Tape 21: Aiko and Keri Interview - Transcript, Edited

A: = Aiko Suzuki K: = Kerri Sakamoto M: = Midi Onodera

A: "Our views about cancer, and the metaphors we have imposed on it, are so much a vehicle for the large insufficiencies of this culture, Our shallow attitude toward death, for our anxieties about feeling, for our reckless improvident responses to our real 'problems of growth,' for our inability to construct an advanced industrial society that properly regulates consumption, and for our justified fears of the increasingly violent course of history. The cancer metaphor will be made obsolete..."

K: ...I thought I'd start by asking you about the title of this work and what its significance is to you.

A: And you're talking about "Bombard Invade Radiate"... these seem to be three terms that are used very frequently in cancer issues, treatment as well as diagnoses. They seem to be the most powerful words that have a relationship to militaristic overtones.

K: And so you said you were very influenced by Susan Sontag's book Illness As Metaphor.

A: Yes, yes, she wrote about illness and the history of the use of metaphors for illnesses like TB and historically how they have sort of put certain illnesses into a very frightening, negative sphere.

K: Right, so... um... Maybe you could describe the work to me cause I'd like to hear how you'd describe the elements of the work.

A: Well, you know it's really interesting because I had thought of an exhibition when the simple act of discovering a lump can change your life dramatically. It means that your life is suddenly finite, it has a time frame. And I thought of my experiences with the disease and how it could be translated into art as a statement of terminal illness and all the ramifications that that has on individuals. And Initially the works were more benign, they were more of a waiting kind of passive structure. But as the disease progressed and as I waited for being offered a show my thoughts changed completely in terms of my relationship to the disease and the experience so that by the time I was offered the show things were a bit different, they were more dramatic. And with the Sontag's book also I was really quite shocked that the use of militaristic terms every time I visited my oncologist, it was really quite shocking, so the show shifted into a bit more of an installation focused on words and metaphors.

K: So you actually used excerpts from your conversations in your sessions with your oncologist in the piece – maybe you could describe that.

A: Well I've had three what I call listening posts built, each one containing a small speaker. And my daughter and I have worked on grabbing sound bites from some of the interviews. Specifically when the oncologist used metaphors, he used a lot of metaphors, which I found wonderful; you know we were excited about hearing so many samples. So I have three columns with three speakers and they'll be played very low so that people have to go up to hear, it's like eavesdropping, listening in on extremely private conversations and these sound listening posts will give a context to the whole show.

M: Oh yes, how about working with Chiyoko, your daughter, in terms of that?

A: I think it was very difficult for her, especially the listening posts because she had to listen to the interviews with my oncologist over and over again and I think she had eaten a hash brownie one night and was trying to work on it and burst into tears because she said she just couldn't stand listening to it anymore. That part was very difficult for her, but I have complete confidence

in her aesthetics and she tends to be minimal, the way I am minimal, and there was a lot of back and forth, but I trusted her instincts. I'm quite happy with it. We'll find out when we get to the gallery how much sound we will in fact use besides the three listening posts.

K: And there's also the video projections, the three video projections. Maybe you could talk about each of those thee images.

A: Right which loosely we've just called "Semaphore," the Semaphore piece. This has gone through a massive change, much to, well maybe not the chagrin of the videographer Midi, who has made it possible. I don't think I would have arrived at the work had I not been working with someone like Midi because video is not my medium and I had a concept we did a shoot at Hanlan's Point in Toronto and after editing and starting to work on creating the piece and putting get together, because I have always worked spontaneously, it's not until I saw images coming together was I able to say this doesn't work... or arriving at what I was really looking for... it's a terrible thing to be working with a filmmaker and not have a clear idea but to be feeling it out. It could be incredibly expensive, and I had the wonderful opportunity to collaborate with someone who was wiling to just go with it and used a lot of her own personal time on this aspect of it. The approach was very forgiving for me so it took a while to finally arrive at imagery that seemed to be right. Presentation went through a lot of changes also. You have the video but how will you show it.

A: The words "bombard", "invade", "radiate", how do you present that in a gallery setting? How do you present how awful the words are? What it does in the whole treatment of the illness, the experience of the illness, they're warnings also of what you're getting into and, again, to connect it with the military, you know, semaphore--- using the body, using flags to warn, to announce, seemed to be a good way to do it.

K: So it's interesting because you're both sort of working with metaphor, at the same time trying to subvert that, or call attention to the sort of dangers of the metaphor...so in each of the images you are in progressive states of disrobing, unsheathing the body. Why... what was important about that for you?

A: You know, before I was diagnosed I had never seen a mastectomy, I had never seen a body that had surgery to eliminate to get rid of, to cut out, to amputate the disease and it was an absolute shock. It I suppose can be a shock, disgusting for people to be seeing a body that has had such radical treatment and I thought that as the words were being signed it would be a natural thing to reveal the surgery and not in a frightening way. It's not in your face, its not overt, its subtle in fact you have to look really close to see it, but it gave me an incredible sense of joy to stand naked, to reveal the surgery and ... share it.

K: And there's the third element of the show with the war footage, like the battle footage encased in the metal sculpture. Could you talk a bit about that?

A: Again this is relative to the cancer treatments. And again science is a double-edged sword; it can be used for good or bad... And treatments have, Chemo therapy has... one is sort of just infuses with poisons, toxins in the body and that's a pretty violent treatment when you think about it but that's the only available today so I was relating it to bomb drops.

A:-Midi, come in any time.

M: Well in the bomb piece you've used text - can you talk about that because in the other piece you don't use text and as far as your previous work goes it's text-less.

A: That's right, and I can be grateful to you because we were looking at the image and there seemed to be something missing because it was just likes, "so?" Okay planes flying in formation,

dropping bombs, bombs falling, explosion, and then it would repeat. And there seemed to be something missing and, again, because I was working with a filmmaker who is also a very good writer, she suggested we experiment with words and just wrote in one word or two words or whatever to just elucidate what it was saying, to give it more power. And she came up with the word "witness" because we are witnessing the whole process of science and medicine and killing and saving, you know the whole treatment process and it worked.

K: I was wondering too, Sontag's book, she wrote it in 1977 and it was published then and it seems to me that things have changed somewhat, but not as much as probably she would hope, and I just wonder, when you think of now how many people, I mean there's almost zero degrees of separation for so many people, anyone almost that you talk to you've had cancer or someone you know has had cancer and yet its still shrouded in this certain degree of myth and mystique but do you feel like there's been... I mean it's hard to say because you weren't experiencing this back in the late seventies but...

A: It's not that "Big C" people don't talk about, I mean, there was a time when people wouldn't admit to a family member having cancer. It's like admitting to a family member who had a mental disorder, y'know, it was something that was full of shame and embarrassment. So in that respect I think people have come a long way, they've become more advocates for themselves and more knowledgeable but there is still a long way to go.

[CREDITS]