

Summary of AANM Discussion Session #5: Celebration and Revolution with Sheri Nault

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This discussion occurred on Wednesday, July 3, 2024 at 6 PM CST. The presenter was Sheri Nault and there were five other participants including AANM's Jenel Shaw and Sacha Kopelow.

Overview: The topic of this discussion session was celebration and revolution, and as a background to this subject, participants read the article "Hope Is a Practice and a Discipline: Building a Path to a Counterculture of Care" by Kelly Hayes and Mariame Kaba.¹ The presentation was about the injustice of this world, how we can use "Active Hope" (defined in the article) to find a way forward, and some examples of artists/activists who have been enacting celebration and revolution through Active Hope. The ensuing discussion covered some examples of activist art, the ways people express grief and hope collectively, then a large portion of it explored accommodation and adaptation for artists with madness and invisible disabilities.

The evening started with a land acknowledgement by Jenel. This included a statement about the intersectionality of oppression and a statement that all people have the right to participate in, inform and lead art and culture.

Jenel introduced Sheri Nault (they/them) as a 2-spirit Michif artist, indigenous tattoo practitioner, community worker and assistant professor in studio arts at the University of Western Ontario. Their practice includes sculpture, performance, installation and more, and explores the embodied connection between human and non-human beings, land-based relationships, and kinship sensibilities within an indigenous futurist framework. They are part of the indigenous tattoo revival movement and run an annual community project for 2-spirit youth.

Sheri Nault's Presentation

Sheri's presentation, which was approximately 30 minutes long and delivered with slides, was entitled "Celebration and Revolution: A lil' intro". A core question was:

¹ <https://nonprofitquarterly.org/hope-is-a-practice-and-a-discipline-building-a-path-to-a-counterculture-of-care/>

How do we do anything, e.g. taking action, beginning initiatives, making art, or creating opportunities in the face of overwhelming injustices?

To explore this injustice, they illustrated the concept of **intersectionality** using aspect of their own identity as an example. First they were careful to make a few points about intersectionality:

- Intersectionality isn't about tallying up and comparing our privileges, it's about how different components of our identity work together in complex and nuanced ways.
 - o For example, the work of Kimberley Crenshaw, the originator of the term intersectionality, focused on Black women's experiences as distinct from those of both Black men and non-Black women.
- Privilege isn't about guilt.

They considered themselves "pretty privileged" because they are white-passing, employed, housed, fairly able-bodied, not visibly disabled, and have no addictions. However, looking at their identity as a trans, queer, indigenous person, they can see ways in which the intersections of these identities create injustice:

- Through residential schooling, colonial ideas about queerness forced homophobia and transphobia onto many indigenous people.
- Anti-indigenous racist permeates queer spaces, making them less safe for indigenous queer folks.

They also talked about how visibly racialized and disabled people are more likely to die in wellness checks, and that First Nations people are disabled differently, i.e. through chemical contamination in communities. They explained that similar intersections exist for all of us.

They spoke about how there is a need for "care and rescue" when a community experiences disaster, as is happening with the ongoing crisis of suicide in indigenous and trans communities. They described their own family history of suicide and alcoholism, which they connect to colonial trauma.

So how does the community respond? How do we take action despite overwhelming suffering, grief and injustice?

Sheri found an answer in the article they shared, a practice called "Active Hope".

Active Hope:

The Hayes/Kaba article explains: "[Active Hope] is a process we can apply to any situation, and it involves three key steps. First, we take a clear view of reality; second, we identify what we hope for in terms of the direction we'd like things to move in or the values we'd like to see expressed; and third, we take steps to move ourselves or our situation in that direction. Since Active Hope doesn't require our optimism, we can apply it even in areas where we feel hopeless."

In other words, Active Hope is taking steps to move towards what we value, even if we don't think it will work out.

Sheri particularly resonated with the first line of the article, which spoke about how we come to more deeply understand the value of time and care when someone we know is diagnosed with a serious illness. Their father was diagnosed with ALS in May, and this made them feel “crazy” in a way they hadn’t in years, leading them to realize the need for greater self-care and time with him. Their family history, such as the cycle of alcoholism that their father broke, felt extremely present while navigating his illness.

Sheri shared some other quotes that spoke to them from the article, including about grief also being a practice, and how making art and preserving stories helps us remain whole and prevents us from going numb, bringing us into political communion with others.

They spoke about the idea of “all my relations”, a Cree teaching they were raised with, which ascribes an interconnectedness to all beings, human and non-human. They believe the article authors are telling us how to enact this principle.

Examples of Celebration and Revolution through Active Hope

Sheri provided some examples of “dreaming new worlds of disability justice into being with care, intention, emphasis on intersectionality, and clearly abundant hope”:

- Sins Invalid: A disability-led and BIPOC-centering performance group that challenges our paradigms of beauty and sexuality.
- jes sachse: An artist, writer and dancer who staged performance protests at the Art Gallery of Ontario (AGO) in response to the controversy over the departure of Wanda Nanibush, a curator with pro-Palestinian views. The protests involved sitting in their wheelchair with a banner and a sign in support of Gaza and opening up a conversation.
- This/ability Conference 1995: A groundbreaking conference where, according to author, filmmaker, and arts consultant Simi Linton, people laughed, cried, reveled in each other, bonded and launched careers, and she “watched disability slide in right next to art”, although the conference participants tended to be white people with mobility impairments.

It was hard to choose what to present today because “there’s so much that is so rich out there to be found when you go searching,” said Sheri. When we share stories, uplift others and our communities, we are “enacting hopeful futurism”, behaving as if the future we are hoping to see will be possible.

Group Discussion

At this point, Sheri showed a slide with the topics of today’s discussion (which can be found at the end of this document), and they soon asked the following questions:

What inspires folks? What are you doing to celebrate or revolt, or hold onto hope so you have the will to celebrate and revolt and can believe it’s possible?

Jenel said that the Active Hope concept reminded her of when AANM built a giant yellow ramp into an artist’s space as a form of intervention art, a ramp which blocked the sidewalk and made passersby step around it.

Another participant spoke about how their “bubble of privilege hit home” when they had a very violent wellness check, reflecting that they could have been dead if they weren’t white. Afterwards they spoke out at a budget meeting, thinking that they got through to people because they “looked like them”. But ultimately they were not sure that what they did helped, so they had to let go of the outcome. Sheri said that this participant’s choice to speak was an example of Active Hope. The participant said they felt “crazy and privilege”, but were still proud of themselves for doing it.

The ramp reminded another participant of a sculpture, “Untitled (Portrait of Ross in L.A.)”, made of a pile of candy the same weight as a man with AIDS. People had to assess their own implication in the exhibit as they observed and interacted with the candy.

Sacha said she loves the “type of activism that only artists can do”, presenting their life experiences vulnerably and authentically. This activism helps you understand yourself through the eyes of others, so people “can learn empathy and sameness and difference and acceptance”.

Sheri related to Sacha’s comment. They find performance and video art and talks like this nurturing, because they can no longer go to in-person protests so as to avoid police violence, after jaw surgery made them realize their bones heal slowly.

What art do you do?

At this point, Sheri was curious about the art everyone did, so people went around and described that:

- Jenel, the Executive Director of AANM, said she currently knits, and has a passion for arts administration.
- Sacha, the AANM Programming Assistant, works with cast glass sculpture, making installations with figurines. At this time she was building a miniature city.
- Another participant was working on a PhD in English, exploring graphic narratives and memoirs of illness, including experiences from both the patient and health care system perspective. For their Masters, they wrote a graphic novel as well as their thesis.
- There was a multidisciplinary artist (drawing, photo, video, performance, installation) who was a graphic designer for many years. Due to COVID and trauma, they were now focusing on meditative, in-the-moment drawing with no intent, as well as photographing things other people don’t notice but that they find sacred.
- An AANM board member spoke about working in electronic arts (sound and video) and sculpture, investigating cognition, intelligence and AI.

Sheri then asked their next questions:

How do you and others you’re connected with practice hope or grief collectively? Are these efforts planned intentionally? Do you have people you experience grief with or ways you do it?

Jenel said she used to invite people over to use AANM’s space, but that doesn’t happen so much after COVID made people connect more online.

Another participant agreed that COVID “galvanized isolation” and that a lot of people feel isolated, then talked about how connecting with a particular maple tree in their window allowed them to connect with their deceased dad, who taught them to respect nature, and himself had a tree that was his “spiritual touchstone”. This has helped with their grief. Sheri said that this experience demonstrates “all our relations”, that other beings can co-regulate with us when we are having a tough time. The participant agreed, and spoke about how we are all connected, just not on a human plane.

Jenel spoke about how doing art helped her cope with her dad dying, in 2020 during the pandemic, when she was able to travel to him and take care of him.

Sheri said that a parent dying is a grief that others can relate to and “get”, while they’ve been unable to share their personal griefs.

The discussion of grief shifted the conversation more towards the accommodations and adaptations needed to be an artist who experiences madness or invisible disability. Sacha brought up the question:

What are the accommodations for madness, and is this something that exists?

She said she finds that it’s unacceptable to share madness, while sharing chronic illness is iffy, and people are great talking about back injuries, so she grieves for her madness side.

The other participants felt that breaking the silence is the #1 way to accommodate madness, that despite bad reactions, it paves the way for people to be open about it. Jenel said she makes a point of talking about her mental illness. Another participant spoke about how their father’s madness isolated their family growing up, due to a box of stigma and shame that made it impossible to talk about.

Several participants felt that the stigma of madness was worse than the “symptoms”, even causing people to put off treatment or question why they are this way instead of trying to find a way to move through the world anyways. Sheri said they openly talk about taking medication.

Sheri then asked:

Has anyone had workplace accommodations offered for madness or non-visible disability?

Sheri said that they, personally, haven’t.

“No, I got canned twice,” said another participant.

For Jenel, being her own boss lets her work from home when she doesn’t have spoons for the bus or dealing with people out and about.

Sacha once had a job which let her come in early so she could keep the lights off and get accustomed to the environment.

Sheri said that choosing their own schedule is “huge”. They make sure they are not working in person more than 4 days a week. They regard these as “self-made” accommodations.

Jenel said that asking for accommodations is part of what we do. And with new disabilities in the world (e.g. COVID, chemical sensitivities), there continues to be a need for new accommodations.

Sacha asked another question:

Have you had to make accommodations in your art practices, and how has madness or disability affected your art practice or the art you make?

Sheri said that harnessing their neurodivergence in their art practice helped, e.g. allowing themselves to hyperfixate for 8 hours putting clay in the crevices of a skull.

Jenel talked about bringing art supplies to the hospital and holding art classes with other patients, that this brought back confidence and was “a really exciting way to like do art and it not be dictated by the hospital, ‘cause there's a lot of your life that's dictated by the hospital”.

Sacha said art was the most engaging part of protests she's been to, then another participant spoke about how cathartic it was for them to make signs for a recent protest and have people take them and take pictures. They spoke of art as connection, as a tether to the soul and the universe.

The participant who was working on their PhD in English had to balance making art with the risks of pain flares from the arm they hurt at age 12. Academia allowed them to explore on their own time instead of having to worry about deadlines and accommodating schedule lapses, although autoethnography (their particular academic work) felt narcissistic, and art can convey something abstract that others can relate to and is hard to communicate.

This reminded the participant who had made the protest signs that for them and many others, their relationship with art changes with their state of being. Art also makes us face the uncomfortable parts of ourselves.

Sheri spoke of being a Jack-of-all trades artist who does everything but paint, which led them to ask:

How do people feel about “shapeshifting” into different forms of art as a way to accommodate disability?

Sheri spoke about how they like to have a few things around to work on because it's hard to maintain consistent focus. That way they can move between physical and digital things.

Jenel said she can put down her knitting for a few months, unlike something like ceramics which has a whole process. Knitting, by keeping her hands busy, also helps accommodate a lack of focus.

Sacha gets emotionally drained by each step of a process and each project, so she switches between different projects to “cleanse [her] emotional palette”.

Another participant loved being able to shapeshift and do what works depending on their state of being. For example, if doing a big piece is hard, the instant nature of photography is appealing. They also noticed that making big things like installations was not feasible because there was nowhere to show that work, so art became something more personal, a private practice, not a “social thing”.

Other participants shared their fondness for photography, talking about it being an “archive” for ideas to use later, e.g. things to paint or draw or use in a scene.

The session concluded with Sheri thanking people for listening to their thoughts and sharing. To them, this conversation seemed like an example of active hope.

Appendix: Topics to Discuss

This is the text of the slide Sheri showed to kick off discussion:

How do we do *anything* (i.e.: take action, begin initiatives, make art, create opportunities, etc.) in the face of overwhelming injustices?

Which helps us to apply what is learned when we discuss:

- Notable disabled artists and disabled arts initiatives, collectives, and NGOs
- Historic wins for disability art
- Opportunities for disabled artists
- Intersectional revolution principles, learning from other revolutionary movements
- What do we want from disability art, radical community movements, and disability art NGOs?
- Where do we go from here?