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The Resonant Museum

Berlin Conversations on Mental Health

Edited by Diana Mammana & Margareta von Oswald

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The Resonant Museum



# The Resonant Museum

Diana Mammana and Margareta von Oswald

Gropius Bau, 15 October 2022. During the panel discussion "Claims for a Neighbourhood Policy", one question emerges as the focus of interest: how can museums make themselves useful for society? What can museums contribute to good neighbourship? Mazda Adli, a psychiatrist at the university hospital Charité – Universitätsmedizin Berlin, is adamant: every institution – whether a theatre, a museum or a cultural centre – has a public health mission and an important role to play in mental health. They are places of encounter and exchange, where social isolation can be counteracted. Anna Yeboah, coordinator of the project "Dekoloniale – Memory Culture in the City", interjects. Speaking from the perspective of the Black community, she states that a museum can be many things, but it is most certainly not conducive to mental health. If she were to take her younger siblings to the German Museum of Technology or the Humboldt Forum, then a crisis discussion would most certainly ensue. The children wouldn't be feeling the best afterwards. Further comments follow from the audience: the exhibition is high-threshold and elitist, and there's a need to speak about classism.

The discussion was part of the event programme accompanying the exhibition YOYI! Care, Repair, Heal (September 2022 to January 2023). In the context of the exhibition, the Resonance Room was developed. It was a cooperation project between the Gropius Bau and *Mindscapes*, Wellcome's international cultural programme about mental health. The Resonance Room was dedicated to exploring the topic of mental health in Berlin and is the starting point for this publication. In the following we will present our curatorial approach and discuss how the museum can become a socially relevant place capable of effecting change.

Every narrated, present history in a museum excludes another. As Aleida and Jan Assmann write in relation to processes of canonisation, the museum also operates with clear lines of demarcation: what "inevitably" emerges is a "dialectic between what comes in and what stays out" (1987, 11). Whose history is told in the museum? Who feels comfortable, at ease there? Who goes there? Amongst whom does the museum trigger a sense of disquiet (Kazeem et al. 2009)?

What may seem dumb and funny to some may be violent for others. What may seem deviant is someone's lived reality. What is unknown to one person is another person's canon (Tinius & von Oswald 2022, 19–20).

Whether one feels comfortable in a museum or not depends on the person using it. Through their architecture, the strategies behind their collections and their exhibition concepts, museums mirror and configure the ways a society understands the past, the present and the future. As places where authority reigns, they contribute to the specific perceptions of science, art and culture, and mould national and local identity. They are considered "truth machines" (Mörsch 2009, 10) and thus stand for objectivity, for the beautiful and the valuable, and they determine what is worth preserving. At the same time, museums are places of dispute and negotiation. They create friction and tension and, in their positioning, mirror issues of how to approach identities, memory and history, as well as inclusion and exclusion in society. The question as to the role museums could play in society has been prevalent since the 1970s at the

latest. Is the museum a forum or a temple (Cameron 1971)? Is it about representation, contemplation, education? Participating, sharing, co-creating? Consumption? The relevance of these questions has become abundantly clear in recent years in the conflict-ridden debates taking place within the International Council of Museums on how to define the museum (see, for example, Etges & Dean 2022). In the German-speaking context - often inspired by British and North-American debates and practices - curators, mediators and researchers such as Angela Janelli, Angeli Sachs, Carmen Mörsch, Christine Gerbich, Natalie Bayer, Nora Landkammer, Nora Sternfeld, Sharon Macdonald and Susan Kamel, along with numerous allies, have called for the museum to be understood as a place of negotiation and participation, a place where conflicts can be played out, debated and heard, and indeed made visible. Museums are called on to become socially relevant, democratic places capable of effecting change, which allow, demand and foster co-creation, and open up to processes of learning and unlearning (Landkammer 2019, Sternfeld 2018). The fact that these demands and debates have been going on for decades shows that, although museums adapt, they are also resistant to change. The challenge to define the mission of the museum is an ever-present in museum histories.

The Gropius Bau is confronted with these questions not least because of its history as a museum. Today, the Gropius Bau calls itself an exhibition hall above all due to the absence of collections. It nonetheless exemplarily reflects the changing tasks of museums: as places of imperial collection and science, as production sites of collective identity, as centres of learning and service-oriented consumer temples. The self-understanding and roles of museums change, overlap and intersect. Until the curator and art historian Stephanie Rosenthal initiated an exclusively artistic programmatic orientation in 2018, in whose context the projects presented in this book were realised, since its opening in 1881 as the Kunstgewerbemuseum - the Museum of Decorative Arts - the building has hosted very different institutions (Beier & Koschnick 1986, Kampmann & Weström 1999). After the Museum of Decorative Arts moved out in 1921, the building was used until 1945 by the Museum of Prehistory and Early History, the East Asian art collection of the Völkerkundemuseum and the art library. Between 1933 and 1945 the Gropius Bau found itself in the midst of the "organisational centre of the National Socialist politics of persecution and murder" (Tempel 2019, 95). The School of Applied Arts, accessible through a bridge from the Museum of Decorative Arts, was occupied by the Gestapo, the secret police force of the German state, in 1933. After years of desolation, which gave hobby archaeologists ample opportunity to excavate the remainders of buried museum collections (Stiftung Preußischer Kulturbesitz 2020), renovation work on the Gropius Bau began in 1978. Until 1989 the building, positioned on the Cold War frontier directly next to the Berlin Wall, served as a temporary home for the Berlinische Galerie Museum of Modern Art, the Werkbund Archive - Museum of Things and the Jewish Department of the former Berlin Museum. Since 2001 the house, now under the custody of the Berliner Festspiele, hosts temporary exhibitions covering a wide range of themes, from archaeology and cultural history through to modern and contemporary art.

Museums exist in resonance with society. With the proposal to understand the museum as a resonant space, we would like to initiate a rethink about the mission and thus the interrelated working practice therein. Pivotal for us in understanding the museum as a resonant place is that an impulse can be formulated which produces an echo controllable only to a limited extent. Resonance allows vibration and relationship. According to the sociologist Hartmut Rosa, resonance is characteristic of a mode of enteringinto-relationship. Resonance does not aim to be in unison. On the contrary: negotiating and engaging with difference is the very prerequisite for resonance. Only through encountering the "genuinely Other as other" and interacting with it can transformation take place (Rosa 2019, 21, italics in the original). To enter into relationship – into resonance – means to be in motion, to be open to difference and various forms of knowledge and experiences. The resonant museum thus approaches the world, and in doing so goes beyond itself.

Resonance therefore also means a willingness to get involved in encounters. And this is what curatorial work can respond to. A core task of curatorial work is to mediate between the inside and the outside of the museum and to help shape the museum's degree of porosity and permeability (Sachs 2017). Drawing on Beatrice von Bismarck's understanding, curatorial practice can be thought of as ensuing from relationships (2021). These relationships bring into contact different actors, both human and non-human. Curators initiate, establish and administer these relationships. Curatorial work thus organises constellations of relationships and makes the generated knowledge public. The role of the curator is one that is not rigidly codified and defined but versatile. It is productive in intermediate positions. Within institutional logics this mode of curatorial work often causes confusion, so it has to be explained and defended. In a curatorial field pervaded by hierarchies, forsaking well-practised roles often causes uncertainties. A prerequisite for this working practice is an appreciation of being-in-between.

The form of our curatorial work emerged out of two contexts: firstly, the research placement at the Centre

for Anthropological Research on Museums and Heritage (CARMAH), and secondly, the institutional position of the Resonance Room in the Gropius Bau. In developing the Resonance Room, we tried out various approaches in our efforts to understand mental health in terms of its relationship to society. The goal was to conceive the museum as a tool for social change (Sandell 1998, Simon 2014) and to ask how it can make itself "useful" (Lynch 2021, 14). The starting point for this research taking place in a museum was cooperation with research institutions and protagonists from culture, activism, politics and health in Berlin.

The sociologist Hella von Unger describes participatory research as "research approaches which investigate and influence social reality collaboratively" (2014). This dual objective to comprehend and change reflects our own understanding of museums, which - through constellations of things, spaces and people-identify and represent realities, while influencing reality through their action. Our mode of working has its locale in anthropology and thus reveals connections to ethnographic research methods. Participative and ethnographic research practices share the aim of generating, in trust-based relationships, knowledge that is anchored in everyday life; at the same time, as the anthropologist Kirin Narayan describes ethnographic work, this means that those involved are "perpetually pulled beyond the limits of one's own taken-for-granted world" (in McGranahan 2014). What interests us in ethnographic work is how we can turn towards the conditions and experiences of life as it is in fact lived, and how we can commit "to trying to see and experience life-worlds from the point of view of those who live them" and, just as crucially, from "within the context of which they are part" (Macdonald 2013, 9).

Like curatorial work, ethnographic research is confronted by the challenges and issues entwined with visibility, authorship and negotiating representation. Questions of interpretative prevalence are pivotal, which in anthropology have a tradition, in its engagement with marginalised knowledge. As Bernadette Lynch has put it, "museums are essentially an exercise in ethics" (2021, 7). The quality of work becomes apparent in the degree of trust in the network of relationships and requires a focus on the process more than the result: with whom and how are relationships established? With how much sensibility are they introduced and fostered? How are relationships negotiated in the process of knowledge production and how are the translation processes carried out? Participative research is an "explicitly value-oriented undertaking" (von Unger 2014, 1). Different interest groups shape the research questions and hypotheses and, as part of the exhibition, are integrated into the museal and scientific narrative. Conversely, participative research enables social participation - a situation that is to be brought about in museums mostly through the work of mediation.

Participative research reinforces an understanding of mediation as a knowledge-producing, involving practice. The topics broached are made compatible for different realities of life, and become part of them. Relationship webs which had yet to exist are created. And it is first through these that a socially relevant effect can be generated: for others make the museum, come to the museum, identify the museum as their place. Through the principle of involvement in the process of knowledge production, mediation work becomes curatorial work (Mörsch 2009). The task of mediation is thus not to comment on the curatorial work or to operate by targeting a specific group as the advocate for an audience but rather, as part of curatorial processes, to produce, form and extend discourses and contents.

To operate in resonance – in contact with the outside – therefore means to challenge forms of expertise. Including diverse experiences calls into question which knowledge is to be viewed as legitimate and how concepts of knowledge can be extended. Who is accorded visibility and how this is done puts to the test how participation is understood and implemented. As we propose it, the mode of curatorial work thus demands a mode for dealing with the (un)foreseeable echo. Responsibility is delegated – or relinquished. This means: being open to misunderstanding or even incomprehension, to disagreements and contradictions, and thus to the process per se, and in turn accepting it as part of curatorial work. And not least acknowledging that the material results in the exhibition are, to a certain degree, unplannable (Coutinho 2017, 71).

The need for museums to open up is particularly urgent in the twenty-first century because public places for dialogue and exchange appear to be rapidly dwindling in an increasingly polarised society. "How do we come together in a world that isolates us?" asks the curator and educator Nora Sternfeld (in Tinius & von Oswald 2020). Multiple crises mean that it is difficult to see the future as open and full of promise, charged with "utopian energies" (Graf 2021, 10) – instead it seems threatening and dark. Museums are informed by democratic values and ethical principles, and they have the potential to support social, political and ecological change (French 2019). Taking up Richard Sandell and Robert R. Janes, we wish to understand museums as places of the commons - a resource that potentially belongs to and can be used by all members of society, and reciprocally has an impact on them (2019, 17). Here we can have meaningful encounters with ourselves (Coutinho 2017). As a space

that takes culture seriously in all its vitality, the resonant museum can be understood as a place where knowledge is produced interdependently and differences encountered.

The contributions in this book are based on conversations conducted with Berliners over the last two years. Through the constellation of its respective participants, the conversation enabled disciplinary and professional boundaries to be crossed, moods and atmospheres to be captured, and "unlikely alliances" to be forged, as Danielle Olsen characterises it in her introductory piece. Our method sought to show the constellations of different expertise on mental health in Berlin. Who speaks? Those speaking in this book describe themselves as alternative, poor, discriminated against, migrant, marginalised, privileged or professional. Lived experience and theory-guided contributions enter into dialogue and meet on the same level. To speak about the topic of mental health means questioning essential aspects of how we live together. The conversations revolve around the everyday working world, discrimination, gentrification and social inequality. Researchers and scientists, social workers, artists and cultural professionals, and people with lived psychiatric experience all expressed their willingness to talk with us: people who move in activist, scientific, or political spaces. They have come into contact with the topic of mental health either professionally or personally; in some cases, the explicit relationship between the participating persons and mental health was produced initially through the project. Some positions are wary and sceptical towards research and the museum, as the conversations make clear.

What does mental health mean for me in my specific context? This question was the reason for holding the conversations and identifying the concepts which run through this book. They encapsulate the key themes from the conversations in the various projects and function associatively. Our own backgrounds in the discipline of anthropology shaped our approach in the field; particularly in the textualisation, we were able to work with "ethnographic sensibility" (McGranahan 2018). In regular consultation with the conversation partners we worked freely with the text. We used transcripts of discussions we conducted or accompanied either in interview situations, discussion groups or public contexts. As a result of the dialogical situations, various text forms emerged for this book. Conversations between a number of persons lasting several hours are combined thematically. Idea protocols describe a consensus in the group and are not assigned to a single author. Arguments from individual persons combine statements they made on a specific theme in one or more discussions. In turn, other discussions are fictive interchanges, put together from different one-to-one interviews, and contribute arguments to a concrete theme. Other contributions again arose out of conversations with the authors and were written by them especially for this book. The conversations are characterised not only by speaking, but also by listening and being heard. Everyday or lived experiences are accorded the same significance as knowledge from scientific research and theoretical considerations on mental health, reflecting their relevancy and parity in the knowledge production on mental health. The free associative approach to the texts and our research data underscores the potential of narration in scientific work. At the same time, the conversations are deliberately construed to the degree that they cannot - and have no desire to - ensure objectivity, authenticity or representativity.

Introductory contributions discuss opening-up processes in the museum and pose the question of how museums can become socially relevant places capable of effecting change. The head of the *Mindscapes* project Danielle Olsen emphasises in her piece *What Can We Do Together That We Couldn't Do Alone?* the necessity of transdisciplinary work to deal with the current problems in the health system. The contribution by Stephanie Rosenthal, *The Museum as a Living Organism*, shows by way of example how she curatorially engaged social issues in her role as director of the Gropius Bau. The discussion with Beatrice von Bismarck, *Stretching, Disturbing, Expanding the Museum*, explores the curatorial field and the main implications of curatorial work as presented by us in this book. *The Resonant Museum* thus shows how changing curatorial work in the museum can contribute to the production of new knowledge.

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# What Can We Do Together That We Couldn't Do Alone?

# **Danielle Olsen**

For the past thirty years, I have worked at the intersection of science, art and policy to raise awareness and take concrete action to address global health challenges. One in four people suffer from mental health issues every year; however, the way we deal with them has barely evolved over the last few decades. Novel approaches are needed to address this. The international cultural programme *Mindscapes* aims to change the way we understand, deal with, and talk about mental health, using a combination of art and science.

In dealing with global challenges, science has influence and power, because it creates a basis of legitimacy for its arguments through evidence. Nevertheless, science plays a minor role in many people's everyday lives and is not always seen as important. In addition, some people feel excluded by seemingly impenetrable expert knowledge, or view science with a certain scepticism. Science and its interpretation of the world are often perceived as systemically biased or one-sided. However, to realise its full potential and have the greatest societal impact, science relies on trusting relationships and should therefore strive to be relevant to a large and diverse audience. Although researchers and funders try, they do not always succeed in making science and research responsive to the needs and interests of diverse communities or in providing guidance to policymakers.

Moreover, the sciences are often perceived as distanced from the private, poetic and political. Yet it is these qualities that are most effective in generating public interest in an issue or in shaping government decisions: a well-told, moving story is more memorable than a list of facts – and this is where the arts come in. Artists offer us different per30

spectives from which we can look at and think about the world in a new way together. They complement the objectivity proclaimed by the (natural) sciences by illuminating stories – subjectivities. These help to create a sense of connection and hope, especially in areas such as mental health.

For mental health research and concrete treatment services alike, one of the great challenges is to strike a balance. On the one hand, it is important to respect the uniqueness and very specificity of each human life. At the same time, it is important to keep an eye on what huge, almost global amounts of data, detached from the individual, can tell us about populations as a whole. To span this arc, *Mindscapes* highlights issues that are both globally present and local and specific in their impact – from urbanisation to racism, discrimination and exclusion, gender, poverty, and the impact of the COVID-19 pandemic on all of our lives.

Mindscapes creates spaces and opportunities for different perspectives on mental health from art and science to meet. Based on artist residencies, Mindscapes is an international cultural programme that brings together partners in Bengaluru, Berlin, New York and Tokyo in cooperation with four major museum institutions. Mindscapes also consists of publication projects, a film that uses crowdsourcing to bring mental health voices around the world to life, concerts, exhibitions and community events. Through these various cultural formats, Mindscapes contributes to promoting diversity and inclusion in mental health research, scholarship and policy. Through these activities, which draw on lived experiences and personal testimonies, *Mindscapes* opens up a multi-layered exchange about what mental health means in different places and seeks to reach as many people as possible with its programme.

*Mindscapes* is the result of three years of enthusiastic work with a group of individuals who share an interest in

mental health research and who are open to diverse forms of expertise and practice. Furthermore, this group is united by their appreciation of the role that public spaces, heritage and the arts can play in connecting people, healing and designing a better future together.

Kader Attia was selected as a *Mindscapes* Artist in Residence for Berlin because of his exploration of how the traces of history affect collective memory and intergenerational trauma in an urban context. Together with a group of curators, Attia, under the direction of the then director of the Gropius Bau, Stephanie Rosenthal, created the exhibition *YOYI! Care, Repair, Heal* at the Gropius Bau (September 2022 to January 2023) and produced new works for it. These explore the collective trauma triggered by the reunification of East and West Germany, which is still evident over thirty years later.

As in the other Mindscapes cities, the work of Mindscapes in Berlin began by bringing together those interested in and engaged with mental health in the city. We organised three online convenings that brought together Berlin experts from different fields and across disciplinary boundaries, focusing on lived experience and marginalised voices. Together we explored how we could overcome institutional boundaries and abolish hierarchies. In this way, it was possible for all participants to shed job titles in order to work together and reflect on what mental health in Berlin could look like. Instead of trying to solve problems, the work at Mindscapes was explorative from the beginning and allowed processes to unfold. In its projects, Mindscapes acknowledges different forms of experiences, practices and knowledge, which, thanks to mutual listening, can create unexpected alliances around common concerns.

Intellectual precision, creative practice, emotional intelligence, and activism from and for communities are

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equally important to us and must work together to advance social change. *Mindscapes* is interested in what is possible together that we could not do alone. Thus, a community of practice has formed around the goals and values of the programme. Margareta von Oswald, the *Mindscapes* Curatorial Research Fellow in Berlin, led the curatorial and research work in Berlin beyond Attia's residency, bringing together disciplines, organisations and individuals in the city to create a multi-layered picture of what mental health means to the residents of this city through the *Mindscapes* community.

I would like to thank Margareta for her thoughtful, caring and imaginative leadership in bringing so many partners together as equals in this project. I would also like to thank Abbie Doran, Carl Luis Lange, Diana Mammana, the Feminist Health Research Group (Inga Zimprich, Julia Bonn), Franziska Anastasia Lentes, Jan Stöckel, Jennifer Hart, Joe Kiely, Judith Galka, Kader Attia, Lea Hartung, Leo Owen, Lewis McClenaghan, Masonde Luteta, Mazda Adli, Megan Challis, Nassim Mehran, Oriana Walker, Pauline Meyer, Sharon Macdonald, Stephanie Rosenthal and Ulrike Kluge.

*Mindscapes* can only thrive thanks to the commitment of our partners. We rely on different networks and invite diverse people with their perspectives and expertise to enrich and shape this project. This book is a wonderful expression of the diverse and inspiring work that has come out of *Mindscapes* in Berlin because of the larger *Mindscapes* community. I am confident that many more culturally significant and productive conversations about mental health research will emerge from *Mindscapes* – about what works for whom, and why.

# **Stephanie Rosenthal**

When I started at the Gropius Bau it was important for myself and my team to create a sense of belonging - to establish a connection to the city and put down roots. Specifically, I mean that it was important to explore issues and themes relevant to me as a person living in Berlin. That was the vision - to create and foster a feeling of belonging here. To achieve this, we have worked on the connection between space and place. We have focused our attention on how to interact with the building. At the same time, it was crucial to reflect on where we are actually located in Berlin. In turn, this has an enormous amount to do with community - the community that exists in the vicinity of the institution. Making connections to the neighbourhood was key in this respect. And it also meant giving due consideration to how we can reposition our outreach or mediation programme and enter into genuine exchange. For me it was important to say that, as an institution, we do not know everything or know what our visitors need, but that instead we have to learn from our public if we wish to expand the existing community, and to ensure that people who have very specific concerns and interests feel represented.

As an institution we have to be a living organism. I think that this is only possible when the individuals in the team create close ties to communities. I do not believe that an institution can function as an anonymous body. Quite the contrary: I firmly believe that an institution functions when personal ties are created and a porous structure is put in place. That when one thinks of the institution, then one immediately also thinks of individuals. Of course, as the director I am the public face of the institution. But I think it is important that there is a diverse array of persons who forge the individual links, as with a rhizome.

An idea emerged out of the collaboration with our Artists in Residence: to reflect on specific forms of welcoming, to ponder this ritual, a ritual shared with a visitor whom one has never seen before. What does it actually mean? The structures we then introduced - the Welcome Team, the Gropius Bau Friends, and the Young Gropius Bau - are very much informed by this work with the artists and our deliberations on how single conversations can be deepened. The first step is to have a personal contact person in the museum. As in most institutions, this work is limited because of financial constraints. But I think it proved its worth, both as an approach and a strategy, to have individuals at different points. They were entrusted with agency and weren't there just to perform functions. They represented the mindset of an institution, and the mindset of the institution is to have these different perspectives. What I mean is that it is necessary to trust that an inclusivity arises through these different perspectives and approaches, and that these individual voices represent different communities.

The idea of YOYI! Care, Repair, Heal is a continuation of the question of how we can look after our public. This is a long road, and travelling its length is not achieved in five years. Ken Arnold, Danielle Olsen from Wellcome and myself spoke together for the first time seven years ago. This long-term orientation is incredibly valuable for someone like myself. I mean this careful, slow, joint feeling your way when trying to find the right path. The pivotal question in our collaboration with Wellcome was always how we as an institution can be a place that helps people to find their place in today's society and openly and sincerely welcomes everyone. Over the course of many excellent conversations with the Wellcome Trust and Danielle Olsen we looked for points where we actually fit together, in a total openness. The collaboration with the Wellcome Trust and *Mindscapes* was for me personally and for the Gropius Bau as an institution an expansion of horizons, because we had the opportunity to speak with various persons from different disciplines. We really tried to live out the idea to the full. It was about pursuing this interest as keenly as possible – to ask how a public institution can be a place that contributes to mental health and how we as an institution help our visitors or public find a sense of balance through the possibilities afforded by interaction and exchange.

I believe that mental health very much depends on the places where interaction and exchange occur. Institutions can be locations where one has the feeling that someone is listening. This listening can take place in the museum cafe or the bookshop, or with someone from the *Welcome Team*. I believe that the whole organism around the exhibition programme is pivotal as to whether an institution or the topics put up for consideration resonate with and reach the public. To a certain extent this is always utopian but, due to the intensive work by *Mindscapes* in collaboration with Diana Mammana and with the additional support provided by Wellcome, I think it proved possible to deepen these ties and conversations more than is usually the case.

Collaborating intensively with groups, Diana Mammana was already very familiar with the work on the Resonance Room and *Mindscapes*. These are not things you can set up in a year. One key concern with respect to the neighbourhood projects was that the exchange be geared for the long run, despite the structures existing in an institution without a collection and a fixed team, relying on temporary personnel. Independent from this structure I was looking to create continuity and give the neighbourhood the feeling that the Gropius Bau is their institution, and that they can come here and belong. We took a huge step forward with this project. But it will take years before the point comes when these ties have an impact at the very heart of the institution. I believe that it is important for this inner rootedness to create a connection outward. And *Mindscapes* enabled this deepening and gave us the opportunity to have much more time for and invest greater resources on working on the project. For me it was important that the neighbourhood projects are not merely a programme accompanying an exhibition but that they actually create a parallel structure capable of docking onto everything, and that one considers how themes broached and discussed can also be reflected in the institution and help define the actual content of a programme.

I believe that only then can we have success with our artistic programme - when we learn to appropriately welcome our visitors and to resonate with whom we are welcoming. I think that you can only be a host when you have a public that allows you to be hospitable. This is a process that museums, in different forms and tempos, have been attempting to realise since the 1960s. But I believe that we've moved on from the idea of entertainment prevalent in the 1990s, at least as it was in Germany, and are now concerned with deeper layers of connecting. I believe that, in the twenty-first century, an institution needs to be a place that different communities can use as a platform, and where we learn from our public. This, for me, is the main task facing institutions at the moment. By public, I mean perhaps rather a community that helps one understand how exchange can take place: an interaction inspired by a concrete programme. In the spirit of Édouard Glissant, I propose an archipelagic thinking and way of working, one in which we are not insular and do not take the continent as the starting point, but openly say that we as an institution need to operate as an entity willing to constantly learn.

# Stretching, Disturbing, Expanding the Museum

Diana Mammana and Margareta von Oswald in conversation with Beatrice von Bismarck

# Margareta von Oswald:

In our practice we're trying to find out how far participative research can be understood as a curatorial practice. Which parameters are necessary for such an approach? Where do the possibilities lie and where are the limits? Where would you see this form of work in a history of (institutional) practices and position it in the curatorial field? And which definition of the curatorial is required?

#### Beatrice von Bismarck:

I understand the curatorial as a field in which people and things come together in public. All the practices called into action to achieve this are to be understood as part of the curatorial, without there being any need, however, to set out at the beginning which professional role carries out these practices. In this respect, an institution like the Gropius Bau faces the challenge of deciding beforehand how to whom it wishes to assign these different tasks and roles, and what this means for formulating professional positions. In turn, institutional hierarchies tie into this.

Within the overall structure, the degree of involvement in elaborating a specific interest needs to be negotiated. I would avoid drawing a clear line between mediation and curation, and I would not distinguish between academic and curatorial research. I prefer to start from the assumption that these are forms of practice which, against the background of one's own knowledge and methodology, are geared to interact in synergy. The movement towards learning, meaning and production is a shared undertaking. It's not about learning from but rather with someone else. This is why I regard the distinction between artists and curators to be unproductive, ditto the distinction between mediators and curators. Rather, I advocate looking at the practice itself in detail. How does the respective practice define itself in its objectives, its methodology and its sociality, precisely in coactive interactions with other contributors?

# Diana Mammana:

Certain ways of understanding the curatorial nonetheless resist this. In (art) institutions, mediation continues to be isolated or separated off, particularly spatially. Time and again the question is asked: where is the mediation to take place?

## Margareta von Oswald:

Picking up this point, I'm interested in why there continues to be such strong resistance in the curatorial field, even when the institution supports thinking about these practices in combination. Firmly entrenched traditional practices continue, mediation is not at the centre of curatorial work and hierarchisations persist.

#### Beatrice von Bismarck:

This has a lot to do with the logic of the field, which Pierre Bourdieu identifies as using different types of capital to build a position, in order to take part in the meaning production within the field. As a consequence, this means playing a part in the formulation of the rules and positions in the field, and the relations amongst them. The larger the (art) institution, the more complicated it is to make long-practised roles porous again, to redefine them, or to place them in new relationships to one another, because accomplishing one's own work allows little time for critical self-reflection on one's position or the relationships it then manifests. When we look back at the history of art institutions and the idea of mediation, while from the 1970s this idea has gained its own intrinsic value, in many institutions this was initially seen more as an additional track accompanying museum work rather than an integrated expansion of the curatorial. The smaller an institution is, the greater the possibility – if not the necessity – to reformulate this relationship between mediating and curating, and hence to reflect on what is to be achieved with which means.

The decisive question for me in this context is for whom or for what the positions are taken. Here I would direct attention to the institutional critique as practised by artists. Almost thirty years ago the project *Services* posed questions like: do artistic positions which define themselves as project-oriented and critical of institutions actually address their artistic peer group with their critical approaches? Are they addressing one specific public or several different ones? Are they addressing the various people they have worked with within an institution? Are they addressing the institution itself and its conditions? I understand this form of awareness to be the prerequisite for developing one's own role. In this context, I consider the term *unglamourous tasks* coined by Nora Sternfeld to be fruitful for reflecting on the existing status of mediation practices in public art institutions and its institutional hierarchisation.

Furthermore, I consider it to be a notable feature of your project that you operate like a kind of sub-institution. You can take on or define other roles for yourselves and switch between these roles. From my perspective, such an institutional sub-unit furnishes the possibility to set itself in a commenting relationship to the hosting institution. On the one hand, it can introduce, mirror and change conditions, which then function as a kind of counter-bearing instance, a heterotopia, to the prevailing ones. On the other hand, it presents a model of instituting practice which articulates 40

processuality anew. Here I see a perspective that permits us to move away from designating this method to a professionally prescribed role, appreciating it instead as one that has the same validity as all the other methods operating in the curatorial field.

#### Diana Mammana:

I find the concept of sub-institution interesting in relation to our working practice. Over the course of our projects, I've often asked myself how we operate in this institutional construct and how we can shift between our positions. Institutional limits were mostly evident when the legitimisation and professionalisation of knowledge was at stake – so, too, in terms of the place given to the produced knowledge within the institution.

# Beatrice von Bismarck:

When I speak of a sub-institution I mean an instituting practice within the institution, one that does not have to get involved with the fixed institutional conditions and framings but, in articulating its relationship to them, can remain relational- and process-oriented. I would thus be interested to find out what the long-term aspects of your project could be under these conditions, in which the long-term character might be considered ambivalent at the very least.

# Margareta von Oswald:

We feel the long term to be ambivalent as well. I think it is important to create a long-term orientation for a practice like ours within the institution, one that enables flexible responses, does not become permanent and is not obligatorily anchored in a department. The main task of this practice would be to transport questions raised within the institution outwards – and vice versa. It becomes consolidated across all departments and manifests in a stretching movement.

# Diana Mammana:

Our work causes confusion and insecurity with respect to professional positions, both inside and outside the institution. Long-practised institutional logic is disturbed. And I think it's productive to be a disturbing factor here. The longer these blank positions are addressed through disturbance, the more long-term orientation is generated. The long term does not thus manifest in the formulated projects, but in the form of practice itself. Moreover, the long term means that people active in fully different working fields know about the possibility or the availability of the Gropius Bau. They know that it is a place where their own working field can be expanded or one that can be integrated into their own work.

# Beatrice von Bismarck:

It is interesting that you understand your work as a disturbing factor. From my point of view, it is akin to a productive transversal impulse, in the sense of expanding the museum space. It is an attempt to become active at the very boundary of the architectural, social, aesthetic museum space, and explore whether reciprocal formats of exchange can be established on the way, and which possibilities of change then emerge for the relationship between the museum's inside and outside. How different discipline-specific methods can be made operative as well as be introduced with their respective forms of knowledge, into the museum and exhibition work, which is usually accentuated somewhat differently. For me, it is not so much a disturbing as an expanding movement, one that pulsates through the different forms of practice. But at the same time, I can appreciate 42

that you understand the practice form itself as a long-term perspective.

# Diana Mammana:

An exhibition is curated to generate visibility for artistic positions. We work with the same method. The specific contents are not given by artworks, however, but are knowledge and experiences drawn from local contexts. The process of translating these into the institution thus always also entails questions of visibility and their negotiation in specific hospitable situations.

#### Beatrice von Bismarck:

Here you're touching upon the question of the hospitable in relation to the neighbourly. The decisive feature of the hospitable is that it possesses a form of reciprocity and that in this reciprocity the guest can become the host, and vice versa. The prerequisite for this is a form of mutual recognition of a status that is thought of as changeable and temporary and that promises safety. In exhibition practice this is very much a question debated time and again in view of inclusions and exclusions as well as resources: how and by whom are the resources to be distributed which are at stake here, namely place, space and time, visibility, recognition? Who gets to benefit, who wants to benefit, or who rejects what is offered?

If I understand correctly, your projects are about a form of expanded participative exchange, one in which institutions are supposed to be able to function as hospitable places, including in a political sense. The challenge is to maintain a form of reciprocity contrary to the unwritten and invisible institutional barriers.

# Margareta von Oswald:

One main question in our work relates to translating or transferring knowledge into the institution. How is the exchange to be moderated and controlled, particularly when it concerns the museum as a place of democratic participation? Ethnographic approaches have proven especially suitable in our practice, firstly in view of the research design and ethic, and secondly in dealing with the research data.

# Beatrice von Bismarck:

It is also part of the curatorial hospitality dispositif to work under rules which one has not set as guests. As guests, to enter the host's place means to encounter other – more or less familiar – rules and conditions and to find ways of dealing with them. Because the rules and conditions are in part internalised, it cannot be assumed that everyone involved in the hospitable situation knows them beforehand. Rather, a quite essential part of the hospitable resides in a form of mutual respect towards the respective conditions, those brought along and those already existing, in order to negotiate about how the available resources are to be shared out.

The question of visibility is an important point here because visibility as such has no intrinsically positive value. The curatorial hospitality dispositif entails dealing responsibly with the possible visibilities it offers, so as not to pervert them by allowing for forms of vulnerability, abandonment to penetrating gazes and public exposure.

What's more, the risk – and you've mentioned it yourself in the introduction – is that processes of making visible harbour the possibility of paternalism, when the institution or the persons acting within the institution unilaterally assume the right to define what is safe or not safe, and what is guaranteed within this safety and what is not. The elaboration of a safety that mediates and is capable of keeping in view all the varying interests is decisive for any work in art institutions that consider themselves welcoming. Besides the intra-institutional perspective, which we've already spoken about, with your project you're also asking about the concerns and interests of the invited. About what makes the Gropius Bau appear to be a place that is more conducive and appropriate than an office to pose specific socially relevant questions and to establish contact with people who are vitally interested in these questions.

# Diana Mammana:

Ideally, the question of the interests of the invited consistently determines the orientation of curatorial work, and our work was indeed influenced productively. Building on this idea, I'd like to ask what you would see as the mission of a public art institution currently.

#### Beatrice von Bismarck:

For institutions financed by the public purse I currently consider those practice forms to be most productive which use the specific possibilities of art and culture institutions to initiate an exchange about socially relevant problems, one that factors in more strongly the everyday world and reciprocally contextualises local and transregional perspectives. Draxler, Helmut and Andrea Fraser 1996: Services – Ein Vorschlag für eine Ausstellung und eine Diskussionsthema/Services – A Proposal for an Exhibition and a Topic of Discussion. In: Beatrice von Bismarck, Diethelm Stoller and Ulf Wuggenig (eds.): Games Fights Collaborations. Das Spiel von Grenze und Überschreitung. Kunst und Cultural Studies in den 90er Jahren. Ostfildern-Ruit: Hatje-Cantz. Golo Stone, Eric (ed.) 2021: Services Working Group, Kunstraum of the University of Lüneburg. 22–23 January 1994. Vancouver: Fillip Editions.

Sternfeld, Nora 2010: Unglamorous Tasks: What Can Education Learn from its Political Traditions? e-flux journal, issue 14.

A section of the exhibition YOY!! Care, Repair, Heal held in the Gropius Bau (September 2022 to January 2023), the Resonance Room collected and shared local knowledge and experiences of mental health in Berlin. The broader cooperation between *Mindscapes* and the Gropius Bau centred around a major question: how can an art institution contribute to changing our perceptions and understanding of health issues? Between September 2021 and December 2022, a series of projects was developed to this end. These projects questioned the understanding of and approach to mental health in Berlin: how do individual health and society interact? How does history affect the present? Which forms of welfare and care, solidarity and community, are created and practised in urban society?

As a gathering place, the Resonance Room initiated dialogue between these different voices from science, culture, civil society, and politics in Berlin. The Resonance Room combined the research approach of *Mindscapes* with *Neighbourhood Exchange*, a Gropius Bau mediation project in place since 2020. The conception and realisation of the projects were shaped in equal measure by these research and mediation approaches. As both a physical and digital location in the museum, the Resonance Room collected different forms of knowledge about mental health. Admission was free of charge. The projects are described hereafter.

# LIBRARY

Concept: Diana Mammana, Margareta von Oswald

Participating persons: Aurélien Calpas, Bárbara Rodríguez Muñoz, Brook Andrew, Christina Scheib, Clare Molloy, Kader Attia, Katharina Küster, Natasha Ginwala, SERAFINE1369, Stephanie Rosenthal

On the basis of selected publications, the Resonance Room library provided insights into the conceptual foundations underpinning the curatorial work of *YOYI!* Care, Repair, *Heal.* The curators suggested publications, while works by curators, artists and theorists who took part in the exhibition and the accompanying discourse programme were also included.

# MENTAL HEALTH IN KREUZBERG

Concept: Diana Mammana, Lea Hartung, Margareta von Oswald

**Conversation partners:** 

David Buteyn, Dilay Dagdelen, Deiara Kouto, Kerstin Kühn, Mary Buteyn, Maryna Markova, Murat Dogan, Remzi Uyguner, Tim Ünsal, Ulrike Koch, Veit Hannemann, Željko Ristič

Personal and professional experiences on mental health from participants located in the neighbourhood around the Gropius Bau were exchanged and collected at regular meetings held over several months. The organisations set the respective topics. The series of conversations sought to establish a continuous dialogue on strategies, practices and experiences relating to mental health in Kreuzberg and the everyday work of social workers in the neighbourhood. A zine grew out of the conversations, which was then included in the library and was available to read in the Resonance Room.

# VISUAL RESEARCH ON MENTAL HEALTH IN BERLIN

Concept and interviews: Margareta von Oswald, Nassim Mehran

Advisory board: Kim Wichera, Lee Modupeh Anansi Freeman, Ulrike Kluge

Filming and editing: Jan Stöckel

Production management: Franziska Anastasia Lentes

Conversation partners: Alina Georgescu, Andreas Heinz, Arno Deister, Carolin Ochs, Felicia Boma Lazaridou, Inga Zimprich, Julia Bonn, Kader Attia, Katrin Dinges, Kim Wichera, Kirsten Schubert, Lee Modupeh Anansi Freeman, Mandu dos Santos Pinto, Mazda Adli, Michael Bosnjak, Niloufar Tajeri, Norma Kusserow, Pasquale Virginie Rotter, Samie Blasingame, Tzoa, Ulrike Hamann, Ulrike Kluge, Yasmin Merei

The visual research looked at how mental health is understood and dealt with, drawing on conversations with twentythree Berliners. The complex relationships between mental health and structural inequality in Berlin were of particular interest: how do current and historical experiences of exclusion, conflict and division shape the mental health of Berliners? Consideration was also given to experiences from the other side of the spectrum. What kind of effect do examples of solidarity and collectiveness have? What possibilities for dealing and engaging with mental health can be conceptualised and practised through various forms of treatment and care? Part of the research results were shown as a film in the Resonance Room. The entire material is accessible in an online film archive.

https://berliner-gespraeche.com/

#### MUSEUMS AS PLACES OF HOSPITALITY

Concept: Diana Mammana, Margareta von Oswald

Cooperation partner: Yeşil Çember ökologisch interkulturell

Participating persons: Astrid Dulich, Aynur Türkel, Ayse Midikogl, Carl Luis Lange, Cem Taşdelen, Cigdem Eroglu, Denise Bade, Esengül Calışkan, Filiz Behrendt, Gülizar Ince, Hatice Deniz, hn. Iyonga, Kadriye Sezenoglu, Maryna Markova, Michael Westrich, Meral Cendal, Mine Senol, Nejla Yologlu, Nurhayat Tazegül, Sevgi Erkabalci, Sevil Rüzgar, Susanne Da-Costa-Badu

The exchange with Kreuzberg associations and organisations was at the centre of conversations about hospitality. Conceptually, we were accompanied by the question of how museums can become hospitable places and the role one's own wellbeing plays in this. The participants from the neighbourhood around the Gropius Bau were actively involved in producing the material basis of the Resonance Room, for example the pottered teacups, the homegrown herbal tea and the handsewn cushions. In this way personal connections were created between the museum and the everyday worlds of the participants.

## RADIO SHOW INTIMATE CONNECTIONS

Concept: Carl Luis Lange, Margareta von Oswald

Cooperation partner: Cashmere Radio

Graphics and printings: Carl Luis Lange, Kopierwerkstatt Cashmere Radio, DJ Shlucht

Participating persons:

Bitsy Knox, Edna Bonhomme, Juba, KitKat, KMRU & Ross Alexander, Lou Drago & Ligovskoï, Michael Makembe & Injonge Karangwa, Nikolas Brummer, Vera Dvale

What does music do to our body and mind? The radio show Intimate Connections engaged with music's capacity to help us cope and develop in manifold ways. Sometimes feelings can't be put into words. This is perhaps where music enters, helping to process emotions in an immediate and embodied way. In their broadcasts, various musicians and radio practitioners delved into specific emotional states, their political textures and their interwoven experiences. Intimate Connections was available for listening in the Resonance Room and was presented at a Listening Session in the Gropius Bau's atrium.

https://cashmereradio.com/shows/intimate-connections/

# STUDENT RESEARCH ON THE HISTORIES AND PRESENTS OF THE GROPIUS BAU

Concept: Diana Mammana, Margareta v<u>on Oswald</u>

Participating persons: Alissa Dovgucic, Carl Luis Lange, Christin Haubenreißer, Emma Jelinski, Frederike Nolte, Lars Holdgate, Mia vom Bruch, Monique Machicao y Priemer Ferrufino

While research into the history of the Gropius Bau has remained fragmentary to the present day, it is a location where the entanglement of violent regimes of the twentieth century in Germany is tangible: colonial rule, the National Socialist regime, and the GDR state have all left their mark. An interdisciplinary group of students from various Berlin universities researched these historical strands of the Gropius Bau, talking with historians and contemporary witnesses as well as researching the archives. The student research was accompanied by considerations on how critical institution history can be appraised in a way that enables participation and mediation services, and how current problems decisively shape this form of historiography. The results of the research were then used for an audio walk that could be heard in the Resonance Room and was activated by the students when conducting live tours.

# Berlin Conversations on Mental Health

# Access

hn. lyonga, Kerstin Kühn, Veit Hannemann, Željko Ristič

# Veit Hannemann:

I always have difficulty selecting what I can really open up to intensively. I rarely find orientation in a museum. Perhaps in future there has to be sociocultural work in museums which builds a bridge outward, for example to social institutions.

#### Kerstin Kühn:

We work a lot with migrants, and we work with the concept of simple German. Tours in simple German would facilitate access.

# Željko Ristič:

The Gropius Bau is located in one of Berlin's most socially deprived areas; right in the middle stands this palace of high culture. The building itself is enough to trigger a sense of exclusion. Of course, it's easier to get access if there's relations work going on. When there's contact to a person whom you value. Then you immediately also have a positive association to the building. You feel much more relaxed about going there. You're glad when you see the people, and then people like to go there. For how long that could be maintained is something that still needs to be developed.

#### Kerstin Kühn:

I believe the atrium is a start to dismantling barriers. But when I'm immediately blocked again by security personnel, then this low threshold is withdrawn.

# hn. lyonga:

Can the idea of a resonance room be looked at as something expansive, as meaning a space that exists beyond its own limits, as a space that shifts in meaning and function depending on who is in it? Against a limited concept of a room of resonance as something that follows after the main show and remains somewhat supplementary, my question for testing such a space would be: can it hold things that are both soft and dense? Things that we are all part of, like the earth, that we shall all return to, or the inequality we face every day but also the warm feelings we have for our friends and kin; what does that mean to engage with it in such a space?

Beginning from our gardening practice, how can soil serve as a starting point, as something that can be looked at as a medium everyone understands. How can the soil become the language, a base language we all understand to the core?

My thoughts about a potential room of resonance boil down to one single line: a soft space. That is, a place, a room, or an idea of a space, etc. that is not an afterthought, an appetizer, or an around-the-corner space, but an idea of a room that stands and or exists on its own. A place where fear can be deconstructed; it is a space where vulnerability is at the centre; where collective desires can be shared, expounded upon, and developed further; where the collective is at the centre; it is a space that goes beyond itself to include the voices of the communities around it not by way of extraction and/or exploitation but in a manner that truly considers the efforts of the communities around it as valuable, important and necessary. It is a place where everyone is at the table, where we are equal.

#### Veit Hannemann:

The Resonance Room in the Gropius Bau has a very sobering effect on me. I actually feel the need to somehow first immerse myself for a while and reflect or get a sense for what the room triggers in me. Or I want to strike up a conversation with others, experience a shared resonance, or enter into resonance with someone about something I've just experienced here. That raises for me the question of how this can be made possible or facilitated.

# Željko Ristič:

I felt lost in the Resonance Room because it was so cold. It was too full and yet not personal. Although I was there, I was looking for someone where I could get a hold and didn't find anything that I felt an association with, or something where I could recognise myself.

#### Kerstin Kühn:

I think that the serving of the herbal tea was a good meeting point.



#### Nikolas Brummer

... and actually, all of this started that one time I went on a trip and my smartphone broke and for two weeks I had no device to listen to music. There was something strangely unnerving about this situation, mentally and physically, and that demonstrated once more how much I was affected by always having music at hand. I decided to dedicate myself to maintaining a musical archive and became increasingly obsessed with the idea of the musical assemblage in the form of playlists, and specifically what those could inflict on my mind. To give you an example: I generally differentiate between playlists of "feelings" and playlists of "ambience". And as the name already suggests, the "feelings" category contains a large number of playlists each of which touch upon a particular feeling: sadness, grief, panic, bliss, excitement, anger, anguish and so on, literally any type of feeling you could imagine. Each playlist in that category aims to boil it down to that specific feeling, and to provide songs that shelter, power and support that respective emotion. They are concerned with a type of emotionality that is introspective, personal, which is being determined by the direction it is pointed at; those playlists are geared inside. They are supposed to offer a transitory and conscious encounter with your own emotionality, which makes the feeling direct, impulsive and modifiable.

I want to make clear how I mean this, and how this might deviate from other forms of playlists which are attached to other forms of emotionality. For example, the "ambience" folder discusses the understanding of music *as* ambience, meaning something that goes well with something, something that produces a backdrop or enhances something that is already there, but without dominating it. It's a placement of music that makes it coexist with the furniture of a room, the light, the smells, the sounds surrounding you. While surely you could concentrate on all of these different elements separately, they have an impact on you directly without a conscious recognition of that impact. In this way, ambience shapes the emotive architecture of a room, which is formulated in the form of a "mood". That is also how "ambience" differentiates from "feelings". Ambience aims to establish a sustained emotional state, instead of only powering a transitory affect.

Apart from the mere idea of being a backdrop, ambience can be used to subliminally enhance a certain type of activity. An increasingly popular field of ambience playlists is music that enhances your productivity and concentration, like music for the workplace or any other form of working situation. In the history of electronic music production, there are numerous examples of how specifically this conception of music bore possibilities for commercialisation - one of the most prominent examples being American background music brand Muzak that provided soundtracks to public spaces and retail situations, and later on the workplace. In a contemporary setting, what might come to mind are alluring playlist titles such as "Chill Beats To Think To". And what could fit better as a backdrop to a situation of labour than those things that fall into the category one could define as "chill". "Chill" music is ideal for the background because it does not only fill silence while being unobtrusive, it also renders a mellow and comfortable atmosphere within any form of working environment that might otherwise be straining or even damaging. In this case, the ambience takes the form of aid, of self-nurture, which is utilised to alleviate an uncomfortable or unpleasant situation, undermining the efforts of changing the situation in the first place.

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As you can see here, both the use of "feelings" and "ambience" playlists is first and foremost utilitarian. By making these playlists, ultimately, I am producing some sort of subliminal affect and emotion that can be applied at any given moment. And through streaming platforms and music apps, the mere availability of all of this music makes it possible that it can take up such a central position in how we regulate our emotions. It becomes a ubiquitous resource and an inexhaustible tool in emotional and psychological management...



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Diana Mammana, Maryna Markova, Remzi Uyguner, Željko Ristič

# Diana Mammana:

When people don't feel welcome in an (art) institution, then they're not even there, otherwise they'd feel welcome. Before all else, we have to try and understand why these people stay away, address and discuss this absence, and find a way of dealing with it. The next step would then be to ask why we aren't reaching them, or conversely, why aren't they reaching us.

# Remzi Uyguner :

We can't be open around the clock at the TBB-Turkish Federation in Berlin-Brandenburg. But the people seeking our advice can't always come to us with their problems during opening hours, and that's quite understandable. They ring the bell and say, to give a specific example: "I'm facing deportation the day after tomorrow." That's the kind of situation regulations create. Sometimes I can't give the advice I'd like to because of the structures in place. People are then disappointed and irritated. For each individual case we try to explore all the options afforded by antidiscrimination work. For me, everything that isn't illegal is doable.

# Željko Ristič:

It's not about just simply turning up to get into contact with us, the team of outreach.berlin. If you take community work seriously, this means going to where you have to. In other words, don't just send off emails but meet the people on the street and build up a network. At some point, people simply know about you. This is how first contact happens. The youths have our mobile numbers and call us. Then we meet up. Approaching them directly – no one does that. If I go up to a kid as a social worker and say, "Hey, you need any help?", the answer is "Piss off". It is often rather hectic and there isn't a place to retreat to, where you could talk one-on-one. That doesn't work all that well at our location.

# Maryna Markova:

At the Kurdish parents' association, Yekmal e.V., we also discuss the topic of available space and orientation a lot. We try to put ourselves in the situation of a Kurdish-speaking woman who has just arrived with her child and stands in front of a closed door, and doesn't know which buzzer she should press, or how she can make contact with us. We try to make sure there are different possibilities to get some orientation.

# Željko Ristič :

Anyone who knows how to use a Google search engine already has a giant advantage. They're the ones who can dock in somewhere. We who work in the social field, who work with administrative bodies, observe that this whole system of applications and loopholes in social legislation is not beneficial for mental health; not in any way whatsoever. When people have to apply for benefits, then the whole thing is an arduous administrative process – make applications, again and again new documents need to be submitted – it's a huge source of frustration. Many people don't even begin to try, or they just give up, and then they're left standing there emptyhanded.

Mental health could actually be supported if the administrative bodies would work as they should. This means applying currently valid laws and not demanding an absurd number of documents which aren't even necessary to demonstrate the facts of the situation. A statutory declaration is often enough.

It's problematic that in a country like Germany people need the help of social workers to be able to assert their rights and push through their claims. The threshold for accessing rights actually needs to be low. If a person is in need, then they should be able to go to the respective office and get assistance there. But often it doesn't work like that, and people require lots of support from social workers, who first have to explain the principles of social rights and how to access them. This is necessary so that the applicant knows which steps and documents are important, and also what the authorities are permitted to demand from them and what not. Diana Mammana, Kerstin Kühn, Lea Hartung, Margareta von Oswald, Mary Buteyn, Maryna Markova, Tim Ünsal, Remzi Uyguner, Željko Ristič

An office needs to be fitted out in a way that you feel comfortable in it. So that you like to spend time at your workplace. Perhaps one can also listen to a bit of music. Perhaps it's about the space and, at the same time, about the senses, something that goes through the body. When something's fun, then the stress is positive. It's OK when work is stressful. As said, in that case you have to accept that you can only take in the late movie. It's the degree of work and how it is organised. That's what's key. Perhaps there's more to it than just self-determination. It's the hierarchies which are disturbing, and how they are misused. This leads to inner stress. At the same time, work is also meaningful. The difference between private life and work often gets blurred. How can you keep it up? Our society suffers because of stress, simply because we work so much. Work is too much about earning money, and yet at the same time we define ourselves through our work. Once, what we do was called social work. Now social work is a subject to be studied. But if it requires study, then why are you called a worker when you're finished? These vague definitions may be attractive for your own work practice, but on the other hand it's difficult when there aren't any appropriate terms to designate your work. After all, work is also life and all that, and then there isn't a word for it. It also has a bit to do with recognition. In our work we have to be resilient; a lot of it's about being on the move, there's turmoil to deal with and there's a need to offer stability. You have to be able to put things down, let contradictions be, and allow yourself to be overwhelmed.

#### Priya Basil

"As you get older, you have to learn to be happy and sad at the same time," a friend said to me, years ago. I had been bewailing a misfortune, lamenting that it was shadowing some simultaneous good fortune, stifling my joy.

Some insights anchor in you quietly, the seeming stillness belying their power. I passed on the happy-sad wisdom now and then, though I didn't practise it as I would wish; the darker things often occupy more of me, regardless of the quality of light.

As *Mindscapes* International Writer in Residence, I was invited to immerse in the topic of mental health and work towards a book, *An Atlas of Mental Health*, by seeking out perspectives overlooked or marginalised by the dominant, Western, biomedical system. I wasn't sure what this could mean. I was drawn to the expansiveness of the notion *atlas*, yet wary because I associated it with conquest – in the sense that it presents things as fixed-complete-concluded. And wasn't mental health unsettled terrain exemplar? Found only for fleeting moments, then gone, then found (or created? granted? achieved? imagined?), then gone, then –

I realized early on that everything – foodhistorylovetreescommunity – can affect mental health – childhoodjobfamilysocialnormslegalrightsanimalsrelationships – yet, as I travelled across the globe talking to different people about the topic – culturesleepcoloursdrugspolitics – the sense of *everything* went on extending – dreamsplantswaterwordsdancetouchborders. This opened sparkling, promising vistas, but to speak of mental health, it turned out, is also – if not more so – to speak of mental ill-health, panoramas of pain. When I asked people who were not healthcare professionals how they understood the notion of mental health, they immediately began to describe problems. Was I going about this the wrong way? Would the *atlas*, I began to worry, just comprise sceneries of suffering?

Who decides how mental health looks-feels-speaks? And who best knows how to treat, to restore it? Such questions induce a sense of vertigo, for they cause the ground from which you're used to thinking-judging-knowing to tremble, even collapse. In the course of my *Mindscapes* work, I've often thought of how believers in a flat earth must have felt on being told the earth was spherical. How to let go of flat-person theories around mental health and envisage interdependent, wholesome, cosmic maps of being?

Midway through a workshop in Namibia, I was compelled to ask – conscious of the false dichotomy, yet hoping it might illuminate something: How do you understand physical health? "To feel well, strong, ready for anything," one person said, and others immediately agreed. So, how come *health* has a positive connotation with *physical* and not with *mental*, I wondered? There was silence. Eventually, a woman in her twenties spoke. "I think, for me, it's because I know physical health, I've felt what it is to be pain-free in my body. Whereas I can't recall any time in my life in the last years where I was just happy. There's always been something wrong as well."

Versions of this outlook recurred in many conversations I had about mental health. Were more of us now acutely accustomed to this state in our pandemic-scarred, climate-crisis world? Was such duality an unavoidable affliction of our moment? Such were my thoughts, until another of the unacknowledged laureates of lived-experience I met said, "But isn't it amazing to feel happy and sad at the same time?" The anchor tugged within me, loosening, rising – there was the old insight again, gliding across the surface of my mind. *Isn't it amazing?* Opposites-contradictions-tensions can resonate, amplify and extend each other, lend an aching lustre to living, give a full-bodied flavour to (well)being.

Could part of mental health be a capacity to feel happy and sad and more at the same time? How to cultivate an ability to feel everything without (fearing) being felled by feeling? Such questions, such moments, threw the *atlas* into relief; shadows shifted, the ground moved, the horizon glowed with possibility.

I am still on the *Mindscapes* journey; the orientation is clearer, but the territory is still taking shape – made from constellations of questions, from the intimate tectonics of personal stories, from elements of serendipity. Feeling, moving towards an *atlas* that knows, that shows, its own limits – but that nevertheless stretches-reaches-touches spaces beyond its own boundaries.

# **Christine Wong Yap**

What gives you a sense of belonging? Holding deep conversations with friends? Hosting or attending block parties? Volunteering? Feeling helpful? Could you give others a taste of these activities of belonging?

As a visual artist and social practitioner, I create projects to engage with and to learn from communities, developing creative ways of gathering and disseminating local knowledge. I invite participants to engage in self-reflection or social connection to increase personal agency and emotional intelligence. By representing this research with care via artmaking, I hope to facilitate an aesthetic process of "each one, teach one" from radical pedagogist Paolo Friere. Positive psychology influences my work, as does the principle of affirming the positive; I have presented participatory workshops related to belonging over the past five years in the United States.

This year, as a *Mindscapes* Artist in Residence at large, I conducted community workshops in Berlin, New York, Bangalore and Tokyo. Each workshop generated activity guides reflecting individual and local experiences of belonging. I gathered each city's guides into a four-zine series, resulting in a multilingual knowledge bank of homegrown activities and an international zine exchange.

In Berlin, I collaborated with Margareta von Oswald, the *Mindscapes* Curatorial Research Fellow and Lea Hartung, project lead of community projects of the Referat Programm at the Central and State Library Berlin. While my community engagement process is always collaborative, it's especially so in different contexts and languages. Describing belonging is challenging even when everyone speaks the same language; Lea and Margareta's roles as co-facilitators and interpreters were critical. Belonging

The three workshops served ninth-grade students in Marzahn-Hellersdorf and recent immigrants, seniors and residents of an intentional community at the community garden project Nachbarschaftsgarten Kreuzberg and the America Memorial Library. Participants opted to be identified by initials, first names only or full names.

I framed belonging as arising from specific categories of experience (Brown 2017, Wise 2022): a place where you feel safe; a ritual that makes you feel connected; a role in which you contribute to something; a system or practice that makes you feel respected; communications which make you feel seen and heard; and/or a choice to be true to yourself. Participants identified a salient experience through brainstorming and self-reflective writing, then designed an activity guide using a cartooning process. These activities testified to how ideas of belonging move between poles of the individual and social, and the local and Berliner to the more universal, reflecting the complicated nature of belonging itself.

Many adults described sharing meals as fulfilling ways to socialise. For teenagers, hanging out with friends can almost be existential by providing affirmation on a deep, developmental level. Social connection nourishes a sense of wholeness, illustrating humans' fundamental interdependence.

For recent newcomers, finding a social network is a key that opens many doors. Srour Alsrour joined a neighbourhood house to learn a common language and got involved in the community, while Arora advised visiting with friends met through library programmes. This network is not only pleasurable, it's a core aspect of mental health: fostering an individual's perspective that they matter.

For others, longevity gives deep roots. For octogenarian Karl Weiner, the community garden Kolonie am Flughafen

is a multigenerational, interdependent network. Proximity, shared interests and events are ways to feel seen, heard and known, which can span years or even decades.

Acts of service connect us, too. Uwe Flamme finds meaning in volunteering and in contributing skilled woodworking labour to the Nachbarschaftsgarten Kreuzberg. In this way, belonging means being woven into a social fabric, where the individual and society are distinguishable yet not distinct.

Belonging is felt by individuals and is highly subjective. At the same time, belonging can be a prosocial goal informing the structure of institutions. By creating spaces for participants to engage in self-reflection, and by distributing their knowledge to wider audiences, we expand the possibilities for understanding how we create and nourish belonging for ourselves and others in our everyday lives and larger systems.

Wise, Susie B. 2022: Design for Belonging: How to Build Inclusion and Collaboration in Your Communities. Berkeley: Ten Speed Press. Brown, Brené 2017: Braving the Wilderness. The Quest for True Belonging and the Courage to Stand Alone. New York: Random House.



Care

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Care

Andreas Heinz, Kim Wichera, Kirsten Schubert, Michael Bosnjak, Norma Kusserow, Tzoa, Ulrike Kluge

# Andreas Heinz:

Germany has a very well-developed health system compared to other European nations or internationally. According to a statistic from The Economist, Germany takes first place in Europe. That's not unwarranted. There's hardly any country in the world where health insurers cover the costs of psychotherapy, even if there is heated debate about whether this is enough. Germany has a very good in-patient system, even if this is often criticised as wasting money. But if you look at the situation in Berlin, then on some wards we have between ten and thirty percent homeless persons or patients without a dwelling place. Without in-patient help it is hardly possible to treat these people. And then there are the seriously ill who are glad to get away from their families for a time. There's an established network of licensed medical and psychotherapy practitioners who say they receive too little money per patient. But at least they have that! There are better financed outpatient clinics in the hospitals, and there is an extensive supply of counselling centres, although they've been subject to financial cutbacks in recent decades.

# Michael Bosnjak:

At the Robert Koch Institute we've been paying attention to the area of mental health for a number of years now. In 2019 there was the political remit to examine the so-called Mental Health Surveillance. This meant developing indicators of mental health for Germany which are comparable internationally. We've agreed on about sixty indicators which may be divided into four areas: firstly, the factors influencing mental health; secondly, the various states of wellbeing – that is, mental health and mental disorders; thirdly, the structures of care in place; and fourthly, the consequences of mental health.

In both international and European comparisons, Germany is doing quite well – in the upper third – but at the same time clearly not on the same level as the Scandinavian countries. Specifically with respect to providing care services, we've observed that the situation is improving overall, and politicians are very attentive to the needs of the population here. Necessary legislation is being put into place and lots of things implemented – for example, psychotherapy as a master's degree course – which reflect the general goal of improving care services for the population.

#### Norma Kusserow:

In the state of Berlin, we had an important development in the context of mental health. It all started with the de-hospitalisation in 1975. Based on the care side, over the next few years Berlin specifically looked into how assistance and support services can be created for people who are mentally stressed or ill while not being not located in an institutional setting. The care system in Berlin is meanwhile very diverse. Berlin can be extremely proud that we have a care system with many different facets.

At the Berlin Senate Department for Higher Education and Research, Health, Long-Term Care and Gender Equality we don't consider individual cases but the collective, the Berlin population. For us it is important to strengthen the mental health of the Berlin population, to improve and maintain it. We want to offer a care system oriented on people with difficult and complex needs. When these people receive help, then a good care system is in place.

#### **Ulrike Kluge:**

A great deal takes place in the field of mental health in Berlin, much of it very good, particularly in relationship to urban community. Nevertheless, my feeling is that it would be even more beneficial if government and non-government, formal and informal institutions and infrastructures entered into still more dialogue – to discuss together how we can make mental health and health care possible for everyone living in Berlin. I wish there'd be more scope to debate such important questions, for addressing conflicts, for discussions in professional context, and also with the civil and urban communities. I believe it is through negotiating conflicts that we often come up with better and more effective ideas than when we put off the hard work of dealing with tensions and conflicts.

# Andreas Heinz:

The system doesn't act in concert as well as one would like. All the components have points of friction with one another-between licensed psychotherapists, hospitals, drop-in clinics. I think tighter networking and exchange would be a big plus. In a district like Berlin-Mitte with 300,000 residents there are 200 counselling centres, clinics, doctors' practices, hospitals, all of them providing different services and yet often they know nothing about each other. If exchange were easier and one would get financial support for networking, then this would bring about an immediate improvement to the care system. In addition, we also need local district health centres which wherever possible are run by people from the respective community. Consideration would have to be given to how the networking would be organised, how contacts are made, and how the health information could be passed on, so that the diverse counselling centres active in Berlin can be presented already networked to the population.

## **Kirsten Schubert:**

We assume that where they live is important for people. We are social beings, and we need a community around us. The place where we live stamps its influence on us. It is important to have a good neighbourhood and good neighbours, a place where one feels at ease, is part of a network, is recognised and respected, and everyone helps each other.

There is a strong correlation between the structure of a city district and people's health. Studies show that health is poorer when one lives in a part of the city where the general standard of health is poor. How healthy or unhealthy I am – this depends on my environment and the people I live with in my neighbourhood. We therefore want to bring change to our neighbourhood and join together with others to fight for a good life.

That's why we've founded the neighbourhood health centre in Berlin-Neukölln, built up over the last few years through voluntary work. Here I practise as a family doctor and a specialist for general medicine. The difference to other medical care is that we offer a variety of consultation services directly in the centre: social counselling, psychological counselling, nursing and health counselling. We have a paediatrician practice next door, various other counselling services and a cafe that offers a place to meet and get involved in self-organisation. As a health centre, we are explicitly anchored in the local district. That means we do neighbourhood work and are very connected to the district here in Neukölln.

#### **Ulrike Kluge:**

Specific groups of players fiercely criticise many state institutions in the care system because, either in reality or in the accreditation, they have not fulfilled or could not yet fulfil the adequate, participatively inclusive expectations made of care communities. When I, as someone working in a government organisation, take a look at non-state NGOs and the informal infrastructures, then I always think it would be great if we could make transparent who is actually pursuing which goals. I'd like to draw up a map, plotted along the question: what are the needs in this city, in terms of both informal and formal services? Which inclusions do we want? Where do we identify which exclusions? And who can actually do something, who is in a position to fulfil which needs? How can a cooperation take place? How can we create a tighter interlock between formal and informal infrastructures, and how can everyone name their own limits within them?

For the psychosocial domain, at the Charité we have succeeded over the last few years, for example with the Center ÜBERLEBEN and XENION, to bring together state and NGO practices and infrastructures as well as their respective logics, which were often dichotomous or quasi oppositional to one another. Today, the Center ÜBERLEBEN offers an extensive array of day-clinic services. The necessary beds, allocated as part of the Berlin bed scheme for Mitte and thus the Charité Psychiatrie am Campus Mitte – these beds in the Center ÜBERLEBEN are available for patients who have experienced torture and war. Like the Charité, the Center ÜBERLEBEN is also in Mitte. It's a wonderful development, enabling the Center to invoice day-clinic services to the health insurers. They are thus part of the official standard care financed by the insurers. An important step for offering these person groups qualitatively equal care.

#### Kim Wichera:

I've been working since 2005 in the crisis centre Weglaufhaus – Villa Stöckle, a unique institution in Germany where people can live outside the psychiatry ward and the system. Since 2005 I've experienced how the social situation has become enormously difficult for many people, and as a result personal crises have come to a head. The gap between rich and poor has fanned out and grown. The housing shortage in Berlin is extreme and this emergency is compounded by financial, economic hardship.

On the level of social organisations there is no increase in support as a result of these developments – on the contrary, there are cuts. Once there were five crisis centres, now there are just two; the others had to close because they couldn't keep afloat economically due to difficult negotiations with the Berlin Senate and the rising costs. Once there were sixty to seventy places for the whole of Berlin, meanwhile it's a mere thirty-one. For me, there is no doubt that such centres are absolutely necessary in Berlin.

Another reason why I find this development scary is because the effectiveness of the methods used in psychiatry are called increasingly into question. At the weekend I attended the conference of the German Society for Social Psychiatry. The results of a meta-study were presented, and they showed that both psychotherapy and psychopharmaceuticals are effective only to about thirty percent. Faced with such numbers then you could draw the conclusion that what you're doing as a psychiatrist is not particularly effective. Seventy percent of what's done in psychiatric wards has no effect on the experiences and lives of people who are receiving treatment. I wouldn't conclude from this that the Weglaufhaus needs to grow, and that lots of Weglaufhaus centres need to exist in Berlin. I'd rather see that there are lots of diverse answers to the question of how we can actually provide support. We need more openness to try things out and indeed build on and take seriously the principle that the rights of the people who are given support are acknowledged. This has to be the basis.

# **Ulrike Kluge:**

Providing care for people who have escaped conflict, been forced to flee and have experienced migration can't be considered Berlin-specific, but needs to be seen in a European, in a global context. You don't have to tell anyone that the health care for refugees or migrants is not good. The current asylum and refugee policy hinders the most very basic things like arriving or getting started in a new environment. Yesterday at a talk I was asked to give my view on intercultural communication in the context of refugee migration and mental health. But I can't do that because it'd be guasi point number five down the list. Point number one for any understanding is that the conflicts in the care system often arise out of how the lived realities of refugees are often so precarious and problematic that we as professionals first have to offer very basic support services, for example enable them to arrive and settle before any kind of work on their actual psychological state is even possible. Naturally, that often goes hand in hand. But working with vulnerable, socially marginalised groups puts special demands on psychotherapy practice. As therapists we experience our own impotence when the reality of the lives of refugees is so precarious that a trauma therapy is not (yet) indicated. Then for that to begin a person needs to feel a bit settled in a reasonably stable place; they need to feel that they've arrived,

or can arrive. The situation of the Ukrainian refugees is a good example for what it can mean when the host society offers spaces helping this sense of arrival. This should be possible for all refugees. But the reality is very different, for example for refugees from Afghanistan, or let's take the situation of the refugees from the former Yugoslavia in the last thirty years. Back then, the refugees had to go to the foreigners' registration office once a month and get their suspension of deportation renewed for another month. In such a precarious reality and a continually recurring set of exceptional circumstances, in such an ongoing crisis mode, then a trauma therapeutic intervention can be provided, but an actual processing of the experiences at a place felt to be safe and protective is hardly possible. It is not the city but the political and juristic realities at the places of origin and arrival which lead to psychological and emotional stress. We are still very far away from offering services on an equal basis which fittingly address the reality, the narrative and the biographies of the refugees.

#### Andreas Heinz:

One area needing improvement in Berlin is cultural sensibility. In many districts of Berlin, roughly fifty percent of the population has a migrant background of some kind. A colleague sounded out the counselling offices in Berlin-Mitte. Around half of them said they didn't have a problem with cultural diversity because there were so few migrants there. "We haven't changed anything in our service for the last thirty years. We speak German, we have almost only German-German staff." There was also neither cultural nor language diversity amongst the staff, and that's absurd. In a district like Mitte where at least fifty percent of residents have a huge range of different backgrounds and traditions, services actually need to be especially sensitive. One has to introduce cultural diversity as an accreditation criterion for licensed psychotherapists. We have a shortage of trained therapists who have native language skills or are at least foreign-language competent. Moreover, health insurers are still yet to finance services provided by interpreters and cultural mediators.

# Tzoa:

Many people come to us in Casa Kuà asking where they can go, to which therapists or doctors, they ask where they can feel safe, where is there at least an awareness of racism or transphobic attitudes. That's always very difficult. Naturally there are a couple in Berlin we can recommend, but they mostly have no places left. I myself don't know to whom I should go. There are lists from other organisations here in Berlin with doctors and therapists who are recommended. But a transphobic therapist can reproduce racism, for example. If a trans male person feels comfortable with a therapist, that doesn't mean that a trans female person feels the same. There are lots of very different levels and factors which come together. It's often about supporting people, showing them how they can navigate the system - provided that they have access to the health care system at all. Many people who come to us have no documents and are illegalised, and don't have any access. There are so many different levels through which people are excluded from the health system, officially or unofficially. Unfortunately, we can't always change the situation. But we can offer support.

hn. lyonga, Michael Westrich, Susanne Da-Costa-Badu

# hn. lyonga:

When I reflect on the act of planting, I ask myself what do we want to heal or repair. What do we want to look after? I ask myself how I can contribute to this in my everyday life. What could be an act of repair? When I joined the Bauhütte, I felt a strong need to do something, in the true sense of the word. The Bauhütte is a free space right in the middle of the city, a site where urban nature grows and people can meet, a place where I wanted to think about how we can create spaces for mutual healing and shared growth. Basically, I mean allowing coexistence. Side by side, to let different things exist at one place at the same time. In relation to plants, I wonder how plants themselves could represent us?

# Susanne Da-Costa-Badu

We've allotted eight patches and all of the gardeners are very active. Often, they come after work. Some are trying to grow peas and now they have a patch with wildly rampant flowers. I love looking at it. They bring with them the flowers they have at home, the flowers they may have on their windowsill and plant them here. Our garden is like a tiny oasis in the neighbourhood. People come together who are growing lonely or don't have any friends. They always say they come along because of me or whatever, but I don't quite believe that. The garden simply creates this cosiness.

#### **Michael Westrich**

In permaculture there's a lot of experimenting around with plants which support each other, and so you plant them together to enhance growth. This way of cultivating is inseparably tied to social experiments in communal living or other visions on how life in a community can work. Contact

Feminist Health Care Research Group (Inga Zimprich, Julia Bonn), Niloufar Tajeri, Pasquale Virginie Rotter, Ulrike Hamann, Ulrike Kluge

# Pasquale Virginie Rotter:

Amongst the people I work with I sense a huge longing to explore and try out what wellbeing is in collective spaces. In self-created and self-defined spaces, starting from intersectional experiences of racism, sexism, homo- and transphobia. In these spaces I know that I'm not alone and I experience that healing is a collective process. I know this need from my own biography, which is characterised by the feeling of having to do everything on my own. To feel anxiety and shame whenever I show myself to be in crisis and ask something of others. On top of that, I don't always get the signal that I'm welcome as I am. That makes it all the more difficult to find the help that's right for me, which would enable me to come into contact with what really deeply moves me. Again and again, my experience is that people are alone with the question: how are you? That makes me sad because there is a great and obvious longing for contact. A couple of questions are constantly present, like how can we bravely, how can we once again learn, to face up to the feeling of isolation? And in a social context that is permanently telling us that there's no one there when the going gets tough. How can we muster the courage and take the risk to ask people for support and say: "I need a hug." And at the same time sense the anger, and let it rise up, that it's not seen as something guite natural for marginalised bodies to receive the support they need? And the anger that we don't have the resources to make mental health for everyone an issue and indeed to enable it to happen? How can we be brave and gentle and angry all at once?

We're here in an institutionalised space, the Trans\* Inter\* Queer Community & Health Centre Casa Kuà, where people can dock in. They can meet people who have decided to show and offer paths to healing, recovery and wellbeing beyond the established medical system. Here people can make contact and interact.

It often makes me really angry that the dominant society does not understand that migrant communities, that communities of people with disabilities, every single marginalised community, have been developing practices, mindsets and forms of healing since time immemorial! I want this knowledge to be recognised and appreciated. These communities know what's best for them, and what they need. But in comparison to established spaces, to the established understandings of illness and health and the dominant therapy forms, these approaches are trivialised. That's connected directly to power relations.

I'd really like to talk a lot more with other generations and also with people from other communities than my own and find out more about how collective spaces were created and continue to be created. What practices were and are used? What did they undertake to do good in this society? I think we need to ask many more questions, to mirror these experiences as well as to show that this history and this knowledge are valuable.

#### Feminist Health Care Research Group:

Anyone who says that they need therapy is usually in the situation that they need it immediately. But that's not possible for most.

In our workshops we make sure that plans are made for how to best deal with the next crisis, both together and individually, and to identify what would help. We ask questions like the following: what helped you in previous crises? What kind of personal network do you have to turn to? What agreements do you want to make with these persons before the crisis surfaces? What's good for me when I'm in a crisis or in an emotionally vulnerable situation? We draw up a list of resources which are available. The goal is to become an expert in one's own emotional crisis on the one hand, and to learn from one another on the other.

#### Niloufar Tajeri:

I was jolted into action against the demolition of the Karstadt department store building on Hermannplatz while on parental leave. I was sitting on the couch breastfeeding my baby and saw the news that the department store on Hermannplatz was to be demolished. The head of municipal building and planning in Kreuzberg, Florian Schmidt, had posted about the project on Facebook - that's how I found out. I was shocked by the planned monumental project and how the historical building of 1929 was to be reconstructed. Straightaway I knew that this would only serve to further accelerate the housing squeeze on the longstanding residents in the neighbourhood and lead to large-scale displacement. That was 2019, a time when, thanks to scientific research but also the activism around the Fridays for Future movement, it was becoming increasingly clear to everyone that the climate catastrophe has been worsening exponentially since the 1970s. It was plain and simple: no, a limit has to be set, and radically. Tear down a building, build a new one, tear down, build a new one - enough is enough!

I'm an architect and know just how massively construction has changed the surface of the earth – whether through building giant cities or extracting materials from the earth, sand, stone, timber. Huge earth movements have taken place. For me it was patently obvious that it is simply absurd to tear down an existing intact building and pretend that it was 1929 again and build new cities skyward, obeying the very same compulsion to grow. I sat there on my couch and got myself into a frenzy. I felt awful. What can you do? I can't do anything, absolutely nothing, and I've just brought a child into this world. Can we even still live here in ten years' time?

I then became active and started contacting people. Within a few weeks we got the Initiative Hermannplatz up and running and this was an extremely empowering experience. Suddenly there was a lot of hope. The fears and worries receded into the background and the belief took hold that we can actually change something, or at least we can change the discourse or slow down the process.

We've succeeded in slowing down the process. Three years later and the thing's still yet to be built and it won't happen in the next three years either and we'll keep fighting to the end that it won't happen. At the same time, we're all too aware that this is only one building site, and it's different elsewhere, things just keep on going. What a few people have established through the force of their will and using their privileges – the privileges of having time or knowledge – is minute in relationship to what the status quo is and what the Berlin Senate or federal politics are pressing ahead with.

This feeling weighs heavily on your shoulders and pulls you down again, even when small successes are achieved. And then we get up and start stirring again or attempt to show alternatives or open up utopias with small, local things. But in the back of our minds, we know that everyone has to do something if the structural and systematic transformation is to be carried through with which is necessary to halt the climate catastrophe and put an end to the ever-increasing social inequalities. For a good life, this needs to happen on the political level, not just the individual. Contact

That's hard to take and difficult to swallow. This consciousness comes to the fore through activist work. It's constantly present, there's no distraction. That's an enormous strain.

For the last three years we've had an information stand at Hermannplatz. We provide information and come into contact with different people; some of them still know nothing about the plans even today. The reactions are often severe, very severe when we tell them. Middle-aged men get teary-eyed and ask themselves what's going on and tell us that they haven't been able to find any work for years and everywhere they ask for help, they get none. And then this guy comes along and can turn the whole guarter upside down. Others say that they've noticed for some time now that there's politicking targeting them. They're mostly people with migrant backgrounds or People of Colour. They tell us that they think it's great that we've found out what's planned and make such a racket. But also, that they're familiar with this situation for decades now and are convinced that what we're doing won't change anything. They say that we shouldn't waste our time but look after ourselves and take care of our families and treat each other kindly.

Cynical activists claim that these people have no idea how political work functions. I don't see it that way at all. I actually think that these people have been doing political work long enough, possibly with another definition of what it is. It is also political work to care about your community, to help translate ideas and experiences and thus act in a way as mediators, or give advice to new arrivals. This has been commonplace amongst migrant communities for the last forty, fifty years, not first since 2015. It's quite simply a form of political work to be engaged in this way and do these kinds of things.

Or people do this kind of work for decades and notice that nothing changes. It doesn't matter how they work or

what they do, they are disadvantaged structurally. And in response, they retreat at some point. People decide not to join in, they don't want to go to the demo only to be the first to get arrested because of racial profiling. They'd rather just look after their own family, community, their people.

Here we're back to the privilege to go out on the street and network. To work as an activist is different for a woman, a person with migrant background, or a Black person. We know that certain people are picked out from the masses at protests. Personally, I was much more concerned after Hanau to go out somewhere and openly contribute to a discussion. Only later did I realise that it may have had something to do with how, as a person read as a migrant or Muslim, you're perceived by racists very differently. Racists – that means not only Neo-Nazis and the AfD, but all the racist structures within a society.

We have to keep in mind that Berlin-Neukölln is a district with a very active right-wing scene, which defaces shops, smashes in windows, commits arson. And exactly where migrant politicians or leftist activists live. From the very moment you stand on the stage at a political gathering or openly in the public domain, then you're simply aware that you're now a potential target for racists. Their networks reach far, into the police force and public authorities. They can find out addresses or where your children go to school. Or public authorities can give an assessment of your political work that excludes you from employment opportunities. The question is therefore not simply if you want to or have the time to become active, but also what dangers and risks you're exposing yourself to. That's why it does make a difference how you are read in society, and it influences which groups in society can take action to assert their interests. That some communities retreat is obviously also an act of protection. But this means that certain concerns and fears are only rarely, and if so, then only with great difficulty, made public or visible. This in turn impairs a potential process that could bring hope, or it diminishes the feeling of self-empowerment.

#### Ulrike Hamann:

A lack of participation in society is also expressed through a lack of participation in the housing market. If you're homeless or threatened with becoming homeless, then you've already gone through a number of exclusions. You no longer feel part of society if you can't afford your flat in the neighbourhood where your own networks are. When you're forced to take a flat in a part of the city that you can still afford, then perhaps the threat is racist violence or other dangerous situations. Then the sense of participation dwindles, and eventually leads to a sense of isolation and a retreat inward.

It is important to recognise that people have succeeded in surmounting the boundaries of isolation and fear and have organised themselves into social groups campaigning for urban participation and the right to have a just share in city life. They've seen one another, made contact with one another and turned the situation into a collective, structural problem, instead of feeling ashamed about their social position. This considerably alters how threat is perceived and felt. In this struggle, in this joining of forces to fight rising rents, people come to life again.

We were able to observe this first-hand in the first few summers while setting up our protest camp at Kottbusser Tor. Each day women from the neighbourhood who were already retired came to visit us. They'd put on their makeup again and dress up to go out instead of sitting in their flats. And they pointed this out amongst themselves: "Oh, look who's coming, she's nicely spruced up!" These are steps out of isolation. Joining forces in the initiative and sharing problems reignited a zest for life, sparked sheer joy, the affirmative, and then once more hope.

Of course, there were also moments when hopes were disappointed or there was scepticism. Or fear of daring to hope again. We know that people affected by forced evictions basically collapsed; indeed, some didn't survive. Housing is an issue that is so existential that if you lose it, then it can trigger extreme crashes. At the same time, it can go the other way – the sense of the collective felt in the struggle to stay in your own flat can inject people with new optimism and a courage to face life.

One of the most important points of our initiative Kotti & Co was that there was a place to meet. The Gecekondu, the community hut, was built by the neighbourhood and is a place where people can meet and chat with one another. There's no specific intention tied to it. There's no need to continuously discuss politics or do something political; simply to be there is already a political act. As soon as they go to the hut people are demonstrating a bit against rising rents, but at the same time they are meeting others, drinking tea, or having a chat, simply being present and sitting around. This is also a form of collective practice. The absence of intention is important in this urban space, for it means that the space is not associated solely with a place of protest per se, but lots of other things can happen, like playing or listening to music, feeding pigeons, or nibbling on nuts. Non-commercial spaces where one can spend time without having to pay much money are becoming rarer and rarer in Berlin despite their essential function.

#### Ulrike Kluge:

I believe we ask the following, quite trivial but essential question all too rarely: how do we really want to live together? How do we really want to live? Yesterday I saw the play *Geht es Dir gut*? (Are you all right?) by René Pollesch at the Volksbühne. To me it was about precisely this question: socially we've gotten ourselves into a situation where we're getting more and more distraught and feeling all the more powerless in the face of supposedly approaching crises globally and yet we're still occupied with our own mental states and the question: how are we doing? And how mindful do we actually have to be with ourselves?

On the one hand, yes, to the point that we can say that we've developed further. In so-called Western contexts we've developed in the direction of self-reflective relationships. At the same time, this harbours the danger of staying in the confines of individual introspection. The sociologist Eva Illouz sees this process critically; I'd say that she identifies something like a psychoanalysing of society. She asks how psychoanalysis has contributed to how we persist in perpetual self-reflection, which though perhaps also impedes collective empowerment. As a training psychoanalyst I value the contribution psychoanalysis has made as an enabling practice for individual autonomy. That's one side.

The other side is that we all experience these crises, but some only observe or surmise them. Crises, which are collective, and which we realise can only be addressed collectively and in solidarity. And how do we bring this together again? This contradiction was very noticeable in relation to the pandemic, which paralysed us a bit. I notice that since the pandemic I wish that we had more spaces to reflect together and pause – to mourn what we have perhaps lost, to ask what we can develop out of this, and how we are to position ourselves between the individual comfort zones and social, collective challenges, as individuals, professionals, activists, groups, a collective. To find a productive interaction between one's own concerns and the social tasks we take on – I find this challenging. I'd say that this is one reason why – besides individual psychoanalysis – I've always been interested in group analysis as well as the tradition of ethno-psychoanalysis, despite all its problematic connotations. As individuals, we can only understand our individual suffering when we take into account collective, social realities and their effects. This understanding is the prerequisite for collective resistance and a means to ensure its effectiveness.



Alina Georgescu, Felicia Boma Lazaridou, Feminist Health Care Research Group (Inga Zimprich, Julia Bonn), Katrin Dinges, Lee Modupeh Anansi Freeman, Mazda Adli, Pasquale Virginie Rotter, Tzoa

#### Mazda Adli:

Discrimination is one of the strongest social stressors we know. Discrimination means social isolation, and this experience is a form of social stress. Social stress is a form of stress that intensely stimulates our stress hormone system. It sets our whole organism on red alert and through this causes considerable damage to both our mental and physical health in the long run. In experimental psychology, the threat of social isolation (for example, through exclusion or social disparagement) is one of those stressors which most certainly stimulates the release of the stress hormone cortisol. Social exclusion therefore also leads to mental illnesses.

Social isolation also leads to early death. It costs us years of our lives, and indeed more years than obesity, than smoking, than alcohol abuse. It's not for nothing that social exclusion and social isolation, in their extreme form, are used as forms of brutal torture or confinement. Experiences of discrimination make us ill, in a very direct way.

# Alina Georgescu:

Our experience at the antidiscrimination network is that many people are confronted by doubts as to what's happened to them, or indeed it's even disputed. Most of the people seeking advice have been discriminated against several times and for different reasons before they even come to us. I try to explain that discrimination can cause an array of traumata, and that you do not have to be left alone with them. People feel left alone: "I'm the only one with this

problem." "I'm left all on my own with this." Concepts like mental illness are taboo in this context, they put people off, or they create misunderstandings. Because people have their experiences of racism disputed every day - for example, through statements like "don't take it so personally", "they don't mean it like that", "that's just your subjective perception" - then people are traumatised and gaslighted [editors' note: manipulated by the group and disoriented and unsettled as a result]. The discriminating party is basically saying that the discriminated person has a problem or even that they are the problem. Here we speak of a reversal of the abuser-victim logic. Concretely: the discriminating party attempts to assign responsibility for their actions to the person discriminated against as a way to clear themselves of any sense of guilt. I think this needs to be stated unequivocally: people who suffer discrimination are traumatised by this blaming. The problem is called racism, sexism, ableism, anti-queerness, hostility to trans persons, and so on. That's a structural problem and not an individual one.

I speak about and work based on the principles of care and empowerment. Empowerment means, first and foremost, that people who have experienced discrimination have come to us and signalled that they are looking for help or advice. No other person can do this for them. Empowerment means that we are in contact with the person seeking advice in every step of the consultative process. Empowerment also means supporting people to use the resources they have or have created themselves to cope in everyday life. It's possible to also define racism through the access BIPoC persons have to social and political resources. If as a minority one is in a position of not having any access to specific resources, which others do – for example, White people – then I'd certainly consider that to be racism. In Germany, the first resource we look at and with which we work is the legislation. In particular, we work with the federal General Act on Equal Treatment (AGG, 2006) and the Berlin State Law on Anti-Discrimination (LADG, 2020). These resources, which are made available by society or more precisely the state, are however the bare minimum and full of gaps. We can't and don't want to then say that we can't offer any further support to the person seeking advice. The question always remains how we can actually help long term.

Here we then see if there are resources within the community: for example, support of family or friends. But also what resources exist outside the community, such as information centres. It's all about giving people the feeling that there's something stable to hold on to, to be able to keep going. That's one part of the care I try to give.

#### Lee Modupeh Anansi Freeman:

In the beginning of 2021, I voluntarily entered into a psychiatric inpatient clinic because I was experiencing a psychosis. It was one of the worst decisions of my life. I was in the facility for three or four days. I realised quite quickly that this was not the right space for me but I was desperate for help. For example, there were daily sessions where we, the patients, had to sit in a room and speak to each other about our issues, moderated by a social worker and a nurse.

At my first session I explicitly said that I didn't feel comfortable in this group dynamic and wasn't willing to speak about the things making me anxious. And that applied also to racism and trans phobia. One of the organisers objected immediately that their husband is Black and they know all about racism. I countered that, in my view, this argument doesn't count. Another patient was quick to inform me that my unwillingness to talk within the group about my experiences of anti-Black racism was racist. I contradicted. I silently pondered whether this unwillingness to speak with cis people about trans phobia was in some way cis phobic but knew that posing this question would be unconstructive and I'd feel even more isolated, unsafe and gaslighted [editors' note: to be manipulated by the group and feel disoriented and unsettled as a result].

When you are a poor, migrant, not academically educated, dark-skinned, gender-queer person, your concerns are not taken seriously, not at all. People positioned in dominant structures are very quick to dismiss you and you are treated as though you are making things up. People treat you as though you are not doing enough to help yourself despite the obvious systemic and structural factors that make it very difficult to maintain a sense of balance in oneself: a sense of wholeness in oneself.

#### Felicia Boma Lazaridou:

Racism has a special impact on mental health. This is mainly due to the roles of racism and the history of racism within mental health science. This not only makes it difficult to establish trust but also to move past institutional racism – on a theoretical level, on a practical level, and on all the various levels within mental health care. There is this perpetuating cycle. People need services, but they can't really use the services. If they use the services, they risk retraumatisation. Even if they look past that risk and still engage, there's actual retraumatisation, and so on and so forth.

Most of my care work is informal. At the moment, I work in community-based mental health, so within civil society. At the community level, there is a lot of empowerment work that deals with discrimination and racism. I think what's missing now is a focus on clinical mental health: namely Discriminations

looking at mental disorders in a clinical sense. That's where the stigma work comes in because it's somehow easier to talk about mental health as something that we all deal with and we all cope with, which is true. But then there are also individuals who are struggling with mental illness who may need medication, who may need long-term psychotherapy or hospitalisation.

When there's a severity of symptoms, I always try to introduce my clients to institutionalised processes, acting as a mediator for those experiences. Very, very often, my clients come to me with various complaints but are too afraid of retraumatisation. They are very afraid to go the more traditional mental health route, because they don't feel like it's a place for them. There is a lot of distrust in the communities: "Am I going to be seen and treated respectfully or in the same way as everybody else?" "Am I going to face discrimination? Or am I not?" The internal dialogue in itself can cause a lot of stress. On the other side, community-based mental health services exist and they are growing in number and growing in strength. So, we need more dialogue and more communication between communities and institutions.

I currently work for the National Racism and Discrimination Monitor, NaDiRa. Our end game is to make changes at the policy level. We have a strong emphasis on community. We actively engage in communication with communities because we see their value; we see that they have been working on the issue of racism for decades in Germany and have gone unnoticed. That is very much part of our strategic development as a team. It is ethically something that is very important. From my individual perspective, I couldn't talk about racism without the contacts and the discussions that I have on the community level. I rely on the conversations that I have with people to understand my environment. Part of my role is to translate community knowledge into a format that policymakers can read and digest and do something accordingly, as a next step.

# Feminist Health Care Research Group:

It's very important to introduce a quota system to psychotherapy and pay attention to the following: who becomes a therapist in Germany? Who gets an official licence recognised by the health insurers? Have those who get such a licence worked in the field of class and racist exclusion? Is there knowledge, education and further training in providing support for trans people? I believe these are things which are still missing in large sections of the German health system, especially in the area of emotional health. It's very important that persons are given the help they need and don't have to do educational work themselves when they're in therapy. Structural rules are needed to initiate change here. To be a therapist is a very privileged calling, and a profession in which one earns a lot of money. Socially, the profession is also a resource that persons with privileges draw on, use and hold onto. The privileges in this privileged profession are clung onto.

#### Tzoa:

You simply can't separate Berlin from the German context and German history. It's no secret that Germany has a very racist, antisemitic history and present. Naturally this has a huge influence on the health of people, particularly those affected by racism, whether day-to-day discrimination, microaggressions, macroaggressions, physical violence, or verbal abuse. Racism also leads to systematic disadvantages and financial inequalities, and these impact on people. This discrimination can make people ill, on all levels. It would only be logical for people who get ill through the effects of the system to go to doctors to regain their health. But the German health system is a mirror of society. People encounter the same racist structures in the health system. This leads to a situation where some of the people in my circle don't even go to the doctor anymore because they simply don't want to expose themselves to any further violence in order to just have access to the health system. For trans people affected by racism it's naturally another story because the discrimination can take place on several levels.

Where should we go? That's why this place, Casa Kuà, is so important for us. We can simply be here and can decide for ourselves: this event is now only for BIPoCs or only for trans people or only for trans BIPoC people, or only to talk about specific topics, to exchange views and impressions, and interconnect. Unfortunately, public spaces in the city are not accessible for everyone, nor are they safe for everyone.

Health is very individualised in Germany. The problem is levelled down to the person. People affected by racism, for example, are often accused of being the problem. They're accused of being too sensitive, they take things too personally, they don't have any humour. Seeing the problem as a collective one encompassing the whole of society changes and deepens the perspective. Then one speaks about conditions in society across the board, like everyday discrimination, financial disadvantage, and the isolation and loneliness resulting from them, which has a huge amount to do with a sense of wellbeing. The health system can only be changed fundamentally through a transformation across the whole of society.

#### Katrin Dinges:

I've lots of experience with discrimination, including personally. Despite it, I try to concentrate on the positive as best I can. I ask myself: can I learn something from it, or can I get something positive from what I went through? That's naturally very different to when you focus on the negative.

We all have deficits. If you go looking for one, then you're sure to find it. I'm an absolute duffer when it comes to working with my hands. But you can also just turn it around and say what you're good at. For example, society says: oh no, this person can't see. Alternatively, you could ask: what does this person see if she can't see with her physical eyes? How much does she perceive with her other senses? Does she look inward perhaps? It's the same with hearing. And emotionally in any case. No one even bothers asking about that. Society asks about all the things a person can't do. But you can just as equally ask if there is any value in that, or what can we learn from it.

For example, I found it interesting that at a doctor's surgery I was told that I might have to wait a bit longer. It sounded like an apology, as if they were embarrassed and think they weren't quick enough. I thought to myself, let's turn it around, then it directly sounds quite different. They take their time in a context where everything is supposed to be done quickfire. Isn't that valuable? I'm only too glad to wait the extra couple of minutes.

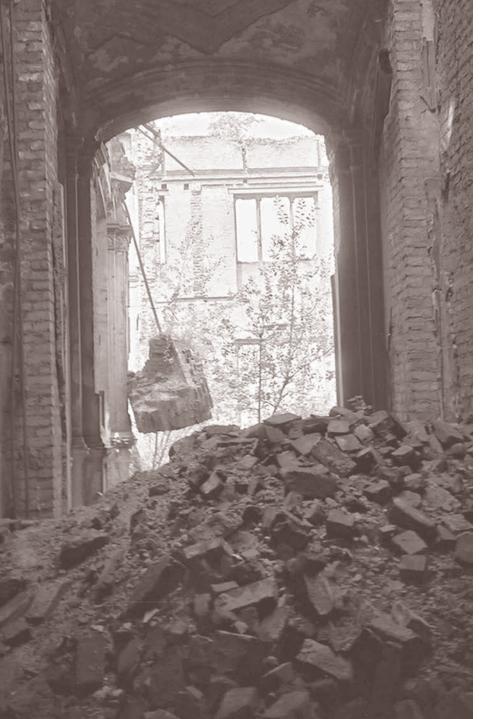
For me, inclusion functions similarly. In a really narrow sense, inclusion means that everyone can take part, that all are welcome. It's not about the inclusion of singular individuals into the majority, but every person becomes included because we offer support individually. As much freedom as possible, as much support as necessary. I think that's great. That's what's actually meant with inclusion, that every person gets what they need. This broader, unusual idea of inclusion serves the individual and the collective. This testifies to being in a very healthy mental state. I feel good straightaway. I feel that it's me who's meant. I have the impression they want me, and indeed with all that I am. How wonderful, how beautiful is that? I think that's exactly what's meant when we speak about mental health. What serves us best, including ourselves as individuals? What serves the collective best? If we think like this then we fare well in the world, in our specific context, in the universe, in society and together with ourselves.

#### Pasquale Virginie Rotter:

The issue of violence in public space is very relevant for the people I'm involved with. There are areas in the city, certain streets or railway stations where it's not safe for me to be as a Black, feminised person or a visible Person of Colour. This really calls into question any experience of feeling at home. The city is quite simply not accessible in many places because I'm not safe, neither physically nor emotionally. In empowerment contexts we create our own safe places. But how does it feel physically to once again venture beyond them? Suddenly I'm no longer safe. Due to the forceful and pushy way people move through the streets, or because the city's violent history completely overwhelms me.

By that I mean that urban space has a numbing effect in my perception, because of the sensitive body that I am I have to blend out an awful lot. At the same time, though, I have to be really on the alert and on the lookout. I have to be able to read the surroundings and that requires additional mental capacity that I'm permanently mustering. While I take a look at my phone, part of my attention is simultaneously occupied with noticing as much as possible around me, making sure I'm safe. That's not some individual effort. Like many other marginalised bodies, my body has memorised that I'm not safe. We share this horizon of experience. I was in contact with bodies which, for example, experienced violence in a street where I move easily, without any trouble. In this moment I don't experience myself as separate. This is incredibly exhausting. It erodes your capacity to simply have a good life, or indeed to even take part in urban life.

In my experience, privileged positioned persons are basically unaware that discrimination ties up capacities. To be fully occupied with finding information and solutions to just survive ties up your capacities. This is a huge factor for me: which mental capacity – in the sense of energy – is tied up when I'm immersed in trying to deal with discrimination, racism and violence? This is something that needs to be understood. And then, after that? There must be absolute trust, trust that the different marginalised communities know best for themselves what they need, that the expertise lies definitely with those who move about in their own very specific living situation in this city.



# Kader Attia

As an artist and curator, I believe that the arts sphere is a place that we really need to care about. We must care about the exhibition space because we are living in a society that is erasing all human interactions. In the exhibition space, individuals come to a place where they don't necessarily speak to each other. But the fact that they experience this very same exhibition and sphere of the artworks makes them belong. It creates a group for them to belong to, a virtual group of emotion, of knowledge, of learning and of unlearning, to quote Ariella Azoulay. I really hope that this kind of space – you can also call it agora – can be saved, because it has cemented human society forever.

Mental health does not only affect fragile subjects. We are all vulnerable when it comes to mental health. Artists have the capacity to immerse themselves into the fragility of mental health. Art has the capacity to provide room for the unpredictable. Art can address spaces and times that are not understandable, and find forms to express the things that we do not find words or language for.

We need art spaces because, in my view, the future of mental health is the collective. It has always been the collective. Because the problem is the collective. So, the collective should be the solution. This is where we must start working, we have to maintain the care of the collective. Alina Georgescu, Carolin Ochs

# Carolin Ochs:

During my studies I learnt that legislation in Germany actively violates human rights and that many people have no access to the basic right to health. That sparked my interest, and I then directed my professional orientation in a way that has seen me end up in a field where we can practically open up this basic right to health to many people. I work in the clearance office for people without health insurance. We also do lobby work to initiate change. Generally, it's anchored in Germany's Basic Law that everyone has the right to health. Germany has ratified the EU's Charta of Fundamental Rights. This means that this Charta has to be incorporated into local laws. Supposedly there are laws applicable for all scenarios, but de facto these laws simply don't work.

# Alina Georgescu:

The laws are also very sketchy in my area. At the Antidiskriminierungsnetzwerk Berlin (ANDB) at TBB we work mainly with two laws: the General Act on Equal Treatment (AGG, 2006) and the Berlin State Anti-Discrimination Act (LADG, 2020). The AGG is the first law ever in Germany created in reference to discrimination. The law covers only a minimal area, however, namely discrimination at the workplace, during the application process or when people experience discrimination in the area of service provision. There's a catalogue of attributions for identifying discrimination and potentially taking legal action against disability, sexual identity, age, religion, worldview or ethnic origin. The LADG has only been in existence for two years. It's the law of a specific federal state, Berlin, and it covers acts of discrimination committed by governmental authorities. Together with other NGOs we put in enormous effort to see that this law

was passed, and we were involved in developing the legislation. But it, too, is not without its problems, for example federal authorities – such as job centres, foreigner registration offices, youth offices, customs – are not covered by this law. In contrast to the AGG, however, the LADG has extended the range of attributions, and very importantly, "racist" and "anti-Semitic" attributions now supplement "ethnic origin" (AGG). New attributions are also included in the catalogue: chronic illness, language, gender identity and social status.

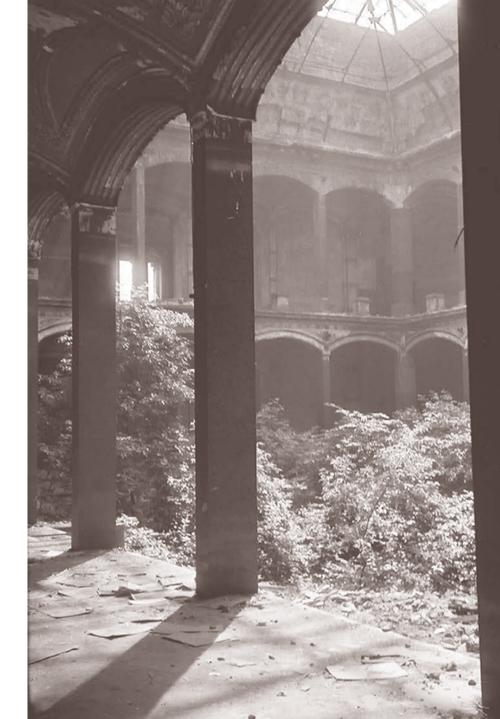
These laws raise hurdles. Just very basically: how are people to know that these laws exist? In the work context, employers are obliged to inform persons beginning employment about their rights. Naturally enough, employers are also not to discriminate. But they also have to be proactive and take measures to ensure protection from discrimination, for example by setting up in-company AGG offices. Many employers we've contacted because of discrimination complaints guite simply fail to fulfil their obligations. Most of the people who come to us can't afford a lawyer, they don't have any legal expenses insurance, they aren't members of a trade union. All in all, they can't find any legal representation. They can't make use of the laws. Another hurdle is that most people don't understand what it means to assert their rights in order to then lodge a complaint. That all sounds so abstract. In the end, it simply means to make a short description of what has happened and reference the law (e.g., AGG) and send it to the discriminating party. Another hurdle is that this must be done within strict deadlines. For example, the AGG time limit to make use of your rights in an employment context is two months. After that, the person can bring legal proceedings within three months. If we assume, despite these hurdles, that the discriminated person takes the legal path and asserts their rights within the time limit and has the financial resources to litigate within a further period of three

months, then what happens after that theoretically? The most that can happen is that the affected person receives a bit of money. Most of the people who come to us don't want any money. People seeking advice simply want far-reaching structural change, they want to take a stand. This means that the whole process is often very disappointing.

# Carolin Ochs:

People fall out of the system quite simply because of the reality of their lives and they can't profit from their right to health care. This is very evident in the case of people without documents. If a person is in Germany without documents, then they are obliged to leave the country. They aren't allowed to be here at all and actually have to leave. But the same person has a claim to services based on the Asylum-Seeker Benefits Act. But to receive these benefits the person has to register with the Social Welfare Office. In turn, though, the Social Welfare Office is obliged to notify the Foreigners' Registration Office of anyone who has registered without the necessary residency documents. This means that people living in illegality with respect to residency status will not register with the Social Welfare Office because they know that the Social Welfare Office will notify the Foreigners' Registration Office. In effect, in theory there's a law, there are benefits and services, and a right, but people can't make any use of them and fall through the system. They then come to us, to the clearance office for people without health insurance, because they're without any coverage if they fall ill.

I think that Berlin offers more publicly financed contact points for people without health insurance than other federal states. But that's just poor compensation for this gap in providing health care. A genuine solution would be to adjust federal legislation.



Leisure

Deiara Kouto, Diana Mammana, Kerstin Kühn, Lea Hartung, Margareta von Oswald, Mary Buteyn, Maryna Markova, Remzi Uyguner, Ulrike Koch, Veit Hannemann, Željko Ristič

When you are able to do what you want with your time, a feeling of contentment arises. When you have time to reflect - alone or with others - then it's possible to observe how situations arise. When you find time to listen, then work can be a learning process. Sometimes it'd be good to have more time for boredom when working. The best ideas come when you're bored. Creativity suffers when things are charged up. The good ideas come when you're on holiday. Why can you have really good ideas about work when on holiday? Holidays are productive. You drift along. In the GDR there was a reading day for librarians. Once a week you had the day off to read. The time was used to do the laundry or the washing up. But a lot more reading was done, too. And things thought about. Who decides what's work? Who draws up the job descriptions? These persons are often not in our situation, in our job. Actually, they can't really know. That's noticeable. We must have time for the people we work with. Our work would somehow look very different. Then we'd have a completely different workday.

Movement

Feminist Health Care Research Group (Inga Zimprich, Julia Bonn)

In recent years we've researched a great deal into the health movement in West Berlin which arose at the intersection between the squatter scene and feminist movement at the end of the 1970s and the early 1980s. The political climate at the time was one in which a lot was possible, and a lot was tried out. The health movement was not simply a protest movement that demanded a new health system. It developed countless plans and concepts for improving health care and providing health advice. Initiatives ranged from doctor and chemist collectives through to feminist health centres, radical therapy forms and courses on vaginal self-examination at adult education centres.

The health movement had a decisive influence on the current structures we find in Berlin. There is still a doctors' collective, the Heilehaus, the Feminist Women's Health Centre. But also, the Weglaufhaus, the anti-psychiatric counselling centre, the anti-psychiatric self-help cafe KommRum, and the Berlin crisis service, all founded as part of the health movement. When you think about the special institutions still existing in Berlin today, then you understand that they are from a specific time, one in which lots of people were very active and created alternative structures. It is supposed to be nothing out of the normal to be able to resort to alternative services when you are in an emotional crisis or indeed just need regular health advice. Unfortunately, it's become the exception that institutions like these still exist in Berlin today.

One crystallisation point for the movement was the Health Day in Berlin in 1980, which was held as a counterpoint to the annual general meeting of the German Medical Association and explicitly addressed the continuity between the German health system and the Nazi past. It was the first of five Health Days which then took place in Hamburg (1981), Bremen (1984), Bavaria and Kassel (1987). The Health Day of 1980 was organised by alternative health centres in Berlin and brought together currents from the diverse health movement. Around 12,000 persons attended. Many doctors were active in the movement, above all male doctors, some of whom had an occupational ban placed on them for political activities. From this context a strong movement emerged which challenged the fundamental structures of the health system: how can hierarchies in the health system be dismantled, for example, between patients and doctors, but also between nurses and senior physicians? How can the pharma industry be effectively criticised? How can patients become self-empowered? What would patient self-organisation and co-determination look like in practice?

We find it absolutely fascinating that there was a social movement that made health a political issue. Health care is such a complex topic, and it is difficult to discuss. Who really wants to think about how the health system is structured, how health insurance functions in Germany or how the health insurers got started? And yet, all of us are directly affected in some way. Health policy has concrete effects on how we experience illness, crisis and our need for health care, on which support we can then get or which hurdles block access. Before COVID-19, the health system wasn't really such a big issue socially. But since then, issues like care, the economic pressure on hospitals, working conditions in the health care professions, concepts for curative treatment and healing, and the various types of care are attracting more and more attention, including in the art world.

We are interested in what we can learn from the example of the health movement, specifically the strategies for making health a social issue. Are there strategies we can take up again today, and are there practices we can pass on? The varied forms of action have always fascinated us. Fliers and zines were strategically distributed and displayed in hospitals, making public the unwanted news from the health system, mentioning, for instance, mistakes made in operations, or reporting that the senior physician drives a car sponsored by a pharmaceutical company.

At the time, the health system in Germany was, similar to today, very hierarchical, very patriarchal. Feminists refused to accept that it was mainly men who were gynaecologists. In courses on vaginal self-examination, they swapped their experiences and together collected knowledge on their own bodies. It was important to become experts of their own body, for it enabled them to counter the patriarchal point of view and its diagnoses. We have to realise that Clio, a periodic self-help journal, has been published continuously by the Feminist Women's Health Centre ever since. The cripple movement was very active at the time in Germany, with important protagonists such as Udo Sierck and Nati Radtke, who also criticised the health movement-and the cripple women's group in turn the feminist movement - for being excluded. They called for a self-determined life for the disabled, beyond pity or gratitude, which was still the prevailing view of society on disability at the time in Germany. Another issue prominent in the health centres, in particular thanks to the Berlin Info Office on Work and Health, was health at the workplace. The practitioners there were inspired by how the working class in Italy had taken the initiative and practised their own medicine. They were of the opinion that the workers themselves were best gualified to judge the health conditions at their workplaces and could initiate the

processes necessary for organising healthier working conditions or tackle damaging factors like shift work, one-sided and unbalanced strains on the body, and such problems. The Heilehaus is another example; they brought out a health magazine for squatters, *Doktorspiele* (Playing Doctor). How can one keep a healthy diet as a punk? What can one do against the widespread skin disorders in the Kreuzberg of the 1980s? Which household remedies help against lice, scabies and colds?

Overall, the time was shaped by socially organising discontent. The booklet *Wege zu Wissen und Wohlstand* (Ways to Knowledge and Prosperity), for example, was sold under the counter and had instructions on how to simulate difficult to diagnose illnesses and so get a medical certificate. It was about understanding illness as a timeout from having to function and use this time to recollect one's energies, reflect and organise social and political alternatives.

People were attempting to jolt the health system from all sides. This is the fascinating thing about the health movement. It came together from all different areas and health was quite simply a topic for every person: how do I see a doctor? How political is my illness? What's that got to do with society?

As much as the movement inspires us today, there's also a lot to criticise. We think that many positions were not included, in particular the positions of Persons of Colour and trans persons. We think it's important to point out these exclusions when we're working on the health movement and passing on the relevant knowledge.

We approach affirmatively anyone who was part of the movement forty years ago. We are grateful for what they accomplished. Talking to them, they often noted that it was decades since anyone had shown any interest and they were about to throw everything out. We are so grateful that they kept all the material. As part of the transmission, it is important that we bring things up to date and criticise aspects, point out flaws and gaps, and take these to heart in our own work. But we still enormously appreciate all that was done and established back then.

We have a feeling that a new health movement is forming, one that includes anti-racist and anti-ableist work, and which joins forces with new initiatives, structures and networks. As the Feminist Health Care Research Group, we take a position between the generations, but also between the discourses. We sense that those from the health movement and from projects of the second wave of the feminist movement have done all this work over years on a voluntary basis and were acutely aware of the precarity of their situation. On the other hand, today young gueer anti-racist initiatives are emerging who rightly criticise how excluding the institutions of this period are, particularly for Persons of Colour, queer and trans persons. We underline this criticism. A critical discussion is often missing; indeed, it has yet to really begin. We have to ask: what resources are actually available, who has access to them, and how can we make sure that they are shared out more evenly? Which work would be necessary to do this, precisely in the older structures? How can we open up access?

We have to have this discussion, and wherever possible, press ahead with changing, opening and expanding these social spaces. And precisely at a time when passing on the knowhow between generations is on the agenda. As we see it, spaces with these traditions have the inner capacity to take up the work. But we have to actively call for it to be done.



Norms

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Andreas Heinz, Feminist Health Research Group (Inga Zimprich, Julia Bonn), Kim Wichera, Lee Modupeh Anansi Freeman, Tzoa

#### Andreas Heinz:

In psychiatry and psychology there's a tendency to construct norms and the idea prevails that mental illnesses are anormal and health normal. That this is nonsense is something that's been known for seventy years. The philosopher and psychiatrist Karl Jaspers once wrote: 'Caries is normal in my time, but it's still a disease.' Statistical normality thus ceases to apply. And if you no longer statistically enumerate a norm but take a concept of illness and health and fixate an ideal as to what makes a tooth healthy, or how a person should move, then you immediately see how this approach can be burdened with ideology. You're not at liberty to compel people to lie in a Procrustean bed of expectations. If you're in luck, then you're in a tolerant, open society that permits diverse ways of living. If you're unlucky, most of the countries around the world are not tolerant, open societies, and all sorts of possible socially unwelcome behaviours are stigmatised.

# Kim Wichera:

I don't find the concept of mental illness helpful. Who actually determines it? Where does illness begin and where does it stop? Who defines it? At which point in a process do I decide that recovery is taking place? Or is it indeed possible that there is no recovery, and you have an illness you've got to deal with your whole life? Or is the crisis understood as part of your life experience, as experiencing our very existence and a possibility to express the modes of behaviour we have as humans? In that case, a very different question arises, namely the question of human rights, of existence and tolerance.

#### Tzoa:

What is considered ill and what healthy in our society? Issues like these bother me, on both the personal and social level. Who actually defines what? Who possesses the power to define who and what the norm is – what is normal? This is something I find very fascinating.

In capitalism a person is considered healthy when they can be productive and work within the system. What's important for me is to understand how the person is feeling. I consider this society to be ill. And this begs the question: how can a person be healthy in an ill system? Or is a person considered ill in an ill system actually healthy? As a trans gender person, I am pathologised by the official health system when it diagnoses me as mentally ill. But I certainly don't define myself as or feel that I'm ill.

# Lee Modupeh Anansi Freeman:

The pathologising of transness is very upsetting. I don't need anyone to confirm my mental health status for me to know whether or not I want to have surgeries or to have access to hormones. I think it's incredibly infantilising. Cis gender people make decisions about their bodies every day – decisions that are either significantly life-altering and/or life-changing. There seems to be no gatekeeping of those decisions. It's incredibly upsetting because this is just another brick in the wall of the systems that keep us from actually living our best lives.

#### Kim Wichera:

The main question in mental health is: when do I feel well? I'd contend that a large number of factors are necessary until everything actually feels good for a person. There are scores of social factors, for example: what's my current situation with respect to income, with respect to housing, with respect to social contacts? We all have prolific inner lives. For me, the question is to what extent this inner life has - day in, day out - a place in the outer world, under conditions which are often extremely difficult. No longer to just keep on functioning and performing, but allowed to simply be, with all the guirks which are part of being human, and also with personal questions: how do I position myself in the world or how do I get along in this world? This guestion is uppermost in many people's minds. We all go through crises in our long lives. Thus, for me it is vital to ask where and how there can be a place within society for people who can no longer comply with certain rules of behaviour we have imposed on ourselves. And how do we deal in this society with people when they can no longer adhere to this social contract and instead act or talk or make connections which I simply don't understand?

#### Feminist Health Research Group:

In our view, the concept of mental health is associated with psychiatry and a certain stigmatisation. We thus prefer to speak about dealing with personal or emotional crises and needs. We also don't employ the concept of health with the goal to distinguish health from illness but speak about crisis as a time of emotional work, which we all have at some point or from time to time in life. Needs and emotions are part and parcel of life and are not to be split off and cast away as something that's ill and has to get better or as if wellbeing were the goal. In our workshops we try to say, for example. that we focus on emotional needs because they are often repressed. We regard emotional work as very valuable – because it is socially relevant. Society changes in relationship to how many people who are part of it are willing to work on themselves emotionally. On their fears and anxieties, on their mechanisms of repression, on their positionings. We really wish that there'd be greater recognition for the emotional work people do in therapy. A great number of individual problems have structural dimensions. And we'd criticise that the health system in Germany does not follow this approach.

What does your personal problem have to do with society? This is naturally the classical feminist formula which says: me too, me too, me too! I too feel worthless, and I too feel as if I don't get everything done and can't keep up. And then one notices at some point: uh-huh, when everyone feels like that, then what are the conditions which bring us in this situation?

#### Lee Modupeh Anansi Freeman:

I would like to have children. I'm taking my first steps in trying to figure out how that works as a transgender person with a uterus. I think a lot, for example, about postpartum depression and how birthing could affect me as a depressive person and about how I would find compassionate care. How do I find a therapist whom I can relate to and who can relate to me, who has that expertise I am looking for but is also sensitive to transgender issues? Any recommendations? I doubt it. I am also in the process of trying to understand myself as a neurodivergent person. There is so little information about the links between being neurodivergent and being transgender, although a high proportion of transgender people are also neurodivergent. There are no meaningful studies on this and there are certainly no meaningful studies on the intersections of being neurodivergent, being transgender and being Black. So there are a lot of aspects around mental health and emotional, psychological

wellbeing that are not even currently touching the surface of being addressed by the systems and institutions here. So unfortunately, a lot of it is like trial and error. A lot of it is being the first, being a trailblazer, a pioneer. That wasn't quite what I was hoping for. For my experience, I really was just hoping to go through it kind of smoothly – to be just like everybody else – but I'm not just like everybody else. It's like the first pancake. It's always a little bit weird. The temperature is not right. Not enough oil – too much oil, the pan is wonky. There's a lot of figuring out to do to get the conditions just right. I suppose I never intended to be the first pancake in any context. But here I am.

### Tzoa:

In my utopia there are no health norms or body norms: everyone can define themselves. There is neither racism nor any other form of discrimination. Everyone is seen as they are and what they want to be seen as. Each body would be approached and treated with dignity. Everyone would have a right to be heard, enabling them to define and decide for themselves what they need, which path they want to take or what kind of support they'd like in order to find their path. I try to realise this in my own practice, for example, by refraining from using words which I'd be imposing on the patients. I have no diagnosis with which I describe mental health but describe rather the possible relationships I see. When people come to me then it's all about their needs and what they want to change. I work with their own definitions instead of imposing my own ideas on them. Deiara Kouto, Diana Mammana, Lea Hartung, Margareta von Oswald, Remzi Uyguner, Željko Ristič

#### Lea Hartung:

In everyday working life there's a lot of stress. I ask myself, what's the cause of stress? Is it because of the projects, the current situation, or my own way of working?

#### Diana Mammana:

Tools like continued education give the impression that something is being done for the employees. But in fact, it's just another instrument to improve oneself and function better.

### Remzi Uyguner:

Every therapy that the insurance pays for is oriented on you recovering your health in order to integrate you into the working process.

### Željko Ristič:

If you don't have strategies to deal with stress, then you burn out.

### Margareta von Oswald:

Burn on displays similar symptoms to burn out, with the difference that one keeps on functioning. That means that the breakdown that comes with a burn-out syndrome doesn't happen. Burn on is most evident with those who burn for their job. For people who suffer from burn on, breaks are there to briefly recharge the batteries and then carry on as before. The catastrophe never happens because one knows how to find quick solutions without ever changing anything fundamentally. Self-optimising also means innovation for me. You have to improve yourself and be progressive. In my opinion that's not really possible with human beings. The idea is utopian. Always higher, better, faster.

#### Diana Mammana:

We aren't machines that can be programmed. We all work in an area in which there are people who can change something. Our work is never really measurable. Self-optimising is in some way always geared to measurability and comparability.

# Željko Ristič :

Our instrument for measuring is a category, namely the hours of our availability. The model conceals what really happens. Models like these have very little to do with reality. I don't understand how one could measure how much time a person needs in order to give good guidance. If indicators are then created, it gets very critical. When it's about time, then that's when it stops with me. We have to be available for a certain number of hours a year to justify the financing. What I do here, for example, that's nothing. It doesn't count as work.

# Željko Ristič

I view the concept of mental health very critically. For me it means an inclination towards perfection. We're the very opposite. We work with youths who are going through crises of meaning and identification. Crises of not succeeding, of a lack of prospects. The whole of society is striving for maximal perfection. We wish it would be possible also to show one's weaknesses. That's what we work with and what we set as an example for youths. If everything were perfect, then our job wouldn't even exist. We try to redress the balance. We're surrounded by perfection. Be perfect in the family. Be the perfect son or daughter. Get the qualification. It's always about performance and achievement, grades, reviews, target agreements. We're supposed to permanently deliver, and we bring up our kids the same way. And so it rolls on, day after day. The children are stressed, society is stressed. That's why it is our responsibility to create spaces which are genuinely free, where it's possible to simply switch off. I ask myself in which direction we want to go with this society. Seemingly, there's the norm in our society that one can succeed at and achieve anything. And then when you fail, you're alone. That's a huge problem. That's why I was somewhat sceptical about the concept of mental health at the beginning.



Present

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Feminist Health Care Research Group (Inga Zimprich, Julia Bonn), Kader Attia, Pasquale Virginie Rotter

### Feminist Health Care Research Group:

Germany has a very complicated, difficult history and there is a lack of critical appraisal of this history across many levels. We at the Feminist Health Care Research Group look at the health system. We live in the continuities of these historical processes. In the National Socialist regime, Jews were murdered, queer persons persecuted and murdered, Sinti and Roma murdered. People with disabilities, persons with psychic problems were killed, people were forcibly sterilised. Medical experiments were conducted on people. Colonialism is hardly touched on in Germany.

These histories continue to have an effect in our society, they're present, and indeed are so in all institutions throughout the country. The health system is also one of these institutions, but so are homes, for example, where people with disabilities are placed. These are processes that continue to have an impact on all of us and are constitutive factors of this society.

Another example is German reunification, which has produced enormous disruptions in many lives throughout Germany. Scores and scores of biographies and much worthwhile knowledge were devalued, rewritten, and professions, values and truths vanished. There was no collective discussion about how the legacy was to be approached. Persons with psychological problems and life crises went into individual therapy, although obviously a collective process was at work that caused all the disruption and discontinuity.

Socially there are no formats for working through our shared enmeshment and the collective experiences, that is, the structural and social level of our subjective experience, our personal problems. As a society we have to ask: what are we repressing? What are our fears and anxieties? What are our defence mechanisms? We firmly believe that this can't work unless collective dimension is recognised.

### Pasquale Virginie Rotter:

One aspect that is very relevant for me is the knowledge about all that has already happened in this city. Specifically, against the background of Germany's violent history. Some places still exude it. I'm convinced that everything has a memory. Every stone, every tree has a memory. And it's possible to sense this in the city. You can really sense what happened to people just a short while or several hundred years ago, how humaneness was understood or was denied to some. This is hugely relevant for some communities, particularly in Berlin. On this German soil, on the very ground where Nazi crimes were committed.

What does this knowledge about the violent history do to us? Which part of our human capacity to perceive and sense, potentially at least, everything around us do we have to actually split off in order to cope with how stolen bones are stored in various buildings in Berlin? What does it do to the people who work or study there, at a university, for example? What does it do when we know there are bones lying there, and no one really knows exactly where they're from, let alone what their history is?

In exactly the same way we can perceive places of violence, we can also perceive places of resistance and energy. In the more recent history of resistance there is the initiative to change street names, for example. The May-Ayim-Ufer is like a refugium. It feels fantastic to walk down the Lucy-Lameck-Straße instead of Wissmannstraße. But a great deal is missing from the city's history. It is as if a part of the reality of a diverse array of communities is erased. Not only the resistance movements are forgotten, but also the energy invested in these movements. Because there is hardly any commemoration of these movements, and these examples of resistance are barely visible. That's the very opposite of empowerment and it weakens the individual as well. So much of this city's history has yet to be considered and worked through. I thus move through a city in which lots of lies dominate, a city where so much is masked over. And more and more lies are always being added. I find this to be extremely toxic.

#### Kader Attia:

Repair and injury are always interlinked; you cannot separate the wound from the repair. Western modernity suggests that repair means to return to a state before the accident or incident occurred, before the injury. Modernity is obsessed with the fantasy of controlling time. Controlling time means controlling the accident, the crack, the fault, by pretending that repairing means you can erase the wound and come back to the original form of the object. This is an insane fantasy. We can never go back to the original state of things.

When an object was broken in pre-modern societies – African, Japanese and also European – people used to repair it by keeping the injury visible, as, for example, with big, rough staples or the Kintsugi art from Japan, where the crack in ceramics is filled with gold. Many cultures see the wound as a fertile ground for an object's new life. If you take these processes as metaphors, and apply them to society, the effects are huge.

One of the sneakiest processes of imperialism is the governance through regimes of invisibility, hiding the crime. In her book *The Colonial Trauma*, Algerian psychoanalyst Karima Lazali quotes Albert Camus. Camus depicts a con-

versation between an officer and a settler after a massacre in a village, in his book Le premier homme (The First Man). They are looking at the dead bodies, at the village in ruins. And the officer says: "Well, if what we have committed here is a crime, then we have to erase it. We have to hide it." Through ten years of research, Karima emphasised how colonial crime has produced so many absences in the colonised subjects' narratives. By erasing the injury, you deny the past. Learning from her, I started to focus on how much revealing these invisible injuries is crucial to understand how to repair. My interest in mental health in Berlin comes from the observation that it is a city that has been marked by history. Despite all the repairs, you still feel the injuries of the past. These injuries, though they seem silent, still produce a significant noise. We live in a completely wounded world, without acknowledging it.



# Relations

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hn. Iyonga, Remzi Uyguner, Ulrike Koch, Veit Hannemann, Željko Ristič

# Remzi Uyguner:

Our conversations in the neighbourhood about mental health took place in an atmosphere without any pressure to achieve anything. That's what I liked the most. No one controlled what we worked on. We got to know each other. We all work in the same neighbourhood and had probably heard about one another in some way or another, but we hadn't yet had contact this close.

## Ulrike Koch:

The conversations were about taking the time to reflect on our working conditions. For me, this was rewarding. I did this outside of my working hours and I would've liked to have had my whole team there.

# Veit Hannemann:

I found it to be a very good project for networking, because I knew some of the others by name but had never personally met them. Through the project I got to know not only the people but also the institutions behind them. The project was participatory; we could choose our own topics. There was a space – if you like, a resonance room – to ponder and reflect, and at the same time to listen to what others are reflecting on.

# hn. lyonga:

When an opportunity to be in conversation with Gropius Bau presented itself, Michael Westrich from Bauhütte e.V. and I took on the task of illustrating the work of Bauhütte and its multiple initiatives and projects. My own personal motivation for being part of the conversation started with a certain curiosity about Gropius Bau. I was curious to visit the building; to see for myself what its spaces were like on the inside; to understand how a place marked by complicated colonial histories can seemingly become a place for Artists of Colour and Black artists to exhibit their works; I wanted to know how my Black body would feel within its very heavy walls; to proactively criticise, question and identify what needs to be changed to make this building a "soft space"; to throw its doors wide open; to be in conversation, actively.

# Remzi Uyguner:

For me it was very important to come into contact with such a large institution that's just around the corner from where I work, without exactly knowing what we'd get from it. First off, make contact and stay in contact. That motivated me personally, and also the association, to take part. Personally, I consider this to be a beginning of something that should and needs to be expanded upon.

## Veit Hannemann:

One question I have is how I can take back the topics discussed in the group and present them to our staff. For example, the topic of overwork. Where could we set up a resonance room where we come together and think about how we can speak about these topics? I haven't got an answer yet. But if it worked here, then perhaps it can also work in-house.

# Željko Ristič:

Lea Hartung approached me. I've worked with her for a long time. She works in the Central and State Library Berlin and does community and outreach work. I think very highly of her. That was the first doorway and I trusted her. I'd heard about the Gropius Bau but I'd never been there. In Berlin, throughout my everyday life, it has never played a role. There isn't a newspaper telling you something about it. No one knows it. There isn't any publicity for particular target groups. That's why I was curious. We're often used as an exploited association because we have such a large network. That's why I'm often wary about cooperations with large institutions. But in this project, I really had the feeling that it was about us. For once it was the other way around. It was all about developing something together, something we can participate in. Diana Mammana, Dilay Dagdelen, Kerstin Kühn, Lea Hartung, Mary Buteyn, Tim Ünsal, Ulrike Koch, Veit Hannemann, Željko Ristič

#### Željko Ristič:

Our teenagers at outreach.berlin often just want to be there, sit around, hang out, be part of what's going on or listen to conversations. It's the laidback atmosphere. When they go home, they're confronted with pressure and stress. Sometimes they simply come to us to get a rest. We include everyday routine activities. Shopping, for example. Then they feel that they're of use. There aren't any more public places for youths where they can simply hang out. They do exist, but they're getting smaller and smaller, and fewer and fewer. That's why youths gather together in such numbers in parks. Bars and pubs are far too expensive. How can a young person afford it? We attempt to create places where it's possible to just catch your breath.

#### Lea Hartung:

One of the library's main qualities is that it's fine just to be there. Many come because they can concentrate on their work and perhaps don't even communicate with others. And yet, in a library you always have the feeling that you're not alone. It's this busy quietness. In a library you're never asked why you're there.

### **Dilay Dagdelen:**

We have a sewing workshop every Friday that actually runs only from 4 to 6 pm. But the women want to stay until 9 or 10 pm and dance there after they've finished sewing. We let them. Then they don't have to go home where perhaps they feel lonely.

# Veit Hannemann:

How do you actually notice that someone is lonely? No one comes and says: "You know what, I'm lonely, what should I do?" We don't approach people in the neighbourhood centre in this way and they don't make any big announcement. We notice it rather in how they stay longer and have a lot they want to talk about.

## Ulrike Koch:

Simply being allowed to be there is also something existentially important at the tam – Interkulturelles Familienzentrum. The kids can play. There's tea or coffee, and you don't have to do anything. Places are needed where people feel alright and where it's possible to meet another nice family or have a chat.

# Mary Buteyn:

In the WillkommensGemeinde in der St. Lukas Kirche we make sure we have a lot of time for one another and create a space where we meet each other personally. We are less interested in a programme and focus on relationships instead.

# Veit Hannemann:

The retired persons in the Mehrgenerationenhaus Gneisenaustraße know exactly when it's time for their round of cards and afternoon coffee. That's always on. But that doesn't mean that we always have to offer something else as well. That's just another obligation to do some activity.

# Kerstin Kühn:

Presence is also important to create this atmosphere; the internet simply isn't enough. In the WillkommensGemeinde

in der St. Lukas Kirche, we consciously try to start up conversations with people.

# Lea Hartung:

But to create these social places is often not enough for the supporting authorities because they can't appreciate the value of that.

# Diana Mammana:

I'm just thinking about reliability. About places where one can simply turn up and you know: something will be going on, even if I'm not there.

# Tim Ünsal:

There's nothing worse than going somewhere and there's no one interested in you being there. You don't go back, ever.

# Veit Hannemann:

At times it can also be frustrating when you're trying to repair a society that has stopped learning what community is all about.

#### Mandu dos Santos Pinto

Already while studying architecture, I found it interesting but also controversial that people who were to later live in the buildings you designed were never asked anything. It was never about these people. And you're building structures for a hundred years and they will leave their mark on these people. In this context I've explored in particular the qualities of informal, self-built quarters in cities. Many people claim that it's chaos. That's not true. People are very conscious about what they build and while building they reflect on their way of life. This way of life enables a great many social spaces which are important, precisely with respect to mental health, because that's where people can be picked up as they are and looked after.

There's naturally ancient wisdom about this, but meanwhile also studies: people who have a mental illness should surround themselves with at least six to ten people who are continuously interacting with them, time and time again, so that there is a chance to recover without medication. But today people are living, particularly in Europe, more and more in a single flat on their own. Perhaps someone calls in on them once, twice a week, often enough a health carer. But a person can't get rid of their problems without interacting with others.

The structures in the informal quarters absorb this kind of problem or don't even let it arise in the first place. That's what struck me in my analysis of these quarters. In Luanda, Angola, these districts are called *Musekes*, place of the red earth, because they are not tarred. The name itself indicates a connection to the earth, to nature. The inner courtyards not only have the quality of social spaces – it's often the case that several families live in the houses adjacent to one another around a shared courtyard. Here it's possible to keep small livestock, to plant vegetables, and these yards are also safe places for children to play. These quarters thus have many economic, social and interactive qualities.

I can remember very clearly the time I was in Senegal, in the mid-1990s. I told people that in Switzerland or Germany it's possible that someone can die in their flat and the death is first noticed a month later because there's a stink. People thought I was making it up; they simply couldn't imagine it. When someone doesn't leave their flat, then someone else knocks on the door. People watch out for one another and notice when something's not right. Behaviour like this is naturally motivated by a crucial question: how can people live together? Meanwhile there are cases like this in Senegal as well. That means, a way of life and living, heavily influenced by the West, has been adopted – one that's by no means healthy.



#### Mazda Adli

What's most likely to strain us psychologically in the city, and becomes relevant for our health, is social stress. This stress can arise out of living and interacting with people. Amongst the social stress typical in cities is density stress when there is a lack of personal space to retreat to, and isolation stress that burdens us if we experience social exclusion or loneliness. The mixture can be toxic when social density and social isolation affect you simultaneously, in particular if the individual has the feeling that they are unable to influence their surrounding context in a way that fits their needs, or indeed not to have any control at all. When we feel that we're permanently exposed to social stress, then it can impact on our health and lead to stress-related illnesses.

But it's also correct to mention the other side: large cities like Berlin contribute positively to our wellbeing. And that's why cities are growing. Large cities have more advantages than disadvantages, provided of course one has good access to the advantages: to education and personal development, to the prosperity of a growing city, to health care services, to cultural diversity. This advantage and all that a city offers are not equitably shared, however, and are not accessible equally to all. People who have poor access to what is called the urban advantage are often those without the resources to counter social stress and who more frequently suffer from the impacts of stress. The barriers blocking access to urban advantage include poverty, lanquage barriers, discrimination or belonging to a marginalised minority. In sum, these barriers mean that the risk of mental ill-health grows.

Like other big cities, Berlin causes social stress. But Berlin also has a lot that protects us from social stress.

It offers numerous factors capable of protecting health. Berlin has plenty of green spaces, for example. We know that urban green is good for our brain and our emotional state. Green spaces keep down the level of stress hormones in our blood; they help us to relax and find a bit of peace. When we're frequently in contact with nature, our brain cells react differently to stress. Also, Berlin is a city where a great portion of public life takes place in the open; it really is an outdoor city. Berlin thus offers opportunities for lots of social interaction between people, which is good for the mind. Spending time outside on your doorstep directly counteracts social isolation, that is, social stress.

One observation we made, however, is that public space-that is, space not commercially used-is diminishing in Berlin. These are spaces crucial for public health, especially our mental health. These spaces bring people together; they promote social cohesion and thus counteract social stress. My worry is that the disappearance of social space will have a negative influence on the mental wellbeing of Berliners in the long term.



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Anna Yeboah, Magnus Elias Rosengarten, Mazda Adli, Shermin Langhoff

### Mazda Adli:

I'm convinced that every theatre, every museum, every cultural centre has a public health mission and thus has an important role to play in our mental health. Whether one wants it to be like that or not, it's simply a fact. They are places which animate people to come together. They are places where people meet and interact. Much like a preventive measure, they can actively counter one of the main stressors in urban society, namely social isolation and loneliness.

I'd like to especially emphasise this after we have discussed, time and time again during the pandemic, which structures are essential for survival, and which are relevant to the system. If we're missing cultural institutions, then our risk of social isolation increases, and it becomes more likely that our health suffers. When cultural institutions are open, then people feel better. This shouldn't be drowned out in the discussion. Cultural institutions are system-relevant.

# Magnus Elias Rosengarten:

I think that museums can be and should be places where people come together. Obviously the question always is who the addressees of curatorial work are. Particularly in Berlin's museum landscape, we still have a lot to do because so many people and communities don't feel welcome.

#### Shermin Langhoff:

To start with, I'm absolutely delighted that the next generation is working scientifically on the questions I and other migrantised people raised over two decades ago. It's fantastic that these demands have finally arrived in the middle of society, in the high culture and subsidised houses. I can also embrace this for myself as director of the Maxim Gorki Theater: we are meeting places, places where togethering is possible, where we can gather and collect ourselves. Beyond whom we are addressing, I'm also interested in what we narrate in these places and how we do it.

This is for me a question with much broader and far-reaching implications, impacting on the whole system, not least because it is being posed in a neoliberal context. Over the last three decades the system has become geared towards competition, individualising, towards quicker, greater, higher, towards who's the best. In no sense at all anything to do with solidarity, with care. A key word here for me is loneliness. Loneliness, from the political perspective of Hannah Arendt, also describes abandonment. The dynamics of polarisation mean that people don't feel as if they belong anymore; they feel shunned, outcast. As a cultural institution we can pick up these themes, and indeed also the broader political contexts, but we can't stage a revolution alone.

### Anna Yeboah:

I really wish that cultural institutions would include the public health mission in their self-understanding. Speaking from the perspective of the Black community, I'd say that a museum is anything but a place conducive to mental health. For example, if I went with my younger siblings to the German Museum of Technology or the Humboldt Forum, then we'd have a crisis talk afterwards because they'd be feeling really bad. When considered from my position, the promise of public mental health in cultural institutions is not being kept forthrightly.

#### Mazda Adli:

I think what you've just said is incredibly important. What our cultural institutions are providing is not there for all of us in equal measure, nor is it accessible. This is especially tragic when, of all places, you experience social exclusion at the portals of a cultural institution. Cultural institutions are one of the resources protecting health. If we agree on this, then we can discuss how culture is to be made available and for whom, and who's left out. These are by no means easy questions for which there are quick fixes. We have to develop the paths of access to cultural institutions. If they have such a positive effect on our minds and emotions, then access to them must be open to as many people as possible.

# Anna Yeboah:

One of the first measures is, naturally, to offer culture free of charge, to throw open the doors, and to then see what doesn't work. But that alone is not enough. At the *Dekoloniale – Memory Culture in the City* programme we have a lot to do with many museums, and their way of acting and behaving is at times hurtful and has become stuck in its beginnings. I then call for the decks to be cleared internally before people are invited in who will only end up traumatised.

### Magnus Elias Rosengarten:

If we decide that museums are places where people can look after their mental health and where we can come together, then it is essential to ask: who defines the spaces in reality and who determines the contents? Who works here? Who makes the curatorial decisions, who organises exhibitions, which artists are invited? What kind of understanding of culture do we stand for? We thus inevitably move towards aesthetic questions as well, questions which are elementary if we want to create places where diverse communities can gather. In Germany, White people from the upper-middle-class often work here; they've studied art history, and represent a very specific way of appreciating art and what makes up the canon. The UK and the USA are at least a century ahead of us in this respect. That's the heart of the problem, I think. There are examples in Berlin which go against the grain, in particular the diverse forms of cooperation throughout a whole neighbourhood. When I arrived in Berlin fifteen years ago, the Ballhaus Naunynstraße – a theatre and meeting space – was such a place for me, one where I could see myself mirrored, where my stories are told, where people work and perform who look like me. That has had an ongoing resonance.

## Shermin Langhoff:

But the Ballhaus project is basically accidental; it's not really the result of an explicit policy. It's fully correct to expect that the existing cultural institutions with the resources should share these across society and make them available to the general public – not keep them within a bubble, the preserve of a single participating clientele. The proposals put forward here are exactly what's needed in this context. But we must also be awake to what is happening concretely in Berlin.

From the 1970s and 1980s, neighbourhood centres and other sociocultural bodies represented the approach of culture for everyone. When you consider the youth centre Naunynritze and its history, a lot of very diverse neighbourhood work was done by cooperating with the Ballhaus and other neighbouring institutions. Two generations of youths from so-called migrantised families have had the opportunity to produce music, dance and culture, and a few of them have gone on to become stars. There was a possibility to absorb, to hear and to do stuff that was potentially richer than just kicking a football about in the backstreets.

But it's precisely these kinds of opportunities which have been dismantled since the 1990s and 2000s. Cultural institutions cannot compensate for what the political distribution of resources has failed to do. They cannot redress the shortfall from existing budgets, which have in any case shrunk dramatically. It's important to make demands of cultural institutions. And then working together with these institutions, direct those demands to the political powers of a city, to complain to them that support has been massively slashed in the last two decades.

We really are lagging behind in Germany. We can't draw on the groundwork already done in the US or Britain with respect to their history of postcolonial critique, practice and demands. It's only two decades ago that I was laughed at when I said that something has to change, and that this way of looking at people, tainted by racism and non-participation, has to stop. It's absolute madness that we're talking about institutions which with public funds can still continue to exist in this dialectic we're entangled in. Democratic progress moves way too slowly in our country – that's obvious when you look at the parliaments, at the media, at the cultural institutions, in fact everywhere. In Germany it is by no means a given that urban society is reflected in all the institutions across all the different levels of the city. Something that should be a given simply doesn't happen.

We're in a pitiful state and healing is necessary. Currently we're subject to political backlashes. The processes of healing, care and repair which have taken place are being reversed, discredited as sinister attacks by people plying political correctness. Not a word about democracy, about participation, about what needs to be accepted as a matter of course. That is to say: it's not about identity politics. It's about democratic politics and a perception that we are diverse and we are many. And to create as broad a spectrum of culture as possible for this diversity. It really is that simple.



### **Bitsy Knox**

No silence is alone. Each silence is two. One is expressible, lends itself to speech, and the other is ineffable. That is what Ibn Arabi described as the two silences: "The silence of the tongue and the silence of the heart. Only the former can be formulated, and whether you keep silent or make an utterance, you speak." And yet "between utterance and silence", between articulation and its antithesis, al-Nifarri said, "there's a liminal zone wherein lies the mind's grave and the graves of things". This is the threshold that propels our silences toward their corporeal conditions.

Fady Joudah, "The Silence That Remains: On Translating the Poems of Ghassan Zaqtan", *Los Angeles Review of Books*, 15 August 2017

When you are very small, the people who take care of you say things like, "No more sugar before dinner, you'll ruin your appetite", and, "it's late, isn't it time for bed?" Their prompts gradually become yours, moving inside of you, into your control. You learn to self-regulate by sending and receiving messages to yourself from within the confines of your own body-mind. Your language becomes private, covert, silent to everyone but you. It condenses then, becomes mumbled and subsentential, a shorthand, often called "inner speech" (as coined by Leo Vygotsky, in his 1934 theory of child development), but there are other names. With it, you may learn to hear your own thoughts, transforming abstract mental processes into syntactic expressions. You may learn to tell yourself what you need. You may learn to keep knowledge to yourself. You may learn to rehearse what you say before you say it, to commit details to your working memory (see

the "Phonological Loop", Baddeley and Hitch 1974, guoted in Ben Alderson-Day & Fernyhough 2015). You may learn to tell yourself who you are (at the University of Palermo RoboticsLab in 2021, Pepper the robot passed the mirror test - which assesses self-awareness - while engaged in the following inner dialogue: "There are a robot, a mirror, an apple." "What properties has the mirror?" "It reflects images but not itself!" "There could be an apple and a robot in the mirror." "There are not other robots here." "The robot in the mirror, it's me." [Pipitone and Chella 2021]). You may learn to say many things at once. You may find that there are many voices speaking your language: the reporter, flatly reciting that the world's glaciers are melting; the bookkeeper, noting your pastry consumption in accordance with inflation; the cynic, reminding you why things don't work out for you; the prince, writing sonnets to luxury; the radio, crooning three lines of that song, that song, that song; the editor, asking, "but is that true?"; the slob, who doesn't want to cook, wants to order pizza instead. You may feel that your body is a dense and noisy place, like a visa office, bad acoustics, everyone needs something. You may take up meditation, learn to hear the voices approach, hear them as they grow louder, hear them as they pass, nod to them, is that right? Yes. You may learn to hear the beginning, middle and end of your breath. You may find yourself wandering with your voices and your breath, stopping on occasion to listen, crouching low in observation. Together, you may find yourselves in diffuse conversations, sparking plans, enacting them beautifully.

Unvoiced and overtly quiet, these nascent words conjunct close to the surface of utterance, held by the mechanics of formulation: muscle and air. Beneath them, a milky primordial depth, and the silent language of electricity.

Touch

Pipitone, Arianna and Antonio Chella 2021: Robot passes the mirror test by inner speech, Robotics and Autonomous Systems, vol. 144. Alderson-Day, Ben and Charles Fernyhough 2015: Inner Speech: Development, Cognitive Functions, Phenomenology, and Neurobiology, Psychological Bulletin 141 (5), pp. 931–965.

#### Katrin Dinges

How we approach and deal with touching says a lot about us as a society. Socially, during the pandemic it was said: as little touching as possible. Only first during the pandemic did I even notice how important touches are for me. I asked myself: how are the touches which are there impacting on my health? And I realised that the touches which come from the heart are crucial for my sheer survival. Fundamental to surviving, literally. I've had a few life-threatening situations in my life, ones where my life hung by a thread. The connection between me and life held by the thread was finer than a strand of hair, it could've very easily torn. If I hadn't had these essential touches, I wouldn't have survived. I suffered from the utter lack of touches during the pandemic.

That was the reason why I began to delve more deeply into touching. Since the pandemic there is far less meeting of people personally. I've cut back a lot. Actually, I'm a sociable person, but also belong to five or six risk groups. I thought: if I'm feeling like this, then what about people who don't have a well-functioning social network, who don't have any assistance, who experience social exclusions? And what about people who aren't even aware of how important touches are, and therefore don't do anything to make sure that they're in a healthy environment or make use of techniques enabling or reinforcing your own touching? The indirect consequences of the pandemic are thus much worse. This fear of being touched, which we don't speak about, and which far too few people take into consideration.

Touching affects us all, across all cultures, languages and other boundaries, from the very first development stage until death. When we call to mind that we can already feel and perceive physically at the embryonic age of just eight weeks, although we don't even yet look like a human being – that's fascinating. How early it begins. The auditive sense develops much later, the sense of sight first when we're born. When the haptic faculty is in good order at the beginning of life, and is experienced as harmonious and positive, then you can become a fully-fledged member of society. You actually don't need the other senses. People who are blind or deaf from birth get along somehow. The sense of touch is the only sense that can never be missing completely and never completely destroyed. Unless you die.

The big question is: how can touches be intensified? For all of us, but above all for those who feel lonely. I believe that the gravest shortcoming of our society is that we become isolated. Someone who feels alone has for the most part a glaring lack of touches. Loneliness is the lack of every kind of relationship, including to oneself. When I'm good to myself and feeling good about myself, then all is good with others. Anyone who can feel good about themselves when alone rarely feels lonely.

Touching is so simple and yet of such great importance. For every single person and for the collective. I believe it's enormously important that we touch inwardly and outwardly and let ourselves be touched. That we let it happen. It requires courage to come that close to one another. Even to a complete stranger. I think it's really important to be open and outgoing about it. For me, that's the most beautiful form of love there can be. Diana Mammana, Lea Hartung, Margareta von Oswald, Maryna Markova, Murat Dogan, Remzi Uyguner, Ulrike Koch, Veit Hannemann, Željko Ristič

#### Ulrike Koch:

My work revolves around aligning application to reality. An idea has to be fitted into a form. There's a need to be creative in the formal framework. We call it report prose. Certain words have to be used. Especially severe are the administrative phases at the beginning and the end of a year. You have to reinvent your work and the projects. Every single year.

### Diana Mammana:

We often work with people who don't know how the structures of an institution function. They've never written an invoice in their life. I'm only too glad to send them a prototype and explain how to go about invoicing. I think that's legitimate, otherwise many collaborations wouldn't be possible.

# Remzi Uyguner:

We have different projects and at the same time do political work. The time spent doing political work is unpaid. As a migrant organisation we want to be heard and have a say in our area. We want to ensure that we can transfer our valuable experiences in the project area to the political sphere and use them there.

### Veit Hannemann:

Although I'm not an activist, as a social worker in community work, I am politically involved. When I want to help people in society, then I do, even if it isn't set out in a service contract. Also, the term "emotional work" just occurred to me. In my view, far too little attention is given to this aspect amongst social workers. In conversations with individuals, you're often confronted with emotions. But if I feel genuine compassion, then I step into a risk zone. In moments like these I have to playact. I need to do this professional acting to protect myself and that's what is known as emotional work. I somehow have to relate to my feelings in a skilled way. And that's why it's all the more necessary for me to have an opportunity to process these emotions for myself. The key word here is supervision.

# Remzi Uyguner:

In my work at the housing section of the Antidiskriminierungsnetzwerk Berlin (ADNB) at TBB, I often have to take a risk when dealing with laws. Let's say a person comes to me seeking advice and I tell them that there isn't a flat available, and the person goes away – even though it is clear that an experience of discrimination could be proven before a court. I therefore try to explain that there'd be a chance to get a flat if I exert some pressure. Concretely, this means that we'd go public with the case. Sometimes a flat then becomes available for the person after all.

#### Maryna Markov:

I ask myself how in my capacity as head of parental and family education at the Kurdish parents' association Yekmal e.V. I can create spaces which match my interests and passions. I've come to realise that coordinating activities take up almost all my time. Everything that interests me just vanishes.

#### Margareta von Oswald:

For me, to play a trick also means to make things appear real which are quite possibly not real. I mean, magic can

be whatever changes a situation and thus enables you to do your work differently. In my work as a researcher at the university, it's quite often about dismantling hierarchies. Between different forms of knowledge, between disciplines, within the university, between different professional positions. How do you get everyone into one room and speaking with one another without necessarily being aware of their respective positions? I've found that this works pretty well online. This offers a possibility to sit down together virtually and talk to one another in small groups. And then, it isn't always the professors who do all the talking.

# Željko Ristič:

It's interesting what you've just said about rhetorical tricks, Margareta. We also set up illusory worlds sometimes. With the youths we formulate a vision and we work towards it together. That's a ruse to induce them to muster the energy to realise their potential. They learn to keep specific rules and how to believe in a goal. And if they develop a real enthusiasm for the social domain, for example, then that's a real bonus for society. The one thing they can't afford is to be paralysed by a fear of failure. That's always the problem.

# Murat Dogan:

We also play tricks with words. Our society is obsessed with must: you must go to school, you must be there, you must perform, you must work. When they're with us, the youths mustn't do a thing, nothing at all. The only must is that they develop their own ideas, find their own thing, and then say: "Hey, I'd like to try that out." They decide how they'll spend the imposed hours of community service, not us. We try to see the abilities a person has and not demand what society usually wants. Then real relationships are formed, and that's worth its weight in gold these days. Many of the youths don't have good relationships with their parents or teachers. But there's a great longing for relationships and a need to be connected with other people.

# Lea Hartung:

Murat, I've just mulled over that as well. Weakness is not a shortcoming. We all have some weaknesses somewhere. That's not just a problem facing marginalised groups.

### Niloufar Tajeri

I have a very ambivalent relationship to the concept of future. For me, the concept serves as the foundation for the idea of growth peddled in the capitalist narrative of a society irreversibly driven forward by progress. I see speculative thinking-into-the-future as something that drives us to be reductionist and to push complexities to the side. In fact, we need to focus our attention far more on the present, to look at it more closely. Here I am referring specifically to Boaventura de Sousa Santos' concept of the *expanded present* and the *compressed future*.

Much of what appears utopian is emerging in the present. The categories and the logics of planning with which we act in the present are very reductive. We have to find strategies, and indeed also words, to understand our present, to expand it, to complicate it. We actually have to consider each and every situation very precisely: what can be done and how, and above all, what's already been done and how? And in doing so, build on the existing and not push things to the side in order to work the future in a specific direction. I think in fact that all solutions already exist. These solutions have also been already tested out and already thought and put into practice, in microcosm. We have to concentrate much more on these things and reflect on their scalability. I think that the referendum on the Tempelhofer Feld is such a concrete utopia that points to the future. Actually, it should have been replicated everywhere and suitably scaled. Or the example of Habersaathstraße, where a vacant residential building was made usable for homeless persons by activists. This utopia must be supported. Instead, the Green Party's head of building planning has just signed the demolition order.

Utopia

These are the basis for corrective adjustments. We observe things where we could say: there's already a utopia here, we have concrete, future-oriented, sustainable, socially just actions here. These deserve to be reinforced, but today they are being destroyed. We have to give far more attention to this present, for it is in the present that utopia lies hidden.



Alina Georgescu is a queer, non-binary/fluid person of colour, trained boatbuilder, educationalist, Reiki energy therapist and since 2018 councillor at the Antidiskriminierungsnetzwerk des Türkischen Bund in Berlin-Brandenburg (TBB).

Andreas Heinz is professor of psychiatry and director of the Department for Psychiatry and Psychotherapy at the Charité – Universitätsmedizin Berlin, Campus Mitte.

Anna Yeboah is the coordinator of the Berlin project *Dekoloniale – Memory Culture in the City.* 

Beatrice von Bismarck is a German art historian, curator and publicist. She is professor of art history and visual studies at the Hochschule für Grafik und Buchkunst – Academy of Fine Arts Leipzig.

Bitsy Knox lives and works as an artist, poet and radio maker in Berlin. Her show *Something Like* has been broadcast since 2019 on Cashmere Radio and 96.5 CHFR Hornby Island Community Radio in British Columbia, Canada.

Carl Luis Lange studies musicology and European ethnology at the Humboldt-Universität zu Berlin. He created the radio show *Intimate Connections* as part of *Mindscapes* and provided technological guidance for the seminar *Repair*, *Fractures*, *Divisions: The Histories and Presents of the Gropius Bau.* 

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Carolin Ochs is a social worker who since 2015 has advised people without health insurance how to gain access to the German health system, currently at the clearance office for non-insured persons.

Christine Wong Yap is an artist who explores the aesthetic potential of social relationships in her work. She involves communities in processes of participative research to study the various dimensions of psychological wellbeing, for example resilience and belonging.

Danielle Olsen is Cultural Partnerships Lead at Wellcome. She is a producer, curator, filmmaker and writer.

Deiara Kouto is a designer and researcher. In her research she examines the production of history and design cultures in West African and European contexts. She is currently working as an outreach assistant at the Gropius Bau.

Diana Mammana is a cultural scientist and curator.

Dilay Dagdelen is the director at the family centre of the Kurdish parents' association Yekmal e.V. in Berlin-Kreuzberg.

Edna Bonhomme works as a historian of science and a freelance author in Berlin. In her culture journalism she analyses how humans variously deal with science, epidemics, culture, race and gender. Felicia Boma Lazaridou is a psychologist, doctoral candidate at the Charité – Universitätsmedizin Berlin and research assistant in the National Discrimination and Racism Monitor (NaDiRa) at the Deutsches Zentrum für Integrations- und Migrationsforschung.

The Feminist Health Care Research Group (FGRG) is an artistic research project that since 2015 has developed exhibitions and workshops as well as published pamphlets. Their practice aims to reveal self-empowering perspectives on health care. At present, the FGRG is made up of Julia Bonn, artist, bodyworker and mother, and Inga Zimprich, artist, assistant in the field of multisensory impairment and mother.

Franziska Lentes worked, as part of *Mindscapes*, with the visual research unit on mental health in Berlin together with Jan Stöckel, Margareta von Oswald and Nassim Mehran.

Gülcan Nitsch is the founder and director of the nonprofit association Yeşil Çember (green circle), an organisation engaged in barrier-free environmental education accessible for all people in Germany.

hn. Iyonga works as a queer BPoC curator and author at the intersection of postcolonial literature and critical race theory. His interest is focused on anti-Black racism, language in Black speculative fiction and the fixation of land as infrastructure.

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Jan Stöckel is a maker of documentary films and anthropologist. As part of *Mindscapes*, he worked on the visual research into the topic of mental health in Berlin together with Franziska Lentes, Margareta von Oswald and Nassim Mehran.

Kader Attia is an artist and curator whose longstanding research interest and artistic practice revolves around the idea of repair.

Katrin Dinges is an artist, art and culture mediator and lyric poet.

Kerstin Kühn is a voluntary assistant at the WillkommensGemeinde in der St. Lukas Kirche in Berlin.

Kim Wichera is an artist living in Berlin who also works in the Weglaufhaus, an anti-psychiatric facility.

Kirsten Schubert is a general practitioner who cofounded the Geko Stadtteil-Gesundheits-Zentrum in Berlin-Neukölln where she also works.

Lea Hartung works in the Zentral- und Landesbibliothek Berlin. She is responsible for outreach and community projects at the Kreuzberg location.

Lee Modupeh Anansi Freeman is a Black, transcontinental, transgender, multidisciplinary artist living in Berlin, as well as a creative event producer and community organiser. Lee breaks chains and is a storyteller, somatic healer and educator. At times Lee is a good witch, at others a bad bxtch. Magnus Elias Rosengarten works mainly as an author and curator in the areas of performance, discourse and film/video, most recently for the Gropius Bau in Berlin. He has written and produced for *Contemporary And (C&), Artforum*, the Berlin Biennale and *arte/ZDF*. He has also presented works at the Kraine Theater, New York City (2016), the California African American Museum, Los Angeles (2018) and the Ballhaus Naunynstraße, Berlin (2023).

Mandu dos Santos Pinto is an activist, artist, architect and urban planner who focuses his work on developing sustainable solutions for cities in the Global South.

Margareta von Oswald is an anthropologist and curator.

Mary Buteyn is pastor at the WillkommensGemeinde in der St. Lukas Kirche in Berlin. New arrivals and migrants from different cultures and nations meet here.

Maryna Markova is head of parental and family education at the Kurdish parents' association Yekmal e.V. in Berlin-Kreuzberg.

Mazda Adli is a psychiatrist and stress researcher, head of the Fliedner Klinik Berlin and director of the mood disorders research group at the Department for Psychiatry and Psychotherapy of the Charité – Universitätsmedizin Berlin, Campus Mitte.

Michael Bosnjak is research director and head of Epidemiology and Health Monitoring Department at the Robert Koch Institute in Berlin and professor for psychological research methods at the Universität Trier.

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Murat Dogan works at outreach.berlin – Mobile und sozialraumorientierte Jugendarbeit – area 1. He was born and grew up in that neighbourhood and has lived there for twenty-six years. He moves a street further on every ten years.

Michael Westrich is a cultural anthropologist who works at the intersection of urban practice, artistic-film research and urban development.

Nassim Mehran is an urban sociologist and architect. As part of *Mindscapes*, she worked on the visual research into mental health in Berlin together with Franziska Lentes, Jan Stöckel and Margareta von Oswald.

Nikolas Brummer is an artist and curator living in Berlin. He is the cofounder of PlusX, a project space involved in performance, text and sound. PlusX has existed since 2017, also as a radio show on Cashmere Radio.

Niloufar Tajeri is an architect, activist and theorist of architecture. She is cofounder of the urban political group Initiative Hermannplatz.

Norma Kusserow is the psychiatry officer at the Berlin Senatsverwaltung für Wissenschaft, Gesundheit, Pflege und Gleichstellung.

Pasquale Virginie Rotter is a somatic coach, author, trainer and process facilitator for empowerment, as well as a lecture performer and gardener. Remzi Uyguner is a board member at the Türkischer Bund in Berlin-Brandenburg, a civil society umbrella organisation founded by migrants of Turkish background thirty years ago. One focal point is antidiscrimination work.

Shermin Langhoff is theatre director and artistic director at the Maxim Gorki Theater.

Stephanie Rosenthal is an art historian and curator. She was director of the Gropius Bau in Berlin from 2018 to 2022.

Susanne Da-Costa-Badu works at the Wassertor e.V., a neighbourhood centre in Berlin-Kreuzberg. She is responsible for the creative and garden areas.

Tim Ünsal works in the Mehrgenerationenhaus Gneisenaustraße, a multigenerational neighbourhood centre in Berlin-Kreuzberg. He is involved in all areas of social work there.

Tzoa is a gender non-conform trans Person of Colour who celebrates tofu masculinity, a practitioner of traditional Chinese and Daoist medicine and a founding member of Casa Kuà.

Ulrike Hamann is the managing director of the Berliner Mieterverein, Berlin's central tenants' association. The trained metal fabricator and political scientist cofounded the tenants' initiative Kotti & Co and helped organise the Berlin rent referendum.

Ulrike Kluge is professor of psychological and medical integration and migrant research at the Charité – Universitätsmedizin Berlin and director of the migration and health section at the Berliner Institut für Integrations- und Migrationsforschung.

Ulrike Koch is director of the intercultural family centre tam in Berlin-Kreuzberg.

Veit Hannemann was long active in community work and currently works for the city district coordination at the Nachbarschaftshaus Urbanstraße, a neighbourhood centre in Berlin-Kreuzberg. His main task is to network between local initiatives and social organisations on all levels.

Željko Ristič works as a social worker with outreach.berlin – Mobile und sozialraumorientierte Jugendarbeit – area 1, and was himself with outreach. berlin in Berlin-Moabit as a youth.

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What Can We Do Together That We Couldn't Do Alone? was written by Danielle Olsen, assisted by Margareta von Oswald, Pauline Meyer and Richard Hartlaub.

*The Museum as a Living Organism* was developed from a conversation between Margareta von Oswald, Diana Mammana and Stephanie Rosenthal held on 27 February 2023.

Stretching, Disturbing, Expanding the Museum is based on a conversation between Margareta von Oswald, Diana Mammana and Beatrice von Bismarck held on 3 November 2022.

*after the song* is based on a script for the video performance *what comes after the song?* (2021) by Nikolas Brummer, who produced the segment *raw audio* as part of the *Intimate Connections* radio show.

*The Intervening Mind* by Bitsy Knox describes the conceptual framework of her programme of the same name that is part of the *Intimate Connections* radio show.

*Being Moved* is a text written by Priya Basil, *Mindscapes* Writer in Residence.

*Belonging* is a text by Christine Wong Yap, *Mindscapes* International Artist in Residence. The entry System Relevance is compiled from contributions to the panel discussion Claims for a Neighbourhood Policy. Berlin Conversations on Mental Health with Anna Yeboah, Magnus Elias Rosengarten, Mazda Adli and Shermin Langhoff, moderated by Aida Baghernejad, held on 15 October 2022 in the Gropius Bau. Editing: Margareta von Oswald

The entries Approach, At Work, Simply There, Leisure, Perfectionism, Optimisation and Trickery are compiled from the conversations on mental health in Kreuzberg. Editing: Diana Mammana and Margareta von Oswald. Assisted by: Lea Hartung and Deiara Kouto

The entries *Relations*, *Common Ground* and *Access* are compiled from conversations held as part of the garden project and the conversations on mental health in Kreuzberg. Editing: Diana Mammana

The entries Touch, Movement, Discriminations, Present, Legislation, Contact, Norms, Spaces, For Each Other, Stress, Assistance, Utopia and Care are compiled from the film research on mental health in Berlin. Editing: Margareta von Oswald and Nassim Mehran

Paul Bowman translated all entries except after the song, Being Moved, Belonging, The Intervening Mind and What Can We Do Together That We Couldn't Do Alone?

# AfD:

The Alternative for Germany (AfD) is a right-wing populist political party in Germany.

# Amerika-Gedenkbibliothek:

The Amerika-Gedenkbibliothek is a public library located in Berlin-Kreuzberg. It is part of the Zentral- und Landesbibliothek Berlin.

Antidiskriminierungsnetzwerk (ADNB) at TBB: The Anti-Discrimination Network Berlin is a project of the Turkish Union in Berlin-Brandenburg e.V. (TBB) and was founded in 2003. The ADNB of the TBB is funded by the Landesstelle für Gleichbehandlung-gegen Diskriminierung (LADS) within the framework of the programme against right-wing extremism, racism and anti-Semitism of the Senate of Berlin.

# Berlin Museum:

The Berlin Museum was a museum of urban and cultural history in Berlin. It existed from 1962 to 1995 and was located in the Kollegienhaus, Lindenstraße 14, in Berlin-Kreuzberg.

## **Berliner Festspiele:**

The Berliner Festspiele, founded in 1951, is a multidisciplinary cultural institution that realises and presents festivals, exhibitions and other event formats in the Haus der Berliner Festspiele, the Gropius Bau and many other Berlin venues.

# Bauhütte:

The Bauhütte hosts numerous NGOs, initiatives and associations, coordinates and curates their activities and serves as a performance venue for its own or guest discourse series, cultural productions and participatory formats with a migration and urban policy orientation.

# Hanau:

The Hanau shootings occurred on 19 February 2020. A far-right extremist killed ten people and himself in the city of Hanau. The massacre is considered an act of terrorism by German state officials.

# Heilehaus e.V.:

The Heilehaus project was created in 1981 and since then has endeavoured to offer various services to heal the body and mind through natural methods, particularly for socially disadvantaged people. It is located in Berlin-Kreuzberg.

# Humboldt Forum:

The Humboldt Forum describes itself as "a place for culture and science, for exchange in debate". It is located in Berlin-Mitte, and hosts exhibition of four institutions: the Stiftung Preußischer Kulturbesitz with the Ethnologisches Museum and the Museum für Asiatische Kunst der Staatlichen Museen zu Berlin, the Stadtmuseum Berlin together with Kulturprojekte Berlin, the Humboldt-Universität zu Berlin and the Stiftung Humboldt Forum im Berliner Schloss. The building reconstructs large parts of the facades of the historical Berlin Palace, which was demolished in 1950.

#### Karstadt:

Karstadt Warenhaus GmbH, based in Essen, was a German department store franchise.

# Kunstgewerbeschule:

The School of Applied Arts and Crafts was an arts and craft teaching institution that began operating in Berlin-Charlottenburg in 1899. After several changes of location, realignments and rebrandings, the school was incorporated into the Hochschule für Bildende Künste (now Universität der Künste Berlin) in 1971.

# Kolonie am Flughafen:

The Kolonie am Flughafen is an allotment garden in Berlin-Tempelhof.

## Mehrgenerationenhaus Gneisenaustraße:

The Mehrgenerationenhaus Gneisenaustraße serves as a neighbourhood meeting point where people of all generations and cultures come together.

# Nachbarschaftsgarten Kreuzberg:

Since March 2019, the project has been developing a neighbourhood garden in the Kolonie am Flughafen e.V. with refugees, mainly from Syria and Afghanistan, and older people from Berlin-Kreuzberg.

#### outreach.berlin:

outreach.berlin works with the concept of mobile and socio-spatially oriented youth work. The project exists in eleven Berlin districts with very different approaches.

### Referendum Tempelhofer Feld:

The Tempelhofer Feld is a former airfield that was opened to the public for recreational and leisure use in 2010. In a referendum held in 2014, the people of Berlin voted against peripheral development and in favour of preserving Tempelhofer Feld in its current state for the most part.

#### tam – Interkulturelles Familienzentrum:

The intercultural family centre tam is part of the Diakonisches Werk Berlin Stadtmitte e.V. It offers a wide range of opportunities for learning together, for counselling and for supporting families. The Diakonisches Werk is an institution of the Protestant church which takes care of people holistically in different emergency situations and promotes social services in society.

#### Türkischer Bund in Berlin Brandenburg:

The Turkish Union in Berlin-Brandenburg (TBB) is a non-party, non-denominational, democratic umbrella organisation of both individuals and organisations from Berlin and Brandenburg. As a migrant organisation of primarily people of Turkish origin, the TBB works together with administrative institutions and other organisations for the legal, social and political equality and treatment of people with a migration background. Völkerkundemuseum:

The museum was founded in 1873 as the Königliches Museum für Völkerkunde. In 1886, the museum opened at Königgrätzer Straße 120 (today: Stresemannstraße) on the corner of Prinz-Albrecht-Straße (today: Niederkirchnerstraße) in Berlin-Kreuzberg. The building was partly destroyed during the Second World War and demolished in 1961. Referred to today as the Ethnologisches Museum, the collections are housed in Dahlem, and the museum's exhibitions are presented in the recently opened Humboldt Forum.

WillkommensGemeinde in der St. Lukas Kirche: WillkommensGemeinde in der St. Lukas Kirche is a project of the Berliner Stadtmission e.V. New arrivals and migrants from different cultures and nations meet here.

#### Weglaufhaus:

The Weglaufhaus Villa Stöckle is an anti-psychiatric crisis centre in Berlin.

Zentral- und Landesbibliothek Berlin: With a total of over 3.5 million individual media and currently 1.5 million visitors a year, the Central and State Library Berlin is Germany's largest public library. This book is published on the occasion of the exhibition YOYI! Care, Repair, Heal at Gropius Bau Berlin, 16 September 2022 to 15 January 2023.

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