Ben Marcus

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In the year of I Can’t Breathe, a hospital occurred on Randall’s Island. The building was fashioned, rather quaintly, of matter. Bricks, windows, smoke. The occasional human being stained the site, summoned from the holding pen. The hospital used flesh traditionally — draped over the anguished little need machines we call people. Space was pushed through rooms, to keep them from collapsing, or so it seemed. In truth, no one understood how such a spectacle could remain stable. Religion and science broadcast a distant wisdom, no different from birdcalls, and actual birds policed a space the size of the whole world.

The air was breathable. The scale, despite appearances, was one to one.

One commends the level of detail in this realistic hospital. Even the most advanced scrutiny did not reveal rigging. Blood tended to be housed inside puppets, who, in a surprising touch, were represented by actual people, pulled into the space and dosed with purpose. Traces of bone were found in the air, a dust misting over the island. The use of bone in such a way felt far too obvious, almost embarrassing. On slower days the bone slowed, too, and one sensed it could congeal. Tests of the air revealed only marginal difference from the powdered bone found in any air sample taken anywhere. In other words, this spectacle was supposed to seem like it was taking place right now, in our own world. A full set of chemical tests were not conducted, but one felt, after witnessing the hospital and the elaborately created area around it, a strenuous petition to exist, as forceful as any area anywhere, ever.

Part of the suspense, in participating in this hospital and its surroundings, involved the mystery of who would do what and what would happen: trivial questions that somehow came to matter. The hospital neither increased or decreased one’s curiosity. If mood alteration was at work, or indeed any manipulation of emotion, it was being done environmentally.
The buildings behind the hospital, in an interesting touch, were real. In the distance beyond the island loomed another island, attached to a skyline of actual buildings, many of which must have taken years to erect, and beyond that, a vague landscape was inferred, a possible continent, as if this was all taking place in a kind of world. Even different weather obtained in these other areas. A tremendous amount of care was taken to create details in the very far distance beyond the hospital, as if the materials elsewhere, in a space that was days away on foot — not that we could ever travel there — were just as important as the materials right in front of us. One heard reports of people perishing hundreds of miles away. Real people were born and lived out their lives never hearing of the hospital. Even the waterway bordering the island was fabricated with real water. Such a democratic approach to detail is troubling. It amounts to a celebration of technique, suggesting a creator slightly too satisfied by method, showcasing a skill, as if the making of something mattered more than that thing’s purpose.

Is not real water a dull choice here? Water, perhaps the most overused substance of our time. And so much of it. Actual water even at the greatest of depths, surrounding the island, running under it. It is not clear who is meant to appreciate such effects, or why, more importantly, a valuable resource is made so glaringly inaccessible. One senses a kind of hostility in the gesture. A taunt.

Even after we have gotten the point, the point keeps getting made.

The hospital staged a series of exhibits, punctuated by intervals called the work day, evening time, the shadow, and a fourth category of time that would seem to have never been named. This category prevailed most often, preventing the other categories from appearing as scheduled. Night and day occurred on schedule, but something invariably felt out of balance in the full experience of such intervals, as if the whole notion of time had simply been given too little attention in the first place, unless its very design was meant to cause deep ambivalence and dismay.

At the hospital, for instance, the day might feel too long, the night too short, or the night was too long, followed by a series of short, secondary nights and then a sudden flash of day, which seemed to never end. People expired at a steady rate, or the night was too long, followed by a series of short, secondary nights and then a sudden flash of day, which seemed to never end. People expired at a steady rate, sometimes man and woman, sometimes man or woman, sometimes animals, and sometimes children. The rate, faster than they were being born. An accurate measurement of the true passage of time could not be obtained. The fourth interval was determined to go unnamed. The rate was fabricated with real water. Such a democratic approach to detail is troubling. It amounts to a celebration of technique, suggesting a creator slightly too satisfied by method, showcasing a skill, as if the making of something mattered more than that thing’s purpose.

Attention to detail on Randall’s Island was staggering. An actual landscaping firm had been hired to produce what was probably considered actual landscaping. Grass and pavers, shrubbery patterned after a shield. From high above, the topography achieved a devastating insignia, most awful to behold, but no one was privileged to this view. As with many buildings, something unbearable was inferred. You didn’t need to see or even know about it. It was inferred, and that was certain.

The streets surrounding the hospital, themselves authentic in materials, were given actual names, and the names were ratified through constant use. Advanced surveillance revealed significant adoption of the streets, with a troubling degree of realism. Pedestrians questioned there showed no sign that they were aware of being part of the exhibit. In some ways, these pedestrians were perhaps the exhibit’s most striking feature, a clear sign of the new kind of work being done today. Certainly a trend can be observed in which the civilian members of an exhibit insist that they have arrived be unnamed. That whole part of the world could feel likewise unnamed. On a map the area would be blurry, never quite coming into focus.

It is hard to escape the feeling that this is a weakness of the project, no matter how profoundly ambitious it is to create a world, build things in it, and then allow life to occur. It is a clear weakness to create an erratic, confusing experience out of time, to give each creature an apparently unique perception of time, and then to make time itself inconsistent, poorly designed, and finally simply too hard to believe. An unfortunate weakness in an otherwise impressive project.

Moving inside, the hospital featured people bent over each other in postures of carnage. These exhibits did not end, which makes it awkward to comment on them now. One must believe that nothing of interest will ever happen again in order to declare anything of substance now. The trick behind work like this is how foolish it makes you feel for trying to observe anything at all about it. To be invited to the exhibit, you had first to fall ill, then be carried there in an ambulance. Or you needed to apply for a job and then actually perform it, which guaranteed a bias that prevented lucid reflection on the hospital itself. To join the exhibit was to recuse yourself from a rational state. This would explain the long lines, the carefully-constructed illness narratives, the displays of frailty. It is perhaps no accident that leaving one’s home is also called “joining the exhibit.”

Testing revealed that the inhabitants of the island came from all over the world. They had been born into different families, grown with food, sometimes managed by handlers, other times left alone. Some of them actually existed. No real pattern in their origins could be detected.
The doors to the hospital operate just as one imagines real doors should. Inside, a series of smaller exhibits take shape as you approach them, then vanish from view when you turn your back. This effect — objects vanishing if you are not looking at them — is ingenious, and so easy to take for granted.

In one piece, set inside an authentic-looking room, a man in doctor’s costume approaches the sick bed. This is not a painting. The man seems made of a soft, fleshy substance. You have this feeling, looking at him, of wanting to touch him, but not romantically. Actual vocal noises emerge from this piece. Heaps of cloth surround the sick bed, faces buried inside. These are ostensibly the loved ones of the patient, collapsed in postures, one must guess, of grief. The cloth would appear to be real cloth. It’s uncanny. Even the bed seems fabricated of actual material: steel, plastic, and cotton. One is impressed by the trouble such fealty must have taken. The hospital makes a mockery of convincings. The hospital achieves believability so easily, with such facility, it seems to suggest that believability is a terrible criteria for our daily lives, one we would do well discarding, and yet everywhere throughout the hospitality believability seems to be what matters most. Perhaps the hospital satirizes the idea of being alive. Certainly there is a critique, in this piece, of waking up.

So much of the piece is well made, not in the classical sense, but in the brutal, violent sense. It looks as if it was made by skilled craftspeople at gunpoint. The hospital looks like it was built at gunpoint. The people inside the hospital look as if they were born at gunpoint. The hospital looks as though it was positioned on Randal’s Island at gunpoint. Even the island, when one examines its undercarriage, when one swims its circumference, seems to have been assembled, piece by piece, at gunpoint, dropped from the sky at gunpoint, made to decay just as real things decay, at gunpoint. One looks at such a hospital at gunpoint, then one walks away at gun point, travels home and goes to bed at gun point, only to wake up years later with the same awful gun held to one’s head.

The hospital is deliberately made to outlast us, to still be standing when we’re gone. There is a clear critique of the ephemerality of people, the way they reliably perish. The hospital would seem to gloat; not in the personified sense. Can a piece like this be faulted for its desire to feel more lifelike than we do? One pleasing feature of the piece is that you can reach into the space surrounding the bed. You cannot touch the bed itself, for some reason. The bed is off limits. But you can handle the space around the bed, digging your fingers into the cloth where the patient’s loved ones are hiding their faces. With practice and focus, you can feel the faces inside the cloth, and they seem to actually respond to your touch. One has one’s hand kissed. One feels tears against one’s palm.

Years later, as the piece ages, the room and the bed and the cloth are gone. We do not see them removed, they never appear to decay. But they do not survive the passage of time. What remains of the piece are the life-like bodies — living bodies, one surmises — hovering in space. The floor is gone. What remains of the hospital is too little to remark on. It would seem that the entire hospital has been removed with surgical precision. The area where the hospital was is brighter than what surrounds it, as if a piece of furniture has been moved across a wood floor, exposing an un-lived area just waiting to catch up to the rest of the world.

In the piece, the man who once wore the doctor’s costume but is now incomplete (naked would seem to be the wrong word, since he lacks finer detail), approaches the patient who, years ago, because of his bedclothes, was not visible at all. Now we can see him and the effect is terrible. The patient’s loved ones, no longer hidden in cloth, but not naked either — unborn is how they also seem, their mouths unfinished, their hair not quite resolved — exist in a tangle on the side of the patient’s bed. The hospital and its host island are gone. The nearby island, tethered to a possible continent, is gone, and the extreme distance yields nothing to the observer. All that remains are the few people in what was once a room but is now nothing, even as these people begin to fade and soon leave just pale shapes, themselves dissolving slowly into nothing that can be named.

The hospital recalls a time when the entire world was referred to as Potter’s Island. A certain era is evoked when we lived on the graveyard. The hospital suggests that if there are zones of earth in which bodies are not buried. It is a myth that some areas of the world are graveyards while some are not. Do the math. One might accidentally, and infrequently, walk across a plot of earth in which, upon which, people have not been smeared away, hidden in soil once their time finished.

One strains not to be too judgmental of such work. While the project is ambitious, it is deeply imperfect. It celebrates the sorrow of knowing nothing. It revels in bafflement. It asks us to admit that we might not really be living. It seems to invite us to die without understanding even the most basic principles.

Perhaps we might be more sympathetic of the creator. Water is so hard to get right. It is difficult to do shorelines. The horizon is next to impossible. Horizons have never been done well. They cannot be forced, but so often they are forced, and then they are disgraceful. Hospitals are tricky, but not just hospitals. The people in them. The people outside them. People, in or out of buildings, on the ground, floating, at rest. People cojoined, people alone. Such a disgrace when they are not done right and they have never been done right. They are done badly, all the time, and then soon that is simply the way people are always done — with bodies and eyes, with feelings, so finally conventional, so deeply unimaginative — and something disgraceful becomes the norm. The norm is the hospital. The norm is people on their beds, having trouble breathing. Not breathing, in truth, is the norm. If a true norm must be spoken of, it would have to be not breathing, not moving, no longer living. Taking into consideration all the people who have ever lived. The norm would be to be dead. One must admit that being dead has become the norm.
A vacant hospital might have been easier for this artist, set in a vacant lot, itself situated in an empty space free of obstacles, a space so pure that no one could enter it. Perhaps no one could even know about it. A smaller, contained project, through which this creator could test out ideas more safely. Vacant vehicles to flow in and out of the empty hospital, across transparent roads, discharging vacancy, creating no impact whatsoever on the surroundings, which has never been achieved. That might have been a better apprentice work. Or simply the hospital itself, without a lot, without a site, absent a landscape. A real hospital for today, satisfying all of today's true needs, if that's not too much to ask. A hospital twisting in space. Less complicated. But space is hard. Rarely has depth been done well, for instance. Ever? Often it seems so melodramatic. One cannot recall a time when space has been done well. Sometimes evening is believable. Sometimes. Should one — one must ask — stop desiring what has never been achieved? Is this hospital, in its near miss of authenticity, meant to remind us how finally unreal everything will always feel, or is such an effect simply too old-fashioned to commend?

One thing this piece does impeccably well is to use wind to create feeling. On Randall's Island a wind, created in the usual way, travels around objects, cooling them, but that's not all. The wind is not created with any special technique. It is as technologically simple as it ever was, but this creator has a special feel for the use of wind. This creator is, without question, a genius in the use of wind in spaces both outdoors and in, a wind that follows one home from the hospital, across the realistic waterway, back to the adjacent island, itself so deeply real one feels an enduring confusion, a confusion one must now call wind-caused. This creator has fashioned a wind that does not leave you alone, even as you enter your home, which was created especially for this project, and even as you crawl into your highly vivid, full-scale bed made of real materials, this wind follows you in, encircling you, holding you rather coldly as you wait, perhaps forever, for more understanding. Even if one will never arrive at this fuller understanding, this wind makes one certain that such an understanding is out there, however finally unavailable to people like us. Even if there had never been a hospital, one must finally admit the brilliance of this wind. One must finally, and sincerely, say "Bravo."