

CITIZEN SURGERY: A FRAMEWORK FOR UNCANNY OPERATIONS

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Abstract

This paper introduces an idea for emerging practices of “citizen surgery” in which individuals without surgical training engage with techniques, instruments and language of professional surgery. These activities may take place as participatory events as well as gallery or online performances, typically involving food or craft-based simulators and revolving around skills acquisition and dissection of surgical culture.

*A plump squash is surrounded by surgical instruments.
Small latex-gloved hands give the vegetable an injection,
perform a cesarian and extract a baby-squash from its
belly. The newborn is gently shown to the mama-squash.
What is going on?*

This statement introduces a conceptual framing for the emerging practices of “citizen surgery.” By *citizen surgery*, I refer to a range of live and online activities in which individuals without formal surgical training engage in surgery practices via various kinds of simulations [1], or skilled practitioners such as chefs and carpenters, for instance, are being trained as lay surgical assistants [2]. In this initial outline, I focus on the surgery simulation as a form of citizen surgery. These activities are sometimes initiated as part of an academic inquiry by health humanities or science and technology scholars, among others. Citizen surgery may also be framed as nonacademic practices of “arts and health” [3], performed within the ASMR (autonomous sensory meridian response) community [4], or conducted by children [5]. Citizen surgery is, by definition, an uncanny research-creational practice [6] and boundary-work [7] and resists appropriation by any single discipline or field. It may be framed as sensory ethnography or embodied research as well as a meditative ritual, demonstration of body authority, sensory-material inquiry and expression of awe or terror of surgery. Even though many performance artists and body hackers apply surgical techniques to alter their bodies, this statement concerns practices with the purposeful acquisition of surgical skills and collective engagement rather than bodily self-experimentation.

While “citizen surgery” calls to mind a similarly named “citizen science,” these two entities belong to two distinct spheres. Citizen science refers to data collection completed, analyzed and disseminated by lay individuals in order to maximize scientific knowledge [8], whereas citizen surgery revolves around skills acquisition and collaborative meaning-making. Citizen surgeons refuse a “stakeholder” role in the service of surgical sciences but maintain an ambivalent stance toward it. In other words, while a citizen scientist wants to contribute to scientific research, citizen surgery is geared toward the democratization of surgical training and analysis, appreciation of sensory and crafts skills acquired in fields beyond surgery and the establishment of a power balance in negotiating the authority of the body and health. While these ambitions connect to Foucauldian critique of clinical power relations, citizen surgery also provokes discussion on the often-neglected impact lay people can have in transforming

medical practices [9]. Loyal to the original meanings of uncanny/*unheimlich* [10], the citizen surgery operations are quite literally “unhomely”; surgeries do not belong to domestic kitchens, let alone at the dining table. Specifically, using food or crafts as the human body estrange the familiar into the appalling. Eluding a clear definition, citizen surgery simultaneously appears as useless and grotesque amateurism and a creative but underacknowledged resource for promoting attention to detail in surgical skill and performance. On the one hand, a citizen surgeon appears a contemporary quack who can both reinforce and criticize the stereotypical qualities projected on actual surgeons and surgery practices, all the while acknowledging their own mental-physical experiences in this performative and satirical process. On the other hand, citizen surgery has the potential to contribute to research on at least two different levels: it can perform cultural analysis of surgical practices and promote modes of surgery simulation and training for knife skills, depth perception and material knowledge of simulator fabrication, for instance.

In the practice of citizen surgery, one typically performs a character of a surgeon starring in a genre of a tutorial. A classic citizen surgery procedure would be abscess drainage, enacted as either a live event (Fig. 1) or an online resource [11], which moves from gently tapping on the infected and swollen area to releasing the unwanted substance by incision, resulting in pressure being alleviated. By embodying the choreographies, dramaturgy, instruments and language of surgery (its cultural representations), the citizen surgeon is consciously or unconsciously multitasking in dissecting the surgical culture, negotiating their body borders and fragility, desensitizing to keep their emotions at bay (dress rehearsals for future surgery), reconciling past surgery trauma and performing an empowering ritual as an authority over



Fig. 1. *Evening at the Theatre*, 2020. An abscess drainage workshop. (© Noémie Soula/Lab4Living, Sheffield Hallam University)

(some)one's body. A citizen surgeon is an autodidact who asserts literacy in speaking and "writing" surgery; their scalpel writes surgical inscriptions on the (simulated) body [12], in a claim to the terminology of an exclusive domain. In writing new surgery narratives, citizen surgeons navigate two paradoxical axes: surgery's inherent nature as a gross insult to the body and its antidotal performance as gentle caregiving. The surgeon remains calm regardless of mishaps or anomalies ("this is not good"), uses a soft voice to explain each step of the procedure and possesses a sense of humor ("oops, our patient is on the run") [13]. Such features of "surgery-fiction" are generously supported by the temporal disruption of a surgical reality. Namely, citizen surgery is inefficient "slow surgery"; in the absence of the efficacy of actual surgery, the simulation allows aspects such as patient reassurance or sensory perception to become visible. Forms of citizen surgery thus expand meanings and values currently assigned to surgical practices by permeating these with dimensions such as personal attention, relaxation and care. The relaxing agent is here not the anesthetics but instead hypnotic qualities in the surgeon's performance; the viewer's (sometimes the patient) surrender to citizen surgery takes place by observing the surgeon pay close attention to detail and demonstrate care for their "patient" in relatively slow motion. Cosmetic surgery, such as simulated Botox treatments, is an area where personal attention seems most realistic (also through the surgeon's gaze into the camera). However, nonhuman material is equally cared for, for instance by patting or stroking a tropical fruit. As there is no rush, specific maneuvers may be repeated if they go wrong or just for the sake of appreciating performing and viewing them. Indeed, one function of citizen surgery is a public dissection; the viewer's satisfaction derives from witnessing surgical skill as a theatrical spectacle.

Regarding the multiple alliances between professional surgery and citizen surgery, food and crafts are critical interfaces by ways of which the surgeons (in training) and citizen surgeons meet. As a *matter* of fact, one emergent sub-domain of citizen surgery takes place through the materiality of cooking and dining. While sensory perception and skills acquisition are typically central in such food-based simulations, by staging a familiar setting of a dinner party [14], citizen surgery expands from these to create an unsettling connection between surgery and eating. This, in turn, opens an avenue to discuss human-animal relationships [15], for instance, in medical and veterinary research, as well as concepts such as "food animal." In doing that, citizen surgery brings a historical perspective to the (dinner) table, too, given that the eighteenth-century surgeons were butchers and barbers [16]. Much like the historical operations, the absent keywords in citizen surgery include *anesthetics*, *sterile* and *license*. To

continue to blur the boundaries of these knife-bound domains in the present day, many ASMR citizen surgeons alternate between performing surgery and haircuts. In so doing, they continue in the spirit of neighborhood barbers who operated in the early anatomical theaters [17], merging the artistries associated with salve and flair.

References and Notes

1. Noémie Soula, "Evening at the Theatre," Lab4Living Seminar, Sheffield Hallam University, U.K. (12 March 2020).
2. Laura Beavis, "Tradies Train up for Emergency Surgery on Australia's Antarctic Team," *ABC News* (13 December 2020): www.abc.net.au/news/2020-12-13/tradies-train-up-for-emergency-surgery-in-antarctic/12978312 (accessed 17 December 2020).
3. Kneebone Roger, Fleur Oakes and Colin Bicknell, "Reframing Surgical Simulation: The Textile Body as Metaphor," *Lancet* **393**, No. 10166, 22–23 (2019).
4. Amisha Ahuja and Nitin Kuma Ahuja, "Clinical Role-Play in Autonomous Sensory Meridian Response (ASMR) Videos: Performance and Placebo in the Digital Era," *JAMA* **321**, No. 14, 1336–1337 (2019).
5. Lori Dom, "Girl Performs Delicate Surgery on Fruits and Vegetables," *Laughing Squid* (17 September 2020): www.laughingsquid.com/girl-performs-surgery-on-fruits-and-vegetables (accessed 20 September 2020).
6. Natalie Loveless, *How to Make Art at the End of the World. A Manifesto for Research-Creation* (Durham, N.C. and London: Duke Univ. Press, 2019).
7. Thomas F. Gieryn, *Cultural Boundaries of Science: Credibility on the Line* (Chicago: University of Chicago Press, 1999).
8. M.V. Eitzel et al., "Citizen Science Terminology Matters: Exploring Key Terms," *Citizen Science: Theory and Practice* **2**, No. 1, article 1 (2017).
9. R. Bunton and A. Petersen, eds., *Foucault, Health and Medicine*, 1st Ed. (Routledge, 1997).
10. Sigmund Freud, "The 'Uncanny,'" in James Strachey, ed., *The Standard Edition of the Complete Psychological Works of Sigmund Freud, Volume XVII (1917–1919): An Infantile Neurosis and Other Works* (London: Hogarth Press and the Institute of Psychoanalysis, 1955) pp. 217–256.
11. Anne van Veen and Kaisu Koski, "Clinical Crafts I," (2019): www.vimeo.com/341510198 (accessed 19 March 2021).
12. Katherine Young, *Presence in the Flesh: The Body in Medicine* (Cambridge, MA: Harvard Univ. Press, 1997).
13. Diamond ASMR, "[ASMR] Surgery on a Kiwano Melon" (8 April 2020): www.youtube.com/watch?v=i-a95AD-6-8 (accessed 10 December 2020).
14. Anna Harris, *A Sensory Education* (London and New York: Routledge, 2021).
15. Chloé Rutzerveld, "The Other Dinner: How Eating Mice Could Stimulate Innovation" (2013): www.chloerutzerveld.com/the-other-dinner (accessed 16 March 2021).
16. Suzanne Raga, "How Uneducated Butchers and Barbers Became Today's Skilled Surgeons," *Mental Floss* (4 August 2015): www.mentalfloss.com/article/66664/how-uneducated-butchers-and-barbers-became-todays-skilled-surgeons (accessed 22 December 2020).
17. Waag Society, "About the Theatrum Anatomicum" (n.d.): www.waag.org/sites/waag/files/media/publicaties/about-theatrum-anatomicum.pdf (accessed 18 March 2021).