in this society. Anyone who endorses self-care is on the side of the angels, as the saying goes—which is to say, against all the parts of us that don’t fit into the prevailing value system. If we wish to resist the dominant order, we have to play devils’ advocate, searching out what is excluded and denigrated.

Wherever a value is considered universal, we find the pressures of normativity: for example, the pressure to perform self-care for others’ sake, keeping up appearances. So much of what we do in this society is about maintaining the image that we’re successful, autonomous individuals, regardless of the reality. In this context, rhetoric about self-care can mask silencing and policing: Deal with your problems yourself, please, so no one else has to.
Assuming that self-care is always good means taking for granted that *self* and *care* always have the same meaning. Here, we want to challenge monolithic and static understandings of selfhood and caring. Instead, we propose that different kinds of care produce different kinds of self, and that care is one of the battlefields on which social struggles play out.

**Dont Tell Me to Calm Down**

Though advocates of self-care emphasize that it can look different for each person, the suggestions usually sound suspiciously similar. When you think of stereotypical “self-care” activities, what do you picture? Drinking herbal tea, watching a movie, taking a bubble bath, meditating, yoga? This selection suggests a very narrow idea of what self-care is: essentially, *calming yourself down*.

All of these activities are designed to engage the parasympathetic nervous system, which governs rest and recovery. But some forms of care require strenuous activity and adrenaline, the domain of the sympathetic nervous system. One way to prevent post-traumatic stress disorder, for example, is to allow the sympathetic nervous system enough freedom to release trauma from the body. When a person is having a panic attack, it rarely helps to try to make them calm down. The best way to handle a panic attack is to *run*. 
So let’s start by discarding any normative understanding of what it means to care for ourselves. It might mean lighting candles, putting on a Nina Simone album, and rereading Randall Jarrell’s *The Animal Family*. It could also mean BDSM, intense performance art, mixed martial arts fighting, smashing bank windows, or calling out a person who abused you. It might even look like really hard work to other people—or ceasing to function altogether. This is not just a postmodern platitude (“different strokes for different folks”), but a question of what relationship we establish to our challenges and our anguish.

Caring for ourselves doesn’t mean pacifying ourselves. We should be suspicious of any understanding of self-care that identifies wellbeing with placidity or asks us to perform “health” for others. Can we imagine instead a form of care that would equip each of us to establish an intentional relationship to her dark side, enabling us to draw strength from the swirling chaos within? Treating ourselves gently might be an essential part of this, but we must not assume a dichotomy between healing and engaging with the challenges around and inside us. If care is only what happens when we step away from those struggles, we will be forever torn between an unsatisfactory withdrawal from conflict and its flipside, a workaholism that is never enough. Ideally, care would encompass and transcend both struggle and recovery, tearing down the boundaries that partition them.

This kind of care cannot be described in platitudes. It is not a convenient agenda item to add to the program of the average non-profit organization. It demands measures that will interrupt our current roles, bringing us into conflict with society at large and even some of the people who profess to be trying to change it.
By your response to danger it is
Easy to tell how you have lived
And what has been done to you.
You show whether you want to stay alive,
Whether you think you deserve to,
And whether you believe
It's any good to act.
-Jenny Holzer
Love Is a Battlefield

If we want to identify what is worth preserving in self-care, we can start by scrutinizing care itself. To endorse care as a universal good is to miss the role care also plays in perpetuating the worst aspects of the status quo. There’s no such thing as care in its pure form—care abstracted from daily life in capitalism and the struggles against it. No, care is partisan—it is repressive or liberating. There are forms of care that reproduce the existing order and its logic, and other forms of care that enable us to fight it. We want our expressions of care to nurture liberation, not domination—to bring people together according to a different logic and values.

From homemaking to professional housekeeping—not to mention nursing, hospitality, and phone sex—women and people of color are disproportionately responsible for the care that keeps this society functioning, yet have disproportionately little say in what that care fosters. Likewise, a tremendous amount of care goes into oiling the machinery that maintains hierarchy: families help police relax after work, sex workers help businessmen let off steam, secretaries take on the invisible labor that preserves executives’ marriages.

So the problem with self-care is not just the individualistic prefix. For some of us, focusing on self-care rather than caring for others would be a revolutionary proposition, albeit almost unimaginable—while the privileged can congratulate each other on their excellent self-care practices without recognizing how much of their sustenance they derive from others. When we conceive of self-care as an individual responsibility, we are less likely to see the political dimensions of care.
Some have called for a caring strike: a collective, public resistance to the ways capitalism has commandeered care. In their text “A Very Careful Strike,” Spanish militants Precarias a la Deriva explore the ways care has been commodified or rendered invisible from sex work and customer service in the marketplace to unpaid emotional care in families. They challenge us to imagine ways care could be wrested away from maintaining our stratified society and instead lavished on fostering togetherness and revolt.

But such a project depends on those who are already most vulnerable in our society. It would take a tremendous amount of support for family members, sex workers, and secretaries to go on care strike without suffering appalling consequences.

So rather than promoting self-care, we might seek to redirect and redefine care. For some of us, this means recognizing how we benefit from imbalances in the current distribution of care, and shifting from forms of care that focus on ourselves alone to support structures that benefit all participants. Who’s working so you can rest? For others, it could mean taking better care of ourselves than we’ve been taught we have a right to—though it’s unrealistic to expect anyone to undertake this individually as a sort of consumer politics of the self. Rather than creating gated communities of care, let’s pursue forms of care that are expansive, that interrupt our isolation and threaten our hierarchies.

Self-care rhetoric has been appropriated in ways that can reinforce the entitlement of the privileged, but a critique of self-care must not be used as yet another weapon against those
who are already discouraged from seeking care. In short: step up, step back.

A struggle that doesn’t understand the importance of care is doomed to fail. The fiercest collective revolts are built on a foundation of nurture. But reclaiming care doesn’t just mean giving ourselves more care, as one more item after all the others on the to-do list. It means breaking the peace treaty with our rulers, withdrawing care from the processes that reproduce the society we live in and putting it to subversive and insurrectionary purposes.

**Beyond Self-Preservation**

“Health’ is a cultural fact in the broadest sense of the word, a fact that is political, economic, and social as well, a fact that is tied to a certain state of individual and collective consciousness. Every era outlines a ‘normal’ profile of health.”

—Michel Foucault

The best way to sell people on a normative program is to frame it in terms of health. Who doesn’t want to be healthy?

But like “self” and “care,” health is not one thing. In itself, health is not intrinsically good—it’s simply the condition that enables a system to continue to function. You can speak about the health of an economy, or the health of an ecosystem: these often have an inverse relationship. This explains why some people describe capitalism as a cancer, while others accuse “black bloc anarchists” of being the cancer. The two systems are lethal to each other; nourishing one means compromising the health of the other.
The repressive function of health norms is obvious enough in the professional field of mental health. Where drapetomania and anarchia were once invoked to stigmatize runaway slaves and rebels, today’s clinicians diagnose oppositional defiance disorder. But the same thing goes on far from psychiatric institutions.

In a capitalist society, it should not be surprising that we tend to measure health in terms of productivity. Self-care and workaholism are two sides of the same coin: preserve yourself so you can produce more. This would explain why self-care rhetoric is so prevalent in the non-profit sector, where the pressure to compete for funding often compels organizers to mimic corporate behavior, even if they use different terminology.

If self-care is just a way to ease the impact of an ever-increasing demand for productivity, rather than a transformative rejection of that demand, it’s part of the problem, not the solution. For self-care to be anti-capitalist, it has to express a different conception of health.

This is especially complicated insofar as our survival is interlinked with the functioning of capitalism—a condition some have designated with the term biopower. In this situation, the easiest way to preserve your health is to excel at capitalist competition, the same thing that is doing us so much harm. “There is no other pill to take, so swallow the one that made you ill.”

To escape this vicious circle, we have to shift from reproducing one “self” to producing another. This demands a notion of self-care that is transformative rather than conservative—that understands the self as dynamic rather than static. The point is not to stave off change, as in Western medicine, but to foster it; in the Tarot deck, Death represents metamorphosis.
THERE IS NO OTHER PILL TO TAKE, SO SWALLOW THE ONE THAT MADE YOU ILL
From the standpoint of capitalism and reformism, anything that threatens our social roles is unhealthy. As long as we remain inside the former paradigm, it may be that only behaviors deemed unhealthy can point the way out. Breaking with the logic of the system that has kept us alive demands a certain reckless abandon.

This may illuminate the connection between apparently self-destructive behavior and rebellion, which goes back a long way before punk rock. The radical side of the Occupy Oakland assemblies, where all the smokers were, was known affectionately as the “black lung bloc”—the cancer of Occupy, indeed! The self-destructive energy that drives people to addiction and suicide can also enable them to take courageous risks to change the world. We can identify multiple currents within self-destructive behavior, some of which offer tremendous potential. We need language with which to explore this, lest our language about self-care perpetuate a false binary between sickness and self-destructiveness on one hand and health and struggle on the other. For when we speak of breaking with the logic of the system, we are not just talking about a courageous decision that presumably healthy subjects make in a vacuum. Even apart from “self-destructive” behavior, many of us already experience illness and disability that position us outside this society’s conception of health. This forces us to grapple with the question of the relationship between health and struggle.

When it comes to anti-capitalist struggle, do we associate health with productivity, too, implying that the ill cannot participate effectively? Instead, without asserting the ill as the revolutionary subject à la the Icarus Project, we could look for ways of engaging with illness that pull us out of our capitalist
conditioning, interrupting a way of being in which self-worth and social ties are premised on a lack of care for ourselves and each other. Rather than pathologizing illness and self-destructiveness as disorders to be cured for efficiency’s sake, we could reimagine self-care as a way of listening into them for new values and possibilities.

Think of Virginia Woolf, Frida Kahlo, Voltairine de Cleyre, and all the other women who drew on their private struggles with sickness, injury, and depression to craft public expressions of insubordinate care. How about Friedrich Nietzsche: was his poor health a mere obstacle, which he manfully overcame? Or was it inextricable from his insights and his struggles, an essential step on the path that led him away from received wisdom so he could discover something else? To understand his writing in the context of his life, we have to picture Nietzsche in a wheelchair charging a line of riot police, not flying through the air with an S on his chest.

Your human frailty is not a regrettable fault to be treated by proper self-care so you can get your nose back to the grindstone. Sickness, disability, and unproductivity are not anomalies to be weeded out; they are moments that occur in every life, offering a common ground on which we might come together. If we take these challenges seriously and make space to focus on them, they could point the way beyond the logic of capitalism to a way of living in which there is no dichotomy between care and liberation.
Three Perspectives
The silent room creaks with the weight of the pain that has been shared. In our third week of this support group for men who were sexually abused as children, we’ve broken through the introductions and generalizations, delving deep into the messy details of our traumas.

And it’s not pretty. The litany of textbook symptoms has played out in the lives of these men who struggle with anger, compulsions, sexual uncertainty, and inability to trust, layered with unshakeable shame. Under florescent lights on metal folding chairs sit two men, whose vastly different lives somehow led each into this room, who tonight have bonded over the instability that their attempts to heal from abuse have introduced into their marriages. Above all, they fear that if they start to chip away at the impenetrable walls separating them emotionally from friends and spouses and dividing off their lives into distinct compartments, they’ll lose their sense of who they are—and with it, their wives and children, casualties to the chrysalis shed in a healing rebirth long desired and equally feared.

Sipping decaf coffee from a styrofoam cup, another relates a story of a man who didn’t begin to confront his abuse
until old age; after allowing himself to be honest for the first
time, he told his wife of 40 years that in all that time he’d never
really loved her. Heads twitch, but no one manages to nod in
recognition; they only click their tongues or grunt softly.

I can see the fear roiling behind the eyes of the older
men, whose children await them in suburban homes, and the
anxiety in the younger ones who haven’t yet started families.
The terror of stepping into the unknown, into whatever space
might lie beyond the mosaic of denial and defensiveness that has
come to seem synonymous with their selves.

My co-facilitator, eager to end on an uplifting note,
mechanically thanks everyone for all that they’ve shared. Then,
unfurling a hopeful smile, he asks each person to go around the
circle and mention “one thing that you’re going to do to take
care of yourself this week.”
Eyes swivel sideways; arms fold. I can barely breathe.

The weekly closing is something of a ritual, insisted
upon by these nonprofit partisans of “self-care.” And who could
complain? Of course we have to be aware of how to relax, com-
fort ourselves, remain grounded, draw strength to continue our
efforts to heal or to support those who do.

Then why does everything about this question feel
wrong tonight? Perhaps such a faux-positive ending seems to
cheapen the intensity of the pain disclosed; as though remem-
bering to meditate or exercise could mitigate the effects of sift-
ing through a lifetime of hiding from horrific childhood abuse.
Yet it’s more than that, I realize, as the men go around and attempt in halting tones to shift into this emotionally dissonant closing. It goes to the heart of why these men are here— they are destroying their selves, in order to save themselves. The “I” who first spoke the words, who told me with averted eyes in intake interviews on soft leather couches about the stepbrother or family friend who shattered his boyhood, cannot be the same “I” who leaves the organization after twelve weeks, lest the entire experience be a waste. As they themselves have so eloquently explained, they’ve spent their lives since the abuse wearing masks, fending off intimacy for fear of discovery, or adapting chameleon-like to the desires and expectations of those around them, at the cost of their happiness. They’re not here to care for these confining and fabricated selves, but to transform them.

There are two ways to understand this. In one view, underneath the trauma somewhere there lies a true self, an essence untarnished by abuse and its aftermath—and if only they can recover, this will reorient them into who they truly are and were meant to be. In another version, far more frightening and yet closer to the experiences they describe, there is no way to know who they might have been had their lives not been so cruelly interrupted, and they have no idea who they will become when or if they emerge on the other side. Jobs, relationships, identities, personalities—nothing seems fixed or stable. Hands intertwined, they inch towards the abyss, dizzy with the vertigo of impending freedom, or at least something different from their constricted lives.
So as the next man describes the hike he will take with his dogs through the woods or the therapist with whom he’ll debrief, all I can imagine is the paralyzing terror of plummeting into the unknown, masks and disguises slipping off and dashing against the rocks. Or else a ball of tightly bound twine unraveling as it tumbles down, but with nothing to discover at the center—finally loosening the painfully taut thread only to find that it had been wound around no core at all. Lost in these thoughts, I barely register that my co-facilitator is looking expectantly at me. Everyone else has spoken.

I smile and mumble a joke at my expense, searching my brain for something I can say in the spirit of cheerful self-affirmation. Yet as the seconds peel away, stretching into an uncomfortably long silence, try as I may, I cannot summon a single encouraging banality about how I’ll decompress after this meeting. Instead, my brain swims with fantasies of revenge, gnashing with impotent rage and grief and shame. And above all, simmering contempt for this ideology, however well-intentioned, that attempts to pacify us, recuperating our desperate struggles to survive into a reaffirmation of these constrained selves and the miserable world that creates them. My tongue feels thick; my heart races. I open my mouth to speak.

“I’ll... I’ll be doing some writing this week. Writing helps me sort out my feelings and my thoughts.”

With a relieved smile, he turns to the group, offering another platitude about the importance of taking care of our-
II. Run from What’s Comfortable

_We are gathered in a circle for a ritual expressing environmental grief._ The organizers have brought together a diverse group; I see a girl with half-cropped hair and plugs in her earlobes fetch a chair for a woman with long grey hair who can’t sit on the ground. I’m sitting diagonally across from a business owner who publicly urged the district attorney to bring felony charges against the last person I kissed. I’m uncomfortable about that, but if we define community as proximity and influence on each other, this fits the bill.

One by one we enter the circle. It is divided into four quadrants, each holding a symbolic object. We rub dried leaves on our faces with our tears. We brandish the stick to the sky with anger. We hold the bowl and stare into the emptiness of our confusion. The stone weighs down our hands with the fears that immobilize us, the paralysis from which this ritual is de-
signed to free us. As we speak, our stories come out: drug-addicted children, friends in prison, disposable products, destroyed mountaintops. We are each other’s witnesses in struggles both shared and specific.

This is what healthy animals do with their grief and stress. They gather; they look out for each other. Elephants create ceremonies of sound and movement around their dead. Primates take pleasure in mutual grooming, which soothes the nerves and forms social bonds of voluntary cohesion. Even in the sterility of the laboratory, rats will liberate each other from cages again and again.

It’s hard to be a healthy mammal in our culture. Like most of our mammal cousins, we’ve evolved to enter a state of attention at the sound of a snapping twig or the sight of a shadow passing overhead, and to settle into relaxation when danger passes. Yet we live in environments that our nervous systems can barely handle on a good day: we work, study, and often socialize in poorly ventilated, enclosed spaces with sharp corners and flat walls that convey a feeling of inescapable entrapment. Our neocortical brains, already overstimulated by a relentless influx of inconsequential sounds and images, also dredge through news of never-ending threats: school shootings, factory fires, fracking fluids, date rape drugs. Throughout all this, we’re expected to stay calm, disciplined, and productive.

Our nervous systems crave fluctuation—waves of curiosity and interest followed by satiation, moments of alertness followed by relief, bonds with others based on common senso-
ry and emotional experiences. Deprived of these rhythms, our brains and nervous systems enter various states of dysfunction: hyper-vigilance or shutdown, depression or rage. Looking to escape these states, people stumble into addictions that mimic the fulfillment of needs and instincts: compulsive shopping for our foraging instincts, internet porn for our libidos, club drugs for ecstatic states. The systems in which we live both supply and shame the indulgent, but none of these substitutes creates the same physiological effects as the pursuits and natural states they imitate. The brain and body denied become stuck in paralysis or overdrive.

I was raised in a household in which to be born was a sin. The soul was depraved by life in the body; the control and submission of that body was as important to salvation as any divine grace. When my father died, my poor mother was faced with saving three teenagers and one infant from earthly existence and the probable eternal damnation that results from it. She had only been shown one way to do this. Left alone with the responsibility of the small bundle of flesh that is a child, she employed an old rule: “spare the rod, spoil the child.” I was beaten for instinctive responses like smiling back at old people in church or gagging while trying to swallow oddly textured foods, not to mention accidents like spilling milk.
Caring for myself now as an adult, it feels like a freedom and a privilege to know what’s good for me and to choose it. On the other hand, because I learned as a child that care not only has strings attached but also barbed wire and sometimes electrified fences, being vulnerable and intimate with others can feel precarious, even hazardous. Sometimes I am incapable of responding to kindness; other times I can’t even accept it. What is easy and familiar is isolation.

Like many survivors, I can isolate myself while engaging in the stereotypes of self-care. I may look brave or even enlightened as I take up yoga or running, write glowing reviews of books on self-acceptance, and channel my emotions into elaborate art projects and self-revealing blog posts. This form of self-care can feel less like liberation and more like solitary confinement. Sometimes what I actually need is someone to show up at my house with take-out, sit there while I pick at my food, stay with me until I’m falling asleep sitting up on the couch, and then send me to bed and tuck the blankets around me. Occasionally that happens without my asking. And sometimes I have to bravely reach out and alert someone that I need to talk, or cry, or most of all just not be alone. There are times when not insisting on taking care of myself is the most radical form of self-care I can practice.

I do believe in emotional self-regulation. We need those skills to settle our agitations without resorting to aggression, and to pursue adventure, work, and mystery autonomously and joyfully. That doesn’t mean we have to emotionally regulate in
When I first began studying trauma, I learned about fight or flight. A cornered animal will flee or attack, whichever is the best strategy at the time. Later I learned about freeze, the instinct to play dead until the danger is over—and the possibility of becoming stuck in freeze if the danger never seems to end. This is why so many who suffer post-traumatic stress disorder are first diagnosed with depression: they’ve become stuck in the freeze response.

I recently learned that we only flee, attack, or play dead after social engagement has failed. Our first instinct under stress or threat is to seek solidarity or comfort with others. If this succeeds, our panic systems disengage and we can return to other functions like play or invention. Knowing that our nervous system responds so powerfully to the presence of others, it becomes clear that self-care and reciprocal care cannot be separated.

The importance of prioritizing reciprocal care becomes even clearer when we understand that our stresses and traumas are a common plight and not individual pathologies. As human animals, we are living in environments that cause emotional and physiological incoherence. While we may not be able to eradicate the systems that imprison us immediately, we stand a far better chance if we don’t get tricked into thinking our struggles or the solutions to them are individual. The more ways we find to act in honesty with each other, whether in sorrow or in excitement, the stronger and more resilient we become—individually and collectively.
I've been doing self-care wrong for years.

I learned the phrase through context, in conversations where there didn’t seem to be anything not to get. Like “safe space,” it seemed like an easy first step toward solving a complicated problem. But like the idea of safety, the idea of care opened up on a vast internal blankness. How many of us ever feel safe, in any environment? How many of us know in our bones what care feels like?

In the summer of 2008, as Philadelphia shimmered under the heat rising from car hoods and concrete lots, I lay in my small, steamy room on the third floor of a collective house, not sweating. Clear pouches of coconut water and little green packets of electrolytes covered the dresser next to my bed, a pile of offerings from friends. My thoughts arose slowly between oceans of silence. I understood I had reached a moment of internal reckoning; something in the way I steered the vehicle of my body had to change. I had been released from the hospital after a night of observation. The doctors sent me home with an anti-nausea drug and no answers. That had been ten days earlier, and my digestive system was still on strike. I was too weak to

III. Destroy Your Reputation

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walk down the hallway to the bathroom without help. Periodically, I would force some solid food down my throat, with disastrous results. Waves of pain constricted my head and my guts, making rest impossible.

To have come to such a state seemed to indicate personal failure. The cause of my illness was a mystery. Without a diagnosis, without an antagonist to blame, I couldn’t help but see the root of my sickness as something defective in my own makeup.

Of the many things I’ve believed about who I am, one has been constant: There is something wrong with me, and I need to fix it. Only then will I be able to live properly—to develop my talents, be helpful to others, and most of all, be worthy of love. It is my responsibility to fix myself so I am not draining to others. Lurking in the dark shallows of my consciousness, only to surface unexpectedly, this belief has shaped my identity and my approach to self-care. I internalized the truism “you have to take care of yourself if you want to care for others” as a command: “you have to take care of yourself SO THAT you can care for others, which is your main job.”

I spent years trying to fix myself. My strategies looked a lot like self-care: I eliminated foods from my diet, practiced yoga and meditation, exercised regularly, went to therapy, read books on neuropsychology and trauma. Meanwhile, I tried hard to keep up with my friends whose stamina and energy I en-
vied. When my body was tired after only an hour, I forced it to work through the pain. When I couldn’t find allergen-free food, I didn’t eat. I dragged myself to yoga classes where I pushed myself to the point of injury because I needed to believe I was doing something to combat the defectiveness of my body. And when I relapsed into physical collapse, I’d force myself to rest—though I dreaded the isolation. Usually rest meant secluding myself in my room watching dumb movies until I was numb. Anything to avoid the despair I felt in the face of my brokenness.

I’d been trying every way I could to care for myself. Lying in bed after my hospitalization, in a dramatic decline that was frankly embarrassing, I tried to call a truce with my body. *What do you need,* I asked it, *to get back to work? I’m ready to make a deal.* The answer I received made me recoil, as though someone had placed a stranger’s bawling infant in my arms and ordered me to love and raise it as my own.

In this society, we cultivate personality traits that maximize productivity. We learn to control our desires and limit our needs; we are praised for being self-sufficient and showing endurance. *Be a good worker; stay focused; keep your emotions in check; go the extra mile; no pain, no gain.* To balance the draining effects of this
discipline, the marketplace offers us consumer self-indulgence. Treat yourself; luxuriate; indulge your passions; get swept away. Activist culture can also swing between these poles of self-control and self-indulgence, though we tend to embrace the capitalist work ethic while remaining suspicious of capitalist comforts. What we’re describing when we speak of self-care is often one of these poles. Exercise hard, or get a massage. Do a cleansing fast, or treat yourself to a day off. Work on your shit in therapy, or take a bubble bath. In all this striving to care for ourselves, we follow paths well-worn within capitalism, paths that loop back to where we started.

Just as our bodies retain traces of lead, arsenic, mercury, and other industrial toxins, our psyches absorb the values and violence of our culture. We can spend all our lives trying to heal from these toxins without ever escaping or changing the conditions that keep us poisoned. Health and wellness, ever elusive, can become an obsession. The control-based approach to self-care functions on the same model as an immune system: we police our boundaries, striving to maintain purity. When we find something undesirable in ourselves, we surround the threat and mount an attack. The self-indulgent approach functions the way an opiate does, soothing our pain and alleviating symptoms. The first approach relies on a strict definition of what is self and what is alien, and the second on correctly judging when it’s necessary to give up the self in order to preserve it. Both modes have us chasing an ever-receding horizon.
There is a third approach. Similar to both alchemy and digestion—slow processes of incorporating and transforming one substance into another—it demands patience and fluidity. When your sense of self isn’t fixed in one form—one age, one body size, one mood, one level of physical strength—you can work with seemingly toxic influences, slowly dissolving and redistributing them until they become something entirely new: you. The biggest difference between this form of self-care and the more common ones is that you don’t know who you will become at the end of the experiment.

The turning point in my recovery came when I stopped trying to fix myself. I’d dedicated years of relentless self-care to becoming a fantasy of health: someone who could work tirelessly with minimal fuel, without being slowed by injury or grief. In short, someone who would never again need care. Elaborate anti-capitalist analyses notwithstanding, as long as I judged my worth by these standards of healthy productivity I remained aligned with the morality of the marketplace.

When I called for a truce with my body, the unsettling message I got was that I couldn’t solve the mystery of my illness rationally. There wasn’t a program, a procedure, or an easy fix.
This wasn’t a union strike, but an insurrection. My body had only one demand: *Give up. You must love this, exactly as it is. This imperfect, damaged body that may never fully recover. The dull pain in your abdomen. Your own fear and loneliness.* After a few heartbeats of alarm I began to rethink my situation. What could there be to love here? Even as I asked the question, grief soaked the edges of my vision.

Care had been a blank abstraction, like a code word for another form of work: what the factory farmer does for the caged chicken. Now it appeared filled with a sort of dark brilliance, like a glass vessel with something dangerous boiling in it. This was not the still point of serenity some yoga teachers promised I’d find at my core. This was something dynamic and unstable; intensely personal yet connective. The pain that had been searing my muscles and viscera didn’t abate, but it began to separate into distinct notes that formed a chord. The frustration I’d been nursing against my uncooperative body didn’t disappear; it intensified, rather, into rage—but rage directed outwards, protectively.

I’d experienced the most important shift of my life. I’d stopped siding with the enemy.
Care to Struggle,
Care to Win
FURTHER READING

“On Being Ill,” Virginia Woolf

N’Drea: One Woman’s Fight to Die Her Own Way

On Becoming an Alchemist: A Guide for the Modern Magician, Catherine MacCoun


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