

Institution: University of Hertfordshire

Unit of Assessment: Panel D (34): Art and Design: History, Practice and Theory

Title of case study: Anarchy in the Organism: Challenging perceptions of cancer through art

1. Summary of the impact (indicative maximum 100 words)

Professor Simeon Nelson's research into cancer from multiple perspectives led to the creation of a site-specific artwork, *Anarchy in the Organism*, a genuinely successful interdisciplinary project in which oncology, visual art, music, computer science, psychology and sociology came into enriching interaction. His artist's residency at University College Hospital London (2011–12) revolved around cancer patients and the fact of cancer, and was informed by patient-led discussions and interactions with carers, families, doctors, nurses, psychologists and research scientists. This consultative process, and the resulting public art installation, radically altered patient and clinician perceptions of the disease.

2. Underpinning research (indicative maximum 500 words)

Anarchy in the Organism was a commissioned work arising from a Wellcome Trust-funded residency at University College Hospital London. Awarded to Professor Simeon Nelson through a competitive process, the initial stages of the project began in 2010. The artist's residency ran from April 2011 to April 2012, and a publicly displayed art installation was in place from the end of the residency until the end of May 2013. The artwork, consisting of four 55-inch video screens embedded in a geometric pattern displaying abstracted organisms, was installed in the street-facing windows of the newly opened Macmillan Cancer Centre on Capper Street, London, the most advanced cancer centre in the UK.

Complexity theory, an integrative way of understanding whole systems and their parts, underpinned the thinking behind *Anarchy in the Organism*. The theory describes a reality that is non-deterministic: the future cannot be predicted, there is no linear causality, and indeterminacy, chance and choice are intrinsic to being in the world. Nelson used this theoretical approach as a way of discerning underlying similarities in disparate phenomena to confront the possible meanings of cancer from scientific, social, cultural, ethical and existential perspectives.

The resulting art installation was informed by current research into cancer as a complex system, particularly the work of UCHL's biomedical imaging centre. Nelson entered into collaborative conversations with research and clinical staff as well as one-to-one, patient-led interviews in his studio, as a method of understanding the subjective experience of the disease. During these latter sessions, he asked patients to reflect on what the disease meant to them, if it had altered their perceptions of their own bodies, whether it had caused a shift in their understanding of what it meant to be alive, and how they visualised cancer.





The actual making of the artwork followed these conversations. Simon Walker-Samuel, consulting scientist at UCL, created a series of algorithms that generated a random depiction of cell growth, which in turn would sometimes mutate, mimicking and depicting the development of cancer. Sited in the Cancer Centre's street-facing windows on Capper Street, the *Anarchy in the Organism* installation is a synthesis of algorithmic video and applied pattern, linking it to its architectural context and transmitting ideation of cancer as a complex system, situating the disease within a wider context of intricate, evolving systems, from cities to trees to landscapes.



His interactions with staff, patients and others played a vital part in Nelson's creation of a work that attempted to reconcile cancer as a normative part of being in the world. The computer-generated organisms, shifting and changing on the four screens of the Capper Street installation, demonstrated growth, mutation and decay as normal aspects of being alive. Accompanied by a haunting soundscape composed by Rob Godman and projected through window-mounted transducers, the organisms endlessly transmuted, developing cancer to varying degrees. Coded within the parameters of complexity theory, their survival rate is similar to that of the general population.

3. References to the research (indicative maximum of six references)

Public Artwork

Anarchy in the Organism. Computer-generated sound and video installation, Macmillan cancer hospital, Capper Street, London, 15 April 2012 to 31 May 2013. Coding by Nick Rothwell, music by Rob Godman.

- REF2 Output

Publication

Nelson, Simeon (ed.), *Anarchy in the Organism* (London: Black Dog publishing, 2013). ISBN 9781908966285

Nelson, Simeon: 'Cancer and Complexity in an Unfolding World', in Simeon Nelson (ed.), *Anarchy in the Organism* (2013), pp. 24–36.

Symposium

'Anarchy in the Organism: Cancer as a Complex System', Wellcome Collection Conference Centre, London, 15 June 2012.

Funding

UCLH Arts was awarded £30,000 for the residency (Wellcome Trust Arts Award, April 2011–April 2012).

4. Details of the impact (indicative maximum 750 words)

Dissemination

Nelson's 2011–12 residency included several presentations within and outside the hospital. A public symposium was held during the London Creativity and Wellbeing week in 2012, at which around sixty project collaborators, patients, members of the public, clinicians and scientists shared ideas about the science and art of cancer. A *Huffington Post* video of the installation has received over 1,500 views since being posted online in April 2012, further spreading awareness of the work, and the installation has been booked for the Kings Place Festival (London) in January 2014.

Reach

The work's siting, facing onto a busy street just off London's Tottenham Court Road, made it accessible to hospital visitors and passersby. An independent market research survey carried out in May 2013 counted, during a six-day (28½ hours) observation period, 5,295 passersby (average: 185 per hour). An estimated 15% of them actively looked at the artwork, and 60% of the 88 people surveyed confirmed that they used the route regularly and had viewed it before. Although located at a single site, the artwork's reach over the 14-month display period was therefore considerable.



Two hundred patients, staff and others completed a questionnaire in the same month. As the installation faced outwards rather than into the cancer centre, the percentage of this group who had previously seen the artwork was lower, at 12%.

Significance and Impact

The Public

A month after its unveiling in 2012, a *Huffington Post* reporter witnessed the work 'confounding and delighting passersby', and noted that 'the reactions to the piece vary from none, to confusion and long, drawn-out stares'. The questionnaire gave depth to these responses: 80% of members of the public surveyed said the artwork was good for the centre (5% said not; the remainder were unsure). The majority offered positive impressions, saying, for example, that 'the visual aspect of cancer is good', 'I like that it communicates cancer in a new way', and 'All art is good art in hospital . . . This piece is very stimulating.' Some would have liked more explanation, or thought it 'too abstract', but others rose to its challenge, stating: 'The abstract nature of the piece really appeals to me. This challenges my view of cancer', and 'I like the way the artwork deals with such a taboo subject in a straightforward way.'

Cancer Centre Patients, Carers, Staff and Visitors

The majority (44%) of the 167 patients, staff and others who were interviewed in person were patients; a further 23 staff completed the survey by email. Again, most (73%) thought it was a good artwork for the cancer centre; the 15% who disagreed found the reminder of cancer 'unwelcome' or 'comfortable', preferring 'something to distract rather than highlight cancer'.

Even those hostile to the work engaged even more fully with it than the public viewers. Many offered thoughtful, outspoken or animated opinions: one was 'shocked by the piece', thought it 'could attract controversy', and 'didn't wish to see cancer as a glamorisation', but conceded '[I] can see how it helps non cancer patients understand cancer.' Several talked of its lifting a 'taboo', one noting that 'relatives used to talk about it in hushed tones so anything that changes people's perception of cancer is good'. Another said: 'Anything that highlights the reality of cancer and explains cancer is a good thing, we've swept cancer under the rug over the years.' Yet another praised 'the idea that cancer is an aberration', and especially liked 'the audio component relating to the composer's relatives last breath being incorporated into the piece'.

Additionally, the patient-informants who had informed the work's creation reported that the residency, and their contribution to it, gave them a voice, counteracting feelings of disenfranchisment during their treatment.

Senior professionals at the centre were very positive. Writing for the *Anarchy in the Organism* (2013) publication, Simon Walker-Samuel said that, as a research scientist, his conception of cancer had been enriched by working on cancer at an abstract level of mathematics and aesthetics, and by encountering the patient perspective. This was echoed by survey participants, with one calling it 'a very challenging piece . . . I think that it is highly successful'. Another reported that patient feedback about the artwork 'is that it is highly valued . . . I think it could be described as the bravest work'. Understanding the patient perspective was important for yet another: 'It brought me close to working with patients who were suffering with cancer and . . . in terms of my emotional understanding I think it definitely assisted with that'.

Artworld and Other Professionals

Six influential people involved in the commission were also interviewed:



[text removed for publication]

All spoke of the work's importance in terms of provoking dialogue, its head-on engagement with uncomfortable subject matter, 'opening up the territory', and its 'profound effect' on those involved in its realisation. One said that, in artistic terms, it was 'a model of intelligent collaboration'. [text removed for publication] was particularly supportive:

One of the things we find about people with cancer is that if in their mind the cancer is some horrible, evil-smelling, pussy fault caused by them . . . then it is an awful feeling to live with . . . If they understand that it is something that is part of them and that it is a fault that has happened in terms of accumulation of growth, then it is still killing them and it is still painful and it is still a horrible thing to do, but the feeling is different . . . that is why I feel this art does something for them.

5. Sources to corroborate the impact (indicative maximum of 10 references)

Project Website and Blog

Website: http://anarchyintheorganism.tumblr.com/

- Includes links to (anonymised) patient interviews

Report

Alistair Nicoll, 'Anarchy in the Organism: Impact Report', August 2013, market research report commissioned by the University of Hertfordshire.

Media Coverage

Melanie Hick, 'Simeon Nelson's Anarchy In The Organism: Digital Cancer Art At UCL Hospital: WATCH', 2 May 2012, *Huffington Post*:

<www.huffingtonpost.co.uk/2012/05/02/simeon-nelson-anarchy-in-the-organism_n_1471009.html>

Huffington Post video (interview and discussion with Simeon Nelson about Anarchy in the Organism), April 2012:

http://on.aol.com/video/anarchy-in-the-organism-artwork-at-london-cancer-hospital-517348841

Simeon Nelson, Interview, BBC Three Counties Breakfast Show, Friday 29 July 2012.

Other Corroboration

Gilly Angell, 'A View from the Other Side: A Patient Perspective', in Simeon Nelson (ed.), *Anarchy in the Organism* (2013), pp. 18–23.

Anarchy in the Organisation public symposium, London Creativity and Wellbeing week, 13–20 June 2012:

<www.creativityandwellbeing.org.uk/week/events/anarchy-organism-aito-cancer-complex-system>

Kings Place Festival, London, January 2014:

<www.kingsplace.co.uk/whats-on-book-tickets/music/anarchy-in-the-organism#.UlbYbRBRGdk>